

# **Foreword**

The members of Cuyahoga County Health Partners are pleased to present the 2012 Health Assessment of our community. Data was collected from adults in Cuyahoga County, including an oversampling of African Americans. This comprehensive community health assessment is the result of a strong commitment by dedicated community partners to work together to improve the health and well-being of residents of Cuyahoga County.

This health assessment provides us with a snapshot of Cuyahoga County, as well as our state and nation. The data presented in this report will provide valuable information to develop strategies that focus on wellness, access to care, and unmet community needs. The assessment will provide additional insight in the areas of health and well-being and how they relate to our community structure.

Through collaboration with the Hospital Council of Northwest Ohio and public health researchers at The University of Toledo, every effort has been made to assure that this report contains reliable and valid data.

As we review the results of this assessment, the members of Health Cuyahoga will continue to work collaboratively to identify unmet needs in our community. It is the hope of Cuyahoga County Health Partners that this assessment will be a valuable tool to assist you in your efforts to improve the health and well-being of Cuyahoga County residents. It is also the hope that this assessment will foster new, collaborative opportunities and initiate quality programs to improve the lives of Cuyahoga County residents.

Sincerely,

Bill Ryan

President & CEO

Bin lyan

The Center for Health Affairs

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To see Cuyahoga County data compared to other counties, please visit the Hospital Council of Northwest Ohio's Data Link website at http://www.hcno.org/community/data-indicator.html.

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# Cuyahoga County Community Health Assessment

# Executive Summary

This executive summary provides an overview of health-related data for Cuyahoga County adults (19 years of age and older) who participated in a county-wide health assessment survey during 2012. 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 collected the data, guided the health assessment process and integrated sources of primary and secondary data into the final report.

# **Primary Data Collection Methods**

#### Design

This community health assessment was cross-sectional in nature and included a written survey of adults within Cuyahoga County. 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 NW 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 BRFSS. This decision was based on being able to compare local data with state and national data.

The Project Coordinator from the Hospital Council of NW Ohio conducted a series of meetings with the planning committee from Cuyahoga County. During these meetings, banks of potential survey questions from the BRFSS survey were reviewed and discussed. Based on input from the Cuyahoga County planning committee, the Project Coordinator composed a draft survey containing 115 items. The draft was reviewed and approved by health education researchers at the University of Toledo.

#### Sampling

Adults ages 19 and over living in Cuyahoga County were used as the sampling frame for the adult survey. Since U.S. Census Bureau age categories do not correspond exactly to this age parameter, the investigators calculated the population of those 18 years and over living in Cuyahoga County. There were 987,126 persons ages 18 and over living in Cuyahoga County. The investigators conducted a power analysis to determine what sample size was needed to ensure a 95% confidence level with a corresponding confidence interval 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 from all races and 384 African American adults was needed to ensure this level of confidence. The random sample of mailing addresses of adults from Cuyahoga County was obtained from American Clearinghouse in Louisville, KY.

# **Primary Data Collection Methods**

#### Procedure

Prior to mailing the survey to adults, an advance letter was mailed to 2,000 adults in Cuyahoga County. This advance letter was personalized, printed on Cuyahoga County Health Partners stationery and was signed by: Bill Ryan, President and CEO, The Center for Health Affairs; Terry Allan, Health Commissioner, Cuyahoga County Board of Health; Karen Butler, Director, Cleveland Department of Public Health; and Scott Frank, Director, Shaker Heights Health Department. The letter introduced the county health 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, a three-wave mailing procedure was implemented to maximize the survey return rate. The initial mailing included a personalized hand signed cover letter (on Cuyahoga County Health Partners stationery) describing the purpose of the study; a questionnaire printed on colored 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 them 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 35% (n=620: CI=3.93%). The response rate for the general population survey was 39% (n=354: CI=5.21%). The response rate for the African American mailing was 30% (n=266: CI= 6.01%). This return rate and sample size means that the responses in the health assessment should be representative of the entire county.

#### **Data Analysis**

Individual responses were anonymous and confidential. Only group data is available. All data were analyzed by health education researchers at the University of Toledo using SPSS 17.0. Crosstabs were used to calculate descriptive statistics for the data presented in this report. To be representative of Cuyahoga County, the adult data collected was weighted by age, gender, race, and income using 2010 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.

#### Limitations

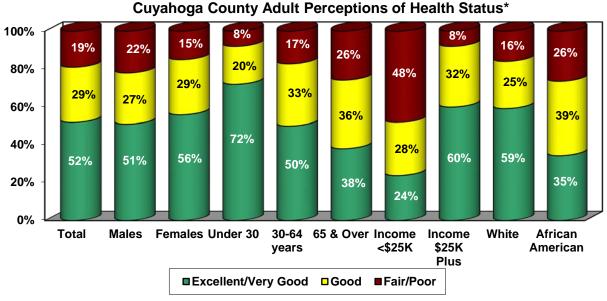
As with all county assessments, it is important to consider the findings in light of all possible limitations. First, the Cuyahoga County adult assessment had a high response rate. However, if any important differences existed between the respondents and the non-respondents regarding the questions asked, this would represent a threat to the external validity of the results (the generalizability of the results to the population of Cuyahoga 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 questionnaire, the adult data collection method differed. CDC adult data was collected using a set of questions from the total question bank and adults were asked the questions over the telephone rather than as a mail survey.

Finally, like all surveys, the self-reported results are subject to lapses in memory and to responding in a socially desirable manner. If these problems occurred it would be a threat to the internal validity of the findings.

# **Health Perceptions**

In 2012, more than half (52%) of the Cuyahoga County adults rated their health status as excellent or very good. Conversely, 19% of the adults, increasing to 48% of those with annual incomes less than \$25,000, described their health as fair or poor.

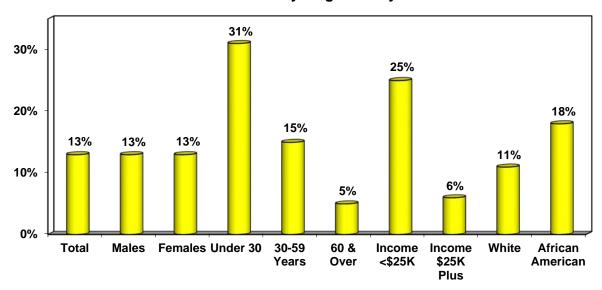


\*Respondents were asked: "Would you say that in general your health is excellent, very good, good, fair or poor?"

# Health Care Coverage

The 2012 Health Assessment data has identified that 13% of Cuyahoga County adults were without health care coverage. Those most likely to be uninsured were adults under the age of 30. In Cuyahoga County, 18.6% of residents live below the poverty level. (Source U.S. Census, American Community Survey 1 Year Estimates, 2011)

## **Uninsured Cuyahoga County Adults**



#### **Health Care Access**

The 2012 Health Assessment project identified that 5% of Cuyahoga County adults were using a hospital emergency room as their usual place of health care. More than half (57%) of adults reported that they had a particular doctor or healthcare professional they go to for routine medical care.

## Cardiovascular Health

In 2012, 6% of Cuyahoga County adults had a heart attack and 3% had a stroke at some time in their life. Nearly two-fifths (38%) of Cuyahoga County adults

have been diagnosed with high blood pressure, 38% have high blood cholesterol, 24% were obese, and 19% were smokers, four known risk factors for heart disease and stroke.

## Cancer

In 2012, 15% of Cuyahoga County adults had been diagnosed with cancer at some time in their life. Ohio Department of Health statistics indicate that from 2000-2008, a total of 30,348 Cuyahoga County residents died from cancer, the second leading cause of death in the county. The American Cancer Society advises that reducing tobacco use, increasing cancer education and awareness, healthy diet and exercise habits, and early detection may reduce overall cancer deaths.

## **Diabetes**

In 2012, 9% of Cuyahoga County adults had been diagnosed with diabetes. A major risk factor is obesity.

#### **Arthritis**

According to the Cuyahoga County survey data, 34% of Cuyahoga County adults were diagnosed with arthritis. According to the 2011 BRFSS, 29% of Ohio adults and 24% of U.S. adults were told they have arthritis.

#### Asthma

According to the Cuyahoga County survey data, 15% of Cuyahoga County adults had been diagnosed with asthma.

## Cuyahoga County Leading Types of Death 2006-2008 Total Deaths: 41,712

- 1. Heart Disease (30% of all deaths)
- 2. Cancers (23%)
- 3. Stroke (5%)
- 4. Chronic Lower Respiratory Diseases (5%)
- 5. Alzheimer's Disease (3%)

(Source: ODH Information Warehouse, updated 4-15-10)

## Cuyahoga County Leading Cancer Deaths, 2006-2008 All Types: 9,602 deaths

- Lung and Bronchus: 2,563 deaths (27%)
- Colon and Rectum: 889 deaths (10%)
- ❖ Breast: 727 deaths (8%)
- Pancreas: 631 deaths (7%)
- Prostate: 567 deaths (6%)

(Source: Ohio Cancer Incidence Surveillance System, ODH Information

#### **Diabetes Facts**

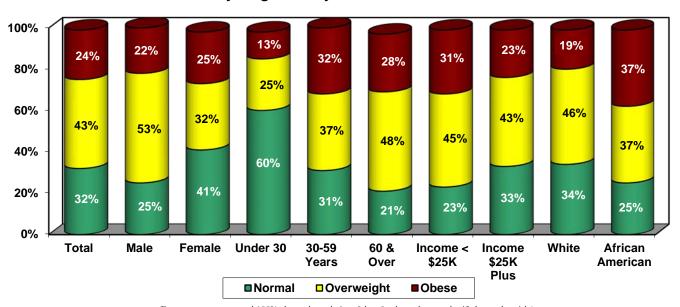
- ❖ Diabetes was the 7<sup>th</sup> leading cause of death in Cuyahoga County from 2006-2008.
- Diabetes was the 7th leading cause of death in Ohio from 2006-2008.
- ❖ From 2006-2008, the Cuyahoga County ageadjusted mortality rate per 100,000 for diabetes was 27.2 deaths for males (34.5 Ohio) and 19.3 (24.4 Ohio) deaths for females.

(Source: ODH Information Warehouse, updated 4-15-10)

# **Adult Weight Status**

The 2012 Health Assessment identified that 67% of Cuyahoga County adults were overweight or obese based on Body Mass Index (BMI). The 2011 BRFSS indicates that 30% of Ohio and 28% of U.S. adults were obese by BMI. Nearly one-fourth (24%) of Cuyahoga County adults were obese. Two-fifths (40%) of adults were trying to lose weight.

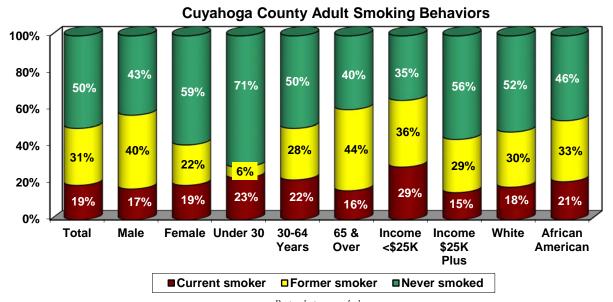
#### **Cuyahoga County Adult BMI Classifications**



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

## Adult Tobacco Use

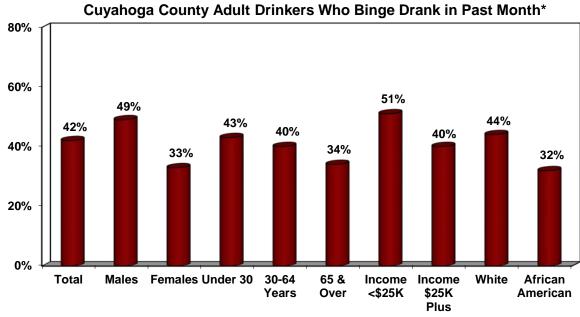
In 2012, 19% of Cuyahoga County adults were current smokers and 31% were considered former smokers. In 2011, the American Cancer Society (ACS) stated that tobacco use was the most preventable cause of disease and early death in the world, accounting for approximately 5.4 million premature deaths each year. ACS estimated that tobacco use would be linked to approximately one in five deaths in the U.S. (Source: Cancer Facts & Figures, American Cancer Society, 2011)



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**

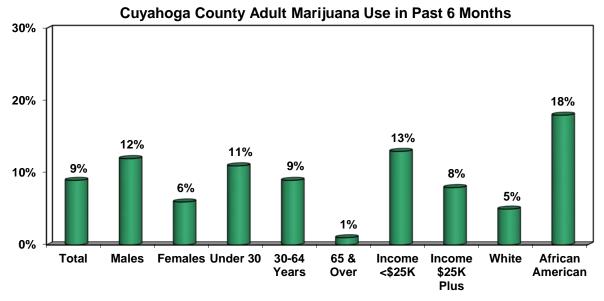
In 2012, the Health Assessment indicated that 18% of Cuyahoga County adults were considered frequent drinkers (drank an average of three or more days per week, per CDC guidelines). 42% of adults who drank had five or more drinks (for males) and 4 or more drinks (for females) on one occasion (binge drinking) in the past month. 11% of adults drove after having perhaps too much to drink.



\*Based on adults who have drank alcohol in the past month. Binge drinking is defined as having five or more drinks (for males) or four or more drinks (for females) on an occasion at least once in the previous month.

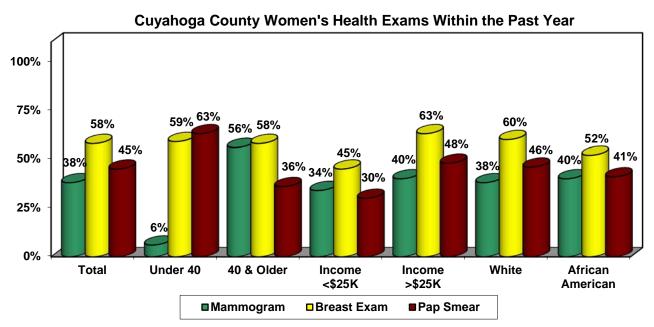
# Adult Marijuana and Other Drug Use

In 2012, 9% of Cuyahoga County adults had used marijuana during the past 6 months. 9% 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.



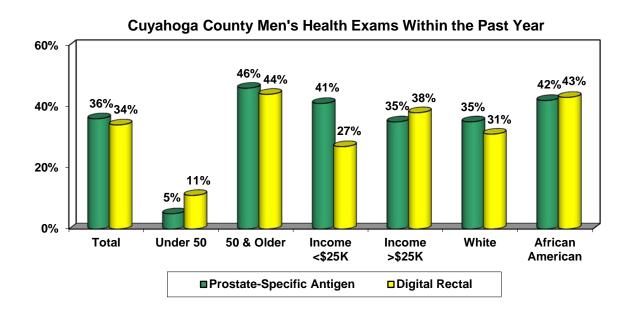
# Women's Health

In 2012, more than half (56%) of Cuyahoga County women over the age of 40 reported having a mammogram in the past year. 58% of Cuyahoga County women ages 19 and over have had a clinical breast exam and 45% had a Pap smear to detect cancer of the cervix in the past year. The Health Assessment determined that more than one-quarter (27%) of Cuyahoga County women had high blood pressure, 28% had high blood cholesterol, 25% were obese, and 19% were identified as smokers, known risk factors for cardiovascular diseases.



## Men's Health

In 2012, almost half (46%) of Cuyahoga County males over the age of 50 had a Prostate-Specific Antigen (PSA) test in the past year. More than two-fifths (44%) of males over the age of 50 had a digital rectal exam in the past year. Major cardiovascular diseases (heart disease and stroke) accounted for 34% and cancers accounted for 24% of all male deaths in Cuyahoga County from 2006-2008. The Health Assessment determined that 11% of men had a heart attack, and 3% had a stroke at some time in their life. Almost half (46%) of men had been diagnosed with high blood pressure, 46% had high blood cholesterol, and 17% were identified as smokers, which, along with obesity (22%), are known risk factors for cardiovascular diseases.



# Preventive Medicine and Health Screenings

More than half (56%) of adults had a flu shot during the past 12 months. 71% of adults ages 65 and over had a pneumonia vaccination at some time in their life.

# Adult Sexual Behavior & Pregnancy Outcomes

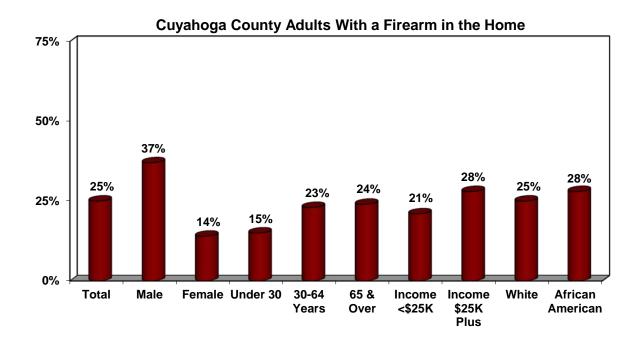
In 2012, nearly two-thirds (63%) of Cuyahoga County adults had sexual intercourse. Ten percent of adults had more than one partner. Even though young people aged 15-24 represent only 25% of the sexually experienced population, they acquire nearly half of all STDs (Source: CDC, STDs in Adolescents and Young Adults, 2010 STD Surveillance).

# Quality of Life

In 2012, 24% of Cuyahoga County adults were limited in some way because of a physical, mental or emotional problem.

#### **Social Context**

In 2012, the health assessment identified that 25% of Cuyahoga County adults kept a firearm in or around their home. 75% of adults reported always wearing their seatbelt while driving or riding in a car.



#### Mental Health and Suicide

In 2012, 2% of Cuyahoga County adults considered attempting suicide. 10% of adults felt so sad or hopeless almost every day for two or more weeks that they stopped doing usual activities.

#### Oral Health

The 2012 Health Assessment project has determined that nearly two-thirds (65%) of Cuyahoga County adults had visited a dentist or dental clinic in the past year. The 2010 BRFSS reported that 70% of U.S. adults and 72% of Ohio adults had visited a dentist or dental clinic in the previous twelve months.

# African American Healthcare Access, Coverage, & Utilization

According to the 2011 U.S. Census demographic profile data, approximately 372,149 African Americans live in Cuyahoga County (30%). The 2012 Health Assessment reported that nearly one-fifth (18%) of African Americans did not have health care coverage. 26% rated their health as fair or poor, and 43% had been to the emergency room in the past year.

## African American Chronic Diseases and Prevention

In 2012, 17% of African Americans were diagnosed with diabetes and 49% with high blood pressure. 74% of African Americans were either overweight or obese.

# African American Quality of Life and Safety

28% of African Americans kept a firearm in or around their home. 48% of African Americans attempted to get assistance from a social service agency. More than one-fifth (22%) were limited in some way because of a physical, mental or emotional problem.

# Cuyahoga County Trend Summary

Adult Variables	Cuyahoga County	Ohio 2011	U.S. 2011
Health Status	2012		
Rated health as excellent or very good	52%	51%	51%
Rated general health as fair or poor	19%	18%	17%
Average days that physical health not good in past month	4.2	3.9*	3.7*
Average days that physical health not good in past month	3.5	3.9*	3.5*
Health Care Coverage	9.5	3.7	3.3
Has health care coverage	87%	86%	82%
Arthritis, Asthma, & Diabetes	0770	0070	0270
Has been diagnosed with arthritis	34%	29%	24%
Has been diagnosed with asthma	15%	14%	14%
Has been diagnosed with diabetes	9%	11%	10%
Cardiovascular Health	770	1170	1070
Had angina	8%	5%	4%
Had a heart attack	6%	5%	4%
Had a stroke	3%	3%	3%
Has been diagnosed with high blood pressure	38%	33%	31%
Has been diagnosed with high blood cholesterol	38%	39%	38%
Had blood cholesterol checked within the past 5 years	85%	76%	76%
Weight Status	3070	10,0	7070
Overweight	43%	36%	36%
Obese	24%	30%	28%
Alcohol Consumption			
Had at least one alcoholic beverage in past month	59%	56%	57%
Binged in past month (5 or more drinks in a couple of hours on an occasion)	24%	20%	18%
Tobacco Use			
Current smoker (currently smoke some or all days)	19%	25%	21%
Former smoker (smoked 100 cigarettes in lifetime & now do not smoke)	31%	25%	25%
Preventive Health			
Age 65 & over had a flu shot in the past year	74%	61%	61%
Age 65 & over had a pneumonia vaccine in lifetime	71%	70%	70%
Age 50 & over had a colonoscopy/sigmoidoscopy in the past 5 years	57%	53%*	53%*
Age 40 & over had a clinical breast exam in the past two years	73%	75%*	77%*
Age 40 & over had a mammogram in the past two years	72%	74%*	75%*
Had a pap smear in the past three years	76%	82%*	81%*
Age 40 & over had a PSA test in within the past two years	55%	54%*	54%*
Quality of Life & Social Context			
Limited in some way because of physical, mental or emotional problem	24%	24%	24%
Oral Health			
Adults who have visited the dentist in the past year	65%	72%*	70%*
Adults who had one or more permanent teeth removed	50%	45%*	44%*
Adults 65 years and older who had all of their permanent teeth removed	13%	20%*	17%*

# **Health Status Perceptions**

# **Key Findings**

In 2012, more than half (52%) of the Cuyahoga County adults rated their health status as excellent or very good. Conversely, 19% of the adults, increasing to 48% of those with annual incomes less than \$25,000, described their health as fair or poor.

# General Health Status

- ◆ In 2012, more than half (52%) of Cuyahoga County adults rated their health as excellent or very good. Cuyahoga County adults with higher incomes (60%) were most likely to rate their health as excellent or very good, compared to 24% of those with incomes less than \$25,000.
- ♦ 19% of adults rated their health as fair or poor. The 2011 BRFSS has identified that 18% of Ohio and 17% of U.S. adults self-reported their health as fair or poor.
- Cuyahoga County adults were most likely to rate their health as fair or poor if they:
  - o Had an annual household income under \$25,000 (48%)
  - o Had been diagnosed with diabetes (45%)
  - o Had high blood pressure (35%) or high blood cholesterol (33%)
  - o Were widowed (33%)

# Physical Health Status

- In 2012, 23% of Cuyahoga County adults rated their physical health as not good on four days or more in the previous month, increasing to 34% of those with incomes less than \$25,000.
- Cuyahoga County adults reported their physical health as not good on an average of 4.2 days in the previous month.
- Ohio and U.S. adults reported their physical health as not good on an average of 3.9 days and 3.7 days respectively in the previous month. (Source: 2010 BRFSS)

# Mental Health Status

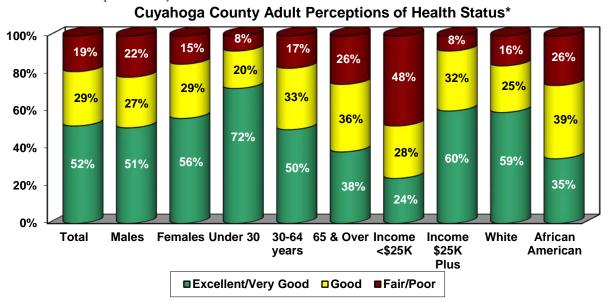
- In 2012, 23% of Cuyahoga County adults rated their mental health as not good on four days or more in the previous month.
- Cuyahoga County adults reported their mental health as not good on an average of 3.5 days in the previous month.
- Ohio and U.S. adults reported their mental health as not good on an average of 3.9 days and 3.5 days, respectively, in the previous month. (Source: 2010 BRFSS)
- Cuyahoga County adults were most likely to rate their mental health as not good if they:
  - o Had an annual household income under \$25,000 (35%)
  - o Were female (29%)
  - o Were ages 30-64 years old (28%)
- Nearly one-fourth (24%) of adults reported that poor mental or physical health kept them from doing usual activities such as self-care, work, or recreation in the past month.
- Cuyahoga County adults reported that poor physical or mental health kept them from doing their usual activities on an average of 3.4 days in the previous month.
- Ohio and U.S. adults reported that poor physical or mental health kept them from doing their usual activities on an average of 2.4 days and 2.3 days, respectively, in the previous month. (Source: 2010 BRFSS)

# Very Good Cuyahoga County 52% (2012) Ohio 51% (2011) U.S. 51% (2011)

Adults Who Rated General Health Status Excellent or

# **Health Status Perceptions**

The following graph shows the percentage of Cuyahoga County adults who described their personal health status as excellent/very good, good, and fair/poor. Examples of how to interpret the information include: 52% of all Cuyahoga County adults, 72% of those under age 30, and 38% 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.



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

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	53%	11%	7%	5%	15%
Females	62%	12%	7%	3%	10%
Total	58%	12%	6%	4%	13%
Mental Health Not Good in Past 30 Days*					
Males	61%	13%	6%	1%	9%
Females	55%	10%	8%	2%	17%
Total	58%	12%	6%	2%	13%

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

2012 Adult Comparisons	Cuyahoga County 2012	Ohio 2011	U.S. 2011
Rated health as excellent or very good	52%	51%	51%
Rated health as fair or poor	19%	18%	17%
Average days that physical health not good in past month	4.2	3.9*	3.7*
Average days that mental health not good in past month	3.5	3.9*	3.5*
Average days that poor physical or mental health kept them from doing their usual activities in past month	3.4	2.3*	2.4*

<sup>\*2010</sup> BRFSS data

# **Key Findings**

The 2012 Health Assessment data has identified that 13% of Cuyahoga County adults were without health care coverage. Those most likely to be uninsured were adults under the age of 30. In Cuyahoga County, 18.6% of residents live below the poverty level. (Source U.S. Census, American Community Survey 1 Year Estimates, 2011)

# General Health Coverage

◆ In 2012, most (87%) Cuyahoga County adults had health care coverage, leaving 13% who were uninsured. The 2011 BRFSS reports uninsured prevalence rates for Ohio (14%) and the U.S. (18%).

## Cuyahoga County Medicaid Recipients

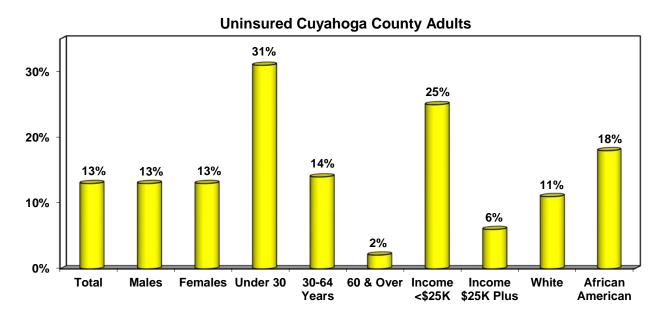
- ❖ In March 2012, there were 279,607 individuals with Medicaid; 141,477 of which were children.
- As of March 2012, there were 18,766 individuals receiving specialized Medicaid benefit services such as home health aide, waiver services for assisted living, or long-term facility care.
- ♦ Of all the large Metro counties, Cuyahoga had the highest percentage of insured children, which represents a 2.6% increase from March 2011.

(Source: Employment & Family Services, 1st quarter 2012 Performance Report, http://employment.cuyahogacounty.us/en-US/Statistics-Reports.aspx)

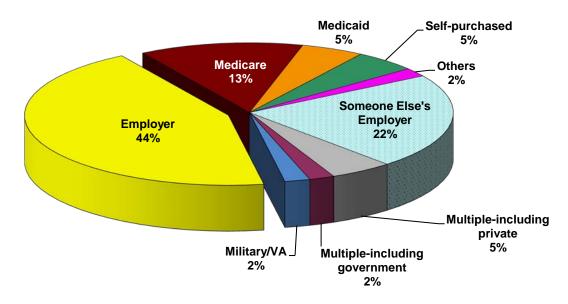
- In the past year 13% of adults were uninsured, increasing to 31% of those under the age of 30.
- ♦ 10% of adults with children did not have healthcare coverage, compared to 14% of those who did not have children living in their household.
- ◆ The following types of health care coverage were in effect: employer (44%), someone else's employer (22%), Medicare (13%), multiple-including private sources (5%), Medicaid or medical assistance (5%), self-paid plan (5%), multiple-including government sources (2%), military, CHAMPUS, TriCare, or VA (2%), and other (2%).
- Cuyahoga County adult health care coverage included the following: medical (99%), prescription coverage (93%), immunizations (79%), mental health (77%), dental (75%), vision (75%), preventive care (71%), their spouse (61%), their children (54%), alcohol and drug treatment (46%), home care (31%), Cuyahoga County physicians (30%), skilled nursing (30%), and hospice (30%).
- The top three reasons uninsured adults gave for being without health care coverage were:
  - 1. They lost their job or changed employers (42%)
  - 2. They could not afford to pay the insurance premiums (22%)
  - 3. They became ineligible (9%)
  - (Percentages do not equal 100% because respondents could select more than one reason.)
- When asked how long it had been since they last had health care coverage, 73% of adults indicated they have always had health care coverage. 3% responded they last had health care coverage within the past 6 months, 3% said 6 to 12 months ago, 4% said 1 to 2 years ago, 4% said 2 to 5 years ago, 9% said 5 or more years ago, and 3% said they have never had health care coverage.
- 83% of adults described their health care coverage as adequate, and 13% said it was inadequate.
- Cuyahoga County adults had the following issues regarding their healthcare coverage: deductibles were too high (26%), co-pays were too high (23%), premiums were too high (18%), high HSA account deductible (7%), working with their insurance company (7%), opted out of certain coverage because they could not afford it (5%), could not understand their insurance plan (5%), and opted out of certain coverage because they did not need it (2%).

2012 Adult Comparisons	Cuyahoga County 2012	Ohio 2011	U.S. 2011
Uninsured	13%	14%	18%

The following graph shows the percentages of Cuyahoga County adults who were uninsured by demographic characteristics. Examples of how to interpret the information in the first graph include: 13% of all Cuyahoga County adults were uninsured, 25% of adults with an income less than \$25,000 reported being uninsured and 31% of those under age 30 lacked health care coverage. The pie chart shows sources of Cuyahoga County adults' health care coverage.



## Source of Health Insurance Coverage for Cuyahoga County Adults



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

Health Coverage Includes:	Yes	No	Don't Know
Medical	99%	<1%	1%
Prescription Coverage	93%	5%	2%
Immunizations	79%	4%	17%
Mental Health	77%	3%	20%
Dental	75%	22%	3%
Vision	75%	21%	4%
Preventive Health	71%	6%	23%
Your Spouse	61%	30%	9%
Your Children	54%	34%	11%
Alcohol and Drug Treatment	46%	5%	49%
Home Care	31%	13%	55%
Skilled Nursing	30%	13%	57%
Hospice	30%	11%	59%
Cuyahoga County Physicians	30%	9%	61%

### 2010 Ohio Family Health Survey Results

- ♦ In Ohio, 19% of adults 18-64 years old and 5% of children were uninsured in 2010, compared respectively to 17% and 4% in 2008.
- ♦ 18% of Cuyahoga County adults 18-64 years old and 3% of Cuyahoga County children were described as being uninsured in the report.
- ❖ In 2010, uninsured children had an 11.7 times higher rate of **not** having a usual source of care than insured children. Uninsured children had an almost 3 times higher rate of **not** having a usual source of coverage than uninsured adults.
- Among working age adults in Ohio, uninsured rates increased for all race and ethnic categories from the 2003/2004 OFHS through the 2010 OFHS.
- ♦ In Ohio, uninsured individuals reported greater issues with access to care, unmet needs, and paying for care than the insured.

(Source: 2010 Ohio Family Health Survey Results, 03-08-2011)

Healthy People 2020 Access to Quality Health Services

Objective	Cuyahoga County	Ohio	U.S.	Healthy People 2020 Target
AHS-1.1: Increase the proportion of persons with health care insurance	76% age 20-24 78% age 25-34 89% age 35-44 84% age 45-54 86% age 55-64 (2012)	79% age 18-24 81% age 25-34 84% age 35-44 83% age 45-54 87% age 55-64 (2011)	75% age 18-24 73% age 25-34 80% age 35-44 84% age 45-54 87% age 55-64 (2011)	100%

\*U.S. baseline is age-adjusted to the 2000 population standard (Sources: Health People 2020 Objectives, 2011 BRFSS, 2012 Cnyahoga County Health Assessment)

# Cuyahoga County Health Care Coverage Highlights: 1st Quarter 2012

- As of March 2012, there were 279,607 Medicaid recipients in Cuyahoga County; 141,477 of which were children.
- ❖ As of March 2012, 21% of all residents and 48% of children receive Medicaid in Cuyahoga County.
- As of March 2012, 138,929 households were participating in the Food Assistance Program; 32,326 or 23% had earned income.
- ♦ In the past 12 months, the number of households receiving Food Assistance had increased by 3.7% and Medicaid enrollment had risen 2.6%.

(Source: Employment & Family Services, Cuyahoga County of Ohio, 1<sup>st</sup> quarter 2012 Performance Report, http://employment.cuyahogacounty.us/pdf\_employment/en-US/2012-1stQuarterReport.pdf)

# Health Care Access and Utilization

# **Key Findings**

The 2012 Health Assessment project identified that 5% of Cuyahoga County adults were using a hospital emergency room as their usual place of health care. More than half (57%) of adults reported that they had a particular doctor or healthcare professional they go to for routine medical care.

# **Health Care Access**

- In 2012, more than three-fifths (62%) of Cuyahoga County adults visited a doctor for a routine checkup in the past year, increasing to 79% of those over the age of 65.
- More than half (57%) of Cuyahoga County adults reported they had one particular doctor or healthcare professional they go to for routine medical care, decreasing to 48% of those with incomes less than \$25,000. 21% of adults had more than one particular doctor or healthcare professional they go to for routine medical care, and 21% did not have one at all.
- Reasons for not having a usual source of medical care included: two or more usual places (23%), no insurance/could not afford insurance (21%), had not needed a doctor (19%), previous doctor unavailable/moved (12%), did not know where to go (4%), did not like/trust/believe in doctors (3%), and other reasons (14%).
- When adults were sick or needed advice about their health, they usually went to the following: a private doctor's office (66%), a hospital emergency room (5%), Internet, (5%), an urgent care center (4%), no usual place (4%), a public health clinic or community health center (3%), in-store health clinic (2%), a hospital outpatient department (2%), alternative therapies (<1%), and some other kind of place (1%).
- 5% of Cuyahoga County adults used a hospital emergency room as their usual place of health care, increasing to 8% of those with incomes less than \$25,000.
- 22% of Cuyahoga County adults had visited the emergency room 1-2 times in the past year and 5% had been there more than 2 times.
- About half (51%) of Cuyahoga County adults rated their satisfaction with their overall health care as excellent or very good, decreasing to 30% of those with incomes less than \$25,000. 16% of adults rated their satisfaction as fair or poor.
- 19% of adults traveled less than 2 miles to the place they usually went when they were sick or needed health advice; 37% traveled 2 to 5 miles, 34% traveled 5 to 10 miles, 8% traveled 10 to 20 miles, and 2% traveled more than 20 miles.
- 15% of adults went outside of Cuyahoga County for the following health care services in the past year: primary care (3%), dental services (3%), specialty care (2%), orthopedic care (2%), obstetrics/gynecology (1%), pediatric care (1%), mental health care (1%), cancer care (<1%), cardiac care (<1%), and other services (2%).
- Residents sought care outside of Cuyahoga County in the following places: Summit (5%), Lake (3%), Lorain (2%), Geauga (2%), Medina (1%), Portage (<1%), and other places (2%).
- Cuyahoga County adults preferred to get their health/healthcare services information from: their doctor (79%), a friend or family member (34%), the Internet (34%), newspaper articles or radio/television news stories (19%), advertisings or mailings from hospitals/clinics/doctor's offices (18%), text messages (3%), Facebook (1%), billboards (1%), and other methods (4%).

#### Predictors of Access to Health Care

Adults are more likely to have access to medical care if they:

- Earn a higher income
- Have a regular primary care provider
- Have health insurance
- Utilize preventive services in a clinic setting
- \* Have a college education
- ❖ Work for a large company

(Source: Healthy People 2020 and CDC)

# Health Care Access and Utilization

- Cuyahoga County adults had the following transportation problems when they needed health care: no car (6%), no driver's license (4%), could not afford gas (3%), limited public transportation available or accessible (3%), no car insurance (2%), disabled (2%), car did not work (1%), no public transportation available or accessible (<1%), and other car issues/expenses (3%).
- Just over one-third (34%) of Cuyahoga County adults did not get medical care in the past year for the following reasons: care not needed (14%), cost/no insurance (13%), too long to wait for an appointment (2%), office was not open when they could get there (1%), no transportation (1%), too long to wait in the waiting room (<1%), and other reasons (2%). 66% of adults indicated they received all of the medical care they needed.
- The following might prevent Cuyahoga County adults from seeing a doctor if they were sick, injured, or needed some kind of health care: cost (34%), hours not convenient (16%), difficult to get an appointment (15%), worried they might find something wrong (8%), frightened of the procedure or doctor (6%), could not get time off work (5%), difficult to find/no transportation (3%), do not trust or believe doctors (2%), and some other reason (4%).
- Cuyahoga County adults did not receive the following major care or preventive care due to cost: medications (8%), mammogram (7%), weight-loss program (6%), pap smear (6%), colonoscopy (5%), mental health (5%), surgery (3%), immunizations (3%), smoking cessation (3%), family planning (2%), PSA test (1%), and alcohol and drug treatment (1%).
- During the past year, adults did not get a prescription from their doctor filled because: they did not think they needed it (11%), they could not afford to pay the out-of-pocket expenses (8%), they had no insurance (5%), they stretched their prescription by taking less than prescribed (4%), there was no generic equivalent of what was prescribed (3%), their deductibles were too high (3%), their co-pays were too high (3%), they had a high health savings account (HSA) deductible (2%), their premiums were too high (2%), they opted out of prescription coverage because they could not afford it (1%), they were taking too many medications (1%), and transportation (1%). 74% of adults reported having all of their prescriptions filled.
- When seeking healthcare in the past year, Cuyahoga County residents felt their experiences in relation to other races were: the same as other races (46%), better than other races (7%), only encountered people of same race (4%), worse than other races (2%), and worse than some races but better than others (2%). 31% reported they did not know.

# **Availability of Services**

- 12% of Cuyahoga County adults reported they had used a depression or anxiety program for themselves or a loved one. Reasons for not using such a program included: could not afford to go (6%), copay/deductible too high (5%), had not thought of it (5%), did not know how to find a program (4%), stigma of seeking mental health services (3%), did not feel the services they had received were good (3%), other priorities (3%), fear (3%), transportation (2%), could not get to the clinic/office (1%), and other reasons (1%).
- 9% of Cuyahoga County adults looked for a program to assist in care for the elderly (either in-home or out-of-home) for either themselves or a loved one. Of those who looked, 29% looked for in-home care, 18% looked for an assisted living program, 9% looked for out-of-home placement, 9% looked for a disabled adult program, and 4% looked for overnight or respite care. 32% looked for multiple programs to assist in elderly care for themselves or a loved one.

# Health Care Access and Utilization

# Healthy People 2020 Access to Quality Health Services

Objective	Cuyahoga County	Healthy People 2020 Target
AHS-3: Increase the proportion of persons with a usual primary care provider	57% (2012)	84%

\*U.S. baseline is age-adjusted to the 2000 population standard (Sources: Health People 2020 Objectives, 2012 Assessment)

# **Key Findings**

In 2012, 6% of Cuyahoga County adults had survived a heart attack and 3% survived a stroke at some time in their life. Nearly two-fifths (38%) of Cuyahoga County adults have been diagnosed with high blood pressure, 38% had high blood cholesterol, 24% were obese, and 19% were smokers, four known risk factors for heart disease and stroke.

# Heart Disease and Stroke

- ♦ In 2012, 6% of Cuyahoga County adults reported they had survived a heart attack or myocardial infarction, increasing to 10% of those over the age of 65.
- ♦ 5% of Ohio and 4% of U.S. adults reported they had survived a heart attack or myocardial infarction in 2011 (Source: 2011 BRFSS).
- ♦ 3% of Cuyahoga County adults reported having survived a stroke, increasing to 5% of those over the age of 65.
- ♦ 3% of Ohio and U.S. adults reported having survived a stroke in 2011 (Source: 2011 BRFSS).
- ♦ 8% of adults reported they had angina or coronary heart disease.
- 5% of Ohio and 4% of U.S. adults reported having had angina or coronary heart disease in 2011. (Source: 2011 BRFSS).

# **High Blood Pressure (Hypertension)**

- ♦ Nearly two-fifths (38%) of Cuyahoga County adults had been diagnosed with high blood pressure. The 2011 BRFSS reports hypertension prevalence rates of 33% for Ohio and 31% for the U.S.
- 6% of adults were told they were pre-hypertensive/borderline high.
- 88% of adults had their blood pressure checked within the past year.
- Cuyahoga County adults diagnosed with high blood pressure were more likely to:
  - o Be age 65 years or older (59%)
  - o Have an annual household income less than \$25,000 (51%)
  - o Be classified as obese by Body Mass Index-BMI (50%)

# High Blood Cholesterol

- Over one-third (38%) of adults had been diagnosed with high blood cholesterol. The 2011 BRFSS reported that 39% of Ohio adults and 38% of U.S. adults had been told they have high blood cholesterol.
- ♦ More than four-fifths (85%) of adults had their blood cholesterol checked within the past 5 years. The 2011 BRFSS reported 76% of Ohio and U.S. adults had theirs checked within the past 5 years.
- ♦ Cuyahoga County adults with high blood cholesterol were more likely to:
  - o Be age 65 years or older (68%)
  - o Have an annual household income less than \$25,000 (51%)
  - o Be classified as obese by Body Mass Index-BMI (50%)
- ◆ Cuyahoga County adults were taking medication for the following conditions: blood pressure (24%), blood cholesterol (14%), heart disease (11%), and stroke (5%).

# Cuyahoga County Leading Types of Death 2006-2008

Total Deaths: 41,712

- 1. Heart Disease (30% of all deaths)
- 2. Cancers (23%)
- 3. Stroke (5%)
- 4. Chronic Lower Respiratory Diseases (5%)
- 5. Accidents, Unintentional Injuries (3%)

(Source: ODH Information Warehouse, updated 4-15-10)

# Ohio Leading Types of Death 2006-2008

Total Deaths: 322,264

- 1. Heart Disease (25% of all deaths)
- 2. Cancers (23%)
- 3. Chronic Lower Respiratory Diseases (6%)
- 4. Stroke (5%)
- 5. Accidents, Unintentional Injuries (5%)

(Source: ODH Information Warehouse, updated 4-15-10)

The following graph demonstrates the percentage of Cuyahoga County adults who had major risk factors for developing cardiovascular disease (CVD). (Source: 2012 Cuyahoga County Health Assessment)

## **Cuyahoga County Adults with CVD Risk Factors** 50% 38% 38% 24% 20% 19% 25% 9% 0% High Blood **High Blood** Obesity Sedentary **Smoking Diabetes**

#### Risk Factors for Cardiovascular Disease That Can Be Modified or Treated:

Cholesterol

**Pressure** 

**Cholesterol** – As blood cholesterol rises, so does risk of coronary heart disease. When other risk factors (such as high blood pressure and tobacco smoke) are present, this risk increases even more. A person's cholesterol level is also affected by age, sex, heredity and diet.

**High Blood Pressure** – High blood pressure increases the heart's workload, causing the heart to thicken and become stiffer and causes the heart not to work properly. It also increases your risk of stroke, heart attack, kidney failure and congestive heart failure. When high blood pressure exists with obesity, smoking, high blood cholesterol levels or diabetes, the risk of heart attack or stroke increases several times.

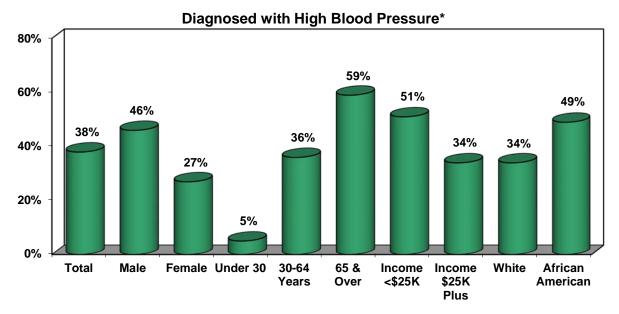
**Obesity and Overweight** – People who have excess body fat — especially at the waist — are more likely to develop heart disease and stroke even if they have no other risk factors. Excess weight increases the heart's work. It also raises blood pressure and blood cholesterol and triglyceride levels, and lowers HDL ("good") cholesterol levels. Many obese and overweight people may have difficulty losing weight. But by losing even as few as 10 pounds, you can lower your heart disease risk.

**Smoking** – Smokers' risk of developing coronary heart disease is 2-4 times that of nonsmokers. People who smoke a pack of cigarettes a day have more than twice the risk of heart attack than people who've never smoked. People who smoke cigars or pipes seem to have a higher risk of death from coronary heart disease (and possibly stroke) but their risk isn't as great as cigarette smokers. Exposure to other people's smoke increases the risk of heart disease even for nonsmokers.

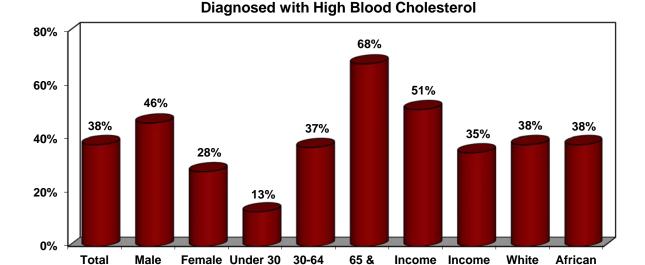
**Physical Inactivity** – An inactive lifestyle is a risk factor for coronary heart disease. Regular, moderate-to-vigorous physical activity helps prevent heart and blood vessel disease. However, even moderate-intensity activities help if done regularly and long term. Physical activity can help control blood cholesterol, diabetes and obesity, as well as help lower blood pressure in some people.

**Diabetes Mellitus** – Diabetes seriously increases your risk of developing cardiovascular disease. Even when glucose levels are under control, diabetes increases the risk of heart disease and stroke, but the risks are even greater if blood sugar is not well controlled. At least 65% of people with diabetes die of some form of heart or blood vessel disease. (Source: American Heart Association, Risk Factors for Coronary Heart Disease, 6-20-11)

The following graphs show the number of Cuyahoga County adults who have been diagnosed with high blood pressure or high blood cholesterol. Examples of how to interpret the information on the first graph include: 38% of all Cuyahoga County adults have been diagnosed with high blood pressure, 46% of all Cuyahoga County males, 27% of all females, and 59% of those 65 years and older.



\*Does not include respondents who indicated high blood pressure during pregnancy only.



Years

Over

American

\$25K

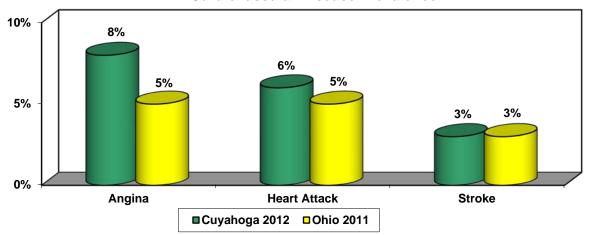
**Plus** 

<\$25K

The following graphs show the Cuyahoga County and Ohio age-adjusted mortality rates per 100,000 population for heart disease and stroke by gender and race/ethnicity.

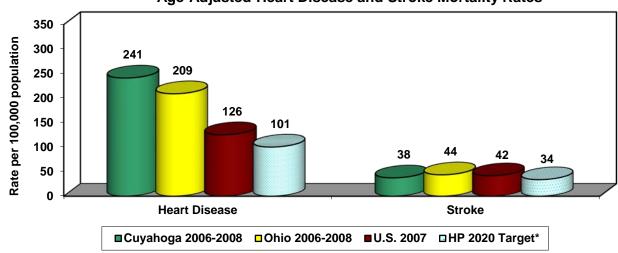
- ♦ When age differences are accounted for, the statistics indicate that from 2006-2008 the Cuyahoga County heart disease mortality rate was higher than the figure for the state, the U.S. figure and the Healthy People 2020 target.
- ◆ The Cuyahoga County age-adjusted stroke mortality rate for 2006-2008 was lower than the state and U.S. figures, but higher than the Healthy People 2020 target objective.
- Disparities exist for heart disease mortality rates by gender in Cuyahoga County.

#### Cardiovascular Disease Prevalence



(Source: 2012 Cuyahoga Health Assessment and 2011 BRFSS)

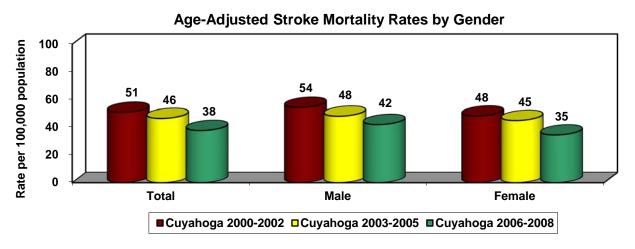
#### Age-Adjusted Heart Disease and Stroke Mortality Rates



\*The Healthy People 2020 Target objective for Coronary Heart Disease is reported for heart attack mortality. (Source: ODH Information Warehouse, updated 4-15-10, Healthy People 2020)

#### Cuyahoga County Age-Adjusted Heart Disease Mortality Rates by Gender 500 Rate per 100,000 population 400 386 336 303 313 • 274 300 241 259 200 227 195 100 0 2000-2002 2003-2005 2006-2008 Cuyahoga Total —— Cuyahoga Males Cuyahoga Females

(Source: ODH Information Warehouse, updated 4-15-10)



(Source: ODH Information Warehouse, updated 4-15-10)

# Healthy People 2020 Objectives

**High Blood Pressure** 

Objective	Cuyahoga County 2012	U.S. Baseline*	Healthy People 2020 Target
HDS-4 Increase the portion of adults who have had their blood pressure measured within the preceding 2 years and can state whether it was normal or high	95%	91% Adults age 18 and up (2008)	93%
HDS-5: Reduce proportion of adults with hypertension	38%	31% Adults age 18 and up (2011)	27%

<sup>\*</sup>All U.S. figures age-adjusted to 2000 population standard. (Source: Healthy People 2020, 2011 BRFSS, 2012 Health Assessment)

# **Blood Cholesterol**

Objective	Cuyahoga County 2012	U.S. Baseline*	Healthy People 2020 Target
HDS-6: Increase proportion of adults who had their blood cholesterol checked within the preceding 5 years	85%	76% Adults age 18 & up (2011)	82%
HDS-7: Decrease proportion of adults with high total blood cholesterol (TBC)	38%	38% Adults age 2 & up with TBC>240 mg/dl (2011)	14%

\*All U.S. figures age-adjusted to 2000 population standard. (Source: Healthy People 2020, 2011 BRFSS, 2012 Health Assessment)

2012 Adult Comparisons	Cuyahoga County 2012	Ohio 2011	U.S. 2011
Had angina	8%	5%	4%
Had a heart attack	6%	5%	4%
Had a stroke	3%	3%	3%
Had high blood pressure	38%	33%	31%
Had high blood cholesterol	38%	39%	38%
Had blood cholesterol checked within the past 5 years	85%	76%	76%

# Cancer

# **Key Findings**

In 2012, 15% of Cuyahoga County adults had been diagnosed with cancer at some time in their life. Ohio Department of Health statistics indicate that from 2000-2008, a total of 30,348 Cuyahoga County residents died from cancer, the second leading cause of death in the county. The American Cancer Society advises that reducing tobacco use, increasing cancer education and awareness, healthy diet and exercise habits, and early detection may reduce overall cancer deaths.

# **Adult Cancer**

♦ 15% of Cuyahoga County adults were diagnosed with cancer at some point in their lives, increasing to 22% of those with annual household incomes less than \$25,000.

Cuyahoga County Leading Cancer Deaths, 2006-2008 All Types: 9,602 deaths

- Lung and Bronchus: 2,563 deaths (27%)
- Colon and Rectum: 889 deaths (10%)
- ❖ Breast: 727 deaths (8%)
- Pancreas: 631 deaths (7%)
- Prostate: 567 deaths (6%)

(Source: Ohio Cancer Incidence Surveillance System, ODH Information Warehouse)

♦ 30% of Cuyahoga County adults reported having a skin cancer screening at some time in their life, increasing to 37% of those ages 60 and over.

#### **Cancer Facts**

- ◆ The Ohio Department of Health (ODH) vital statistics indicate that from 2000-2008, cancers caused 23% (30,348 of 131,453 total deaths) of all Cuyahoga County resident deaths. The largest percent (27%) of cancer deaths were from lung and bronchus cancer. (Source: ODH Information Warehouse) These cancers are usually caused by smoking. (Source: American Cancer Society Facts & Figures 2012)
- ♦ The American Cancer Society reports that smoking tobacco is associated with cancers of the mouth, lips, nasal cavity (nose) and sinuses, larynx (voice box), pharynx (throat), and esophagus (swallowing tube). Also, smoking has been associated with cancers of the lung, colorectal, stomach, pancreas, kidney, bladder, uterine cervix, ovary (mucinous) and acute myeloid leukemia. The 2012 health assessment project has determined that 19% of Cuyahoga County adults are current smokers and many more were exposed to environmental tobacco smoke, also a cause of heart attacks and cancer.

# **Lung Cancer**

- ◆ The Ohio Department of Health reports that lung cancer (n=4,525) was the leading cause of male cancer deaths from 2000-2008 in Cuyahoga County. Prostate cancer caused 1,860 male deaths and colorectal cancer caused 1,449 male deaths during the same time period.
- ◆ In Cuyahoga County, 17% of male adults are current smokers¹ and 51% have stopped smoking for one or more days in the past 12 months because they were trying to quit. (Source: 2012 Cuyahoga County Health Assessment)
- ♦ ODH reports that lung cancer was the leading cause of female cancer deaths (n=3,656) in Cuyahoga County from 2000-2008 followed by breast (n=2,327) and colon & rectum (n=1,522) cancers.
- Approximately 19% of female adults in the county are current smokers<sup>1</sup> and 64% have stopped smoking for one or more days in the past 12 months because they were trying to quit. (Source: 2012 Cuyahoga County Health Assessment)
- ◆ According to the American Cancer Society, smoking causes 80% of lung cancer deaths in the U.S. In addition, individuals living with smokers have a 30% greater risk of developing lung cancer than those who do not have smokers living in their household. Working in an environment with tobacco smoke also increases the risk of lung cancer. (Source: American Cancer Society Facts & Figures 2012)

<sup>&</sup>lt;sup>1</sup>Have smoked over 100 cigarettes in lifetime and currently smoke some or all days.

## Cancer

## **Breast Cancer**

- ◆ In 2012, 58% of Cuyahoga County females reported having had a clinical breast examination in the past year.
- 56% of Cuyahoga County females over the age of 40 had a mammogram in the past year.
- ♦ If detected early, the 5-year survival rate for breast cancer is 90%. (Source: American Cancer Society Facts & Figures 2012)
- For women in their 20s and 30s, a clinical breast exam should be done at least once every 3 years. Mammograms for women in their 20s and 30s are based upon increased risk (e.g., family history, past breast cancer) and physician recommendation. Otherwise, annual mammography is recommended, beginning at age 40. (Source: American Cancer Society Facts & Figures 2012)
- ♦ Breast cancer can also occur in males. (Source: American Cancer Society Facts & Figures 2012) Males account for about 1% of all breast cancer deaths.

#### Colon and Rectum Cancer

- ◆ The American Cancer Society recognizes any cancer involving the esophagus, stomach, small intestine, colon, rectum, anus (anal canal & anorectum), liver, gallbladder or pancreas as a digestive cancer.

  Digestive cancers accounted for 24% of all cancer deaths in Cuyahoga County from 2000-2008. (Source: ODH Information Warehouse)
- ◆ The American Cancer Society reports several risk factors for colorectal cancer including: age; personal or family history of colorectal cancer, polyps, or inflammatory bowel disease; obesity; physical inactivity; a diet high in red or processed meat; alcohol use; long-term smoking; and possibly very low intake of fruits and vegetables.
- ♦ In the U.S., most cases of colon cancers occur in individuals over the age of 50. Because of this, the American Cancer Society suggests that every person over the age of 50 have regular colon cancer screenings. In 2012, 57% of Cuyahoga County adults over the age of 50 reported having been screened for colorectal cancers in the past 5 years.

#### **Prostate Cancer**

- In 2012, 46% of Cuyahoga County males over the age of 50 had a PSA test in the past year.
- ♦ The Ohio Department of Health statistics indicate that prostate cancer deaths accounted for 12% of all male cancer deaths from 2000-2008 in Cuyahoga County.
- ♦ African American men are twice as likely as white American men to develop prostate cancer and are more likely to die of prostate cancer. In addition, about 60% of prostate cancers occur in men over the age of 65, and 97% occur in men 50 and older. Other risk factors include strong familial predisposition, diet high in processed meat or dairy foods, and obesity. Prostate cancer is more common in North America and Northwestern Europe than in Asia and South America. (Source: Cancer Facts & Figures 2012, The American Cancer Society)

#### 2012 Cancer Estimations

- ❖ In 2012, about 1,638,910 new cancer cases are expected to be diagnosed. About 577,190 Americans are expected to die of cancer in 2012.
- ❖ In Ohio, 66,560 new cases of cancer are expected.
- ❖ Ohio female, new breast cancer cases are expected to be 8,990.
- ❖ 173,200 cancer deaths will be caused by tobacco use.
- About 15% of all new cancer cases in Ohio are expected to be from lung and bronchus cancers.
- Ohio male, new prostate cancer cases are expected to be 8,560.
- ❖ In the U.S., 29% of male and 26% of female estimated cancer deaths are expected to be from lung and bronchus cancers.

(Source: American Cancer Society, Facts and Figures 2012)

## Cancer

# Cuyahoga County Cancer Deaths 2000-2008

	Number of Cancer	Percent of Total
Type of Cancer	Deaths	Cancer Deaths
Trachea, Lung and Bronchus	8,181	27%
Other/Unspecified	3,587	12%
Colon, Rectum & Anus	2,971	10%
Breast	2,350	8%
Prostate	1,860	6%
Pancreas	1,793	6%
Non-Hodgkins Lymphoma	1,163	4%
Leukemia	1,102	4%
Bladder	779	3%
Liver and Bile Ducts	765	3%
Stomach	759	3%
Esophagus	745	2%
Ovary	704	2%
Multiple Myeloma	690	2%
Kidney and Renal Pelvis	625	2%
Brain and CNS	570	2%
Cancer of Corpus Uteri	502	2%
Lip, Oral Cavity & Pharynx	428	1%
Melanoma of Skin	269	< 1%
Larynx	235	< 1%
Cancer of Cervix Uteri	180	< 1%
Hodgkins Disease	85	< 1%
Unspecified Lymphatic	5	< 1%
Total	30,348	100%

(Source: ODH Information Warehouse, updated 4-15-10)

## Cuyahoga County Number of Cancer Cases, 2000-2007

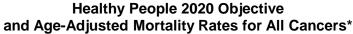
Year	All Sites	Breast	Colon & Rectum	Lung	Prostate
2000	7,862	1,241	913	1,216	1,089
2001	7,875	1,124	885	1,189	1,217
2002	7,648	1,137	893	1,124	1,165
2003	7,348	989	800	1,175	998
2004	7,499	1,042	862	1,124	995
2005	7,811	1,119	796	1,191	1,059
2006	7,588	1,048	820	1,152	1,050
2007	7,248	1,079	698	1,091	1,097

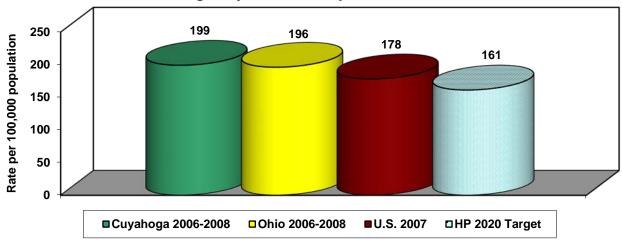
(Source: Ohio Cancer Incidence Surveillance System, 2000-2007)

#### Cancer

The following graphs show the Cuyahoga 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, and cancer as a percentage of total deaths in Cuyahoga County by gender. The graphs indicate:

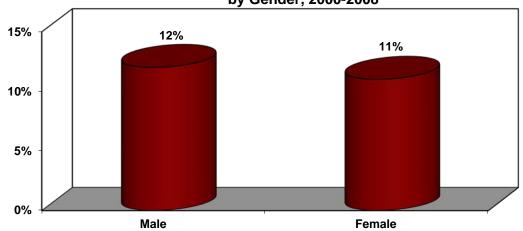
- ♦ When age differences are accounted for, Cuyahoga County had a higher cancer mortality rate than Ohio, the U.S. and the Healthy People 2020 target objective.
- ♦ The percentage of Cuyahoga County males who died from all cancers from 2000 to 2008 was slightly higher than the percentage of Cuyahoga County females who died from all cancers.





\*Age-adjusted rates/100,000 population, 2000 standard (Source: ODH Information Warehouse, updated 4-15-10; Healthy People 2020)

Cancer As Percent of Total Deaths in Cuyahoga County by Gender, 2000-2008



(Source: ODH Information Warehouse, updated 4-15-10)

#### **Diabetes**

#### **Key Findings**

In 2012, 9% of Cuyahoga County adults had been diagnosed with diabetes. A major risk factor is obesity.

#### **Diabetes**

- ◆ The 2012 health assessment project has identified that 9% of Cuyahoga County adults had been diagnosed with diabetes, increasing to 14% of those over the age of 65. The 2011 BRFSS reports an Ohio prevalence of 11% and 10% for the U.S.
- ♦ 5% of adults had been diagnosed with prediabetes.

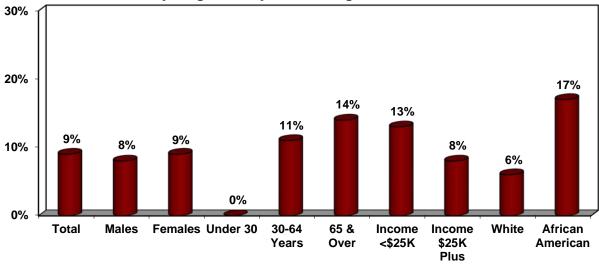
#### **Diabetes Facts**

- Diabetes was the 7th leading cause of death in Cuyahoga County from 2006-2008.
- Diabetes was the 7th leading cause of death in Ohio from 2006-2008.
- ❖ From 2006-2008, the Cuyahoga County ageadjusted mortality rate per 100,000 for diabetes was 27.2 deaths for males (34.5 Ohio) and 19.3 (24.4 Ohio) deaths for females.

(Source: ODH Information Warehouse, updated 4-15-10)

- ♦ Those with diabetes were using the following to treat it: diabetes pills (70%), checking their blood sugar (63%), diet control (62%), exercise (40%), and insulin (26%).
- Adults with diabetes visited a doctor, nurse or other health professional for their diabetes an average of 3.6 times in the past year.
- Most (96%) adults with diabetes felt that they had received enough information about how to manage their diabetes.
- Nearly half (45%) of adults with diabetes rated their health as fair or poor.
- Cuyahoga County adults diagnosed with diabetes also had one or more of the following characteristics or conditions:
  - o 93% were obese or overweight
  - o 67% had been diagnosed with high blood pressure
  - o 67% had been diagnosed with high blood cholesterol

#### **Cuyahoga County Adults Diagnosed with Diabetes**



2012 Adult Comparisons	Cuyahoga County 2012	Ohio 2011	U.S. 2011
Diagnosed with diabetes	9%	11%	10%

#### **Diabetes**

#### Prevalence of Diabetes (data from the 2011 National Diabetes Fact Sheet)

- ❖ A total of 25.8 million children and adults in the United States (8.3% of the population) have diabetes
- ❖ 18.8 million people have been diagnosed; 7 million are estimated to be undiagnosed
- ❖ 79 million people have pre-diabetes
- ❖ 1.9 million new cases of diabetes were diagnosed in people aged 20 years and older in 2010

#### Race and Diabetes Prevalence (U.S. 2007-2009 survey data)

- 7.1% of Whites
- ❖ 8.4% of Asian Americans
- ❖ 12.6% of African Americans
- ❖ 11.8% of Hispanics
  - ❖ 7.6% for Cubans
  - ❖ 13.3% for Mexican Americans
  - ❖ 13.8% for Puerto Ricans

#### Who is at Greater Risk for Type 2 Diabetes (American Diabetes Association)

- ❖ People with impaired glucose tolerance (IGT) and/or impaired fasting glucose (IFG)
- People over age 45
- People with a family history of diabetes
- ❖ People who are overweight or obese
- People who do not exercise regularly
- ❖ People with low HDL cholesterol or high triglycerides, high blood pressure
- Certain racial and ethnic groups (e.g. Non-Hispanic Blacks, Hispanic/Latino Americans, Asian Americans and Pacific Islanders, and American Indians and Alaska Natives)
- ❖ Women who had gestational diabetes, or who have had a baby weighing 9 pounds or more at birth

#### **Complications from Diabetes**

- ❖ Heart disease and stroke Adults with diabetes have heart disease death rates about 2 to 4 times higher than adults without diabetes
- ❖ High blood pressure In 2005-2008, of adults aged 20 years and older with self-reported diabetes, 67% had high blood pressure greater than or equal to 140/90 mmHg or used prescription medications for hypertension
- Blindness Diabetes is the leading cause of new cases of blindness among adults aged 20-74 years
- ❖ Kidney Disease Diabetes is the leading cause of kidney failure, accounting for 44% of new cases in 2008
- Nervous system disease (Neuropathy) About 60-70% of people with diabetes have mild to severe forms of nervous system damage.
- ❖ Amputation More than 60% of nontraumatic lower-limb amputations occur in people with diabetes.

#### Cost of Diabetes (U.S. data 2007)

- The total costs of diagnosed diabetes in the United States in 2007, was \$174 billion
- \$116 billion for direct medical costs
- \$58 billion for indirect costs (disability, work loss, premature mortality)

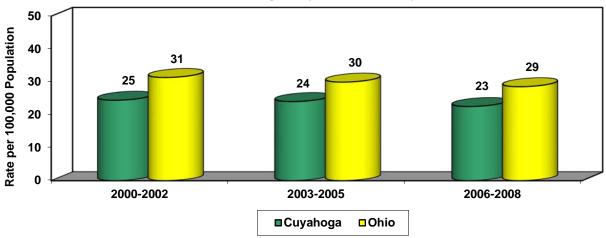
(Source: American Diabetes Association, Diabetes Basics, Your Risk: Who is at Greater Risk for Type 2 Diabetes, http://www.diabetes.org/diabetes-basics/prevention/risk-factors; & Diabetes Statistics, http://www.diabetes.org/diabetes-basics/diabetes-statistics/?loc=DropDownDB-stats)

#### **Diabetes**

The following graphs show age-adjusted mortality rates from diabetes for Cuyahoga County and Ohio residents with comparison to the Healthy People 2020 target objective.

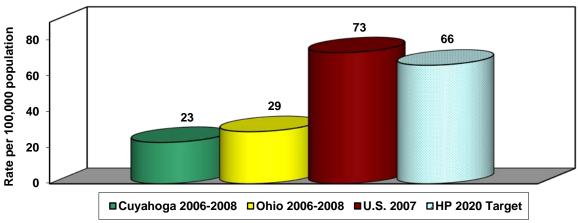
- Cuyahoga County's age-adjusted diabetes mortality rate decreased slightly from 2000 to 2008.
- From 2006 to 2008, both Cuyahoga County and Ohio's age-adjusted diabetes mortality rates were less than half of the national rate and the Healthy People 2020 target objective.

#### **Diabetes Age-Adjusted Mortality Rates**



(Source: ODH Information Warehouse, updated 4-15-10)

## Healthy People 2020 Objectives and Age-adjusted Mortality Rates for Diabetes



(Source: ODH Information Warehouse, updated 4-15-10 and Healthy People 2020, CDC)

#### **Arthritis**

#### **Key Findings**

According to the Cuyahoga County survey data, 34% of Cuyahoga County adults were diagnosed with arthritis. According to the 2011 BRFSS, 29% of Ohio adults and 24% of U.S. adults were told they have arthritis.

#### **Arthritis**

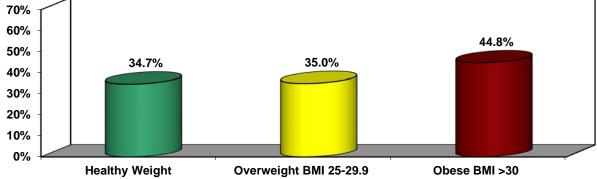
- ♦ More than one-third (34%) Cuyahoga County adults were told by a health professional that they had some form of arthritis.
- ♦ 64% of those over the age of 65 were diagnosed with arthritis.
- ◆ According to the 2011 BRFSS, 29% of Ohio adults and 24% of U.S. adults were told they have arthritis.
- ◆ About 1 in 5 U.S. adults have doctor diagnosed arthritis. Approximately 1 in 20 of working age adults reported that arthritis limited their work. (Source: CDC Arthritis at a Glance 2011)
- 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)

#### The Impact of Arthritis

- Arthritis is the most frequent cause of disability among adults in the United States, with osteoarthritis (OA) being the most common type.
- ♦ 67 million (25%) adults aged 18 years or older will have doctor-diagnosed arthritis by the year 2030.
- Data indicates that lack of exercise and age are marked risk factors for developing arthritis.
- Arthritis is a co-morbidity of diabetes, heart disease, high cholesterol, high blood pressure and obesity.
- Anxiety and depression can develop in people with diagnosed arthritis. Health care providers should screen all people with arthritis, for both anxiety and depression.

(Source: CDC, Arthritis Data and Statistics, 2011, http://www.cdc.gov/arthritis/data\_statistics.htm& Murphy, LB. 2012. "Anxiety and depression among US adults with arthritis: Prevalence and correlates," http://www.nchi.nlm.nih.gov/pubmed/22550055).

## Arthritis-Attributable Activity Limitations Increase with Weight



(Source for graph: Arthritis at a Glance 2011, Morbidity and Mortality Weekly Report 2010; 59(39):999-1003.)

2012 Adult Comparisons	Cuyahoga County 2012	Ohio 2011	U.S. 2011
Diagnosed with arthritis	34%	29%	24%

## Asthma and Other Respiratory Disease

#### **Key Findings**

According to the Cuyahoga County health assessment, 15% of Cuyahoga County adults had been diagnosed with asthma.

# Asthma and Other Respiratory Disease

- ◆ In 2012, 15% of Cuyahoga County adults had been diagnosed with asthma, increasing to 21% of females and African Americans.
- ♦ 14% of Ohio and U.S. adults have ever been diagnosed with asthma. (Source: 2011 BRFSS)
- ♦ 38% of those diagnosed with asthma had not taken any prescribed asthma medication in the past 30 days. 12% took asthma medication less than once a week, 10% took it once or twice a week, 9% took it more than twice a week, 10% used it once a day, and 20% took their asthma medication two or more times per day.

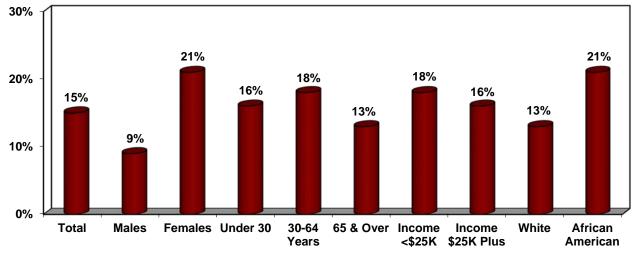
#### **Asthma Statistics**

- ♦ 1 in 2 people with asthma had an asthma attack in 2008.
- Asthma rates for African American children increased about 50% from 2001-2009.
- ♦ 185 children and 3,262 adults died from asthma in 2007.
- Asthma cost the US about \$3,300 per person with asthma each year from 2002 to 2007 in medical expenses.
- More than half (59%) of children and onethird (33%) of adults who had an asthma attack missed school or work because of asthma in 2008.
- On average, in 2008 children missed 4 days of school and adults missed 5 days of work due to asthma.

(Source: Centers for Disease Control, Vital Signs, Asthma in the US, Growing every year, http://www.cdc.gov/VitalSigns/pdf/2011-05-vitalsigns.pdf)

- ♦ There are several important factors that may trigger an asthma attack. Some of these triggers are secondhand smoke, dust mites, outdoor air pollution, cockroach allergens, pets, mold, infections linked to the flu, colds, and respiratory viruses. (Source: CDC- National Center for Environmental Health, 2011)
- ♦ Chronic lower respiratory disease was the 4<sup>th</sup> leading cause of death in Cuyahoga County and the 3<sup>rd</sup> leading cause of death in Ohio, from 2006-2008. (Source: ODH Information Warehouse)

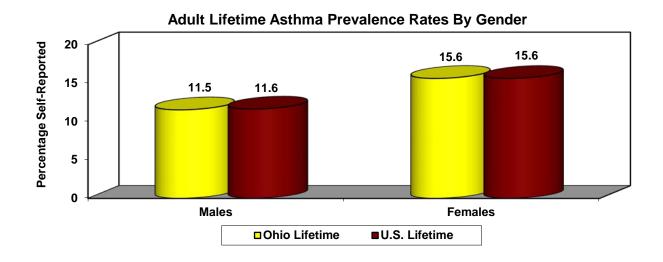
#### **Cuyahoga County Adults Diagnosed with Asthma**

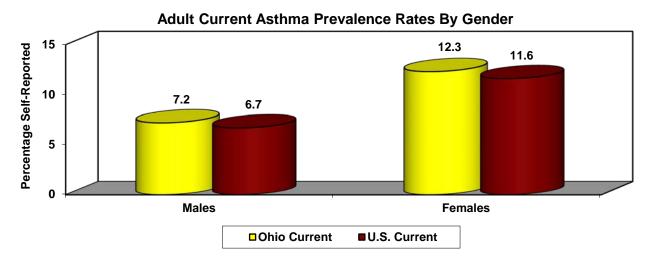


2012 Adult Comparisons	Cuyahoga County 2012	Ohio 2011	U.S. 2011
Had ever been diagnosed with asthma	15%	14%	14%

## Asthma and Other Respiratory Disease

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





(Source: 2011 BRFSS)

#### **Chronic Respiratory Conditions**

- Asthma is a chronic lung disease that inflames and narrows airways. It can cause recurring periods of wheezing, chest tightness, shortness of breath and coughing.
- Chronic bronchitis is a condition where the bronchial tubes (the tubes that carry air to your lungs) become inflamed. Bronchitis can cause wheezing, chest pain or discomfort, a low fever, shortness of breath and a cough that brings up mucus. Smoking is the main cause of chronic bronchitis.
- Chronic Obstructive Pulmonary Disorder (COPD) is a disease that over time makes it harder to breathe. COPD can cause large amounts of mucus, wheezing, shortness of breath, chest tightness, and other symptoms. Smoking is the main cause of COPD.

(Source: National Heart, Lung, Blood Institute, 2011)

## **Adult Weight Status**

#### **Key Findings**

The 2012 Health Assessment identified that 67% of Cuyahoga County adults were overweight or obese based on Body Mass Index (BMI). The 2011 BRFSS indicates that 30% of Ohio and 28% of U.S. adults were obese by BMI. Nearly one-fourth (24%) of Cuyahoga County adults were obese. Two-fifths (40%) of adults were trying to lose weight.

### **Adult Weight Status**

◆ In 2012, the health assessment indicated that twothirds (67%) of Cuyahoga County adults were either overweight (43%) or obese (24%) by Body Mass Index (BMD). This puts them at elevated risk for dex

keep from gaining weight, and 4% were trying to gain weight.

- Index (BMI). This puts them at elevated risk for developing a variety of diseases.

  ◆ Two-fifths (40%) of adults were trying to lose weight, 36% were trying to maintain their current weight or
- ◆ Cuyahoga County adults did the following to lose weight or keep from gaining weight: exercised (52%), ate less food, fewer calories, or foods low in fat (49%), ate a low-carb diet (11%), used a weight loss program (4%), took diet pills, powders, or liquids without a doctor's advice (3%), smoked cigarettes (2%), went without eating 24 or more hours (2%), participated in a dietary or fitness program (2%), took prescribed medications (1%), and vomited or took laxatives (1%).

### **Physical Activity**

- ◆ In Cuyahoga County, 60% of adults were engaging in some type of exercise or physical activity for at least 30 minutes 3 or more days per week. 35% of adults were exercising 5 or more days per week. One-fifth (20%) of adults were not participating in any physical activity in the past week, including those who were unable to exercise.
- ♦ Reasons for not exercising included: too tired (22%), laziness (21%), time (20%), pain/discomfort (11%), weather (9%), chose not to exercise (9%), could not afford a gym membership (5%), no childcare (2%), did not know what activity to do (2%), safety (2%), no walking/biking trails (1%), no gym available (1%), doctor advised them not to exercise (1%), no sidewalks (<1%), and other (4%).
- ◆ The CDC recommends that adults participate in moderate exercise for at least 2 hours and 30 minutes every week or vigorous exercise for at least 1 hour and 15 minutes every week. Whether participating in moderate or vigorous exercise, CDC also recommends muscle-strengthening activities that work all major muscle groups on 2 or more days per week (Source: CDC, Physical Activity for Everyone)

#### Nutrition

- ♦ In 2012, 6% of adults were eating 5 or more servings of fruits and vegetables per day. 90% were eating between 1 and 4 servings per day. The American Cancer Society recommends that adults eat 5-9 servings of fruits and vegetables per day to reduce the risk of cancer and to maintain good health. The 2009 BRFSS reported that only 21% of Ohio adults and 23% nationwide were eating the recommended number of servings of fruits and vegetables.
- ◆ Adults at out in a restaurant or brought home take-out food an average of 1.9 times per week.
- ◆ Cuyahoga County adults got their fruits and vegetables from the following places: large grocery store (63%), local grocery store (56%), Farmer's Market (36%), restaurants (4%), corner store (2%), food pantry (1%), and other places (9%).
- Cuyahoga County adults reported the following reasons they choose the types of food they eat: taste (66%), healthiness of food (62%), cost (58%), enjoyment (54%), availability (41%), ease of preparation (35%), food that they are use to (32%), calorie content (26%), what their spouse prefers (25%), time (23%), what their child prefers (13%), health care provider's advice (5%), and other (5%).

#### **Obesity Statistics**

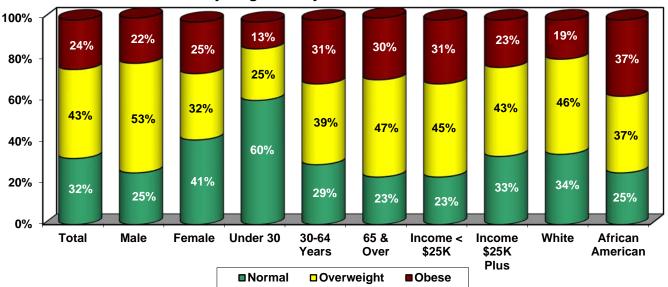
- More than 72 million U.S. adults are obese.
- Persons who are obese have medical costs that are \$1,429 higher than those who are normal weight.
- No state has an obesity rate less than 15%, the national goal.
- ❖ In nine states, over 30% of adults are obese.

(Source: CDC, Vital Signs, Adult Obesity: Obesity Rises Among Adults, http://nww.cdc.gov/VitalSigns/pdf/2010-08-vitalsigns.pdf)

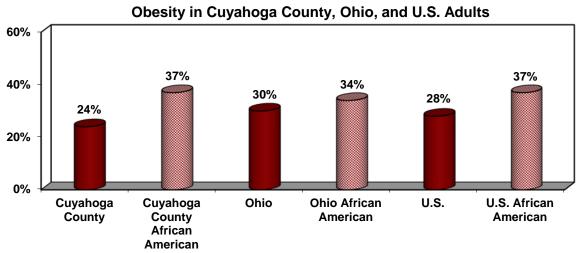
## **Adult Weight Status**

The following graphs show the percentage of Cuyahoga County adults who are overweight or obese by Body Mass Index (BMI) and the percentage of Cuyahoga County adults who are obese compared to Ohio and U.S. Examples of how to interpret the information include: 32% of all Cuyahoga County adults were classified as normal weight, 43% were overweight, and 24% were obese.

## Cuyahoga County Adult BMI Classifications



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



(Source: 2012 Cuyahoga County Health Assessment and 2011 BRFSS)

## Adult Weight Status

## Healthy People 2020 Obesity

Objective	Cuyahoga County 2012	Ohio 2011	U.S. 2011	Healthy People 2020 Target
NWS-9: Reduce the proportion of adults who are obese	14% age 18-24 15% age 25-34 26% age 35-44 36% age 45-54 32% age 55-64 30% age 65+	16% age 18-24 28% age 25-34 33% age 35-44 34% age 45-54 34% age 55-64 29% age 65+	16% age 18-24 26% age 25-34 31% age 35-44 33% age 45-54 33% age 55-64 25% age 65+	31%

\*U.S. baseline is age-adjusted to the 2000 population standard (Sources: Health People 2020 Objectives, 2011 BRFSS, 2012 Cuyahoga County Health Assessment)

2012 Adult Comparisons	Cuyahoga County 2012	Ohio 2011	U.S. 2011
Obese	24%	30%	28%
Overweight	43%	36%	36%

### **Key Findings**

In 2012, 19% of Cuyahoga County adults were current smokers and 31% were considered former smokers. In 2011, the American Cancer Society (ACS) stated that tobacco use was the most preventable cause of disease and early death in the world, accounting for approximately 5.4 million premature deaths each year. ACS estimated that tobacco use would be linked to approximately one in five deaths in the U.S. (Source: Cancer Facts & Figures, American Cancer Society, 2011)

#### **Adult Tobacco Use Behaviors**

♦ The 2012 health assessment identified that nearly one-fifth (19%) of Cuyahoga County adults were current smokers (those who indicated smoking at least 100 cigarettes in their lifetime and currently smoke some or

#### Tobacco Use and Health

- Tobacco use is the most preventable cause of death in the U.S. and in the world
- ♦ 87% of all lung cancer deaths and at least 30% of all cancer deaths in the U.S. can be attributed to smoking.
- When compared to non-smokers, the risk of developing lung cancer is 23 times higher in male smokers and 13 times higher in female smokers.
- Tobacco use is also associated with at least 20 types of cancer such as cervical, mouth, pharyngeal, esophageal, pancreatic, kidney and bladder.
- Tobacco use contributes to heart disease, stroke, bronchitis, emphysema, COPD, chronic sinusitis, severity of colds, pneumonia and low birth weight in infants.

(Source: Cancer Facts & Figures, American Cancer Society, 2011)

- all days). The 2011 BRFSS reported current smoker prevalence rates of 25% for Ohio and 21% for the U.S.
- ♦ Nearly one-third (31%) of adults indicated that they were former smokers (smoked 100 cigarettes in their lifetime and now do not smoke). The 2011 BRFSS reported former smoker prevalence rates of 25% for Ohio and the U.S.
- Cuyahoga County adult smokers were more likely to:
  - o Have rated their health as poor (47%)
  - o Have incomes less than \$25,000 (29%)
  - o Have been under the age of 30 (23%)
- ◆ Cuyahoga County adults used the following tobacco products in the past year: cigarettes (26%), cigars (7%), Black and Milds (5%), e-cigarettes (2%), chewing tobacco (2%), cigarillos (2%), swishers (1%), snuff (1%), little cigars (1%), flavored cigarettes (1%), hookah (1%), and snus (<1%).
- 56% of current smokers responded that they had stopped smoking for at least one day in the past year because they were trying to quit smoking.

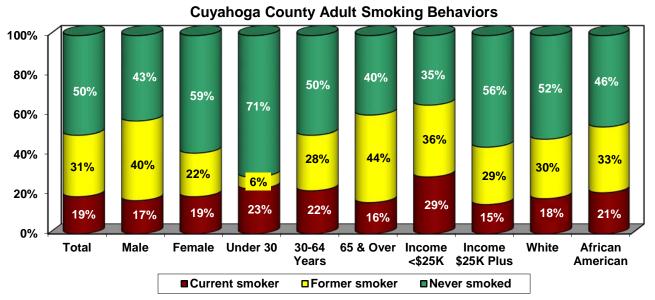
#### Costs of Tobacco Use

- ❖ The average price for a pack of cigarettes in the United States is \$5.98.
- ♦ If a pack-a-day smoker spent approximately \$6/pack, they would spend: \$42/week, \$168/month, or \$2,190/year.
- There are 990,685 adults 18 years old and older living in Cuyahoga County.
- 19% of Cuyahoga County adults indicated they were smokers. That is approximately 188,230 adults.
- ♦ If 188,230 adults spent \$2,190/year, then \$412,223,700 is spent a year on cigarettes in Cuyahoga County.

(Source: Campaign for Tobacco-Free Kids, State Cigarette Excise Tax Rates & Rankings, accessed from: http://www.tobaccofreekids.org/research/factsheets/pdf/0097.pdf and 2012 Cuyahoga County Health Assessment, American Community Survey)

2012 Adult Comparisons	Cuyahoga County 2012	Ohio 2011	U.S. 2011
Current smoker	19%	25%	21%
Former smoker	31%	25%	25%

The following graph shows the percentage of Cuyahoga County adults who used tobacco. Examples of how to interpret the information include: 19% of all Cuyahoga County adults were current smokers, 31% of all adults were former smokers, and 50% had never smoked.



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?"

#### Smoking and Tobacco Facts

- Tobacco use is the most preventable cause of death in the U.S.
- Approximately 49,000 deaths per year in the U.S. are from secondhand smoke exposure.
- Typically, smokers die 13 to 14 years earlier than non-smokers.
- ♦ In 2009, cigarette smoking was highest in prevalence in adults among American Indians/Native Americans (23%), followed by whites (22.1%), African Americans (21.3%), Hispanics (14.5%), and Asians (12.0%).
- Smoking costs over \$193 billion in lost productivity (\$97 billion) and health care expenses (\$96 billion) per year.
- In 2006, the cigarette industry spent more than \$34 million per day on advertising and promotional expenses.

(Source: CDC: Fast Facts on Smoking and Tobacco Use, accessed from http://www.cdc.gov/tobacco/data\_statistics/fact\_sheets/fast\_facts/index.htm)

#### Flavored Cigar Smoking among U.S. Adults

Cigars contain the same toxic and cancer-causing chemicals found in cigarettes; they are not a safe alternative to cigarettes. Health consequences of regular cigar smoking can include cancers of the lung, larynx, oral cavity, and esophagus. Those who inhale cigar smoke and who smoke multiple cigars a day are also at increased risk for developing heart disease and COPD.

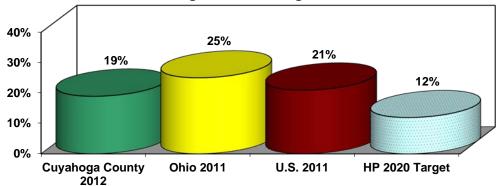
- From 2009-2010, 6.6% of adults in the U.S. smoke cigars and 2.8% smoke flavored cigars.
- Nearly 43% of all adult cigar smokers in the U.S. report using flavored cigars.
- More than 57% of cigar smokers in the 18-24 year-old age group, say they smoke flavored cigars.
- Flavored cigar smoking was more common among those with a General Education Development (GED) (65%), and those with annual household income under \$20,000 (52%).
- Flavored cigar use was higher among Hispanic cigar smokers (62%); higher among female cigar smokers (61%); and higher among Lesbian, Gay, Bisexual, Transgendered (LGBT) cigar smokers (67%).

(Source: Nicotine & Tobacco Research, "Flavored Cigar Smoking Among U.S. Adults: Findings From the 2009-2010 National Adult Tobacco Survey," published August 27, 2012)

The following graphs show Cuyahoga County, Ohio, and U.S. adult cigarette smoking rates and age-adjusted mortality rates per 100,000 population for chronic lower respiratory diseases (formerly COPD) and trachea, bronchus and lung cancers in comparison with the Healthy People 2020 objectives. The BRFSS rates shown for Ohio and the U.S. were for adults 18 years and older. These graphs show:

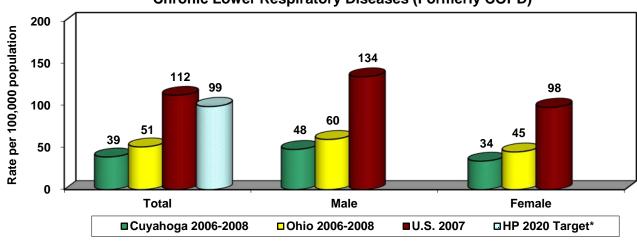
- ♦ Cuyahoga County adult cigarette smoking rate was lower than the rate for Ohio and the U.S. and higher than the Healthy People 2020 Goal.
- ♦ From 2006-2008, Cuyahoga County's age-adjusted mortality rate for Chronic Lower Respiratory Disease was lower than the Ohio rate, the U.S. rate, and the Healthy People 2020 target objective.
- ♦ From 2006-2010 the percentage of mothers who smoked during pregnancy in Cuyahoga County decreased slightly overall and generally remained below the Ohio rates.
- Disparities existed by gender for Cuyahoga County trachea, bronchus, and lung cancer age-adjusted mortality rates, as well as chronic lower respiratory disease mortality rates. The 2006-2008 Cuyahoga male rates were higher than the Cuyahoga female rates in both cases.

# Healthy People 2020 Objective and Cigarette Smoking Rates



(Source: 2012 Assessment, 2011 BRFSS and Healthy People 2020)

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

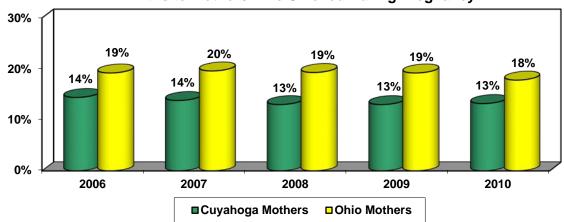


(Source: ODH Information Warehouse and Healthy People 2020)

\* Healthy People 2020's target rate and the U.S. rate is for adults aged 45 years and older.

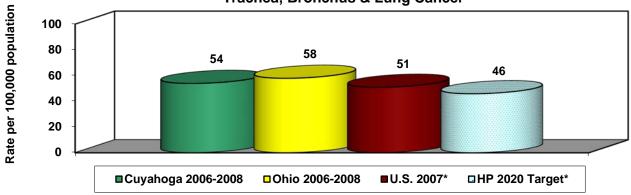
\*\*HP2020 does not report different goals by gender.

#### **Births to Mothers Who Smoked During Pregnancy**



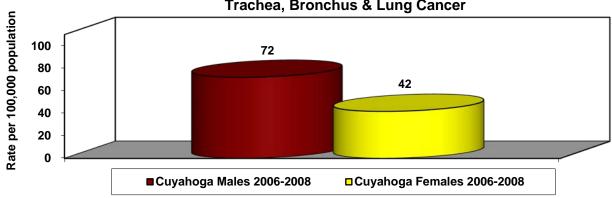
(Source: ODH Births, Vital Statistics Annual Birth Summaries by Year, 2006-2010)

## Age-Adjusted Mortality Rates for Trachea, Bronchus & Lung Cancer



\*Healthy People 2020 Target and U.S. 2007 data are for lung cancer only (Source: Healthy People 2020, ODH Information Warehouse, updated 4-15-10)

## Age-Adjusted Mortality Rates by Gender for Trachea, Bronchus & Lung Cancer



(Source: ODH Information Warehouse, updated 4-15-10)

## Adult Alcohol Consumption

#### **Key Findings**

In 2012, the Health Assessment indicated that 18% of Cuyahoga County adults were considered frequent drinkers (drank an average of three or more days per week, per CDC guidelines). 42% of adults who drank had five or more drinks (for males) and 4 or more drinks (for females) on one occasion (binge drinking) in the past month. 11% of adults drove after having perhaps too much to drink.

# Cuyahoga County Adult Alcohol Consumption

- In 2012, nearly three-fifths (59%) of the Cuyahoga County adults had at least one alcoholic drink in the past month, increasing to 67% of those under the age of 30 and those with incomes more than \$25,000. The 2011 BRFSS reported current drinker prevalence rates of 56% for Ohio and 57% for the U.S.
- Nearly one-fifth (18%) adults were considered frequent drinkers (drank on an average of three or more days per week).
- Of those who drank, Cuyahoga County adults drank 2.9 drinks on average, increasing to 3.7 drinks for males.
- ◆ About one in four (24%) of all Cuyahoga County adults were considered binge drinkers. The 2011 BRFSS reported binge drinking rates of 20% for Ohio and 18% for the U.S.
- 42% of those current drinkers reported they had five or more alcoholic drinks (for males) or 4 or more drinks (for females) on an occasion in the last month and would be considered binge drinkers by definition (See box above).
- Cuyahoga County adults experienced the following: drank more than they expected (10%), spent a lot of time drinking (2%), gave up other activities to drink (2%), drank more to get the same effect (1%), tried to quit or cut down but could not (1%), continued to drink despite problems caused by drinking (1%), and drank to ease withdrawal symptoms (1%).
- 3% of Cuyahoga County adults have used a program or service to help with alcohol or other drug problems for either themselves or a loved one. Reasons for not using such a program included: had not thought of it (4%), did not know how to find a program (1%), stigma of seeking alcohol services (1%), did not want to miss work (1%), could not afford to go (1%), fear (1%), transportation (<1%), and other reasons (1%). 90% of adults indicated they did not need a program or service to help with alcohol or other drug problems.
- 11% of adults reported driving after having perhaps too much to drink, increasing to 15% of males.

2012 Adult Comparisons	Cuyahoga County 2012	Ohio 2011	U.S. 2011
Drank alcohol at least once in past month	59%	56%	57%
Binge drinker (drank 5 or more drinks for males and 4 or more for females on an occasion)	24%	20%	18%

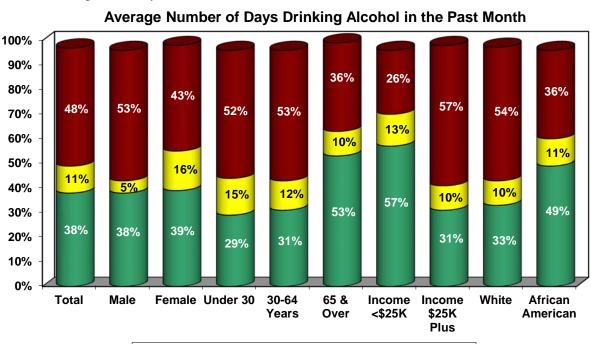
#### Binge Drinking

- Binge drinking is defined as men drinking five or more drinks or women drinking 4 or more drinks on one occasion or in a short period of time.
- The age group with the most binge drinkers is those 18-34 years old.
- The age group that binge drinks most often is those over the age of 65.
- More than 50% of the alcohol adults drink is done while binge drinking.
- More than 90% of the alcohol that youth drink is done while binge drinking.
- Most people who binge drink are not alcohol dependent or alcoholics.
- Binge drinking can lead to more than 54 different injuries and diseases, including car crashes, violence and STDs.

(Source: CDC, National Center for Chronic Disease Prevention and Health Promotion, Vital Signs, Binge Drinking, January 2012)

## **Adult Alcohol Consumption**

The following graphs show the percentage of Cuyahoga County adults consuming alcohol and the amount consumed on average. Examples of how to interpret the information shown on the first graph include: 38% of all Cuyahoga County adults did not drink alcohol, 38% of Cuyahoga County males did not drink and 39% of adult females reported they did not drink.

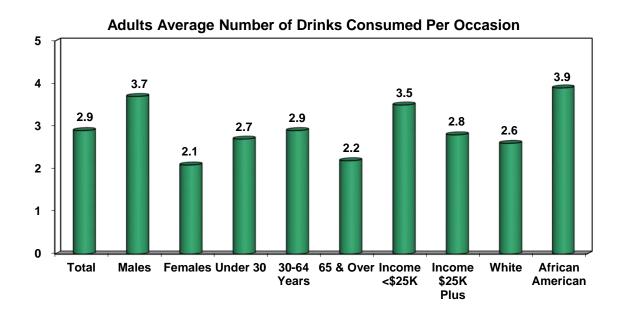


Percentages may not equal 100% as some respondents answered "don't know".

□1-2 days

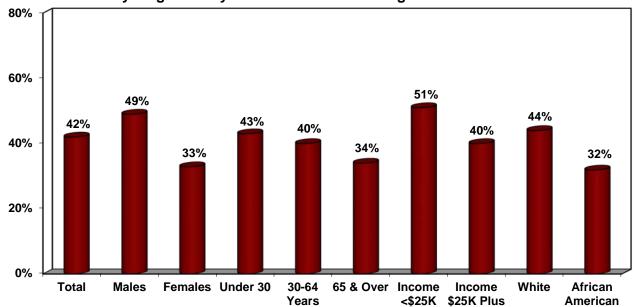
■3 or more days

■ Did not drink any

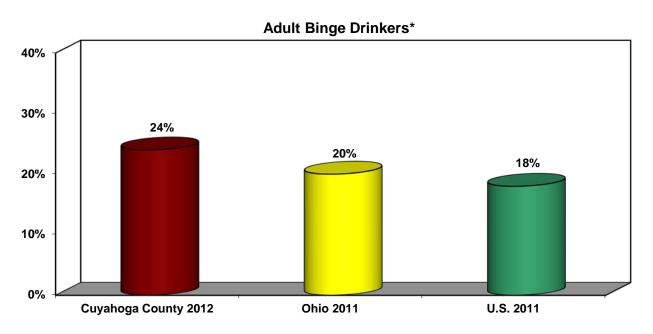


## **Adult Alcohol Consumption**





\*Based on adults who have drunk alcohol in the past month. Binge drinking is defined as having five or more drinks (for males) or four or more drinks (for females) on an occasion. Adults must have reported drinking five or more drinks (for males) or four or more drinks (for females) on an occasion at least once in the previous month.



(Source: 2011 BRFSS, 2012 Cuyahoga County Health Assessment)
\*Based on all adults. Binge drinking is defined as males having five or more drinks on an occasion, females having four or more drinks on one occasion.

## **Cuyahoga County Crash Statistics**

The following table shows select cities in Cuyahoga County, Cuyahoga County, and Ohio motor vehicle accident statistics for 2011. The table shows:

- ♦ 38% of all fatal crashes in Cuyahoga County were alcohol-related.
- ♦ 71% of all crashes in Cuyahoga County in 2011 were property damage only.
- ♦ 20% of the fatal crashes in Cuyahoga County in 2011 were at a four-way intersection. (Source: ODPS, Crash Reports, 2011 Traffic Crash Facts: Location by Crash Severity)

	Olmsted Township 2011	City of Cleveland 2011	Cuyahoga County 2011	Ohio 2011
Total Crashes	104	13,824	31,984	292,330
Alcohol-Related Total Crashes	8	409	1,168	12,643
Fatal Crashes	1	26	61	1,015
Alcohol-Related Fatal Crashes	0	12	23	342
Alcohol Impaired Drivers in Crashes	8	409	1,168	12,643
Injury Crashes	16	3,966	8,422	72,345
Alcohol-Related Injury Crashes	3	190	479	5,220
Property Damage Only	87	9,328	22,825	215,040
Deaths	1	26	61	1,015
Alcohol-Related Deaths	0	16	27	369
Total Non-Fatal Injuries	23	6,440	12,728	106,173
Alcohol-Related Injuries	4	330	756	7,575

(Source: Ohio Department of Public Safety, Crash Reports, 2011 Traffic Crash Facts)

#### Caffeinated Alcoholic Beverages

- Drinkers who consume alcohol mixed with energy drinks are 3 times more likely to binge drink than drinkers who do not report mixing alcohol with energy drinks.
- Drinkers who consume alcohol with energy drinks are about twice as likely as drinkers who do not report mixing to report being taken advantage of sexually, to report taking advantage of someone else sexually, and to report riding with a driver who was under the influence of alcohol.
- Currently, more than 25 brands of caffeinated alcoholic beverages are sold in retail alcohol outlets, including convenience stores.

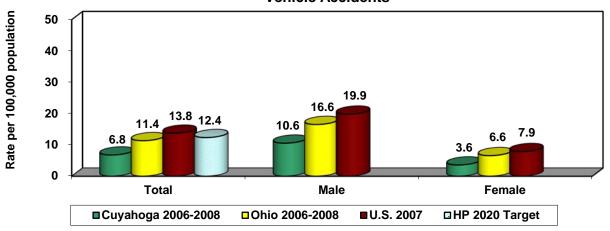
(Source: CDC, Alcohol and Public Health, Fact Sheets, Caffeinated Alcoholic Beverages, July 2010, http://www.cdc.gov/alcohol/fact-sheets/cab.htm)

#### **Motor Vehicle Accidents**

The following graphs show Cuyahoga County and Ohio age-adjusted motor vehicle accident mortality rates per 100,000 population with comparison to Healthy People 2020 objectives. The graphs show:

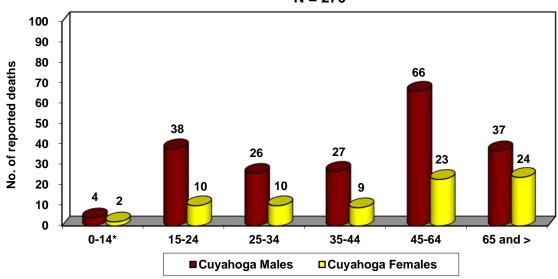
- ♦ From 2006-2008, the Cuyahoga County motor vehicle age-adjusted mortality rate of 6.8 deaths per 100,000 population was less than the state rate, the national rate, and the Healthy People 2020 objective.
- ♦ The Cuyahoga County age-adjusted motor vehicle accident mortality rate for males was higher than the female rate.
- ♦ 198 Cuyahoga County males died of motor vehicle accidents from 2006-2008 while 78 Cuyahoga County females died of motor vehicle accidents during the same period.

## Healthy People 2020 Objective and Age-Adjusted Mortality Rates for Motor Vehicle Accidents



(Source: ODH Information Warehouse, updated 4-15-10 and Healthy People 2020)

# Cuyahoga County Number of Motor Vehicle Deaths By Age and Gender, 2006-2008 N = 276



(Source: ODH Information Warehouse, updated 4-15-10)

## Adult Marijuana and Other Drug Use

#### **Key Findings**

In 2012, 9% of Cuyahoga County adults had used marijuana during the past 6 months. 9% 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

- ♦ 9% of Cuyahoga County adults had used marijuana in the past 6 months, increasing to 13% of those with incomes less than \$25,000.
- ♦ When asked about their frequency of marijuana and other recreational drugs in the past six months, 9% of Cuyahoga County adults who used drugs did so almost every day, and 32% did so less than once a month.
- ♦ 4% of Cuyahoga County adults reported using other recreational drugs such as cocaine, heroin, LSD, inhalants, and methamphetamines.

## Prescription Painkiller Overdoses in the U.S. Facts

- Approximately 12 million Americans (ages 12 and older) reported a non-medical use of prescription painkillers in the past year in 2010.
- Almost half of all ER visits in 2009 were due to people misusing or abusing prescription painkillers.
- There were enough prescription painkillers that were prescribed in 2010 to medicate every American adult around the clock for a month.
- The number of prescription painkiller overdose deaths is greater than the deaths from heroin and cocaine combined.
- Nonmedical use of prescription painkillers costs health insurers up to \$72.5 billion annually in direct medical costs.

(Source: CDC, National Center for Injury Prevention and Control, Prescription Painkiller Overdoses in the U.S., obtained from: http://www.cdc.gov/VitalSigns/pdf/2011-11-vitalsigns.pdf)

- 9% 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 10% of those ages 30-64 and 11% with incomes more than \$25,000.
- ♦ When asked about their frequency of medication misuse in the past six months, 33% of Cuyahoga County adults who used these drugs did so almost every day, and 44% did so less than once a month.

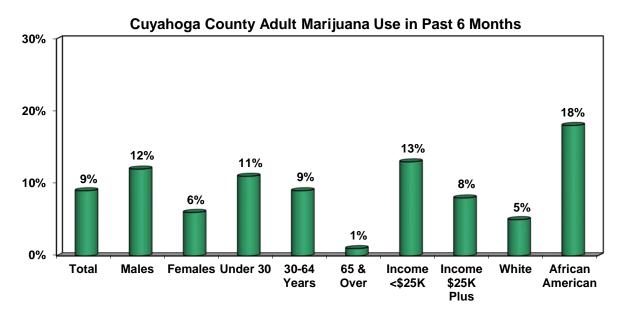
#### **Commonly Abused Prescription Drugs**

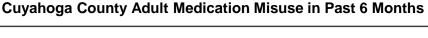
- Opiods—most often prescribed to relieve pain. Examples include: Codeine, Percocet, Darvon (Propoxyphene), Duragesic (Fentanyl), Dilaudid (Hydromorphone), Demerol (Meperidine), OxyContin (Oxycodone), and Vicodin (hydrocodone)
- Central Nervous System (CNS) Depressants-may be used to treat anxiety and sleep disorders. Examples include: Mebaral (mephobarbital), Nembutal (pentobarbital sodium), Valium (diazepam), Librium (chlordiazepoxide HCL), Xanax (alprazolam), and ProSom (estazolam)
- **Stimulants-**prescribed to treat narcolepsy, attention-deficit hyperactivity disorder (ADHD), asthma and obesity. Examples include: Dexedrine (dextroamphetamine), and Ritalin (methylphenidate)

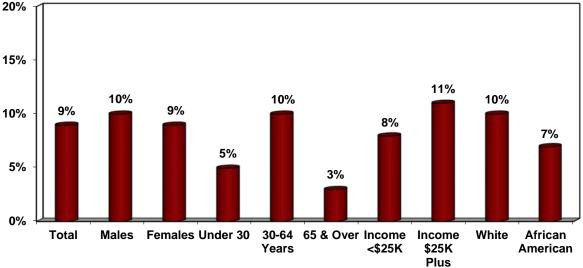
(Source: National Institute on Drug Abuse, www.nida.nih.gov)

## Adult Marijuana and Other Drug Use

The following graphs are data from the 2012 Cuyahoga County Health Assessment indicating adult marijuana use in the past six months and medication misuse. Examples of how to interpret the information include: 9% of all Cuyahoga County adults used marijuana in the past six months, 11% of adults under the age of 30 were current users and 13% of adults with incomes less than \$25,000 were current users.







#### **Key Findings**

In 2012, more than half (56%) of Cuyahoga County women over the age of 40 reported having a mammogram in the past year. 58% of Cuyahoga County women ages 19 and over have had a clinical breast exam and 45% had a Pap smear to detect cancer of the cervix in the past year. The Health Assessment determined that more than one-quarter (27%) of Cuyahoga County women had high blood pressure, 28% had high blood cholesterol, 25% were obese, and 19% were identified as smokers, known risk factors for cardiovascular diseases.

#### Women's Health Screenings

- ◆ In 2012, 63% of women had a mammogram at some time and more than one-third (38%) had this screening in the past year.
- ♦ More than half (56%) of women ages 40 and over had a mammogram in the past year and 72% had one in the past two years. The 2010 BRFSS reported that 75% of women 40 and over in the U.S. and 74% in Ohio, had a mammogram in the past two years.
- ♦ Most (89%) Cuyahoga County women have had a clinical breast exam at some time in their life and 58% had one within the past year.
- ♦ Nearly three-quarters (73%) of women ages 40 and over had a clinical breast exam in the past two years. The 2010 BRFSS reported that 77% of women 40 and over in the U.S. and 75% in Ohio, had a clinical breast exam in the past two years.
- ♦ This assessment identified that 91% of Cuyahoga County women had a Pap smear and 45% reported having had the exam in the past year. 76% of women had a pap smear in the past three years. The 2010 BRFSS indicated that 81% of U.S. and 82% of Ohio women had a pap smear in the past three years.

#### **Pregnancy**

- ♦ Women used the following as their usual source of services for female health concerns: private gynecologist (47%), general or family physician (22%), family planning clinic (4%), health department clinic (4%), community health center (4%), midwife (1%), nurse practitioner/physician's assistant (<1%), and some other place (1%). 10% indicated they did not have a usual source of services for female health concerns.
- ♦ 25% of Cuyahoga County women had been pregnant in the past 5 years.
- ◆ During their last pregnancy, Cuyahoga County women: took a multi-vitamin (74%), got a prenatal appointment in the first 3 months (71%), took folic acid (47%), experienced perinatal depression (9%), and looked for options for an unwanted pregnancy (9%).

#### Women's Health Concerns

- Major risk factors for cardiovascular disease include smoking, obesity, high blood cholesterol, high blood pressure, physical inactivity, and diabetes. In Cuyahoga County, the 2012 Health Assessment has identified that:
  - 57% were overweight or obese (57% U.S., 58% Ohio, 2011 BRFSS)
  - 28% were diagnosed with high blood cholesterol (37% U.S., 37% Ohio, 2011 BRFSS)
  - 27% were diagnosed with high blood pressure (30% U.S. and 32% Ohio, 2011 BRFSS)
  - 19% of all women were current smokers (19% U.S., 24% Ohio, 2011 BRFSS)
  - 8% have been diagnosed with diabetes (10% U.S., 11% Ohio, 2011 BRFSS)

#### Cuyahoga County Female Leading Types of Death, 2006 – 2008

- 1. Heart Diseases (30% of all deaths)
- 2. Cancers (22%)
- 3. Stroke (5%)
- 4. Chronic Lower Respiratory Diseases (5%)
- 5. Alzheimer's Disease (4%)

(Source: ODH Information Warehouse, updated 4-15-10)

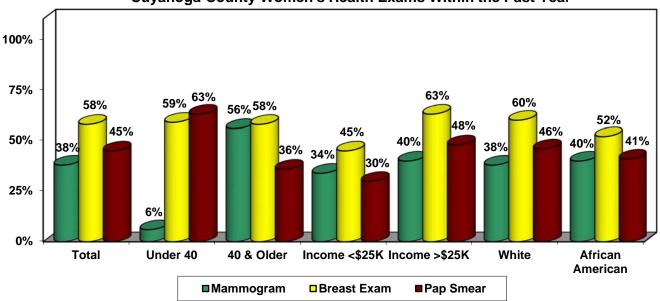
#### Ohio Female Leading Types of Death, 2006 – 2008

- 1. Heart Diseases (25% of all deaths)
- 2. Cancers (22%)
- 3. Stroke (6%)
- 4. Chronic Lower Respiratory Diseases (6%)
- 5. Alzheimer's disease (5%)

(Source: ODH Information Warehouse, updated 4-15-10)

The following graph shows the percentage of Cuyahoga County female adults that had various health exams in the past year. Examples of how to interpret the information shown on the graph include: 38% of Cuyahoga County females had a mammogram within the past year, 58% had a clinical breast exam, and 45% had a Pap smear.





#### Cancer and Women

- More women in the U.S. die from lung cancer than any other type of cancer. The most important thing you can do to prevent lung cancer is not to start smoking, or to quit if you smoke.
- ❖ Breast cancer is the most common cause of cancer and the second most common cause of cancer deaths in American women. Mammograms are the best way to find breast cancer early, before it can be felt, and when it is easier to treat.
- Colorectal cancer is the third leading cause of cancer deaths in America women. Screening tests can find precancerous polyps so they can be removed before they turn into cancer. Everyone should be tested for colorectal cancer regularly, starting at age 50.
- Gynecologic cancers (cervix, ovaries, and uterus) can be prevented by pap tests, which can find abnormal cells and detect cancer early.

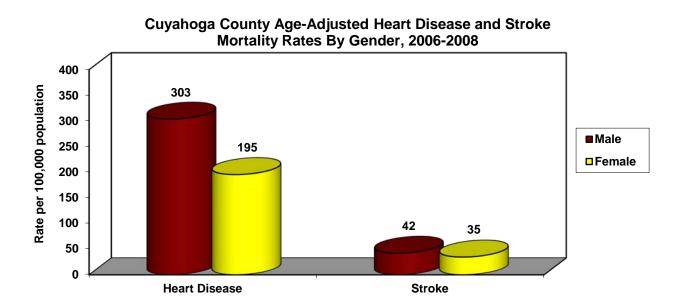
(Source: Center for Disease Control and Prevention, National Cancer Institute, 2010)

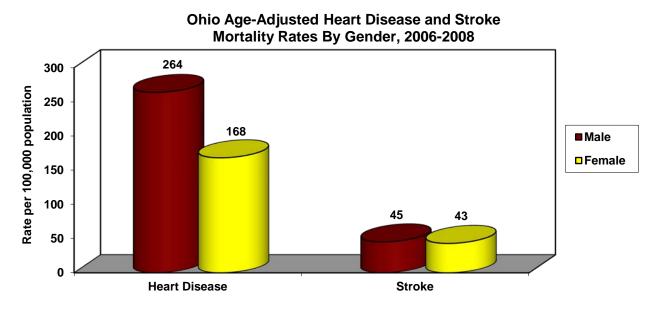
2012 Adult Comparisons	Cuyahoga County 2012	Ohio 2011	U.S. 2011
Had a clinical breast exam in the past two years (age 40 & over)	73%	75%*	77%*
Had a mammogram in the past two years (age 40 & over)	72%	74%*	75%*
Had a pap smear in the past three years	76%	82%*	81%*

<sup>\*2010</sup> BRFSS data

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

- ♦ From 2006-2008, the Cuyahoga County and Ohio female age-adjusted mortality rates were lower than the male rates for heart disease.
- ♦ The 2006-2008, Cuyahoga County stroke mortality rates for males and females were both lower than the state rates for males and females.

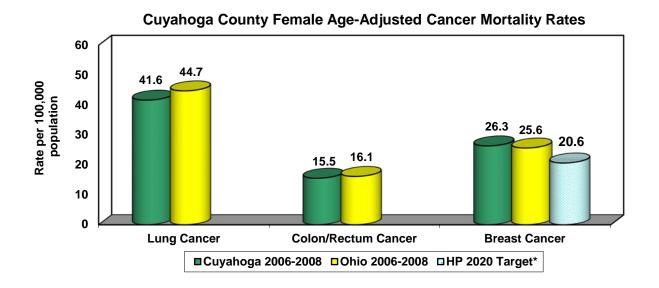


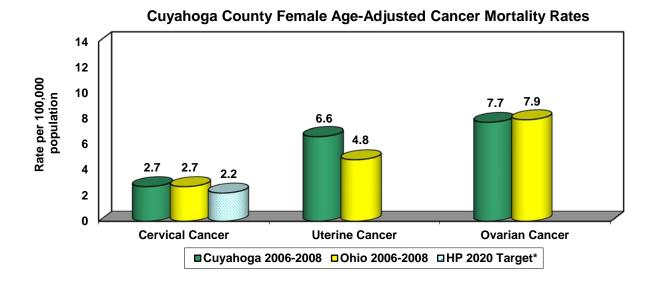


(Source for graphs: ODH Information Warehouse, updated 4-15-10)

The following graphs show the Cuyahoga County age-adjusted mortality rates per 100,000 population for women's health with comparison to Healthy People 2020 objectives when available. The graphs show:

- ♦ From 2006-2008, the Cuyahoga County age-adjusted mortality rate for female lung cancer was less than the Ohio rate.
- ♦ From 2006-2008, the Cuyahoga County age-adjusted breast cancer mortality rate was higher than the Ohio rate, and the Healthy People 2020 target objective.
- ◆ The Cuyahoga County age-adjusted cervical cancer mortality rate was the same as the Ohio rate.
- ♦ The Cuyahoga County age-adjusted uterine cancer mortality rate was greater than the state rate; while the ovarian and colon/rectum cancer mortality rates for 2006-2008 were both lower than the state rates.





\*Note: Healthy People 2020 target rates are not gender specific; Healthy People 2020 Targets may not be available for all diseases.

(Source: ODH Information Warehouse, updated 4-15-10, and Healthy People 2020)

#### Healthy People 2020 Cervical Cancer Screening

Objective	Cuyahoga County 2012	Ohio 2010	U.S. 2010	Healthy People 2020 Target
C-15: Increase the proportion of women who receive a cervical cancer screening based on the most recent guidelines (Pap smear in the past 3 years)	76%	82%	81%	93%

<sup>\*</sup>U.S. baseline is age-adjusted to the 2000 population standard (Sources: Health People 2020 Objectives, 2010 BRFSS, 2012 Assessment)

#### Human Papilloma Virus (HPV) and Vaccine

HPV is the most common sexually transmitted infection in the U.S., with 6.2 million people becoming newly infected annually. There are more than 100 types of HPV, more than 40 of which can infect the genitals. Most HPV infections are benign and transient; however, almost all cervical cancers are related to infections by HPV.

The Centers for Disease Control and Prevention report that every year in the U.S., about 11,000 women are diagnosed with cervical cancer and almost 4,000 of them die from this disease.

- Most cases of cervical cancer and all cases of genital warts are caused by human papillomavirus (HPV).
   70% of cervical cancers are caused by HPV types 16 and 18.
- There are two HPV vaccines available to protect against types 16, 18, and some other subtypes of HPV that cause cervical cancers. These vaccinations include:
  - o **Cervarix**: The Federal Food and Drug Administration (FDA) licensed Cervarix in 2009. This vaccine is recommended for females ages 10 through 25.
  - O Gardasil: The FDA licensed Gardasil in 2006. This vaccine is recommended for 11 and 12 year-old girls as well as females ages 13 through 26, who were not previously vaccinated. The vaccine protects females against HPV types 6, 11, 16, and 18. Gardasil is also recommended for 9 through 26 year-old males to protect against some genital warts.
- ❖ HPV vaccines are approximately \$130 per dose and are available in all 50 states through the Vaccine for Children (VFC) program, which covers vaccine costs for children and teens who do not have insurance and for some children and teens who are underinsured or eligible for Medicaid.

#### Recent data from the National Immunization Survey of Teens showed:

- Among US girls ages 13 to 17, uptake of the HPV vaccine initiation increased from 25.1% in 2007 to 48.7% in 2010.
- ♦ 32% or about one-third of girls had the complete three-shot vaccine series by 2010.
- Catch-up vaccine uptake improved for women between the ages of 13 and 26; from 10.5% in 2008 to 17.1% in 2009.
  - o Non-Hispanic women had the highest catch-up HPV vaccine uptake (19.8%) in 2009, followed were African American women (13.3%) and Hispanic women (12.6%).

(Sources: Centers for Disease Control and Prevention, Vaccine Safety, Human Papillomavirus (HPV) Vaccine, updated October 11, 2012, from http://www.cdc.gov/vaccinesafety/vaccines/HPV/Index.html and American Cancer Society. Cancer Prevention & Early Detection Facts & Figures 2012; p. 4041. Atlanta: American Cancer Society; 2012)

### **Key Findings**

In 2012, almost half (46%) of Cuyahoga County males over the age of 50 had a Prostate-Specific Antigen (PSA) test in the past year. More than two-fifths (44%) of males over the age of 50 had a digital rectal exam in the past year. Major cardiovascular diseases (heart disease and stroke) accounted for 34% and cancers accounted for 24% of all male deaths in Cuyahoga County from 2006-2008. The Health Assessment determined that 11% of men had survived a heart attack, and 3% had survived a stroke at some time in their life. Almost half (46%) of men had been diagnosed with high blood pressure, 46% had high blood cholesterol, and 17% were identified as smokers, which, along with obesity (22%), are known risk factors for cardiovascular diseases.

#### Men's Health Screenings

- ♦ More than half (51%) of Cuyahoga County males had a Prostate-Specific Antigen (PSA) test at some time in their life and 36% had one in the past year.
- ♦ More than three-fifths (62%) of men had a digital rectal exam in their lifetime and 34% had one in the past year.
- ♦ 73% of males age 50 and over had a PSA test at some time in their life, and 46% had one in the past year.
- ♦ 87% of males age 50 and over had a digital rectal exam at some time in their life, and 44% had one in the past year.
- ♦ 16% of men had been told by a doctor, nurse or other health professional they had prostate cancer.
- 34% of men had been taught by a healthcare professional how to do a self-testicular exam.

#### Men's Health Concerns

- ♦ From 2006-2008, major cardiovascular diseases (heart disease and stroke) accounted for 34% of all male deaths in Cuyahoga County (Source: ODH Information Warehouse).
- ♦ In 2012, the health assessment determined that 11% of men had a heart attack and 3% had a stroke at some time in their life.
- Major risk factors for cardiovascular disease include smoking, obesity, high blood cholesterol, high blood pressure, physical inactivity, and diabetes. In Cuyahoga County the 2012 health assessment has identified that:
  - 75% were overweight or obese (70% U.S., 74% Ohio, 2011 BRFSS)
  - 46% were diagnosed with high blood cholesterol (40% U.S., 41% Ohio, 2011 BRFSS)
  - 46% were diagnosed with high blood pressure (32% U.S., 34% Ohio, 2011 BRFSS)
  - 17% of all men were current smokers (24% U.S., 26% Ohio, 2011 BRFSS)
  - 7% have been diagnosed with diabetes (9% U.S., 10% Ohio, 2011 BRFSS)
- ♦ From 2006-2008, the leading cancer deaths for Cuyahoga County and Ohio males were lung, prostate, colorectal, and pancreas cancers (Source: ODH Information Warehouse).

#### Cuyahoga County Male Leading Types of Death, 2006 – 2008

- 1. Heart Diseases (30% of all deaths)
- 2. Cancers (24%)
- 3. Chronic Lower Respiratory Diseases (5%)
- 4. Accidents, Unintentional Injuries (5%)
- 5. Stroke (4%)

(Source: ODH Information Warehouse, updated 4-15-10)

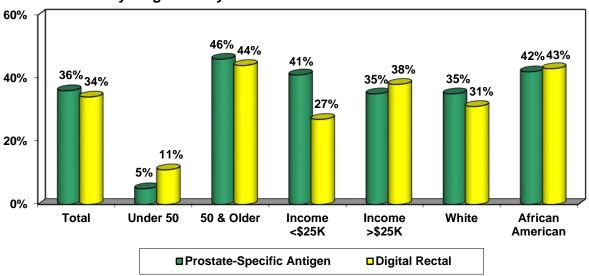
#### Ohio Male Leading Types of Death, 2006 – 2008

- 1. Heart Diseases (26% of all deaths)
- 2. Cancers (25%)
- 3. Chronic Lower Respiratory Diseases (6%)
- 4. Accidents, Unintentional Injuries (6%)
- 5. Stroke (4%)

(Source: ODH Information Warehouse, updated 4-15-10)

The following graph shows the percentage of Cuyahoga County males surveyed that have had a PSA test and digital rectal exam in the past year. Examples of how to interpret the information shown on the graph include: 36% of Cuyahoga County males have had a PSA test within the past year and 34% have had a digital rectal exam.





#### Men's Health Data

- Approximately 12% of U.S. adult males aged 18 years or older reported fair or poor health.
- 22% of adult males in the U.S. currently smoke.
- Of the adult males in the U.S., 31.5% had 5 or more drinks in 1 day at least once in the past year.
- Only 52% of adult males in the U.S. met the 2008 federal physical activity guidelines for aerobic activity through leisure-time aerobic activity.
- There are 20% 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).

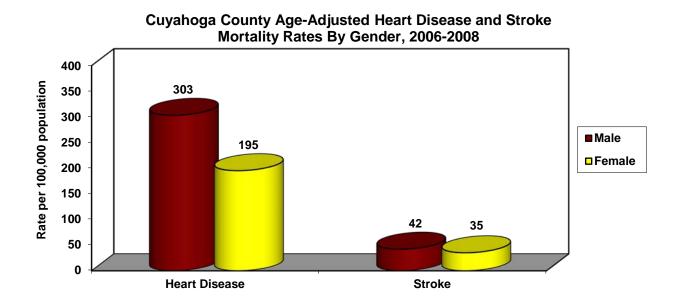
(Source: CDC, National Center for Health Statistics, Men's Health, Fast Stats, 2/18/2011 from http://www.cdc.gov/ncbs/fastats/mens\_bealth.htm)

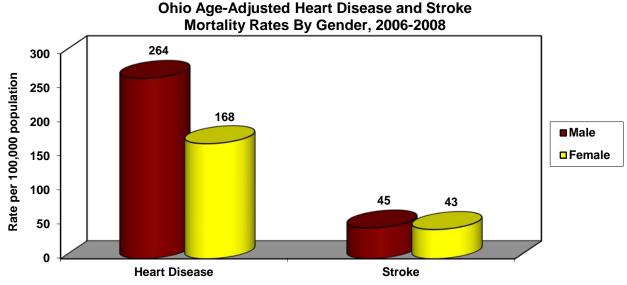
2012 Adult Comparisons	Cuyahoga County 2012	Ohio 2011	U.S. 2011
Had a PSA test within the past 2 years (age 40 and over)	55%	54%*	54%*

<sup>\*2010</sup> BRFSS data

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

- ♦ From 2006-2008, the Cuyahoga County and Ohio male age-adjusted mortality rates were higher than the female rates for heart disease.
- ♦ The 2006-2008, Cuyahoga County stroke mortality rates for males and females were both lower than the state rates for males and females.

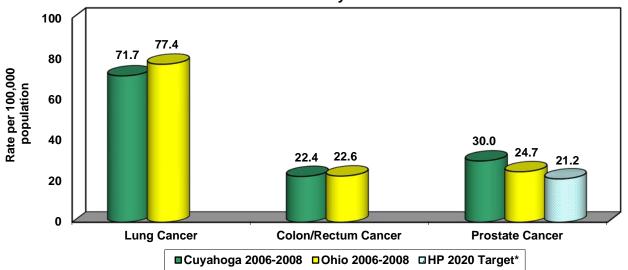




The following graph shows the Cuyahoga County age-adjusted mortality rates per 100,000 population for men's health with comparison to Healthy People 2020 objectives. The graph shows:

- ♦ From 2006-2008, the Cuyahoga County age-adjusted mortality rate for male lung cancer was lower than the Ohio rate.
- ♦ The age-adjusted prostate cancer mortality rate in Cuyahoga County for 2006-2008 was greater than the Ohio rate and the Healthy People 2020 target objective.

#### Cuyahoga County Male Age-Adjusted Cancer Mortality Rates



\*Note: the Healthy People 2020 target rates are not gender specific. (Source: ODH Information Warehouse and Healthy People 2020)

#### Cancer and Men

- More men in the U.S. die from lung cancer than any other type of cancer. The most important thing you can do to prevent lung cancer is not to start smoking, or to quit if you smoke.
- Prostate cancer is the most common cancer in men in the U.S., not counting skin cancer. It is the second most common cause of cancer death in men. While all men are at risk for prostate cancer, some factors increase risk. These include:
  - o older age
  - o family history of prostate cancer
  - o being African American
- Colorectal cancer is the third leading cause of cancer deaths in America men. Screening tests can find precancerous polyps so they can be removed before they turn into cancer. Everyone should be tested for colorectal cancer regularly, starting at age 50.

(Source: Center for Disease Control and Prevention, National Cancer Institute, 2010)

## Adult Preventive Medicine and Health Screenings

#### **Key Findings**

More than half (56%) of adults had a flu shot during the past 12 months. 71% of adults ages 65 and over had a pneumonia vaccination at some time in their life.

#### **Preventive Medicine**

- ◆ More than half (56%) of Cuyahoga County adults had a flu vaccine during the past 12 months, increasing to 74% of those ages 65 and over.
- ◆ The 2011 BRFSS reported that 61% of U.S. and Ohio adults ages 65 and over had a flu vaccine in the past year.
- ◆ Cuyahoga County adults received their last flu shot from the following places: doctor's office/health maintenance organization (28)
  - flu shot from the following places: doctor's office/health maintenance organization (28%), workplace (9%), store (7%), hospital (2%), another type of clinic or health center (1%), health department (1%), emergency room (1%), senior, recreation or community center (1%), a school (<1%), and some other place (4%).
- One-third (33%) of adults have had a pneumonia shot in their life, increasing to 71% of those ages 65 and over.
- ♦ The 2011 BRFSS reported that 70% of U.S. and Ohio adults ages 65 and over had a pneumonia shot in their life.

#### Preventive Health Screenings and Exams

- ♦ Nearly half (47%) of Cuyahoga County adults had a colorectal cancer screening at some time in their life, increasing to 71% of those ages 50 and over.
- ♦ More than half (57%) of Cuyahoga County adults ages 50 and over have had a colonoscopy or sigmoidoscopy in the past 5 years. The 2010 BRFSS reported that 53% of U.S. and Ohio adults ages 50 and over had a colonoscopy or sigmoidoscopy in the past 5 years.
- ♦ 30% of Cuyahoga County adults received preventive testing for skin cancer at some time in their life, increasing to 36% of those ages 65 and over.
- ♦ In the past year, 56% of Cuyahoga County women ages 40 and over have had a mammogram.
- ♦ In the past year, 46% of Cuyahoga County men ages 50 and over had a Prostate-Specific Antigen (PSA) test.
- See the Women and Men's Health Sections for further prostate, mammogram, clinical breast exam, and Pap smear screening test information for Cuyahoga County adults.

2012 Comparisons	Cuyahoga County 2012	Ohio 2011	U.S. 2011
Had a sigmoidoscopy/colonoscopy in the past 5 years (ages 50 and over)	57%	53%*	53%*
Had a flu shot in the past year (ages 65 and over)	74%	61%	61%
Had a pneumonia vaccination (ages 65 and over)	71%	70%	70%

<sup>\*2010</sup> BRFSS data

#### **Screening for Colorectal Cancer**

- ❖ Colorectal cancer is the 3<sup>rd</sup> most common cancer in adults and the 2<sup>nd</sup> leading cause of cancer deaths of men and women in the U.S.
- Screening tests look to remove polyps and lesions in the colon that can prevent colorectal cancer.
- The American Cancer Society recommends that those 50 years and older should be screened using the following screening recommendations:
  - Fecal occult blood test (FOBT) every year
  - Sigmoidoscopy every 5 years
  - Colonoscopy every 10 years

(Source: American Cancer Society, Colorectal Cancer Early Detection, last medical review, 2012, http://www.cancer.org/acs/groups/cid/documents/webcontent/003170-pdf.pdf)

## Adult Preventive Medicine and Health Screenings

Cuyahoga County Adult Health Screening Results

GENERAL SCREENING RESULTS	Total Sample
Diagnosed with High Blood Pressure	38%
Diagnosed with High Blood Cholesterol	38%
Diagnosed with Diabetes	9%
Diagnosed with a Heart Attack	6%
Diagnosed with a Stroke	3%

(Percentages based on all Cuyahoga County adults surveyed)

#### Cuyahoga County Adults Having Discussed Healthcare Topics With Their Healthcare Professional in the Past 12 Months

HEALTHCARE TOPICS	Total 2012
Weight, Dieting or Eating Habits	40%
Physical Activity or Exercise	39%
Immunizations	32%
Significance of Family History	22%
Depression, Anxiety, or Emotional Problems	19%
Sexual Practices Including Family Planning, STDs, AIDS, & Condom Use	13%
Alcohol Use	12%
Alcohol Use When Taking Prescription Drugs	11%
Injury Prevention Such As Safety Belt Use & Helmet Use	10%
Quitting Smoking	10%
Illicit Drug Abuse	7%
Domestic Violence	6%

#### Healthy People 2020 Pneumonia Vaccination

Objective	Cuyahoga County 2012	Ohio 2011	U.S. 2011	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	71%	70%	70%	90%

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

(Sources: Health People 2020 Objectives, 2011 BRFSS, 2012 Cuyahoga County Health Assessment)

## Adult Sexual Behavior and Pregnancy Outcomes

#### **Key Findings**

In 2012, nearly two-thirds (63%) of Cuyahoga County adults had sexual intercourse. Ten percent of adults had more than one partner. Even though young people aged 15-24 represent only 25% of the sexually experienced population, they acquire nearly half of all STDs (Source: CDC, STDs in Adolescents and Young Adults, 2010 STD Surveillance).

#### **Adult Sexual Behavior**

- ♦ Nearly two-thirds (63%) of Cuyahoga County adults had sexual intercourse in the past year.
- ◆ 10% of adults reported they had intercourse with more than one partner in the past year, increasing to 22% of those under the age of 30.
- ◆ Cuyahoga County adults used the following methods of birth control: they or their partner were too old (25%), condoms (24%), tubes tied (14%), birth control pill (14%), withdrawal (8%), vasectomy (8%), hysterectomy (4%), IUD (4%), rhythm method (2%), shots (1%), contraceptive patch (1%), emergency contraception (1%), abstinence (1%), and diaphragm (<1%). 9% of Cuyahoga County adults were not using any method of birth control.
- Cuyahoga County adults did not use birth control for the following reasons:
  - o They or their partner were too old (26%)
  - o They or their partner had a vasectomy, tubes tied, or hysterectomy (22%)
  - O They did not think they or their partner could get pregnant (10%)
  - o They wanted to get pregnant (5%)
  - o They or their partner did not like the side effects of birth control (3%)
  - O They did not care if they or their partner got pregnant (2%)
  - O They did not want to use birth control (2%)
  - o They did not have a regular partner (2%)
  - o They had a same sex partner (2%)
  - o They could not pay for birth control (2%)
  - o They or their partner just had a baby (1%)
  - O Their partner did not want to use birth control (1%)
  - o Religious preferences (1%)
  - o They or their partner were pregnant (<1%)
- ♦ The following situations applied to Cuyahoga County adults: had been tested for an STD (4%), had anal sex without a condom (4%), had sex with someone they did not know (2%), thought they may have an STD (1%), had been treated for an STD (1%), used intravenous drugs (<1%), had given or received money or drugs in exchange for sex (<1%), and tested positive for HIV (<1%).

#### STDs and the Elderly

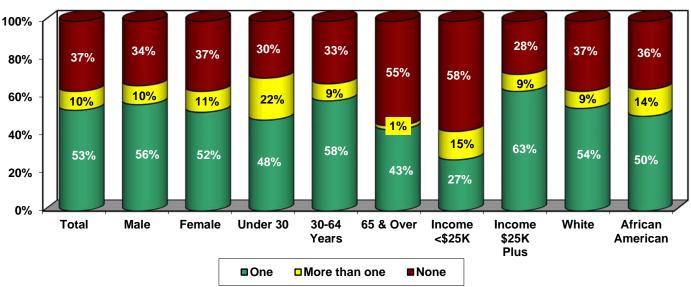
- Older people are at increasing risk for HIV/AIDS and other STDs.
- People age 50 and older represent almost one-fourth of all people with HIV/AIDS in the U.S.
- ❖ In general, older Americans have been less exposed to education and prevention messages, which may contribute to less STD testing.
- In addition, older people are less likely than younger people to talk about their sex lives or drug use with their doctors.
- Finally, older people often mistake the symptoms of HIV/AIDS and other STDs for the aches and pains of normal aging, contributing to less testing.

(Source: (National Prevention Information Network, 2012, http://www.cdcnpin.org/scripts/population/elderly.asp)

## Adult Sexual Behavior and Pregnancy Outcomes

The following graph shows the sexual activity of Cuyahoga County adults. Examples of how to interpret the information in the graph include: 53% of all Cuyahoga County adults had one sexual partner in the last 12 months and 10% had more than one, and 56% of males had one partner in the past year.





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

#### United States 2010 Sexually Transmitted Disease Surveillance Profile

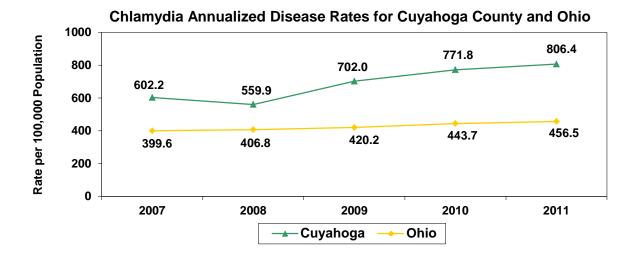
- Chlamydia case reports have been increasing steadily over the past 20 years, and in 2010, 1.3 million chlamydia cases were reported. This was the largest number of cases ever reported to CDC for any condition, with a case rate of 426.0 per 100,000 population and a 5.1% increase from 2009.
- ♦ Gonorrhea cases increased slightly from 2009 to 2010, with more than 300,000 cases reported in 2010. Cephalosporins remain the only class of antibiotics recommended for the treatment of gonorrhea.
- Studies from 2003-2005 show that there was an overall high-risk HPV prevalence of 23%. Differences in HPV infection by age groups were observed, such as 35% in those aged 14-19 year olds, 29% in those aged 20-29, 13% in those 30-39 year olds, 11% in those aged 40-49, and 6.3% in those aged 50-65 year olds.

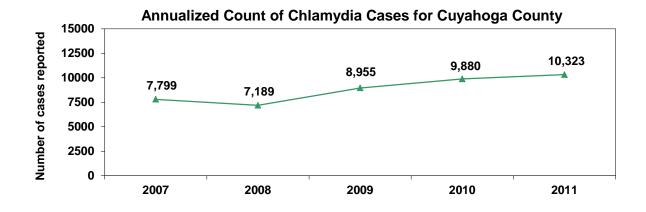
(Source: CDC, Sexually Transmitted Diseases, 2010 Sexually Transmitted Diseases Surveillance, National Profile, http://www.cdc.gov/std/stats10/default.htm)

## Adult Sexual Behavior and Pregnancy Outcomes

The following graphs show Cuyahoga County chlamydia and gonorrhea disease rates per 100,000 population updated June 14, 2012 by the Ohio Department of Health. The graphs show:

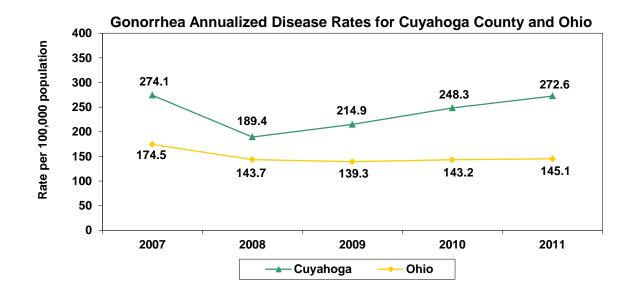
- ♦ Cuyahoga County chlamydia rates decreased from 2007 to 2008; then increased from 2009 to 2011. These rates were well above the Ohio rates.
- In 2010, the U.S. rate for new chlamydia cases was 426.0 per 100,000 population. (Source: CDC, Sexually Transmitted Diseases Surreillance, 2010)

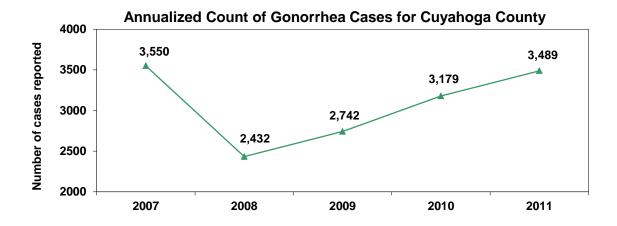




(Source for graphs: ODH STD Surveillance, data reported through 3-18-12)

- ♦ The Cuyahoga County gonorrhea rate decreased from 2007 to 2008; then increased from 2009 to 2011. These rates were well above the Ohio rates.
- ♦ The Ohio gonorrhea rate fluctuated from 2007 to 2011.
- ♦ In 2010, the U.S. rate for new gonorrhea cases for the total population was 100.8 per 100,000 population. (Source: CDC, Sexually Transmitted Diseases Surveillance, 2010)
- ♦ The Healthy People 2020 Objective for gonorrhea is 257 new female and 198 new male cases per 100,000 population.



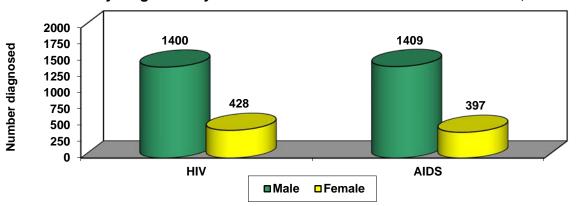


(Source for graphs: ODH STD Surveillance, data reported through 3-18-12)

The following graphs show Cuyahoga County HIV and AIDS disease counts and rates per 100,000 population updated January 31, 2012 by the Ohio Department of Health. The graphs show:

- ♦ In 2011, the Cuyahoga County HIV/AIDS rate for males of 463 cases per 100,000 was nearly four times the rate of the females of 123 cases per 100,000 population.
- ♦ The Ohio rate of 240 per 100,000 for males living with HIV/AIDS was nearly 4 times as great as the female rate of 61 cases per 100,000 population in 2011.(Source: ODH HIV/AIDS Surveillance Program)

#### Cuyahoga County Residents with HIV/AIDS as of December 31, 2011



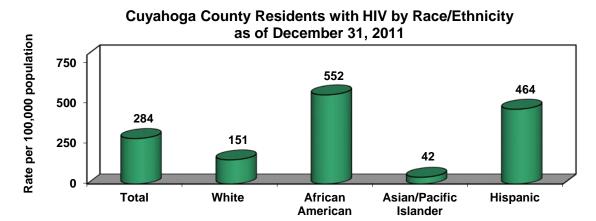
# People Living with HIV as of December 31, 2011 500 400 300 200 100 001 100 00

□ Females

■ Males

Ohio

**Cuyahoga County** 

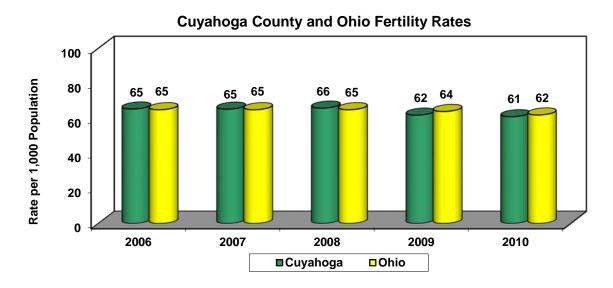


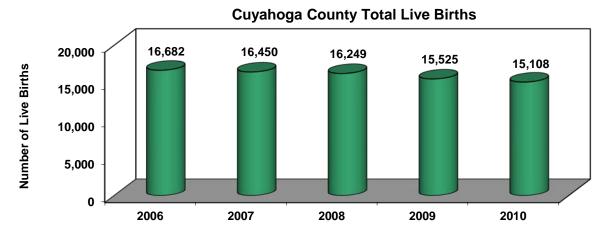
(Source for graphs: ODH HIV/AIDS Surveillance Program, data reported through December 31, 2011)

#### **Pregnancy Outcomes**

\*Please note that the pregnancy outcomes data includes all births to adults and adolescents.

- From 2006-2010, there was an average of 16,003 live births per year in Cuyahoga County.
- ♦ In 2010, the U.S. fertility rate was 64.1 per 1,000 women ages 15-44 (Source: National Center for Health Statistics, CDC, 2010).



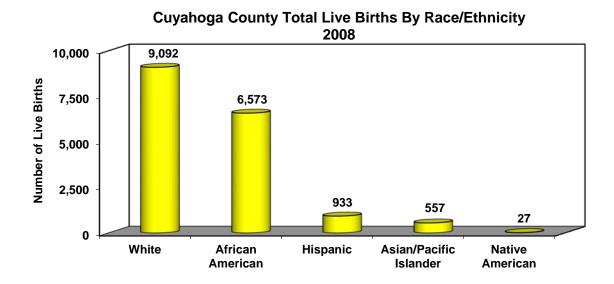


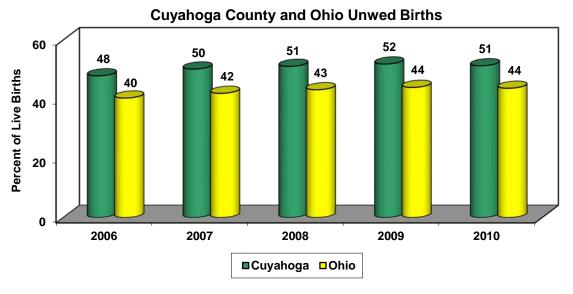
(Source for graphs: ODH Information Warehouse Updated 4-12-12)

#### **Pregnancy Outcomes**

\*Please note that the pregnancy outcomes data includes all births to adults and adolescents.

- ♦ The percentage of births to unwed mothers in Cuyahoga was above the Ohio percentage each year from 2006 to 2010, and fluctuated overall during the five year period.
- ♦ In 2009, 41% of U.S. births were to unwed mothers (Source: National Center for Health Statistics 2009).



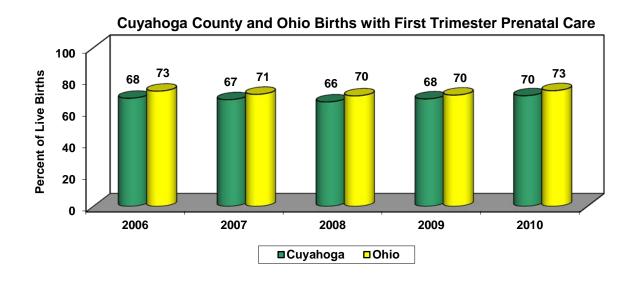


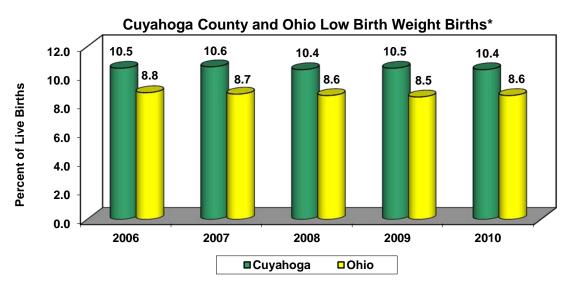
(Source for graphs: ODH Information Warehouse Updated 4-12-12)

#### **Pregnancy Outcomes**

\*Please note that the pregnancy outcomes data includes all births to adults and adolescents

- ♦ In 2009, 70% of Ohio mothers received prenatal care during the first trimester (Source: ODH Birth Statistics, 2009).
- ♦ In 2009, 8.2% of all U.S. live births were low birth weight births (Source: National Center for Health Statistics 2009).





\*Low Birth Weight is defined as weighing less than 2,500 grams or 5 pounds, 8 ounces. (Source for graphs: ODH Information Warehouse Updated 4-12-12)

## **Quality of Life**

#### **Key Findings**

In 2012, 24% of Cuyahoga County adults were limited in some way because of a physical, mental or emotional problem.

#### Impairments and Health Problems

- ♦ In 2012, almost one-fourth (24%) Cuyahoga County adults were limited in some way because of a physical, mental or emotional problem (24% of Ohio and U.S., 2011 BRFSS), increasing to 47% of those with incomes less than \$25,000.
- ♦ Among those who were limited in some way, the following most limiting problems or impairments were reported: back or neck problems (38%), stress, depression, anxiety, or emotional problems (34%), arthritis (31%), heart problems (29%), high blood pressure (26%), walking problems (23%), lung/breathing problems (21%)

#### **Back Pain Prevention**

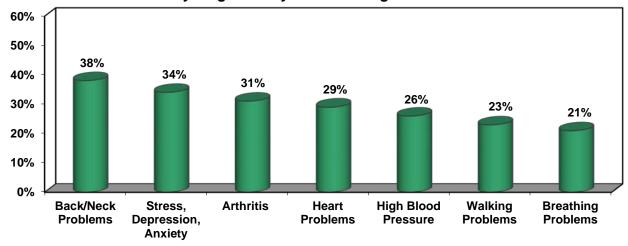
The best things you can do to prevent back pain are:

- Exercise often and keep your back muscles strong.
- Maintain a healthy weight or lose weight if you weigh too much.
- Make sure you are getting enough calcium and vitamin D every day. This is very important to keep bones strong.
- Try to stand up straight and avoid heavy lifting when you can. If you do lift something heavy, bend your legs and keep your back straight.

(Source: National Institutes of Health, National Institute of Arthritis and Musculoskeletal and Skin Diseases, http://www.niams.nih.gov/Health\_Info/Back\_Pain/back\_pain\_ff.asp, updated 9/09)

- problems (23%), lung/breathing problems (21%), fractures, bone/joint injuries (14%), diabetes (7%), eye/vision problems (7%), tobacco dependency (6%), cancer (4%), drug addiction (3%), stroke-related problems (3%), hearing problems (3%), a learning disability (2%), and alcohol dependency (2%).
- Cuyahoga County adults needed help with the following because of an impairment or health problem: household chores (16%), shopping (13%), getting around for other purposes (11%), doing necessary business (5%), bathing (3%), dressing (2%), eating (2%), and getting around the house (1%).

#### **Cuyahoga County Most Limiting Health Problems**



2012 Adult Comparisons	Cuyahoga County 2012	Ohio 2011	U.S. 2011
Limited in some way because of a physical, mental, or emotional problem	24%	24%	24%

## Quality of Life

#### Healthy People 2020 Arthritis

Objective	Cuyahoga County 2012	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	31%	36%

<sup>\*</sup>U.S. baseline is age-adjusted to the 2000 population standard (Sources: Health People 2020 Objectives, 2012 Cuyahoga County Health Assessment)

#### Arthritis: Key Public Health Messages

Early diagnosis of arthritis and self-management activities can help people decrease their pain, improve function, and stay productive.

Key self-management activities include the following:

- Learn Arthritis Management Strategies —Learning techniques to reduce pain and limitations can be beneficial to people with arthritis. Self-management education, such as the Arthritis Self-Management Program (ASMP), or the Chronic Disease Self-Management Program (CDSMP) help you develop the skills and confidence to manage your arthritis on a day to day basis.
- ❖ Be Active −Research has shown that physical activity decreases pain, improves function, and delays disability. Make sure you get at least 30 minutes of moderate physical activity at least 5 days a week. You can get activity in 10-minute intervals.
- ❖ Watch your weight —The prevalence of arthritis increases with increasing weight. Research suggests that maintaining a healthy weight reduces the risk of developing arthritis and may decrease disease progression. A loss of just 11 pounds can decrease the occurrence (incidence) of new knee osteoarthritis and a modest weight loss can help reduce pain and disability.
- See your doctor –Although there is no cure for most types of arthritis, early diagnosis and appropriate management is important, especially for inflammatory types of arthritis. For example, early use of disease-modifying drugs can affect the course of rheumatoid arthritis. If you have symptoms of arthritis, see your doctor and begin appropriate management of your condition.
- Protect your joints —Joint injury can lead to osteoarthritis. People who experience sports or occupational injuries or have jobs with repetitive motions like repeated knee bending have more osteoarthritis. Avoid joint injury to reduce your risk of developing osteoarthritis.

(Source: Centers for Disease Control and Prevention, Arthritis: Key Public Health Messages, www.cdc.gov/arthritis/basics/key.htm)

#### **Social Context**

#### **Key Findings**

In 2012, the health assessment identified that 25% of Cuyahoga County adults kept a firearm in or around their home. 75% of adults reported always wearing their seatbelt while driving or riding in a car.

#### **Social Context**

- One-quarter (25%) of Cuyahoga County adults kept a firearm in or around their home. 3% of adults reported they were unlocked and loaded.
- 75% of adults reported always wearing their seatbelt while driving or riding in a car. An additional 12% reported wearing their seatbelt most of the time.

#### Domestic Violence in Cuyahoga County

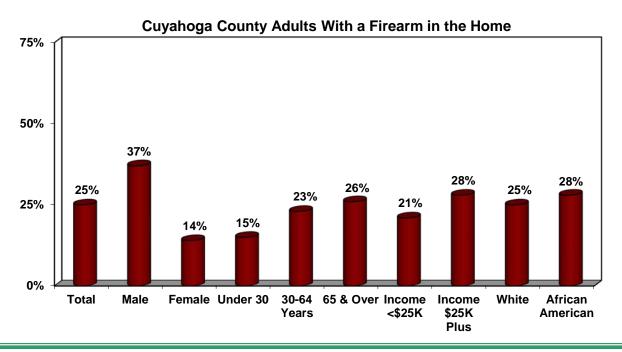
- ❖ In 2010, there were 1,713 domestic violence incidents where Domestic Violence (DV), Protection Order, or Consent Agreement charges were filed.
- There were 97 DV incidents where other charges were filed, but not DV, Protection Order, or Consent Agreement.
- There were 1,817 DV incidents where no charges were filed or incident did not meet the DV incident criteria.

(Source: Ohio Attorney General's Office, 2010 Domestic Violence Report, http://www.ohioattorneygeneral.gov/files/Publications/Publications-for-Victims/Domestic-Violence-Reports-(1)/2010-Domestic-Violence-Reports)

- Cuyahoga County adults received assistance for the following in the past year: food (12%), healthcare (10%), utilities (8%), prescription assistance (7%), transportation (6%), rent/mortgage (5%), employment (5%), free tax preparation (3%), home repair (3%), legal aid services (2%), credit counseling (2%), emergency shelter (1%), and clothing (1%).
- Nearly one-quarter (24%) Cuyahoga County adults attempted to get assistance from a social service agency. Of those adults who looked for assistance, they received it from the following: a government agency (59%), a friend or family member (13%), 2-1-1/United Way (11%), other social services (10%), a church (9%), Cuyahoga County Community Action Commission (5%), health department (5%), and somewhere else (3%).
- ◆ In the past year, Cuyahoga County adults experienced the following stressors: a close family member went into the hospital (39%), the death of a family member or close friend (33%), had bills they could not pay (19%), someone in their household lost their job (11%), moved to a new address (11%), household income cut in half (10%), someone in their household had their work hours reduced (8%), someone close to them had an alcohol or drug problem (7%), became separated or divorced (4%), had someone homeless living with them (3%), someone in their household went to jail (2%), were financially exploited (2%), were involved in a physical fight (2%), were homeless (1%), their child was threatened by someone close them (1%), their child was abused by someone close to them (1%), were threatened by someone close to them (1%), and were abused by someone close to them (1%).
- ◆ 47% of adults engaged in the following types of gambling in the past year: lottery (37%), casinos (21%), at work with fellow workers (8%), with friends at home (7%), online gambling (4%), horse track (2%), dog track (<1%), and other types of gambling (<1%).
- Of those who engaged in gambling, 3% did so daily, 4% did so every few days, 10% did so weekly, 20% did so every few weeks, 3% did so monthly, 22% did so every few months, and 39% did so once or twice a year.
- Cuyahoga County adults indicated they would have problems obtaining the following assistance if they needed it: someone to help pay for their medical expenses (14%), someone to loan them \$50 (13%), someone to help if they were sick and needed to be in bed (10%), someone to take them to a clinic or doctor's office if they needed a ride (9%), someone to talk about their problems (9%), someone to accompany them to their doctor's appointments (5%), back-up childcare (4%), and someone to explain directions from their doctor (3%).
- In the past month, 23% of adults provided regular care or assistance to a friend or family member who had a health problem, long-term illness or disability.
- ♦ 50% of Cuyahoga County adults reported that someone in their immediate family had served in the military. Those with family members in the military reported that the following issues had affected their family as a result of military service: access to medical care (10%), could not find/keep a job (3%), marital problems (3%), major health problems due to injury (3%), housing issues (3%), access to mental health treatment (2%), substance/drug abuse (2%), access to substance abuse/drug use treatment (1%), and suicide attempt (<1%).

## Social Context and Safety

The following graph shows the percentage of Cuyahoga County adults that had a firearm in the home. Examples of how to interpret the information shown on the first graph include: 25% of all Cuyahoga County adults kept a firearm in their home, 37% of males, and 15% of those under 30 kept a firearm in their home.



#### Firearm Injury Prevention

According to The American College of Emergency Physicians (ACEP), the improper use of firearms results in death and injury. Below are some of the College supported efforts to prevent firearm-related injuries and deaths:

- Aggressively enforce current laws against illegal possession, purchase, sale, or use of firearms;
- Encourage the creation and evaluation of community and school-based education programs targeting the prevention of firearm injuries;
- Educate the public about the risks of improperly stored firearms, especially in the home;
- Increase funding for the development, evaluation, and implementation of evidence-based programs and policies to reduce firearm-related injury and death
- \* Work with stakeholders to develop comprehensive strategies to prevent firearm injury and death

(Source: Firearm Injury Prevention, Annals of Emergency Medicine, v. 57 issue 6, 2011, p. 691)

#### Cuyahoga County Family Support and Child Welfare

According to the 2010 Cuyahoga County, CommonHealth ACTION Report:

- The 2009 data on Supplemental Nutrition Assistance Program (SNAP-federal food stamp program) showed that 32% of children, 8% of Whites and 40% of African Americans rely on the SNAP program. More than one out of three African Americans in Cuyahoga County depend on SNAP to feed their family
- Public assistance for single parents through TANF (Temporary Assistance to Needy Families) was utilized by 3,893 Whites, compared to 14,946 African Americans in April 2010.

(Source: Joint Center, PLACE MATTERS Design Lab Thirteen, CommonHealth ACTION, Cuyahoga County, 2010)

#### Adult Mental Health and Suicide

#### **Key Findings**

In 2012, 2% of Cuyahoga County adults considered attempting suicide. 10% of adults felt so sad or hopeless almost every day for two or more weeks that they stopped doing usual activities.

#### Adult Mental Health

- ◆ In the past year, 10% of Cuyahoga County adults felt so sad or hopeless almost every day for two or more weeks in a row that they stopped doing usual activities.
- ♦ 2% of Cuyahoga County adults considered attempting suicide in the past year.
- Less than one percent of adults reported attempting suicide.
- In the past year, Cuyahoga County adults were diagnosed with or treated for the following mental health issues: an anxiety disorder (9%), a mood disorder (7%), a psychotic disorder (1%),

#### Mental Health Services in Ohio

(Ohio Facts 2010, FY 2009\*)

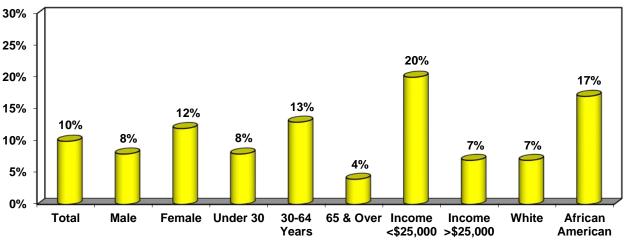
- ❖ In FY 2009, mental health services spending totaled 1.34 billion in Ohio.
- ❖ In FY 2009, Ohio's 50 community-based mental health boards served 325,000 individuals throughout the state. These boards included 47 alcohol & drug addiction and mental health service boards and three county mental health service boards.
- ❖ In FY 2009, state hospitals served 6,790 individuals at a cost of \$217.7 million. Average daily cost per resident was \$589.
- An average of 109,000 individuals each month received Medicaid mental health services through ODMH.

(Sources: U.S. Department of Health and Human Services, Ohio Department of Mental Health,

http://www.lsc.state.oh.us/fiscal/ohiofacts/sep2010/healthandhumanservices.pdf)

and some other mental health disorder (1%). 11% indicated they had taken medication for one or more mental health issue.

#### Cuyahoga County Adults Feeling Sad or Hopeless for Two or More Weeks in a Row



#### Cuyahoga County Mental Health and Suicide Facts

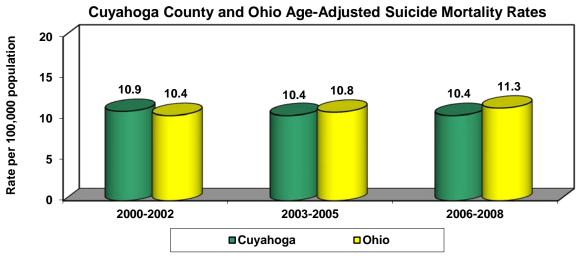
- ❖ Cuyahoga County has a suicide rate of 11 per every 100,000 persons.
- Cuyahoga County suicide rate is lower than the national average of 11.5 per 100,000 persons.
- The County ranks 47 out of 88 Ohio counties with 1 being the county with the highest suicide rate.
- ❖ 78% of suicides are male in Cuyahoga County.
- ❖ In Cuyahoga County, adults ages 25-34 had the highest suicide rate.

(Sources: Ohio Suicide Prevention Foundation, 2012, http://ohiospf.org/countymain.php?countyid=18)

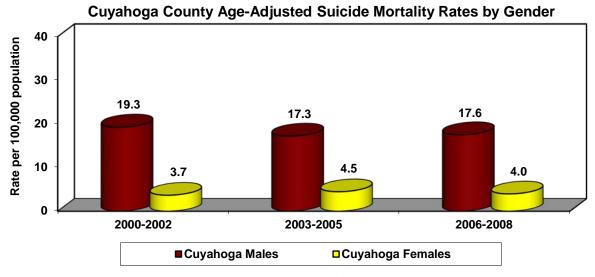
#### Mental Health and Suicide

The following graphs show the Ohio and Cuyahoga County age-adjusted suicide mortality rates per 100,000 population and the number of suicide deaths by age group for the county. The graphs show:

- ♦ The Cuyahoga County age-adjusted suicide mortality rate decreased overall to a rate below the Ohio rate from 2006 to 2008.
- ♦ The Cuyahoga County male age-adjusted suicide rate consistently exceeded the female rate from 2000 to 2008.
- ♦ The Cuyahoga County African American male age-adjusted suicide rate consistently exceeded the African American female rate from 2000 to 2008.
- ♦ From 2006 to 2008, 24% of all Cuyahoga County suicide deaths occurred to those ages 45-54 years old, followed by 20% to those ages 35-44.



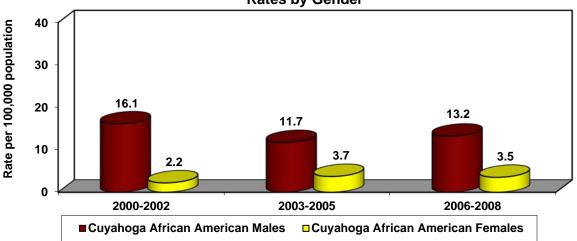
(Source: ODH Information Warehouse, updated 4-15-10)



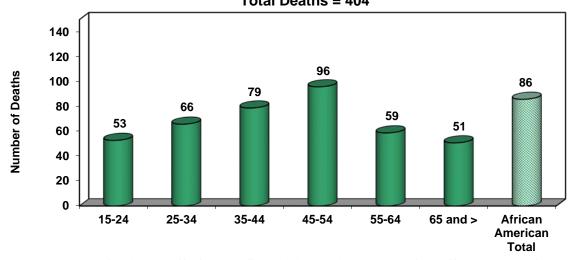
(Source: ODH Information Warehouse, updated 4-15-10)

#### Mental Health and Suicide

#### Cuyahoga County African American Age-Adjusted Suicide Mortality Rates by Gender



#### Cuyahoga County Number of Suicide Deaths By Age Group 2006 to 2008 Total Deaths = 404



\*Note: Total Deaths noted in table title represents all races and ethnicities. African American Total in the table is reported distinctively. (Source: ODH Vital Statistics, Mortality Data, updated 4-15-10)

#### African American Community Mental Health

- African Americans in the U.S. are less likely to receive accurate diagnoses than their Caucasian counterparts.
- Mental illness is frequently stigmatized and misunderstood in the African American community. African Americans are much more likely to seek help through their primary care doctors as opposed to accessing specialty care.
- African Americans are disproportionately more likely to experience social circumstances that increase their chances of developing a mental illness.
- \* Children in foster care and the child welfare system are more likely to develop mental illnesses. African American children comprise 45% of the public foster care population.
- Overall sensitivity to African American cultural differences can improve patient treatment experience and increase utilization of mental health care services.

(Source: The National Alliance on Mental Illness (NAMI), African American Community Mental Health Facts Sheet www.nami.org)

#### Oral Health

## **Kev Findings**

The 2012 Health Assessment project has determined that nearly two-thirds (65%) of Cuyahoga County adults had visited a dentist or dental clinic in the past year. The 2010 BRFSS reported that 70% of U.S. adults and 72% of Ohio adults had visited a dentist or dental clinic in the previous twelve months.

#### Access to Dental Care

♦ In the past year, 65% of Cuyahoga County adults had visited a dentist or dental clinic, decreasing to 48% of adults with annual household incomes less than \$25,000. The 2010 BRFSS reported that 70% of U.S. adults and 72% of Ohio adults had visited a dentist or dental clinic in the previous twelve months.

#### Cuyahoga County Dental Care Resources - 2010

- Number of licensed dentists- 1,032
- Number of primary care dentists-866
- Ratio of population per dentist- 1,236:1
- Number of dentists who treat Medicaid patients- 245
- Ratio of Medicaid population per dentist who treats Medicaid patients- 1,216:1

(Source: ODH Ohio Oral Health Surveillance System, 2010)

- ♦ When asked how long it had been since their last visit to a dentist or dental clinic, 13% of Cuyahoga County adults reported that it had been more than one year but less than two years, 8% reported that it had been more than two years but less than five years, and 10% responded it had been five or more years.
- Three-fourths (75%) of Cuyahoga County adults with dental insurance have been to the dentist in the past year, compared to 63% of those without dental insurance.
- ♦ When asked the main reason for not visiting a dentist in the last year, 26% said cost, 20% had no reason to go, 13% said fear, apprehension, nervousness, pain, and dislike going, 11% had not thought of it, 2% had other priorities, 2% did not have/know a dentist, 2% said the dentist did not accept their insurance, 2% could not find a dentist who took Medicaid, 2% could not get to the office, 1% could not find a dentist who treats special needs clients, and 2% had other reasons. 16% of adults indicated there were multiple reasons they had not visited the dentist in the past year.
- Half (50%) of adults had one or more of their permanent teeth removed, increasing to 75% of those ages 65 and over. The 2010 BRFSS reported that 44% of U.S. adults and 45% of Ohio adults had one or more permanent teeth removed.
- The 2012 Health Assessment reports that 13% of Cuyahoga County adults ages 65 and over had all of their permanent teeth removed. The 2010 BRFSS reported that 17% of U.S. adults and 20% of Ohio adults ages 65 and over had all of their permanent teeth removed.

Adult Oral Health	Within the Past Year	Within the Past 2 Years	Within the Past 5 Years	5 or More years	Never
Time Since Last Visit to Dentist/Dental Clinic					
Males	62%	12%	7%	11%	1%
Females	70%	11%	10%	8%	<1%
Total	65%	13%	8%	10%	1%

Totals may not equal 100% as some respondents answered do not know.

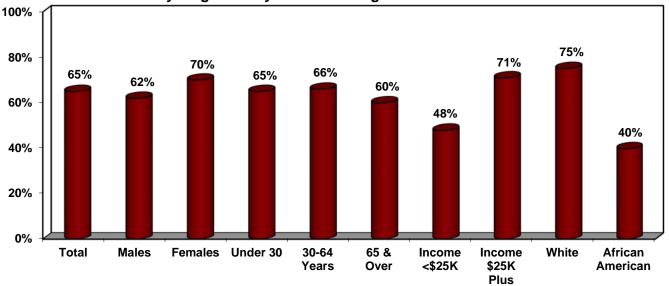
2012 Adult Comparisons	Cuyahoga County 2012	Ohio 2011	U.S. 2011
Adults who have visited the dentist in the past year	65%	72%*	70%*
Adults who had one or more permanent teeth removed	50%	45%*	44%*
Adults 65 years and older who had all of their permanent teeth removed	13%	20%*	17%*

<sup>\*2010</sup> BRFSS data

#### Oral Health

The following graph provides information about the frequency of Cuyahoga County adult dental visits. Examples of how to interpret the information on the first graph include: 65% of all Cuyahoga County adults had been to the dentist in the past year, 65% of those under the age of 30 and 48% of those with incomes less than \$25,000.





#### 2010 Ohio and Cuyahoga Oral Health Findings

#### Ohio

- ❖ In 2010, 486,000 (19%) of Ohio's children were without dental insurance, which equates to 359,000 Ohio children who have general health care coverage, but no dental coverage.
- Dental care was the number one unmet healthcare need for children, with 157,000 children having unmet dental needs; 126,000 of these children were ≤200% Federal Poverty Level (FPL), 31,000 were ≥201% of FPL.
- ❖ In 2010, 3,967,000 (44.9%) of Ohio adults 18 years of age and older reported having no dental coverage, with 41.2% of working-age adults having no dental coverage. This equates to 2,589,000 Ohio adults who had general health care coverage, but no dental coverage.
- Family income and job status are associated with a lack of dental coverage. 56% of those with an annual family income at 200% FPL or lower reported having no dental coverage. This compares to 35.8% of those with incomes at 201% FPL or above reporting no dental coverage.

#### Cuyahoga County

- ❖ In Cuyahoga County, 100% of the population is optimally served by fluoridated water in 2010.
- 188 schools were eligible for school-based sealant program, in 2010; 127 of which were participating.
- ❖ In 2010, 16.5% of Cuyahoga County residents <18 years old; 34.7% 18-64 years old; and 55.4% 65+ years old did not have dental care insurance.

(Source: Ohio Oral Health Findings from the Ohio Family Health Survey, 2010, http://www.odh.ohio.gov/~/media/ODH/ASSETS/Files/ohs/oral%20health/2010ofhsdatabrief.ashx & 2010, Ohio Oral Health Surveillance System, Cuyahoga County, http://publicapps.odh.ohio.gov/oralhealth/default.aspx).

#### **Key Findings**

According to the 2011 U.S. Census demographic profile data, approximately 372,149 African Americans live in Cuyahoga County (30%). The 2012 Health Assessment reported that nearly one-fifth (18%) of African Americans did not have health care coverage. 26% rated their health as fair or poor, and 43% had been to the emergency room in the past year.

#### **Health Status**

- This section is NOT generalizable to the Cuyahoga County African American population as only 266 adults responded to the survey.
- ♦ African American adults were <u>more</u> likely than Whites to:
  - o Have rated their health status as fair or poor (26% compared to 16% of Whites).
  - O Have rated their physical health as not good on four or more days in the previous month (36% compared to 18% of Whites).
  - O Have rated their mental health as not good on four or more days in the previous month (29% compared to 21% of Whites).
  - O Have reported that poor mental or physical health kept them from doing usual activities such as self-care, work, or recreation on four or more days in the previous month (20% compared to 14% of Whites).

#### **Health Care Access**

- Cuyahoga County African American adults did not get medical care in the past year for the following reasons: cost/no insurance (14%), care not needed (12%), too long to wait for an appointment (1%), office was no open when they could get there (1%), no transportation (1%), distance (1%), and other reasons (1%). 68% of adults indicated they received all of the medical care they needed.
- When asked how long it had been since they last had health care coverage, 58% of African American adults indicated they have always had health care coverage. 4% responded they last had health care coverage within the past 6 months, 4% said 6 to 12 months ago, 6% said 1 to 2 years ago, 4% said 2 to 5 years ago, 16% said 5 or more years ago, and 3% said they have never had health care coverage.
- Cuyahoga County African American adults had the following issues regarding their healthcare coverage: co-pays were too high (29%), deductibles were too high (12%), premiums were too high (10%), opted out of certain coverage because they could not afford it (7%), could not understand their insurance plan (5%), working with their insurance company (4%), opted out of certain coverage because they did not need it (2%), and high HSA account deductible (1%).
- ◆ During the past year, Cuyahoga County African American adults did not get a prescription from their doctor filled because: they could not afford to pay the out-of-pocket expenses (10%), they did not think they needed it (8%), they had no insurance (8%), they stretched their prescription by taking less than prescribed (4%), their co-pays were too high (4%), was no generic equivalent of what was prescribed (3%), their deductibles were too high (2%), their premiums were too high (1%), they opted out of prescription coverage because they could not afford it (1%), they were taking too many medications (1%), and transportation (1%). 73% of adults reported having all of their prescriptions filled.

#### African American Access to Healthcare

The 2011 BRFSS reported that:

- 24% of African Americans in Ohio and 25% in the U.S. did not have health care coverage.
- ❖ 24% of African Americans in Ohio and 22% in the U.S. felt their health status was fair or poor.

The 2011 Census Bureau, American Community Survey (ACS) 1-year estimates indicate:

16% of African Americans in Cuyahoga County did not have health insurance.

(Source: 2011 BRFSS and U.S. Census Bureau, www.census.gov)

- Cuyahoga County African American adults did not receive the following major care or preventive care due to cost: medications (10%), colonoscopy (10%), mammogram (7%), pap smear (6%), weight-loss program (4%), mental health (4%), immunizations (4%), surgery (3%), smoking cessation (3%), family planning (2%), PSA test (2%), and alcohol and drug treatment (1%).
- ♦ 14% of Cuyahoga County African American adults reported they had used a depression or anxiety program for themselves or a loved one. Reasons for not using such a program included: had not thought of it (11%), could not afford to go (7%), fear (5%), transportation (5%), did not know how to find a program (5%), co-pay/deductible too high (4%), stigma of seeking mental health services (3%), did not feel the services they had received were good (3%), other priorities (2%), could not get to the clinic/office (2%), and other reasons (1%).
- ♦ 9% of Cuyahoga County African American adults looked for a program to assist in care for the elderly (either in-home or out-of-home) for either themselves or a loved one. Of those who looked, 44% looked for in-home care, 17% looked for an assisted living program, 11% looked for a disabled adult program, 6% looked for day care, and 6% looked for overnight or respite care. 17% looked for multiple programs to assist in elderly care for themselves or a loved one.
- ♦ When seeking healthcare in the past year, Cuyahoga County African American residents felt their experiences in relation to other races were: the same as other races (49%), worse than some races but better than others (6%), worse than other races (5%), better than other races (1%), and only encountered people of same race (1%).
- ♦ African American adults were <u>more</u> likely than Whites to:
  - o Have received the medical care they needed (68% compared to 65% of Whites).
  - o Have used a program for depression or anxiety (14% compared to 11% of Whites).
  - O Have been to the emergency room in the past year (43% compared to 20% of Whites).
- ♦ African American adults were <u>less</u> likely than Whites to:
  - o Have described their health care coverage as inadequate (9% compared to 16% of Whites).

#### Health Care Coverage

- ♦ 18% of African American adults did not have health care coverage, compared to 11% of Whites.
- ◆ The following types of health care coverage were used by African American adults: employer (36%), someone else's employer (17%), Medicare (12%), Medicaid or medical assistance (12%), self-paid plan (9%), military, CHAMPUS, TriCare, or VA (4%), multiple-including private sources (3%), multiple-including government sources (3%), and other (1%).
- ◆ Cuyahoga County African American adult health care coverage included the following: medical (98%), prescription coverage (85%), vision (84%), immunizations (82%), dental (80%), preventive care (74%), mental health (72%), alcohol and drug treatment (57%), their spouse (47%), their children (44%), hospice (36%), home care (33%), skilled nursing (34%), and Cuyahoga County physicians (30%).
- The top three reasons uninsured African American adults gave for being without health care coverage were:
  - 1. They lost their job or changed employers (31%)
  - 2. They could not afford to pay the insurance premiums (20%)
  - 3. They lost Medicaid eligibility (10%) (Percentages do not equal 100% because respondents could select more than one reason)

#### Health Care Utilization

- In 2012, 62% of Cuyahoga County African American adults visited their doctor for a routine checkup within the past year; 87% visited their doctor within the past two years; 91% visited their doctor within the past 5 years; and 1% had never visited their doctor for a routine checkup.
- ♦ More than half (53%) of Cuyahoga County African American adults reported they had one particular doctor or healthcare professional they go to for routine medical care. 17% of adults had more than one particular doctor or healthcare professional they go to for routine medical care, and 29% did not have one at all.
- Reasons for not having a usual source of medical care included: two or more usual places (28%), no insurance/could not afford insurance (23%), had not needed a doctor (12%), previous doctor unavailable/moved (16%), did not know where to go (1%), did not like/trust/believe in doctors (1%), and other reasons (11%).
- ♦ When African American adults were sick or needed advice about their health, they usually went to the following: a private doctor's office (52%), a hospital emergency room (13%), a public health clinic or community health center (7%), a hospital outpatient department (5%), an urgent care center (4%), no usual place (4%), Internet, (2%), in-store health clinic (2%), and some other kind of place (1%).
- ♦ The following might prevent Cuyahoga County African American adults from seeing a doctor if they were sick, injured, or needed some kind of health care: cost (35%), hours not convenient (13%), difficult to get an appointment (13%), worried they might find something wrong (13%), frightened of the procedure or doctor (8%), difficult to find/no transportation (6%), could not get time off work (3%), do not trust or believe doctors (2%), and some other reason (7%).
- Cuyahoga County African American adults had the following transportation problems when they needed health care: no car (15%), no driver's license (8%), limited public transportation available or accessible (8%), could not afford gas (7%), no car insurance (5%), disabled (5%), car did not work (4%), no public transportation available or accessible (1%), and other car issues/expenses (4%).
- ♦ 13% of African American adults traveled less than 2 miles to the place they usually went when they were sick or need health advice; 46% traveled 2 to 5 miles, 29% traveled 5 to 10 miles, 10% traveled 10 to 20 miles, and 2% traveled more than 20 miles.
- ♦ African American residents sought care outside of Cuyahoga County in the following places: Summit (8%), Lake (1%), Lorain (1%), Geauga (1%), Portage (1%), and other places (1%).
- ◆ 21% of African American adults went outside of Cuyahoga County for the following health care services in the past year: orthopedic care (7%), specialty care (4%), primary care (1%), dental services (1%), obstetrics/gynecology (1%), mental health care (1%), cancer care (1%), cardiac care (1%), and other services (1%).
- ◆ Cuyahoga County African American adults preferred to get their health/healthcare services information from: their doctor (84%), advertisings or mailings from hospitals/clinics/doctor's offices (27%), the Internet (21%), a friend or family member (18%), newspaper articles or radio/television news stories (12%), text messages (8%), Facebook (2%), billboards (1%), and other methods (4%).
- ♦ When asked the main reason for not visiting a dentist in the last year, 23% said cost, 22% had no reason to go, 19% had not thought of it, 14% said fear, apprehension, nervousness, pain, and dislike going, 2% had other priorities, 2% did not have/know a dentist, 2% said the dentist did not accept their insurance, 2% could not get to the office, 1% could not find a dentist who treats special needs clients, and 3% had other reasons. 9% of adults indicated there were multiple reasons they had not visited the dentist in the past year.

- African American adults were <u>more</u> likely than Whites to:
  - O Have gone outside of Cuyahoga County for health care services in the past year (21% compared to 13% of Whites).
  - O Have had one or more of their permanent teeth removed (70% compared to 41% of Whites).
- ♦ African American adults were <u>less</u> likely than Whites to:
  - o Have gone to the dentist in the past year (40% compared to 75% of Whites).
  - O Have rated their satisfaction with their overall health care as excellent or very good (45% compared to 54% of Whites).
  - O Have one particular person they think of as their personal doctor or health care provider (53% compared to 58% of Whites).

2012 Adult Comparisons	Cuyahoga County Whites 2012	Cuyahoga County African Americans 2012	Ohio African Americans 2011	U.S. African Americans 2011
Rated health as fair or poor	16%	26%	24%	22%
Uninsured	11%	18%	24%	25%

#### Healthcare Access & Utilization Disparities for African Americans in Ohio: Findings from the 2008 Ohio Family Health Survey

- In 2008, 27.1% of African Americans were uninsured and were 80% more likely to be uninsured than white adults
- African American adults were more likely than white adults to be obese, have high blood pressure, have type 2 diabetes (30%) and have had a stroke (70%)
- ❖ African American adults were 70% more likely than white adults to consider themselves to be in poor health.
- ❖ 17% of African Americans reported having unmet health needs in 2008
- ❖ 22% of African American adults were Medicaid enrolled in 2008, and were nearly three times more likely than whites to be enrolled in Medicaid
- African American adults were nearly twice as likely than white adults to live at or below 200% of the federal poverty level

(Source: Healthy Policy Institute of Ohio - 2008, Ohio Family Health Survey, http://a5e8c023c8899218225edfa4b02e4d9734e01a28.gripelements.com/pdf/publications/policybrief\_disparitiesrace.pdf)

#### **Key Findings**

In 2012, 17% of African Americans were diagnosed with diahetes and 49% with high blood pressure. 74% of African Americans were either overweight or obese.

#### General Health

- ◆ This section is NOT generalizable to the Cuyahoga County African American population as only 266 adults responded to the survey.
- ◆ African American adults were <u>more</u> likely to have been diagnosed with:
  - High blood pressure (49% compared to 34% of Whites).
  - o Asthma (21% compared to 13% of Whites).
  - o Arthritis (43% compared to 31% of Whites).
  - o Diabetes (17% compared to 6% of Whites).
- African American adults were <u>less</u> likely to have been diagnosed with:
  - o Cancer (12% compared to 16% of Whites).
  - o Prostate cancer (12% compared to 19% of Whites).
- African American adults were equally as likely to have been diagnosed with:
  - o High blood cholesterol (38%).
- ♦ African American adults were <u>more</u> likely than Whites to:
  - O Have used marijuana in the past 6 months (18% compared to 5% of Whites.)
  - O Have used a program or service to help with alcohol problems (5% compared to 2% of Whites).
  - O Have received enough information on how to manage their diabetes (89% compared to 54% of Whites).
  - O Have had a pneumonia shot (40% compared to 33% of Whites).
  - o Have had a PSA test in the past year (42% compared to 35% of Whites).
  - O Have had a digital rectal exam in the past year (43% compared to 31% of Whites).
  - O Have been taught by a healthcare professional how to do a testicular exam (37% compared to 32% of Whites).
  - o Be a current smoker (21% compared to 18% of Whites).
  - o Have tried to quit smoking in the past year (73% compared to 50% of Whites).
  - O Have two or more sexual partners in the past year (14% compared to 9% of Whites).
  - o Have not used birth control (11% compared to 8% of Whites).
  - o Be overweight or obese (74% compared to 67% of Whites).
  - o Have seriously considered attempting suicide (3% compared to 2% of Whites).
  - o Have attempted suicide (2% compared to <1% of Whites).
  - o Have felt sad, blue or depressed nearly every day for two or more weeks in a row (17% compared to 7% of Whites).

#### Cuyahoga County African American Leading Causes of Death 2006-2008

- 1. Heart Disease (26% of total resident deaths)
- 2. Cancers (24%)
- 3. Stroke (5%)
- 4. Accidents, Unintentional Injuries (4%)
- 5. Diabetes Mellitus (3%)
- 6. Chronic Lower Respiratory Disease (3%)

(Source: Ohio Department of Health, Information Warehouse, updated 4-15-10)

- ♦ African American adults were <u>less</u> likely than Whites to:
  - O Have had survived a heart attack (3% compared to 8% of Whites).
  - o Have angina or coronary heart disease (5% compared to 10% of Whites).
  - o Have received preventive testing for skin cancer (7% compared to 39% of Whites).
  - o Have misused prescription medications in the past 6 months (7% compared to 10% of Whites).
  - o Have consumed alcohol in the past 30 days (47% compared to 64% of Whites).
  - o Be considered a frequent drinker (8% compared to 22% of Whites).
  - o Be considered a binge drinker (32% compared to 44% of Whites).
  - o Have driven a vehicle after having perhaps too much to drink (8% compared to 12% of Whites).
  - o Have had a clinical breast exam in the past year (52% compared to 60% of Whites).
  - o Have had a pap smear in the past year (41% compared to 46% of Whites).
  - O Have engaged in physical activity or exercise for at least 30 minutes on 3 or more days per week (45% compared to 65% of Whites).
  - O Have eaten out in a restaurant or brought home takeout food (1.6 meals per week compared to 2.1 for Whites).

#### Preventive Medicine and Health Screenings

- ♦ 35% of those African American adults diagnosed with asthma had not taken any prescribed asthma medication in the past 30 days. 21% took asthma medication less than once a week, 12% took it once or twice a week, 7% took it more than twice a week, 2% used it once a day, and 19% took their asthma medication two or more times per day.
- ♦ Those African American adults with diabetes were using the following to treat it: diet control (46%), diabetes pills (38%), checking their blood sugar (35%), exercise (33%), and insulin (27%).
- ♦ African American adults with diabetes visited a doctor, nurse or other health professional for their diabetes an average of 3.4 times in the past year.
- ◆ Cuyahoga County African American adults were taking medication for the following conditions: blood pressure (36%), blood cholesterol (21%), heart disease (5%), and stroke (3%).
- ♦ African American adults received their last flu shot from the following places: doctor's office/health maintenance organization (33%), store (9%), workplace (5%), hospital (2%), another type of clinic or health center (2%), health department (2%), senior, recreation or community center (2%), and some other place (2%).
- ◆ Cuyahoga County African American adults indicated that their doctor or other health professional had discussed the following topics with them within the past year: physical activity or exercise (59%), weight, diet or eating habits (55%), immunizations (31%), significance of family health history (25%), depression/anxiety/emotional problems (24%), alcohol use when taking prescription drugs (22%), injury prevention (19%), sexual practices (19%), quitting smoking (16%), alcohol use (15%), illicit drug use (11%), and domestic violence (8%).

#### **Tobacco Use**

- ♦ 21% of Cuyahoga County African Americans were smokers.
- ◆ Cuyahoga County African American adults used the following tobacco products: cigarettes (28%), Black and Milds (11%), cigars (5%), cigarillos (4%), swishers (3%), little cigars (1%), flavored cigarettes (1%), ecigarettes (1%), chewing tobacco (1%), and hookah (1%).

#### Alcohol Use

- Cuyahoga County African American adults experienced the following: drank more than they expected (8%), drank more to get the same effect (2%), tried to quit or cut down but could not (2%), continued to drink despite problems caused by drinking (2%), drank to ease withdrawal symptoms (2%), spent a lot of time drinking (1%), and gave up other activities to drink (1%).
- 5% of Cuyahoga County African American adults have used a program or service to help with alcohol or other drug problems for either themselves or a loved one. Reasons for not using such a program included: had not thought of it (3%), stigma of seeking alcohol services (2%), could not afford to go (1%), fear (1%), transportation (1%), and other reasons (1%). 86% of adults indicated they did not need a program or service to help with alcohol or other drug problems.

#### **Drug Use**

- ♦ When asked about their frequency of marijuana and other recreational drugs in the past six months, 12% of Cuyahoga County African American adults who used drugs did so almost every day, and 6% did so less than once a month.
- When asked about their frequency of medication misuse in the past six months, 36% of Cuyahoga County African American adults who used these drugs did so almost every day, and 36% did so less than once a month.

#### Women's Health

- ♦ Women used the following as their usual source of services for female health concerns: private gynecologist (25%), general or family physician (25%), health department clinic (10%), community health center (7%), family planning clinic (6%), midwife (1%), nurse practitioner/physician's assistant (1%), and some other place (2%). 16% indicated they did not have a usual source of services for female health concerns.
- 34% of Cuyahoga County African American women had been pregnant in the past 5 years.
- ◆ During their last pregnancy, Cuyahoga County African American women: took a multi-vitamin (27%), got a prenatal appointment in the first 3 months (23%), and looked for options for an unwanted pregnancy (7%).

#### **Sexual Behavior**

- ◆ Cuyahoga County African American adults used the following methods of birth control: tubes tied (32%), they or their partner were too old (30%), condoms (19%), hysterectomy (6%), withdrawal (4%), vasectomy (4%), birth control pill (3%), IUD (2%), rhythm method (2%), abstinence (2%), and diaphragm (2%), contraceptive implants (1%), and emergency contraception (1%). 11% of Cuyahoga County African American adults were not using any method of birth control.
- ♦ The top three reasons Cuyahoga County African American adults were not using birth control included:
  - o They or their partner had a vasectomy, tubes tied, or hysterectomy (33%)
  - o They or their partner were too old (29%)
  - o They did not think they or their partner could get pregnant (22%)
- ♦ The following situations applied to Cuyahoga County adults: had been tested for an STD (6%), had anal sex without a condom (5%), had been treated for an STD (3%), had sex with someone they did not know (2%), thought they may have an STD (1%), had given or received money or drugs in exchange for sex (1%), and tested positive for HIV (1%).

#### Weight Control/Physical Activity/Diet and Nutrition

- ♦ More than one-third (39%) of adults were trying to lose weight, 30% were trying to maintain their current weight or keep from gaining weight, and 8% were trying to gain weight.
- Cuyahoga County African American adults did the following to lose weight or keep from gaining weight: ate less food, fewer calories, or foods low in fat (36%), exercised (35%), ate a low-carb diet (8%), smoked cigarettes (5%), took diet pills, powders, or liquids without a doctor's advice (3%), went without eating 24 or more hours (3%), used a weight loss program (2%), participated in a dietary or fitness program (2%), and took prescribed medications (2%).
- ◆ Cuyahoga County African American adults gave the following reasons for not exercising: laziness (28%), time (18%), too tired (17%), pain/discomfort (13%), chose not to exercise (13%), weather (12%), could not afford a gym membership (9%), safety (4%), did not know what activity to do (3%), no walking/biking trails (3%), no gym available (2%), no childcare (2%), doctor advised them not to exercise (1%), no sidewalks (1%), and other (5%).
- Adults ate out in a restaurant or brought home take-out food an average of 1.6 times per week.
- Cuyahoga County African American adults got their fruits and vegetables from the following places: large grocery store (63%), local grocery store (59%), Farmer's Market (35%), restaurants (4%), food pantry (4%), corner store (3%), and other places (3%).
- Cuyahoga County African American adults reported the following reasons they choose the types of food they eat: cost (68%), taste (56%), healthiness of food (53%), enjoyment (40%), food that they are used to (39%), ease of preparation (33%), availability (32%), time (24%), calorie content (14%), what their child prefers (10%), what their spouse prefers (8%), health care provider's advice (6%), and other (1%).

#### Mental Health and Suicide

♦ In the past year, Cuyahoga County African American adults were diagnosed with or treated for the following mental health issues: a mood disorder (9%), an anxiety disorder (4%), a psychotic disorder (3%), and some other mental health disorder (1%). 5% indicated they had taken medication for one or more mental health issue.

2012 Adult Comparisons	Cuyahoga County Whites 2012	Cuyahoga County African Americans 2012	Ohio African Americans 2011	U.S. African Americans 2011
Diagnosed with diabetes	6%	17%	18%*	14%*
Diagnosed with asthma	13%	21%	14%	16%
Diagnosed with arthritis	31%	43%	26%	23%
Current drinker	64%	47%	49%	50%
Current smoker	18%	21%	27%	26%

<sup>\*2010</sup> BRFSS data

#### Health Risk Behaviors & Chronic Disease Disparities for African Americans in Ohio: Findings from the 2008 Ohio Family Health Survey

- ❖ In 2008, 33% of African Americans were reported as current smokers.
- ❖ 18% of African Americans were reported as binge drinkers.
- African American adults were more than 20% more likely than whites to be smokers, but 20% less likely to engage in binge drinking.
- African Americans were 30% more likely than white adults to be obese and 40% more likely to have hypertension.
- ❖ In 2008, 37% of African Americans were reported as obese and 38% were reported to have high blood pressure.
- ❖ In 2008, 12% of African Americans were reported to have diabetes mellitus and were considered 30% more likely than whites to have been diagnosed with type 2 diabetes.

(Source: Healthy Policy Institute of Ohio - 2008, Ohio Family Health Survey, http://a5e8c023c8899218225edfa4b02e4d9734e01a28.gripelements.com/pdf/publications/policybrief\_disparitiesrace.pdf)

#### The Office of Minority Health Report: Obesity and African Americans

- ❖ In 2010, African Americans were 1.4 times as likely to be obese as Whites.
- African American women have the highest rates of being overweight or obese compared to other groups in the United States. About four out of five African American women were overweight or obese.
- ❖ In 2010, African American women were 70% more likely to be obese than White women.
- \* From 2007-2010, African American girls were 80% more likely to be overweight than White girls.
- The 2011 BRFSS reported that in Ohio, 39% of the African American population was overweight (36% Whites). 34% of the African American population was obese (29% Whites).
- \* In 2010, African Americans were 70% less likely to engage in active physical activity as compared to Whites.
- People who are overweight are more likely to suffer from high blood pressure, high levels of blood fats, and LDL cholesterol, which are all risk factors for heart disease and stroke.
- Deaths from heart disease and stroke are almost twice the rate for African Americans as compared to Whites.

(Source: The Office of Minority Health, Obesity and African Americans, updated 9/6/12, http://minorityhealth.bhs.gov/templates/content.aspx?ID=6456 and the 2011 BRFSS)

## African American Quality of Life and Safety

#### **Key Findings**

Over one-quarter (28%) of African Americans kept a firearm in or around their home. 48% of African Americans attempted to get assistance from a social service agency. More than one-fifth (22%) were limited in some way because of a physical, mental or emotional problem.

- ♦ This section is NOT generalizable to the Cuyahoga County African American population as only 266 adults responded to the survey.
- ♦ African American adults were <u>more</u> likely than Whites to:
  - O Have provided regular care or assistance to a friend or family member who had a health problem, long-term illness or disability (33% compared to 18% of Whites).
  - Have attempted to get assistance from a social service agency (48% compared to 14% of Whites).
  - o Have engaged in some form of gambling (52% compared to 46% of Whites).
  - o Have someone in their immediate family serve in the military (62% compared to 43% of Whites).
  - O Have a firearm in or around their house (28% compared to 25% of Whites).
- ♦ African American adults were <u>less</u> likely than Whites to:
  - O Have reported always wearing a seatbelt while driving or riding in a car (62% compared to 80% of Whites).
  - O Have been limited in some way because of a physical, mental or emotional problem (22% compared to 25% of Whites).

#### African Americans and Osteoarthritis

- ❖ The 2011 BRFSS indicated that 26% of African Americans were diagnosed with arthritis (compared to 30% of the general population and 17% of Hispanics).
- Osteoarthritis is the most common type of arthritis and typically affects multiple joints.
- The National Institute of Arthritis and Musculoskeletal and Skin Diseases (NIAMS) estimates that more than 27 million adults, 25 years of age and older, are burdened by OA.
- African Americans were twice as likely as Caucasians to have knee (TFJ) OA and had 77% greater odds of knee and spine OA together.
- ❖ African Americans had significantly *less* frequent OA in fingertip joints (distal interphalangeal), alone and with other hand joint sites compared to Caucasians.

Osteoarthritis Project." Amanda E. Nelson, Jordan B. Renner, Todd A. Schwartz, Virginia B. Kraus, Charles G. Helmick and Joanne M. Jordan. Arthritis & Rheumatism; Published Online: October 21, 2011 (DOI: 10.1002/art.30610). http://doi.wiley.com/10.1002/art.30610)

(Source: "Differences in Multi-Joint Radiographic Osteoarthritis Phenotypes

among African Americans and Caucasians: The Johnston County

#### **Quality of Life**

- Among those African American adults who were limited in some way, the following most limiting problems or impairments were reported: arthritis (63%), back or neck problems (57%), walking problems (42%), high blood pressure (33%), stress, depression, anxiety, or emotional problems (28%), lung/breathing problems (25%), diabetes (25%), eye/vision problems (16%), heart problems (14%), fractures, bone/joint injuries (14%), tobacco dependency (12%), drug addiction (7%), stroke-related problems (7%), cancer (5%), hearing problems (5%), a learning disability (5%), and alcohol dependency (5%).
- Cuyahoga County African American adults needed help with the following because of an impairment or health problem: household chores (35%), getting around for other purposes (29%), shopping (23%), doing necessary business (10%), bathing (9%), dressing (7%), eating (7%), and getting around the house (2%).

#### **Social Context**

- ♦ More than one-fourth (28%) of Cuyahoga County African American adults kept a firearm in or around their home. 4% of adults reported they were unlocked and loaded.
- 62% of African American adults reported always wearing their seatbelt while driving or riding in a car. An additional 20% reported wearing their seatbelt most of the time.

# African American Quality of Life and Safety

- Cuyahoga County African American adults received assistance for the following in the past year: food (33%), utilities (23%), healthcare (20%), prescription assistance (17%), transportation (16%), rent/mortgage (13%), employment (9%), free tax preparation (9%), home repair (5%), legal aid services (5%), credit counseling (4%), clothing (4%), and emergency shelter (1%).
- ◆ Nearly half (48%) Cuyahoga County African American adults attempted to get assistance from a social service agency. Of those adults who looked for assistance, they received it from the following: a government agency (69%), a church (13%), 2-1-1/United Way (12%), a friend or family member (11%), Cuyahoga County Community Action Commission (8%), other social services (7%), health department (4%), and somewhere else (3%).
- ♦ In the past year, Cuyahoga County African American adults experienced the following stressors: a close family member went into the hospital (41%), the death of a family member or close friend (37%), had bills they could not pay (37%), someone in their household lost their job (16%), household income cut in half (16%), moved to a new address (14%), someone in their household had their work hours reduced (11%), someone close to them had an alcohol or drug problem (9%), became separated or divorced (5%), had someone homeless living with them (5%), someone in their household went to jail (4%), were financially exploited (4%), were involved in a physical fight (2%), were homeless (2%), their child was threatened by someone close them (2%), were threatened by someone close to them (1%).
- ◆ African American adults engaged in the following types of gambling in the past year: lottery (43%), casinos (28%), online gambling (9%), with friends at home (4%), at work with fellow workers (2%), horse track (1%), and dog track (1%).
- Of those African American adults who engaged in some type of gambling, 7% did so daily and 20% did so once or twice a year.
- Cuyahoga County African American adults indicated they would have problems obtaining the following assistance if they needed it: someone to loan them \$50 (25%), someone to help pay for their medical expenses (23%), someone to take them to a clinic or doctor's office if they needed a ride (17%), someone to help if they were sick and needed to be in bed (13%), someone to talk with about their problems (13%), someone to accompany them to their doctor's appointments (8%), someone to explain directions from their doctor (4%), and back-up childcare (3%).
- ♦ 62% of Cuyahoga County African American adults reported that someone in their immediate family had served in the military. Those with family members in the military reported that the following issues had affected their family as a result of military service: could not find/keep a job (6%), housing issues (6%), major health problems due to injury (5%), substance/drug abuse (5%), access to mental health treatment (2%), marital problems (2%), access to medical care (2%), and access to substance abuse/drug use treatment (2%).

## African American Quality of Life and Safety

#### Mental Health in the African American Community

#### Access to Care

According to the *National Institute of Mental Health*, African Americans communities are underserved by the nation's mental health system. One out of three African Americans who need mental health care receives it. African Americans are more likely to stop treatment early and are less likely to receive follow-up care.

#### **Cultural Concerns**

- Many Americans, including African Americans underestimate the impact of mental disorders, believing their symptoms of depression are "just the blues."
- \* Additionally, African Americans have issues of distrust in the health care system and mental illness stigma frequently lead African Americans to initially seek mental health support from non-medical sources.

#### Rates of Mental Disorders

- \* Rates of mental illnesses in African American communities are similar to those of Whites; however, culturally diverse groups often bear a disproportionately high burden of disability resulting from mental disorders. This disparity stems from a lack of culturally competent care, and receiving less or poor quality care.
- Disorders like schizophrenia and mood disorders, there is a high probability of misdiagnosis because of differences in how African Americans express symptoms of emotional distress.

With proper diagnosis and treatment, African Americans can increasingly better manage their mental health and lead healthier lives.

(Source: American Psychiatric Association (APA), Mental Health in the African American Community. 2009. Retrieved from http://bealthyminds.org/Document-Library/Brochure-Library/African-American.aspx?FT=.pdf)

# Cuyahoga County Health Assessment Information Sources

Source	Data Used	Website
American Cancer Society, Cancer Facts and Figures 2011 & 2012. Atlanta: ACS, 2011 & 2012  American Cancer Society, Colorectal Cancer,	<ul> <li>2011 &amp; 2012 Cancer facts, figures, and estimates</li> <li>ACS cancer detection guidelines</li> <li>Cancer risk factors</li> <li>Nutrition recommendations</li> <li>Screening recommendations</li> <li>Tobacco Use and Health</li> <li>Colorectal cancer early detection and</li> </ul>	www.cancer.org/
2012	screening tools	/groups/cid/docum ents/webcontent/00 3170-pdf.pdf
American Diabetes Association	<ul> <li>◆ Diabetes Prevalence</li> <li>◆ Diabetes Race Prevalence</li> <li>◆ Diabetes Risk, Complications</li> <li>◆ Diabetes Cost</li> </ul>	www.diabetes.org
American Heart Association. Risk Factors for Coronary Heart Disease, 2011	◆ Risk factors for Cardiovascular Disease that can be modified or treated	www. americanheart.org
Annals of Emergency Medicine, v. 57, issue 6, 2011, p. 691	◆ Firearm Injury Prevention	http://journals.ohioli nk.edu/ejc/pdf.cgi/ EJC_Article.pdf?issn =01960644&issue=v 57i0006&article=691 _fip
"Arthritis at a Glance," 2011, Centers for Disease Control & Prevention, Morbidity and Mortality Weekly Report 2010; 59(39):999-1003	<ul><li>♦ What Can Be Done to Target Arthritis?</li><li>♦ Arthritis statistics</li></ul>	www.cdc.gov/chroni cdisease/resources/p ublications/AAG/art hritis.htm
Behavioral Risk Factor Surveillance System, National Center for Chronic Disease Prevention and Health Promotion, Behavioral Surveillance Branch, Centers for Disease Control	◆ 2009 - 2010 adult Ohio and U.S. correlating statistics	www.cdc.gov
CDC, Arthritis	<ul> <li>Risk Factors 2011</li> <li>Data and Statistics 2011</li> <li>The Impact of Arthritis</li> <li>Key Public Health Messages</li> </ul>	www.cdc.gov/arthriti s/basics/risk_factors .htm & www.cdc.gov/arthrit is/data_statistics.ht m
CDC, Asthma	♦ Asthma statistics	www.cdc.gov/VitalSi gns/pdf/2011-05- vitalsigns.pdf
CDC, Physical Activity for Everyone	Physical activity recommendations	www.cdc.gov/physic alactivity/everyone/g uidelines/adults.html
Campaign for Tobacco Free Kids, State Cigarette Excise Tax Rates & Rankings, July 2012	◆ Costs of tobacco	www.tobaccofreekids .org/research/factsh eets/pdf/0097.pdf

# Cuyahoga County Health Assessment Information Sources

Source	Data Used	Website
Employment & Family Services	<ul> <li>Cuyahoga County Health Care Coverage Highlights: 1st Quarter 2012</li> <li>Cuyahoga County Medicaid Recipients</li> </ul>	http://employment.cuy ahogacounty.us/en- US/Statistics- Reports.aspx
Healthy People 2020: U.S. Department of Health & Human Services	<ul> <li>♦ All Healthy People 2020 target data points</li> <li>♦ Some U.S. baseline statistics</li> </ul>	www.healthypeople.g ov/2020/topicsobjec tives2020
Joint Center, PLACE MATTERS, Design Lab Thirteen	◆ Cuyahoga County Family Support and Child Welfare	http://commonhealt haction.org/DL13Co ncept%20Paper- FINAL.pdf
"More African Americans Burdened by Osteoarthritis in Multiple Large Joints," Arthritis & Theumatism; Published Online: October 21, 2011 (DOI: 10.1002/art.30610)	♦ African Americans and Osteoarthritis	http://doi.wiley.com /10.1002/art.30610
National Alliance on Mental Health (NAMI)	◆ African American Community Mental Health Facts Sheet	www.nami.org
National Cancer Institute	<ul><li>◆ Cancer and Women</li><li>◆ Cancer and Men</li></ul>	www.cancer.gov
National Center for Chronic Disease Prevention and Health Promotion, CDC	<ul> <li>Alcohol and Binge Drinking Dangers</li> <li>Alcohol and caffeinated beverages</li> <li>Arthritis</li> <li>Asthma Statistics</li> <li>Binge drinking</li> <li>Birth Data</li> <li>Human Papillomavirus</li> <li>Men's Health</li> <li>Obesity Statistics</li> <li>U.S. Fertility Rate</li> </ul>	www.cdc.gov
National Heart, Lung, and Blood Institute, 2011	♦ Chronic respiratory conditions	www.nhlbi.nih.gov/
National Institute on Drug Abuse	♦ Commonly abused prescription drugs	www.nida.nih.gov
National Institute of Health, National Institute of Arthritis and Musculoskeletal and Skin Diseases	♦ Back Pain Prevention	www.niams.nih.gov/ Health_Info/Back_P ain/back_pain_ff.asp , updated 9/09
Nicotine & Tobacco Research, "Flavored Cigar Smoking Among U.S. Adults: Findings from the 2009-2010 National Adult Tobacco Survey," 2012	◆ Flavored Cigar Smoking Among U.S. Adults	http://ntr.oxfordjou rnals.org/content/ea rly/2012/08/17/ntr. nts178.abstract

# Cuyahoga County Health Assessment Information Sources

Source	Data Used	Website
Office of Minority Health, 2012	Depression and African Americans	http://minorityhealt h.hhs.gov/templates /content.aspx?ID=6 474
Office of Minority Health, 2012	♦ Obesity and African Americans	http://minorityhealt h.hhs.gov/templates /content.aspx?ID=6 456
Ohio Attorney General's Office, 2010 Domestic Violence Report	◆ Domestic violence in Cuyahoga County	www.ohioattorneyge neral.gov/files/Publi cations/Publications- for- Victims/Domestic- Violence-Reports- (1)/2010-Domestic- Violence-Reports
Ohio Department of Health, Information Warehouse	<ul> <li>Cuyahoga County and Ohio mortality statistics</li> <li>Cuyahoga County and Ohio birth statistics</li> <li>Cuyahoga County and Ohio sexually transmitted diseases</li> <li>Statistics re: access to health services</li> </ul>	www.odh.state.oh.us
Ohio Department of Health, Ohio Cancer Incidence Surveillance System	<ul> <li>Cuyahoga County and Ohio cancer mortality</li> <li>Cuyahoga County and Ohio cancer incidence</li> </ul>	www.odh.state.oh. us
Ohio Department of Health, Ohio Oral Health Surveillance System	◆ Cuyahoga County oral health resources	http://publicapps.od h.ohio.gov/oralhealt h/default.aspx
Ohio Department of Public Safety	<ul><li>2011 Traffic Crash Facts</li><li>Cuyahoga County and Ohio crash facts</li></ul>	www.state.oh.us/odp s
Ohio Family Health Survey Results, 2010	<ul> <li>◆ Cuyahoga County and Ohio uninsured rates</li> <li>◆ Oral Health Findings</li> </ul>	http://grc.osu.edu/o fhs/ & www.odh.ohio.gov/ ~/media/ODH/AS SETS/Files/ohs/oral %20health/2010ofhs databrief.ashx
U. S. Department of Commerce, Census Bureau; Bureau of Economic Analysis	♦ American Community Survey	www.census.gov

## List of Acronyms and Terms

**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.

Binge drinking Consumption of five alcoholic beverages or more (for males) or four

alcoholic beverages or more (for females) on one occasion

**BMI** Body Mass Index is defined as the contrasting

measurement/relationship of weight to height.

**BRFSS** Behavior Risk Factor Surveillance System, an adult survey conducted

by the CDC.

**CDC** Centers for Disease Control and Prevention.

**Current Smoker** Individual who has smoked at least 100 cigarettes in their lifetime and

now smokes daily or on some days.

**HCF** Healthy Communities Foundation of the Hospital Council of

Northwest Ohio.

HP 2020 Healthy People 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

**N/A** Data not available.

**ODH** Ohio Department of Health

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.

# Methods for Weighting the 2012 Cuyahoga County 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 2012 Cuyahoga County survey, a weighting was applied prior to the analysis that weighted the survey respondents to reflect the actual distribution of Cuyahoga County based on age, sex, race, and income.

Weightings were created for each category within sex (male, female), race (White, Non-White), Age (7 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 Cuyahoga 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 2012 Cuyahoga County Survey and the 2010 Census.

	2012 Cuyahoga Survey		2010	Weight	
<u>Sex</u>	<u>Number</u>	Percent	<u>Number</u>	<u>Percent</u>	
Male	261	47.111913	609,670	47.4348371	1.006857
Female	293	52.888087	675,609	52.5651629	0.993894

In this example, it shows that the proportion of males versus females in the survey was nearly the same as in the county. There was only a slightly larger portion of females in the sample compared to the actual portion in Cuyahoga County. The weighting for males was calculated by taking the percent of males in Cuyahoga County (based on Census information) (47.4348371%) and dividing that by the percent found in the 2012 Cuyahoga County sample (47.111913%) [47.4348371/47.111913 = weighting of 1.006857 for males]. The same was done for females [52.5651629/52.888087 = weighting of 0.993894 for females]. Thus males' responses are weighted slightly heavier by a factor of 1.006857 and females' responses weighted less by a factor of 0.993894.

# Methods for Weighting the 2012 Cuyahoga County Assessment Data

This same thing was done for each of the 18 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 1.799475 [0.993894 (weight for females) x 1.193184 (weight for White) x 1.351797 (weight for age 35-44) x 1.122501 (weight for income \$50-\$75k)]. Thus, each individual in the 2012 Cuyahoga 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 17.0) 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 when analyzing by sex and income.

# Methods for Weighting the 2012 Cuyahoga County Assessment Data

	Cuyahoga		2010			Weighting
Category	Sample	0/0	Census *	0/0		Value
Sex:						
Male	261	47.111913	609,670	47.4348371		1.006854397
Female	293	52.888087	675,609	52.5651629		0.993894206
			,			
Age:						
20-24	38	6.985294	77,601	8.1178708		1.162137294
25-34	56	10.294118	158,330	16.5629629		1.608973539
35-44	69	12.683824	163,903	17.1459566		1.351797158
45-54	127	23.345588	198,103	20.7236319		0.88768943
55-59	83	15.257353	87,255	9.1277795		0.598254463
60-64	74	13.602941	72,258	7.55893749		0.555684054
65-74	92	16.911765	94,856	9.92292307		0.586746755
75-84	4	0.735294	71,287	7.45736081		10.1420107
85+	1	0.183824	32,335	3.38257693		18.4012185
Race:						
White	323	54.285714	832,512	64.7728625		1.19318431
African American	225	37.815126	379,068	29.4930517		0.779927367
Other	47	7.899160	73,699	5.73408575		0.725910856
Household						
Income	00	16.029144	EE 220	10.30113		0.642650291
Less than \$10,000	88		55,338			0.642650281
\$10k-\$15k	49	8.925319	37,713	7.02025	H	0.786554674
\$15k-\$25k	73	13.296903 11.111111	65,109	12.12000 11.25105	$\vdash$	0.911490361 1.012594866
\$25k-\$35k	61	13.843352	60,441		H	1.012394866
\$35k-\$50	76 84		78,213	14.55930		
\$50k-\$75k	118	15.300546	92,264	17.17489	$\vdash$	1.122501443
\$75k or more	118	21.493625	148,125	27.57338		1.282862975

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

<sup>\*</sup> Cuyahoga County population figures taken from the 2010 Census.

# Cuyahoga County Sample Demographic Profile\*

	2012.0	Cuyahoga	Ohio Census
Variable	2012 Survey Sample	County Census 2011	2011
Age			
20-29	14.0%	12.5%**	12.8%**
30-39	15.7%	11.9%**	12.2%**
40-49	16.5%	13.9%**	14.0%**
50-59	18.7%	15.0%**	14.5%**
60 plus	26.0%	21.3%**	19.8%**
Race / Ethnicity			
White	54.8%	64.5%	82.9%
Black or African American	34.4%	29.3%	12.1%
American Indian and Alaska Native	1.3%	0.2%	0.2%
Asian	1.1%	2.6%	1.7%
Other	2.8%	1.1%	0.9%
Hispanic Origin (may be of any race)	2.2%	4.9%	3.2%
Marital Status†			
Married Couple	50.0%	40.9%	48.3%
Never been married/member of an			
unmarried couple	28.3%	36.9%	31.0%
Divorced/Separated	11.4%	14.6%	14.1%
Widowed	3.1%	7.7%	6.6%
Education†			
Less than High School Diploma	5.9%	12.7%	11.7%
High School Diploma	23.4%	29.1%	34.8%
Some college/ College graduate	65.3%	58.2%	53.5%
Income (Families)			
\$14,999 and less	14.5%	11.4%	9.3%
\$15,000 to \$24,999	13.2%	8.8%	8.5%
\$25,000 to \$49,999	21.5%	23.9%	24.4%
\$50,000 to \$74,999	16.2%	20.1%	21.3%
\$75,000 or more	26.1%	35.7%	36.5%

<sup>\*</sup> 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).

<sup>\*\* 100%</sup> demographic data for 2010. Data not made available for 2011.

<sup>†</sup> The Ohio and Cuyahoga 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.

# Demographics

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

Category	Total	Males	Females
Cuyahoga County	1,280,122	607,362	672,760
0-4 years	74,793	37,733	37,060
1-4 years	60,326	30,447	29,879
< 1 year	14,467	7,286	7,181
1-2 years	29,894	15,095	14,799
3-4 years	30,432	15,352	15,080
5-9 years	76,816	38,929	37,887
5-6 years	30,260	15,402	14,858
7-9 years	46,556	23,527	23,029
10-14 years	83,351	42,551	40,800
10-12 years	49,558	25,283	24,275
13-14 years	33,793	17,268	16,525
12-18 years	124,433	63,317	61,116
15-19 years	90,130	45,737	44,393
15-17 years	55,302	28,076	27,226
18-19 years	34,828	17,661	17,167
20-24 years	78,335	38,379	39,956
25-29 years	81,986	39,395	42,591
30-34 years	76,000	36,796	39,204
35-39 years	76,059	36,620	39,439
40-44 years	82,814	39,676	43,138
45-49 years	95,248	45,486	49,762
50-54 years	101,938	48,955	52,983
55-59 years	90,182	43,157	47,025
60-64 years	73,929	34,479	39,450
65-69 years	52,933	23,594	29,339
70-74 years	42,673	18,095	24,578
75-79 years	36,842	14,950	21,892
80-84 years	32,672	12,439	20,233
85-89 years	21,967	7,425	14,542
90-94 years	8,871	2,447	6,424
95-99 years	2,302	493	1,809
100-104 years	268	25	243
105-109 years	13	1	12
110 years & over	0	0	0
Total 85 years and over	33,421	10,391	23,030
Total 65 years and over	198,541	79,469	119,072
Total 19 years and over	971,511	450,758	520,753

# General Demographic Characteristics (Source: U.S. Census Bureau, Census 2011)

## 2011 ACS 1-year estimates

Total Population		
2011 Total Population	1,270,294	
2000 Total Population	1,280,122	
1		
Largest City-Cleveland		
2011 Total Population	393,804	100%
2000 Total Population	478,403	100%
Population By Race/Ethnicity		
Total Population	1,270,294	100%
White Alone	819,389	64.5%
Hispanic or Latino (of any race)	62,711	4.9%
African American	372,149	29.3%
American Indian and Alaska Native	1,994	0.2%
Asian	33,454	2.6%
Two or more races	29,548	2.3%
Other	13,401	1.1%
Population By Age 2010		
Under 5 years	74,793	5.8%
5 to 17 years	215,469	16.8%
18 to 24 years	113,163	8.8%
25 to 44 years	316,859	24.7%
45 to 64 years	362,122	28.2%
65 years and more	198,541	15.5%
Median age (years)	40.3	
II 1 -11 D - 'T'		
Household By Type	F22.7F/	1000/
Total Households	533,756	100%
Family Households (families)	304,582	57.1%
With own children <18 years	131,479	24.6%
Married-Couple Family Households	200,148	37.5%
With own children <18 years	75,174	14.1%
Female Householder, No Husband Present	84,919	15.9%
With own children <18 years	47,637	8.9%
Non-family Households	229,174	42.9%
Householder living alone	199,660	37.4%
Householder 65 years and >	68,819	12.9%
Households With Individuals < 18 years	145,270	27.2%
Households With Individuals 65 years and >	145,686	27.3%
Trouseriolas with individuals 05 years and 2	173,000	<b>⊿</b> 1.J/0
Average Household Size	2.33 peo	ple
Average Family Size	3.13 peo	ple

# General Demographic Characteristics, Continued (Source: U.S. Census Bureau, Census 2011)

#### 2011 ACS 1-year estimates

Median Value of Owner-Occupied Units Median Monthly Owner Costs (With Mortgage) Median Monthly Owner Costs (Not Mortgaged) Median Gross Rent for Renter-Occupied Units Median Rooms Per Housing Unit	\$123,300 \$1,300 \$490 \$701 5.7
Total Housing Units	620,841
No Telephone Service	12,946
Lacking Complete Kitchen Facilities	8,910
Lacking Complete Plumbing Facilities	4,826

# Selected Social Characteristics (Source: U.S. Census Bureau, Census 2011)

#### 2011 ACS 1-year estimates

#### School Enrollment

Population 3 Years and Over Enrolled In School	329,361	100%
Nursery & Preschool	20,366	6.2%
Kindergarten	14,710	4.5%
Elementary School (Grades 1-8)	124,265	37.7%
High School (Grades 9-12)	73,837	22.4%
College or Graduate School	96,183	29.2%
Educational Attainment		
Population 25 Years and Over	873,489	100%
< 9th Grade Education	28,919	3.3%
9th to 12th Grade, No Diploma	82,196	9.4%
High School Graduate (Includes Equivalency)	254,324	29.1%
Some College, No Degree	197,587	22.6%
Associate Degree	55,388	6.3%
Bachelor's Degree	152,742	17.5%
Graduate Or Professional Degree	102,333	11.7%
Percent High School Graduate or Higher	*(X)	87.3%
Percent Bachelor's Degree or Higher	*(X)	29.2%
*(X) – Not available	( )	

# Selected Social Characteristics, Continued (Source: U.S. Census Bureau, Census 2011)

#### 2011 ACS 1-year estimates

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Maintai Status		
Population 15 Years and Over	1,039,771	100%
Never Married	383,225	36.8%
Now Married, Excluding Separated	425,221	40.9%
Separated	21,870	2.1%
Widowed	79,600	7.7%
Female	62,933	6.1%
Divorced	129,855	12.5%
Female	77,254	7.4%
Grandparents As Caregivers		
Number of grandparents living with own grandchildren < 18 years	21,653	100%
Grandparent Responsible for Grandchildren	9,993	46.2%
Veteran Status		
Civilian Veterans 18 years and over	86,129	8.7%
Disability Status of the Civilian Non-institutionalized Population		
Total Civilian Noninstitutionalized Population	1,254,059	100%
With a Disability	176,212	14.1%
Under 18 years	282,004	100%
With a Disability	14,287	5.1%
18 to 64 years	781,934	100%
With a Disability	94,323	12.1%
65 Years and Over	190,121	100%
With a Disability	67,602	35.6%

# Selected Economic Characteristics (Source: U.S. Census Bureau, Census 2011)

#### 2011 ACS 1-year estimates

#### Employment Status

Population 16 Years and Over	1,022,659	100%
In Labor Force	640,329	62.6%
Not In Labor Force	382,330	37.4%
Females 16 Years and Over	545,864	100%
In Labor Force	320,554	58.7%
Population Living With Own Children <6 Years	85,894	100%
All Parents In Family In Labor Force	57,753	67.2%

# Selected Economic Characteristics, Continued (Source: U.S. Census Bureau, Census 2011)

#### 2011 ACS 1-year estimates

Occupations		
Employed Civilian Population 16 Years and Over	562,209	100%
Management, Business, Science, and Arts Occupations	215,774	38.4%
Production, Transportation, and Material Moving Occupations	66,725	11.9%
Sales and Office Occupations	141,279	25.1%
Service Occupations	104,157	18.5%
Natural Resources, Construction, and Maintenance Occupations	34,274	6.1%
Leading Industries		
Employed Civilian Population 16 Years and Over	562,209	100%
Manufacturing	65,391	11.6%
Educational, health and social services	153,722	27.3%
Trade (retail and wholesale)	75,563	13.4%
Arts, entertainment, recreation, accommodation, and food services	53,265	9.5%
Other services (except public administration)	26,601	4.7%
Professional, scientific, management, administrative, and waste management services	59,381	10.6%
Transportation and warehousing, and utilities	24,584	4.4%
Construction	23,726	4.2%
Agriculture, forestry, fishing and hunting, and mining	1,715	0.3%
Finance, insurance, real estate and rental and leasing	44,121	7.8%
Public administration	23,833	4.2%
Information	10,307	1.8%
Class of Worker		
Employed Civilian Population 16 Years and Over	562,209	100%
Private Wage and Salary Workers	462,989	82.4%
Government Workers	73,677	13.1%
Self-Employed Workers in Own Not Incorporated Business	24,577	4.4%
Unpaid Family Workers	966	0.2%
Median Earnings		
Male, Full-time, Year-Round Workers	\$46,691	
Female, Full-time, Year-Round Workers	\$36,758	

# Selected Economic Characteristics, Continued (Source: U.S. Census Bureau, Census 2011)

#### 2011 ACS 1-year estimates

Income In 2011		
Households	533,756	100%
< \$10,000	60,206	11.3%
\$10,000 to \$14,999	40,132	7.5%
\$15,000 to \$24,999	70,176	13.1%
\$25,000 to \$34,999	61,087	11.4%
\$35,000 to \$49,999	75,251	14.1%
\$50,000 to \$74,999	91,653	17.2%
\$75,000 to \$99,999	53,366	10.0%
\$100,000 to \$149,999	49,051	9.2%
\$150,000 to \$199,999	17,302	3.2%
\$200,000 or more	15,532	2.9%
Median Household Income	<i>\$41,530</i>	
Income In 2011		
Families	304,582	100%
< \$10,000	22,172	7.3%
\$10,000 to \$14,999	12,669	4.2%
\$15,000 to \$24,999	26,883	8.8%
\$25,000 to \$34,999	28,704	9.4%
\$35,000 to \$49,999	44,050	14.5%
\$50,000 to \$74,999	61,341	20.1%
\$75,000 to \$99,999	40,280	13.2%
\$100,000 to \$149,999	40,814	13.4%
\$150,000 to \$199,999	14,810	4.9%
\$200,000 or more	12,859	4.2%
Median Family Income	<i>\$56,472</i>	
Per Capita Income In 2011	\$25,796	
Poverty Status In 2011	Number Below Poverty Level	% Below Poverty Level
Families	*(X)	14.3%
Individuals	*(X)	18.6%
$*(X) - Not \ available$		

# Selected Economic Characteristics, Continued (Source: U.S. Bureau of Economic Analysis)

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

	Income	Rank of Onio counties
BEA Per Capita Personal Income 2010	\$41,909	4th of 88 counties
BEA Per Capita Personal Income 2009	\$40,292	4th of 88 counties
BEA Per Capita Personal Income 2008	\$43,133	4th of 88 counties
BEA Per Capita Personal Income 2007	\$40,959	4th of 88 counties
BEA Per Capita Personal Income 2000	\$33,092	4th of 88 counties
BEA Per Capita Personal Income 1999	\$31,347	4th of 88 counties

(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, 5-year averages 2005 to 2009

Category	Cuyahoga	Ohio
Overall (%)	16.4%	13.6%
Children under 18 (%)	23.3%	17.6%
Age 65 and over (%)	11.5%	8.5%
< 50% FPL, i.e. severe poverty (%)	7.6%	6.2%
< 200% FPL, i.e. below self-sufficiency (%)	33.9%	30.9%

(Source: The State of Poverty in Ohio 2011, Ohio Association of Community Action Agencies, 2011 Annual Report, http://www.oacaa.org/index\_337\_103526955.pdf)

### **Employment Statistics**

Category	Cuyahoga	Ohio
Labor Force	633,200	5,810,000
Employed	594,000	5,445,700
Unemployed	39,200	364,300
Unemployment Rate* in October 2012	6.2	6.3
Unemployment Rate* in September 2012	7.0	6.5
Unemployment Rate* in October 2011	7.2	8.0

\*Rate equals unemployment divided by labor force. (Source: Ohio Department of Job and Family Services, October 2012)

**Estimated Poverty Status in 2010** 

Age Groups	Number	90% Confidence	Percent	90%				
2		Interval		Confidence				
				Interval				
Cuyahoga County								
All ages in poverty	227,716	215,190 to 240,242	18.2%	17.2 to 19.2				
Ages 0-17 in poverty	81,682	75,931 to 87,433	28.6%	26.6 to 30.6				
Ages 5-17 in families in poverty	54,660	50,223 to 59,097	25.9%	23.8 to 28.0				
Median household income	\$41,407	40,745 to 42,069						
Ohio								
All ages in poverty	1,771,404	1,746,640 to 1,796,168	15.8%	15.6 to 16.0				
Ages 0-17 in poverty	619,354	604,905 to 633,803	23.1%	22.6 to 23.6				
Ages 5-17 in families in poverty	407,567	394,584 to 420,550	20.8%	20.1 to 21.5				
Median household income	\$45,151	44,860 to 44,860						
United States								
All ages in poverty	42,215,956	45,975,650 to 46,456,262	15.3%	15.2 to 15.4				
Ages 0-17 in poverty	15,749,129	15,621,395 to 15,876,863	21.6%	21.4 to 21.8				
Ages 5-17 in families in poverty	10,484,513	10,394,015 to 10,575,011	19.8%	19.6 to 20.0				
Median household income	\$50,046	49,982 to 50,110						

(Source: U.S. Census Bureau, Small Area Income and Poverty Estimates, http://www.census.gov/hhes/www/saipe/county.html)

Federal Poverty Thresholds in 2012 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	\$11,945			•		
1 Person 65 and >	\$11,011					
2 people Householder < 65 years	\$15,374	\$15,825				
2 People Householder 65 and >	\$13,878	\$15,765				
3 People	\$17,959	\$18,480	\$18,498			
4 People	\$23,681	\$24,069	\$23,283	\$23,634		
5 People	\$28,558	\$28,974	\$28,087	\$27,400	\$26,981	
6 People	\$32,847	\$32,978	\$32,298	\$31,647	\$30,678	\$30,104
7 People	\$37,795	\$38,031	\$37,217	\$36,651	\$35,594	\$34,362
8 People	\$42,271	\$42,644	\$41,876	\$41,204	\$40,249	\$39,038
9 People or >	\$50,849	\$51,095	\$50,416	\$49,845	\$48,908	\$47,620

(Source: U. S. Census Bureau, Poverty Thresholds 2012, http://www.census.gov/hhes/www/poverty/data/threshld/index.html)