



University Hospitals

2018

Community Health Needs Assessment

UH Elyria Medical Center –
Specialty Hospital of Lorain
Lorain County



Forward

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

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

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

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

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

Acknowledgements

The 2018 University Hospitals Community Health Needs Assessment report was commissioned by:

University Hospitals Elyria Medical Center and Specialty Hospital of Lorain

The 2015 Lorain County primary data collection was funded by:

Alcohol and Drug Addiction Services Board
of Lorain County
Lorain County Board of Mental Health
Lorain County General Health District

Lorain County Health & Dentistry
Mercy
University Hospitals Elyria Medical Center

The 2015 Lorain County primary data collection was commissioned by the Lorain County Health Partners:

Alcohol and Drug Addiction Services Board of
Lorain County
Cleveland Clinic
Elyria City Health District
Lorain City Health Department
Lorain County Board of Mental Health
Lorain County Children and Families Council
Lorain County General Health District

Lorain County Health & Dentistry
Lorain County Metro Parks
Lorain County Office on Aging
Mercy
Public Services Institute at Lorain County
Community College
University Hospitals Elyria Medical Center

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

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

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Cypress Research Group

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

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

The 2018 University Hospitals Lorain County Health Needs Assessment is available on the following websites:

University Hospitals

<https://www.uhhospitals.org/about-uh/community-benefit/community-health-needs-assessment>

Hospital Council of Northwest Ohio

<http://www.hcno.org/community-services/community-health-assessments/>

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Written Comments

University Hospitals solicited feedback on its 2015 Community Health Needs Assessments (CHNAs), which are posted on its website, but did not receive any comments. Individuals are encouraged to submit written comments on the current joint Community Health Needs Assessment (CHNA) to CommunityBenefit@UHHospitals.org. These comments provide additional information to hospital facilities regarding the broad interests of the community and help to inform future CHNAs and implementation strategies.

Table of Contents

Executive Summary	Pages 6-22
Internal Revenue Services (IRS) Requirements	Pages 6-7
Primary Data Collection Methods	Pages 8-9
Secondary Data Collection Methods	Page 9
Hospital Utilization Data Collection Methods	Page 10
2016 Ohio State Health Assessment (SHA)	Page 11
Data Summary	Pages 12-22
Trend Summary	Pages 23-25
Evaluation of Impact	Pages 26-31

HEALTHCARE ACCESS

Health Care Coverage	Pages 32-38
Access and Utilization	Pages 39-52
Preventive Medicine	Pages 53-55
Women's Health	Pages 56-58
Men's Health	Pages 59-62
Oral Health	Pages 63-67

HEALTH BEHAVIORS

Health Status Perceptions	Pages 68-69
Adult Weight Status	Pages 70-75
Adult Tobacco Use	Pages 76-81
Adult Alcohol Consumption	Pages 82-88
Adult Drug Use	Pages 89-96
Adult Sexual Behavior	Pages 97-101
Adult Mental Health	Pages 102-105

CHRONIC DISEASE

Cardiovascular Health	Pages 106-112
Cancer	Pages 113-117
Asthma	Pages 118-122
Arthritis	Page 123
Diabetes	Pages 124-126
Quality of Life	Pages 127-128

SOCIAL CONDITIONS

Social Determinants of Health	Pages 129-134
Environmental Health	Page 135
Parenting	Pages 136-137
Maternal and Infant Health	Pages 138-142

RURAL, URBAN, SUBURBAN HEALTH

Rural Health	Pages 143-144
Suburban Health	Pages 145-146
Urban Health	Pages 147-148

YOUTH HEALTH

Youth Weight Control	Page 149
Youth Tobacco Use	Pages 150-152
Youth Alcohol Consumption	Pages 153-155
Youth Drug Use	Pages 156-159
Youth Mental Health	Pages 160-162
Youth Safety and Violence	Pages 163-164
Youth Perceptions	Pages 165-170

APPENDICES

APPENDIX I — Needs Assessment Information Sources	Pages 171-174
APPENDIX II — Acronyms and Terms	Pages 175-176
APPENDIX III — Weighting Methods	Pages 177-178
APPENDIX IV — Demographic Profile	Page 179
APPENDIX V — Demographics and Household Information	Pages 180-187
APPENDIX VI — County Health Rankings	Pages 188-190
APPENDIX VII — Priority Areas and Resources	Pages 191-192

Executive Summary

In 2018, University Hospitals Elyria Medical Center and Specialty Hospital of Lorain worked to align their community health needs assessment (CHNA) process both at the local and state levels. The state of Ohio mandated by law (ORC 3701.981) that all hospitals must collaborate with their local health departments on community health assessments (CHA) and community health improvement plans (CHIP). In order to meet this requirement, University Hospitals Elyria Medical Center and Specialty Hospital of Lorain shifted their definition of community to encompass the entire county. This will result in less duplication. In addition, local hospitals have to align with the Ohio State Health Assessment (SHA). This requires alignment of the CHA process timeline and indicators. This local alignment must take place by October 2020. This report serves as the initial CHA to move University Hospitals Elyria Medical Center and Specialty Hospital of Lorain into a more collaborative approach. University Hospitals Elyria Medical Center and Specialty Hospital of Lorain will be actively participating in the 2019 Lorain County CHA and CHIP, which will align partners to be in compliance by 2020.

University Hospitals hired the Hospital Council of Northwest Ohio (HCNO) to align the 2018 University Hospitals Elyria Medical Center and Specialty Hospital of Lorain joint report with the existing 2015 Lorain County Community Health Assessment. . HCNO collected the data, guided the health assessment process and integrated sources of primary data from the 2015 Lorain County Health Assessment, secondary data from 2008-2018, and hospital utilization and discharge data from 2016 into the final 2018 University Hospitals Lorain Community Health Needs Assessment report.

Internal Revenue Services (IRS) Requirements

The Affordable Care Act (ACA), enacted in March 2010, added new Section 501 (r) requirements in Part V, Section B, on 501 (c)(3) organizations that operate one or more hospital facilities. Each 501 (c)(3) hospital organization must conduct a community health needs assessment and adopt an implementation strategy at least once every three years. This report meets these IRS requirements.

DEFINITION OF COMMUNITY & SERVICE AREA DETERMINATION

The community has been defined as Lorain County. Most (91%) of University Hospitals Elyria Medical Center's discharges and 93% of Specialty Hospital of Lorain's discharges were Lorain County residents. In addition, University Hospitals is positioning itself to conduct joint or aligned CHNAs in each of the counties where its medical centers are located by October 1, 2020, per state of regulation (House Bill 390, effective September 28, 2016). Per the Patient Protection and Affordable Care Act, section 501(r) of the Internal Revenue Code, in order for CHNAs to be conducted jointly, all collaborating organizations must define their community to be the same. For these two reasons, the county was defined as the community.

INCLUSION OF VULNERABLE POPULATIONS

Lorain County is diverse with a substantial African American population (8.5%) and Hispanic/Latino population (9.3%) (*U.S. Census, ACS estimate 2010-2014*). There are pockets of the county designated as urban, suburban, and rural. Minority populations predominately live in Elyria or Lorain cities. For this reason, oversampling was done to ensure data could be represented for all populations. The coalition decided to focus on urban, suburban, and rural health instead of race/ethnicity, specifically. The data shows disparities across all 3 groups, depending on the indicator. This allows the county to be able to focus strategic efforts to specific vulnerable populations located geographically throughout the county.

PROCESS & METHODS FOR ENGAGING COMMUNITY

This community health needs assessment process was commissioned by the Lorain County Health Partners (LCHP). This coalition has been in existence since December 2012 and has approximately 100 member organizations. Multiple sectors, including the general public, were asked through email list serves, social media, and public notices to participate in the process which included defining the scope of the project, choosing questions for the surveys, reviewing initial data, planning a community release, and identifying and prioritizing needs. Thirteen key community stakeholders worked together to create one comprehensive assessment and plan, with more than 100 community members attending the release and providing qualitative feedback.

QUANTITATIVE & QUALITATIVE DATA ANALYSIS

The Hospital Council of Northwest Ohio was contracted to collect and analyze the data, as well as overall project management. Detailed data collection methods are described later in this section.

IDENTIFYING & PRIORITIZING NEEDS

The Lorain County Health Partners (LCHP) met multiple times to complete the 2014-2019 Lorain County Community Health Improvement Plan. LCHP used the Mobilizing for Action through Planning and Partnerships (MAPP) process, which is a community-driven strategic planning process for improving community health. This framework helps communities apply strategic thinking to prioritize health issues and identify resources to address them. There were nine coordinating agencies that comprised the CHIP steering committee and oversee the five priority area teams. The priority areas and coordinating agencies can be found in Appendix VI.

The Lorain County Health Partners sub-contracted with the Public Services Institute at Lorain County Community College (LCCC). They served as a neutral facilitator throughout the community health improvement planning process. LCCC used a ranking process with key pad polling to determine priorities.

Additional details of this process and its results can be found on the Lorain County Health Department's website. Lorain County is focused on the following five priority areas: Access to Care; Coordinated Education and Prevention to address Infant Mortality; Improving Mental Health; Improving Obesity and Weight Control; and Reducing Substance Use and Abuse.

RESOURCES TO ADDRESS NEED

Needs and priorities identified through the MAPP planning process, resulted in a comprehensive 2014-2019 Lorain County Community Health Improvement Plan (CHIP). Numerous resources were identified to address the needs found in the report, which can be found in Appendix VI. The entire 2014-2019 Lorain County CHIP can be found on the Lorain County Health Department's website.

EVALUATION OF IMPACT

The evaluation of impact is a report on the actions taken and effectiveness of strategies implemented since the last community health needs assessment. University Hospitals Elyria Medical Center and Specialty Hospital of Lorain conducted their last CHNAs in 2015.

CHNA AVAILABILITY

The 2018 University Hospitals Elyria Medical Center and Specialty Hospital of Lorain's Community Health Needs Assessment, as well as the various other assessments used in creating this report can be found at the following websites:

University Hospitals: <http://www.uhhospitals.org/about/community-benefit/community-health-needs-assessment>

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

ADOPTION BY BOARD

University Hospitals adopted the 2018 University Hospitals Elyria Medical Center and Specialty Hospital of Lorain joint Community Health Needs Assessment on September 27, 2018.

2015 Primary Data Collection Methods

DESIGN

This community needs assessment was cross-sectional in nature and included a written survey of adults within Lorain County in 2015. 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 Centers for Disease Control and Prevention for their national and state Behavioral Risk Factor Surveillance System (BRFSS). This decision was based on being able to compare local data with state and national data.

The project coordinator from the Hospital Council of NW Ohio conducted a series of meetings with the planning committee from Lorain County. During these meetings, HCNO and the planning committee reviewed and discussed banks of potential survey questions from the BRFSS. Based on input from the Lorain County planning committee, the project coordinator composed drafts of the survey containing 116 items for the adult survey. Health education researchers from the University of Toledo reviewed and approved the drafts.

SAMPLING | Adult Survey

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

PROCEDURE | Adult Survey

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

Three weeks following the advance letter, a three-wave mailing procedure was implemented to maximize the survey return rate. The initial mailing included a personalized hand signed cover letter describing the purpose of the study, a questionnaire printed on 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 the recipient to reply, another copy of the questionnaire on colored paper, and another reply envelope. A third wave postcard was sent three weeks after the second wave mailing. Surveys returned as undeliverable were not replaced with another potential respondent. The mailing process took place from August to November 2015.

The response rate for the entire mailing, including both groups was 35% (n=781: CI=± 3.5). The response rate for the general population survey was 39% (n=448: CI=± 4.62). The response rate for the Lorain County Urban mailing was 30% (n=333: CI= ± 5.36). This return rate and sample size means that the responses in the health assessment should be representative of the entire county.

DATA ANALYSIS | Adult Survey

Individual responses were anonymous. Only group data was available. All data was analyzed by health education researchers at the University of Toledo using SPSS 21.0. Crosstabs were used to calculate descriptive statistics for the data presented in this report. To be representative of Lorain County, the adult data collected was weighted by age, gender, race, and income using 2013 Census data. Multiple weightings were created based on this information to account for different types of analyses. For more information on how the weightings were created and applied, see Appendix III.

SAMPLING | Adolescent Survey

During the Fall, 2014, Communities That Care (CTC) of Lorain County, as a requirement of the Drug Free Communities and Support Program, anonymously surveyed youth in grades 6, 8, 10 at Lorain County Schools. The PRIDE Surveys Questionnaire for Grades 6-12 was given to 1,917 students in these grades: 6th graders surveyed: 614 (32%), 8th graders surveyed: 573 (29.9%) and 10th graders surveyed: 730 (38.1%) which represented approximately 15% of students in those grades throughout Lorain County. Survey questions focused on: Past 30-Day Drug Use, Students' Perception of Risk, Students' Perception of Parents' Disapproval, Age of First Use, Perception of Availability, Where and When Students Use for Cigarettes, Alcohol, Marijuana and Prescription Drugs, Additionally the survey gathered data about Violence Indicators, School Safety, Risk and Protective Factors. Ten additional questions were added to the survey to inquire about anxiety, depression, suicide, healthy eating and physical activity. A passive consent was disseminated to parents of students participating in the survey process.

DATA ANALYSIS | Adolescent Survey

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

LIMITATIONS

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

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

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

Secondary Data Collection Methods

HCNO collected secondary data from over 50 sites, including county-level data, wherever possible. HCNO utilized sites, such as the Ohio Department of Health database, Behavioral Risk Factor Surveillance System (BRFSS), Youth Risk Behavior Surveillance System (YRBSS), numerous CDC websites, Census, American Community Survey, American Cancer Society, American Diabetes Association, Healthy People 2020, County Health Rankings, Job & Family Services (Individual & Family Services), etc. Most secondary data is from 2014-2016. However, trend data has been included starting from 2008 for some indicators. All of the data is included in the section of the report it corresponds with. All primary data collected in this report is from the 2015 Lorain County Community Health Assessment. All other data will be sourced accordingly.

Hospital Utilization Data Collection Methods

HCNO worked with staff from University Hospitals, the Center for Health Affairs and Cypress Research Group to incorporate hospital discharge and utilization data within the community health assessment. The hospital utilization data included within the community health assessment is from January 2016 through December 2016. Data is broken down into gender and age, where applicable.


Each hospital provides data to the Ohio Hospitalization Association (OHA) for state-wide consolidated reporting. Those data are at the patient level, where patients are de-identified. Each data record represents a single hospital admission; hence, individuals who are hospitalized multiple times are included in the database for each time they are admitted/discharged from the hospital. [Note: OHA does not compile data for Specialty Hospital of Lorain. This data was obtained directly from the facility.]

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

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

2016 Ohio State Health Assessment (SHA)

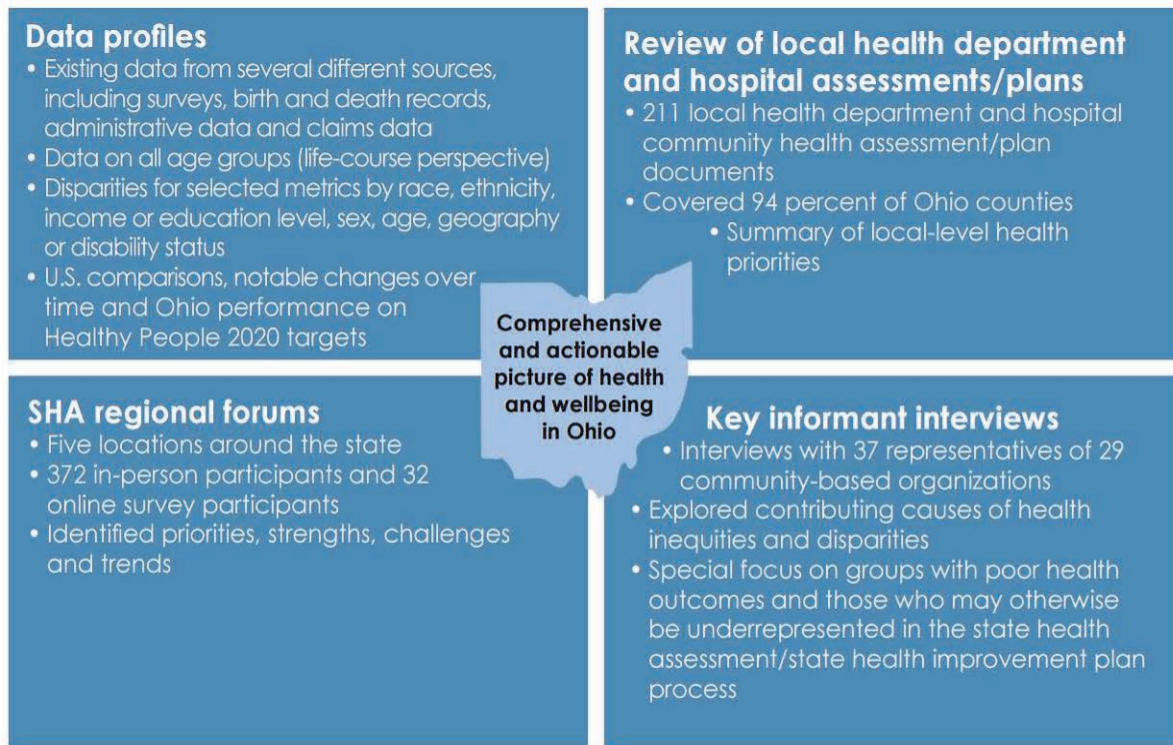
The 2016 Ohio State Health Assessment (SHA) provides data needed to inform health improvement priorities and strategies in the state. This assessment includes over 140 metrics, organized into data profiles, as well as information gathered through five regional forums, a review of local health department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

Similar to the 2016 Ohio SHA, the 2018 University Hospitals Elyria Medical Center and Specialty Hospital of Lorain Community Health Needs Assessment (CHNA) examined a variety of metrics from various areas of health including, but not limited to, health behaviors, chronic disease, access to health care, and social determinants of health. Additionally, the CHA studied themes and perceptions from local public health stakeholders from a wide variety of sectors. **Note: This symbol  will be displayed in the comparison summary when an indicator directly aligns with the 2016 Ohio SHA.**

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

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

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

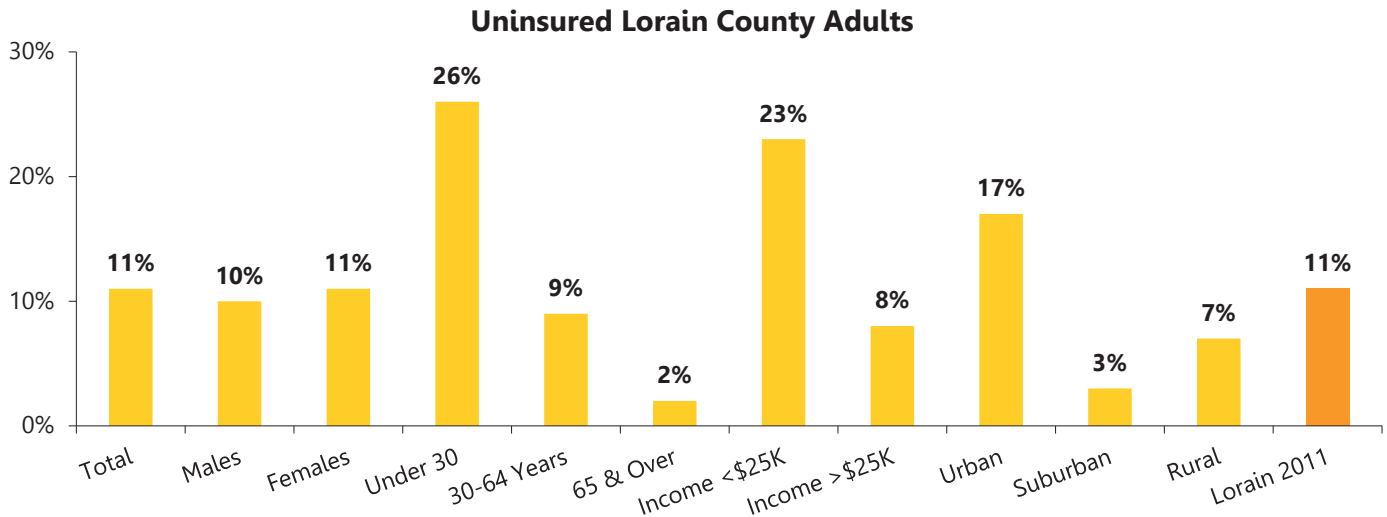


The following section is a high level view of key findings from the HCNO adult surveys and the PRIDE surveys for youth in Lorain County. Comparison data is provided in the following Trend Summary section.

Data Summary | Healthcare Access

HEALTHCARE COVERAGE

The needs assessment identified that 11% of Lorain County adults were without health care coverage. Those most likely to be uninsured were adults under age 30 and those with an income level under \$25,000. In Lorain County, 14.0% of residents live below the poverty level (Source: U.S. Census, American Community Survey 5 Year Estimates, 2012-2016).



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

ACCESS AND UTILIZATION

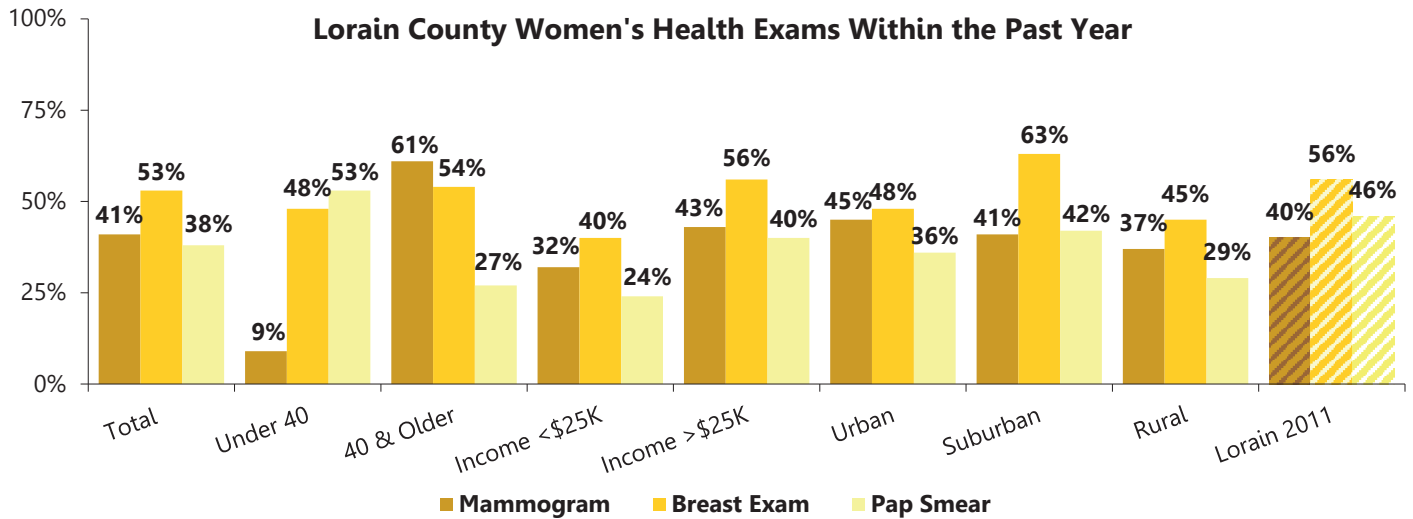
In 2015, the needs assessment identified that 64% of Lorain County adults had visited a doctor for a routine checkup in the past year. Forty-nine percent (49%) of adults went outside of Lorain County for health care services in the past year.

PREVENTIVE MEDICINE

More than four-fifths (82%) of adults ages 65 and over have had a pneumonia vaccination at some time in their life. More than one-fourth (29%) of adults over the age of 50 had a preventive screening for colorectal cancer in the past 2 years.

WOMEN'S HEALTH

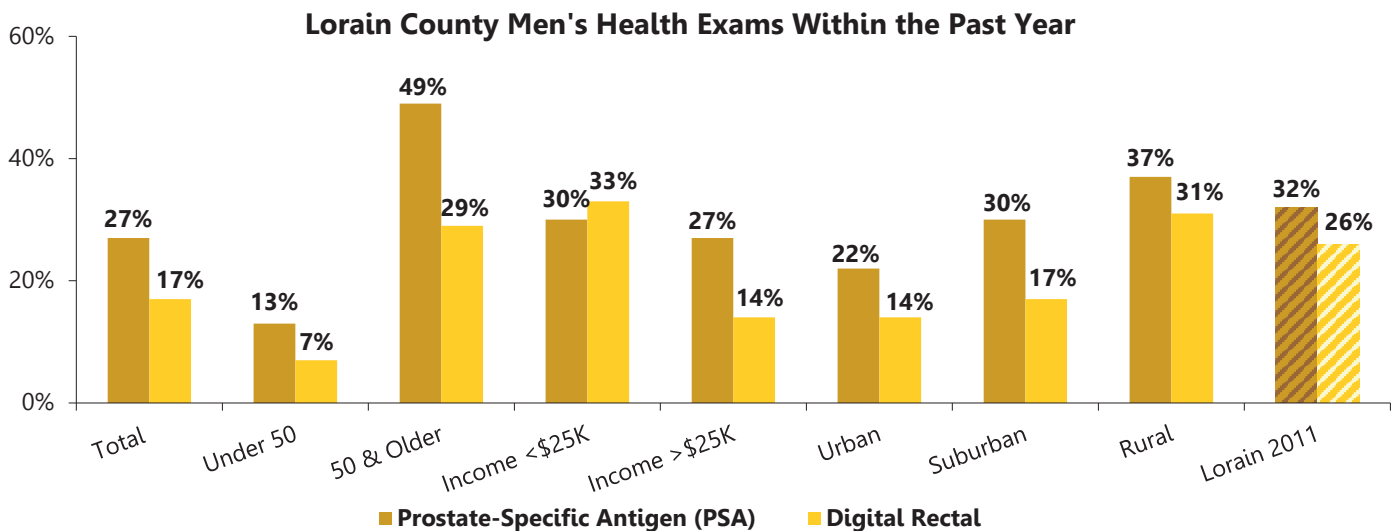
In 2015, more than three-fifths (61%) of Lorain County women over the age of 40 reported having a mammogram in the past year. 53% of Lorain County women ages 19 and over had a clinical breast exam and 38% had a Pap smear to detect cancer of the cervix in the past year. One percent (1%) of women survived a heart attack and 2% survived a stroke at some time in their life. Nearly two-fifths (39%) of Lorain County women were obese, 30% had high blood pressure, 31% had high blood cholesterol, and 25% were identified as smokers, known risk factors for cardiovascular diseases.



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

MEN'S HEALTH

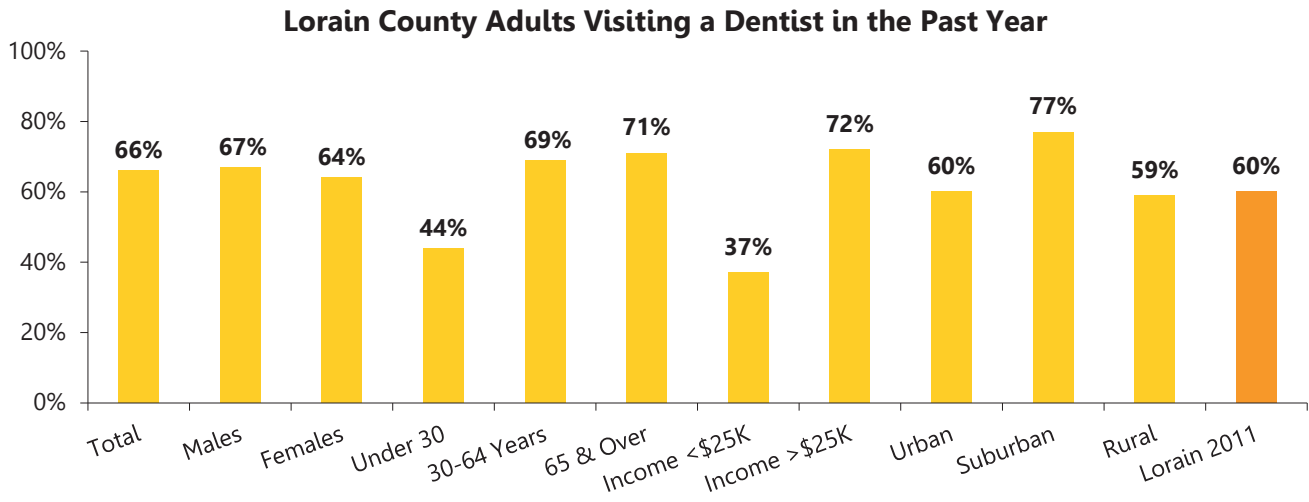
In 2015, 49% of Lorain County males over the age of 50 had a Prostate-Specific Antigen (PSA) test. Major cardiovascular diseases (heart disease and stroke) accounted for 26% and cancers accounted for 24% of all male deaths in Lorain County from 2014-2016. Five percent (5%) of men survived a heart attack and 6% survived a stroke at some time in their life. More than two-fifths (41%) of men had been diagnosed with high blood pressure, 35% had high blood cholesterol, and 19% were identified as smokers, which, along with obesity (35%), are known risk factors for cardiovascular diseases.



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

ORAL HEALTH

Nearly two-thirds (66%) of Lorain County adults had visited a dentist or dental clinic in the past year. The 2016 BRFSS reported that 68% of Ohio and 66% of U.S. adults had visited a dentist or dental clinic in the previous twelve months.

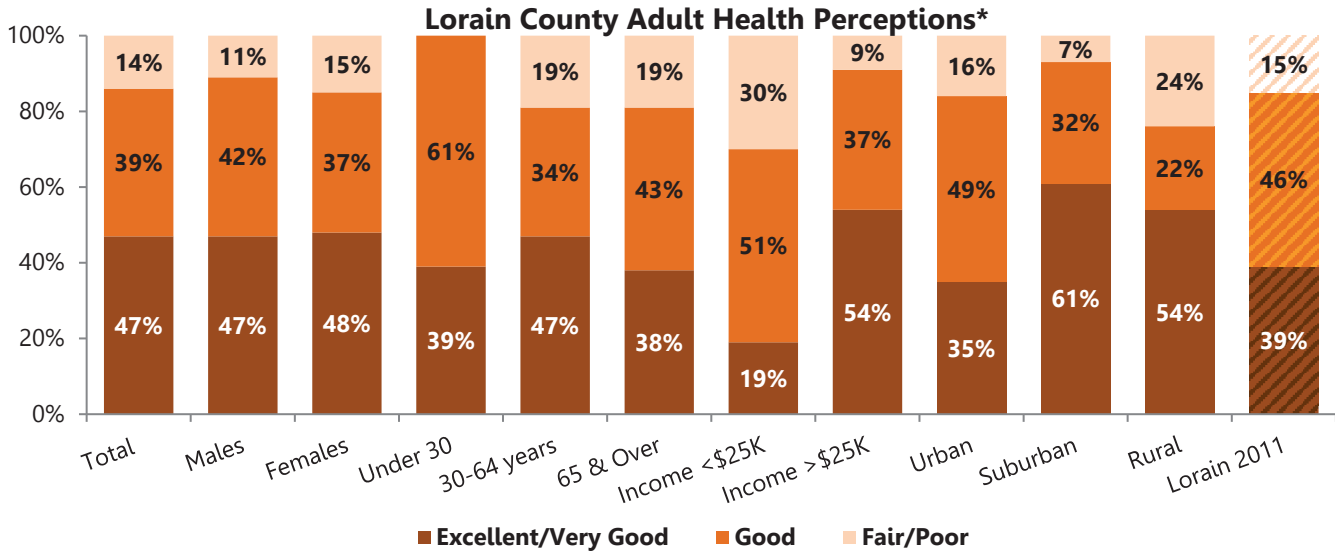


Note: Caution should be used when interpreting subgroup results as the margin of error for any subgroup is higher than that of the overall survey.

Data Summary | Health Behaviors

HEALTH STATUS PERCEPTIONS

In 2015, almost half (47%) of the Lorain County adults rated their health status as excellent or very good. Conversely, 14% of adults, increasing to 19% of those over the age of 65, described their health as fair or poor.

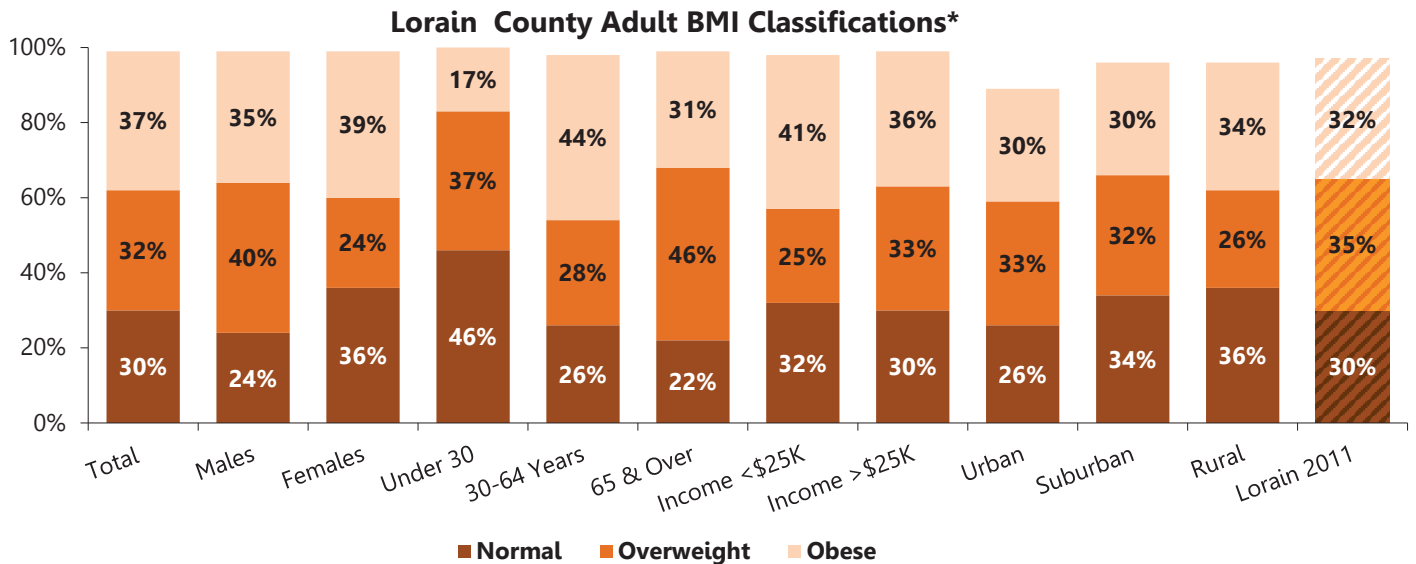


*Respondents were asked: "Would you say that in general your health is excellent, very good, good, fair or poor?"

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

ADULT WEIGHT STATUS

Sixty-nine percent (69%) of Lorain County adults were overweight or obese based on Body Mass Index (BMI). The 2016 BRFSS indicates that 32% of Ohio and 30% of U.S. adults were obese by BMI. More than one-third (37%) of Lorain County adults were obese. Nearly half (49%) of adults were trying to lose weight.



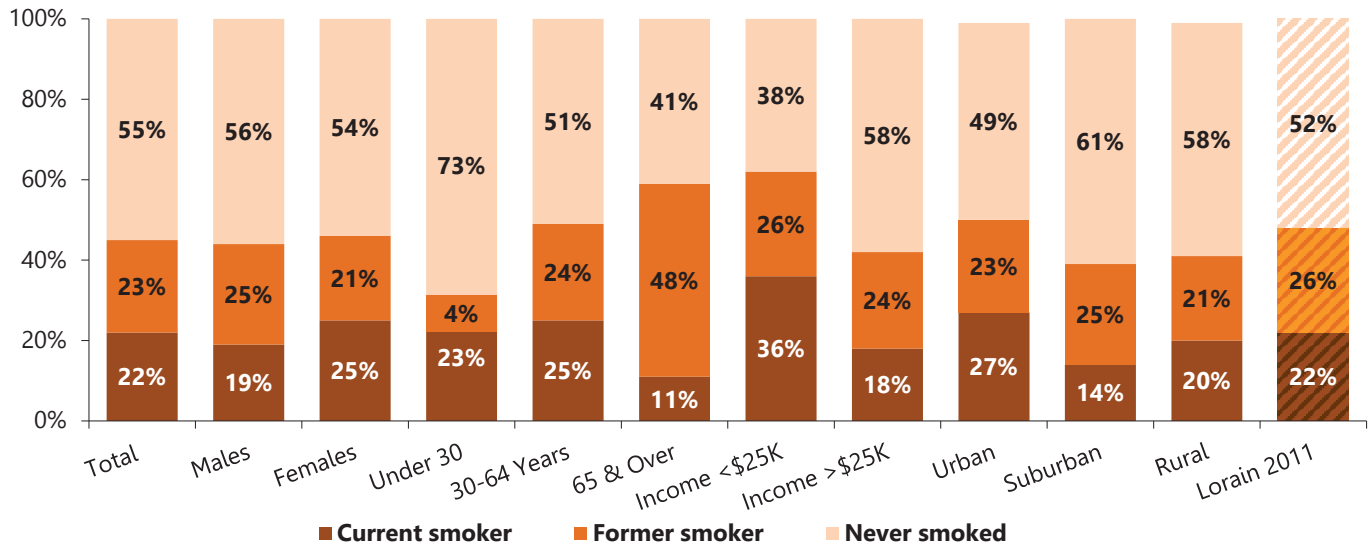
*Percentages may not equal 100% due to the exclusion of data for those who were classified as underweight

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

ADULT TOBACCO USE

In 2015, 22% of Lorain County adults were current smokers, and 23% were considered former smokers. Seven percent (7%) of adults had used e-cigarettes in the past year.

Lorain County Adult Smoking Behaviors*



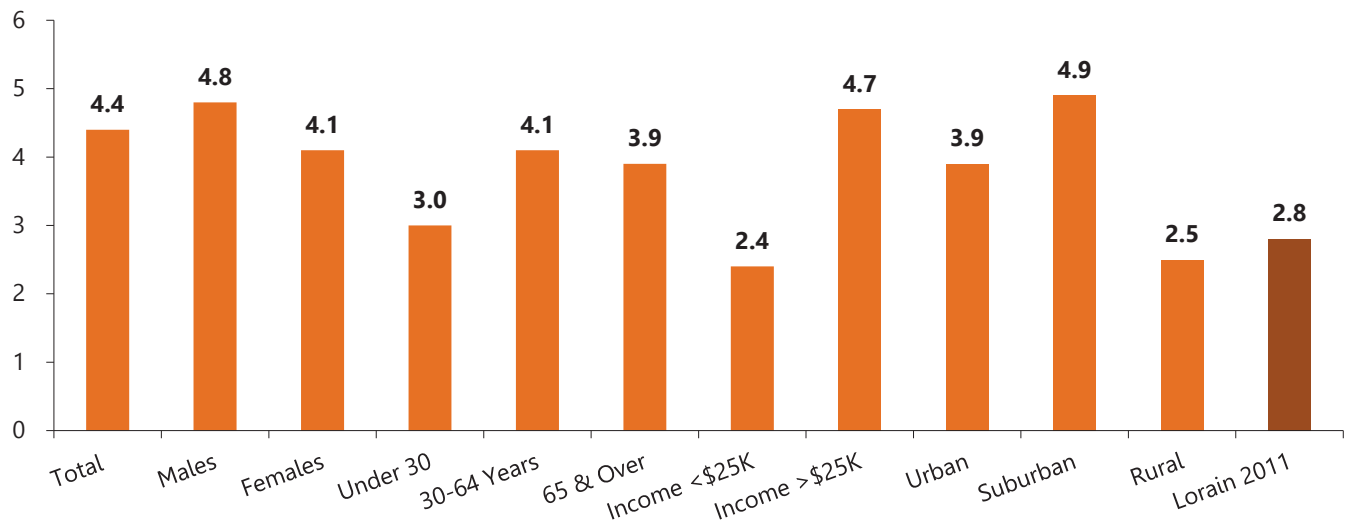
*Note: Respondents were asked: "Have you smoked at least 100 cigarettes in your entire life? If yes, do you now smoke cigarettes every day, some days or not at all?"

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

ADULT ALCOHOL CONSUMPTION

In 2015, 61% of Lorain County adults had at least one alcoholic drink in the past month. Twenty-two percent (22%) of current drinkers were binge drinkers.

Adults Average Number of Drinks Consumed Per Drinking Occasion

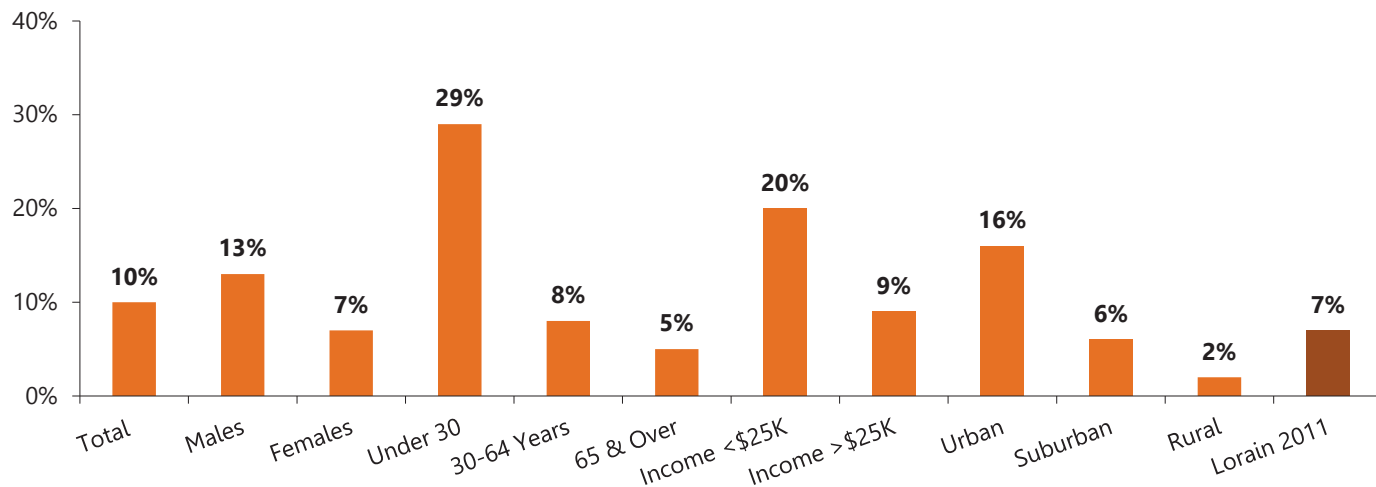


Note: Caution should be used when interpreting subgroup results as the margin of error for any subgroup is higher than that of the overall survey.

ADULT DRUG USE

In 2015, 10% of Lorain County adults had used marijuana during the past 6 months. Eleven percent (11%) of adults had used medication not prescribed for them or took more than prescribed to feel good or high and/or more active or alert during the past 6 months.

Lorain County Adult Marijuana Use in Past 6 Months



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

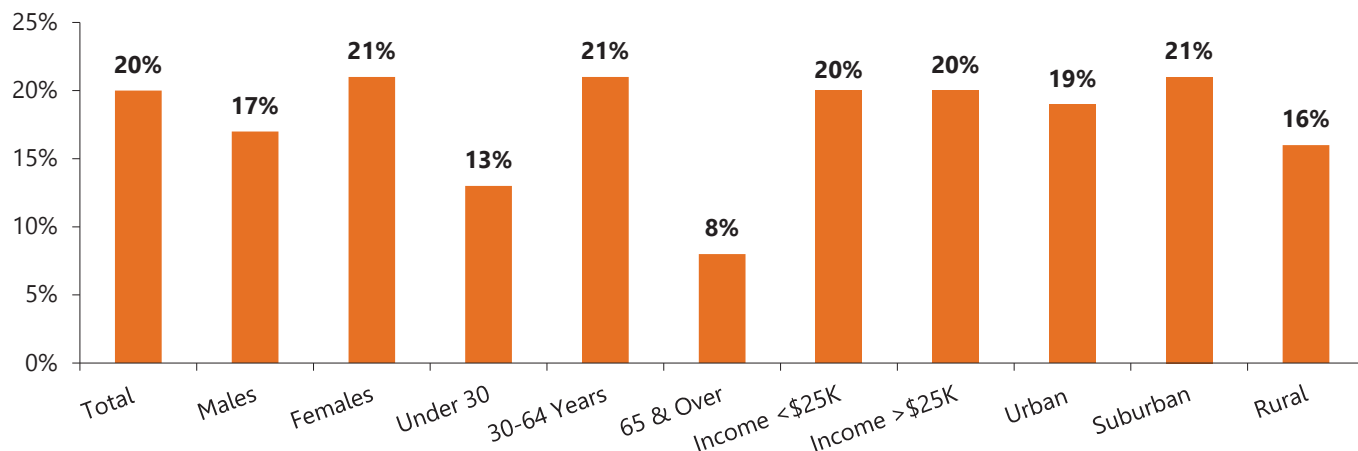
ADULT SEXUAL BEHAVIOR

In 2015, 69% of Lorain County adults had sexual intercourse. Eight percent (8%) of adults had more than one partner. Nine percent (9%) of adults have been forced to have sexual intercourse when they did not want to, increasing to 16% of females.

ADULT MENTAL HEALTH

In 2015, 3% of Lorain County adults considered attempting suicide. One-fifth (20%) of adults had a period of two or more weeks when they felt sad, blue or depressed.

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

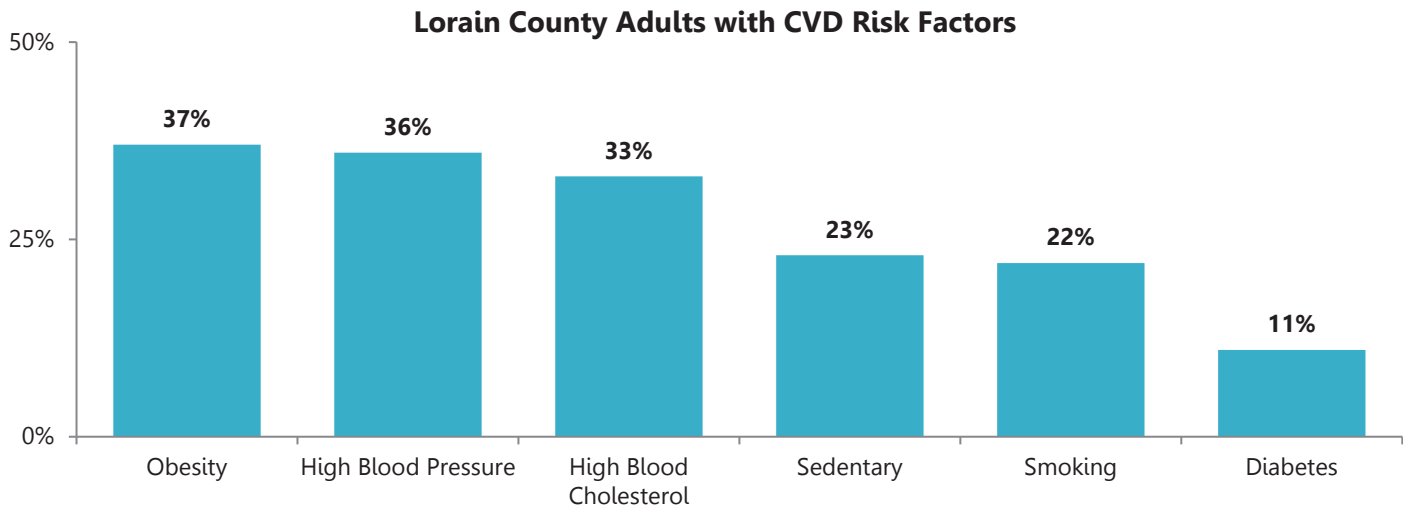


Note: Caution should be used when interpreting subgroup results as the margin of error for any subgroup is higher than that of the overall survey.

Data Summary | Chronic Disease

CARDIOVASCULAR HEALTH

Three percent (3%) of adults had survived a heart attack and 4% had survived a stroke at some time in their life. More than one-third (37%) of Lorain County adults were obese, 36% had high blood pressure, 33% had high blood cholesterol, and 22% were current smokers, four known risk factors for heart disease and stroke.

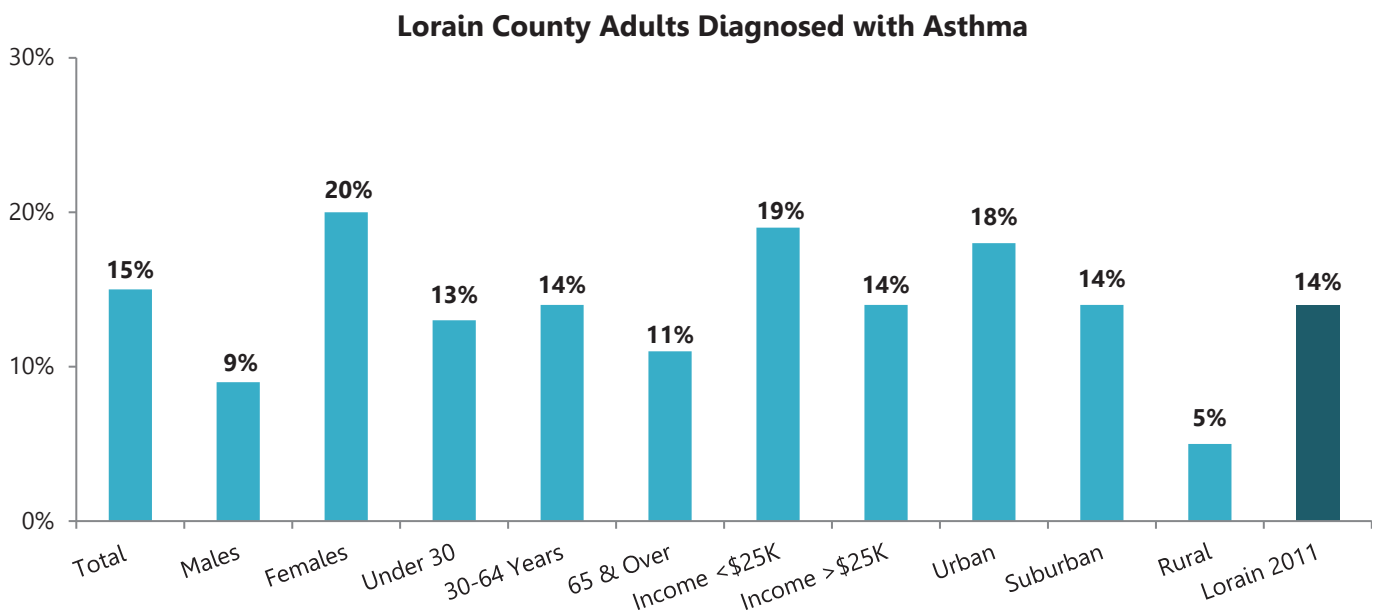


CANCER

In 2015, 11% of Lorain County adults had been diagnosed with cancer at some time in their life. The ODH Ohio Public Health Data Warehouse indicates that from 2014-2016, a total of 2,040 Lorain County residents died from cancer, the leading cause of death in the county. The American Cancer Society advises that not using tobacco products, maintaining a healthy weight, adopting a physically active lifestyle, eating more fruits and vegetables, limiting alcoholic beverages and early detection may reduce overall cancer deaths.

ASTHMA

In 2015, 15% of Lorain County adults had been diagnosed with asthma.



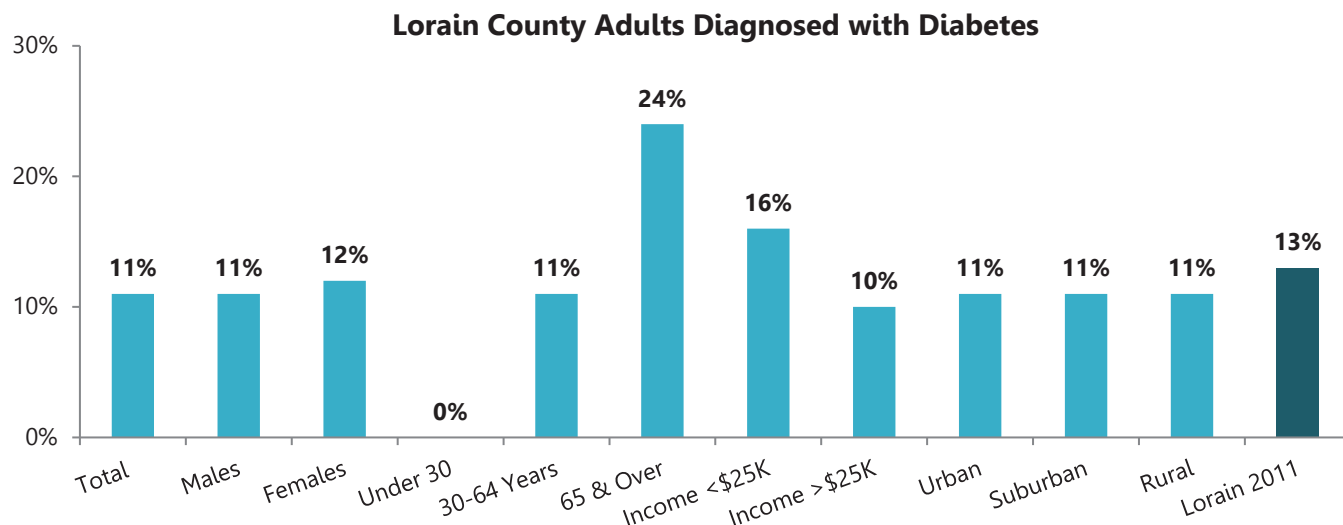
Note: Caution should be used when interpreting subgroup results as the margin of error for any subgroup is higher than that of the overall survey.

ARTHRITIS

Thirty-four percent (34%) of Lorain County adults were diagnosed with arthritis. According to the 2016 BRFSS, 31% of Ohio adults and 26% of U.S. adults were told they have arthritis.

DIABETES

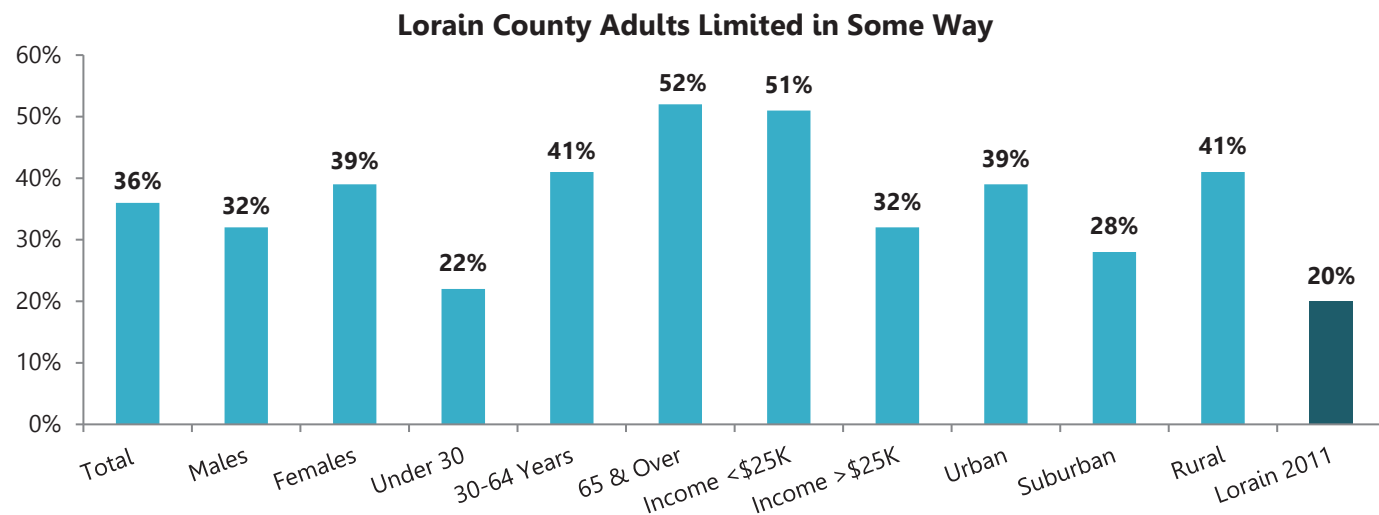
In 2015, 11% of Lorain County adults had been diagnosed with diabetes. More than one-third (35%) of adults with diabetes rated their health as fair or poor.



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

QUALITY OF LIFE

In 2015, 36% of Lorain County adults were limited in some way because of a physical, mental or emotional problem. The most limiting health problems were back or neck problems (45%); arthritis (44%); stress, depression, anxiety, or emotional problems (28%); and walking problems (25%).

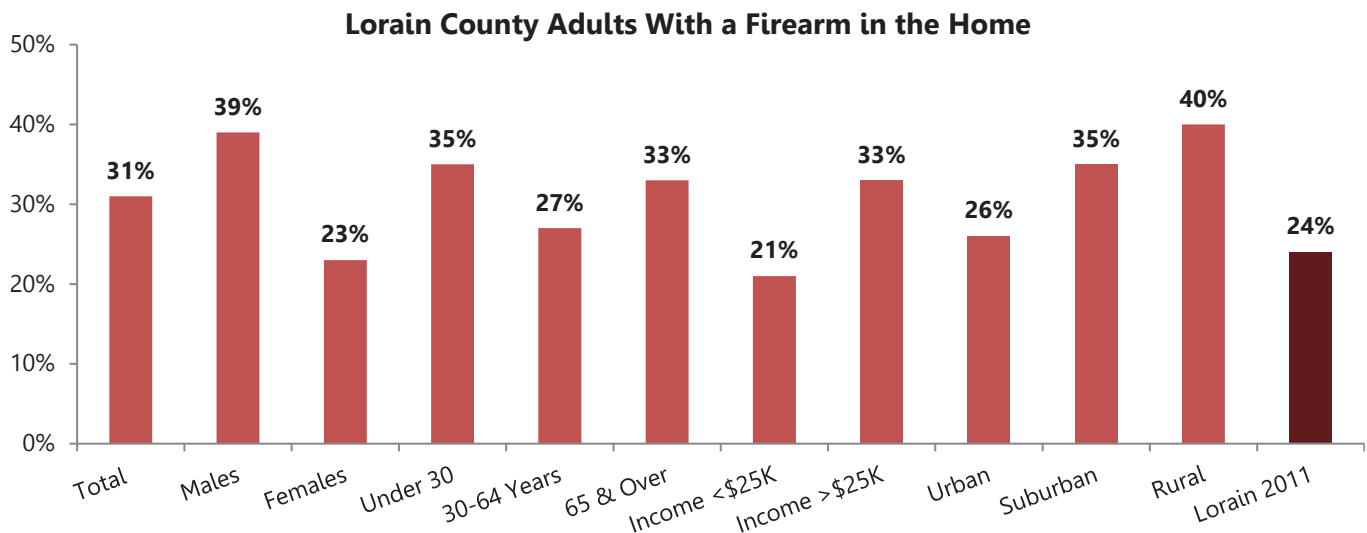


Note: Caution should be used when interpreting subgroup results as the margin of error for any subgroup is higher than that of the overall survey.

Data Summary | Social Conditions

SOCIAL DETERMINANTS OF HEALTH

In 2015, 9% of Lorain County adults were abused in the past year. Thirty-one percent (31%) of adults kept a firearm in or around their home.



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

ENVIRONMENTAL HEALTH

The top three environmental health issues for Lorain County adults were insects (11%), mold (7%), and moisture issues (6%). Eighty-four percent (84%) of adults had a working smoke detector in preparation of a disaster.

PARENTING

Sixty-seven percent (67%) of parents discussed peer pressure with their 12-to-17-year-old in the past year. Eighty-eight percent (88%) of parents reported their infant to 4-year-old child always rode in a car seat or booster seat.

MATERNAL AND INFANT HEALTH

In 2015, 68% of Lorain County parents put their child to sleep on their back as an infant.

Data Summary | Rural, Suburban, and Urban Health

RURAL HEALTH

In 2015, 7% of rural Lorain County adults did not have health care coverage. Forty percent (40%) of adults keep firearms in and around their household. Thirty-seven percent (37%) of rural women have had a mammogram in the past year.

SUBURBAN HEALTH

Three percent (3%) of suburban adults did not have health care coverage. One-third (33%) of adults had high blood pressure. Fourteen percent (14%) were current smokers. Ninety-four percent (94%) consider their neighborhood to be extremely or quite safe.

URBAN HEALTH

Nearly one-fifth (17%) of Elyria and Lorain City adults did not have health care coverage. Nearly one-third (32%) of adults had high blood cholesterol. Seventy-three percent (73%) were classified as overweight or obese, and 27% were current smokers.

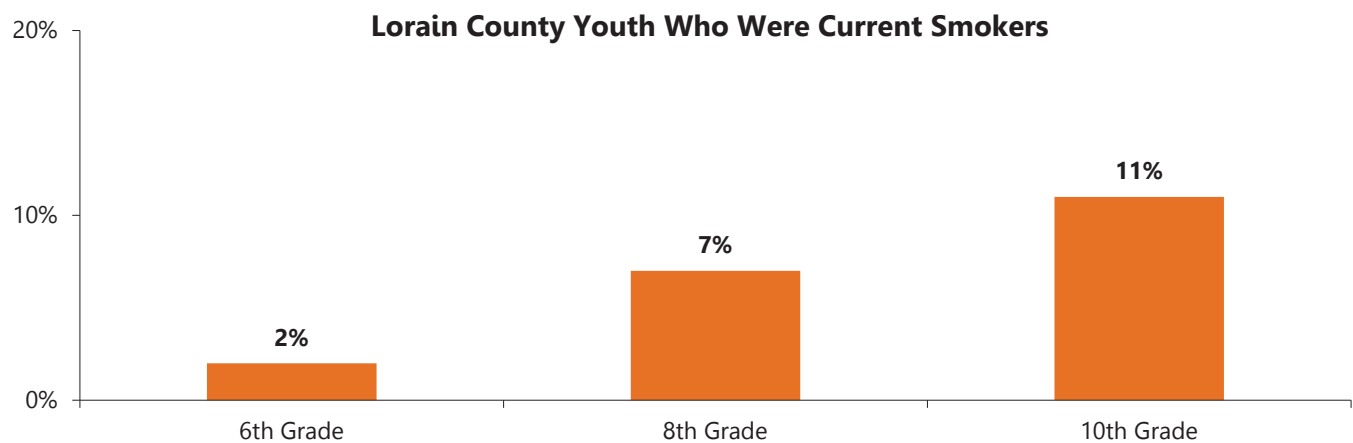
Data Summary | Youth Health

YOUTH WEIGHT STATUS

During the fall of 2014, Communities that Care of Lorain County conducted the PRIDE survey in 6th, 8th and 10th grades throughout 11 districts in the county. Nine percent (9%) of Lorain County 6th grade youth ate 4 or more servings of fruit per day. 76% of Lorain County 8th grade youth participated in at least 60 minutes of physical activity on 3 or more days in the past week. Over one-fourth (29%) of 10th grade youth spent 3 or more hours watching TV on an average day.

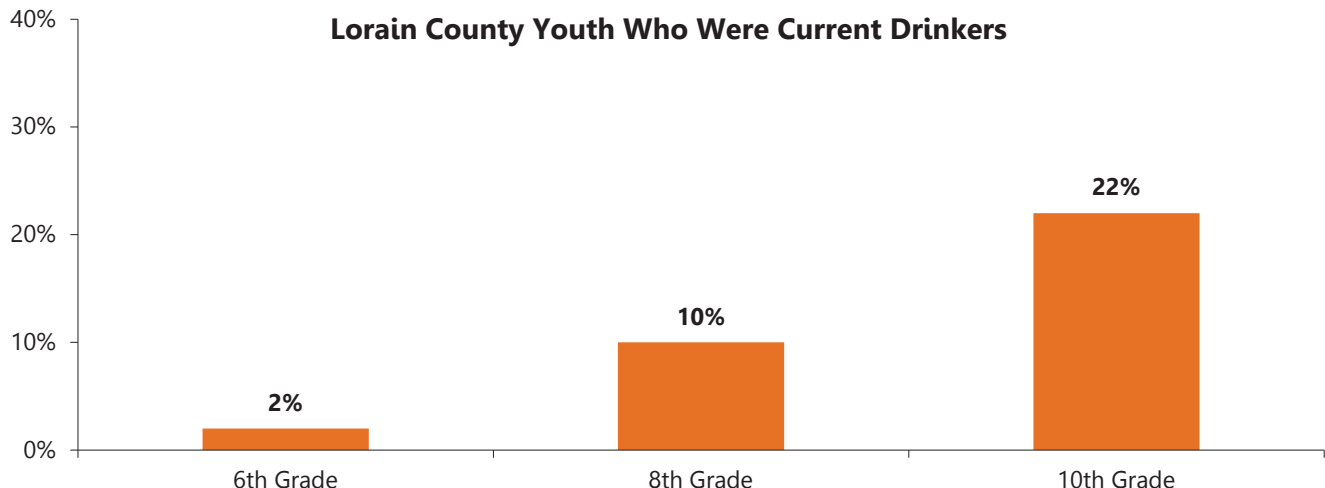
YOUTH TOBACCO USE

The 2014 Pride Survey Report indicated that 2% of Lorain County 6th grade youth and 17% of 10th grade youth had smoked cigarettes in the past year.



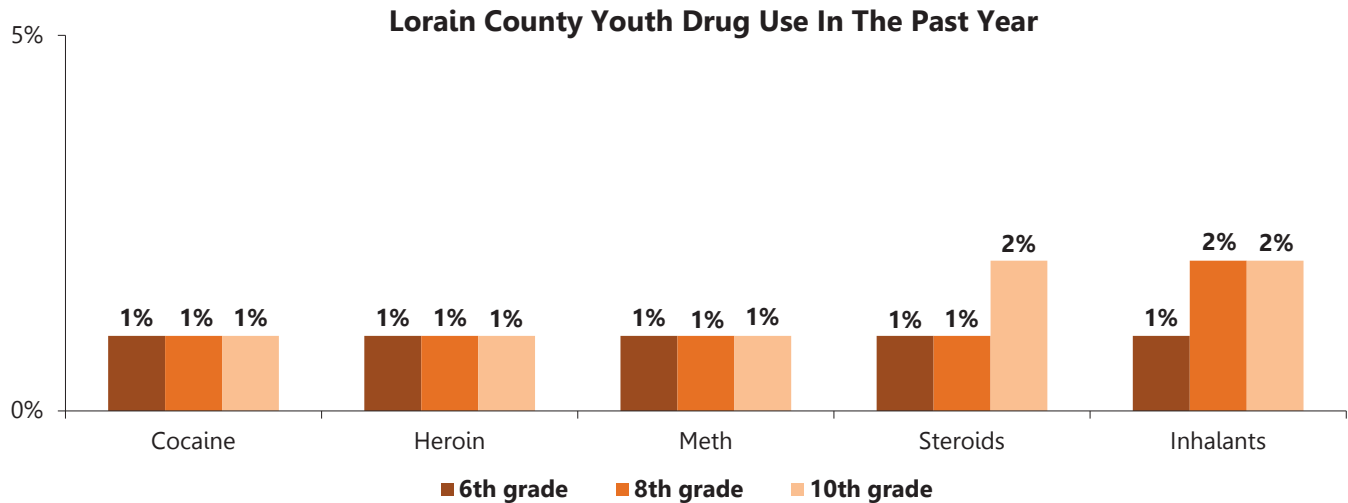
YOUTH ALCOHOL USE

Two percent (2%) of Lorain County 6th grade youth were current drinkers, having had a drink at some time in the past 30 days. The 2014 Pride Survey Report indicated that 19% of Lorain County 8th grade youth had alcohol in the past year.



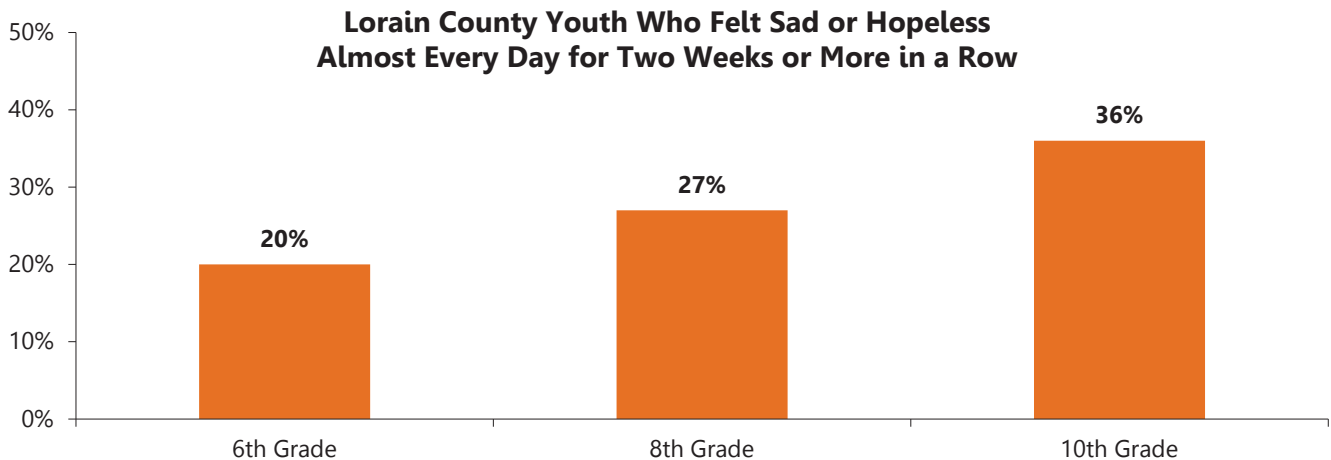
YOUTH DRUG USE

The 2014 Pride Survey Report indicated that 4% of Lorain County 6th grade youth had used illicit drugs in the past year. Seven percent (7%) of Lorain County 8th grade youth used marijuana or hashish in the past 30 days.



YOUTH MENTAL HEALTH

One-fifth (20%) of Lorain County 6th grade youth reported they felt so sad or hopeless almost every day for two weeks or more in a row that they stopped doing some usual activities. Nearly one-fifth (17%) of 10th grade youth reported they had seriously considered attempting suicide in the past 12 months.



YOUTH SAFETY AND VIOLENCE ISSUES











About one-quarter (24%) of Lorain County 10th grade youth had threatened to hurt another student by hitting, slapping or kicking. Sixteen percent (16%) of 10th grade youth hurt another student by hitting, slapping or kicking.

YOUTH PERCEPTIONS

About two-fifths (42%) of Lorain County 6th grade youth thought there was a great risk in harming themselves if they smoked one or more packs of cigarettes per day. Eighty percent (80%) of 8th grade youth reported their parents would feel it was very wrong for them to have one or two drinks of an alcoholic beverage nearly every day.

Adult Trend Summary

Lorain County adult primary data was collected through local surveys. The comparative Ohio and U.S. data was compiled through the CDC's Behavioral Risk Factor Surveillance System data, unless reported otherwise.




Adult Variables	Lorain County 2011	Lorain County 2015	Ohio 2016	U.S. 2016
Health Status				
Rated health as excellent or very good	48%	47%	51%	52%
Rated general health as fair or poor 	12%	14%	18%	17%
Rated their mental health as not good on four or more days	20%	27%	N/A	N/A
Average days that physical health not good in past month 	N/A	3.1	3.7 [†]	3.8 [†]
Average days that mental health not good in past month 	N/A	4.1	4.0 [†]	3.8 [†]
Health Care Access and Utilization				
Visited the doctor's office when needed health care services or advice	75%	80%	N/A	N/A
Had one person they thought of as their personal doctor or healthcare provider	52%	52%	83%	77%
Did not see a doctor in the past year due to cost	20%	18%	11%	12%
Visited a doctor for a routine checkup in the past year 	55%	64%	75%	71%
Health Care Coverage				
Uninsured 	11%	11%	7%	10%
Arthritis, Asthma & Diabetes				
Had been diagnosed with arthritis	35%	34%	31%	26%
Had been diagnosed with asthma 	14%	15%	14%	14%
Had been diagnosed with diabetes 	13%	11%	11%	11%
Cardiovascular Health				
Had angina or coronary heart disease 	6%	6%	5%	4%
Had a heart attack	6%	3%	5%	4%
Had a stroke	2%	4%	4%	3%
Had been diagnosed with high blood pressure 	35%	36%	34%*	31%*
Had been diagnosed with high blood cholesterol	36%	33%	37%*	36%*
Had blood cholesterol checked within the past 5 years	N/A	82%	78%*	78%*
Cancer				
Diagnosed with cancer	13%	11%	N/A	N/A
Alcohol Consumption				
Current drinker (drank alcohol at least once in the past month)	59%	61%	53%	54%
Binge drinker (defined as consuming more than four [women] or five [men] alcoholic beverages on a single occasion in the past 30 days) 	23%	11%	18%	17%

N/A - Not available


 Indicates alignment with the Ohio State Health Assessment

*2015 BRFSS, †2015 BRFSS Data as compiled by 2017 County Health Rankings

Lorain County adult primary data was collected through local surveys. The comparative Ohio and U.S. data was compiled through the CDC's Behavioral Risk Factor Surveillance System data, unless reported otherwise.

Adult Variables	Lorain County 2011	Lorain County 2015	Ohio 2016	U.S. 2016
Tobacco Use				
Current smoker (currently smoke some or all days) 	22%	22%	23%	17%
Former smoker (smoked 100 cigarettes in lifetime & now do not smoke)	26%	23%	24%	25%
Drug Use				
Adults who used marijuana in the past 6 months	7%	10%	N/A	N/A
Adults who used heroin in the past 6 months	1%	<1%	N/A	N/A
Adults who misused prescription drugs in the past 6 months	11%	11%	N/A	N/A
Sexual Behavior				
Had more than one sexual partner in past year	6%	8%	N/A	N/A
Weight Status				
Overweight	35%	32%	35%	35%
Obese 	32%	37%	32%	30%
Quality of Life				
Limited in some way because of physical, mental or emotional problem	20%	36%	21%*	21%*
Mental Health				
Considered attempting suicide in the past year	4%	3%	N/A	N/A
Two or more weeks in a row felt sad, blue or depressed	<1%	1%	N/A	N/A
Oral Health				
Adults who have visited the dentist in the past year 	60%	66%	68%	66%
Preventive Medicine				
Had a pneumonia vaccine (age 65 and older)	N/A	82%	75%	73%
Had a flu vaccine in the past year (ages 65 and over)	68%	82%	57%	58%
Had a mammogram in the past two years (age 40 and older)	79%	75%	74%	72%
Had a Pap smear in the past three years	N/A	68%	82% [‡]	80% [‡]
Had a PSA test within the past two years (age 40 & over)	N/A	60%	39%	40%
Had a PSA test within the past year	32%	27%	N/A	N/A
Had a digital rectal exam within the past year	26%	17%	N/A	N/A
Social Determinants of Health				
Firearms kept in or around their home	24%	31%	N/A	N/A

N/A - Not available

 Indicates alignment with the Ohio State Health Assessment

*2015 BRFSS, †2015 BRFSS Data as compiled by 2017 County Health Rankings, ‡BRFSS for both Ohio and U.S. reports for women ages 21-65

Youth Trend Summary

Lorain County youth primary data was collected through local PRIDE surveys.

Youth Variables	Lorain County 2014 6 th grade	Lorain County 2014 8 th grade	Lorain County 2014 10 th grade
Weight Control			
Physically active at least 60 minutes per day on every day in past week	27%	30%	25%
Physically active at least 60 minutes per day on 5 or more days in past week	48%	52%	48%
Did not participate in at least 60 minutes of physical activity on at least 1 day	12%	9%	11%
Watched TV 3 or more hours per day	33%	32%	29%
Tobacco Use			
Smoked cigarettes in the past year	2%	10%	17%
Current smokers	2%	7%	11%
Alcohol Consumption			
Youth who had alcohol in the past year	4%	19%	40%
Current drinker	2%	10%	22%
Rode with someone who was drinking	8%	15%	12%
Drank and drove (of youth drivers)	N/A	1%	2%
Drug Use			
Used marijuana in the past month	2%	7%	13%
Used methamphetamines in the past year	1%	1%	1%
Used cocaine in the past year	1%	1%	1%
Used heroin in the past year	1%	1%	1%
Used steroids in the past year	1%	1%	2%
Used inhalants in the past year	1%	2%	2%
Used ecstasy/MDMA in the past year	<1%	1%	2%
Used prescription drugs not prescribed for them in the past month	1%	3%	4%
Mental Health			
Youth who had seriously considered attempting suicide in the past year	8%	15%	17%
Youth who had attempted suicide in the past year	5%	7%	6%
Youth who felt sad or hopeless almost every day for 2 or more weeks in a row	20%	27%	36%
Safety and Violence			
Youth who carried a knife, club or other weapon at school	4%	6%	7%
Youth who had been threatened with a handgun, knife or club	6%	8%	5%
Youth who threatened to hurt another student by hitting, slapping or kicking	17%	29%	24%
Youth who always wore a seatbelt when driving a car	N/A	N/A	43%

N/A - Not available

Evaluation of Impact

University Hospitals Elyria Medical Center

In its 2015 Community Health Needs Assessment, six community health areas were targeted for the UH Elyria Medical Center's implementation plans. These were chosen as the areas of greatest need where the Medical Center's leadership felt could benefit from the hospitals' resources and expertise.

The six areas were:

- Weight Status
- Access to Care (not including transportation issues)
- Preventive Health
- Leading Causes of Death
- Maternal & Child Health, including teen births
- Mental Health

Here we describe the specific interventions initiated by UH Elyria Medical Center in response to each.

Weight Status

Many chronic diseases related to obesity were identified as co-morbidities for a large proportion of inpatients at UH Elyria Medical Center. In response to the growing understanding that obesity is the ultimate cause of many chronic diseases and hence hospitalizations, the Medical Center focused on developing effective, scalable weight-loss programs for community members. In 2016, the Enlighten Program, the Better Body Challenge, the Avon/Avon Lake Wellness Challenge, and the Healthy Kids program were offered to address obesity and wellness.

- There were only 2 enrolled members for Enlighten in 2016. Both lost weight, but it was decided to end the program for 2017 and focus on more cost-effective venues to reach a larger audience.
- The Extreme Loser Program (re-named the Better Body Challenge in 2017) had 66 participants for 2016.
- The Avon/Avon Lake Wellness Challenge had 191 actual participants
- The Healthy Kids program had 90 children enrolled in 2016. It was discontinued by the provider (UH Rainbow Babies and Children's hospital) for 2017.

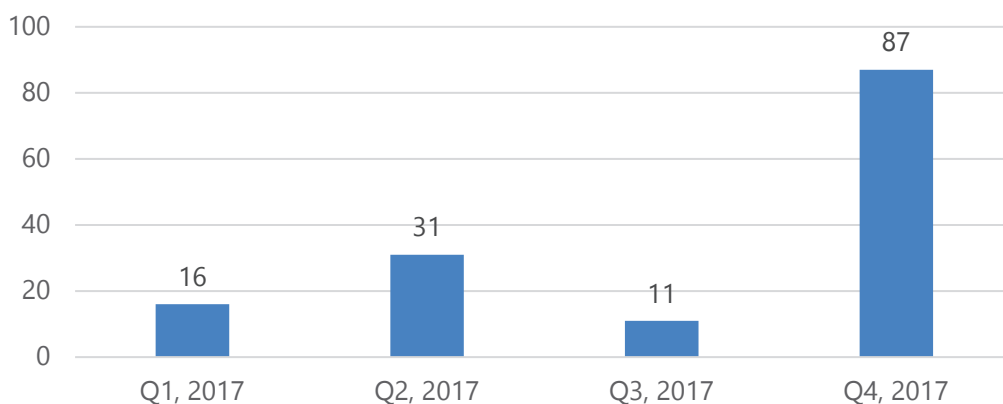
The Enlighten Program ended in 2017. It had been in place since 2004, however, the participation rate had significantly declined, partly due to the cost of the comprehensive services. In order to address the need for community weight-loss programs, UH Elyria Medical Center and UH Avon Health Center (ambulatory care), developed more affordable options. They include the Better Body Challenge (formerly the Extreme Loser program) the Avon/Avon Lake Wellness Challenge, and the Holiday Weight Management Challenge.

- **Enlighten Program:** A personalized approach to weight loss, combining the expertise of nurse practitioners, certified diabetes educators, dietitians, personal trainers, and other health care professionals to help clients reach their weight-loss and wellness goals.
- **Better Body Challenge (Previously Extreme Loser),** In this 12-week program, groups of six people work with two personal trainers and are counseled and monitored by a registered dietitian. This program replaced the Enlighten program as being more aligned with participants' needs.
- **Avon/Avon Lake Wellness Challenge:** A community challenge between Avon and Avon Lake in which one community competes against another in a program rewarding participants for health, wellness, and fitness activities.
- **Holiday Weight Management Challenge:** Participants are encouraged to maintain their weight between Thanksgiving and the New Year. They receive weigh-ins/support from the Avon Health Center staff.

The new programs built their participation levels and success rates throughout 2017 and are expected to continue into 2018:

- The average proportion of successful participants (those who lost weight) was 63% for 2017.
- The Avon/Avon Lake Wellness Challenge had 162 participants in 2017.
- A large majority (79%) reported increased levels of knowledge on important strategies for proper diet and exercise in order to maintain healthy weight levels.
- The number of quarterly participants for the Better Body Challenge and the Holiday Weight Management Challenge grew by more than five times from Q1, 2017 to Q4, 2017. The participation rate is expected to increase in 2018, based on 2017 data.
- The United We Sweat Campaign reached over 400 participants annually who utilized the free group exercise classes and wellness information.

Number of Weight Management Program Participants, by Quarter



Other programs in progress or slated to begin or continue in 2018:

- **Healthy Habits for a Healthy Lifestyle:** an 8-week weight management program offered by a registered dietitian, that includes weekly weigh-ins and group meetings.
- **Avon/Avon Lake Wellness Challenge:** A community challenge between Avon and Avon Lake where one community competes against another in a program rewarding participants for health, wellness and fitness activities.
- **United We Sweat Campaign:** Lorain County initiative to offer exercise events to promote better health throughout the county. UH Avon Health Center participates in offering some of the classes.

Access to Care (not including transportation issues)

Lack of access to primary care physicians was identified as a problem via the large number of Ambulatory Care Sensitive Cases (“ACS” cases) who were inpatients in UH Elyria Medical Center in 2013. Since this discovery, the hospital has embarked upon multiple efforts to improve access to primary care for Lorain County residents, including an improved affiliated primary care network, increased linkages to community health centers, and staff training on communicating the importance of ongoing primary care, especially for those with chronic diseases. The proportion of ACS cases at UH Elyria MC decreased from 21.6% to 16.8% in the three years from 2013 to 2016. This is a strong measure of the impact of the primary care medical community on the resident population. This focus on improving the network of PCPs in the county is expected to continue through 2018 and beyond.

The Patient Navigators program was the internal effort to improve access to primary was via linkages to primary care physicians for patients who present in the Emergency Department who report having no primary care physician. This program, launched in second quarter of 2017, first relied on system changes in order to enable referrals and scheduling with primary care physicians. Unfortunately, the first three quarters of this program have showed only minor results. The goal of the program is to reduce the number of patients presenting at the Emergency Department with no primary care provider from 20% to 17%; that proportion has not changed through the first three quarters of the program. Evaluation of the program has uncovered a resistance to using a primary care provider instead of the Emergency

Department among the patients who presented with this issue. UH Elyria Medical Center is currently examining alternative strategies to encourage patients to align with a primary care provider. Additional efforts to ensure sufficient access to primary care providers included increased primary care physician recruitment. Three adult and pediatric PCPs were added to existing offices and a new location (UH North Ridgeville Health Center) is in the planning stages.

Preventive Health

The hospital focused its efforts on improving the prevention of disease among Lorain County residents via stronger participation in screening events. The goal is early detection of progressive diseases to improve long term survivor rates and/or minimize the need for hospitalizations from acute episodes. In 2017, the hospital doubled its number of screening events, which included the following events: Diabetes Alert Day; Screening Elyria and Avon; Kiwanis screening event; Ross Environmental screening event; Elyria City Hall screening event; several Age Well, Be Well Events: Elyria Country Club, Amherst Health and Safety Fair, Bendix Health Fair, UHEMC Lobby, El Centro, and UH Avon Health Center Senior Fair; Avon 8 week Nutrition Program; monthly Blood Pressure and Glucose screening events; and, Duraline company screening.

A total of 845 screenings (blood glucose, lipids, stroke 5, blood pressure, bone density, carotids, and physical therapy measurements) were due to these efforts in 2017. Screenings were administered to 517 individual community members. Screening programs are scheduled to continue through 2018 and 2019.

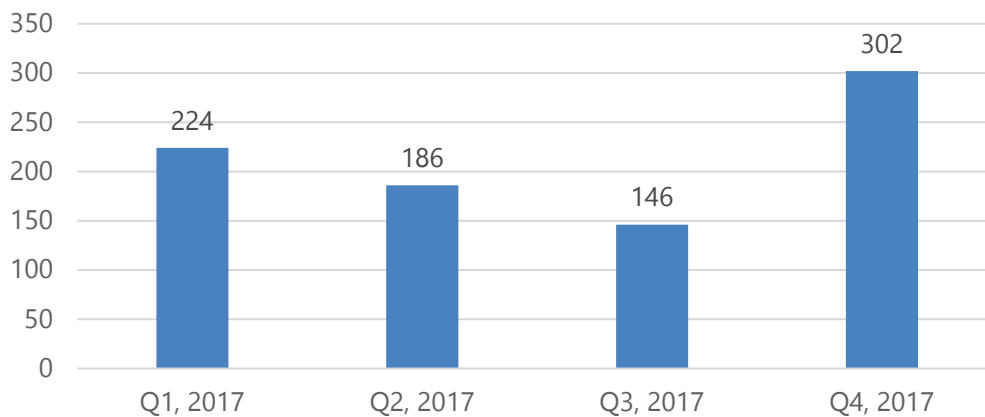
Additional and new educational efforts geared towards prevention were added from 2016 to 2017:

- *Age Well Be Well*: This “club” for seniors offers health and wellness education, monthly activities, walking club, newsletter, magazine and special events.
- *Smoking Cessation*: Participate in the Lorain County Community Health Improvement Plan (CHIP) tobacco subcommittee; add pulmonary lung function screening events to promote smoking cessation. Add smoking cessation classes to educational program line-up.

Leading Causes of Death

To address this high priority need, the hospital focused on programs which target the leading causes of death in Lorain County: cardiovascular disease, cancer, stroke and diabetes. Along with the weight loss/wellness programs and screening events described above, additionally the hospital provided three targeted health education programs, each designed to improve the understanding of and strategies to educate patients and their family members on the control of congestive heart disease, lung disease and diabetes. Colder months bring higher level of participants than warmer months, but by Q4, 2017, 302 individuals participated in these programs which help patients be active in controlling their diseases. In 2017, a total of 858 participants benefitted.

Number of Educational Program Participants (Heart Disease, Lung Disease, and Diabetes), by Quarter



Additional strategies to address the leading causes of death, launched by late 2016, were:

- **Diabetes Education Initiative:** Increase the identification and education of diabetic hospitalized patients through automated EMR notifications to the diabetes education program. Diabetes educator moved to hospital from offsite office and now provides inpatient education and collaborates with physicians and other staff.
- **Cancer:** Changes included the addition of the Hampson Mole Breast Health Suite and 2 UH thoracic surgeons.
- **Heart Disease:** Addition of a dedicated cardiac surgeon, a vascular surgeon, and an EMS Lucas Device. The LUCAS™ Chest Compression System is a tool that standardizes chest compressions in accordance with the latest scientific guidelines. It provides the same quality for all patients over time, independent of transport conditions, rescuer fatigue, or variability in the experience level of the caregiver. By doing this, it frees up rescuers to focus on other life-saving tasks and creates new rescue opportunities.
- **Stroke:** Primary Stroke Center integrated with UH Case Medical Center and UH Neurological Institute.

Maternal & Child Health, including teen births

Maternal and child health is traditionally heavily impacted by sufficient access to primary care. Efforts to improve that were described above. However, UH Elyria Medical Center also proactively addresses pregnancy and maternal issues through continuously-held programs for pregnant woman and new moms. Those programs include classes on childbirth, breastfeeding classes and support groups, infant CPR, grand parenting, baby care, and hypnobirthing. In 2016, classes were added in neighborhood health centers to improve access for underserved minority women and babies.

Additional efforts to improve maternal & child health, added by 2016, were:

- Congenital Heart Disease screening done on all newborns
- Education to every parent on the Safe to Sleep campaign
- University Hospitals Obstetrics Network – implementation of standard procedures in 2016
- Addition of two obstetricians and one pediatrician on hospital campus
- Inclusion of *Natural Beginnings*, a Natural childbirth option

Mental Health

In early recognition of the need to increase access for acute care of mental health issues, UH Elyria Hospital improved its capacity to handle those issues on an inpatient basis. In 2013, UH Elyria Medical Center had 4.0% of its inpatients hospitalized primarily for mental health issues. In 2016, that number almost doubled to 7.4%.

Specific efforts to address the large need for improvement access to mental health care included:

- **Inpatient Behavioral Health Unit:** Increased patient volume due to integration with UH mental health network
- Addition of **addiction consultants** for hospitalized patients (no longer available in 2018)
- **Project DAWN** (Deaths Avoided With Naloxone): UH Elyria Medical Center is a regular participant in county-wide planning meetings for this very effective life-saving effort. It provides financial support for Narcan Rescue Kits for first responders and prescription drop boxes located at local Sheriff's Department and Police Stations.

Specialty Hospital of Lorain

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

Almost all of the SHL’s patients are transferred from one of the two hospitals in Lorain County. The volume of patients transferred from those hospitals has been fairly stable over the past several years.

Source of Inpatients, 2013-2017

Hospital	2013	2014	2017
Mercy Hospital	176	139	122
UH Elyria Medical Center	80	90	53
Firelands Hospital (Erie County)	2	8	3
Other	39	59	52
Total	297	296	230

The SHL is the only LTCH in Lorain County. It provides specialized care for patients who suffer from respiratory conditions, cardiac related disorders, trauma, wounds, cancer and other illnesses requiring acute, long-term care. Specific diagnoses for SHL patients include:

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

Most commonly, the primary diagnosis which forced initial hospitalization was sepsis (26%). Second most common reasons for hospitalization were pulmonary conditions (16%) and cardiac conditions (16%).

As an LTCH, SHL’s impact on community health is best directed at ensuring adequate care for patients upon discharge. By definition, its patients are severely ill with a long course of illness expected. As part of its collaboration with community partners on the overall community’s health improvement plans, SHL focused its improvement efforts on those things which will help the patients after they are discharged from SHL. Hence, an important part of the care provided by the SHL is its discharge planning, which includes patient and family education. SHL provides case managers that work with the patient, the physician and any family or friend support to prepare the patient for safe discharge to an appropriate setting. In addition, a SHL case worker conducts and coordinates home health care services or nursing facilities if the patient requires placement. Since 2014, SHL has institutionalized its discharge planning providing a uniform level of education and service to discharged patients and their families, along with specialized information for patients with specific conditions.

In 2014, three priority health needs were identified based on that year’s CHNA. Those priorities were:

1. Diabetes Related Education and Support
2. Ventilator Weaning and Results
3. Palliative Care and Advanced Directives

Below we describe the strategies and tactics to address the identified needs. In all cases, services were provided to all patients for which they were appropriate. In addition, the SHL relied on partnerships where it could support community-wide efforts using the particular expertise of its personnel and experience with long term acute care patients; that it, the hospital provided financial resources and in-kind services to support the collaborative community-wide health initiatives, providing SHL personnel’s unique skill sets and perspectives on patient care.

Diabetes Related Education and Support

The community resources developed for this related to all of the CHNA's completed in 2013 and 2014 were classes for the newly-diagnosed diabetics. This class/program is offered to community members via morning, afternoon and evening classes. The SHL uses its dieticians and RNs to provide this course content to its inpatients who are diabetic and have not received this information previously.

In addition, the Specialty Hospital of Lorain developed and provided an online Diabetes Risk Assessment for individuals to take to determine if they are at risk of having or developing diabetes. Patients who are identified as being at risk receive patient education to minimize the risk of disease development.

And finally, to help those with diabetes manage the disease, the Amherst Diabetes Center offers the annual Diabetes Expo. The Expo is a half-day of learning, sharing and support-giving for those who are living with diabetes. At the Diabetes Expo, participants learn self-care tips and sources for help, including a panel discussion and question and answer session by local physicians who are well-versed in the many complications associated with diabetes, including vision problems, circulatory issues and more.

Ventilator Weaning and results

Specialty Hospital of Lorain admits pulmonary patients directly from Lorain County's acute care hospital Intensive Care Units. On average, patients spend about 25 days in their inpatient pulmonary program. SHL's Ventilator Weaning Program is designed to help patients who have been dependent on a ventilator to learn how to breathe on their own again. The program uses the latest research and technologies, together with multi-disciplinary team approach, to help patients successfully transition from being on a ventilator to breathing independence. The ventilator support groups were led by a pulmonologist and a Respiratory Therapist. Ongoing support and education were provided through the Better Breather Club. Specialty Hospital of Lorain's ventilator weaning rates have been above 70% since 2013.

For those patients who were not able to be weaned from a ventilator, SHL staff educate the next set of caretakers (usually family, if patient is discharged to home). Home-based caretakers are trained on "trach" care, suction, home ventilator operation and emergency care. Also, select home health care is provided: visits ensure the environment is appropriate and assist in making sure the ventilator is properly placed for patient safety and comfort. SHL personnel alerts the local EMS and utility provider to alert them to the presence of a home ventilator.

Palliative Care and Advance Directives

Palliative care is provided as an option for those patients whose condition is life-limiting. Specialty Hospital of Lorain makes this possible through early identification of patients who could benefit from a full understanding of palliative care, a complete assessment and treatment of pain, and attending to any physical, psychological and spiritual needs. SHL's Palliative Care team works closely with the patient's doctors and family to provide coordinated physical, emotional and spiritual care.

An Advanced Directive instructs a patient's family about his or her wishes for end-of-life care. To help people understand more about Advance Directives, SPL has included several resources on the Ohio Advance Directive form on the Specialty Hospital of Lorain website.

In addition, patients in the inpatient, outpatient and clinic setting are asked if they have an advanced directive, and if they do not, if they would like assistance in filling out one. Assistance is provided when requested. Also, any community member interested may also contact Amherst Hospital's Spiritual Health Services to fill out an Advance Directive and Durable Power of Attorney for health care. The form is notarized onsite and placed in the individual's medical record and a copy is given to the individual to share with his or her family.

National Healthcare Decision Day is a collaborative effort of national, state and community organizations committed to ensuring that all adults in the United States who are mentally able to make decisions have the information and chance to voice and document their health-care decisions. On this day, Amherst Hospital makes available to the public education opportunities to speak with an expert in end of life care decisions making and fill out the paperwork immediately. Presentations about Advance Care Planning are also offered free to the public at various venues during this week.

HEALTH CARE ACCESS: HEALTH CARE COVERAGE

Key Findings

In 2015, 11% of Lorain County adults were without health care coverage. Those most likely to be uninsured were adults under age 30 and those with an income level under \$25,000. In Lorain County, 14.0% of residents live below the poverty level (Source: U.S. Census, American Community Survey 5 Year Estimates, 2012-2016).

General Health Coverage

- In 2015, 89% Lorain County adults had health care coverage, leaving 11% who were uninsured. The 2016 BRFSS reports uninsured prevalence rates as 7% for Ohio and 10% for the U.S.
- In the past year, 11% of adults were uninsured, increasing to 23% of those with incomes less than \$25,000 and 26% of those under the age of 30.
- 10% of adults with children did not have healthcare coverage, compared to 7% of those who did not have children living in their household.

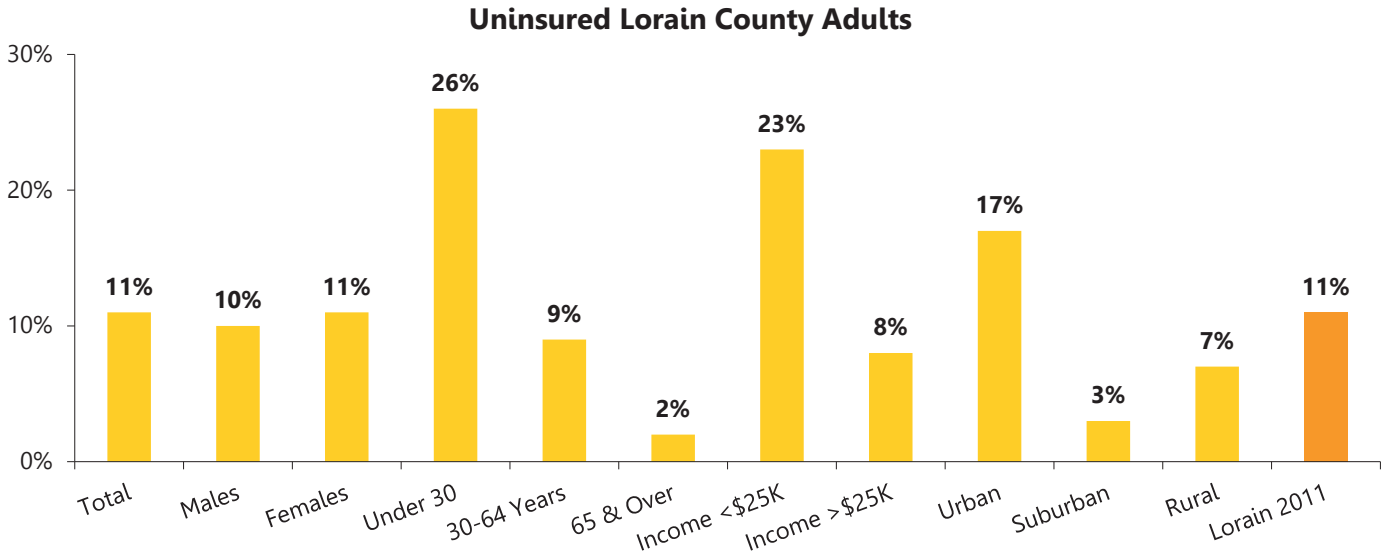
11% of Lorain County adults were uninsured

- The following types of health care coverage were used: employer (49%), Medicare (18%), someone else's employer (15%), Medicaid or medical assistance (6%), self-paid plan (6%), Health Insurance Marketplace (3%), military, CHAMPUS, TriCare, or VA (1%), multiple-including private sources (<1%), and other (3%).
- Lorain County adult health care coverage include the following: medical (100%), prescription coverage (92%), immunizations (82%), dental (76%), vision (69%), preventive health (69%), mental health (68%), outpatient therapy (67%), their spouse (63%), mental health counseling (60%), their children (56%), alcohol and drug treatment (48%), their partner (37%), in-county physicians (35%), home care (34%), long-term care (34%), skilled nursing (32%), hospice (29%), transportation (11%), and assisted living (9%).
- The top 5 reasons uninsured adults gave for being without health care coverage were:
 1. They lost their job or changed employers (38%)
 2. They could not afford to pay the insurance premiums (35%)
 3. They became a part-time/temporary employee (19%)
 4. Their employer does not/stopped offering coverage (14%)
 5. They could not afford to pay the exchange premiums (13%)

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

Adult Comparisons	Lorain County 2011	Lorain County 2015	Ohio 2016	U.S. 2016
Uninsured	11%	11%	7%	10%

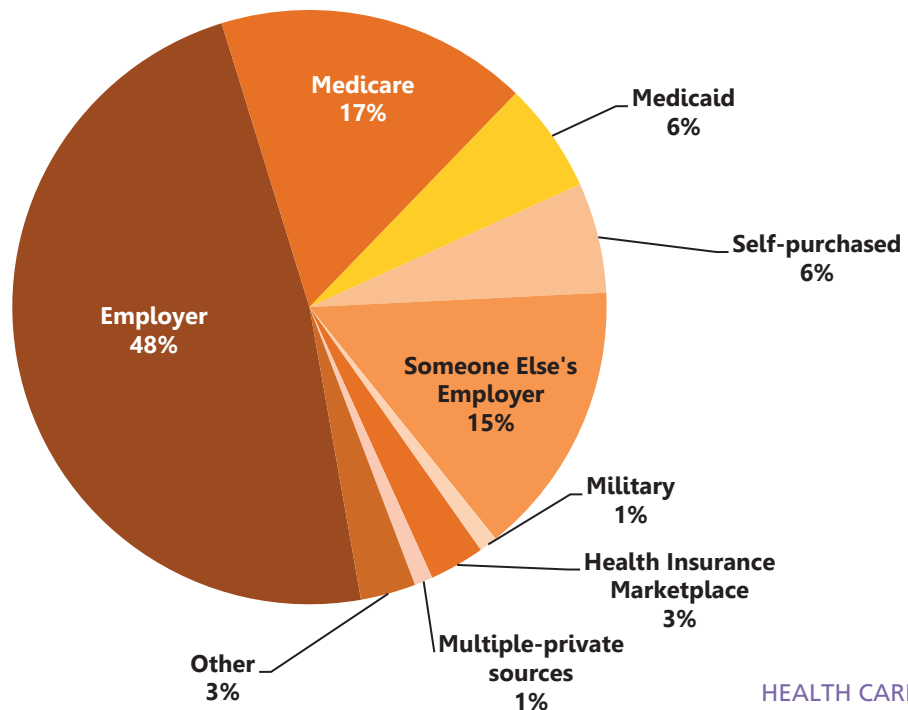
The following graph shows the percentages of Lorain County adults who were uninsured. Examples of how to interpret the information in the graph include: 11% of all Lorain County adults were uninsured, including 23% of those with incomes less than \$25,000 and 26% of those under age 30. The pie chart shows sources of Lorain County adults' health care coverage.



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

23% of Lorain County adults with incomes less than \$25,000 were uninsured

Source of Health Coverage for Lorain County Adults



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

Health Coverage Includes:	Yes	No	Don't Know
Medical	100%	0%	<1%
Prescription Coverage	92%	3%	5%
Immunizations	82%	3%	15%
Dental	76%	23%	1%
Vision	69%	26%	5%
Preventive Health	69%	4%	27%
Mental Health	68%	3%	29%
Outpatient Therapy	67%	4%	29%
Their Spouse	63%	24%	13%
Mental Health Counseling	60%	5%	35%
Their Children	56%	31%	13%
Alcohol and Drug Treatment	48%	5%	47%
Their Partner	37%	36%	27%
County Physicians	35%	7%	58%
Home Care	34%	11%	55%
Long-Term Care	34%	15%	51%
Skilled Nursing	32%	10%	58%
Hospice	29%	10%	61%
Transportation	11%	29%	60%
Assisted Living	9%	24%	67%

Healthy People 2020 Access to Health Services (AHS)

Objective	Lorain County 2015	Ohio 2016	U.S. 2016	Healthy People 2020 Target
AHS-1.1: Persons under age of 65 years with health care insurance	62% age 20-24	90% age 18-24	85% age 18-24	100%
	94% age 25-34	89% age 25-34	84% age 25-34	
	87% age 35-44	91% age 35-44	87% age 35-44	
	91% age 45-54	94% age 45-54	90% age 45-54	
	82% age 55-64	94% age 55-64	93% age 55-64	

Note: U.S. baseline is age-adjusted to the 2000 population standard
(Sources: Healthy People 2020 Objectives, 2016 BRFSS, 2015 Lorain County Health Assessment)

Hospital Discharges for Patients without Medical Insurance, 2016*

- Of the inpatients for UH hospitals in UH Elyria Medical Center in 2016, 2.5% of those under 18 were "self-pay," as were 3.0% of those aged 18-64. Very few seniors (0.04%) did not utilize health insurance to cover their hospital stay. Note that only one of the inpatients were classified as 'charity care' in 2016.

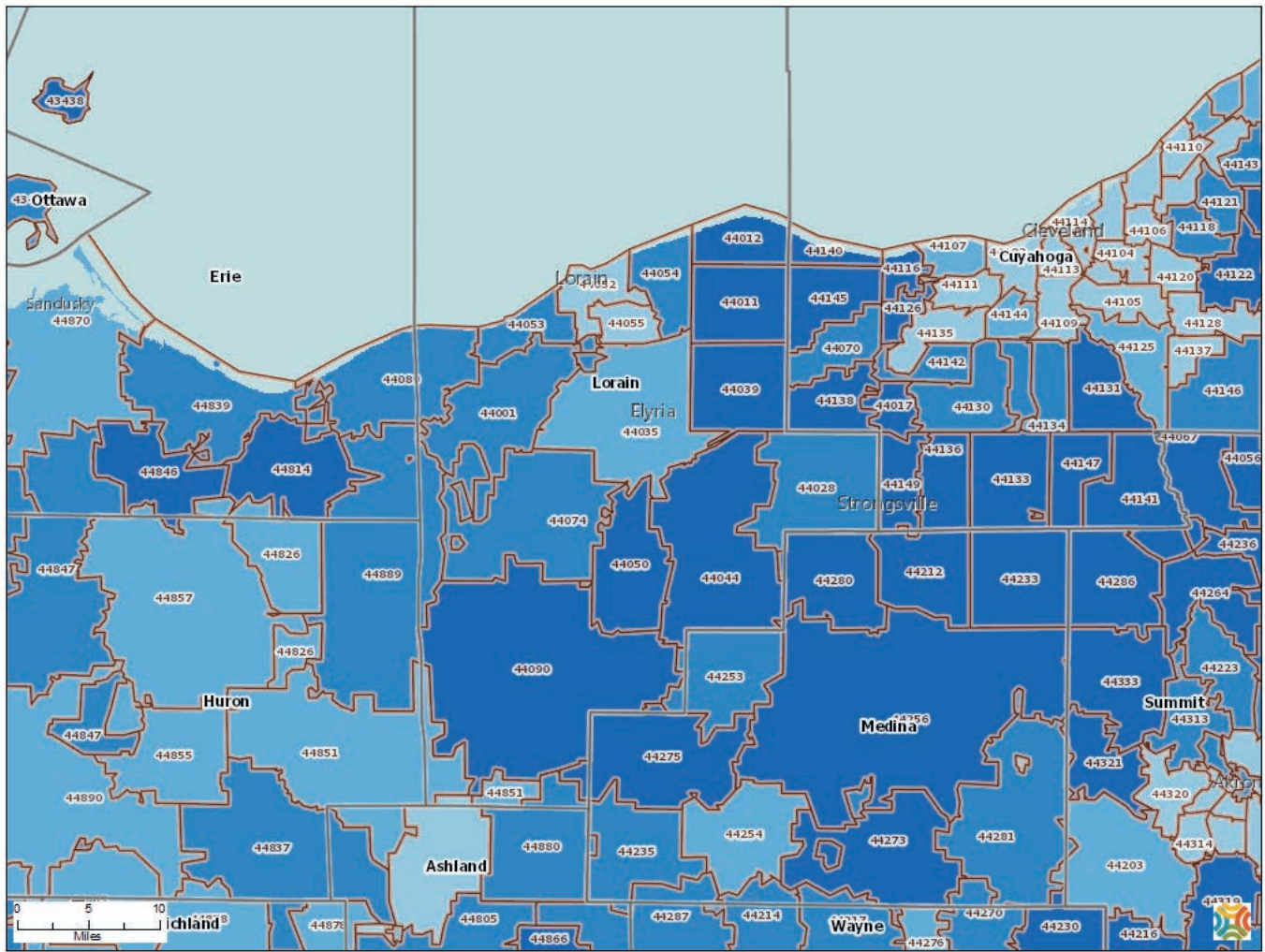
	Patients Age 0-17 Years	Patients Age 18-64 Years	Patients Age 65 Years and Older
Patients without Medical Insurance at Discharge	20 of 801 (2.5%)	166 of 5,465 (3.0%)	2 of 4,694 (0.04%)

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

(Source: University Hospital Discharge Data, 2016, as analyzed and reported by Cypress Research)

Insurance Type by Zip Code Tract Area, American Community Survey, 2011-2015

Private Insurance



Map Legend

Insured, Private Insurance, Percent by ZCTA, ACS 2011-15

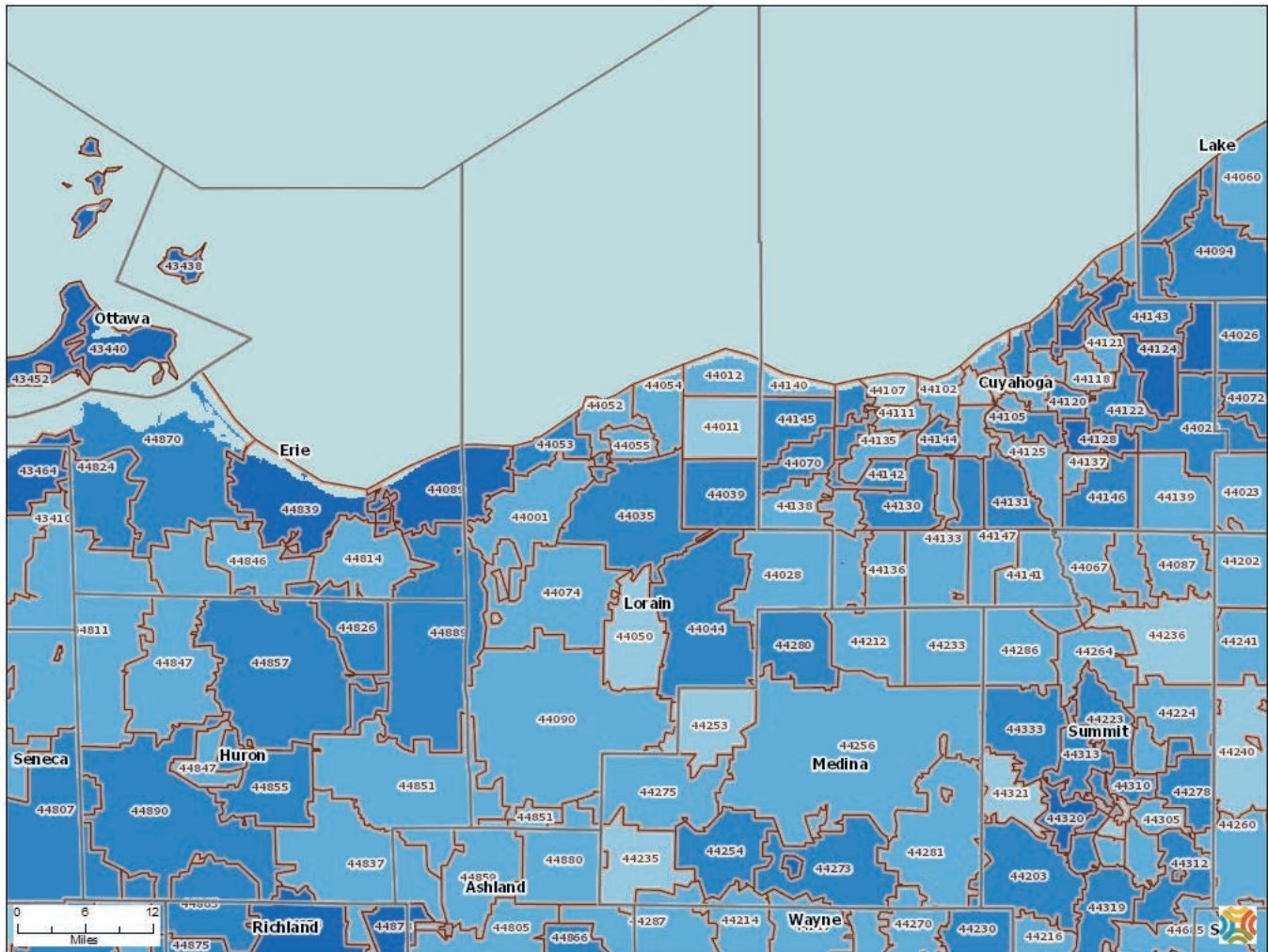
- Over 85.0%
- 77.1 - 85.0%
- 69.1 - 77.0%
- Under 69.1%
- No Data or Data Suppressed

Community Commons, 11/28/2017

(Source: U.S. Census Bureau, American Community Survey: 2011-2015, as compiled by Community Commons)

Insurance Type by Zip Code Tract Area, American Community Survey, 2011-2015

Medicare



Map Legend

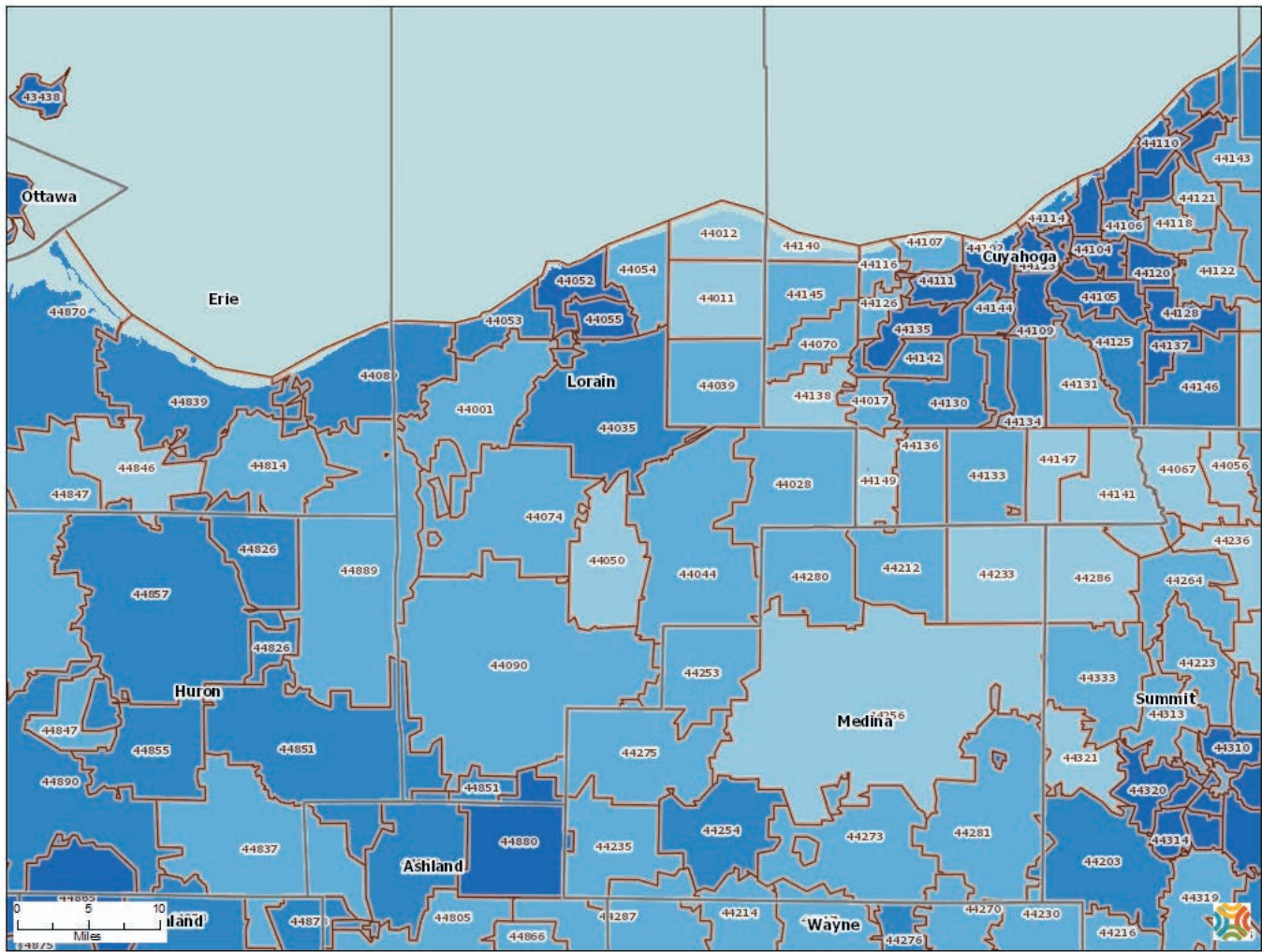
Insured, Medicare, Percent by ZCTA, ACS 2011-15

- Over 25.0%
- 20.1 - 25.0%
- 15.1 - 20.0%
- Under 15.1%
- No Data or Data Suppressed

Community Commons, 11/29/2017

(Source: U.S. Census Bureau, American Community Survey: 2011-2015, as compiled by Community Commons)

Insurance Type by Zip Code Tract Area, American Community Survey, 2011-2015 Public Funded Insurance



Map Legend

Insured, Public-Funded Insurance, Percent by ZCTA, ACS 2011-15

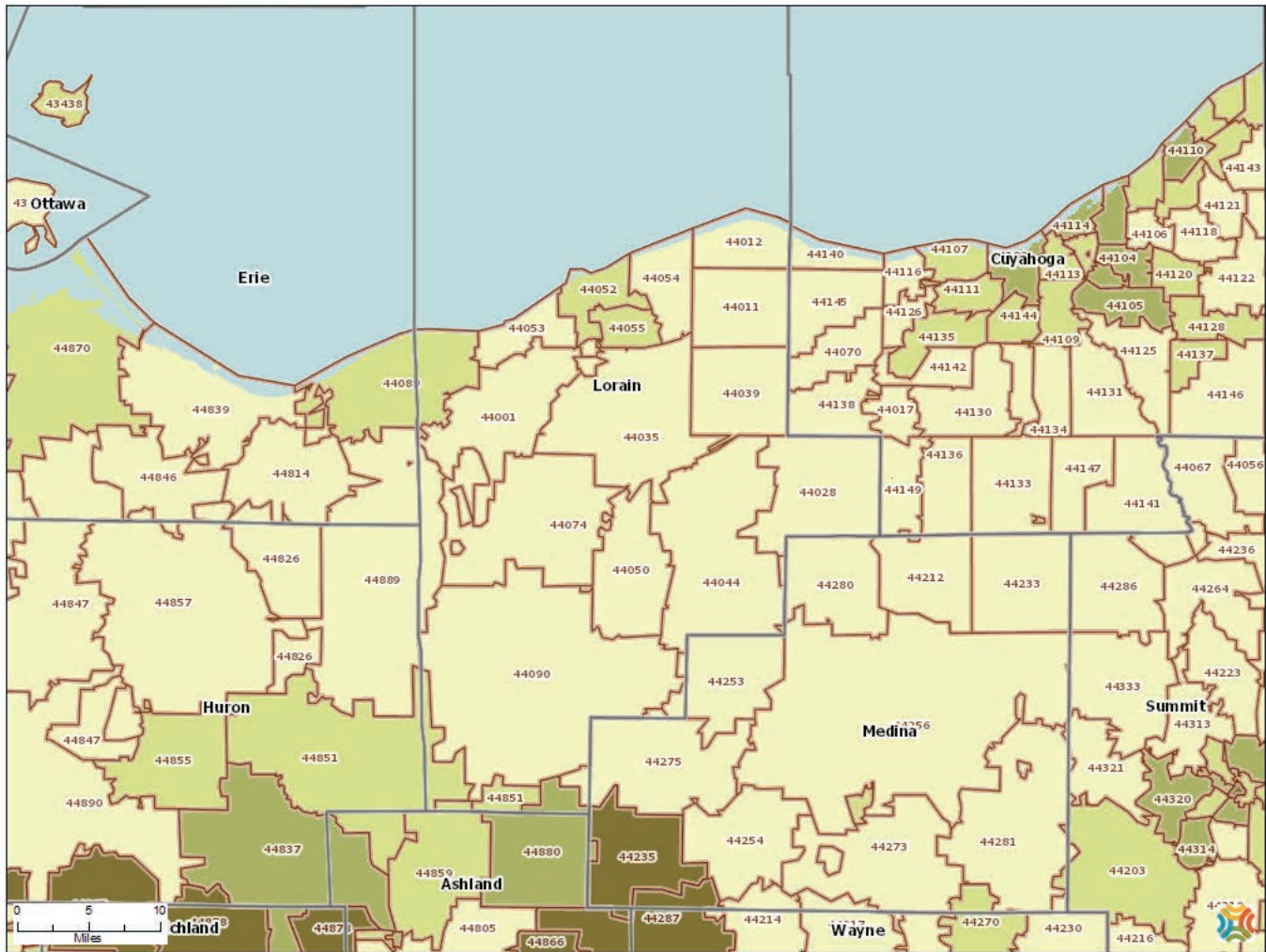
- Over 45.0%
- 35.1 - 45.0%
- 25.1 - 35.0%
- Under 25.1%
- No Data or Data Suppressed

Community Commons, 11/28/2017

(Source: U.S. Census Bureau, American Community Survey: 2011-2015, as compiled by Community Commons)

Insurance Type by Zip Code Tract Area, American Community Survey, 2011-2015

Uninsured



Map Legend

Uninsured Population, Percent by ZCTA, ACS 2011-15

- Over 20.0%
- 15.1 - 20.0%
- 10.1 - 15.0%
- Under 10.1%
- No Data or Data Suppressed

Community Commons, 11/28/2017

(Source: U.S. Census Bureau, American Community Survey: 2011-2015, as compiled by Community Commons)

HEALTH CARE ACCESS: ACCESS AND UTILIZATION

Key Findings

In 2015, 64% of Lorain County adults had visited a doctor for a routine checkup in the past year. Forty-nine percent (49%) of adults went outside of Lorain County for health care services in the past year.

Health Care Access

- Nearly two-thirds (64%) of Lorain County adults visited a doctor for a routine checkup in the past year, increasing to 80% of those over the age of 65.
- More than half (52%) of Lorain County adults reported they had one person they thought of as their personal doctor or healthcare provider. Twenty-nine percent (29%) of adults had more than one person they thought of as their personal healthcare provider, and 18% did not have one at all.
- Adults visited the following places for health care services or advice: doctor's office (80%), Internet (7%), urgent care center (3%), hospital emergency room (3%), in-store health clinic (1%), department of veterans affairs (VA) (1%), alternative therapies (1%), multiple places- including a physician (1%), hospital outpatient department (<1%), public health clinic or community health department (<1%), and some other kind of place (<1%). 3% of adults indicated they had no usual place for health care services.
- Forty-nine percent (49%) of adults went outside of Lorain County for the following health care services in the past year: dental services (19%), specialty care (17%), primary care (17%), obstetrics/gynecology/NICU (8%), pediatric care (5%), orthopedic care (5%), cancer care (5%), cardiac care (4%), mental health care (2%), pediatric therapies (2%), hospice care (<1%), palliative care (<1%), developmental disability services (<1%), and other services (3%).
- Nearly one-fifth (18%) of adults needed to see a doctor in the past year but could not because of cost, increasing to 37% of those with incomes less than \$25,000.
- The following might prevent Lorain County adults from seeing a doctor if they were sick, injured, or needed some kind of health care: cost (29%), worried they might find something wrong (12%), difficult to get an appointment (9%), could not get time off work (8%), hours not convenient (8%), doctor would not take their insurance (8%), frightened of the procedure or doctor (6%), difficult to find/no transportation (3%), do not trust or believe doctors (3%), no childcare (2%), discrimination (<1%), and some other reason (5%).
- Lorain County adults had the following issues regarding their healthcare coverage: deductibles were too high (31%), premiums were too high (20%), co-pays were too high (19%), could not understand their insurance plan (7%), high HSA deductible (7%), opted out of certain coverage because they could not afford it (5%), difficulty navigating the Marketplace (5%), working with their insurance company (5%), limited visits (4%), service not deemed medically necessary (4%), opted out of certain coverage because they did not need it (2%), provider/facility no longer covered (2%), service no longer covered (2%), and mental health services limited/not covered (1%).
- Lorain County adults had the following transportation issues when they needed health services: could not afford gas (4%), no public transportation available or accessible (4%), disabled (3%), no car (3%), no driver's license (3%), limited public transportation available or accessible (3%), no car insurance (2%), car did not work (1%), no transportation before or after 8 a.m.- 4:30 p.m. (1%), did not feel safe to drive (1%), and other car issues/expenses (2%).

- Fifteen percent (15%) of adults have Medicaid. Those who have Medicaid heard about it from the following: Job and Family Services (49%), Lorain County Office on Aging (10%), Lorain County Health and Dentistry (5%), Ohio Benefit Bank (3%), eligibility worker at the hospital (3%), television coverage (2%), health department (2%), hospital clinic (2%), Internet (2%), Mental Health Center (2%), advertisement (1%), Alcohol and Drug Addiction Services (1%), and somewhere else (9%).
- Lorain County adults preferred to obtain information about their health or healthcare services from: their doctor (88%), Internet searches (38%), a family member or friend (32%), advertisements or mailings from hospitals, clinics or doctor's offices (20%), newspaper articles or radio/television news stories (18%), social media (4%), text messages (3%), and billboards (1%).

Availability of Services

- Lorain County adults reported they had looked for the following programs for themselves or a loved one: depression, anxiety or mental health (21%), weight problems (13%), disability (9%), end-of-life/hospice care (7%), marital/family problems (7%), smoking cessation (5%), drug abuse (3%), alcohol abuse (3%), and gambling abuse (1%).

Lorain County Adults Able to Access Assistance Programs/Services

Types of Programs (% of all adults who looked for the programs)	Lorain County adults who have looked but have <u>NOT</u> found a specific program	Lorain County adults who have looked and have found a specific program
Depression or Anxiety (21% of all adults looked)	19%	81%
Weight Problems (13% of all adults looked)	47%	53%
Disability (9% of all adults looked)	30%	70%
End-of-Life/Hospice Care (7% of all adults looked)	2%	98%
Marital/Family Problems (7% of all adults looked)	8%	92%
Smoking Cessation (5% of all adults looked)	35%	65%
Drug Abuse (3% of all adults looked)	53%	47%
Alcohol Abuse (3% of all adults looked)	41%	59%
Gambling Abuse (1% of all adults looked)	0%	100%

Key Facts about the Uninsured Population

- Studies repeatedly demonstrate that the uninsured are less likely than those with insurance to receive preventive care and services for major health conditions and chronic diseases.
- Part of the reason for poor access among uninsured is that 50% do not have a regular place to go when they are sick or need medical advice.
- One in five (20%) nonelderly adults without coverage say that they went without care in the past year because of cost compared to 3% of adults with private coverage and 8% of adults with public coverage.
- In 2016, uninsured nonelderly adults were three times as likely as adults with private coverage to say that they postponed or did not get a needed prescription drug due to cost.
- Because people without health coverage are less likely than those with insurance to have regular outpatient care, they are more likely to be hospitalized for avoidable health problems and to experience declines in their overall health.

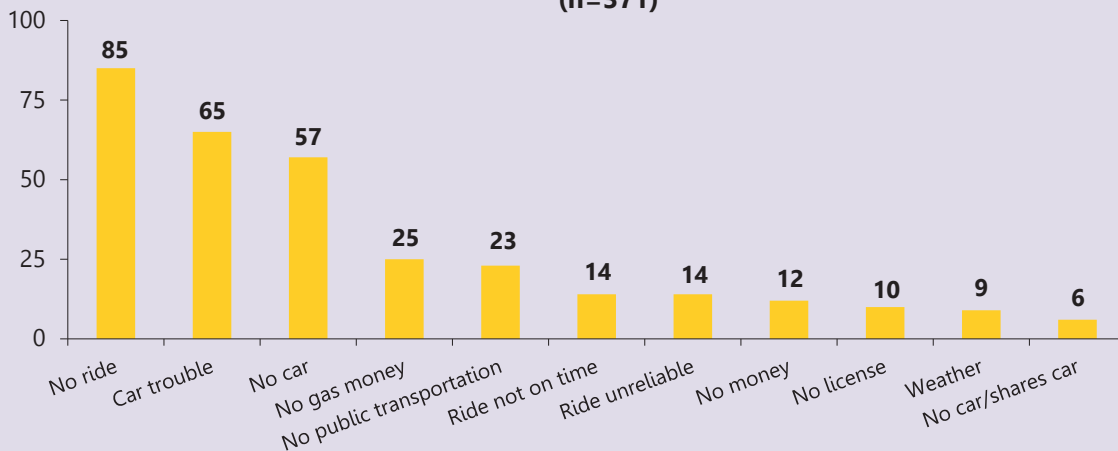
Adult Comparisons	Lorain County 2011	Lorain County 2015	Ohio 2016	U.S. 2016
Visited the doctor's office when needed health care services or advice	75%	80%	N/A	N/A
Had one person they thought of as their personal doctor or healthcare provider	52%	52%	83%	77%
Did not see a doctor in the past year due to cost	20%	18%	11%	12%
Visited a doctor for a routine checkup in the past year	55%	64%	75%	71%

N/A- Not available

Lorain County Patient Transportation Barriers

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

Lorain County Top Transportation Issues (n=371)



(Source: Lorain County Transportation Barriers Assessment)

University Hospital Discharge Data for Youth 0-17 Years of Age, 2016

- The data have been compiled into three age groups (0-17 years; 18-64 years; and 65 or more years) and by gender. This is how the federal government typically reports discharge data.
- There were 5,094 Lorain County residents, from 0-17 years of age, including newborns, as inpatients in an acute care hospital in 2016.
- The table for youth 0-17 years of age indicates that the three most frequent discharge conditions were: diseases of the respiratory system (7.8%), conditions originating in the perinatal period (3.5%), and diseases of the digestive system (3.3%).

Disease Grouping	ICD-10 Codes	Total n (%)	Males n (%)	Females n (%)
Total		5,094 (100%)	2,595 (100%)	2,499 (100%)
Diseases of the respiratory system	J00-J98	398 (7.8%)	232 (8.9%)	166 (6.6%)
Certain conditions originating in the perinatal period	P00-P96	177 (3.5%)	94 (3.6%)	83 (3.3%)
Diseases of the digestive system	K00-K92	169 (3.3%)	88 (3.4%)	81 (3.2%)
Mental and behavioral disorders	F01-F99	140 (2.7%)	58 (2.2%)	82 (3.3%)
Diseases of the nervous system and sense organs	G00-G98	120 (2.4%)	56 (2.2%)	64 (2.6%)
Endocrine, nutritional and metabolic diseases, and immunity disorders	E00-E88	116 (2.3%)	62 (2.4%)	54 (2.2%)
Symptoms, signs, and ill-defined conditions	R00-R99	97 (1.9%)	54 (2.1%)	43 (1.7%)
Injury	S00-T34	72 (1.4%)	54 (2.1%)	18 (0.7%)
Complications of pregnancy, childbirth, and the puerperium	O00-O99	67 (1.3%)	0 (0.0%)	67 (2.7%)
Congenital malformations, deformations and chromosomal abnormalities	Q00-Q99	64 (1.3%)	40 (1.5%)	24 (1.0%)
Infectious and parasitic diseases	A00-B99	63 (1.2%)	41 (1.6%)	22 (0.9%)
Diseases of the musculoskeletal system and connective tissue	M00-M99	57 (1.1%)	25 (1.0%)	32 (1.3%)
Diseases of the skin and subcutaneous tissue	L00-L98	54 (1.1%)	28 (1.1%)	26 (1.0%)
Diseases of the genitourinary system	N00-N98	50 (1.0%)	18 (0.7%)	32 (1.3%)
Poisoning	T36-T50	49 (1.0%)	25 (1.0%)	24 (1.0%)
Diseases of the blood and blood-forming organs	D50-D89	44 (0.9%)	32 (1.2%)	12 (0.5%)
Cancers (neoplasms)	C00-D48	29 (0.6%)	17 (0.7%)	12 (0.5%)
Diseases of the circulatory system	I00-I99	15 (0.3%)	5 (0.2%)	10 (0.4%)
Diseases of the eye and adnexa	H00-H57	11 (0.2%)	5 (0.2%)	6 (0.2%)
Diseases of the ear and mastoid process	H60-H93	10 (0.2%)	6 (0.2%)	4 (0.2%)
Other (not classified elsewhere)		3,291 (64.6%)	1,654 (63.7%)	1,637 (65.5%)

* Fewer than 5 total cases were omitted for confidentiality.

(Source: University Hospital Discharge Data, 2016, as analyzed and reported by Cypress Research)

University Hospital Discharge Data for Adults 18-64 Years of Age, 2016

- There were 20,085 Lorain County adults 18-64 years of age who were discharged from an acute care facility in 2016.
- The table for adults 18-64 years of age indicates that the three most frequent discharge conditions were: complications related to pregnancy and childbirth (16.5% of all inpatients), mental and behavioral issues (14.3%), and diseases of the circulatory system (11.4%).

Disease Grouping	ICD-10 Codes	Total n (%)	Males n (%)	Females n (%)
Total		20,085 (100.0%)	8,637 (100.0%)	11,448 (100.0%)
Complications of pregnancy, childbirth, and the puerperium	O00-O99	3,315 (16.5%)	0 (0.0%)	3,315 (29.0%)
Mental and behavioral disorders	F01-F99	2,881 (14.3%)	1,626 (18.8%)	1,255 (11.0%)
Diseases of the circulatory system	I00-I99	2,292 (11.4%)	1,470 (17.0%)	822 (7.2%)
Diseases of the digestive system	K00-K92	2,028 (10.1%)	1,004 (11.6%)	1,024 (8.9%)
Diseases of the respiratory system	J00-J98	1,542 (7.7%)	715 (8.3%)	827 (7.2%)
Diseases of the musculoskeletal system and connective tissue	M00-M99	1,288 (6.4%)	631 (7.3%)	657 (5.7%)
Infectious and parasitic diseases	A00-B99	965 (4.8%)	458 (5.3%)	507 (4.4%)
Endocrine, nutritional and metabolic diseases	E00-E88	834 (4.2%)	322 (3.7%)	512 (4.5%)
Diseases of the genitourinary system	N00-N98	742 (3.7%)	284 (3.3%)	458 (4.0%)
Cancers (neoplasms)	C00-D48	658 (3.3%)	299 (3.5%)	359 (3.1%)
Symptoms, signs, and ill-defined conditions	R00-R99	548 (2.7%)	253 (2.9%)	295 (2.6%)
Injury	S00-T34	540 (2.7%)	332 (3.8%)	208 (1.8%)
Diseases of the nervous system and sense organs	G00-G98	535 (2.7%)	219 (2.5%)	316 (2.8%)
Diseases of the skin and subcutaneous tissue	L00-L98	532 (2.6%)	296 (3.4%)	236 (2.1%)
Poisoning	T36-T50	359 (1.8%)	176 (2.0%)	183 (1.6%)
Diseases of the blood and blood-forming organs and certain disorders involving the immune mechanism	D50-D89	250 (1.2%)	121 (1.4%)	129 (1.1%)
Congenital malformations, deformations and chromosomal abnormalities	Q00-Q99	33 (0.2%)	23 (0.3%)	10 (0.1%)
Diseases of the ear and mastoid process	H60-H93	21 (0.1%)	9 (0.1%)	12 (0.1%)
Diseases of the eye and adnexa	H00-H57	12 (0.1%)	5 (0.1%)	7 (0.1%)
Other (not classified elsewhere)		701 (3.5%)	391 (4.5%)	310 (2.7%)

* Fewer than 5 total cases were omitted for confidentiality.

(Source: University Hospital Discharge Data, 2016, as analyzed and reported by Cypress Research)

University Hospital Discharge Data for Adults 65 Years of Age and Older, 2016

- There were 15,371 Lorain County residents 65 years of age and older who were discharged from an acute care facility in 2016.
- The table for adults 65 years of age and older indicates that the three most frequent discharge conditions were: diseases of circulatory system (25.2%), the respiratory system (12.6%), and diseases of the digestive system (9.9%).

Disease Grouping	ICD-10 Codes	Total n (%)	Males n (%)	Females n (%)
Total		15,371 (100.0%)	7,120 (100.0%)	8,251 (100.0%)
Diseases of the circulatory system	I00-I99	3,868 (25.2%)	1,983 (27.9%)	1,885 (22.8%)
Diseases of the respiratory system	J00-J98	1,932 (12.6%)	923 (13.0%)	1,009 (12.2%)
Diseases of the digestive system	K00-K92	1,526 (9.9%)	651 (9.1%)	875 (10.6%)
Diseases of the musculoskeletal system and connective tissue	M00-M99	1,393 (9.1%)	555 (7.8%)	838 (10.2%)
Infectious and parasitic diseases	A00-B99	1,100 (7.2%)	511 (7.2%)	589 (7.1%)
Diseases of the genitourinary system	N00-N98	1,016 (6.6%)	433 (6.1%)	583 (7.1%)
Injury	S00-T34	867 (5.6%)	312 (4.4%)	555 (6.7%)
Cancers (neoplasms)	C00-D48	714 (4.6%)	370 (5.2%)	344 (4.2%)
Symptoms, signs, and ill-defined conditions	R00-R91	507 (3.3%)	249 (3.5%)	258 (3.1%)
Diseases of the nervous system and sense organs	G00-G98	466 (3.0%)	228 (3.2%)	238 (2.9%)
Endocrine, nutritional and metabolic diseases	E00-E88	434 (2.8%)	170 (2.4%)	264 (3.2%)
Diseases of the skin and subcutaneous tissue	L00-L98	366 (2.4%)	171 (2.4%)	195 (2.4%)
Diseases of the blood and blood-forming organs and certain disorders involving the immune mechanism	D50-D89	200 (1.3%)	79 (1.1%)	121 (1.5%)
Mental and behavioral disorders	F01-F99	171 (1.1%)	64 (0.9%)	107 (1.3%)
Poisoning	T36-T50	51 (0.3%)	24 (0.3%)	27 (0.3%)
Diseases of the ear and mastoid process	H60-H93	25 (0.2%)	11 (0.2%)	14 (0.2%)
Congenital malformations, deformations and chromosomal abnormalities	Q00-Q99	11 (0.1%)	5 (0.1%)	6 (0.1%)
Other (not classified elsewhere)		714 (4.6%)	376 (5.3%)	338 (4.1%)

* Fewer than 5 total cases were omitted for confidentiality.

(Source: University Hospital Discharge Data, 2016, as analyzed and reported by Cypress Research)

Ambulatory Care Sensitive (ACS) Discharges (Primary Diagnosis), Lorain County Residents (Hospitalized Anywhere), vs. UH Elyria Medical Center Inpatients, 2016

- **Ambulatory Care Sensitive (ACS)** conditions or discharges are conditions for which hospital admission could be prevented by interventions in primary care.
- In 2016, there were 40,550 Lorain County residents who were discharged, as inpatients, from an acute care hospital. There were 10,960 such cases discharged from UH Elyria Medical Center; almost all (91.1%) were Lorain County residents.
- Overall, 14.0% of the hospitalizations of Lorain County residents in 2016 were due to an ACS condition. There were slightly more ACS cases requiring hospitalization at UH Elyria Medical Center (16.8%). This increased proportion of ACS cases hospitalized in UH Elyria Medical Center is likely due to many high acuity cases, which are not related to ACS conditions, being hospitalized in one of the regional medical centers.
- The most common ACS conditions among those hospitalized were COPD (3.5% of all Lorain County resident hospitalizations, and 5.8% of all UH Elyria MC hospitalizations) and congestive heart failure (2.3%/3.0%).

	Inpatient in Any Hospital: Lorain County Resident		Inpatient in UH Elyria Medical Center	
	Number	Percent	Number	Percent
Total	40,550	100.0%	10,960	100.0%
Total ACS Cases	5,685	14.0%	1,846	16.8%
Specific Ambulatory Care Sensitive Conditions:				
Chronic Obstructive Pulmonary Disease	1,410	3.5%	639	5.8%
Congestive Heart Failure	942	2.3%	330	3.0%
Diabetes	602	1.5%	179	1.6%
Cellulitis	497	1.2%	125	1.1%
Hip/Femur Fracture (age 45 and older)	356	0.9%	110	1.0%
Gastrointestinal Obstruction	351	0.9%	87	0.8%
Grand Mal Seizure and Other Convulsions	280	0.7%	27	0.2%
Asthma	199	0.5%	38	0.3%
Gastroenteritis	169	0.4%	44	0.4%
Hypertension	157	0.4%	36	0.3%
Dehydration	144	0.4%	18	0.2%
Kidney/Urinary Tract Infection	139	0.3%	52	0.5%
Convulsions/Epilepsy (age 6 and older)	127	0.3%	36	0.3%
Appendicitis	119	0.3%	37	0.3%
Bacterial Pneumonia	104	0.3%	81	0.7%
Angina	45	0.1%	3	<0.1%
Myocardial Infarction	36	0.1%	18	0.2%
Severe Ear, Nose and Throat Infections	26	0.1%	1	<0.1%
Nutritional Deficiencies	18	0.0%	1	<0.1%
Dental Conditions	14	0.0%	--	--
Convulsions/Epilepsy (age 5 and younger)	13	0.0%	--	--
Pelvic Inflammatory Disease	12	0.0%	4	<0.1%
Failure to Thrive (Infants Only)	6	<0.1%	--	--

Fewer than 5 cases were omitted to ensure confidentiality.

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

**Most Common* Ambulatory Care Sensitive (ACS) Discharges (Primary Diagnosis),
2016**
**All Lorain County Residents (Hospitalized Anywhere),
By Major Age Group (Adults Only, Age 18+)**

- **Ambulatory Care Sensitive (ACS)** conditions or discharges are conditions for which hospital admission could be prevented by interventions in primary care.
- The incidence of ACS cases among Lorain County residents in 2016 increased with age. Only 6.6% of those hospitalized adults under age 40 had an ACS condition; more than twice as many (16.1%) of those aged 40-64 were so. More (17.6%) of seniors were hospitalized due to an ACS condition in 2016 than those in younger age groups.
- The most common ACS condition (primary diagnosis) associated with hospitalization for younger adult (aged 18-39) Lorain County residents in 2016 were diabetes (1.9%) and cellulitis (0.7%). Note that adults under age 40 comprised only 21% of the adult hospitalized patients in 2016.
- Middle-aged adults (aged 40-64) showed a somewhat different pattern of ACS conditions. The most common conditions were Chronic Obstructive Pulmonary Disease (COPD) (4.9%) and diabetes (2.2%).
- For the oldest hospitalized group (age 65+), the most common ACS conditions were COPD (4.9%), congestive heart failure (4.5%), and hip/femur fracture (2.0%).

	Adult Under 40	Adults Ages 40-64	Adults Age 65+
Total:	7,402 (100.0%)	12,683 (100.0%)	15,371 (100.0%)
Any ACS Condition:	490 (6.6%)	2,045 (16.1%)	2,711 (17.6%)
Specific Ambulatory Care Sensitive Conditions:			
Cellulitis	49 (0.7%)	222 (1.8%)	207 (1.3%)
Chronic Obstructive Pulmonary Disease	29 (0.4%)	620 (4.9%)	758 (4.9%)
Congestive Heart Failure	7 (0.1%)	244 (1.9%)	691 (4.5%)
Diabetes	137 (1.9%)	279 (2.2%)	140 (0.9%)
Gastrointestinal Obstruction	18 (0.2%)	140 (1.1%)	175 (1.1%)
Hip/Femur Fracture (age 45 and older)	0 (0.0%)	46 (0.4%)	310 (2.0%)

*Only those ACS conditions associated with at least 1% of the group are shown.

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

UH Elyria Medical Center, Inpatients, Primary & Secondary Diagnoses, 2016 Hospitalizations

The diagnosis specifics were reviewed by Cypress Research for all 10,960 of the UH Elyria Medical Center inpatients hospitalized in 2016. The diagnostic category, and the most common specific diagnoses are shown. This information is shown for both primary diagnosis and for secondary diagnoses; while the primary diagnosis is related to the primary reason for hospitalizations, understanding the incidence of various diagnoses which are secondary is often more telling of the chronic health conditions facing the community in general.

Some noteworthy findings for UH Elyria Medical Center inpatients:

- The most common diagnostic categories for the primary diagnoses were **diseases of the circulatory system** (18.4% of all hospitalizations), **diseases of the respiratory system** (12.3%) and **diseases of the digestive system** (9.9%). These three general categories comprise over two-fifths of all primary diagnoses for inpatients in 2016.
 - No primary diagnosis dominates with the diseases of the circulatory or digestive systems but Chronic Obstructive Pulmonary Diseases (COPD) (4.9%) and pneumonia (3.6%) make up over two-thirds of those hospitalized primarily for a respiratory system issue.

- While cancer is a leading cause of death in Lorain County, it is not a common reason for hospitalization (2.5% primary diagnosis for 2016 inpatients). Cancer is generally treated primary on an out-patient basis.

- Examination of the secondary diagnoses is very telling in terms of understanding the frequency of chronic diseases in Lorain County.
 - While almost no inpatients were hospitalized due to primary hypertension in 2016, 18.2% of them had hypertension as a secondary diagnosis. Likewise, 11.8% had a secondary diagnosis of atherosclerosis of the coronary artery.
 - COPD was the most common primary diagnosis among the respiratory disease classifications (4.9%), but another 13.9% had a secondary diagnosis of COPD.
 - Mental and behavioral disorders were common secondary diagnoses, especially nicotine dependence (13.7%), anxiety disorder (8.9%), and major depressive disorder (5.4%).
 - While few primary diagnoses were related to the endocrine, nutritional or metabolic diseases (2.7%), hyperlipidemia was very common as a secondary diagnosis (26.6%), as was type II diabetes (14.8%).

UH Elyria Medical Center, Inpatients, Primary & Secondary Diagnoses, 2016

	Primary Diagnosis (Reason for Hospitalization)		Secondary Diagnosis (Patients can have multiple secondary diagnoses)	
Total UH Elyria Inpatients	10,960			
Subtotal: Diseases of the circulatory system	2,017	18.4%	N/A	N/A
Non-ST elevation (NSTEMI) myocardial infarction	340	3.1%	108	1.0%
Heart failure (congestive)	332	3.0%	610	5.6%
Paroxysmal/Persistent/Chronic atrial fibrillation	320	3.1%	702	7.4%
Atherosclerotic heart disease of native coronary artery	168	1.5%	1,282	11.8%
Cerebral infarction	133	1.2%	17	0.2%
ST elevation (STEMI) myocardial infarction	101	0.9%	35	0.3%
Vein thrombophlebitis, acute embolism	65	0.6%	197	1.8%
Supraventricular/Ventricular tachycardia	58	0.6%	161	1.5%
Sick sinus syndrome	57	0.5%	114	1.0%
Hypotension	31	0.2%	425	3.9%
Hypertensive heart disease with or without heart failure	23	0.2%	70	0.6%
Occlusion and stenosis of carotid artery	22	0.2%	193	1.8%
Essential (primary) hypertension	15	0.1%	1,976	18.2%
Hypertensive chronic kidney disease with stage - chronic kidney disease or end stage renal disease	14	0.1%	724	6.6%
Nonrheumatic mitral (valve) insufficiency/prolapse	10	0.1%	145	1.4%
Cardiomyopathy, unspecified	2	<0.1%	162	1.5%
Peripheral vascular disease, unspecified	2	<0.1%	341	3.1%
Ischemic cardiomyopathy	1	<0.1%	218	2.0%
Old myocardial infarction	0	0.0%	225	2.1%
Secondary pulmonary hypertension	0	0.0%	172	1.6%
Rheumatic tricuspid insufficiency	0	0.0%	140	1.3%
Subtotal: Diseases of the respiratory system	1,349	12.3%	N/A	N/A
Chronic obstructive pulmonary disease	542	4.9%	1,528	13.9%
Pneumonia (bacterial & viral)	397	3.6%	375	3.4%
Acute respiratory failure	137	1.3%	1,173	10.7%
Pneumonitis due to inhalation of food and vomit	115	1.0%	103	0.9%
Asthma	38	0.3%	484	4.4%
Pleural effusion	28	0.2%	176	1.6%
Acute bronchitis	22	0.2%	236	2.2%
Atelectasis	0	0.0%	215	2.0%
Subtotal: Diseases of the digestive system	1,087	9.9%	N/A	N/A
Diverticulitis	115	1.0%	128	1.2%
Gastritis	30	0.3%	97	0.9%
Alcoholic liver diseases	23	0.2%	121	1.1%
Diaphragmatic hernia	8	0.1%	131	1.2%
Subtotal: Other Categories	999	9.1%	N/A	N/A
Single liveborn infant, delivered vaginally	548	5.0%	0	0.0%
Single liveborn infant, delivered by cesarean	204	1.9%	0	0.0%
Single live birth	0	0.0%	601	5.5%
Encounter for palliative care	0	0.0%	119	1.1%
Twins, both liveborn	0	0.0%	7	0.1%

N/A – Data is not available

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

UH Elyria Medical Center, Inpatients, Primary & Secondary Diagnoses, 2016, Continued

	Primary Diagnosis (Reason for Hospitalization)		Secondary Diagnosis (Patients can have multiple secondary diagnoses)	
Subtotal: Mental and behavioral disorders	814	7.4%	N/A	N/A
Bipolar disorders	333	3.0%	183	1.7%
Depression/Depression Episode	261	2.4%	590	5.4%
Alcohol dependence/abuse	92	0.8%	391	3.6%
Opioid abuse	10	0.1%	169	1.6%
Anxiety disorder	3	<0.1%	968	8.9%
Dementia	3	<0.1%	278	2.6%
Nicotine dependence	0	0.0%	1,492	13.7%
Cannabis abuse	0	0.0%	296	2.7%
Cocaine abuse	0	0.0%	195	1.8%
Post-traumatic stress disorder	0	0.0%	127	1.2%
Subtotal: Complications of pregnancy, childbirth, and the puerperium	804	7.3%	N/A	N/A
Subtotal: Diseases of the musculoskeletal system and connective tissue	795	7.3%	N/A	N/A
Osteoarthritis	510	4.7%	594	5.5%
Gout, unspecified	0	0.0%	190	1.7%
Subtotal: Infectious and parasitic diseases	670	6.1%	N/A	N/A
Sepsis, unspecified organism	379	3.5%	87	0.8%
Enterocolitis due to Clostridium difficile	57	0.5%	81	0.7%
Other Escherichia coli [E. coli] as the cause of diseases classified elsewhere	0	0.0%	155	1.4%
Unspecified Escherichia coli [E. coli] as the cause of diseases classified elsewhere	0	0.0%	121	1.1%
Unspecified viral hepatitis C without hepatic coma	0	0.0%	113	1.0%
Subtotal: Diseases of the genitourinary system	559	5.1%	N/A	N/A
Chronic kidney disease	208	1.9%	792	9.2%
Urinary tract infection	134	1.2%	425	3.9%
Subtotal: Endocrine, nutritional and metabolic diseases	295	2.7%	N/A	N/A
Type II Diabetes	99	0.9%	1,609	14.8%
Type I Diabetes	73	0.7%	82	0.8%
Hypo-osmolality and hyponatremia	27	0.2%	580	5.3%
Dehydration	15	0.1%	611	5.6%
Hyperkalemia	8	0.1%	396	3.6%
Hypokalemia	6	0.1%	775	7.1%
Hypothyroidism, unspecified	2	<0.1%	659	6.1%
Hyperosmolality and hypernatremia	2	<0.1%	138	1.3%
Acidosis	1	<0.1%	330	3.0%
Hyperlipidemia, unspecified	0	0.0%	2,897	26.6%
Obesity, unspecified	0	0.0%	792	7.3%
Morbid (severe) obesity due to excess calories	0	0.0%	575	5.3%
Vitamin D deficiency, unspecified	0	0.0%	239	2.2%
Familial hypercholesterolemia	0	0.0%	198	1.8%
Hypomagnesemia	0	0.0%	122	1.1%
Subtotal: Injury	292	2.7%	N/A	N/A

N/A – Data is not available

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

UH Elyria Medical Center, Inpatients, Primary & Secondary Diagnoses, 2016, Continued

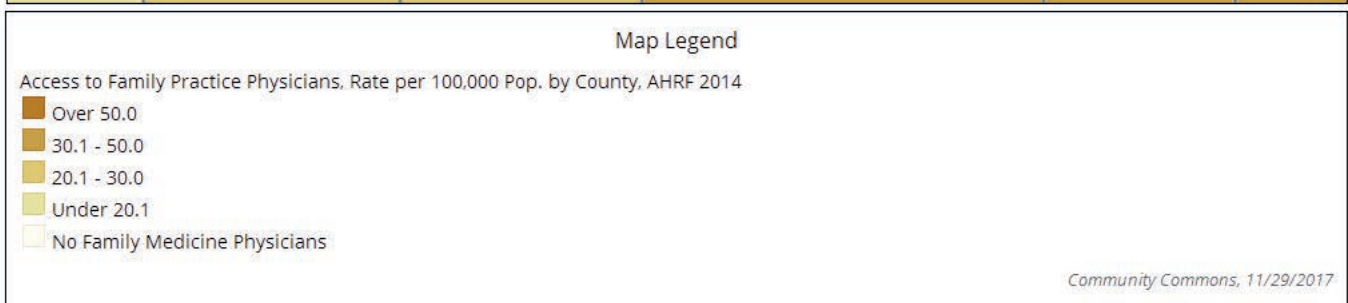
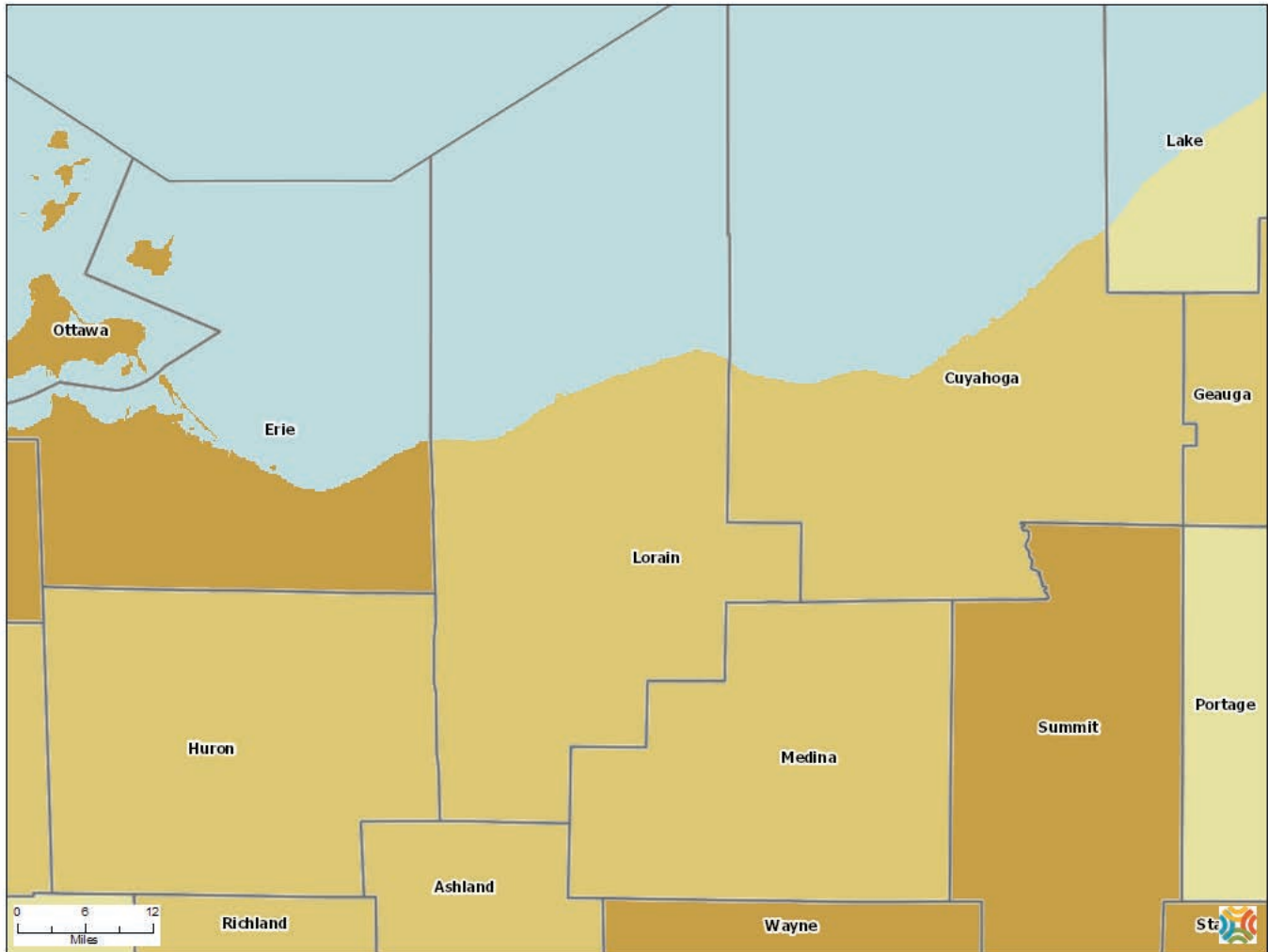
	Primary Diagnosis (Reason for Hospitalization)		Secondary Diagnosis (Patients can have multiple secondary diagnoses)	
Subtotal: Symptoms, signs, and ill-defined conditions	281	2.6%	N/A	N/A
Convulsions (unspecified)	36	0.3%	163	1.5%
Severe sepsis without septic shock	32	0.3%	188	1.7%
Severe sepsis with septic shock	32	0.3%	76	0.7%
Dysphagia	3	<0.1%	155	1.5%
Suicidal ideations	0	0.0%	373	3.4%
Hyperglycemia, unspecified	0	0.0%	160	1.5%
Subtotal: Cancers (neoplasms)	279	2.5%	N/A	N/A
Cancers involving the lung	83	0.8%	87	0.8%
Cancers involving the intestines	34	0.3%	21	0.2%
Cancers involving the blood system	14	0.1%	70	0.6%
Cancers involving bone	13	0.1%	42	0.4%
Cancers involving the liver	8	0.1%	54	0.5%
Cancers involving the lymph nodes	7	0.1%	33	0.3%
Subtotal: Diseases of the skin and subcutaneous tissue	247	2.3%	N/A	N/A
Cellulitis	185	1.7%	221	2.0%
Pressure ulcer	7	0.1%	239	2.2%
Non-pressure chronic ulcer	2	<0.1%	188	1.7%
Subtotal: Diseases of the nervous system and sense organs	183	1.7%	N/A	N/A
Metabolic/Toxic/Other encephalopathy	16	0.1%	545	5.1%
Alzheimer's disease with late onset	9	0.1%	76	0.7%
Obstructive sleep apnea	1	<0.1%	561	5.2%
Chronic Pain/Chronic Pain Syndrome	0	0.0%	286	2.6%
Polyneuropathy, unspecified	0	0.0%	194	1.8%
Migraine, unspecified, not intractable, without status migrainosus	0	0.0%	126	1.2%
Subtotal: Poisoning	150	1.4%	N/A	N/A
Subtotal: Diseases of the blood and blood-forming organs and certain disorders involving the immune mechanism	113	1.0%	N/A	N/A
Iron deficiency anemia, unspecified	20	0.2%	147	1.4%
Acute post-hemorrhagic anemia	17	0.2%	639	5.9%
Anemia, unspecified	8	0.1%	593	5.5%
Thrombocytopenia, unspecified	1	<0.1%	256	2.4%
Anemia in chronic kidney disease	1	<0.1%	199	1.8%
Elevated white blood cell count, unspecified	0	0.0%	469	4.3%
Subtotal: Diseases of the ear and mastoid process	12	0.1%	N/A	N/A
Subtotal: Diseases of the eye and adnexa	1	<0.1%	N/A	N/A
Unspecified glaucoma	0	0.0%	75	0.7%
Unspecified macular degeneration	0	0.0%	53	0.5%

N/A – Data is not available

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

Access to Primary Care Physicians, Rate per 100,000 Population by County, Area Health Resource File (AHRF), 2014

- There were 68 primary care physicians in Lorain County in 2014.
- The rate of primary care physicians per 100,000 population for Lorain County was 22.3.

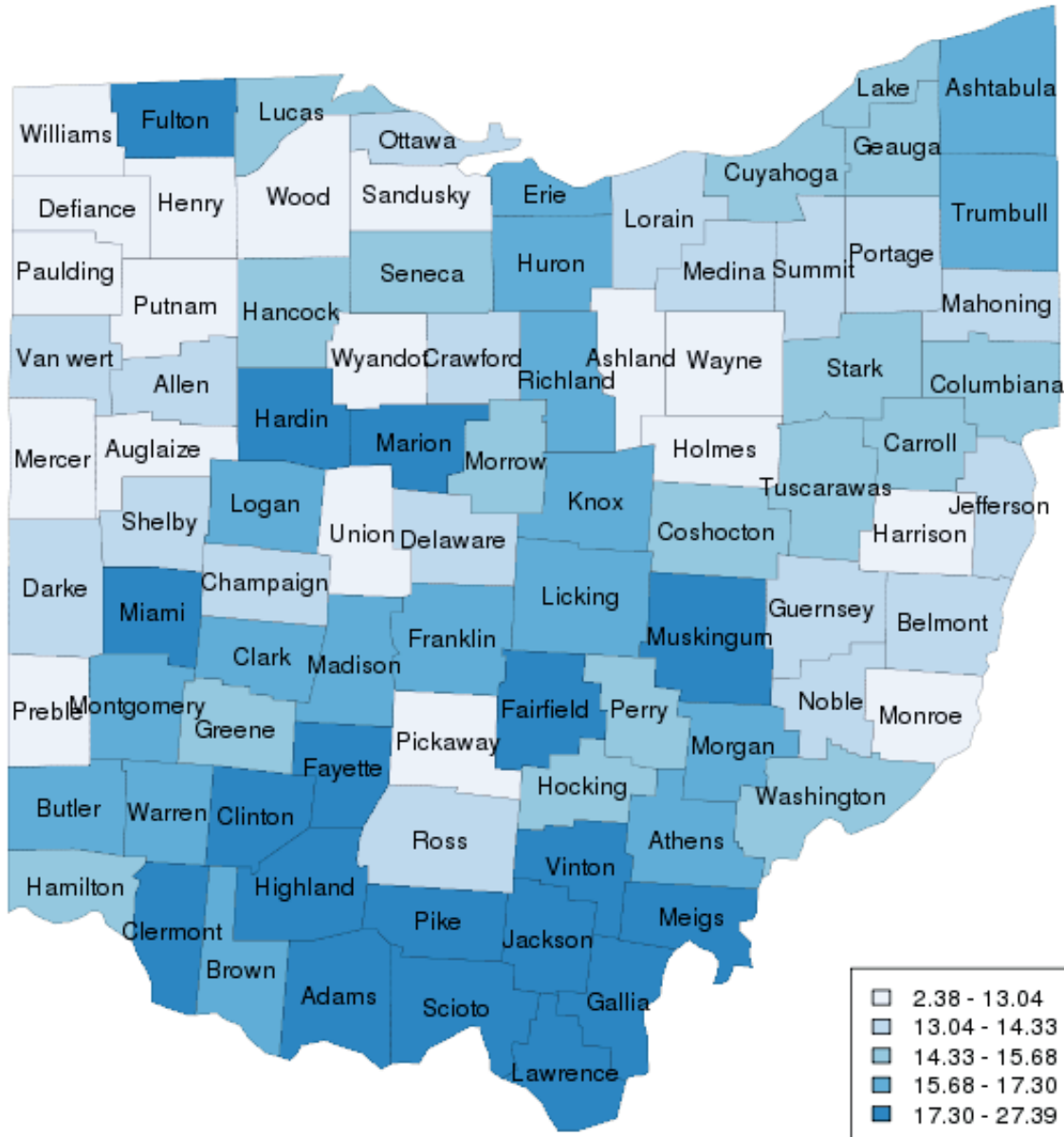


(Source: U.S. Department of Health and Human Services, Health Resources and Services Administration, Area Health Resource File (AHRF): 2014, as compiled by Community Commons)

The following map shows the estimated proportion of all adults, ages 19 years and older, with unmet needs in prescription medication.

- Fourteen percent (14%) of Lorain County adults, ages 19 years and older, had unmet needs in prescription medication.
- Fifteen percent (15%) of Ohio adults, ages 19 years and older, had unmet needs in prescription medication.

Estimated Proportion: Unmet Needs in Prescription Medication, All Adults, Ages 19 and Older (2015)*



(Source: Ohio Medicaid Assessment Survey (OMAS) Adult Dashboard, 2015)

*Unmet needs indicate those who could not get prescriptions due to cost in the past 12 months

HEALTHCARE ACCESS: PREVENTIVE MEDICINE

Key Findings

More than four-fifths (82%) of adults ages 65 and over have had a pneumonia vaccination at some time in their life. More than one-fourth (29%) of adults over the age of 50 had a preventive screening for colorectal cancer in the past 2 years.

Preventive Medicine

- More than half (54%) of Lorain County adults had a flu vaccine during the past 12 months.
- Of those who had a flu vaccine, 95% had the shot and 5% had the nasal spray.
- Eighty-two percent (82%) of Lorain County adults ages 65 and over had a flu vaccine in the past 12 months. The 2016 BRFSS reported that 59% of U.S. and 57% of Ohio adults ages 65 and over had a flu vaccine in the past year.
- Nearly one-third (30%) of adults have had a pneumonia shot in their life, increasing to 82% of those ages 65 and over. The 2016 BRFSS reported that 73% of U.S. and 75% of Ohio adults ages 65 and over had a pneumonia shot in their life.
- Lorain County adults have had the following vaccines: tetanus booster (including Tdap) in the past 10 years (64%), MMR in their lifetime (61%), chicken pox in their lifetime (40%), pneumonia vaccine in their lifetime (30%), Hepatitis B (26%), Hepatitis A (22%), pertussis vaccine in the past 10 years (15%), Zoster (shingles) vaccine in their lifetime (13%), and human papillomavirus vaccine in their lifetime (11%).

Adult Comparisons	Lorain County 2011	Lorain County 2015	Ohio 2016	U.S. 2016
Had a pneumonia vaccination (ages 65 and over)	N/A	82%	75%	73%
Had a flu vaccine in the past year (ages 65 and over)	68%	82%	57%	58%

N/A- Not available

Preventive Health Screenings and Exams

- Lorain County adults had the following preventive screenings or exams in the past 2 years: vision (57%), breast cancer (29%), hearing (17%), skin cancer (16%), colorectal cancer (14%), prostate cancer (13%), osteoporosis (8%), and memory screening (2%).
- More than one-quarter (29%) of Lorain County adults over the age of 50 reported having been screened for colorectal cancers in the past 2 years.
- In the past year, 61% of Lorain County women ages 40 and over have had a mammogram.
- In the past year, 49% of Lorain County males ages 50 and over have had a PSA test.
- See the Women and Men's Health Sections for further prostate, mammogram, clinical breast exam, and Pap smear screening test information for Lorain County adults.

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

Objective	Lorain County 2015	Ohio 2016	U.S. 2016	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	82%	75%	73%	90%

*Note: U.S. baseline is age-adjusted to the 2000 population standard
(Sources: Healthy People 2020 Objectives, 2016 BRFSS, 2015 Lorain County Health Assessment)*

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

Healthcare Topics	Total 2011	Total 2015
Physical Activity or Exercise	42%	38%
Weight, Dieting or Eating Habits	36%	37%
Self-Breast or Self-Testicular Exam	N/A	27%
Immunizations	23%	26%
Significance of Family History	21%	22%
Depression, Anxiety, or Emotional Problems	18%	17%
Safe Use of Prescription Medication	4%	16%
Quitting Smoking	13%	13%
Alternative Pain Therapy	N/A	8%
Alcohol Use	7%	7%
Injury Prevention Such As Safety Belt Use & Helmet Use	8%	6%
Sexual Practices Including Family Planning, STDs, AIDS, & Condom Use	9%	6%
Alcohol Use When Taking Prescription Drugs	N/A	6%
Domestic Violence	3%	5%
Illicit Drug Abuse	4%	3%

N/A – Not available

Who Should Get a Yearly Flu Shot?

The following groups are recommended to get a yearly flu vaccine:

- All persons aged 6 months and older should be vaccinated annually.
- When vaccine supply is limited, vaccination efforts should focus on delivering vaccination to persons who:
 - Are aged 6 months through 4 years.
 - Are aged 50 years and older.
 - Have chronic pulmonary (including asthma), cardiovascular (except hypertension), renal, hepatic, neurologic, hematologic, or metabolic disorders (including diabetes mellitus).
 - Those who are immunosuppressed.
 - Are or will be pregnant during the influenza season.
 - Are residents of nursing homes and chronic-care facilities.
 - Are American Indians/Alaska Natives.
 - Are morbidly obese (body-mass index is 40 or greater).
 - Are health-care personnel.
 - Are household contacts and caregivers of children aged younger than 5 years and adults aged 50 years and older, with particular emphasis on vaccinating contacts of children aged younger than 6 months.
 - Are household contacts and caregivers of persons with medical conditions that put them at higher risk for severe complications from influenza.

HEALTHCARE ACCESS: WOMEN'S HEALTH

Key Findings

In 2015, more than three-fifths (61%) of Lorain County women over the age of 40 reported having a mammogram in the past year. 53% of Lorain County women ages 19 and over had a clinical breast exam and 38% had a Pap smear to detect cancer of the cervix in the past year. One percent (1%) of women survived a heart attack and 2% survived a stroke at some time in their life. Nearly two-fifths (39%) of Lorain County women were obese, 30% had high blood pressure, 31% had high blood cholesterol, and 25% were identified as smokers, known risk factors for cardiovascular diseases.

Women's Health Screenings

- In 2015, 69% of women had a mammogram at some time and more than two-fifths (41%) had this screening in the past year.
- More than three-fifths (61%) of women ages 40 and over had a mammogram in the past year and 75% had one in the past two years. The 2016 BRFSS reported that 72% of women 40 and over in the U.S. and 74% in Ohio, had a mammogram in the past two years.
- Most (92%) Lorain County women have had a clinical breast exam at some time in their life and 53% had one within the past year. More than two-thirds (69%) of women ages 40 and over had a clinical breast exam in the past two years.
- Eighty-nine percent (89%) of Lorain County women have had a Pap smear and 38% reported having had the exam in the past year. 68% of women had a pap smear in the past three years. The 2016 BRFSS indicated that 80% of U.S. and 82% of Ohio women had a pap smear in the past three years.

Women's Health Concerns

- Women used the following as their usual source of services for female health concerns: private gynecologist (46%), general or family physician (32%), community health center (4%), nurse practitioner/physician's assistant (3%), family planning clinic (3%), midwife (2%), and health department clinic (1%). 9% indicated they did not have a usual source of services for female health concerns.
- In 2015, 1% of women had survived a heart attack and 2% had survived 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. The assessment identified that:
 - 63% of women were overweight or obese (2016 BRFSS reports 62% for Ohio and 2015 BRFSS reports 59% for U.S.)
 - 31% were diagnosed with high blood cholesterol (2015 BRFSS reports 36% for Ohio and 35% for U.S.)
 - 30% were diagnosed with high blood pressure (2015 BRFSS reports 31% for Ohio and 30% for U.S.)
 - 25% of all women were current smokers (2016 BRFSS reports 21% for Ohio and 2015 BRFSS reports 15% for U.S.)

Lorain County Female Leading Causes of Death, 2014 – 2016

Total female deaths: 4,395

1. Cancer (21% of all deaths)
2. Heart Disease (21%)
3. Chronic Lower Respiratory Diseases (8%)
4. Alzheimer's (7%)
5. Stroke (5%)

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

Ohio Female Leading Causes of Death, 2014 – 2016

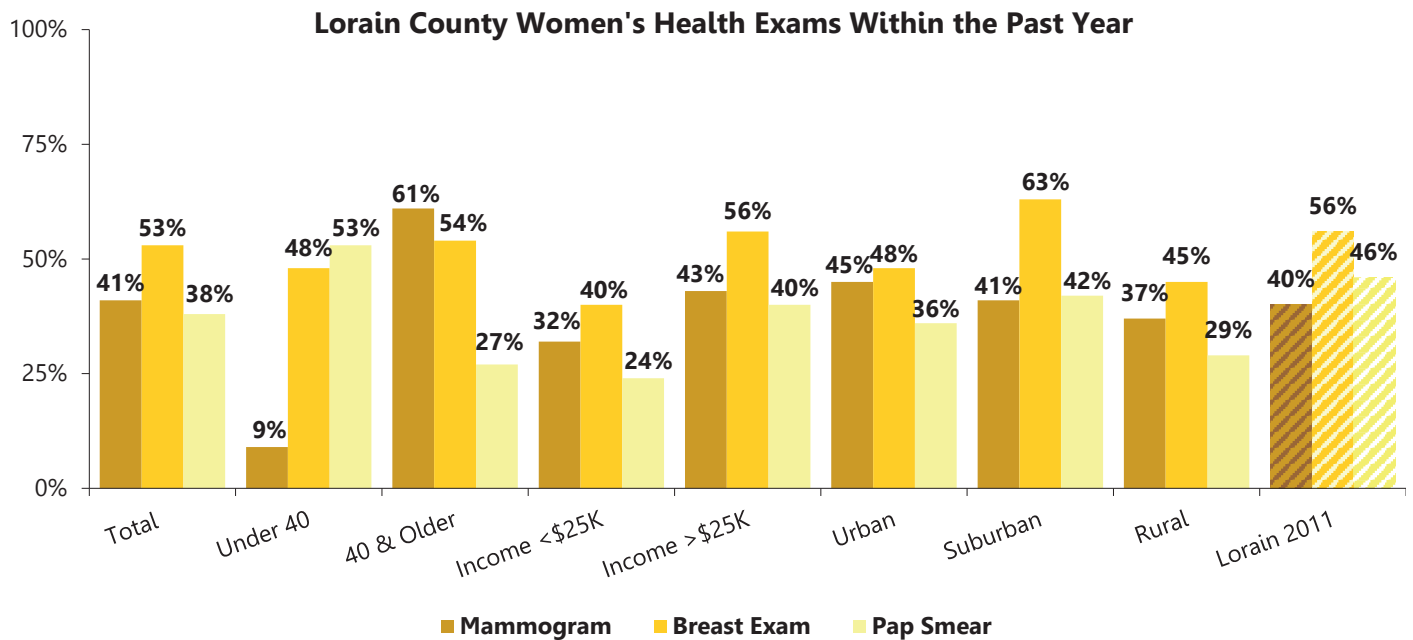
Total female deaths: 176,669

1. Heart Diseases (22% of all deaths)
2. Cancers (21%)
3. Chronic Lower Respiratory Diseases (6%)
4. Stroke (6%)
5. Alzheimer's disease (5%)

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

- 12% had been diagnosed with diabetes (BRFSS reports 11% for Ohio in 2016 and 10% for U.S. in 2015)
- From 2014-2016, major cardiovascular diseases (heart disease and stroke) accounted for 27% of all female deaths in Lorain County (Source: Ohio Public Health Data Warehouse, 2014-2016).

The following graph shows the percentage of Lorain County females who had various health exams in the past year. Examples of how to interpret the information shown on the graph include: 41% of Lorain County females had a mammogram within the past year, 53% had a clinical breast exam, and 38% had a Pap smear.



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

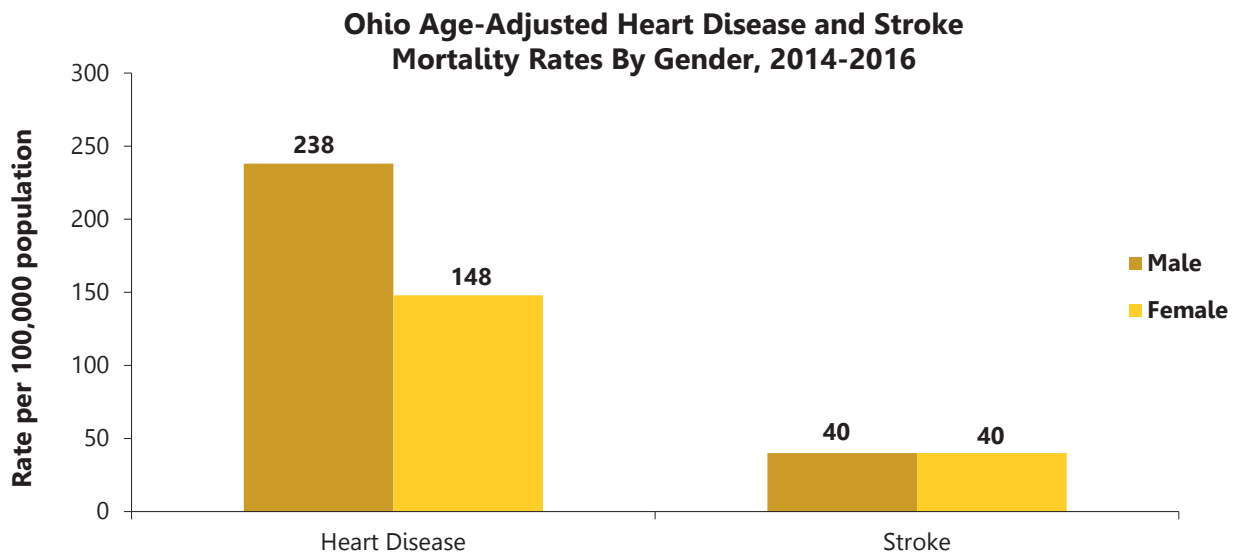
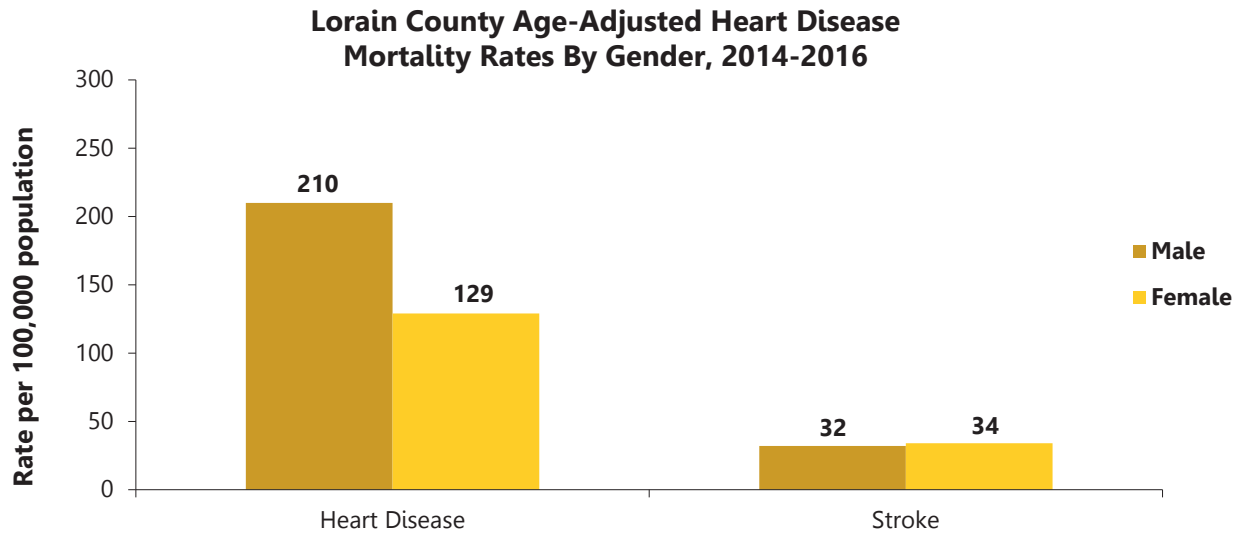
Adult Comparisons	Lorain County 2011	Lorain County 2015	Ohio 2016	U.S. 2016
Had a clinical breast exam in the past two years (age 40 & over)	N/A	69%	N/A	N/A
Had a mammogram in the past two years (age 40 & over)	79%	75%	74%	72%
Had a Pap smear in the past three years	N/A	68%	82% [¥]	80% [¥]

N/A- Not available

[¥]BRFSS for both Ohio and U.S. reports for women ages 21-65

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

- From 2014-2016, the Lorain County and Ohio female age-adjusted mortality rate was lower than the male rate for heart disease.
- The Lorain County female heart disease mortality rate was lower than the Ohio female rate from 2014-2016.



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

HEALTHCARE ACCESS: MEN'S HEALTH

Key Findings

In 2015, 49% of Lorain County males over the age of 50 had a Prostate-Specific Antigen (PSA) test. Major cardiovascular diseases (heart disease and stroke) accounted for 26% and cancers accounted for 24% of all male deaths in Lorain County from 2014-2016. Five percent (5%) of men survived a heart attack and 6% survived a stroke at some time in their life. More than two-fifths (41%) of men had been diagnosed with high blood pressure, 35% had high blood cholesterol, and 19% were identified as smokers, which, along with obesity (35%), are known risk factors for cardiovascular diseases.

Men's Health Screenings and Concerns

- More than two-fifths (45%) of Lorain County males had a Prostate-Specific Antigen (PSA) test at some time in their life and 27% had one in the past year.
- Seventy-six percent (76%) of males age 50 and over had a PSA test at some time in their life, and 49% had one in the past year.
- More than half (53%) of men had a digital rectal exam in their lifetime and 17% had one in the past year.

17% of Lorain County males had a digital rectal exam in the past year

- In 2015, 5% of men had a heart attack and 6% had a stroke at some time in their life.
- From 2014-2016, major cardiovascular diseases (heart disease and stroke) accounted for 26% of all male deaths in Lorain County (Source: Ohio Public Health Data Warehouse, 2014-2016).
- Major risk factors for cardiovascular disease include smoking, obesity, high blood cholesterol, high blood pressure, physical inactivity, and diabetes. The assessment identified that:
 - 75% of men were overweight or obese (2016 BRFSS reports 71% for Ohio, 2015 reports 71% for U.S.)
 - 41% were diagnosed with high blood pressure (2015 BRFSS reports 38% for Ohio and 38% for U.S.)
 - 35% were diagnosed with high blood cholesterol (2015 BRFSS reports 38% for Ohio and 34% for U.S.)
 - 19% of all men were current smokers (2016 BRFSS reports 25% for Ohio, 2015 BRFSS reports 19% for U.S.)
 - 11% had been diagnosed with diabetes (2016 BRFSS reports 11% for Ohio and 11% for U.S.)
- From 2014-2016, the leading cancer deaths for Lorain County males were lung, colon and rectum, and prostate cancers. Statistics from the same period for Ohio males indicate that lung, colon and rectum, and prostate cancers were also the leading cancer deaths (Source: Ohio Public Health Data Warehouse, 2014-2016).

Lorain County Male Leading Causes of Death, 2014 – 2016

Total male deaths: 4,562

1. Cancer (24% of all deaths)
2. Heart Disease (23%)
3. Accidents, Unintentional Injuries (9%)
4. Chronic Lower Respiratory Diseases (7%)
5. Stroke (3%)

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

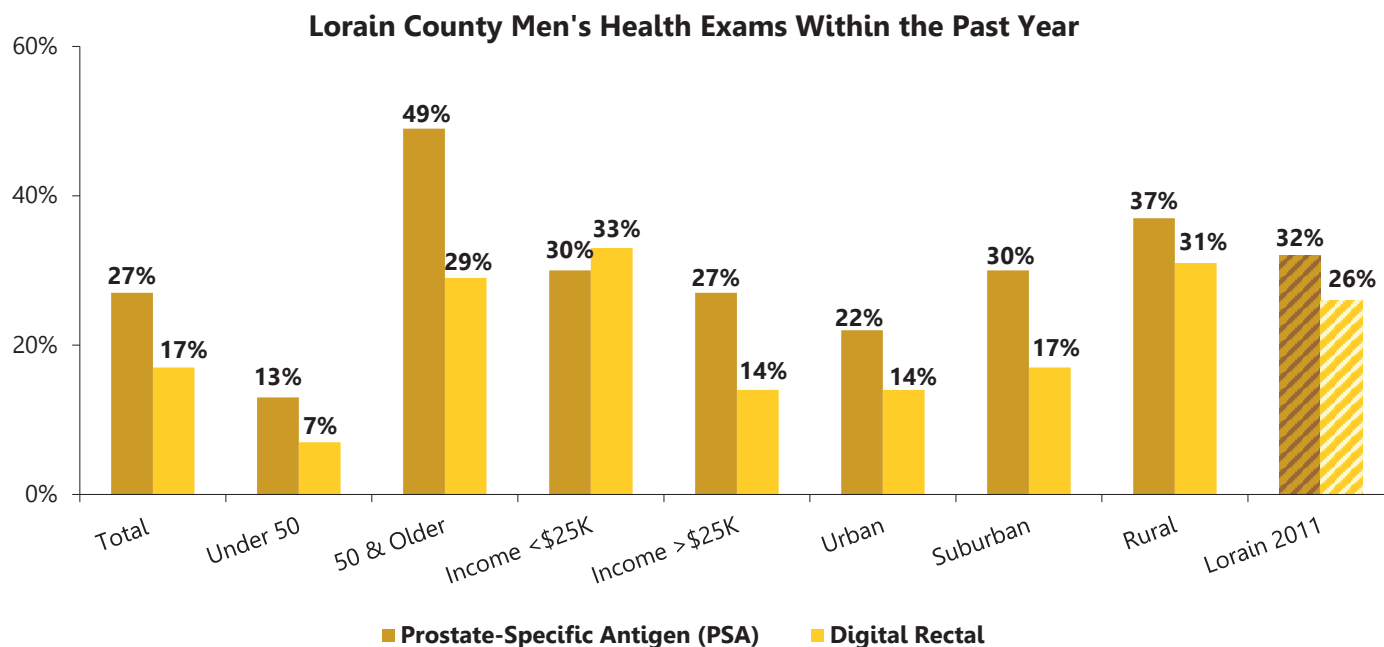
Ohio Male Leading Causes of Death, 2014 – 2016

Total male deaths: 175,247

1. Heart Diseases (25% of all deaths)
2. Cancers (23%)
3. Accidents, Unintentional Injuries (8%)
4. Chronic Lower Respiratory Diseases (6%)
5. Stroke (4%)

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

The following graph shows the percentage of Lorain County males who had various health exams in the past year. Examples of how to interpret the information shown on the graph include: 27% of Lorain County males had a PSA test within the past year, and 17% had a digital rectal exam.



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

Adult Comparisons	Lorain County 2011	Lorain County 2015	Ohio 2016	U.S. 2016
Had a PSA test within the past two years (age 40 & over)	N/A	60%	39%	40%
Had a PSA test within the past year	32%	27%	N/A	N/A
Had a digital rectal exam within the past year	26%	17%	N/A	N/A

N/A- Not available

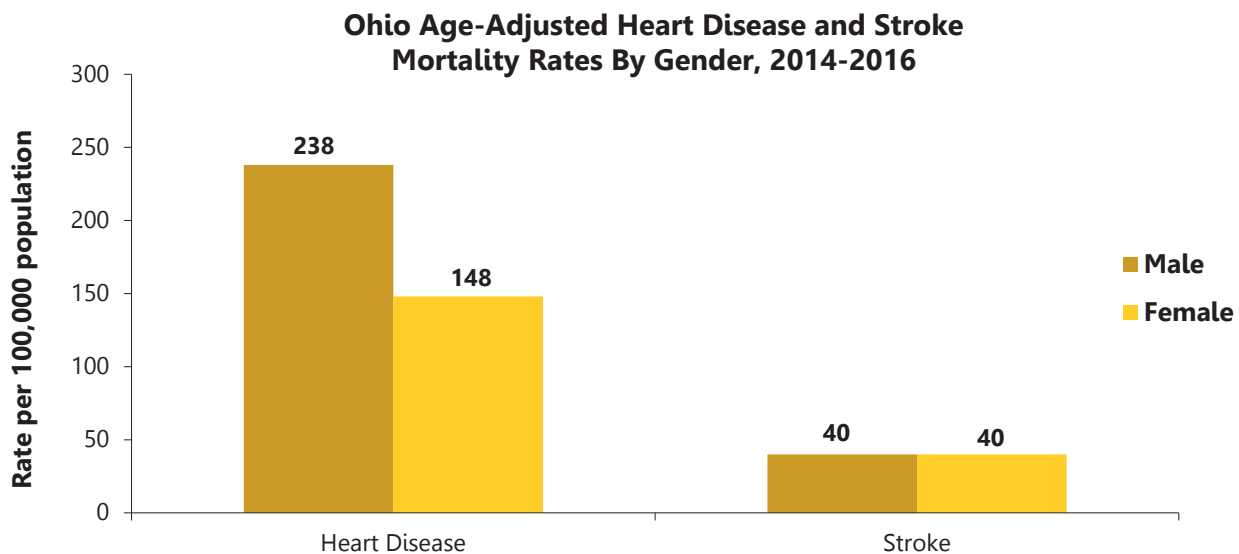
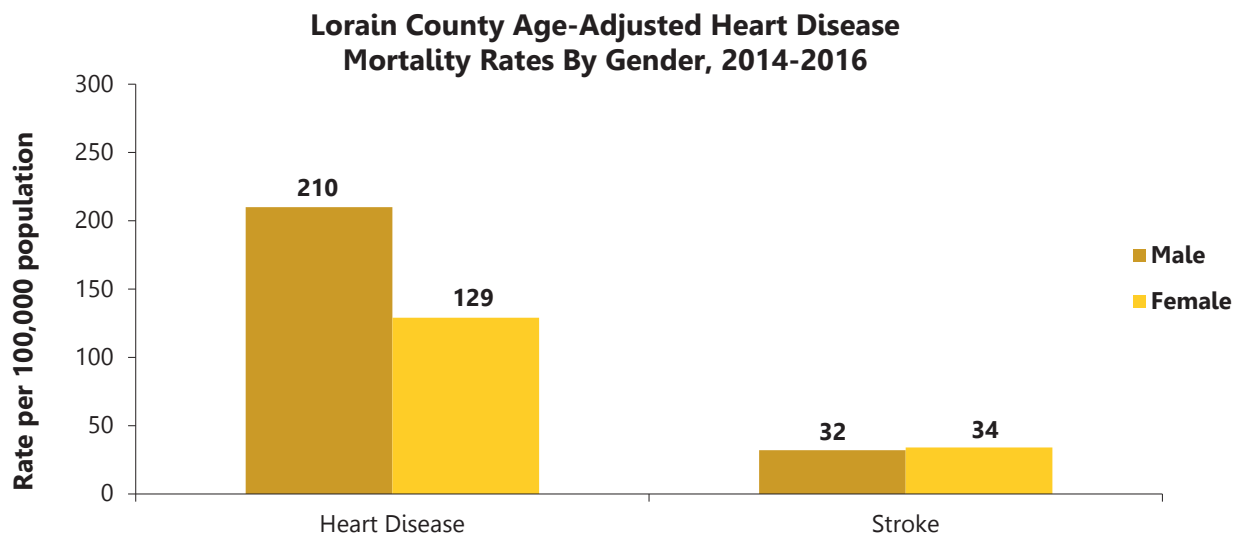
Men's Health Data

- Approximately 12% of adult males ages 18 years or older reported fair or poor health.
- 18% of adult males in the U.S. currently smoke.
- Of the adult males in the U.S., 32% had 5 or more drinks in 1 day at least once in the past year.
- Only 56% of adult males in the U.S. met the 2008 federal physical activity guidelines for aerobic activity through leisure-time aerobic activity.
- 35% of men 20 years and over are obese.
- There are 12% of males under the age of 65 without healthcare 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, May 3, 2017)

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

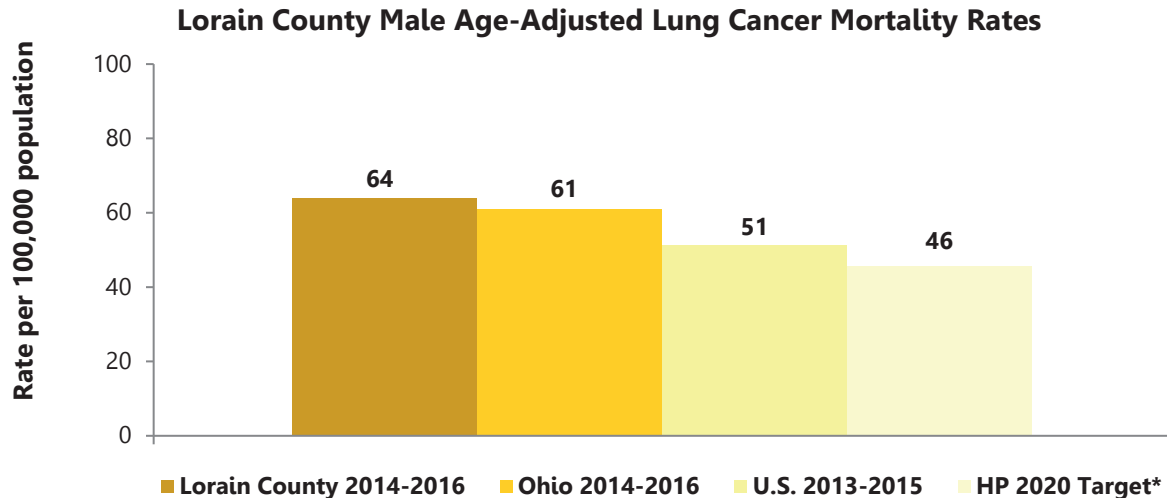
- From 2014-2016, the Lorain County and Ohio male age-adjusted mortality rate was higher than the female rate for heart disease.
- The Lorain County male age-adjusted heart disease mortality rate was lower than the Ohio male rate.



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

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

- From 2014-2016, the Lorain County age-adjusted mortality rate for male lung cancer was higher than the Ohio rate, U.S. rate and the Healthy People 2020 objective.



*Note: The Healthy People 2020 target rates are not gender specific
(Sources: Ohio Public Health Data Warehouse, 2014-2016, CDC Wonder 2013-2015 and Healthy People 2020)*

Prostate Cancer Awareness

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

(Source: Center for Disease Control and Prevention, Prostate Cancer Awareness, updated September 21, 2017)

HEALTHCARE ACCESS: ORAL HEALTH

Key Findings

Nearly two-thirds (66%) of Lorain County adults had visited a dentist or dental clinic in the past year. The 2016 BRFSS reported that 68% of Ohio and 66% of U.S. adults had visited a dentist or dental clinic in the previous twelve months.

Access to Dental Care

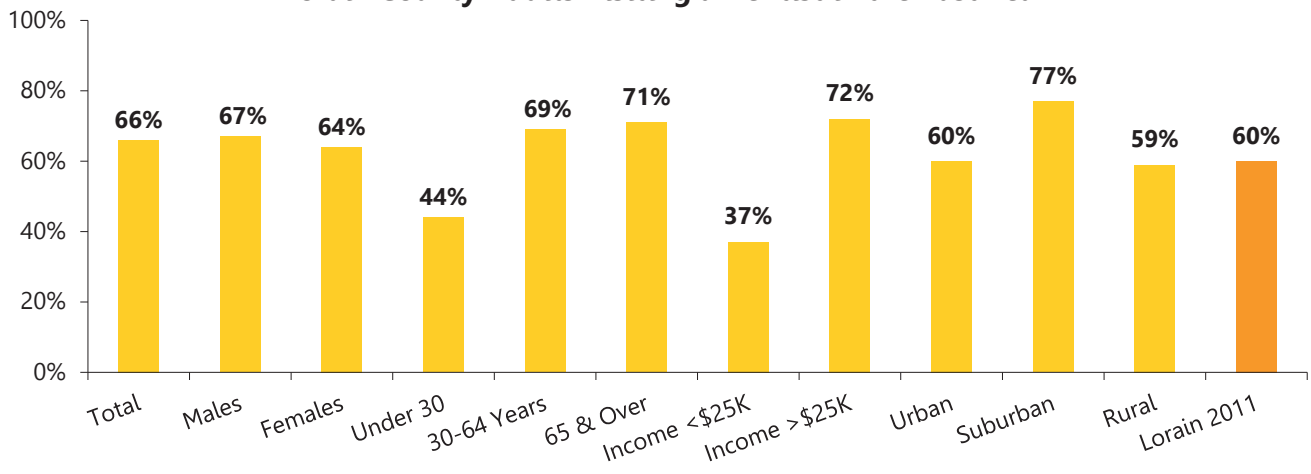
- In 2015, 66% of Lorain County adults had visited a dentist or dental clinic, decreasing to 37% of adults with annual household incomes less than \$25,000.
- The 2016 BRFSS reported that 68% of Ohio and 66% of U.S. adults had visited a dentist or dental clinic in the previous twelve months.
- Three-fourths (75%) of Lorain County adults with dental insurance have been to the dentist in the past year, compared to 56% of those without dental insurance.
- When asked the main reason for not visiting a dentist in the last year, 43% said cost, 30% said fear, apprehension, nervousness, pain, and dislike going, 17% had no oral health problems, 12% did not have/know a dentist, 11% had not thought of it, 7% had other priorities, 6% could not find a dentist taking new Medicaid patients, 4% could not find a dentist to who took Medicaid, 3% could not get into a dentist, 3% said their dentist did not accept their medical coverage, 2% could not get to the office/clinic, 2% said the wait for an appointment was too long, 2% could not find a dentist who treated special needs clients, and 1% used the emergency room for dental issues.
- Lorain County adults visited the dentist in the past 2 years for the following reasons: regular exam/check-up (53%), cleaning/hygiene (14%), to have work completed (7%), multiple reasons (including cleaning or check-up) (3%), emergency visit (2%), and other reasons (<1%). 20% of adults had not visited the dentist in the past 2 years.
- Lorain County adults did the following at least daily: brushed their teeth (96%), used mouthwash (49%), and flossed their teeth (46%).

Adult Oral Health	Within the Past Year	Within the Past 5 Years	5 or More years	Never
Time Since Last Visit to Dentist/Dental Clinic				
Males	67%	9%	13%	1%
Females	64%	12%	11%	2%
Total	66%	10%	12%	2%

Adult Comparisons	Lorain County 2011	Lorain County 2015	Ohio 2016	U.S. 2016
Adults who have visited the dentist in the past year	60%	66%	68%	66%

The following graph provides information about the frequency of Lorain County adult dental visits. Examples of how to interpret the information include: 66% of all Lorain County adults had been to the dentist in the past year, including 67% of males and 37% of those with incomes less than \$25,000.

Lorain County Adults Visiting a Dentist in the Past Year



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

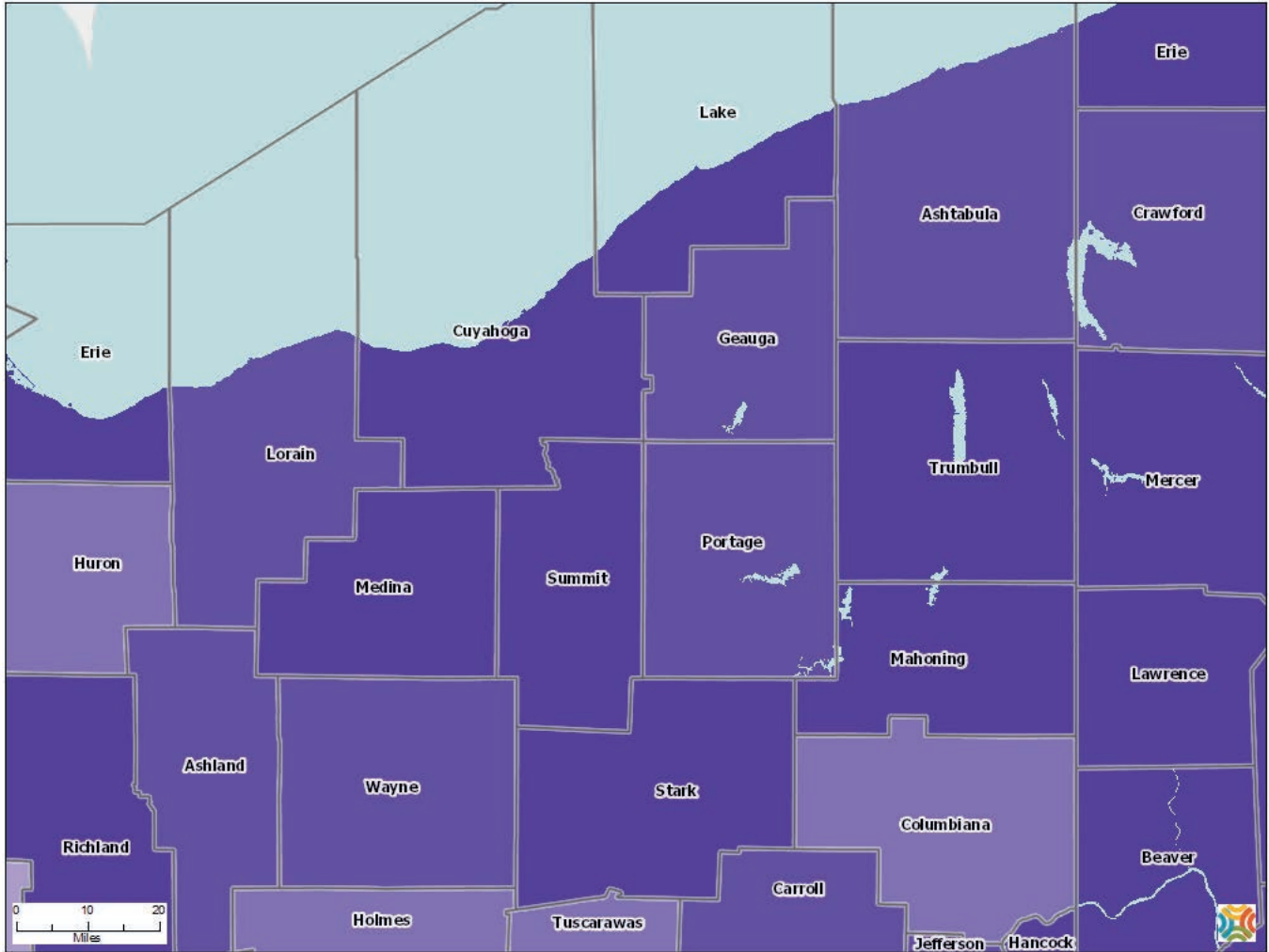
Facts About Adult Oral Health

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

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

Access to Dentists, Rate per 100,000 Population by County, Area Health Resource File (AHRF), 2015

- There were 139 dentists in Lorain County in 2015.
- The rate of dentists per 100,000 population for Lorain County was 45.5.



Map Legend

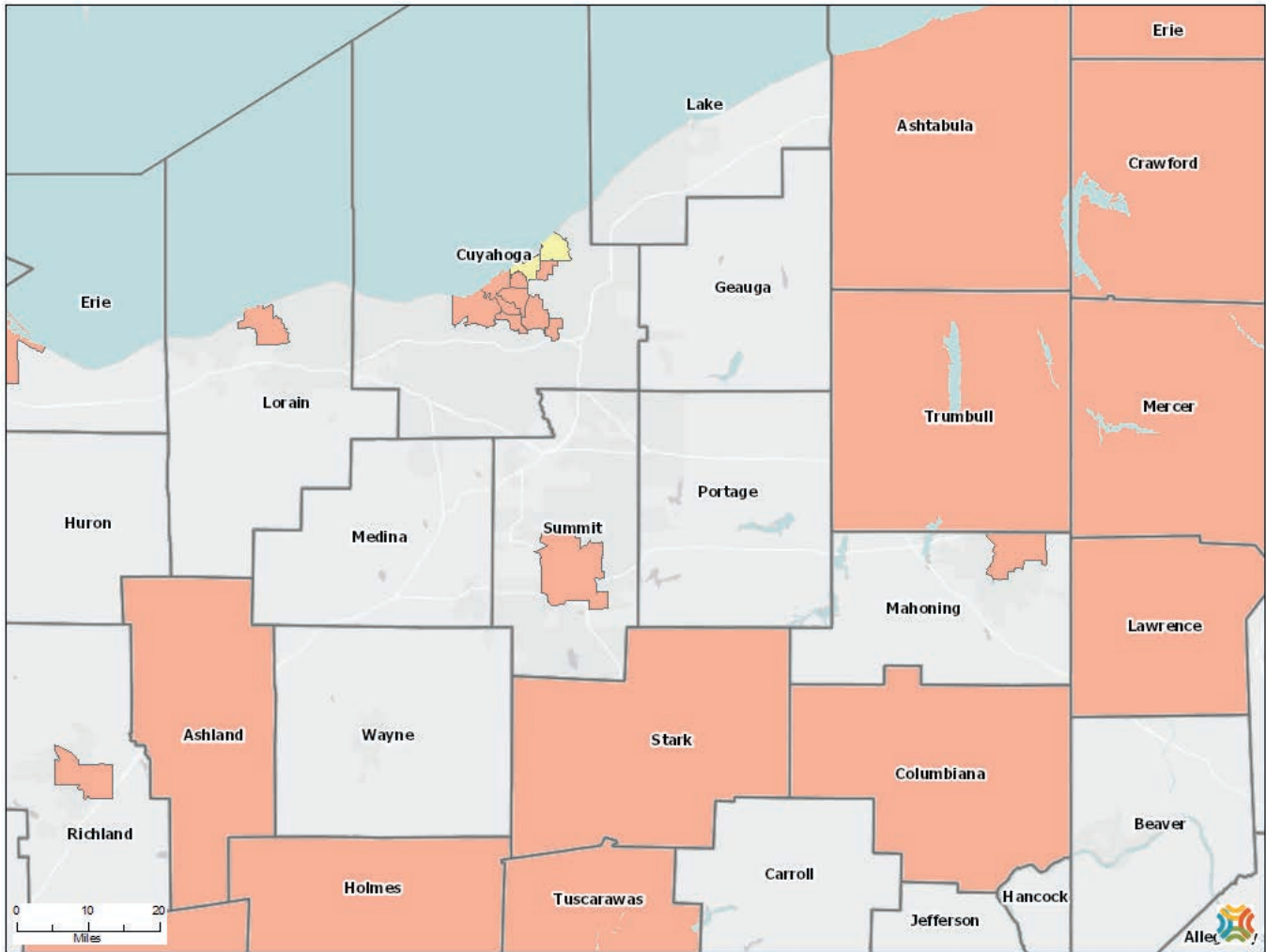
Access to Dentists, Rate per 100,000 Pop. by County, AHRF 2015

- Over 50.0
- 35.1 - 50.0
- 20.1 - 35.0
- Under 20.1
- No Dentists

Community Commons, 11/28/2017

(Source: U.S. Department of Health and Human Services, Health Resources and Services Administration, Area Health Resource File (AHRF): 2015, as compiled by Community Commons, obtained on 11/28/17)

Health Professional Shortage Area – Dental, Designated Population Group by Shortage Area, Health Resources and Services Administration (HRSA), April 2016



Map Legend

Health Professional Shortage Area - Dental, Designated Population Group by Shortage Area, HRSA HPSA Database April 2016

- Homeless Population HPSA
- Low Income Population HPSA
- Low Income Homeless Population HPSA
- Low Income Migrant Farmworker Population HPSA
- Low Income Homeless Migrant Farmworker Population HPSA
- Low Income Migrant Seasonal Worker Population HPSA
- Low Income Homeless Migrant Seasonal Worker Population HPSA
- Medicaid Eligible Population HPSA
- Migrant Seasonal Worker Population HPSA
- Geographic HPSA

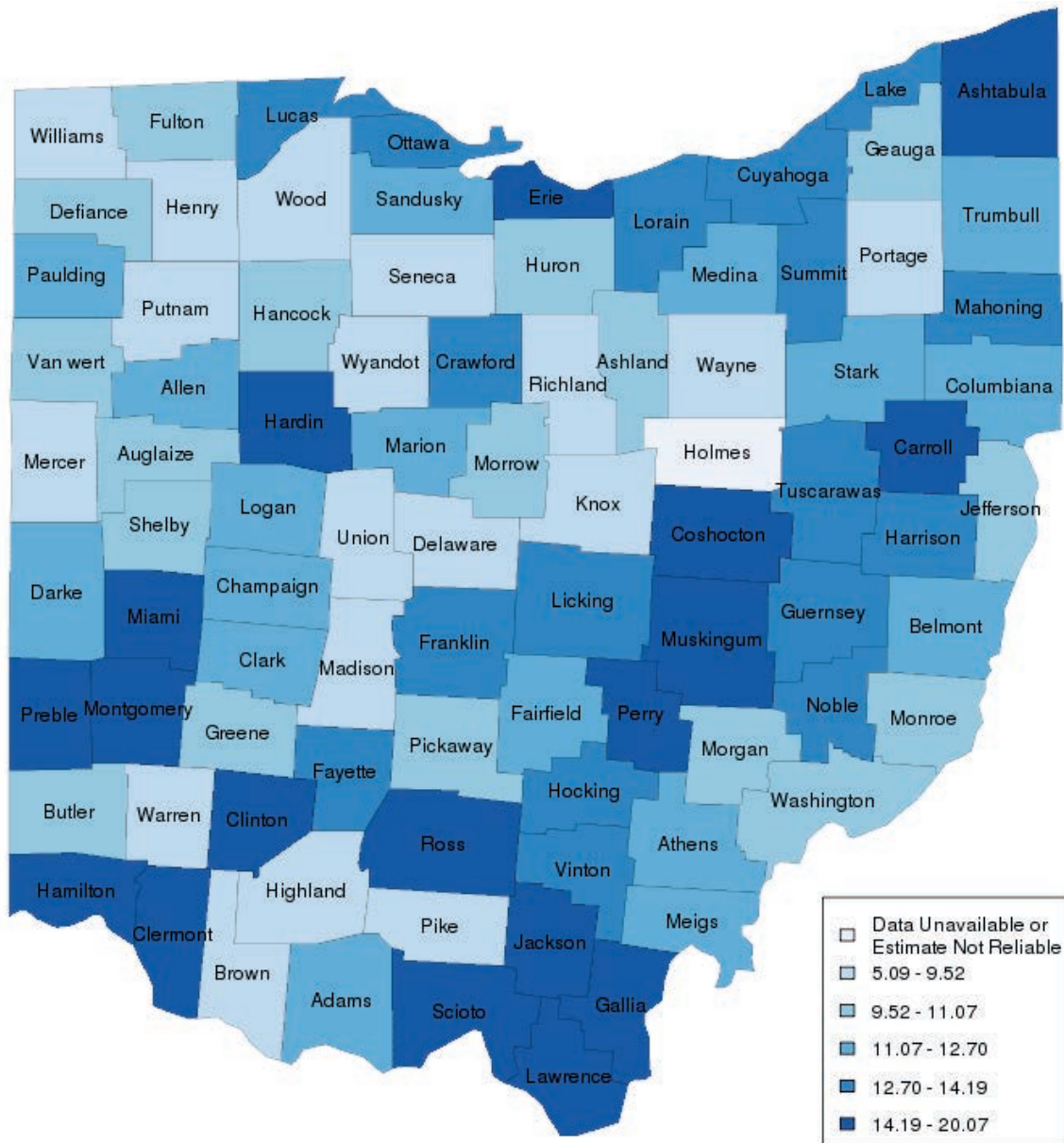
Community Commons, 11/28/2017

(Source: U.S. Department of Health and Human Services, Health Resources and Services Administration, April 2016, as compiled by Community Commons)

The following map shows the estimated proportion of all adults, ages 19 years and older, with unmet needs in dental care.

- Thirteen percent (13%) of Lorain County adults, ages 19 years and older, had unmet needs in dental care.
- Thirteen percent (13%) of Ohio adults, ages 19 years and older, had unmet needs in dental care.

Estimated Proportion: Unmet Needs in Dental Care, All Adults, Ages 19 Years and Older (2015) *



(Source: Ohio Medicaid Assessment Survey (OMAS) Adult Dashboard, 2015)

*Unmet needs indicate those who could not get needed dental care in the past 12 months

Health Behaviors: Health Status Perceptions

Key Findings

In 2015, almost half (47%) of the Lorain County adults rated their health status as excellent or very good. Conversely, 14% of adults, increasing to 19% of those over the age of 65, described their health as fair or poor.

Adults Who Rated General Health Status Excellent or Very Good

- Lorain County 47% (2015)
- Ohio 51% (2016)
- U.S. 52% (2016)

(Source: BRFSS 2016 for Ohio and U.S.)

General Health Status

- In 2015, nearly half (47%) of Lorain County adults rated their health as excellent or very good. Lorain County adults with higher incomes (54%) were most likely to rate their health as excellent or very good, compared to 19% of those with incomes less than \$25,000.
- Fourteen percent (14%) of adults rated their health as fair or poor. The 2016 BRFSS has identified that 18% of Ohio and 17% of U.S. adults self-reported their health as fair or poor.
- Lorain County adults were most likely to rate their health as fair or poor if they:
 - Had been diagnosed with diabetes (35%)
 - Were widowed (33%)
 - Had an annual household income under \$25,000 (30%)
 - Had high blood pressure (25%) or high blood cholesterol (23%)
 - Were 65 years of age or older (19%)

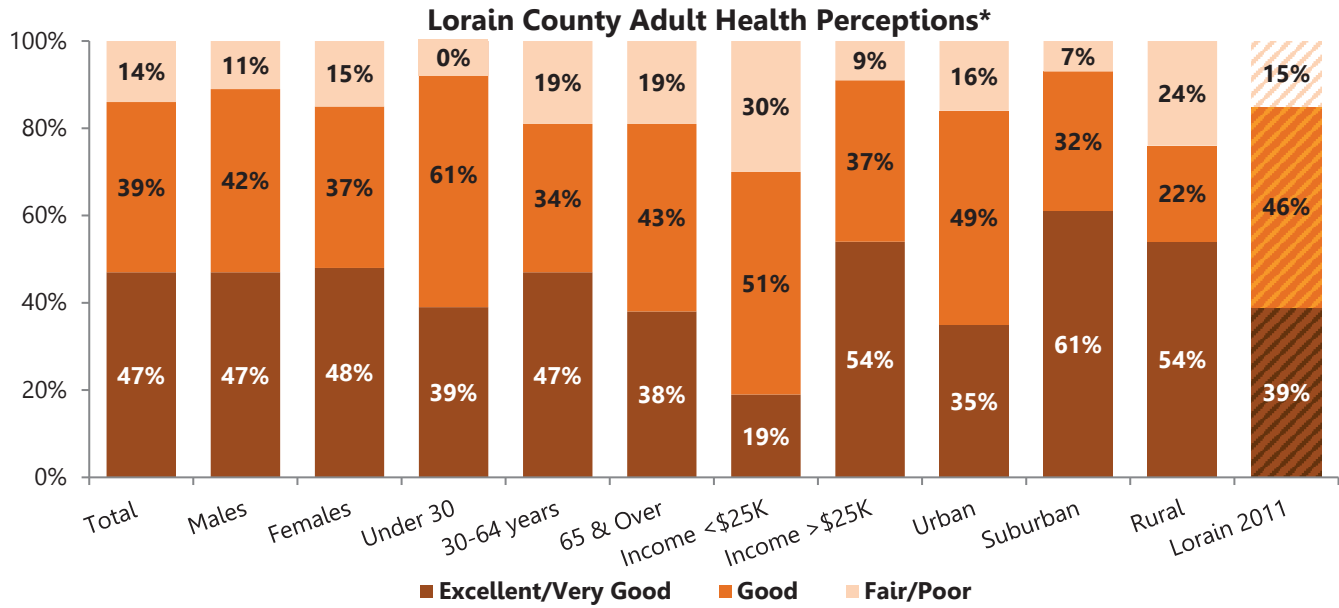
Physical Health Status

- In 2015, 21% of Lorain County adults rated their physical health as not good on four or more days in the previous month.
- Lorain County adults reported their physical health as not good on an average of 3.1 days in the previous month. Ohio and U.S. adults reported their physical health as not good on an average of 3.7 days and 3.8 days, respectively in the previous month (Source: 2015 BRFSS Data as compiled by 2017 County Health Rankings).
- Lorain County adults were most likely to rate their physical health as not good if they:
 - Had an annual household income under \$25,000 (31%)
 - Were ages 30-64 (25%)

Mental Health Status

- In 2015, 27% of Lorain County adults rated their mental health as not good on four or more days in the previous month.
- Lorain County adults reported their mental health as not good on an average of 4.1 days in the previous month. Ohio and U.S. adults reported their mental health as not good on an average of 4.0 days and 3.8 days, respectively in the previous month (Source: 2015 BRFSS Data as compiled by 2017 County Health Rankings).
- One-in-six (16%) adults reported that poor mental or physical health kept them from doing usual activities such as self-care, work, or recreation.

The following graph shows the percentage of Lorain County adults who described their personal health status as excellent/very good, good, and fair/poor. Examples of how to interpret the information include: 47% of all Lorain County adults, 39% of those under the age of 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.



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

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

Health Status	No Days	1-3 Days	4-5 Days	6-7 Days	8 or More Days
Physical Health Not Good in Past 30 Days*					
Males	70%	2%	4%	2%	11%
Females	57%	4%	9%	4%	12%
Total	63%	3%	6%	3%	11%
Mental Health Not Good in Past 30 Days*					
Males	65%	2%	4%	2%	13%
Females	53%	7%	6%	3%	19%
Total	59%	4%	5%	2%	16%

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

Adult Comparisons	Lorain County 2011	Lorain County 2015	Ohio 2016	U.S. 2016
Rated health as excellent or very good	48%	47%	51%	52%
Rated health as fair or poor	12%	14%	18%	17%
Rated their mental health as not good on four or more days in the previous month	20%	27%	N/A	N/A
Average days that physical health not good in past month	N/A	3.1	3.7 [‡]	3.8 [‡]
Average days that mental health not good in past month	N/A	4.1	4.0 [‡]	3.8 [‡]

[‡]2015 BRFSS Data as compiled by 2017 County Health Rankings
N/A – Not Available

Health Behaviors: Adult Weight Status

Key Findings

Sixty-nine percent (69%) of Lorain County adults were overweight or obese based on Body Mass Index (BMI). The 2016 BRFSS indicates that 32% of Ohio and 30% of U.S. adults were obese by BMI. More than one-third (37%) of Lorain County adults were obese. Nearly half (49%) of adults were trying to lose weight.

Adult Weight Status

- In 2015, more than two-thirds (69%) of Lorain County adults were either overweight (32%) or obese (37%) by Body Mass Index (BMI). This puts them at elevated risk for developing a variety of diseases.
- Nearly half (49%) of adults were trying to lose weight, 27% were trying to maintain their current weight or keep from gaining weight, and 5% were trying to gain weight.
- Lorain County adults did the following to lose weight or keep from gaining weight: ate less food, fewer calories, or foods low in fat (50%), exercised (44%), ate a low-carb diet (13%), health coaching (3%), went without eating 24 or more hours (3%), used a weight loss program (2%), smoked cigarettes (2%), took diet pills, powders or liquids without a doctor's advice (2%), took prescribed medications (1%), participated in a prescribed dietary or fitness program (1%), bariatric surgery (1%), took laxatives (<1%), and vomited after eating (<1%).

37% of Lorain County adults were obese.

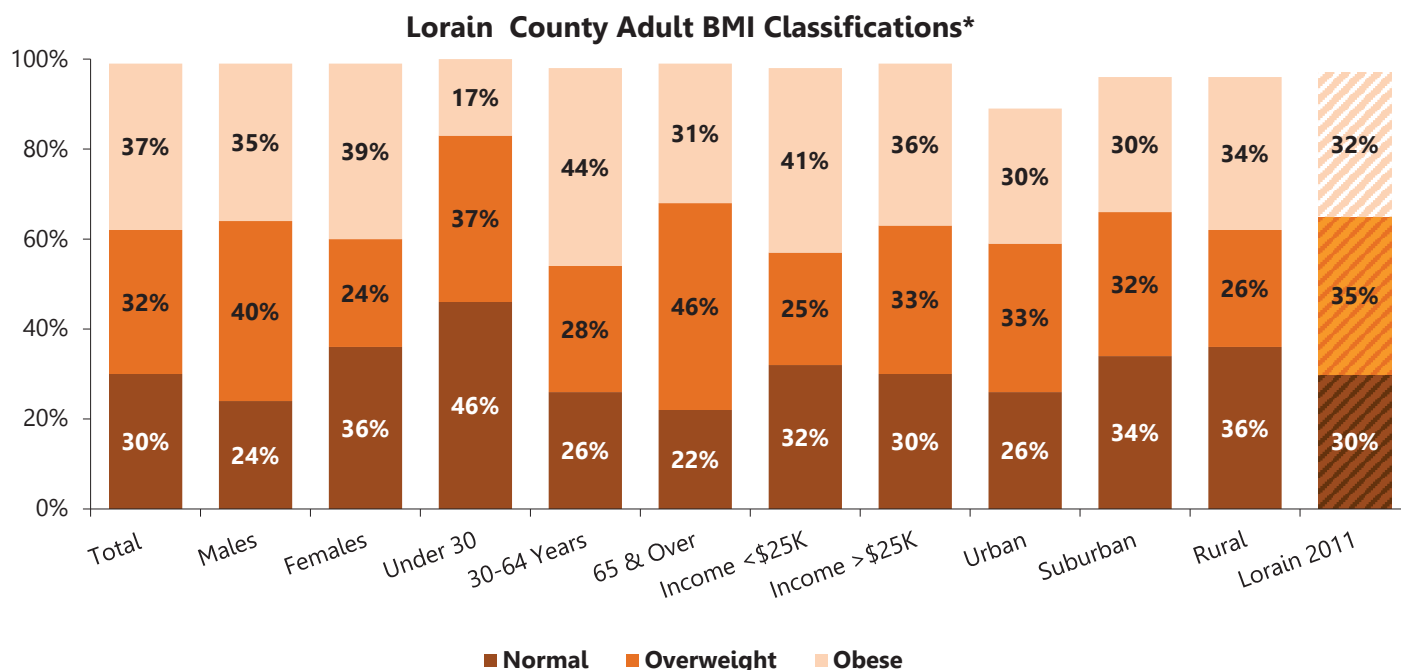
Physical Activity

- In Lorain County, 53% of adults were engaging in some type of physical activity or exercise for at least 30 minutes 3 or more days per week. 30% of adults were exercising 5 or more days per week. Nearly one-quarter (23%) of adults were not participating in any physical activity in the past week, including 2% who were unable to exercise.
- 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 Basics*, 2015).
- Reasons for not exercising included: time (22%), too tired (22%), laziness (18%), pain/discomfort (11%), chose not to exercise (10%), weather (6%), no exercise partner (6%), could not afford a gym membership (4%), no childcare (3%), safety (2%), did not know what activity to do (2%), poorly maintained or no sidewalks (2%), transportation (1%), doctor advised them not to exercise (1%), no gym available (<1%), no walking/biking trails (<1%), no access to parks (<1%), and other reasons (5%).
- Lorain County adults described their work as: mostly sitting (28%), mostly walking (11%), mostly heavy labor or physically demanding work (10%), and mostly standing (8%). 28% of adults were not employed, and 14% said their type of work varied.
- Lorain County adults spent an average of 2.7 hours watching TV, 1.5 hours on their cell phone, 1.4 hours on the computer (outside of work), and 0.2 hours playing video games on an average day of the week.

Nutrition

- In 2015, 5% 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 at least 2 ½ cups of fruits and vegetables per day to reduce the risk of cancer and to maintain good health.
- Lorain County adults obtained their fruits and vegetables from the following places: large grocery store (81%), local grocery store (36%), farmer’s market (29%), garden/grew their own (27%), restaurants (10%), corner stores (3%), Dollar/General Store (3%), food pantry (3%), Veggie Mobile (1%), Group Purchasing, Community Supported Agriculture (1%), and other places (5%).
- Adults reported the following barriers to consuming fruits and vegetables: too expensive (17%), did not like the taste (5%), transportation (1%), did not know how to prepare (1%), no variety (1%), no access (1%), did not take EBT (<1%), and other barriers (2%).
- Lorain County adults reported the following reasons they chose the types of food they ate: taste (58%), cost (51%), enjoyment (50%), ease of preparation (44%), healthiness of food (44%), availability (36%), time (33%), food they were used to (30%), nutritional content (29%), what their spouse prefers (22%), calorie content (21%), what their child prefers (11%), if it is organic (7%), if it is genetically modified (4%), gluten free (4%), health care provider’s advice (3%), other food sensitivities (3%), lactose free (2%), and other reasons (2%).
- Adults drank an average of 4.6 beverages containing sugar in the past week.

The following graph shows the percentage of Lorain County adults who were overweight or obese by Body Mass Index (BMI). Examples of how to interpret the information include: 30% of all Lorain County adults were classified as normal weight, 32% were overweight, and 37% were obese.

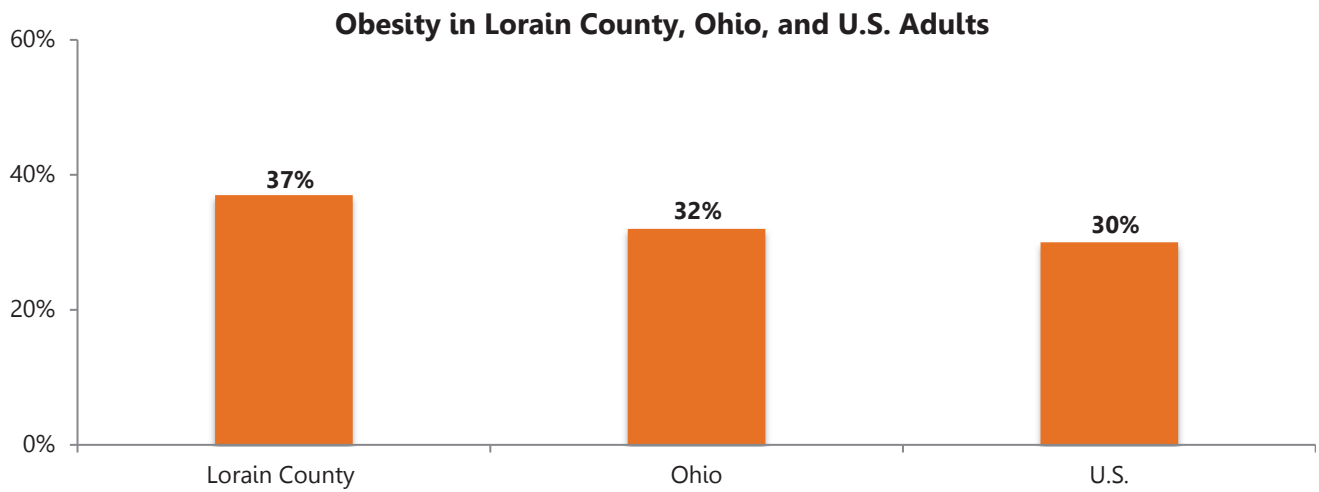


*Percentages may not equal 100% due to the exclusion of data for those who were classified as underweight

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

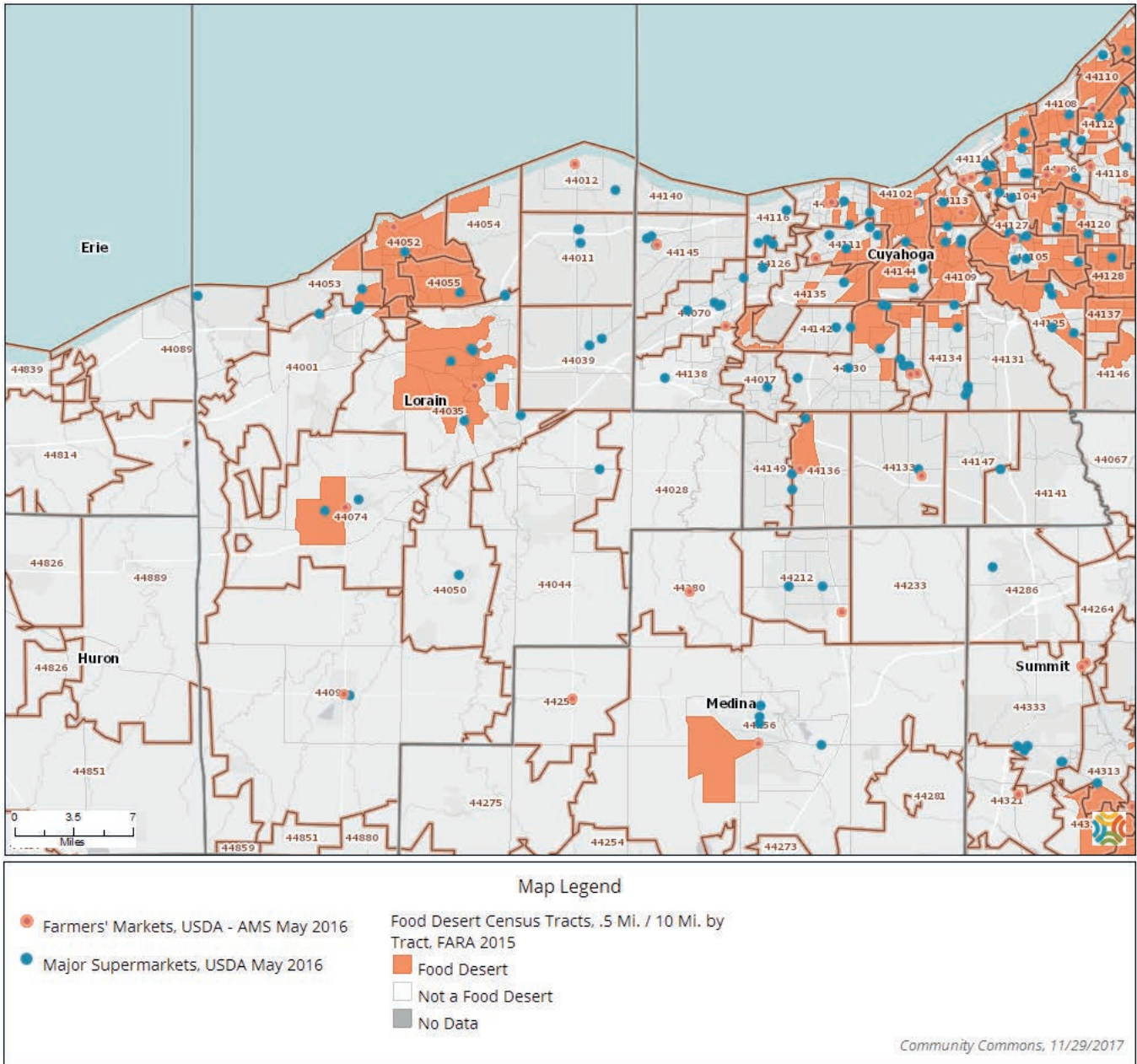
Adult Comparisons	Lorain County 2011	Lorain County 2015	Ohio 2016	U.S. 2016
Obese	32%	37%	32%	30%
Overweight	35%	32%	35%	35%

The following graph shows the percentage of Lorain County adults who are obese compared to Ohio and U.S.



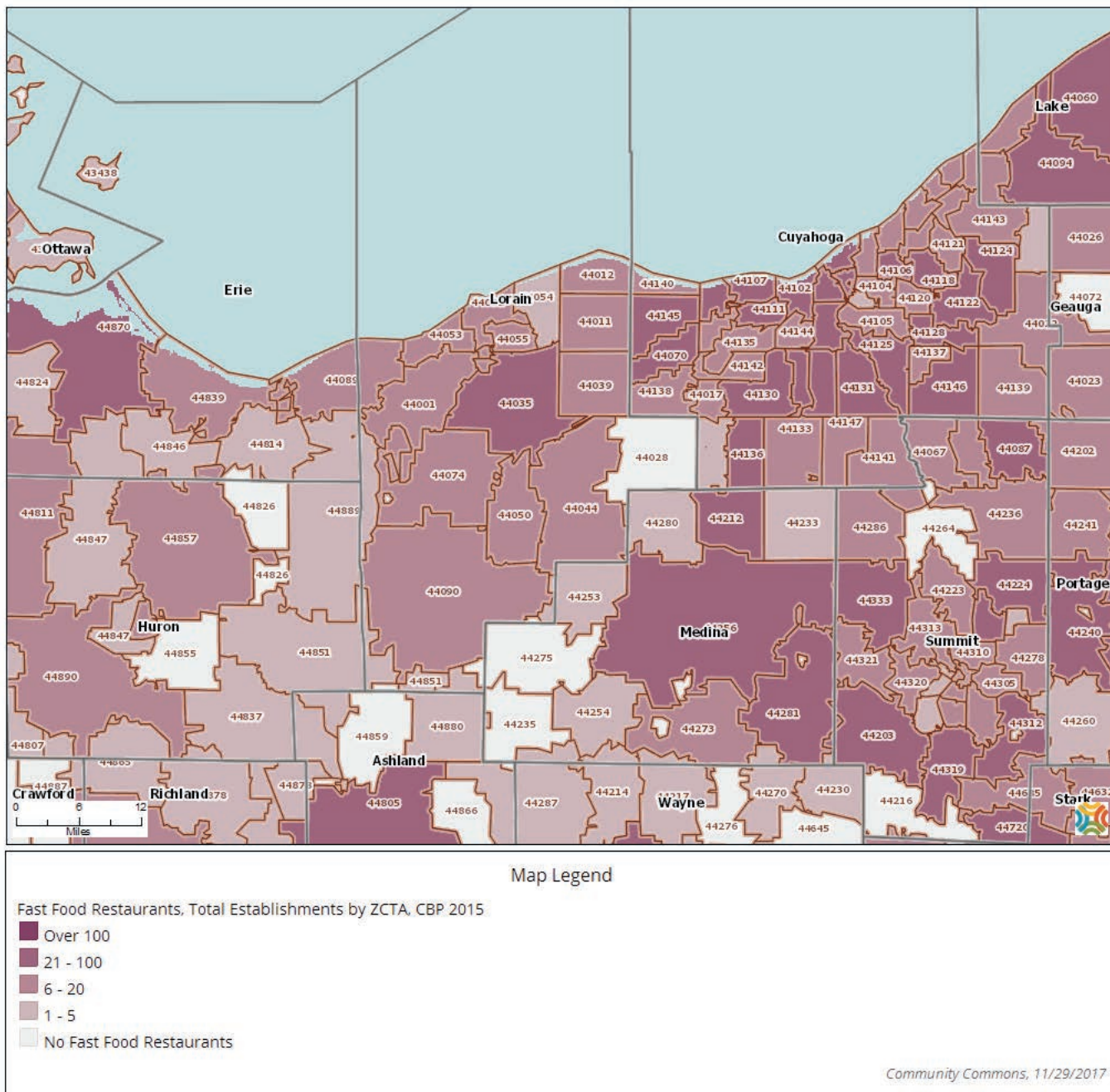
(Source: 2015 Lorain County Health Assessment and 2016 BRFSS)

Food Desert Census Tracts, Major Supermarkets and Farmer's Markets



(Sources: U.S. Department of Agriculture, Food and Nutrition Service and Agricultural Marketing Service, May 2016 and U.S. Department of Agriculture, Economic Research Service, USDA – Food Access Research Atlas: 2015, as compiled by Community Commons)

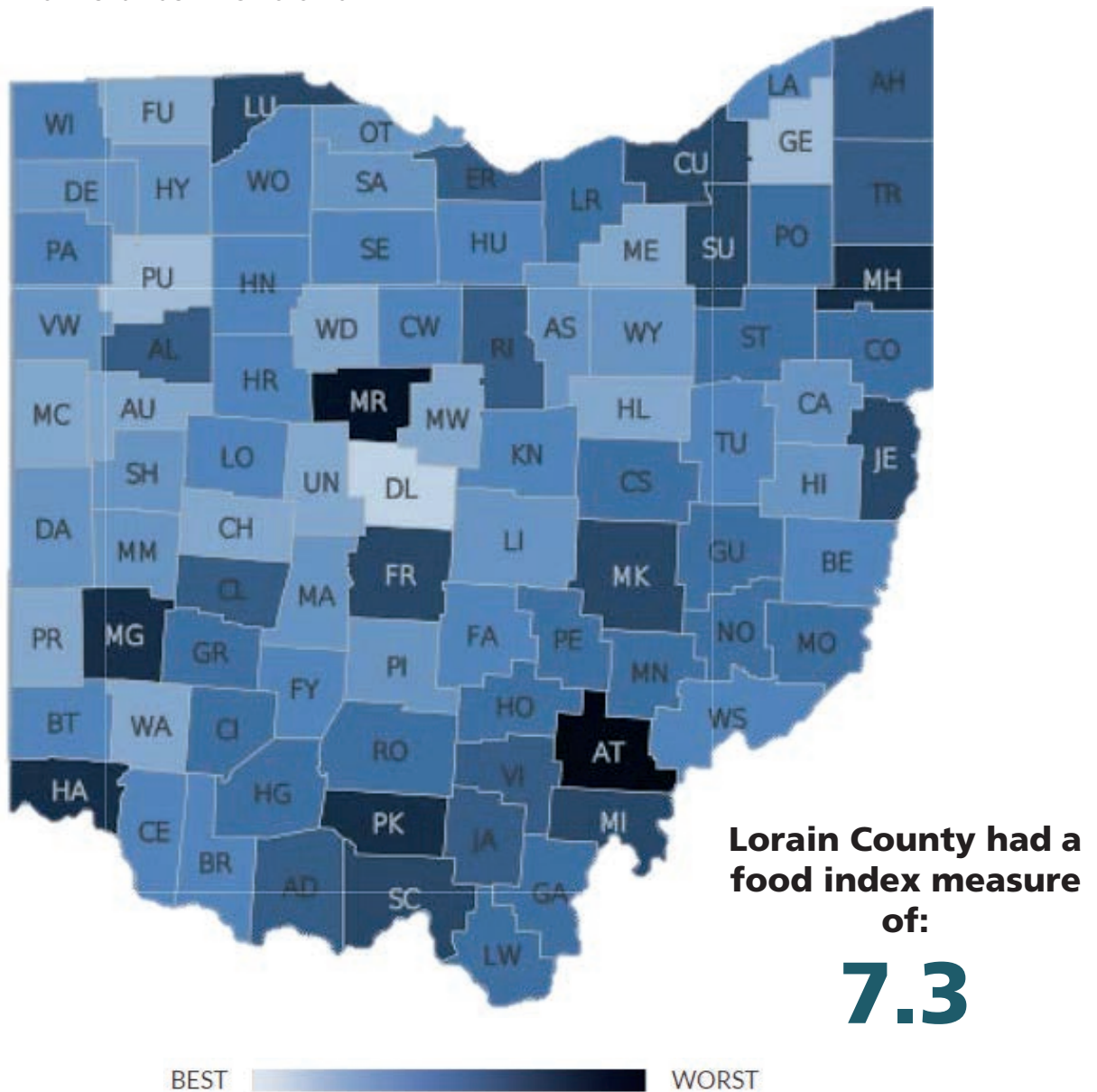
Fast Food Restaurants, Total Establishments by Zip Code Tract Area, 2015



(Source: U.S. Census Bureau, County Business Patterns: 2015, as compiled by Community Commons)

The Food Environment Index measures the quality of the food environment in a county on a scale from 0 to 10 (zero being the worst value in the nation, and 10 being the best). The two variables used to determine the measure are limited access to healthy foods (i.e. the percentage of the population who are low income and do not live close to a grocery store) & food insecurity (i.e. the percentage of the population who did not have access to a reliable source of food during the past year).

- The food environment index in Lorain County is 7.3.
- The food environment index in Ohio is 7.0.



(Source: USDA Food Environment Atlas, as compiled by County Health Rankings 2017)

Health Behaviors: Adult Tobacco Use

Key Findings

In 2015, 22% of Lorain County adults were current smokers, and 23% were considered former smokers. Seven percent (7%) of adults had used e-cigarettes in the past year.

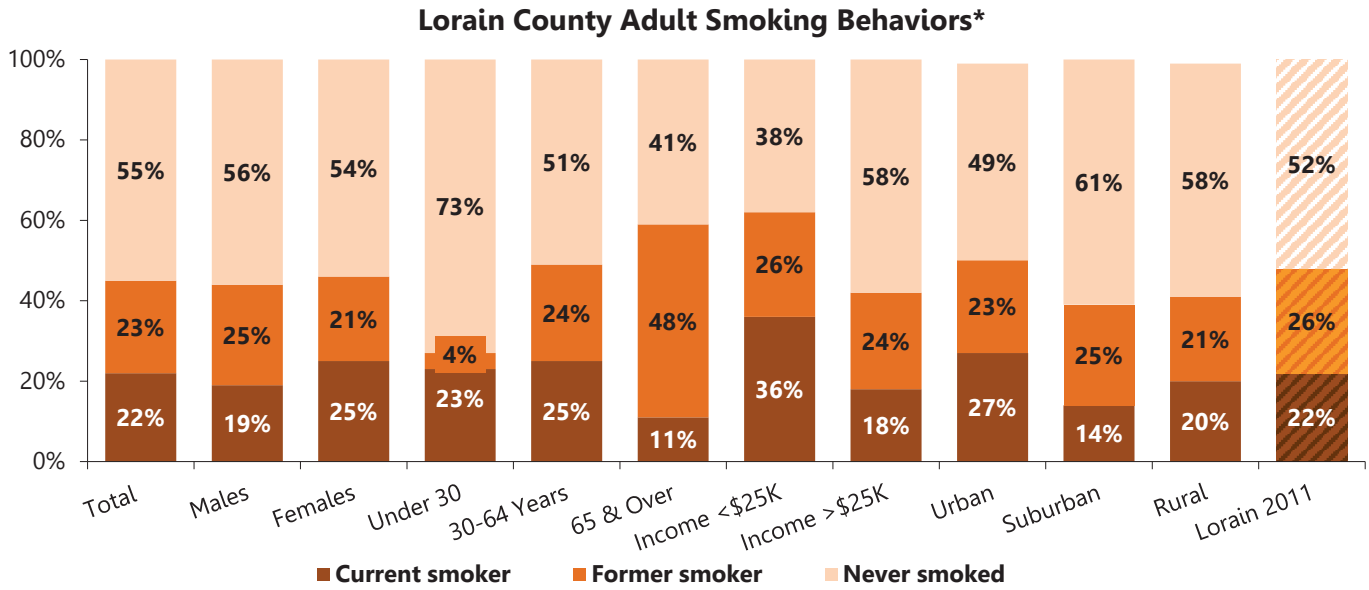
In 2015, 22% of Lorain County adults were current smokers.

Adult Tobacco Use Behaviors

- More than one-fifth (22%) of Lorain County adults were current smokers (those who indicated smoking at least 100 cigarettes in their lifetime and currently smoke some or all days). The 2016 BRFSS reported current smoker prevalence rates of 23% for Ohio and 17% for the U.S.
- Almost one-quarter (23%) of adults indicated that they were former smokers (smoked 100 cigarettes in their lifetime and now do not smoke). The 2016 BRFSS reported former smoker prevalence rates of 24% for Ohio and 25% for the U.S.
- Lorain County adult smokers were more likely to:
 - Have rated their overall health as poor (38%)
 - Have incomes less than \$25,000 (36%)
 - Have been separated or a member of an unmarried couple (31%)
- Lorain County adults used the following tobacco products in the past year: cigarettes (24%), e-cigarettes (7%), cigars (5%), Black and Milds (4%), roll-your-own (3%), cigarillos (3%), hookah (3%), chewing tobacco (2%), swishers (2%), little cigars (1%), snuff (1%), and pipes (<1%).
- 45% 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.

Adult Comparisons	Lorain County 2011	Lorain County 2015	Ohio 2016	U.S. 2016
Current smoker	22%	22%	23%	17%
Former smoker	26%	23%	24%	25%

The following graph shows the percentage of Lorain County adults who smoked cigarettes. Examples of how to interpret the information include: 22% of all Lorain County adults were current smokers, 23% of all adults were former smokers, and 55% had never smoked.



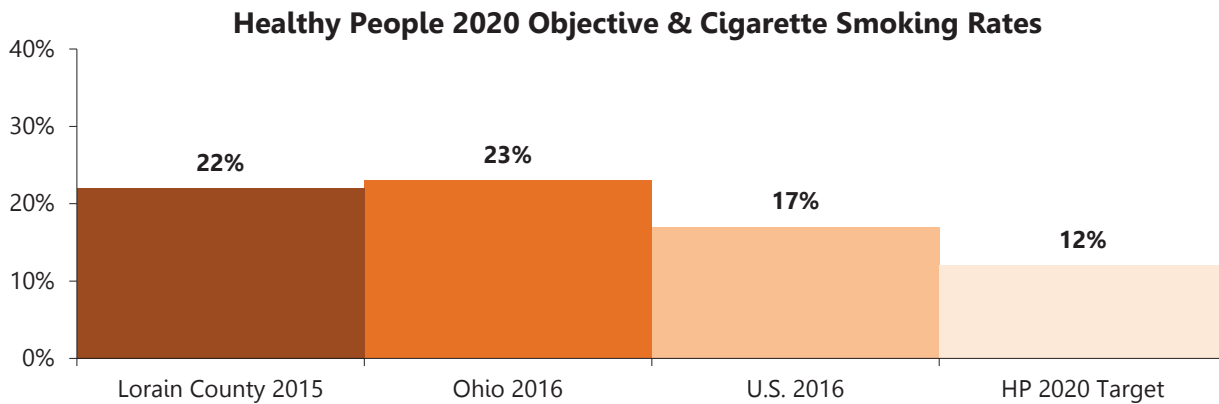
**Note: Respondents were asked: "Have you smoked at least 100 cigarettes in your entire life? If yes, do you now smoke cigarettes every day, some days or not at all?"*

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

45% of current smokers responded they had tried to quit smoking one or more times.

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

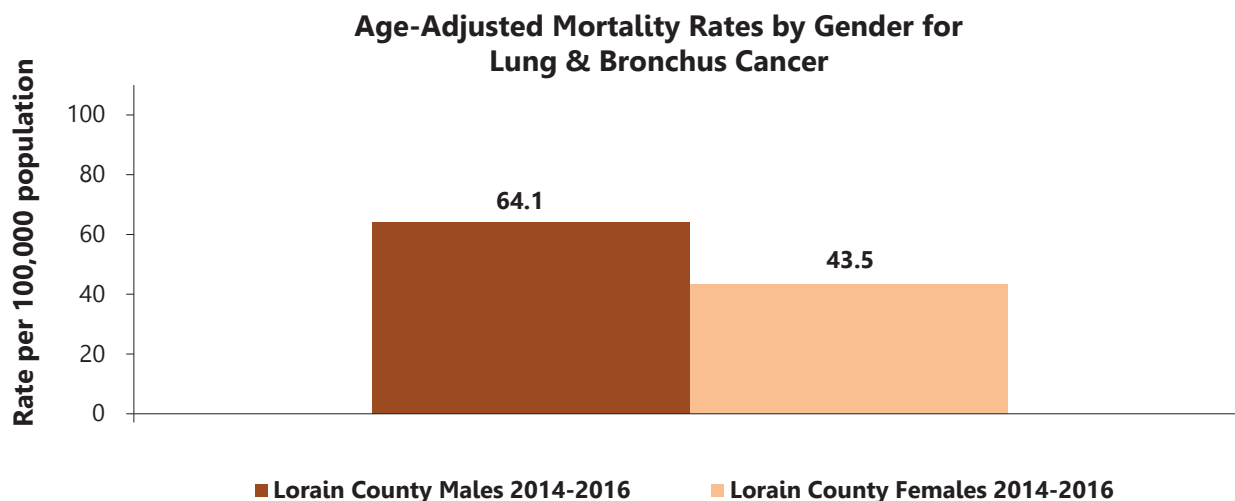
- The Lorain County adult cigarette smoking rate was lower than the Ohio rate, but slightly higher than the U.S. rate and Healthy People 2020 target objective.



(Source: 2015 Lorain County Health Assessment, 2016 BRFSS and Healthy People 2020)

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

- Disparities existed by gender for Lorain County lung and bronchus cancer age-adjusted mortality rates. The 2014-2016 Lorain male rate were substantially higher than the female rate.



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

23% of Lorain County adults indicated that they were former smokers

Smoke-Free Living: Benefits and Milestones

According to the American Heart Association and the U.S. Surgeon General:

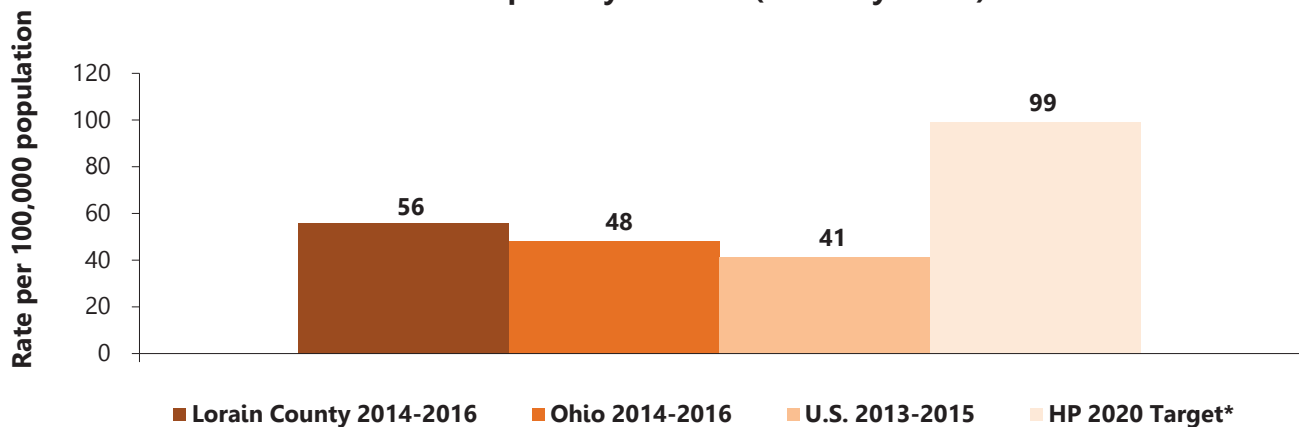
- In your first 20 minutes after quitting: your blood pressure and heart rate recover from the cigarette-induced spike.
- After 12 hours of smoke-free living: the carbon monoxide levels in your blood return to normal.
- After two weeks to three months of smoke-free living: your circulation and lung function begin to improve.
- After one to nine months of smoke-free living: clear and deeper breathing gradually returns as coughing and shortness of breath diminishes; you regain the ability to cough productively instead of hacking, which cleans your lungs and reduce your risk of infection.
- After 5 years: Your risk of cancer of the mouth, throat, esophagus, and bladder are cut in half. Your risk of cervical cancer and stroke return to normal.
- After 10 years: You are half as likely to die from lung cancer. Your risk of larynx or pancreatic cancer decreases.
- After 15 years: Your risk of coronary heart disease is the same as a non-smoker's.

(Source: American Heart Association (AHA), Your Non-Smoking Life, April 20, 2017)

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

- From 2014-2016, Lorain County’s age-adjusted mortality rate for Chronic Lower Respiratory Disease was higher than the Ohio and U.S. rate, but lower than the HP 2020 target objective rate.
- Lorain County’s age-adjusted mortality rate for lung and bronchus cancer was higher than Ohio, U.S. and Healthy People 2020 target objective rate.

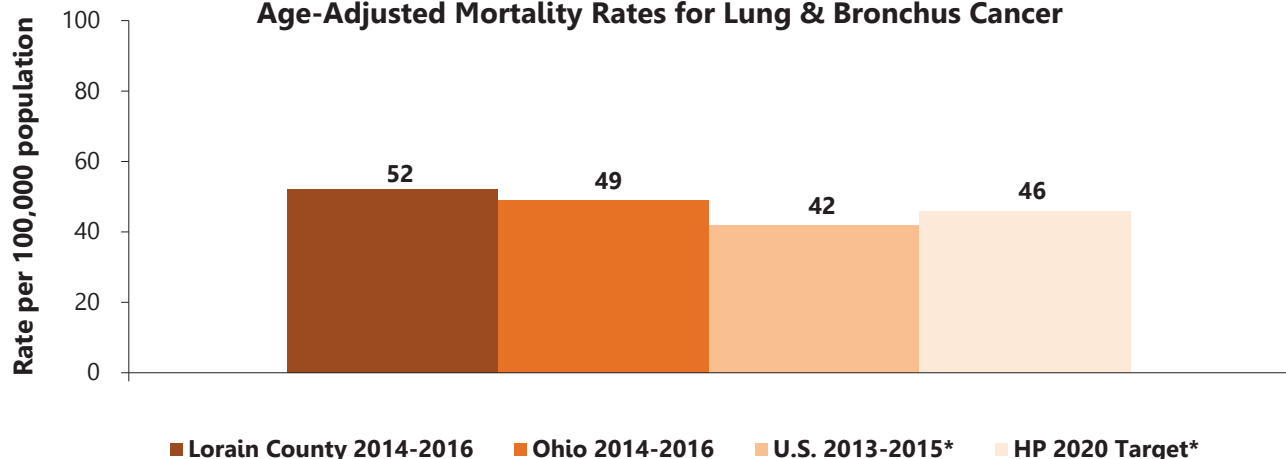
Age-Adjusted Mortality Rates for Chronic Lower Respiratory Diseases (Formerly COPD)



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

*Note: Healthy People 2020’s target rate and the U.S. rate is for adults aged 45 years and older.

Age-Adjusted Mortality Rates for Lung & Bronchus Cancer



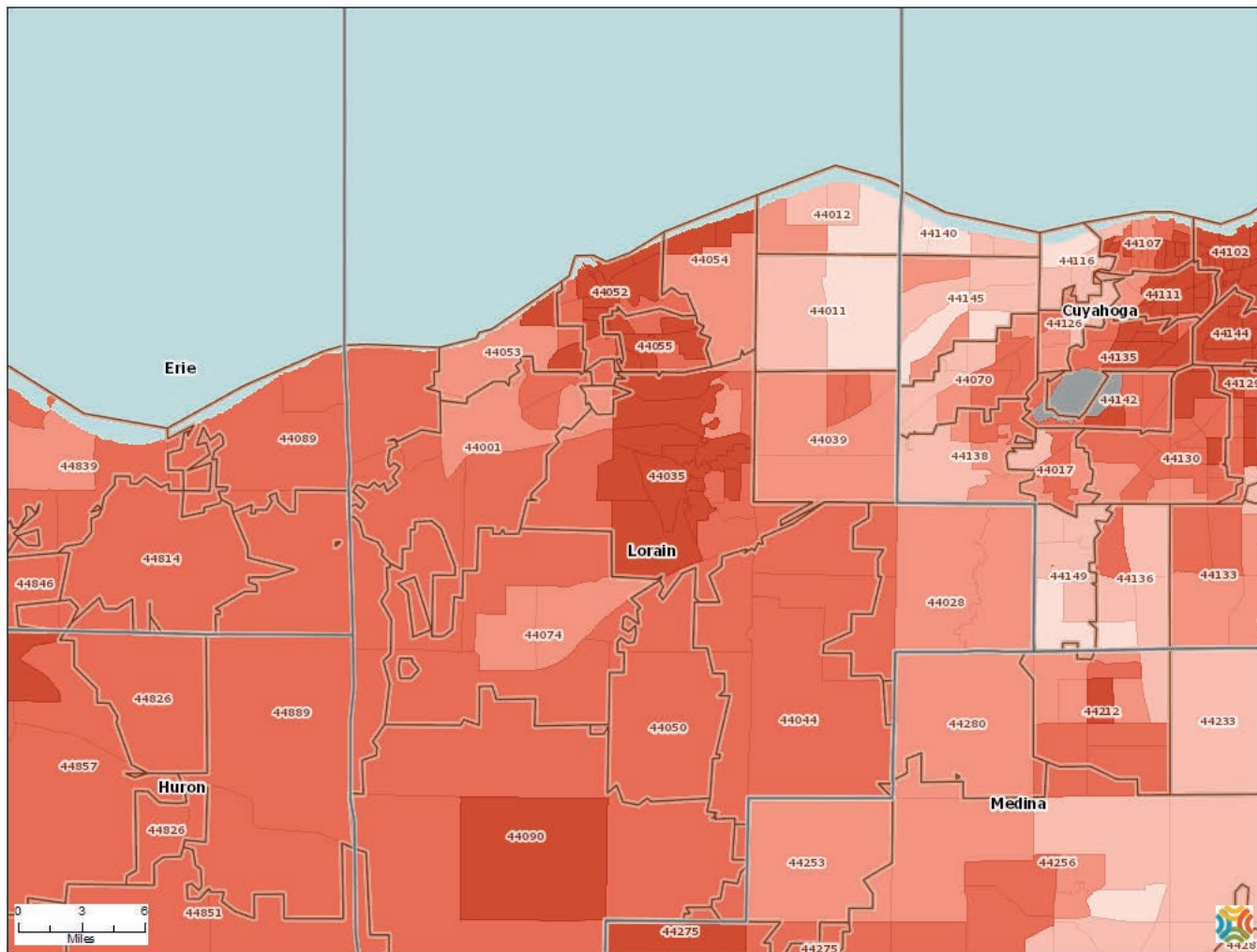
(Sources: Ohio Public Health Data Warehouse, 2014-2016, CDC Wonder, 2013-2015 and Healthy People 2020)

*The Health People 2020 target objective only includes the age-adjusted lung cancer death rate

Smoking and Other Health Risks

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

Cigarette Expenditures, Percent of Total Expenditures, National Rank by Tract, Nielsen, 2014*



Map Legend

Cigarette Expenditures, Percent of Total Expenditures, National Rank by Tract, Nielsen 2014

- 1st Quintile (Highest Expenditures)
- 2nd Quintile
- 3rd Quintile
- 4th Quintile
- 5th Quintile (Lowest Expenditures)
- No Data or Data Suppressed

Community Commons, 11/29/2017

(Source: Community Commons, Nielsen, Nielsen SiteReports: 2014, as compiled by Community Commons, obtained on 11/29-17)

Description of indicator: To generate acceptable map output in compliance with the Nielsen terms of use agreement, percent expenditures for each tract were sorted and ranked; quintiles were assigned to each tract based on national rank and symbolized within the map.

*Tobacco expenditures indicate cigarettes only; cigars and other tobacco products are not included.

Health Behaviors: Adult Alcohol Consumption

Key Findings

In 2015, 61% of Lorain County adults had at least one alcoholic drink in the past month. Twenty-two percent (22%) of current drinkers were binge drinkers.

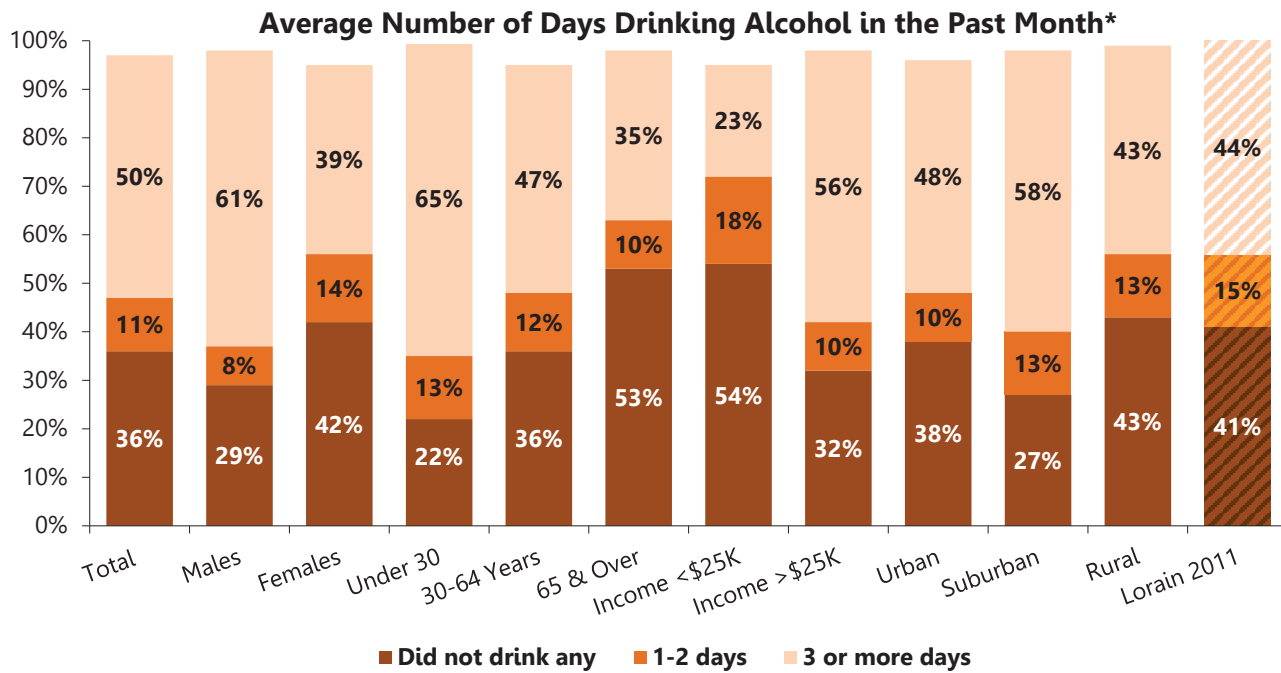
61% of Lorain County adults had at least one alcoholic drink in the past month.

Adult Alcohol Consumption

- In 2015, 61% of the Lorain County adults had at least one alcoholic drink in the past month, increasing to 78% of those under the age of 30.
- The 2016 BRFSS reported current drinker prevalence rates of 53% for Ohio and 54% for the U.S.
- Nearly one-in-six (16%) adults were considered frequent drinkers (drank on an average of three or more days per week).
- Of those who drank, Lorain County adults drank 4.4 drinks on average, increasing to 4.7 drinks for those with incomes less than \$25,000 and 4.8 drinks for males.
- One-in-nine (11%) Lorain County adults 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. The 2016 BRFSS reported binge drinking rates of 18% for Ohio and 17% for the U.S.
- Twenty-two percent (22%) of current drinkers were considered binge drinkers.
- One percent (1%) of adults reported driving after having perhaps too much to drink.

Adult Comparisons	Lorain County 2011	Lorain County 2015	Ohio 2016	U.S. 2016
Current drinker (drank alcohol at least once in the past month)	59%	61%	53%	54%
Binge drinker (defined as consuming more than four [women] or five [men] alcoholic beverages on a single occasion in the past 30 days)	23%	11%	18%	17%

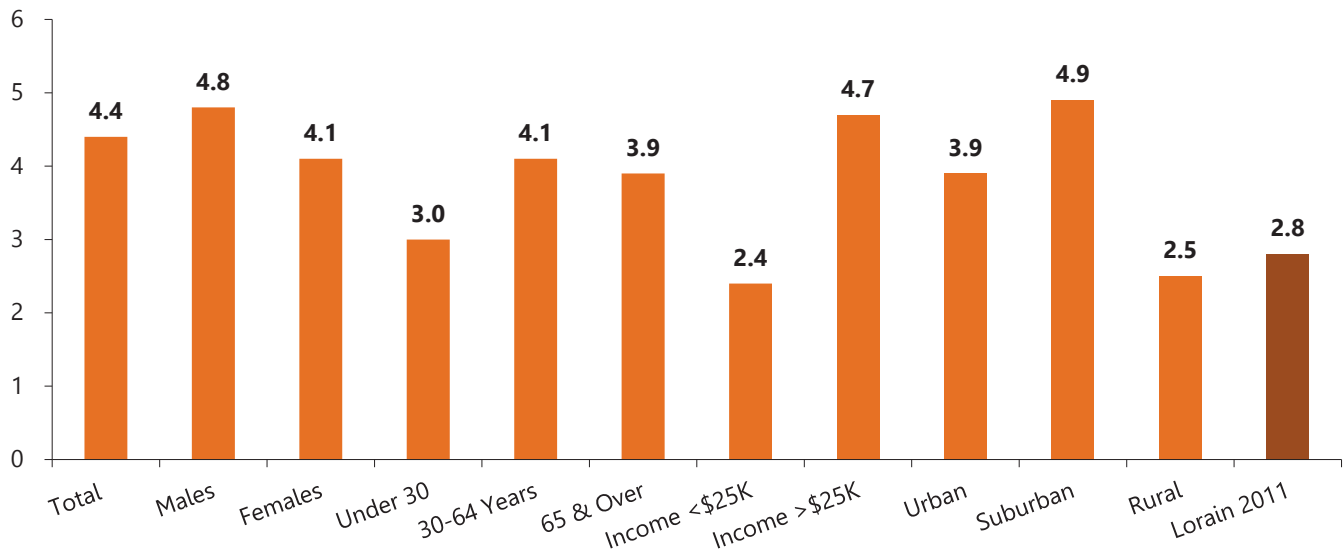
The following graphs show the percentage of Lorain County adults consuming alcohol and the amount consumed on average. Examples of how to interpret the information shown on the first graph include: 36% of all Lorain County adults did not drink alcohol, 29% of Lorain County males did not drink, and 42% of adult females reported they did not drink.



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

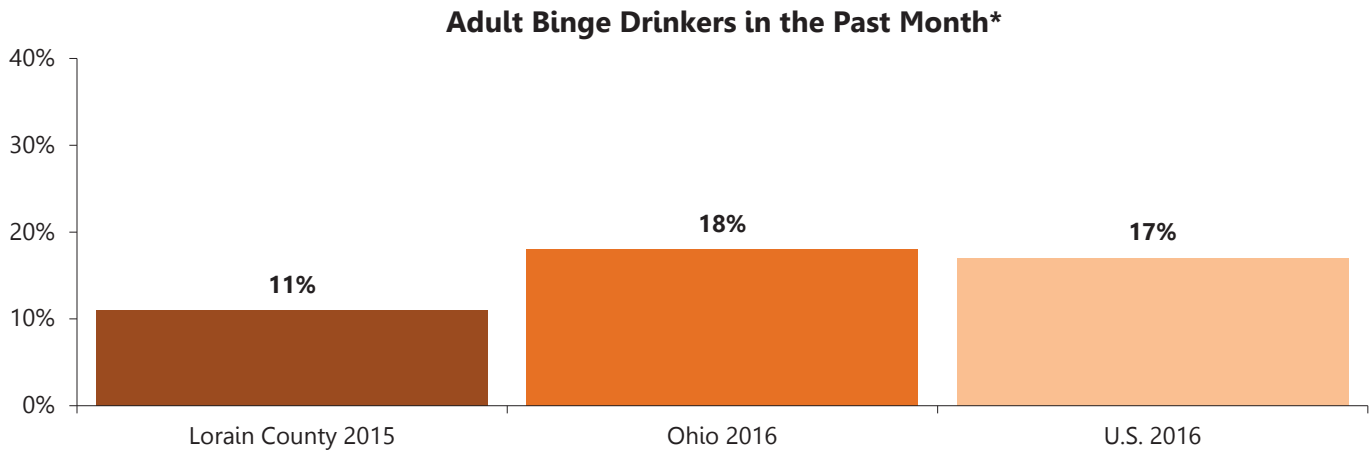
Note: Caution should be used when interpreting subgroup results as the margin of error for any subgroup is higher than that of the overall survey.

Adults Average Number of Drinks Consumed Per Drinking Occasion



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

The following graph shows a comparison of Lorain County binge drinkers with Ohio and U.S. binge drinkers.



(Source: 2016 BRFSS, 2015 Lorain 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.*

Economic Costs of Excessive Alcohol Use

- Excessive alcohol consumption cost the United States \$249 billion in 2010. This cost amounts to about \$2.05 per drink, or about \$807 per person.
- Costs due to excessive drinking largely resulted from losses in workplace productivity (72% of the total cost), health care expenses (11%), and other costs due to a combination of criminal justice expenses, motor vehicle crash costs, and property damage.
- Excessive alcohol use cost states and DC a median of 3.5 billion in 2010, ranging from \$488 million in North America to \$35 billion in California.
 - Excessive alcohol consumption cost Ohio \$8.5 billion in 2010. This cost amounts to \$2.10 per drink or \$739 per person.
- Binge drinking, defined as consuming 4 or more drinks per occasion for women or 5 or more drinks per occasion for men, was responsible for 77% of the cost of excessive alcohol use in all states and DC.
- About \$2 of every \$5 of the economic costs of excessive alcohol use were paid by federal, state, and local governments.

(Source: CDC, Alcohol and Public Health – Excessive Drinking, updated June 15, 2017)

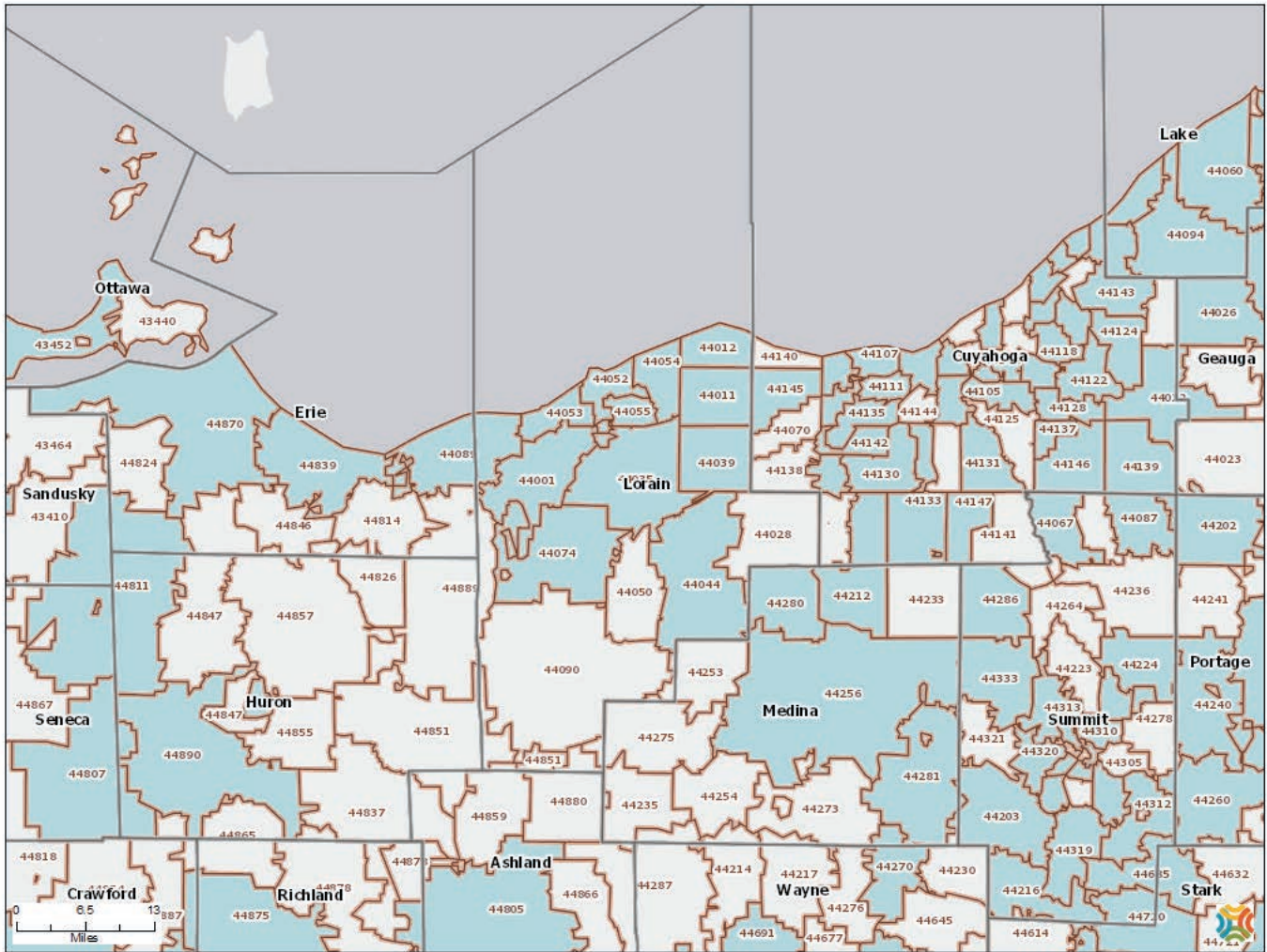
The following table shows the City of Elyria, the City of Lorain, Lorain County, and Ohio motor vehicle accident statistics. The table shows:

- In 2016, 4% of the total crashes in Lorain County and Ohio were alcohol-related.
- Of the total number of alcohol-related crashes (288) in Lorain County, 51% were property damage only, 45% were non-fatal injury, and 4% were fatal injury.
- There were 12,273 alcohol-related crashes in Ohio in 2016. Of those crashes, 56% were property damage only, 41% were non-fatal injury, and 3% were fatal injury.

	City of Lorain 2016	City of Elyria 2016	Lorain County 2016	Ohio 2016
Total Crashes	1,096	1,439	6,432	305,958
Alcohol-Related Total Crashes	33	61	288	12,243
Fatal Injury Crashes	5	5	35	1,054
Alcohol-Related Fatal Crashes	3	0	12	313
Alcohol Impaired Drivers in Crashes	32	58	284	11,958
Injury Crashes	282	372	1,662	77,513
Alcohol-Related Injury Crashes	12	28	130	5,076
Property Damage Only	809	1,062	4,735	227,391
Alcohol-Related Property Damage Only	18	33	146	6,854
Deaths	6	5	38	1,133
Alcohol-Related Deaths	4	0	14	346
Total Non-Fatal Injuries	438	565	2,496	112,330
Alcohol-Related Injuries	18	43	192	7,199

(Source: Ohio Department of Public Safety, Crash Reports, Updated 12/7/17, Traffic Crash Facts)

Beer, Wine and Liquor Stores, Rate (Per 100,000 Pop.) by Zip Code, Census



Map Legend

Beer, Wine and Liquor Stores, Rate (Per 100,000 Pop.) by ZCTA, CBP 2015

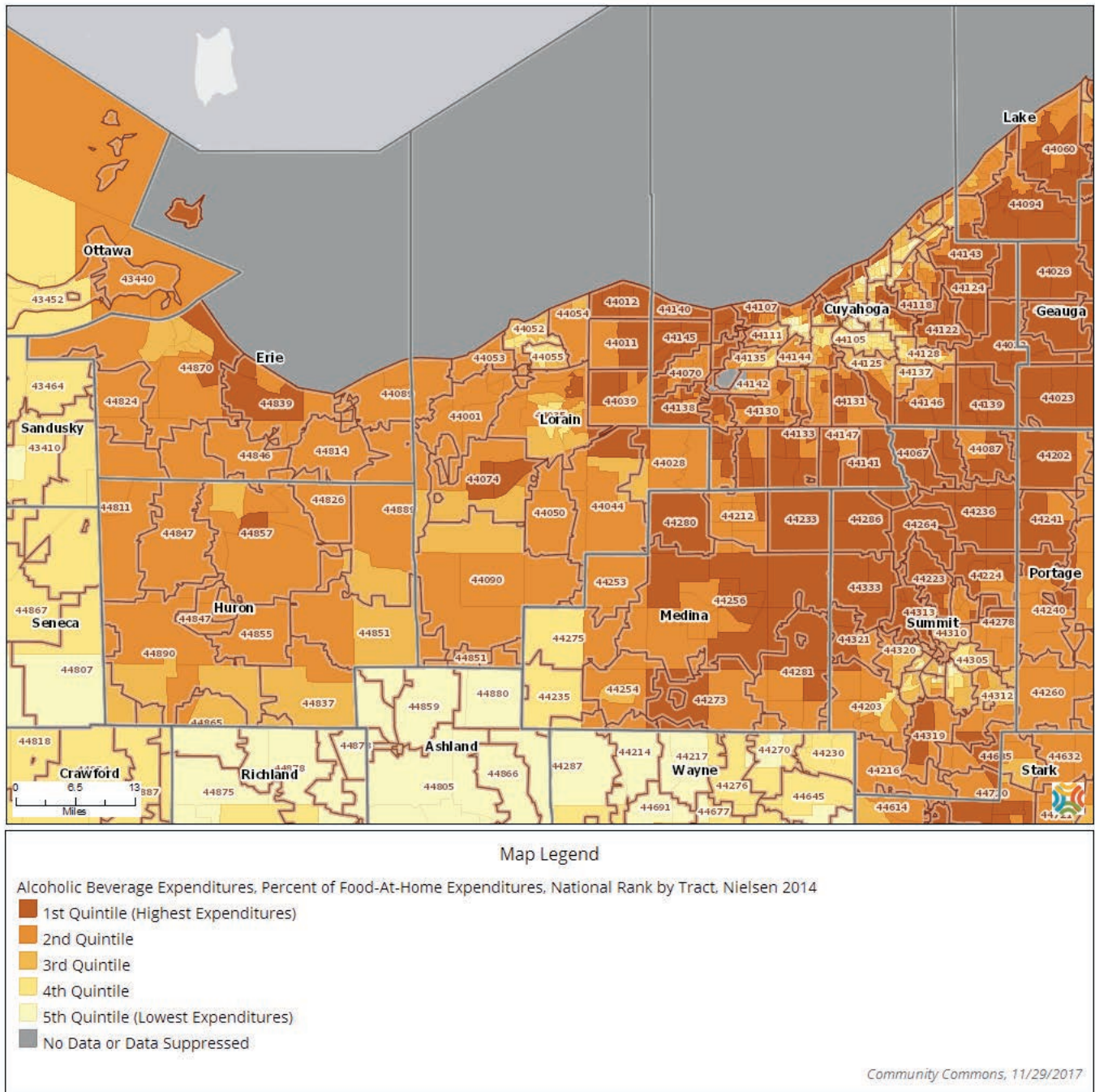
- Over 18.0
- 12.1 - 18.0
- 6.1 - 12.0
- Under 6.1
- No Beer, Wine, or Liquor Stores

Community Commons, 11/29/2017

Business Patterns (CBP), 2015

(Source: U.S. Census Bureau, County Business Patterns: 2015 as compiled by Community Commons)

Alcohol Beverage Expenditures, National Rank by Tract, Nielsen, 2014

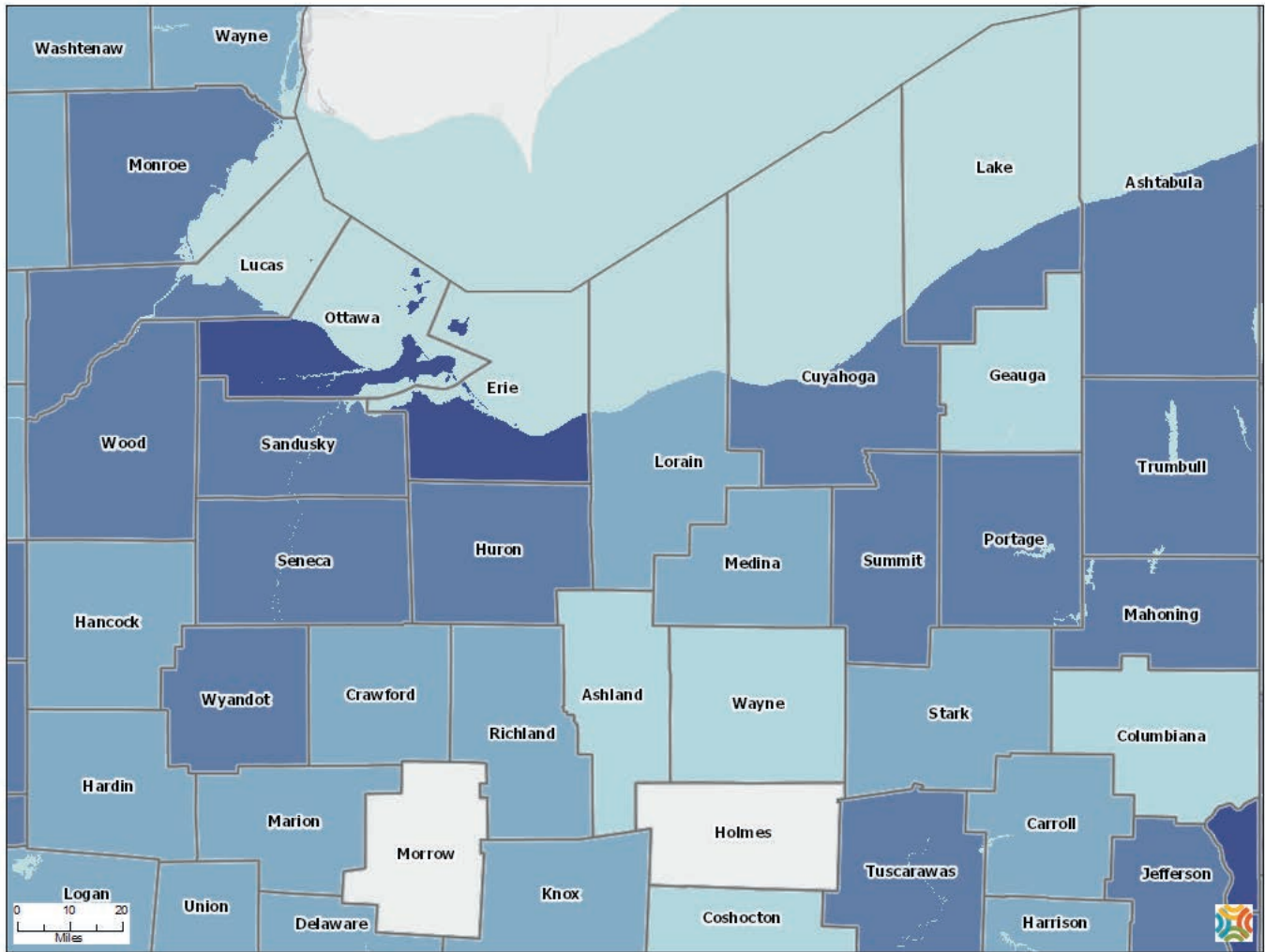


(Source: Nielsen, Nielsen SiteReports: 2014 as compiled by Community Commons)

Description of indicator: Census tract level average and aggregated total household expenditures and category expenditures were acquired from the 2011 Nielsen Consumer Buying Power (CBP) SiteReports. To generate acceptable map output in compliance with the Nielsen terms of use agreement, percent expenditures for each tract were sorted and ranked; quintiles were assigned to each tract based on national rank and symbolized within the map. Additional attributes include each tract's within-state rank and quintile.

*Alcohol expenditures included in this category are any beer, wine, and liquor purchased for consumption at home. Alcohol purchased at restaurants and bars is not included.

Bars and Drinking Establishments, Rate (Per 100,000 Pop.) by County, Census



Map Legend

Bars and Drinking Establishments, Rate (Per 100,000 Pop.) by County, CBP 2015

- Over 32.0
- 16.1 - 32.0
- 8.1 - 16.0
- Under 8.1
- No Bars or Drinking Establishments

Community Commons, 11/29/2017

Business Patterns (CBP), 2015

(Source: U.S. Census Bureau, County Business Patterns: 2015 as compiled by Community Commons)

Health Behaviors: Adult Drug Use

Key Findings

In 2015, 10% of Lorain County adults had used marijuana during the past 6 months. Eleven percent (11%) of adults had used medication not prescribed for them or took more than prescribed to feel good or high and/or more active or alert during the past 6 months.

Adult Drug Use

- Ten percent (10%) of Lorain County adults had used marijuana in the past 6 months, increasing to 20% of those with incomes less than \$25,000 and 29% of those under the age of 30.
- Two percent (2%) of Lorain County adults reported using other recreational drugs such as cocaine, synthetic marijuana/K2, heroin, LSD, inhalants, Ecstasy, bath salts, and methamphetamines.
- When asked about their frequency of marijuana and other recreational drug use in the past six months, 26% of Lorain County adults who used drugs did so almost every day, and 36% did so less than once a month.
- One-in-nine (11%) 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 14% of males and 17% of those with incomes less than \$25,000.
- When asked about their frequency of medication misuse in the past six months, 20% of Lorain County adults who used these drugs did so almost every day, and 21% did so less than once a month.
- Lorain County adults indicated they did the following with their unused prescription medication: took as prescribed (19%), threw it in the trash (18%), took it to the Medication Collection program (14%), kept it (14%), flushed it down the toilet (8%), disposed in 24/7 drop box (5%), kept it in a locked cabinet (2%), mailer to ship back to pharmacy (<1%), gave it away (<1%), sold it (<1%), and some other destruction method (1%).
- Two percent (2%) of Lorain County adults have used a program or service to help with drug problems for either themselves or a loved one. Reasons for not using such a program included: had not thought of it (2%), could not afford to go (1%), no program available (1%), fear (1%), did not want to get in trouble (1%), did not want to miss work (1%), did not know how to find a program (1%), could not get to the office or clinic (<1%), and other reasons (<1%). 94% of adults indicated they did not need a program or service to help with drug problems.

Adult Comparisons	Lorain County 2011	Lorain County 2015	Ohio 2016	U.S. 2016
Adults who used marijuana in the past 6 months	7%	10%	N/A	N/A
Adults who used heroin in the past 6 months	1%	<1%	N/A	N/A
Adults who misused medications in the past 6 months	11%	11%	N/A	N/A

N/A- Not available

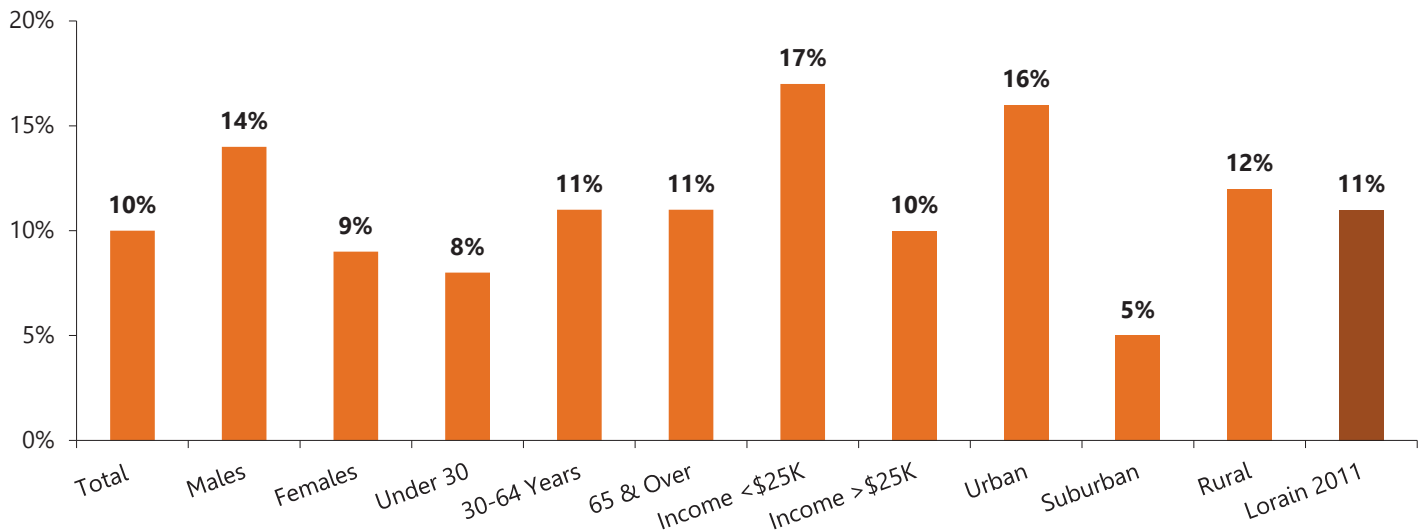
The following graphs show adult marijuana use and medication misuse in the past six months. Examples of how to interpret the information include: 10% of all Lorain County adults used marijuana in the past six months, 13% of males were current users, and 20% of adults with incomes less than \$25,000 were current users.

Lorain County Adult Marijuana Use in Past 6 Months



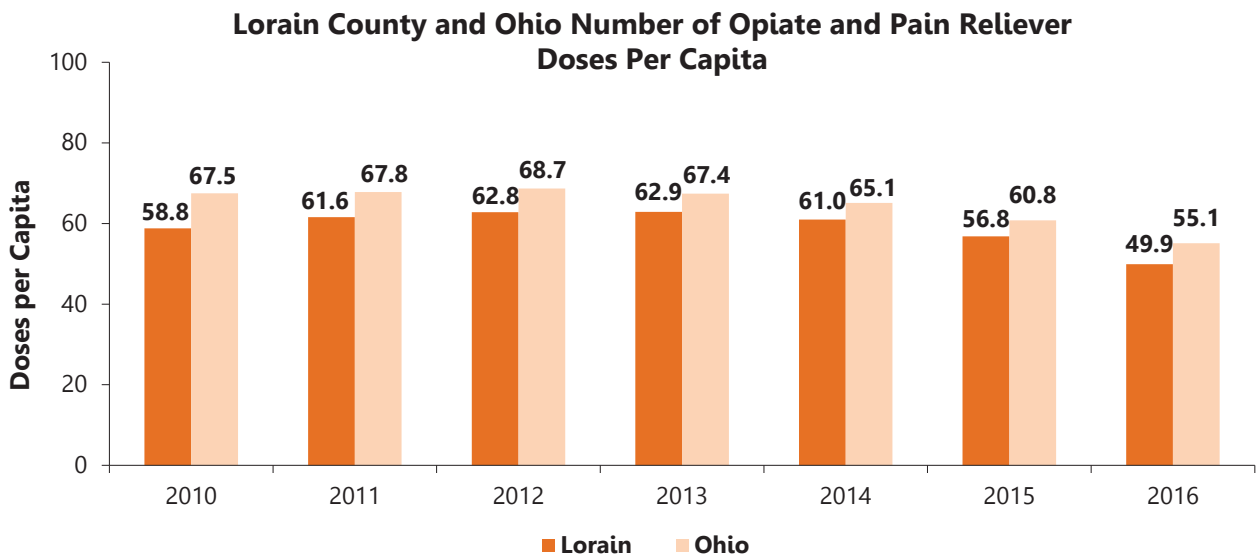
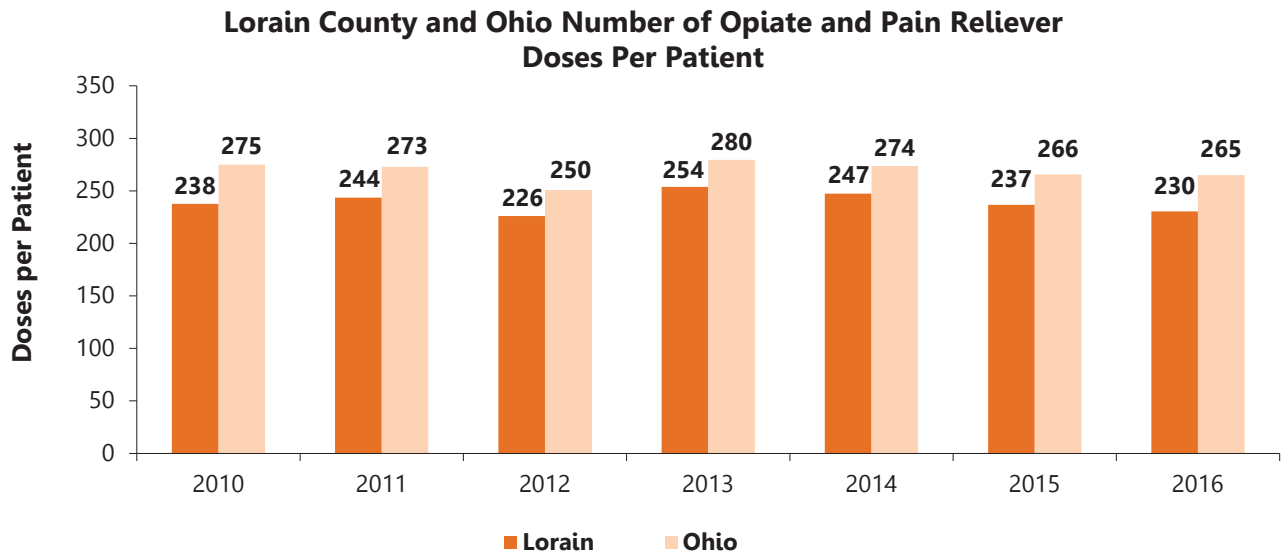
Note: Caution should be used when interpreting subgroup results as the margin of error for any subgroup is higher than that of the overall survey.

Lorain County Adult Medication Misuse in Past 6 Months



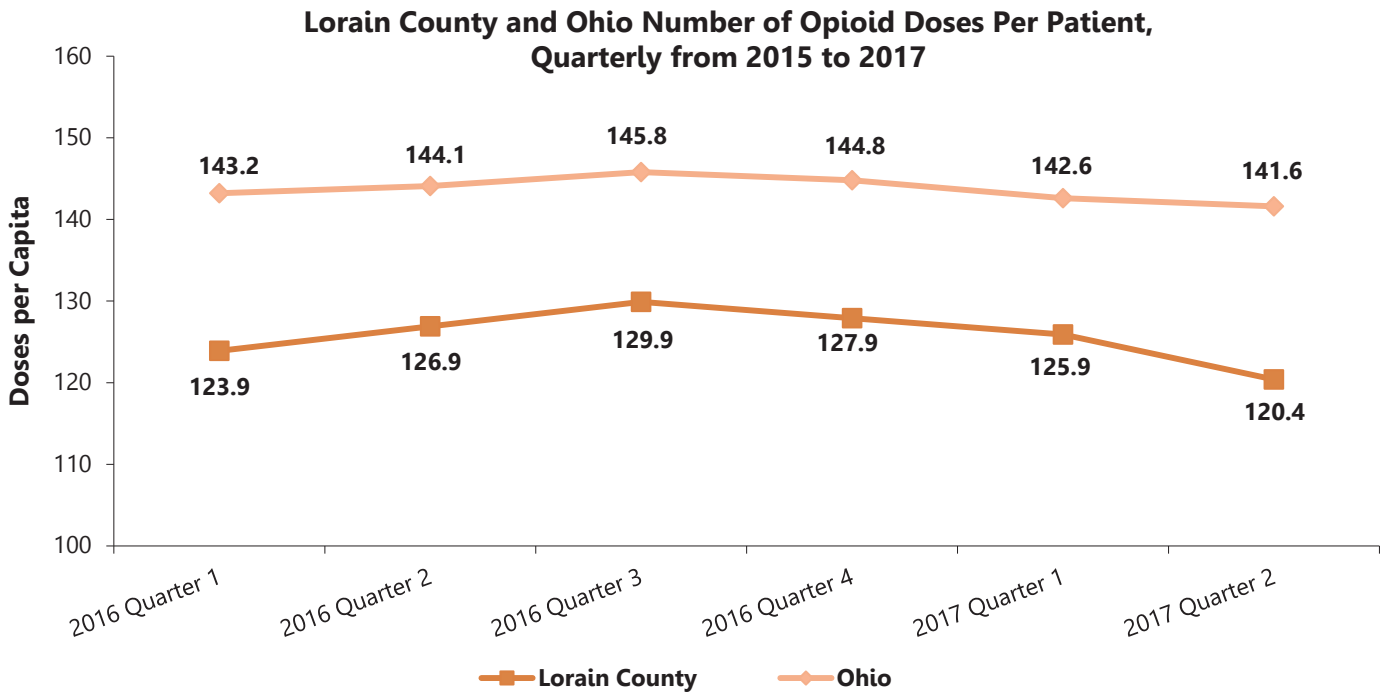
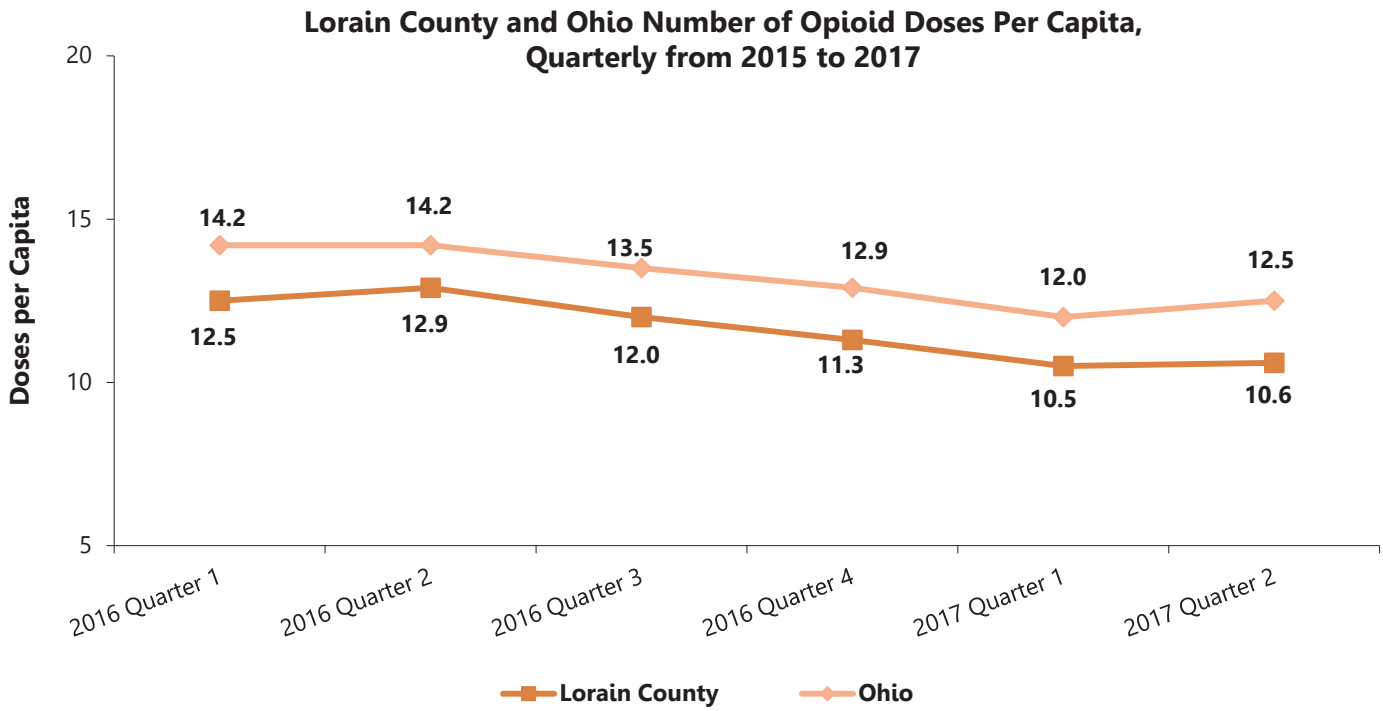
Note: Caution should be used when interpreting subgroup results as the margin of error for any subgroup is higher than that of the overall survey.

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



(Source for graphs: Ohio's Automated Rx Reporting System, 2010-2016, retrieved on 12/6/17)

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



(Source for graphs: Ohio's Automated Rx Reporting System, 2016-2017, retrieved on 12/6/17)

Ohio's New Limits on Prescription Opiates

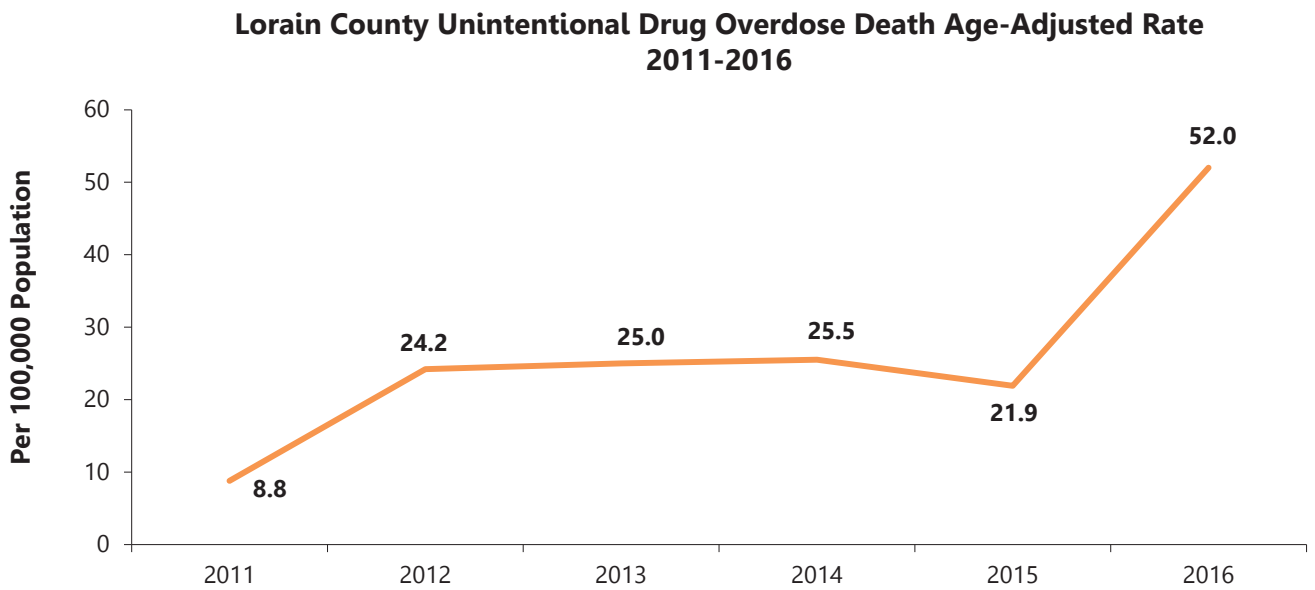
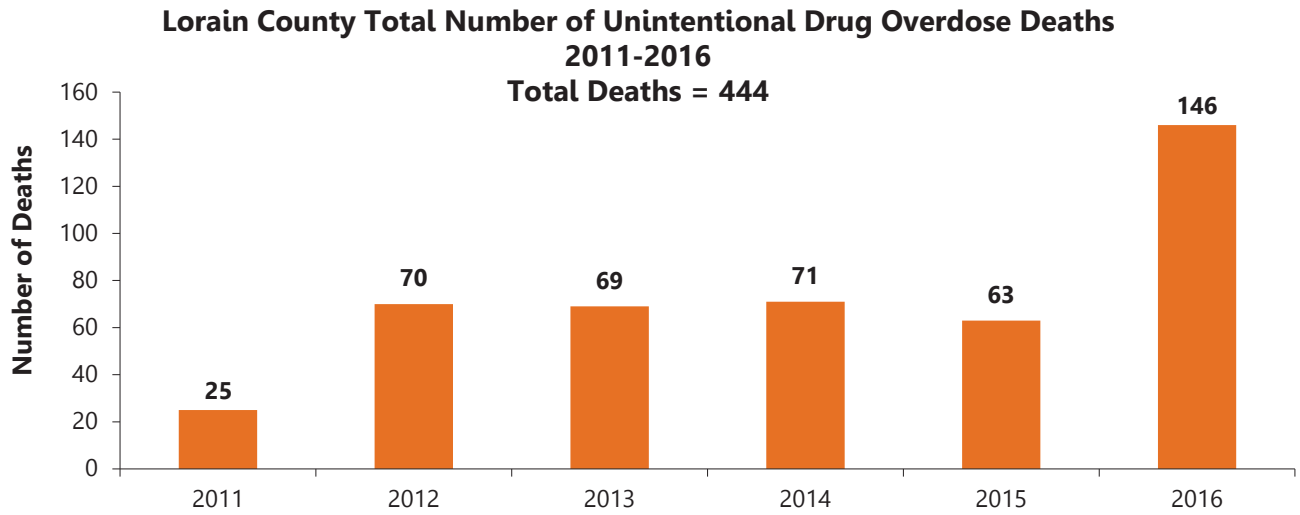
- The opioid epidemic is undeniably a major public health issue that Ohio has been addressing since 2012. Furthering steps to save lives, Ohio has updated its policies in limiting opiate prescriptions, especially acute pain. With the highlights of Ohio's new opiate prescribing limits below, Ohio hopes to reduce opiate doses by 109 million per year:
 - No more than seven days of opiates can be prescribed for adults; no more than five days of opiates can be prescribed for minors.
 - The total morphine equivalent dose (MED) of a prescription for acute pain cannot exceed an average of 30 MED per day.
 - Health care providers can prescribe opiates in excess of the new limits only if they provide a specific reason in the patient's medical record. Unless such a reason is given, a health care provider is prohibited from prescribing opiates that exceed Ohio's limits.
 - Prescribers will be required to include a diagnosis or procedure code on every controlled substance prescription, which will be entered into Ohio's prescription monitoring program, OARRS.
 - The new limits do not apply to opioids prescribed for cancer, palliative care, end-of-life/hospice care or medication-assisted treatment for addiction.
 - The new limits will be enacted through rules passed by the State Medical Board, Board of Pharmacy, Dental Board and Board of Nursing.
- Since 2012, Ohio has reduced opiate prescriptions by 20% yet, more needs to be done to reduce the possibility of opiate abuse to those who are prescribed.

(Source: Ohio Mental Health and Addiction Services; New Limits on Prescription Opiates Will Save Lives and Fight Addiction, updated March 31, 2017)

Ohio Automated Rx Reporting System (OARRS)

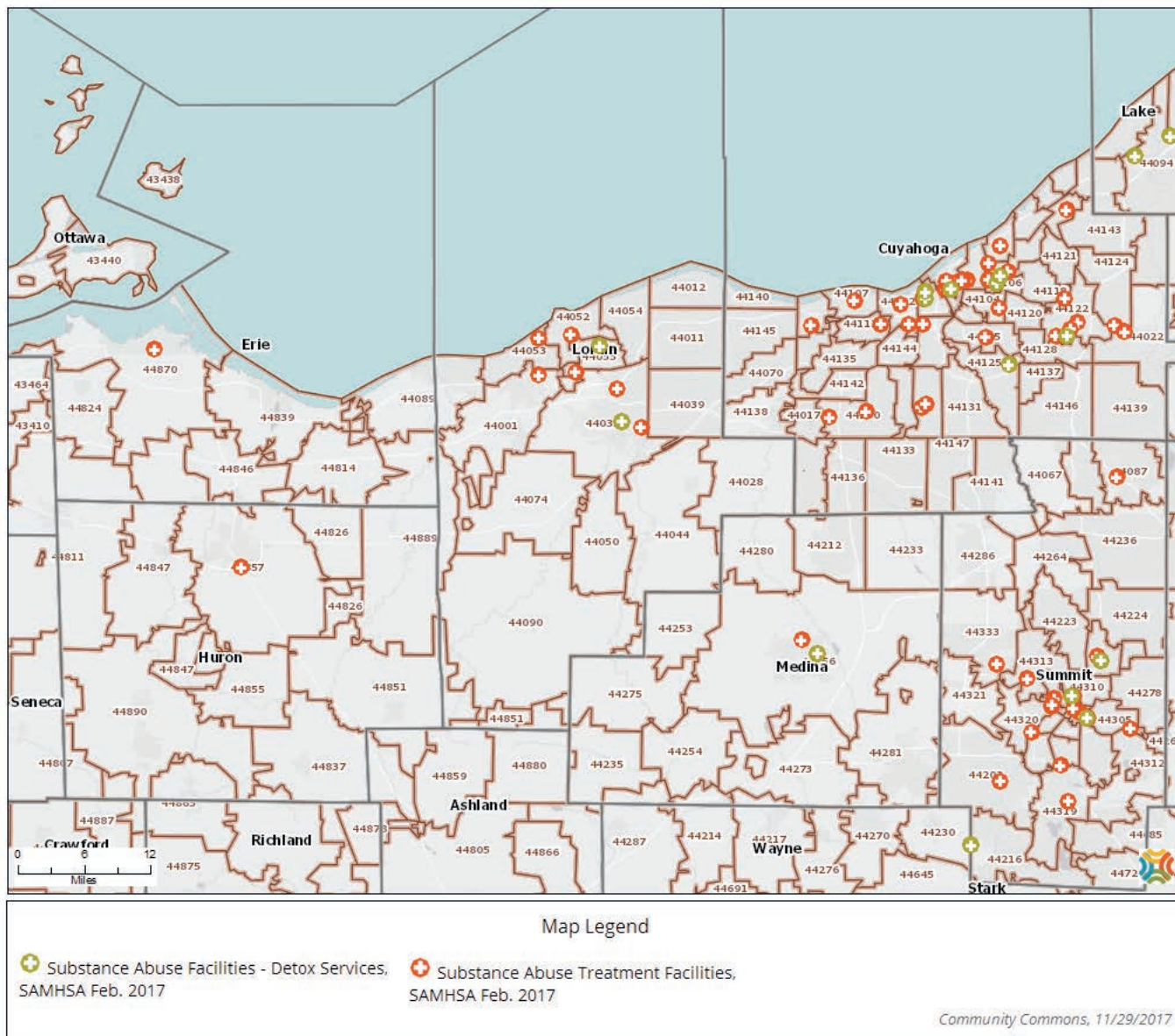
- OARRS has been collecting information from all Ohio-licensed pharmacies and Ohio personal licensed prescribers regarding outpatient prescriptions for controlled substance since 2006.
 - All data reported is updated every 24 hours and is maintained in a secure database.
- OARRS aims to be a reliable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

The following graphs show the total number of unintentional drug overdose deaths in Lorain County and the Lorain County and Ohio unintentional drug overdose age-adjusted rate (per 100,000 population).



(Source for graphs: Ohio Public Health Data Warehouse, updated 11/30/17)

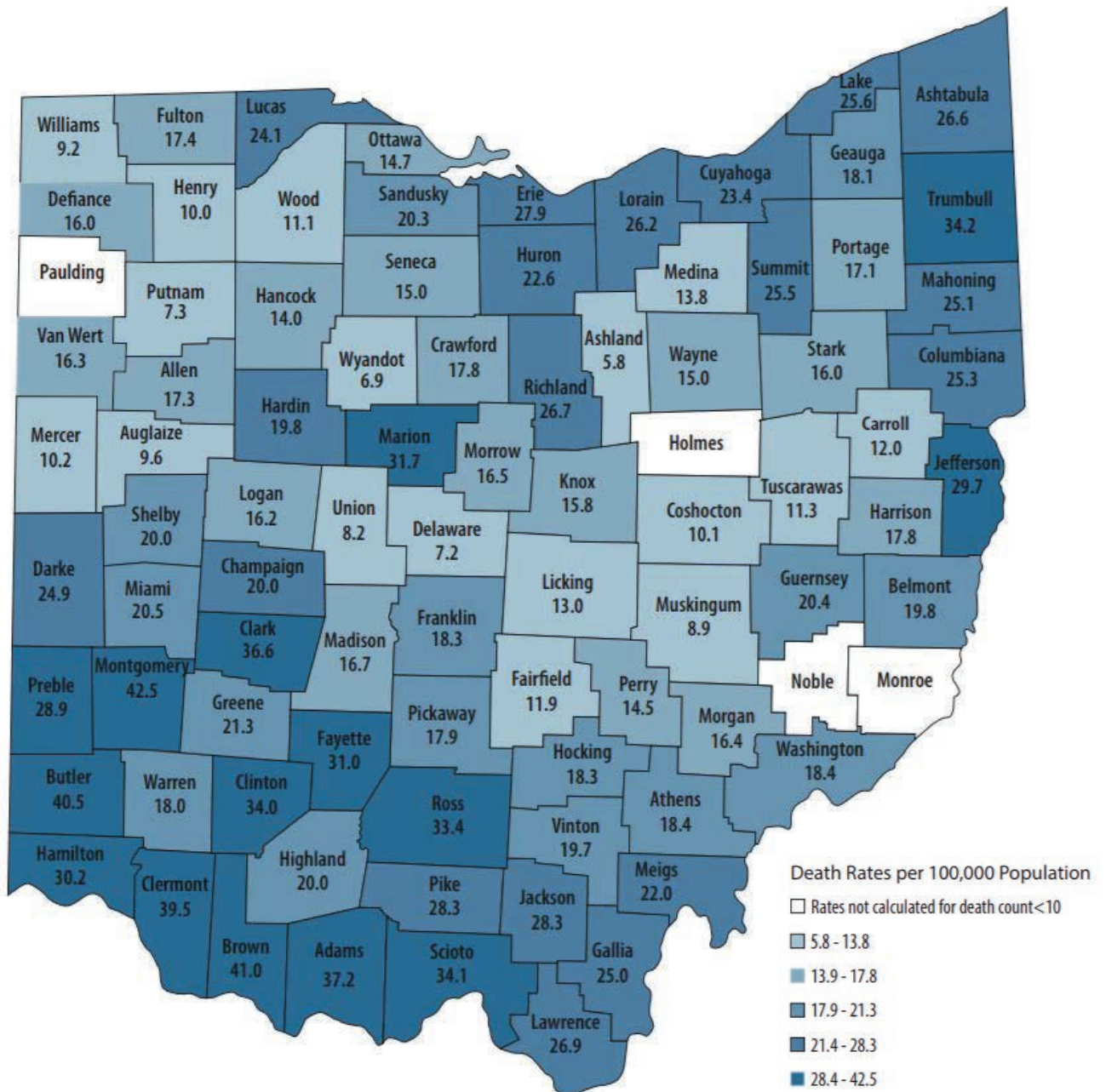
Substance Abuse Treatment Facilities and Detox Services, February 2017



(Source: U.S. Department of Health and Human Services, Substance Abuse and Mental Health Services Administration (SAMHSA): February 2017, as compiled by Community Commons)

Average Age-Adjusted Unintentional Drug Overdose Death Rate Per 100,000 Population, by County, 2011-2016

- The Ohio age-adjusted unintentional drug overdose death rate for 2011-2016 was 23.1 deaths per 100,000 population.
- Lorain County's age-adjusted unintentional drug overdose death rate for 2011-2016 was 26.2 deaths per 100,000 population.



Sources: "2016 Ohio Drug Overdoses Data: General Findings," Ohio Department of Health; Ohio Department of Health, Bureau of Vital Statistics; analysis conducted by ODH Violence and Injury Prevention Program; U.S. Census Bureau (Vintage 2016 population estimates)

Note: Includes Ohio residents who died due to unintentional drug poisoning (underlying cause of death ICD-10 codes X40-X44). Rate suppressed if < 10 total deaths for 2011-2016.

Health Behaviors: Adult Sexual Behavior

Key Findings

In 2015, 69% of Lorain County adults had sexual intercourse. Eight percent (8%) of adults had more than one partner. Nine percent (9%) of adults have been forced to have sexual intercourse when they did not want to, increasing to 16% of females.

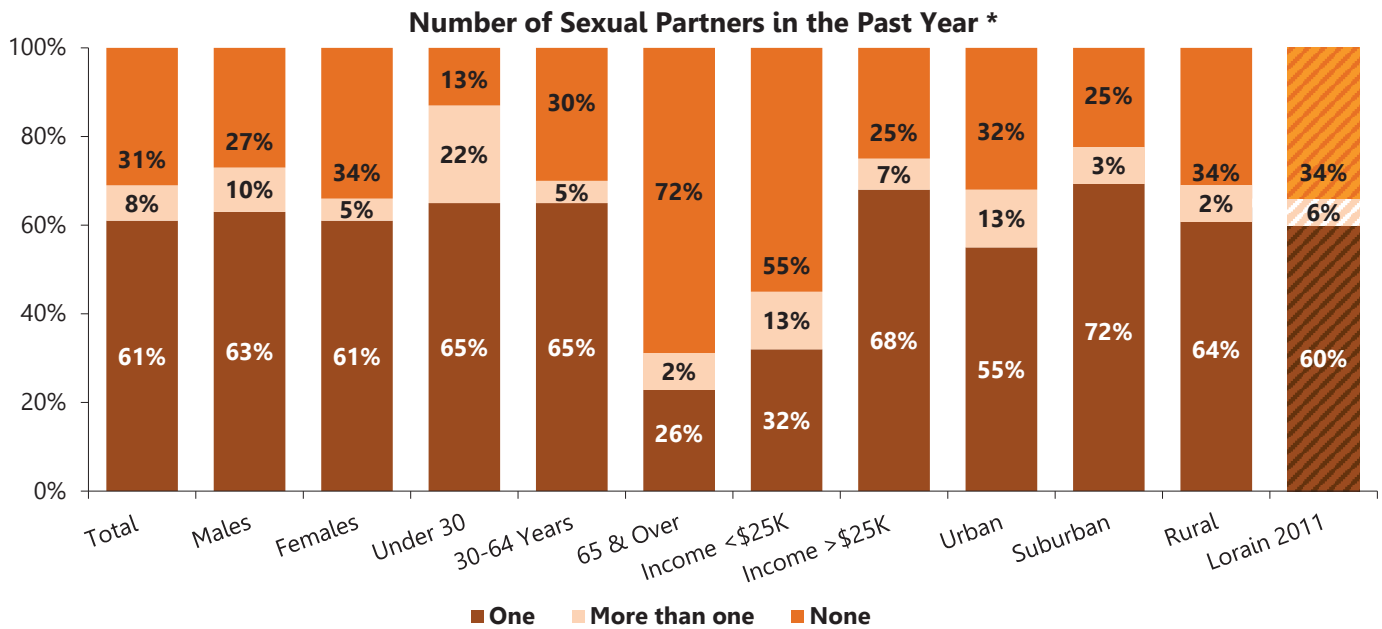
Adult Sexual Behavior

- Over two-thirds (69%) of Lorain County adults had sexual intercourse in the past year.
- Eight percent (8%) 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.
- Lorain County adults used the following methods of birth control: they or their partner were too old (16%), condoms (15%), birth control pill (15%), vasectomy (14%), tubes tied (12%), hysterectomy (9%), withdrawal (7%), ovaries or testicles removed (4%), abstinence (3%), contraceptive patch (2%), infertility (2%), IUD (2%), contraceptive implants (1%), rhythm method (1%), shots (1%), diaphragm (<1%), and emergency contraception (<1%).
- Twelve percent (12%) of Lorain County adults were not using any method of birth control.
- Lorain County adults did not use birth control for the following reasons:
 - They or their partner were too old (22%)
 - They or their partner had a hysterectomy/vasectomy/tubes tied (21%)
 - They wanted to get pregnant (10%)
 - They did not think they or their partner could get pregnant (6%)
 - They did not want to use birth control (6%)
 - They did not care if they or their partner got pregnant (4%)
 - No regular partner (3%)
 - They or their partner did not like birth control/fear of side effects (2%)
 - They had a problem getting birth control when they needed it (1%)
 - Their partner did not want to use birth control (1%)
 - They or their partner were currently pregnant (1%)
 - They or their partner had just had a baby (1%)
 - They or their partner were breastfeeding (1%)
 - They had a same-sex partner (1%)
 - Religious preferences (1%)
- The following situations applied to Lorain County adults in the past year: had anal sex without a condom (5%), tested for an STD (4%), had sex with someone they did not know (2%), treated for an STD (1%), tested positive for Hepatitis C (1%), tested positive for HIV (<1%), and used intravenous drugs (<1%).
- Nine percent (9%) of adults have been forced to have sexual intercourse when they did not want to, increasing to 16% of females and 20% of those with incomes less than \$25,000.
- Nearly one-third (29%) of Lorain County adults have been tested for HIV. They reported the following reasons: to find out if they were infected (21%), routine check-up (18%), pregnancy (11%), hospitalization or surgical procedure (9%), life insurance application (6%), blood donation process (6%), military induction or service (3%), occupational exposure (3%), employment (2%), doctor referral (2%), marriage licensed application (1%), health insurance application (<1%), sex partner referral (<1%), illness (<1%), and other reasons (2%).

Adult Comparisons	Lorain County 2011	Lorain County 2015	Ohio 2016	U.S. 2016
Had more than one sexual partner in past year	6%	8%	N/A	N/A

N/A – Not available

The following graph shows the number of sexual partners of Lorain County adults. Examples of how to interpret the information in the graph include: 61% of all Lorain County adults had one sexual partner in the last 12 months and 8% had more than one.



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

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

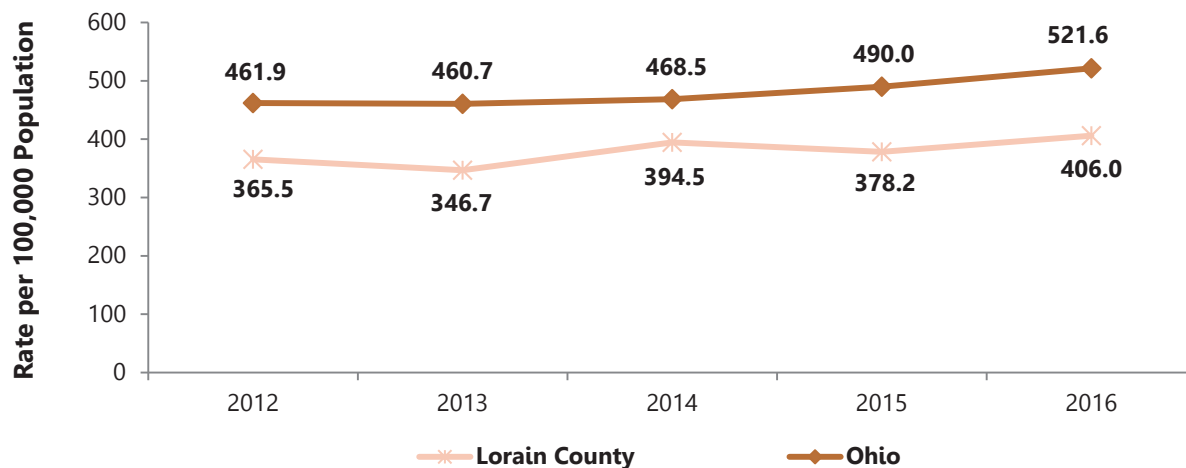
Understanding Sexual Violence

- Sexual violence refers to any sexual activity where consent is not obtained or freely given.
- Anyone can experience or perpetrate sexual violence.
 - Most victims of sexual violence are female
 - Perpetrators are usually someone known to the victim
- There are many types of sexual violence including unwanted touching, unwanted sexual penetration, sexual harassment, and threats.
- Sexual violence is a significant problem in the United States, even though many cases are not reported.
 - 7.3% of high school students reported having been forced to have sex
 - An estimated 20-25% of college women in the U.S. were victims of attempted or completed rape during their college career
 - About 1 in 5 women and 1 in 59 men in the U.S. have been raped at some time in their lives
- Sexual violence can negatively impact health in many ways including chronic pain and STD's and is also linked to negative health behaviors including tobacco, drug, and alcohol abuse.
- The ultimate goal is to stop sexual violence before it begins. Many activities are needed to accomplish this goal including:
 - Engaging middle and high school students in skill-building activities that address healthy sexuality
 - Helping parents identify and address violent attitudes and model healthy relationships
 - Engaging youth and adults as positive bystanders to speak up against sexism and violence supportive behaviors and intervene when they see someone at risk
 - Create and enforce policies at work, school, and other places that address sexual harassment
 - Implement evidence-based prevention strategies in schools and communities

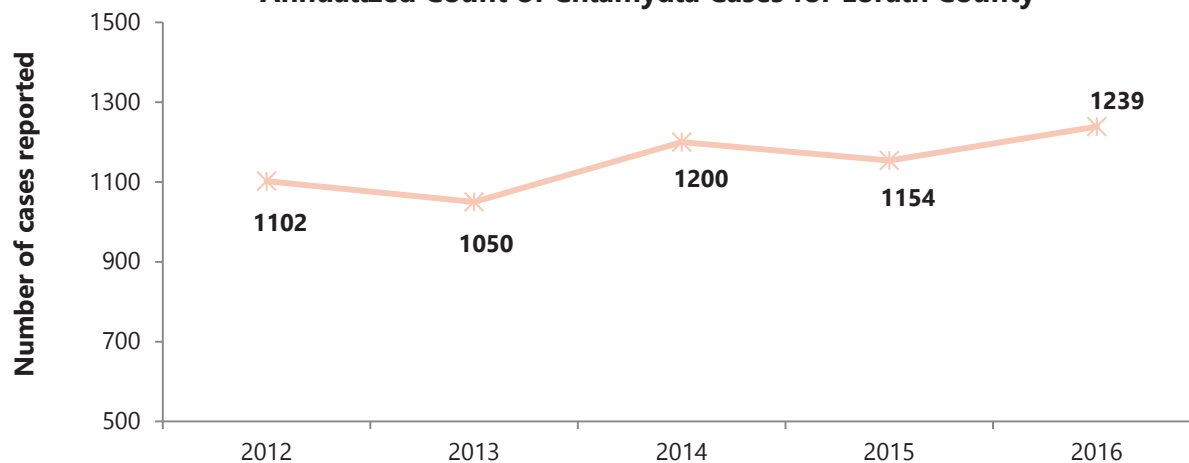
The following graphs show the Lorain County chlamydia disease rates per 100,000 population and the number of chlamydia disease cases. The graphs show:

- Lorain County chlamydia rates fluctuated from 2012-2016.
- The number of chlamydia cases in Lorain County increased from 2015-2016.

Chlamydia Annualized Disease Rates for Lorain County and Ohio



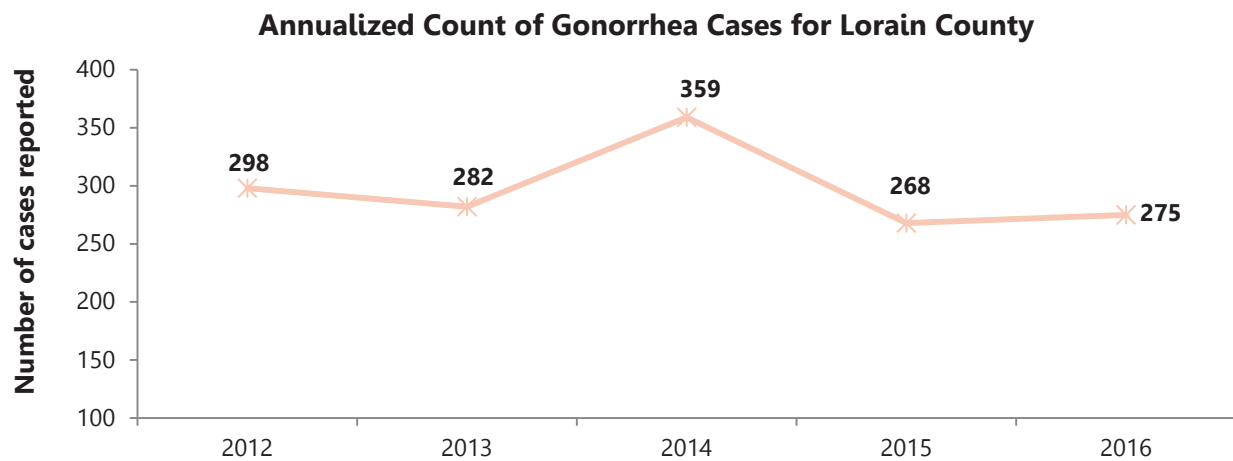
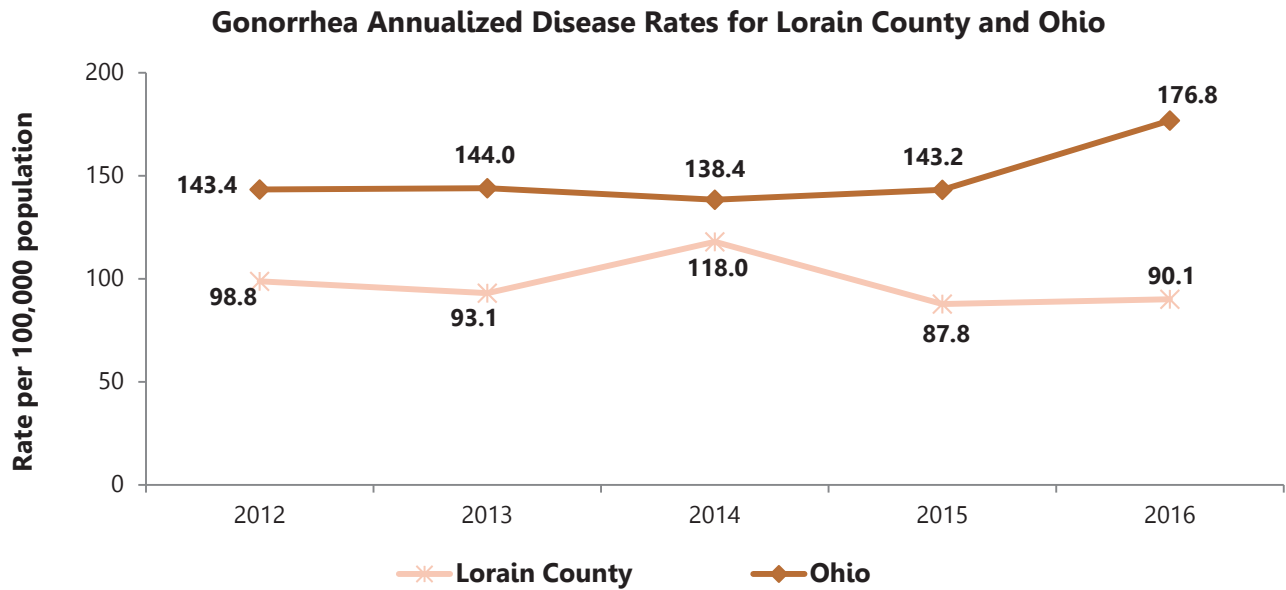
Annualized Count of Chlamydia Cases for Lorain County



(Source for graphs: ODH, STD Surveillance, data reported through 5/7/17, updated on 11/30/17)

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

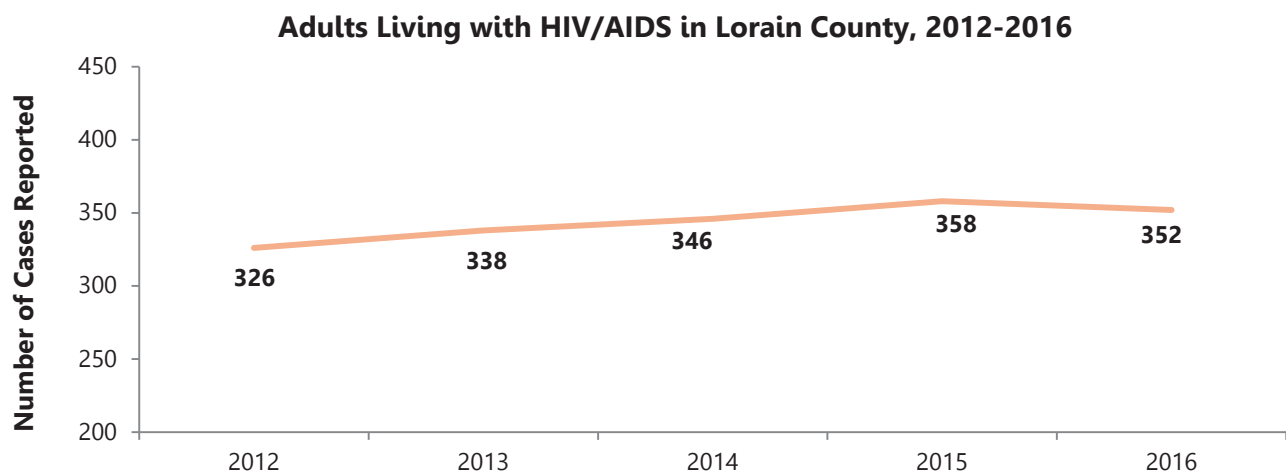
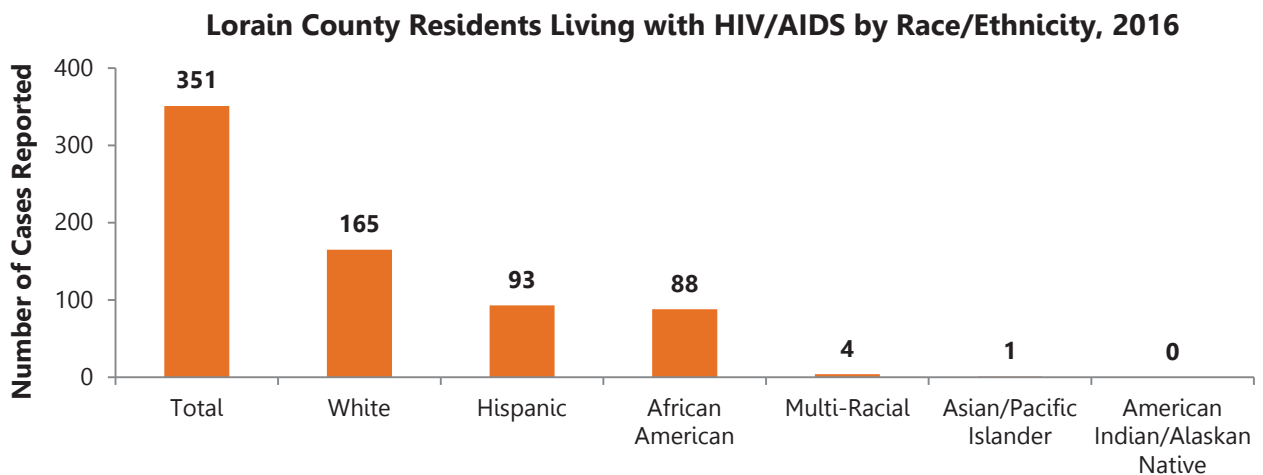
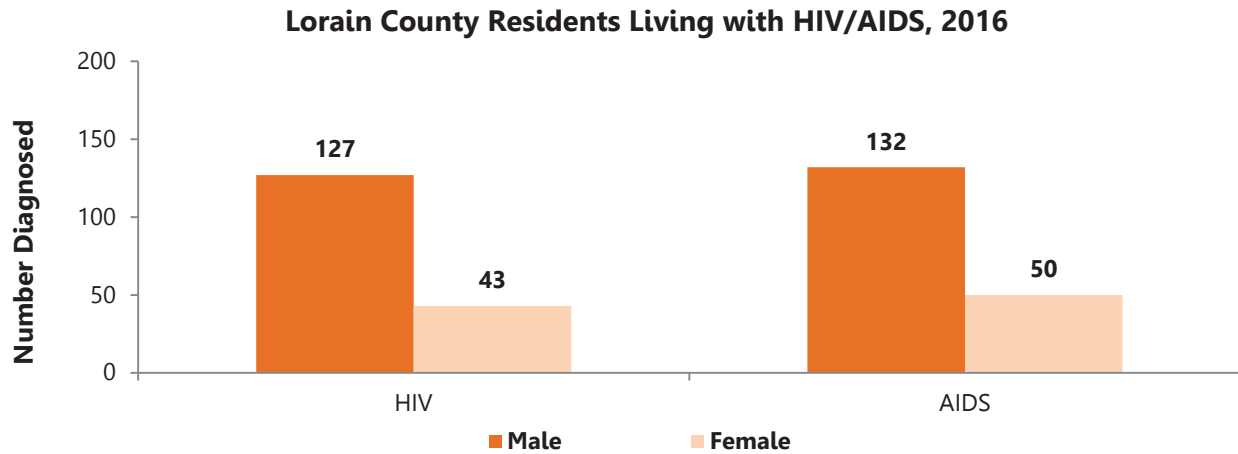
- The Lorain County gonorrhea rate fluctuated from 2012-2016.
- The number of gonorrhea cases in Lorain County slightly increased from 2015-2016.



(Source for graphs: ODH, STD Surveillance, data reported through 5-7-17, updated on 11/30/17)

The following graphs show the number of Lorain County residents living with HIV/AIDS by gender, race/ethnicity and year. The graphs show:

- In 2016, the number of Lorain County males living with HIV/AIDS was higher than Lorain County females.
- From 2012-2015, the number of people living with HIV/AIDS in Lorain County increased significantly.



(Source for graphs: ODH, HIV Infections Annual Surveillance Statistics, updated 9/12/17)

Health Behaviors: Adult Mental Health

Key Findings

In 2015, 3% of Lorain County adults considered attempting suicide. One-fifth (20%) of adults had a period of two or more weeks when they felt sad, blue or depressed.

Adult Mental Health

- In the past year, 20% of Lorain County adults had a period of two or more weeks when they felt sad, blue or depressed.
- Lorain County adults also had a period of two or more weeks when they did not get enough rest or sleep (36%), felt worried, tense or anxious (28%), had high stress (28%), felt very healthy and full of energy (10%), stopped doing some usual activities (9%), and had an unusual increase or loss of appetite (8%).
- Three percent (3%) of Lorain County adults considered attempting suicide in the past year.
- One percent (1%) of adults reported attempting suicide in the past year.
- Lorain County adults indicated the following caused them anxiety, stress or depression: financial stress (40%), job stress (38%), poverty/no money (18%), marital/dating relationship (18%), other stress at home (16%), death of close family member or friend (15%), sick family member (11%), fighting at home (11%), caring for parent (7%), family member with mental illness (7%), unemployment (6%), family member with substance abuse problem (5%), caring for someone with special needs (4%), divorce/separation (3%), raising/caring for grandchildren (3%), not having a place to live (3%), fighting with friends (3%), alcohol or drug use at home (2%), family member in the military (2%), not feeling safe at home (2%), not feeling safe in the community (2%), and not having enough to eat (2%).
- Lorain County adults dealt with their stress in the following ways: talking to someone they trust (41%), listening to music (35%), exercising (32%), sleeping (32%), eating more or less than normal (31%), working on a hobby (25%), working (22%), drinking alcohol (16%), smoking tobacco (12%), taking it out on others (9%), meditating (9%), using prescription drugs (4%), using herbs or home remedies (2%), gambling (2%), using illegal drugs (1%), and others ways (13%).
- Eleven percent (11%) of Lorain County adults used a program or service for themselves or a loved one to help with depression, anxiety, or emotional problems. Reasons for not using such a program included: had not thought of it (9%), concerned what others might think (4%), could not afford to go (3%), other priorities (2%), did not know how to find a program (2%), fear (2%), co-pay/deductible too high (1%), transportation (1%), could not get to the office (1%), and other reasons (3%). 74% of adults indicated they did not need such a program.

Mental Health in the U.S.

- In 2016, 3.6% of adults aged 18 and over experienced serious psychological distress in the past 30 days.
- There were 65.9 million visits to physicians' offices with mental disorders as the primary diagnosis in 2014.
- There were 5.0 million visits to emergency departments with mental disorders as the primary diagnosis in 2014.
- In 2014, there were 42,773 suicide deaths.

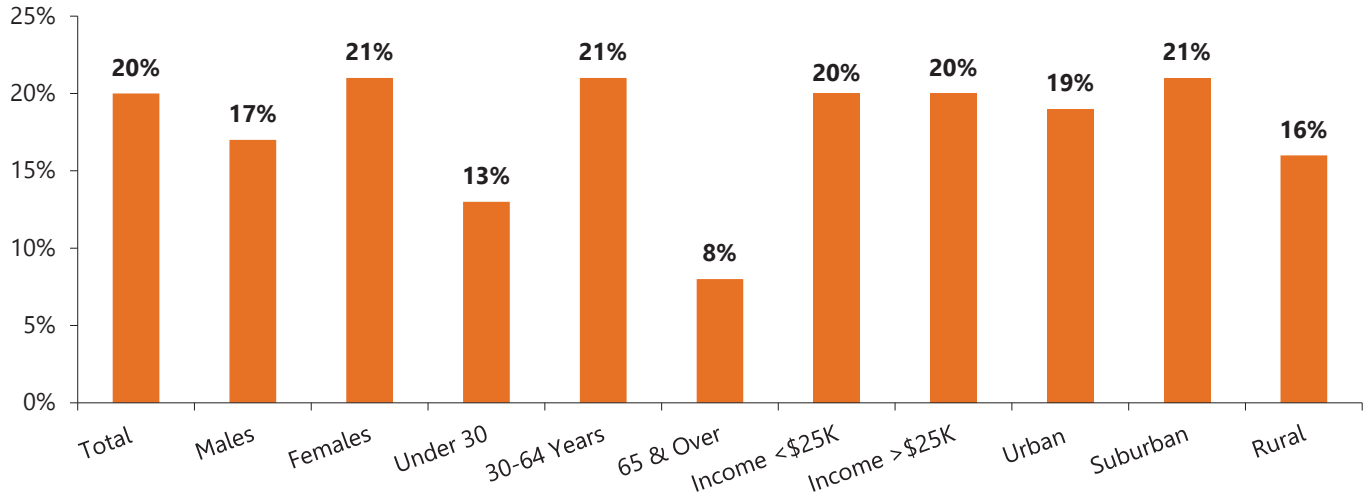
(Source: CDC, National Center for Health Statistics, Mental Health, Depression, last updated 5/3/2017)

Adult Comparisons	Lorain County 2011	Lorain County 2015	Ohio 2016	U.S. 2016
Considered attempting suicide in the past year	4%	3%	N/A	N/A
Two or more weeks in a row felt sad, blue or depressed	<1%	1%	N/A	N/A

N/A- Not available

The following graph show Lorain County adults who felt sad or depressed for two or more weeks in a row in the past year. Examples of how to interpret the information include: 20% of all Lorain County adults felt sad or depressed for two or more weeks in a row, including 17% of males, and 21% of females.

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

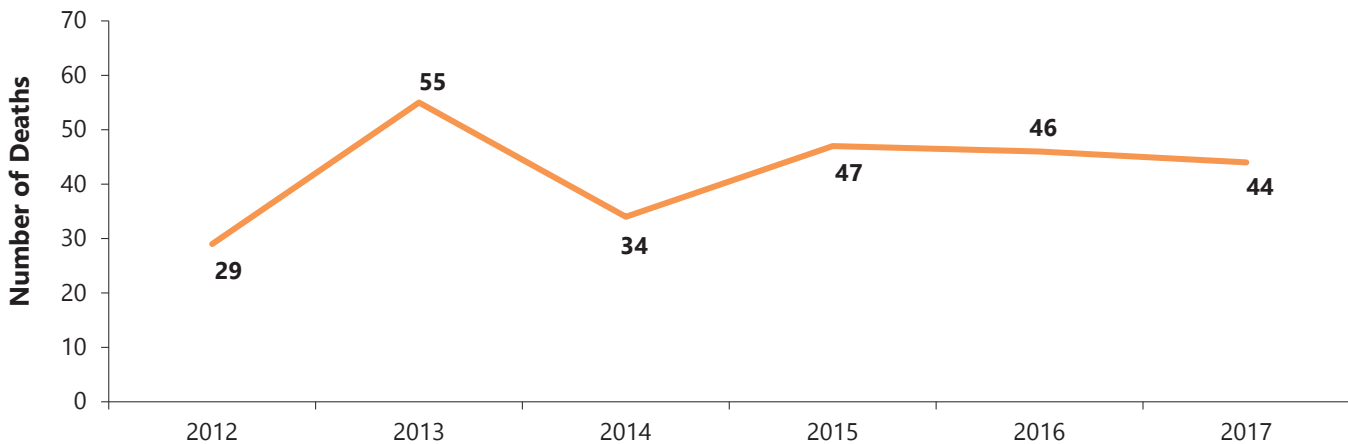


Note: Caution should be used when interpreting subgroup results as the margin of error for any subgroup is higher than that of the overall survey.

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

- From 2012 to 2017, there was an average of 43 suicides per year in Lorain County.

**Lorain County Number of Suicide Deaths By Year
2012-2017***
Total Deaths = 255

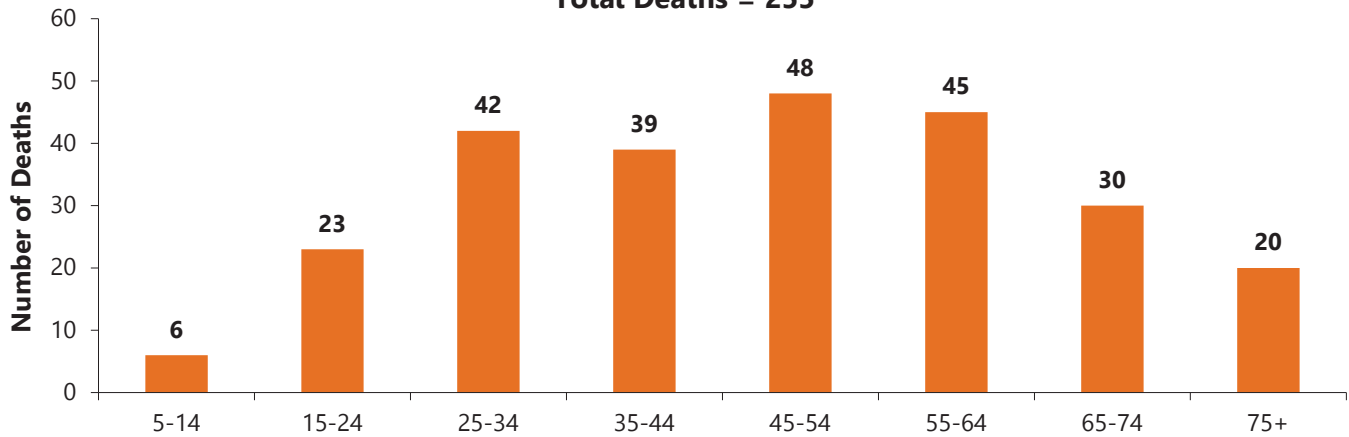


* Data for 2017 is partial and incomplete, and should be used with caution
(Source: ODH, Ohio Public Health Data Warehouse, Mortality, Leading Causes of Death, updated 11/30/17)

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

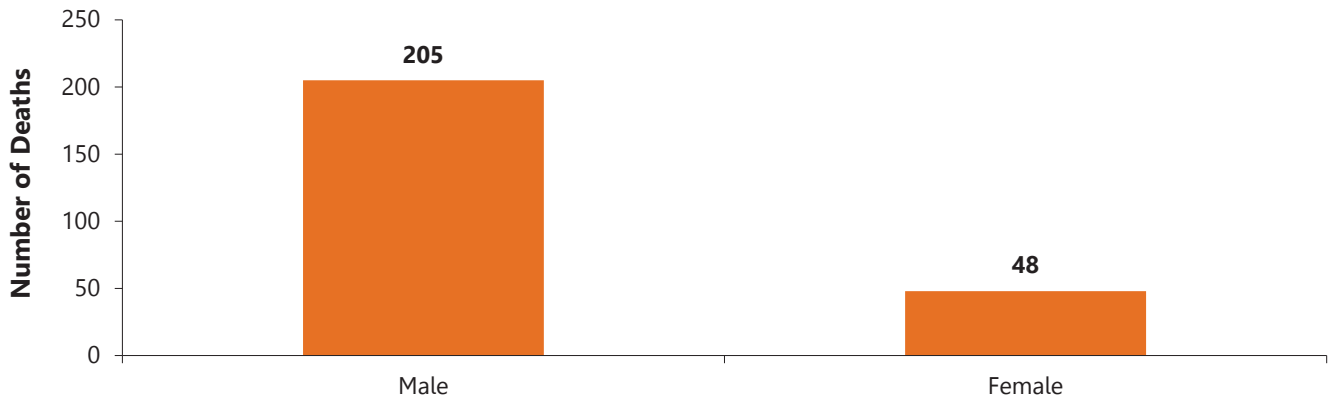
- Thirty-seven percent (37%) of all suicide deaths occurred in those ages 45-64 years old from 2012-2017 in Lorain County.
- From 2012-2017, the number of male suicide deaths in Lorain County was nearly four times higher than the female.

**Lorain County Number of Suicide Deaths By Age Group
2012-2017***
Total Deaths = 255**



* Data for 2017 are partial and incomplete, and should be used with caution
 **The age for two of the suicide deaths from 2012-2017 was unknown

**Lorain County Number of Suicide Deaths By Gender
2012-2017***
Total Deaths = 255**



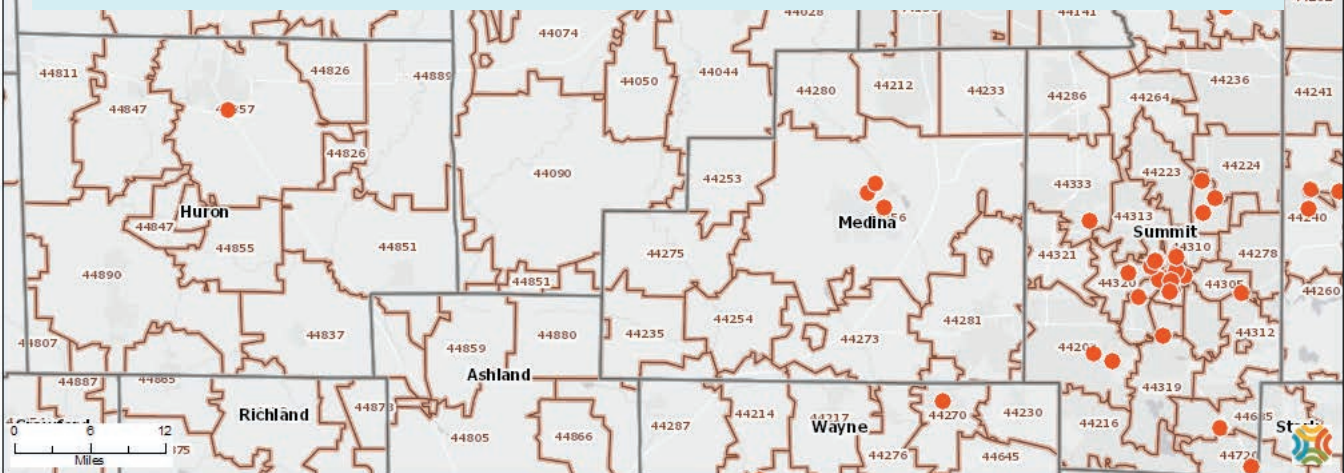
* Data for 2017 are partial and incomplete, and should be used with caution
 **The gender for two of the suicide deaths from 2012-2017 was unknown

(Source for graphs: ODH, Ohio Public Health Data Warehouse, Mortality, Leading Causes of Death, updated 11/30/17)

Mental Health Treatment Facilities, SAMHSA, February 2017

National Suicide Statistics

- 44,193 people in the U.S. died from suicide, and 1,104,825 people attempted suicide in the 2015.
- An average of one person killed themselves every 11.9 minutes
- Suicide is the 10th ranking cause of death in the U.S.
- For every female death by suicide, there are 3.3 male deaths.
- In 2015, there were 1,650 suicide deaths in Ohio.
- The leading suicide methods included:
 - Firearm suicides (49.8%)
 - Suffocation/Hanging (26.8%)
 - Poisoning (15.4%)
 - Cutting/Piercing (1.7%)
 - Drowning (1.2%)



Map Legend

- Mental Health Treatment Facilities, SAMHSA Feb. 2017

Community Commons, 11/29/2017

(Source: U.S. Department of Health and Human Services, Substance Abuse and Mental Health Services Administration (SAMHSA): February 2017, as compiled by Community Commons)

Chronic Disease: Cardiovascular Health

Key Findings

In 2015, 3% of adults had survived a heart attack and 4% had survived a stroke at some time in their life. More than one-third (37%) of Lorain County adults were obese, 36% had high blood pressure, 33% had high blood cholesterol, and 22% were current smokers, four known risk factors for heart disease and stroke.

Heart Disease and Stroke

- In 2015, 3% of Lorain County adults reported they had survived a heart attack or myocardial infarction, increasing to 13% of those over the age of 65.
- Five percent (5%) of Ohio and 4% of U.S. adults reported they had a heart attack or myocardial infarction in 2016 (Source: 2016 BRFSS).
- Four percent (4%) of Lorain County adults reported they had survived a stroke, increasing to 6% of those over the age of 65.
- Four percent (4%) of Ohio and 3% of U.S. adults reported having had a stroke in 2016 (Source: 2016 BRFSS).
- Six percent (6%) of adults reported they had angina or coronary heart disease, increasing to 15% of those over the age of 65.
- Five percent (5%) of Ohio and 4% of U.S. adults reported having had angina or coronary heart disease in 2016 (Source: 2016 BRFSS).
- One percent (1%) of adults reported they had congestive heart failure, increasing to 3% of those over the age of 65.

High Blood Pressure (Hypertension)

- More than one-third (36%) of adults had been diagnosed with high blood pressure. The 2015 BRFSS reports hypertension prevalence rates of 34% for Ohio and 31% for the U.S.
- Seven percent (7%) of adults were told they were pre-hypertensive/borderline high.
- Eighty-one percent (81%) of adults had their blood pressure checked within the past year.
- Lorain County adults diagnosed with high blood pressure were more likely to:
 - Have rated their overall health as fair or poor (69%)
 - Have been age 65 years or older (65%)
 - Have been classified as obese by Body Mass Index-BMI (40%)

Lorain County Leading Causes of Death 2014-2016

Total Deaths: 9,108

- Cancer (22% of all deaths)
- Heart Disease (21%)
- Chronic Lower Respiratory Diseases (7%)
- Accidents, Unintentional Injury (6%)
- Alzheimer's Disease (4%)

Ohio Leading Causes of Death 2014-2016

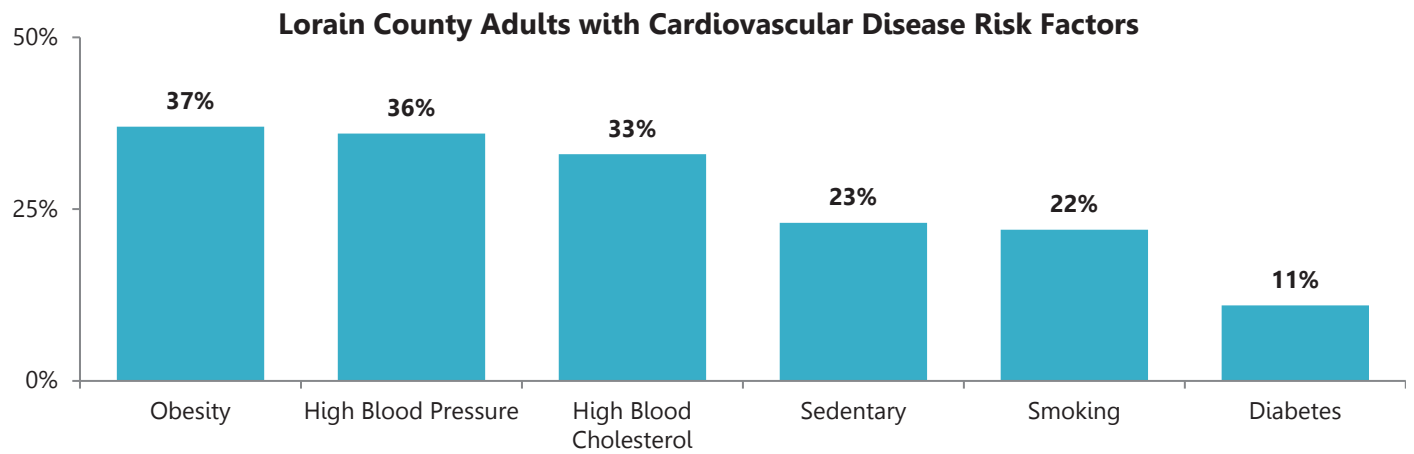
Total Deaths: 352,105

- Heart Disease (23% of all deaths)
- Cancers (22%)
- Chronic Lower Respiratory Diseases (6%)
- Accidents, Unintentional Injuries (6%)
- Stroke (5%)

High Blood Cholesterol

- One-third (33%) of adults had been diagnosed with high blood cholesterol. The 2015 BRFSS reported that 37% of Ohio and 36% of U.S. adults have been told they have high blood cholesterol.
- More than four-fifths (82%) of adults had their blood cholesterol checked within the past 5 years. The 2015 BRFSS reported 78% of Ohio and U.S. adults had their blood cholesterol checked within the past 5 years.
- Lorain County adults with high blood cholesterol were more likely to:
 - Have been age 65 years or older (58%)
 - Have rated their overall health as fair or poor (57%)
 - Have been classified as obese by Body Mass Index-BMI (39%)

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



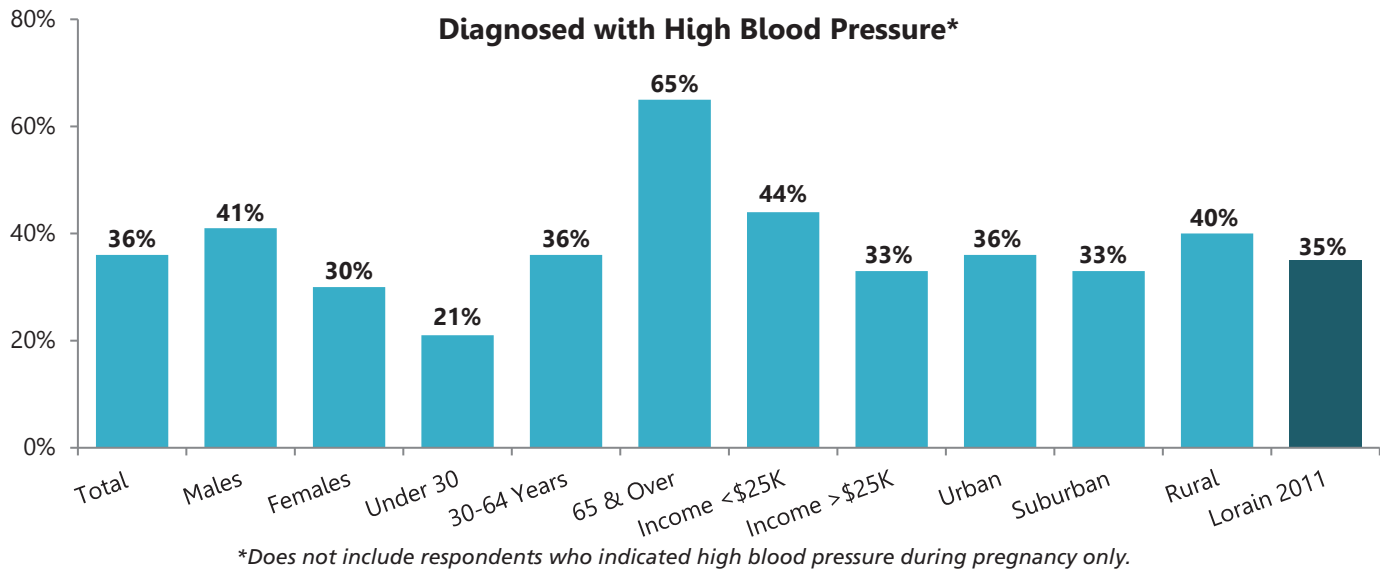
(Source: 2015 Lorain County Health Assessment)

Adult Comparisons	Lorain County 2011	Lorain County 2015	Ohio 2016	U.S. 2016
Had angina or coronary heart disease	6%	6%	5%	4%
Had a heart attack	6%	3%	5%	4%
Had a stroke	2%	4%	4%	3%
Had high blood pressure	35%	36%	34%*	31%*
Had high blood cholesterol	36%	33%	37%*	36%*
Had blood cholesterol checked within the past 5 years	N/A	82%	78%*	78%*

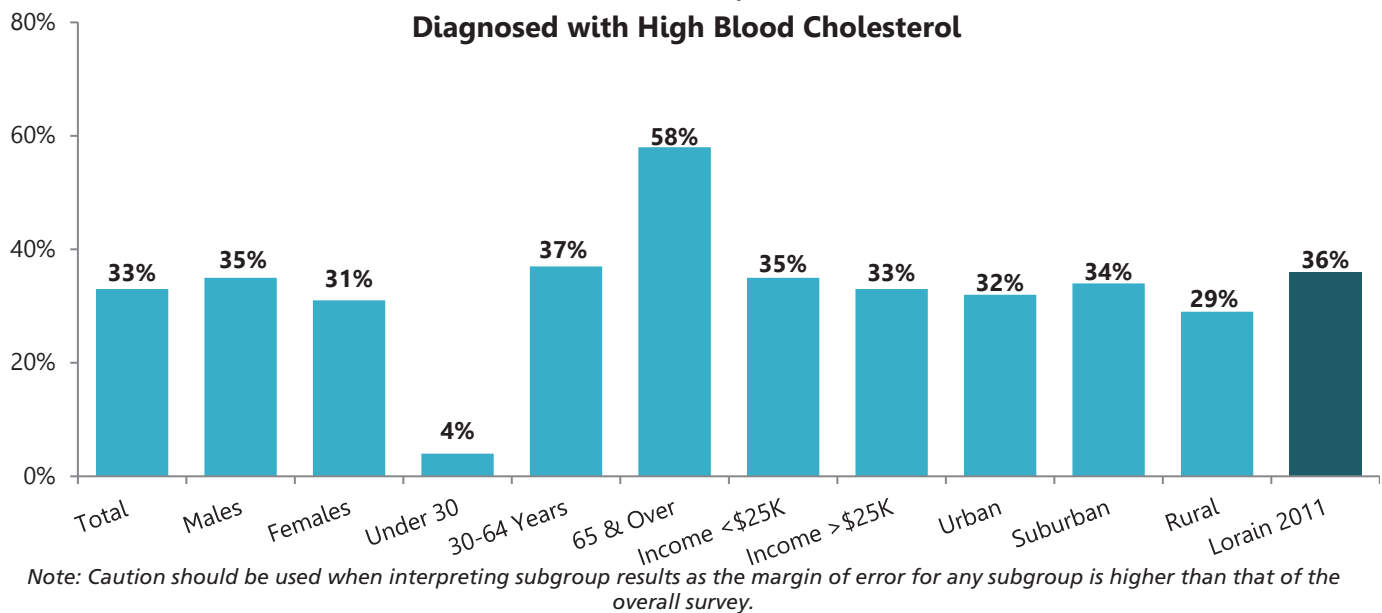
N/A-not available

*2015 BRFSS

The following graphs show the percent of Lorain County adults who had been diagnosed with high blood pressure and high blood cholesterol. Examples of how to interpret the information on the first graph include: 36% of all Lorain County adults had been diagnosed with high blood pressure, including 41% of all Lorain County males and 65% of those 65 years and older.



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



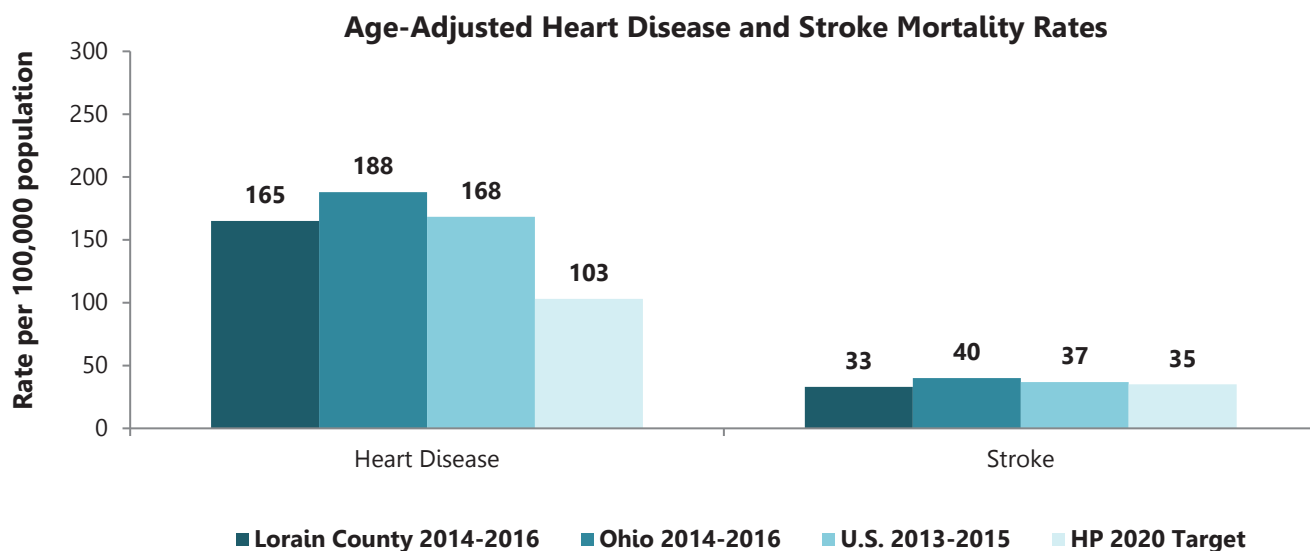
Lorain County Adult Health Screening Results*

General Screening Results	Total
Diagnosed with High Blood Cholesterol	43%
Diagnosed with High Blood Pressure	33%
Diagnosed with Diabetes	10%
Survived a Heart Attack	3%
Survived a Stroke	3%

**Note: Percentages based on all Lorain County adults surveyed*

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

- When age differences are accounted for, the statistics indicate that from 2014-2016 the Lorain County heart disease mortality rate was lower than the Ohio and U.S. rate. However, the Lorain County heart disease rate was significantly higher than the Healthy People 2020 target objective.
- The Lorain County age-adjusted stroke mortality rate from 2014-2016 was lower than the state, the U.S., and the Healthy People 2020 target objective.



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

**Healthy People 2020 Objectives
Heart Disease and Stroke**

Objective	Lorain Survey Population Baseline	2016 U.S. Baseline*	Healthy People 2020 Target
HDS-5: Reduce proportion of adults with hypertension	36% (2015)	31% Adults age 18 and up	27%
HDS-6: Increase proportion of adults who had their blood cholesterol checked within the preceding 5 years	82% (2015)	78% Adults age 18 & up	82%
HDS-7: Decrease proportion of adults with high total blood cholesterol (TBC)	33% (2015)	36% Adults age 20+ with TBC>240 mg/dl	14%

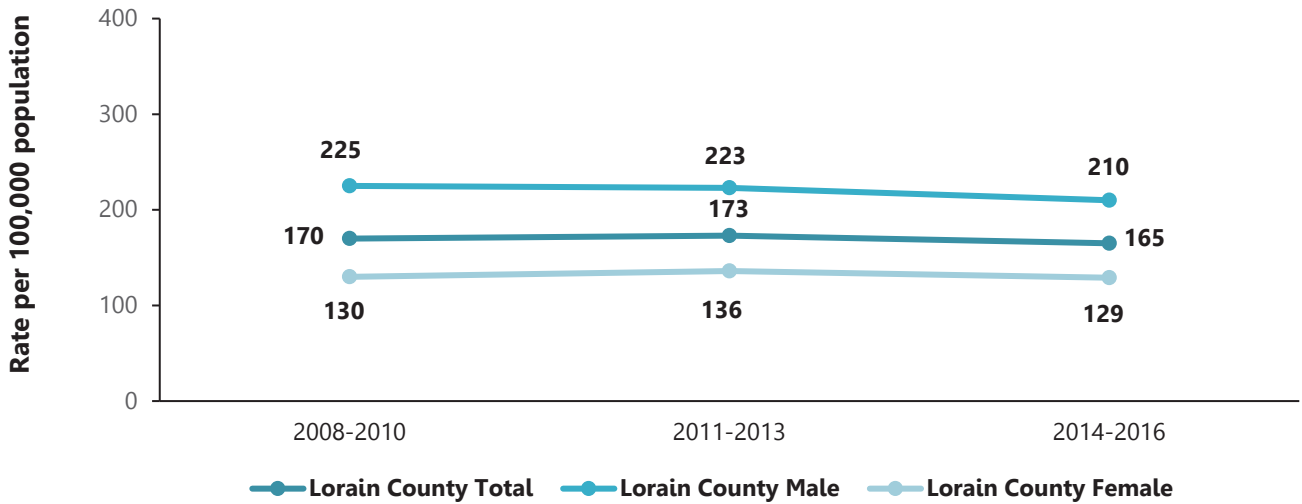
Note: All U.S. figures age-adjusted to 2000 population standard
*2015 BRFSS data

(Source: Healthy People 2020, 2016 BRFSS, 2015 Lorain County Health Assessment)

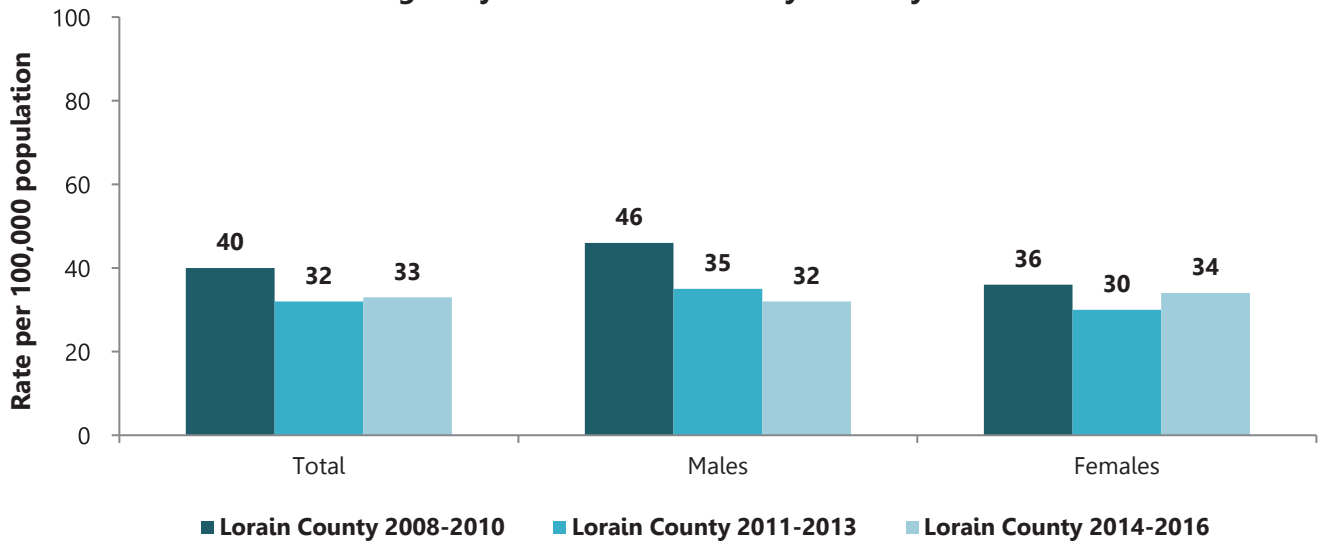
The following graphs shows the age-adjusted mortality rates per 100,000 population for heart disease and stroke by gender.

- From 2008-2016, the total Lorain County age adjusted heart disease mortality rate, as well as the female and male heart disease mortality rate, all decreased.
- From 2014-2016, the Lorain County stroke mortality rate was slightly higher for females.

Lorain County Age-Adjusted Heart Disease Mortality Rates by Gender

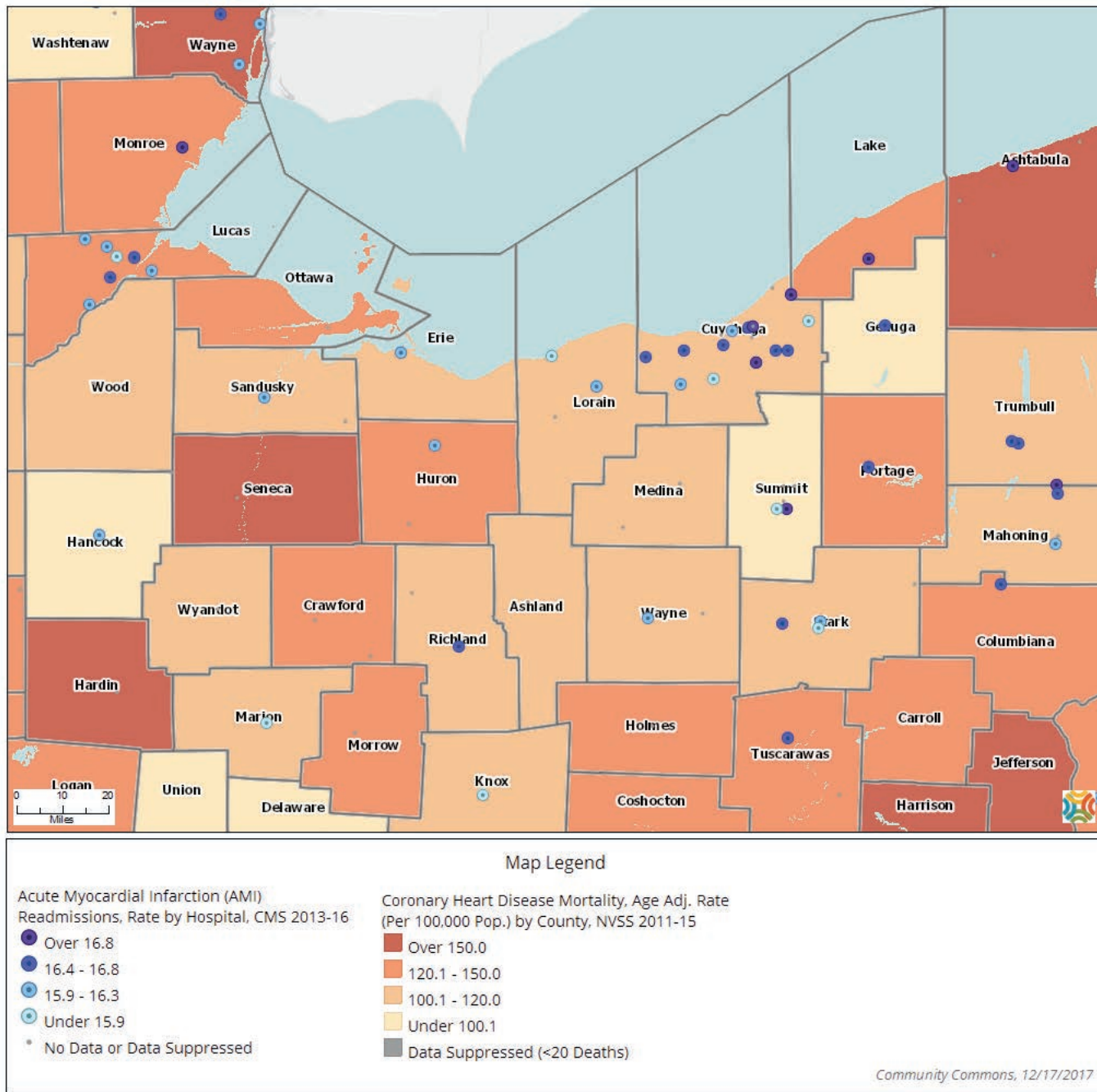


Age-Adjusted Stroke Mortality Rates by Gender



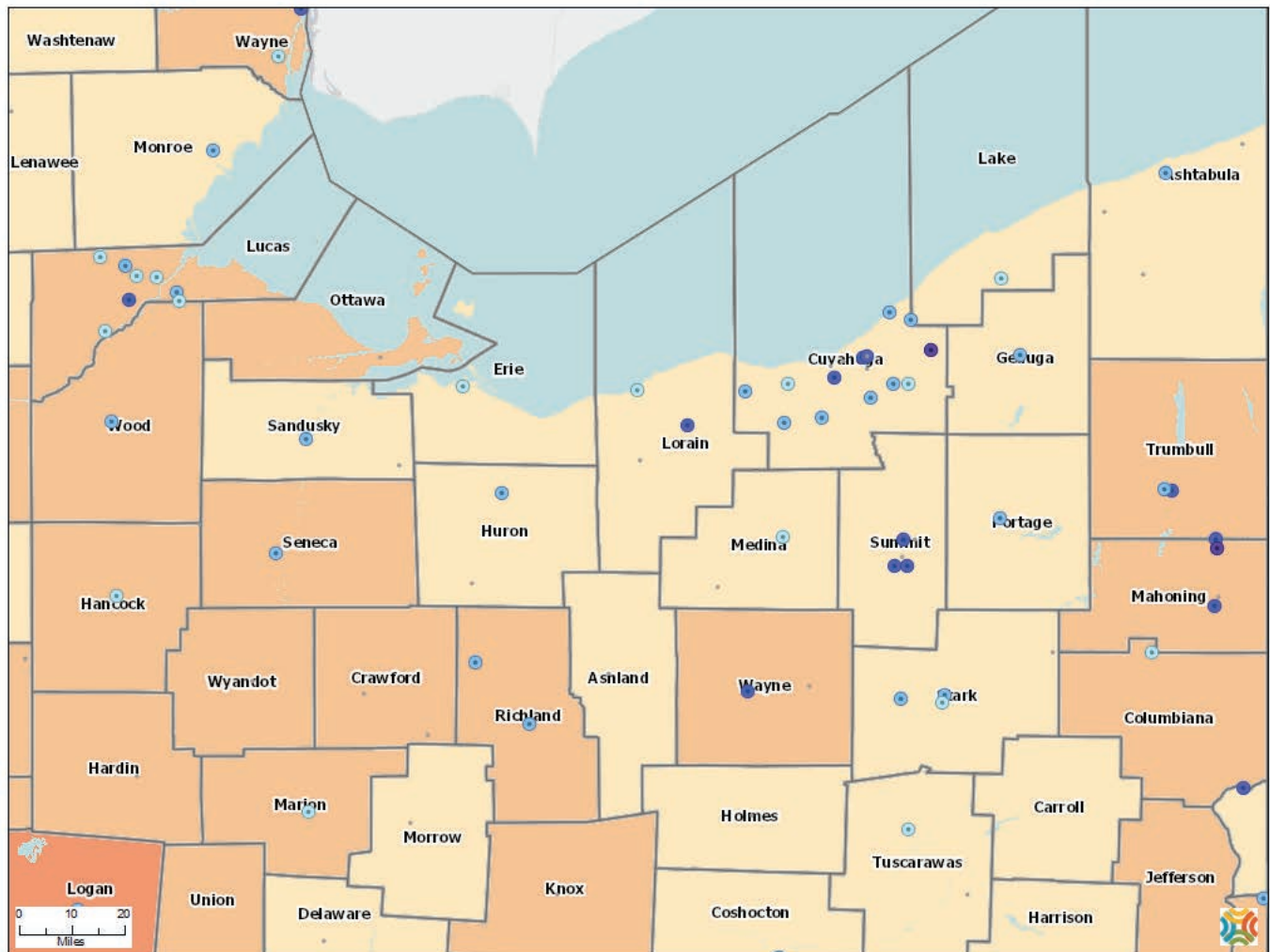
(Source for graphs: Ohio Public Health Data Warehouse, 2008-2016)

Coronary Heart Disease Mortality, Age Adjusted Rate Per 100,000 Population, 2011-2015, and Acute Myocardial Infarction (AMI) Readmissions, Rate by Hospital, 2013-2016



(Source: Centers for Disease Control and Prevention, National Vital Statistics System: 2011-15, Accessed via CDC Wonder and Centers for Medicare and Medicaid Services, 2013-2016, as compiled by Community Commons, obtained on 12/17/17)

Stroke Readmissions, Rate by Hospital, 2015-2016 by Stroke Mortality, Age Adjusted Rate per 100,000 population, 2011-2015



Map Legend

Stroke Readmissions, Rate by Hospital, CMS 2015-16

- Over 14.0
- 12.7 - 13.9
- 11.7 - 12.6
- Under 11.7
- * No Data or Data Suppressed

Stroke Mortality, Age Adj. Rate (Per 100,000 Pop.) by County, NVSS 2011-15

- Over 70.0
- 55.1 - 70.0
- 40.1 - 55.0
- Under 40.1
- Data Suppressed (<20 Deaths)

Community Commons, 11/29/2017

(Source: Centers for Medicare and Medicaid Services, 2015-2016, as compiled by Community Commons and Centers for Disease Control and Prevention, National Vital Statistics System, 2011-2015, accessed via CDC Wonder, compiled by Community Commons, obtained on 11/29/17)

Chronic Disease: Cancer

Key Findings

In 2015, 11% of Lorain County adults had been diagnosed with cancer at some time in their life. The ODH Ohio Public Health Data Warehouse indicates that from 2014-2016, a total of 2,040 Lorain County residents died from cancer, the leading cause of death in the county. The American Cancer Society advises that not using tobacco products, maintaining a healthy weight, adopting a physically active lifestyle, eating more fruits and vegetables, limiting alcoholic beverages and early detection may reduce overall cancer deaths.

Adult Cancer

- Eleven percent (11%) of Lorain County adults were diagnosed with cancer at some point in their lives.
- Of those diagnosed with cancer, they reported the following types: breast (24%), other skin cancer (23%), prostate (20%), testicular (12%), endometrial (11%), melanoma (10%), cervical (9%), non-Hodgkin's lymphoma (7%), ovarian (4%), renal (kidney) (4%), lung (3%), thyroid (3%), leukemia (1%), bladder (1%), stomach (1%), colon (1%), and other types of cancer (3%).

Adult Comparisons	Lorain County 2011	Lorain County 2015	Ohio 2016	U.S. 2016
Diagnosed with cancer	13%	11%	N/A	N/A

Lorain County Incidence of Cancer, 2010-2014

All Types: 8,612 cases

- Lung and Bronchus: 1,303 cases (15%)
- Breast: 1,222 (14%)
- Prostate: 1,140 cases (13%)
- Colon and Rectum: 764 cases (9%)

From 2014-2016, there were 2,040 cancer deaths in Lorain County.

(Source: Ohio Cancer Incidence, ODH Ohio Public Health Data Warehouse, Updated 12/18/17)

Cancer Facts

- The Ohio Public Health Data Warehouse indicates that from 2014-2016, cancers caused 22% (2,040 of 9,108 total deaths) of all Lorain County resident deaths. The largest percent (30%) of 2014-2016 cancer deaths were from lung and bronchus cancers *(Source: Ohio Public Health Data Warehouse, 2014-2016)*.
- 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 American Cancer Society states that about 600,920 Americans are expected to die of cancer in 2017. Cancer is the second leading cause of death in the U.S., exceeded only by heart disease. Nearly 1 of every 4 deaths is associated with cancer.

Lung Cancer

- In Lorain County, 22% of Lorain County adults were current smokers, and many more were exposed to environmental tobacco smoke, also a cause of heart attacks and cancer. A current smoker is defined as someone who has smoked over 100 cigarettes in their lifetime and currently smokes some or all days.
- In Lorain County, 19% of male adults were current smokers, and 27% had tried to quit smoking one or more times
- Approximately 25% of female adults in Lorain County were current smokers, and 58% had tried to quit smoking one or more times.
- The Ohio Public Health Data Warehouse reports that lung cancer (n=341) was the leading cause of male cancer deaths from 2014-2016 in Lorain County. Cancer of the colon and rectum (n=102) and prostate cancer caused (n=98) male deaths during the same time *(Source: Ohio Public Health Data Warehouse, 2014-2016)*.

- The Ohio Public Health Data Warehouse reports that lung cancer was the leading cause of female cancer deaths (n=279) in Lorain County from 2014-2016, followed by breast (n=126) and pancreatic (n=76) cancers (Source: *Ohio Public Health Data Warehouse, 2014-2016*).
- According to the American Cancer Society, smoking causes 80% of lung cancer deaths in the U.S. Men and women who smoke are about 15-30 times more likely to develop lung cancer than nonsmokers (Source: *American Cancer Society, Facts & Figures 2017*).

Breast Cancer

- In 2015, 53% of Lorain County females reported having had a clinical breast examination in the past year.
- Approximately three-fifths (61%) of Lorain County females over the age of 40 had a mammogram in the past year.
- The 5-year relative survival for women diagnosed with localized breast cancer (cancer that has not spread to lymph nodes or other locations outside the breast) is 99% (Source: *American Cancer Society, Facts & Figures 2017*).
- For women at average risk of breast cancer, recently updated American Cancer Society screening guidelines recommended that those 40 to 44 years of age have the choice of annual mammography; those 45 to 54 have annual mammography; and those 55 years of age and older have biennial or annual mammography, continuing as long as their overall health is good and life expectancy is 10 or more years. For some women at high risk of breast cancer, annual screening using magnetic resonance imaging (MRI) in addition to mammography is recommended, typically starting at age 30 (Source: *American Cancer Society, Facts & Figures 2017*).

Prostate Cancer

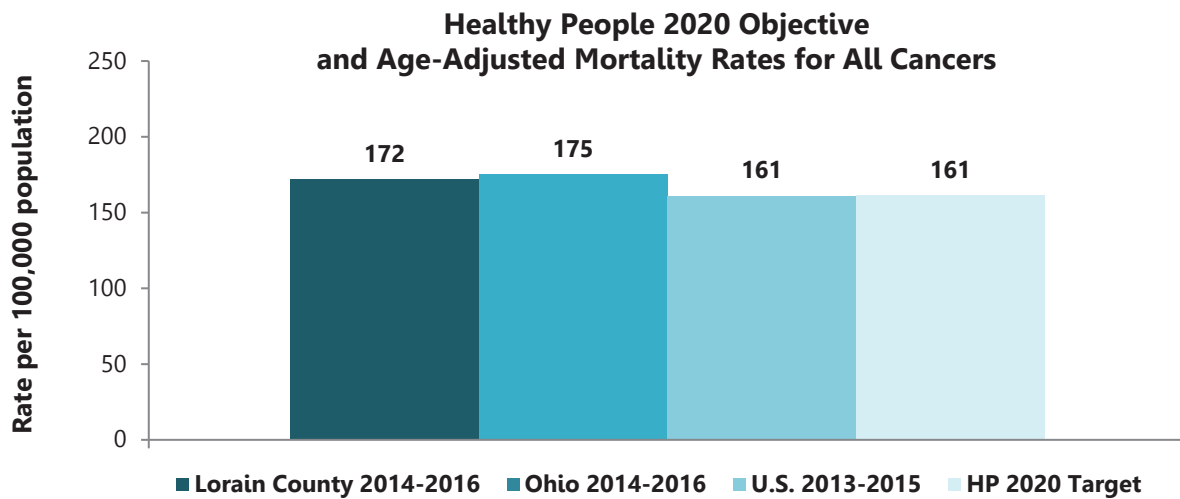
- More than two-fifths (45%) of Lorain County males had a Prostate-Specific Antigen (PSA) test at some time in their life, and 27% had one in the past year.
- More than half (53%) of men had a digital rectal exam in their lifetime, and 17% had one in the past year.
- The Ohio Public Health Data Warehouse indicate that prostate cancer deaths accounted for 7% of all male cancer deaths from 2014-2016 in Lorain County (Source: *Ohio Public Health Data Warehouse, 2014-2016*).
- Incidence rates for prostate cancer are 74% higher in African Americans than in whites, and they are twice as likely to die of prostate cancer. Other risk factors include strong familial predisposition, diet high in processed meat or dairy foods, and obesity. African American men and Caribbean men of African descent have the highest documented prostate cancer incidence rates in the world (Source: *American Cancer Society, Facts & Figures 2017*).

Colon and Rectum Cancers

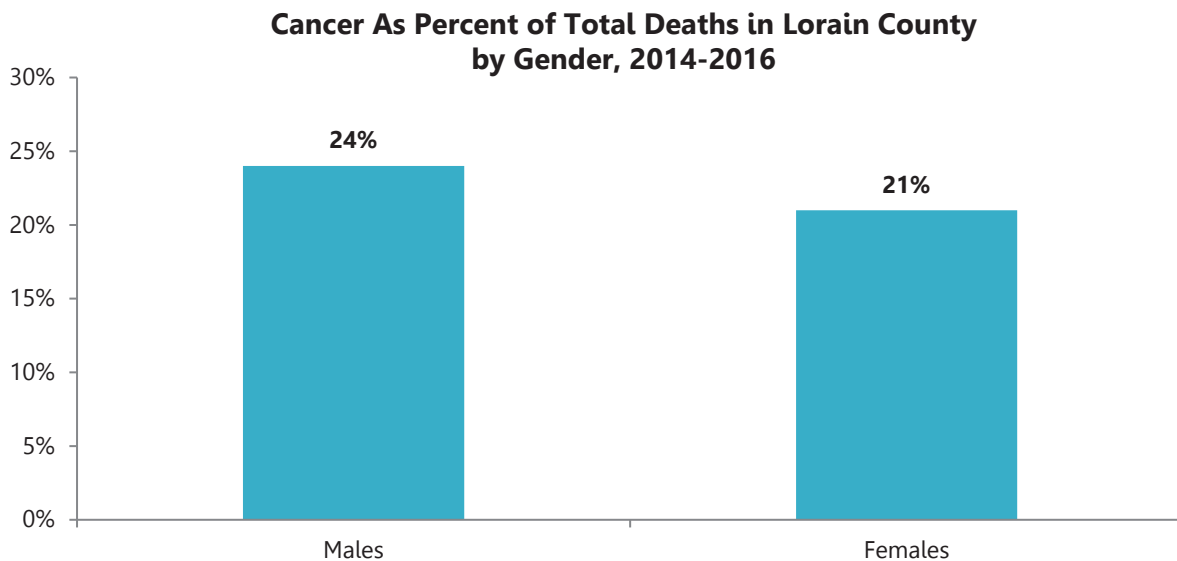
- More than one-quarter (29%) of Lorain County adults over the age of 50 reported having been screened for colorectal cancers in the past 2 years.
- The Ohio Public Health Data Warehouse indicate that colon and rectum cancer deaths accounted for 9% of all male and female cancer deaths from 2014-2016 in Lorain County (Source: *Ohio Public Health Data Warehouse, 2014-2016*).
- 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; and long-term smoking. Very low intake of fruits and vegetables is also potentially a risk factor for colorectal cancer (Source: *American Cancer Society, Facts & Figures 2017*).
- In the U.S., 90% of colon cancers occur in individuals over the age of 50. Therefore, the American Cancer Society suggests every person over the age of 50 have regular colon cancer screenings (Source: *American Cancer Society, Facts & Figures 2017*).

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

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



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



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

Lorain County Incidence of Cancer, 2010-2014

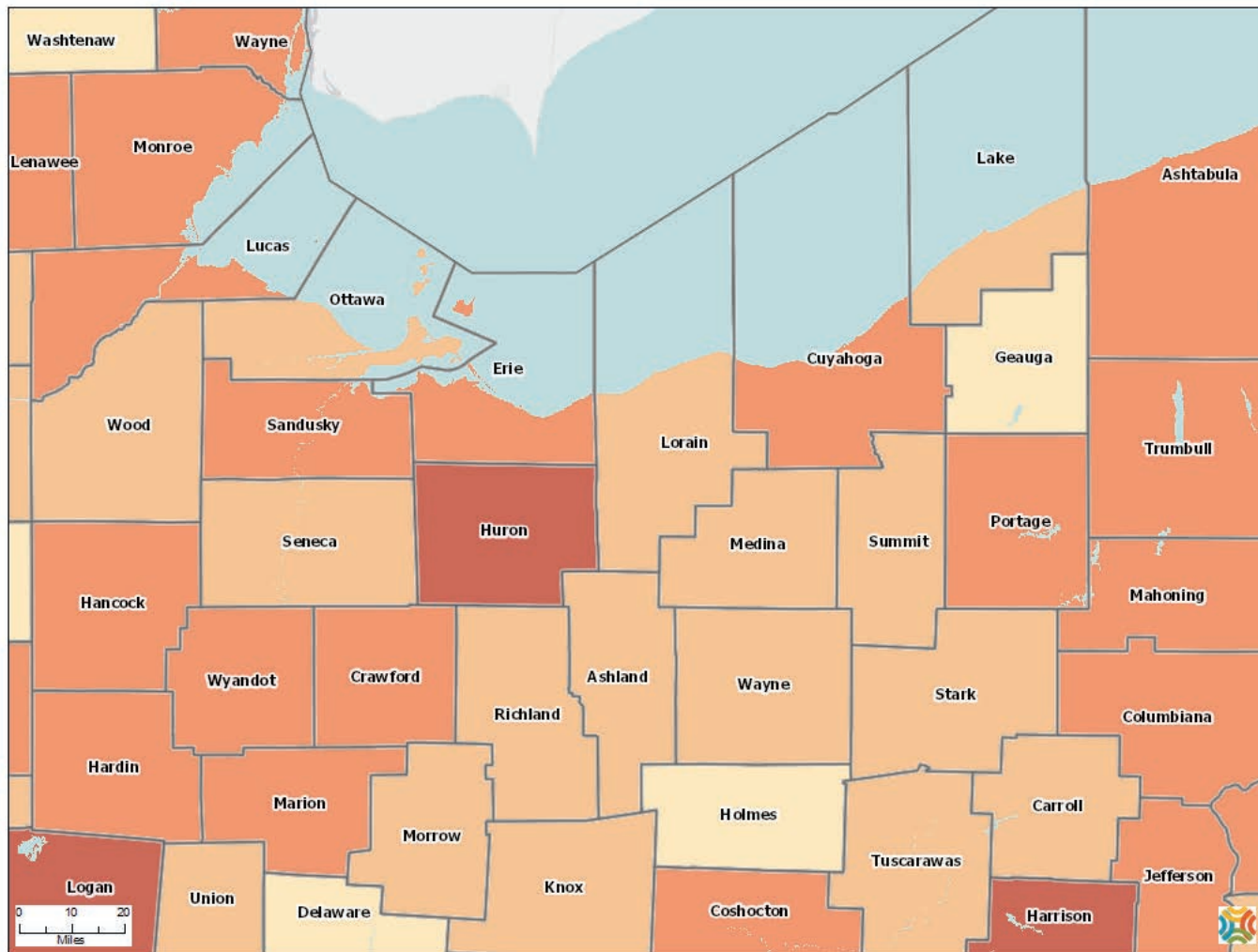
Types of Cancer	Number of Cases	Percent of Total Incidence of Cancer	Age-Adjusted Rate
Lung and Bronchus	1,303	15%	70.0
Breast	1,222	14%	67.0
Prostate	1,140	13%	126.8
Colon and Rectum	764	9%	41.0
Other/Unspecified	615	7%	33.9
Bladder	456	5%	24.3
Non-Hodgkins Lymphoma	352	4%	19.0
Melanoma of Skin	348	4%	19.6
Kidney and Renal Pelvis	322	4%	17.8
Cancer of Corpus Uteri	296	3%	28.2
Pancreas	268	3%	14.4
Thyroid	265	3%	16.7
Leukemia	199	2%	11.2
Oral Cavity & Pharynx	198	2%	10.5
Stomach	139	1%	7.5
Liver and Bile Ducts	125	1%	6.3
Brain and CNS	121	1%	6.8
Multiple Myeloma	96	1%	5.1
Esophagus	91	1%	4.8
Ovary	79	1%	8.1
Larynx	68	1%	3.5
Cancer of Cervix Uteri	65	1%	7.5
Testis	46	1%	6.8
Hodgkins Lymphoma	34	<1%	2.2
Total	8,612	100%	

(Source: Ohio Cancer Incidence, ODH Data Warehouse, Updated 11/30/17)

2017 Cancer Estimates

- In 2017, about 1,688,780 new cancer cases are expected to be diagnosed.
- The World Cancer Research Fund estimates that about twenty percent of the new cancer cases expected to occur in the U.S. in 2017 will be related to overweight or obesity, physical inactivity, and poor nutrition, and thus could be prevented.
- About 600,920 Americans are expected to die of cancer in 2017.
- In 2017, about 158,870 cancer deaths will be caused by tobacco use.
- In 2017, estimates predict that there will be 68,160 new cases of cancer and 25,430 cancer deaths in Ohio.
- Of the new cancer cases, approximately 10,660 (16%) will be from lung and bronchus cancers and 5,510 (8%) will be from colon and rectum cancers.
- About 9,430 new cases of female breast cancer are expected in Ohio.
- New cases of male prostate cancer in Ohio are expected to be 5,840 (9%).

Cancer Age Adjusted Mortality Rate per 100,000 Population, by County, 2011-2015



Map Legend

Cancer Mortality, Age Adj. Rate (Per 100,000 Pop.) by County, NVSS 2011-15

- Over 200.0
- 180.1 - 200.0
- 160.1 - 180.0
- Under 160.1
- Data Suppressed (<20 Deaths)

Community Commons, 11/29/2017

(Source: Centers for Disease Control and Prevention, National Vital Statistics System, 2011-2015, Accessed via CDC Wonder, compiled by Community Commons)

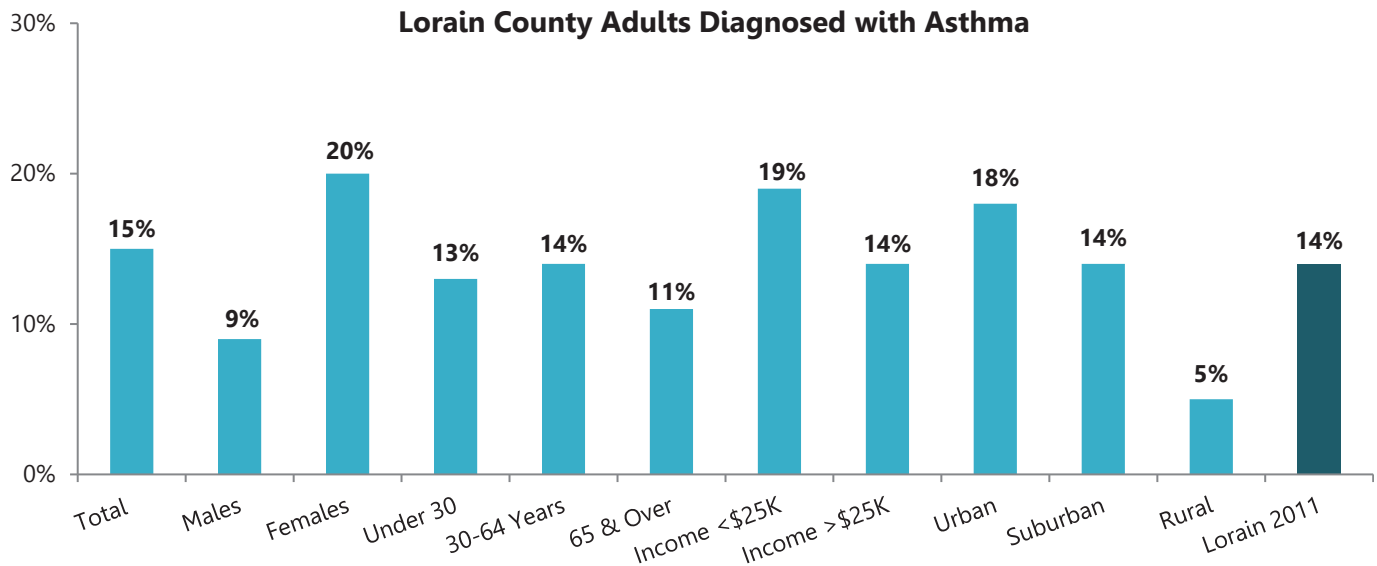
Chronic Disease: Asthma

Key Findings

In 2015, 15% of Lorain County adults had been diagnosed with asthma.

Asthma and Other Respiratory Disease

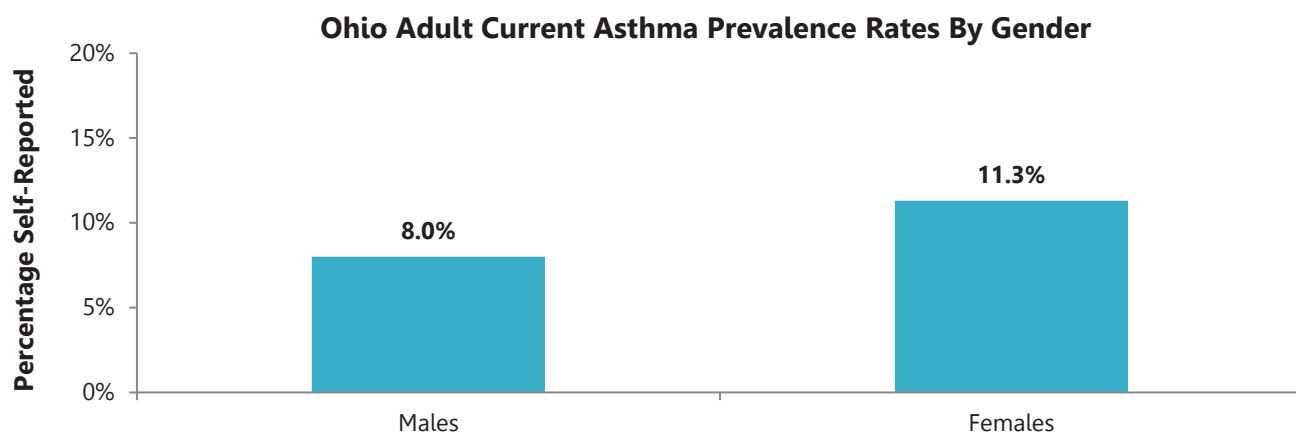
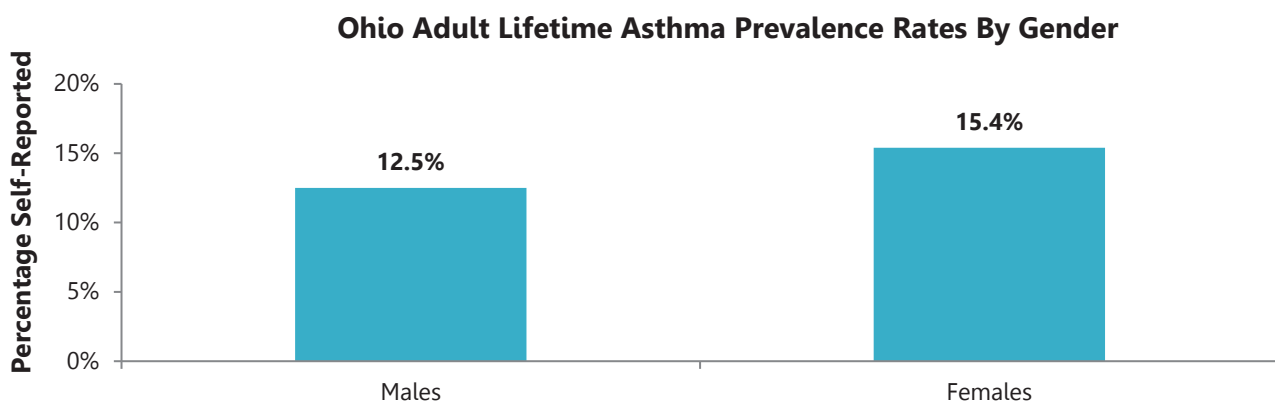
- In 2015, 15% of Lorain County adults had been diagnosed with asthma.
- Fourteen percent (14%) of Ohio and U.S. adults have ever been diagnosed with asthma (Source: 2016 BRFSS).
- There are several important factors that may trigger an asthma attack. Some of these triggers are tobacco smoke, dust mites, outdoor air pollution, cockroach allergens, pets, mold, smoke from burning wood or grass, infections linked to the flu, colds, and respiratory viruses (Source: CDC, 2017).
- From 2014-2016, chronic lower respiratory disease was the 3rd leading cause of death in Lorain County and in Ohio (Source: Ohio Public Health Data Warehouse, 2014-2016).



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

Adult Comparisons	Lorain County 2011	Lorain County 2015	Ohio 2016	U.S. 2016
Had been diagnosed with asthma	14%	15%	14%	14%

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



(Source for graphs: 2016 BRFSS)

Asthma Facts

- The number of Americans with asthma grows every year. Currently, 26 million Americans have asthma.
- Asthma mortality is almost 4,000 deaths per year.
- Asthma results in 439,000 hospitalizations and 1.8 million emergency room visits annually.
- Patients with asthma reported 14.2 million visits to a doctor's office and 1.3 million visits to hospital outpatient departments.
- Effective asthma treatment includes monitoring the disease with a peak flow meter, identifying and avoiding allergen triggers, using drug therapies including bronchodilators and anti-inflammatory agents, and developing an emergency plan for severe attacks.

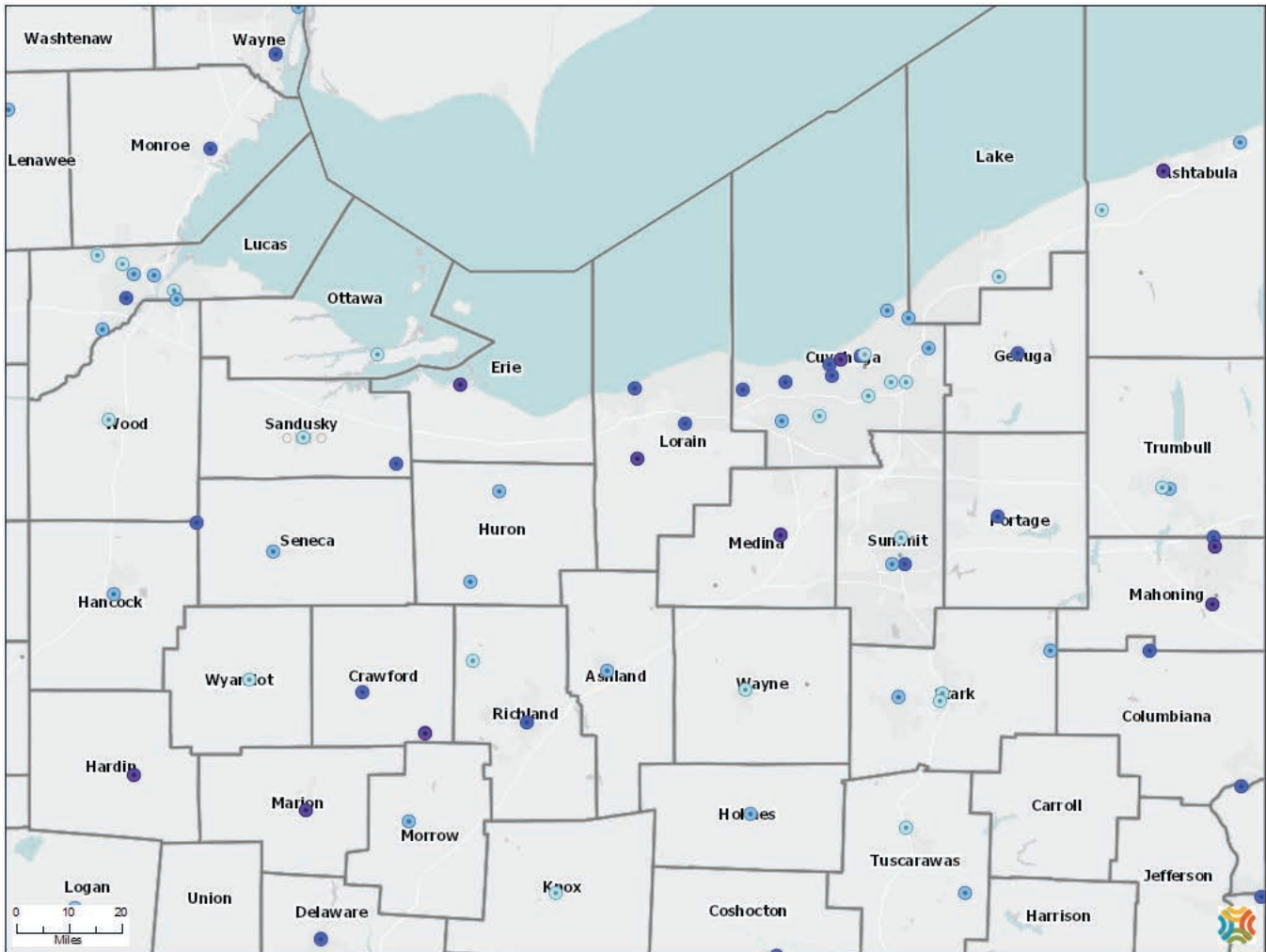
(Source: American College of Allergy, Asthma, & Immunology, Asthma Facts, updated 4/22/16)

What Causes an Asthma Attack?

- **Tobacco Smoke:** People should never smoke near you, in your home, in your car, or wherever you may spend a lot of time if you have asthma. Tobacco smoke is unhealthy for everyone, especially people with asthma. If you have asthma and you smoke, quit smoking.
- **Dust Mites:** If you have asthma, dust mites can trigger an asthma attack. To prevent attacks, use mattress covers and pillowcase covers to make a barrier between dust mites and yourself. Do not use down-filled pillows, quilts, or comforters. Remove stuffed animals and clutter from your bedroom.
- **Outdoor Air Pollution:** This pollution can come from factories, automobiles, and other sources. Pay attention to air quality forecasts to plan activities when air pollution levels will be low.
- **Cockroach Allergens:** Get rid of cockroaches in your home by removing as many water and food sources as you can. Cockroaches are often found where food is eaten and crumbs are left behind. Cockroaches and their droppings can trigger an asthma attack, so vacuum or sweep areas that might attract cockroaches at least every 2 to 3 days.
- **Pets:** Furry pets can trigger an asthma attack. If you think a furry pet may be causing attacks, you may want to find the pet another home. If you can't or don't want to find a new home for a pet, keep it out of the person with asthma's bedroom.
- **Mold:** Breathing in mold can trigger an asthma attack. Get rid of mold in your home to help control your attacks. Humidity, the amount of moisture in the air, can make mold grow. An air conditioner or dehumidifier will help keep the humidity level low.
- **Smoke from Burning Wood or Grass:** Smoke from burning wood or other plants is made up of a mix of harmful gases and small particles. Breathing in too much of this smoke can cause an asthma attack. If you can, avoid burning wood in your home.
- **Other Triggers:** Infections linked to influenza (flu), colds, and respiratory syncytial virus (RSV) can trigger an asthma attack. Sinus infections, allergies, breathing in some chemicals, and acid reflux can also trigger attacks. Physical exercise, some medicines, bad weather, breathing in cold air, some foods, and fragrances can also trigger an asthma attack.

(Source: Centers for Disease Control, Asthma, Common Asthma Triggers, retrieved on 12/17/17)

Chronic Obstructive Pulmonary Disease (COPD) Readmissions, Rate by Hospital, 2015-2016



Map Legend

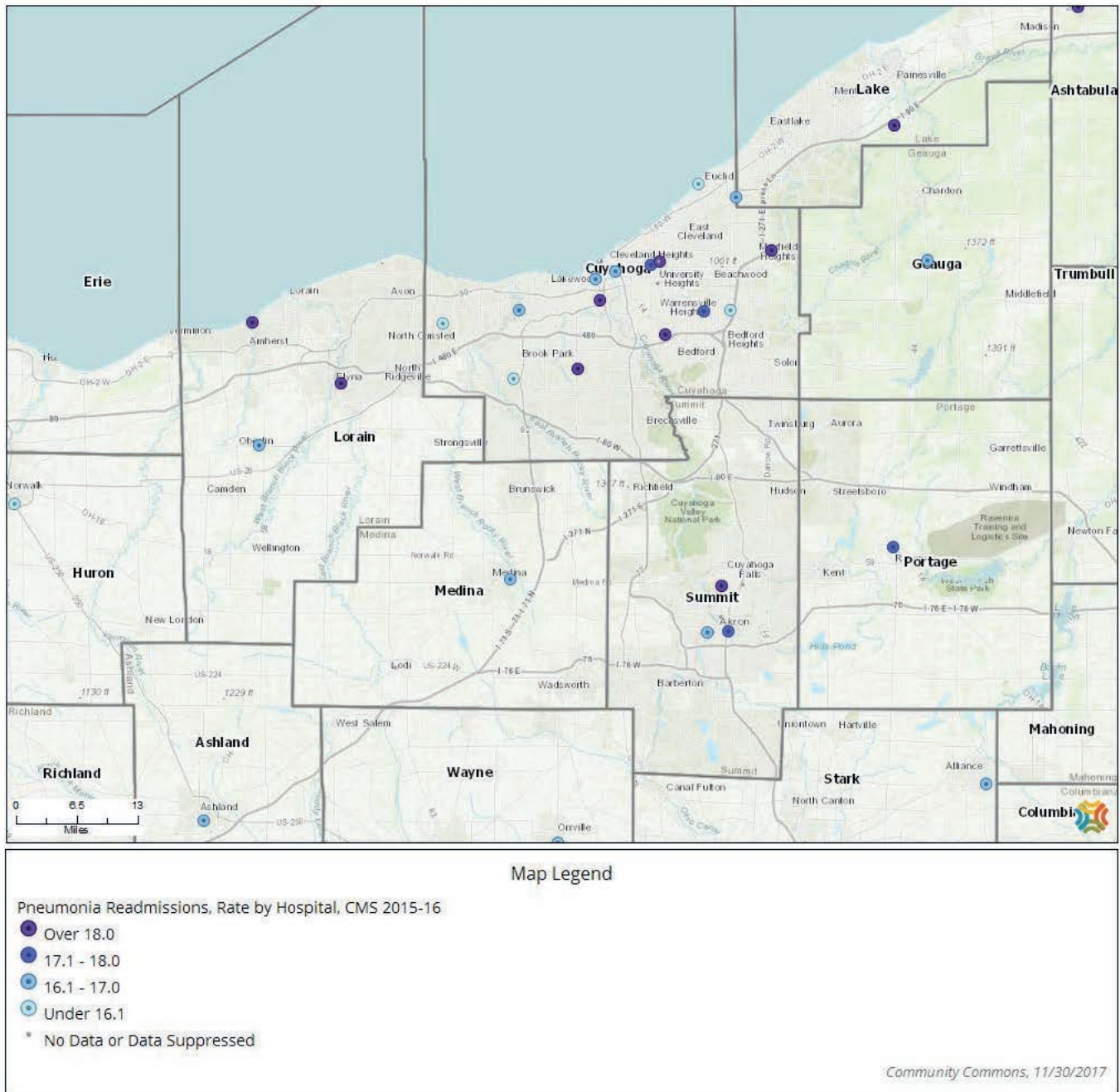
COPD Readmissions, Rate by Hospital, CMS 2015-16

- Over 21.0
- 20.1 - 21.0
- 19.1 - 20.0
- Under 19.1
- No Data or Data Suppressed

Community Commons, 11/29/2017

(Source: Centers for Medicare and Medicaid Services, 2015-2016, as compiled by Community Commons, obtained on 11/29/17)

Pneumonia Readmissions, Rate by Hospital, 2015-2016



(Source: Centers for Medicare and Medicaid Services, 2015-2016, as compiled by Community Commons, obtained on 11/30/17)

Chronic Disease: Arthritis

Key Findings

Thirty-four percent (34%) of Lorain County adults were diagnosed with arthritis. According to the 2016 BRFSS, 31% of Ohio adults and 26% of U.S. adults were told they have arthritis.

Arthritis

- More than one-third (34%) of Lorain County adults were told by a health professional that they had some form of arthritis, increasing to 68% of those over the age of 65.
- According to the 2016 BRFSS, 31% of Ohio adults and 26% of U.S. adults were told they had arthritis.
- Lorain County adults were told by a health professional that they had the following: rheumatoid arthritis (5%), gout (5%), fibromyalgia (4%), and lupus (1%).
- Adults are at higher risk of developing arthritis if they are female, have genes associated with certain types of arthritis, have an occupation associated with arthritis, are overweight or obese, and/or have joint injuries or infections (Source: CDC, 2016).
- An estimated 54 million U.S. adults (about 23%) report having doctor-diagnosed arthritis. By 2040, over 78 million people will have arthritis. Arthritis is more common among women (24%) than men (18%), and it affects all racial and ethnic groups. Arthritis commonly occurs with other chronic diseases, like diabetes, heart disease, and obesity, and can make it harder for people to manage these conditions (Source: CDC, Arthritis at a Glance, March 2017).

Adult Comparisons	Lorain County 2011	Lorain County 2015	Ohio 2016	U.S. 2016
Diagnosed with arthritis	35%	34%	31%	26%

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:

- **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.
- **Learn Arthritis Management Strategies**– Arthritis management strategies provide those with arthritis with the skills and confidence to effectively manage their condition. These techniques have proven to be valuable for helping people change their behavior and better manage their arthritis symptoms.

(Source: Centers for Disease Control and Prevention, Arthritis: Key Public Health Messages, July 2017)

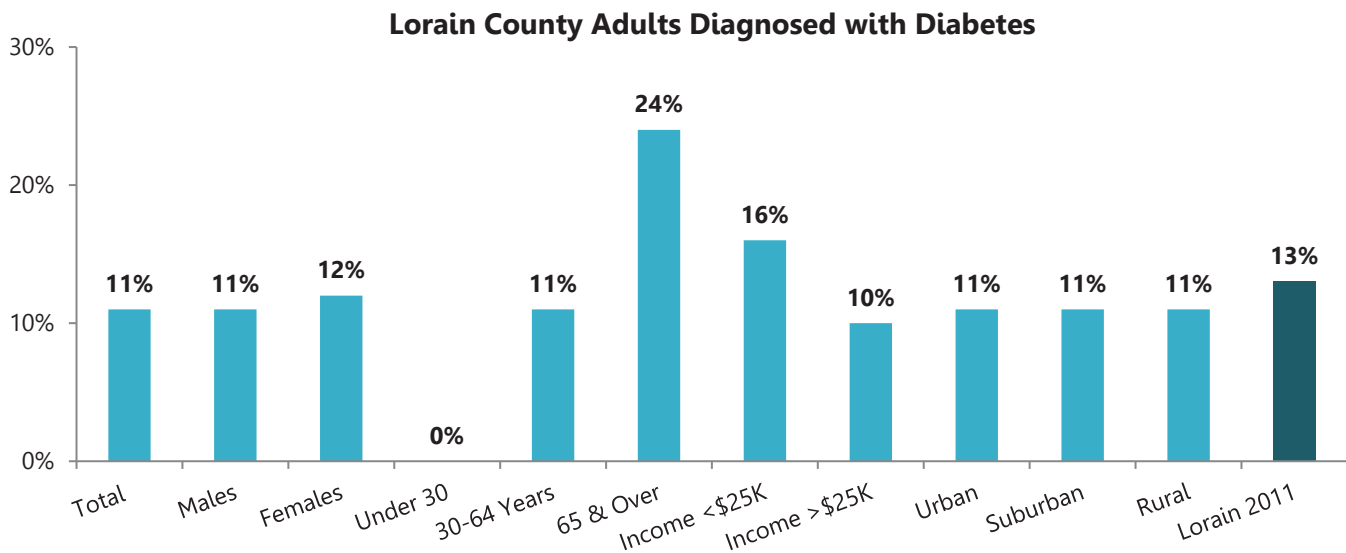
Chronic Disease: Diabetes

Key Findings

In 2015, 11% of Lorain County adults had been diagnosed with diabetes. More than one-third (35%) of adults with diabetes rated their health as fair or poor.

Diabetes

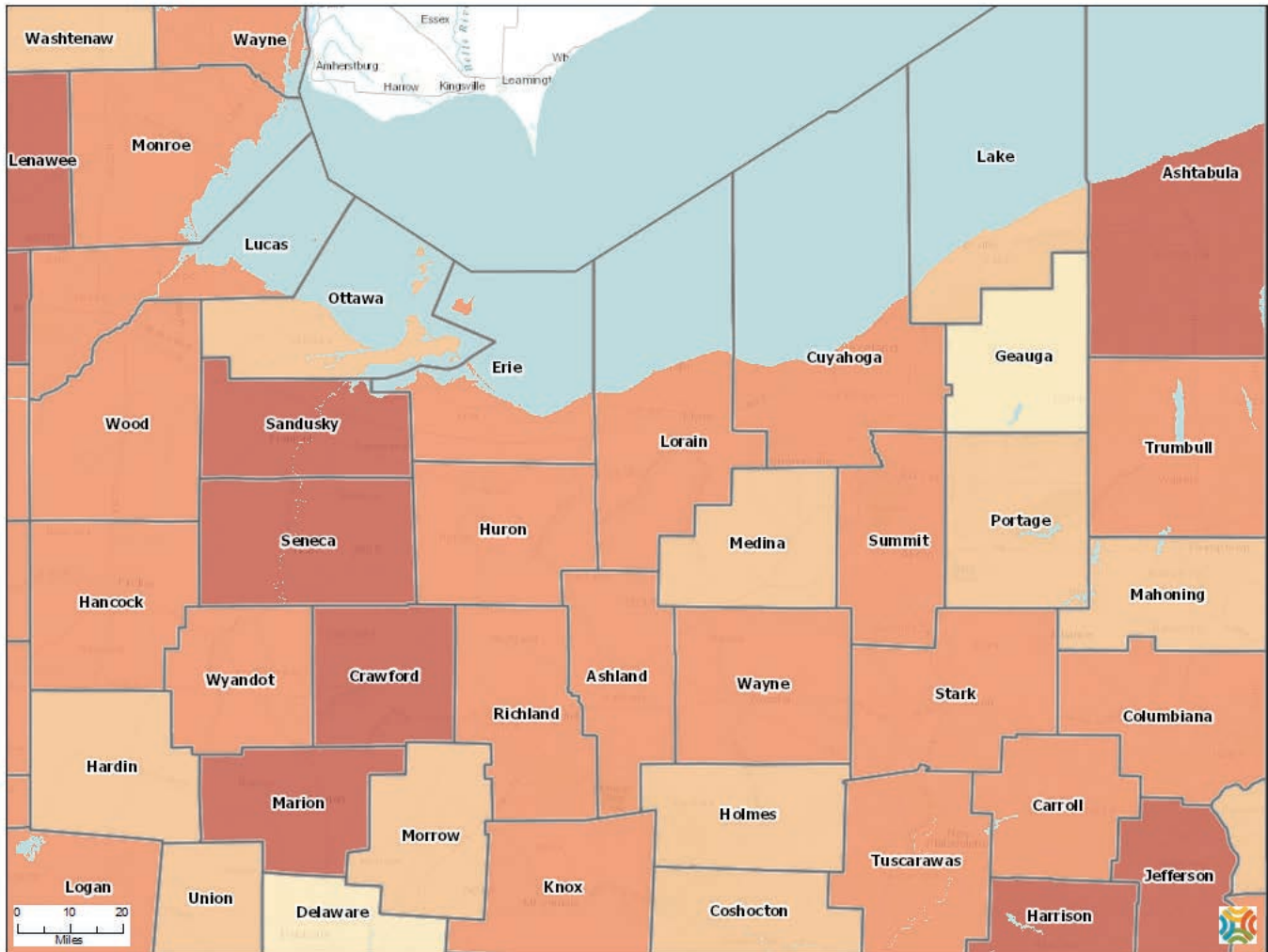
- Eleven percent (11%) of Lorain County adults had been diagnosed with diabetes, increasing to 16% of those with incomes less than \$25,000 and 24% of those over the age of 65. The 2016 BRFSS reports that 11% of Ohio and U.S. adults had been diagnosed with diabetes.
- More than one-third (35%) of adults with diabetes rated their health as fair or poor.
- Lorain County adults diagnosed with diabetes also had one or more of the following characteristics or conditions:
 - 86% were obese or overweight
 - 67% had been diagnosed with high blood cholesterol
 - 63% had been diagnosed with high blood pressure



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

Adult Comparisons	Lorain County 2011	Lorain County 2015	Ohio 2016	U.S. 2016
Diagnosed with diabetes	13%	11%	11%	11%

Diabetes Mortality, Age Adjusted Rate per 100,000 Population, by County, 2011-2015



Map Legend

Diabetes Mortality, Age Adj. Rate (Per 100,000 Pop.) by County, NVSS 2011-15

- Over 30.0
- 23.1 - 30.0
- 16.1 - 23.0
- Under 16.1
- Data Suppressed (<20 Deaths)

Community Commons, 11/29/2017

(Source: Centers for Disease Control and Prevention, National Vital Statistics System, 2011-2015, accessed via CDC Wonder, as compiled by Community Commons)

Chronic Disease: Quality of Life

Key Findings

In 2015, 36% of Lorain County adults were limited in some way because of a physical, mental or emotional problem. The most limiting health problems were back or neck problems (45%); arthritis (44%); stress, depression, anxiety, or emotional problems (28%); and walking problems (25%).

Impairments and Health Problems

- In 2015, more than one-third (36%) of Lorain County adults were limited in some way because of a physical, mental or emotional problem (21% Ohio and 21% U.S., 2015 BRFSS), increasing to 51% of those with incomes less than \$25,000 and 52% of those over the age of 65.
- Among those who were limited in some way, the following most limiting problems or impairments were reported: back or neck problems (45%), arthritis (44%), stress, depression, anxiety, or emotional problems (28%), walking problems (25%), chronic pain (21%), sleep problems (21%), diabetes (16%), high blood pressure (14%), lung/breathing problems (13%), eye/vision problems (10%), fitness level (10%), hearing problems (10%), fractures, bone/joint injuries (9%), tobacco dependency (9%), mental health illness/disorder (6%), heart problems (6%), dental problems (5%), a learning disability (4%), cancer (4%), incontinence (4%), other mental health issue (4%), alcohol dependency (3%), a developmental disability (2%), Alzheimer's Disease/dementia (1%), stroke-related problems (<1%), autism (<1%), and drug addiction (<1%).
- Lorain County adults needed help with the following because of an impairment or health problem: household chores (21%), yard work (20%), shopping (16%), getting around for other purposes (10%), transportation (10%), cooking (9%), bills (8%), bathing (6%), doing necessary business (5%), dressing (5%), getting around the house (2%), eating (1%), child care (1%), and toileting (1%).
- Lorain County adults were responsible for providing regular care or assistance to the following: multiple children (17%), an elderly parent or loved one (7%), grandchildren (5%), a friend, family member or spouse with a health problem (4%), an adult child (4%), a friend, family member or spouse with a mental health issue (3%), someone with special needs (3%), a friend, family member or spouse with dementia (2%), children with discipline issues (2%), and foster children (<1%).
- In the past year, Lorain County adults reported needing the following services: eyeglasses or vision services (19%), help with routine needs (10%), pain management (9%), help with personal care needs (7%), a cane (6%), medical supplies (4%), oxygen or respiratory support (4%), hearing aids or hearing care (3%), a walker (3%), a special bed (2%), oxygen (2%), personal emergency response system (2%), a wheelchair (2%), wheelchair ramp (1%), mobility aids or devices (1%), and a special telephone (<1%).
- Lorain County adults slept an average of 6.8 hours per day.

Adult Comparisons	Lorain County 2011	Lorain County 2015	Ohio 2016	U.S 2016
Limited in some way because of a physical, mental, or emotional problems	20%	36%	21%*	21%*

*2015 BRFSS

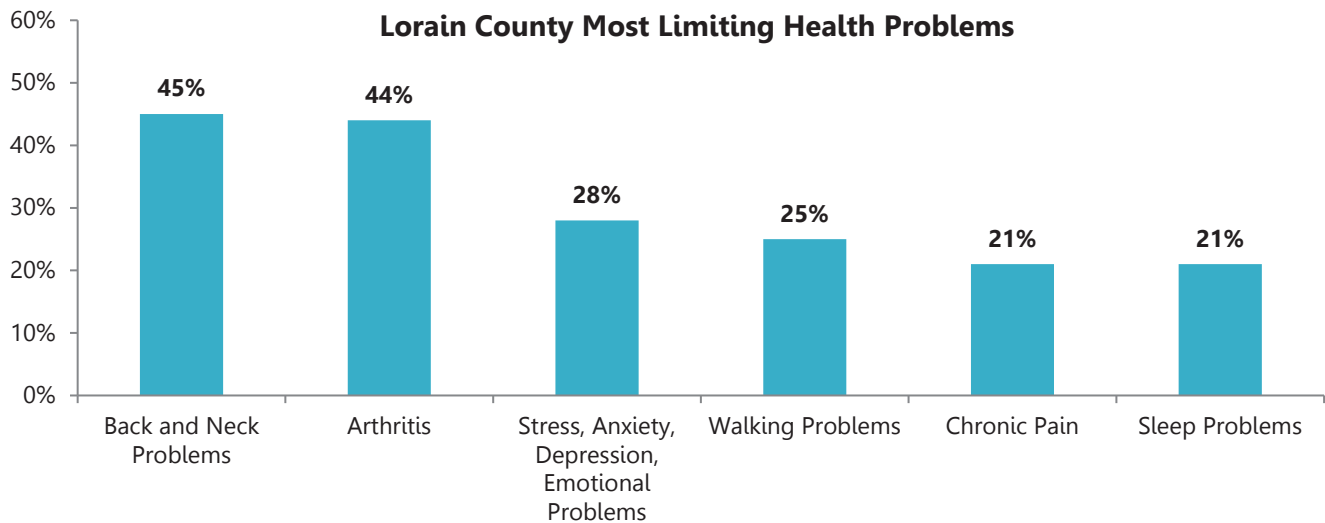
The following graphs show the percentage of Lorain County adults who were limited in some way and the most limiting health problems. Examples of how to interpret the information shown on the graph include: 36% of Lorain County adults were limited in some way, including 32% of males and 52% of those 65 and older.

Lorain County Adults Limited in Some Way



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

Lorain County Most Limiting Health Problems



Healthy People 2020

Arthritis, Osteoporosis, and Chronic Back Conditions (AOCBC)

Objective	Lorain County 2015	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	44%	36%

Note: U.S. baseline is age-adjusted to the 2000 population standard
 (Sources: Healthy People 2020 Objectives, 2015 Lorain County Health Assessment)

Social Conditions: Social Determinants of Health

Key Findings

In 2015, 9% of Lorain County adults were abused in the past year. Thirty-one percent (31%) of adults kept a firearm in or around their home.

Healthy People 2020

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

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

Economic Stability

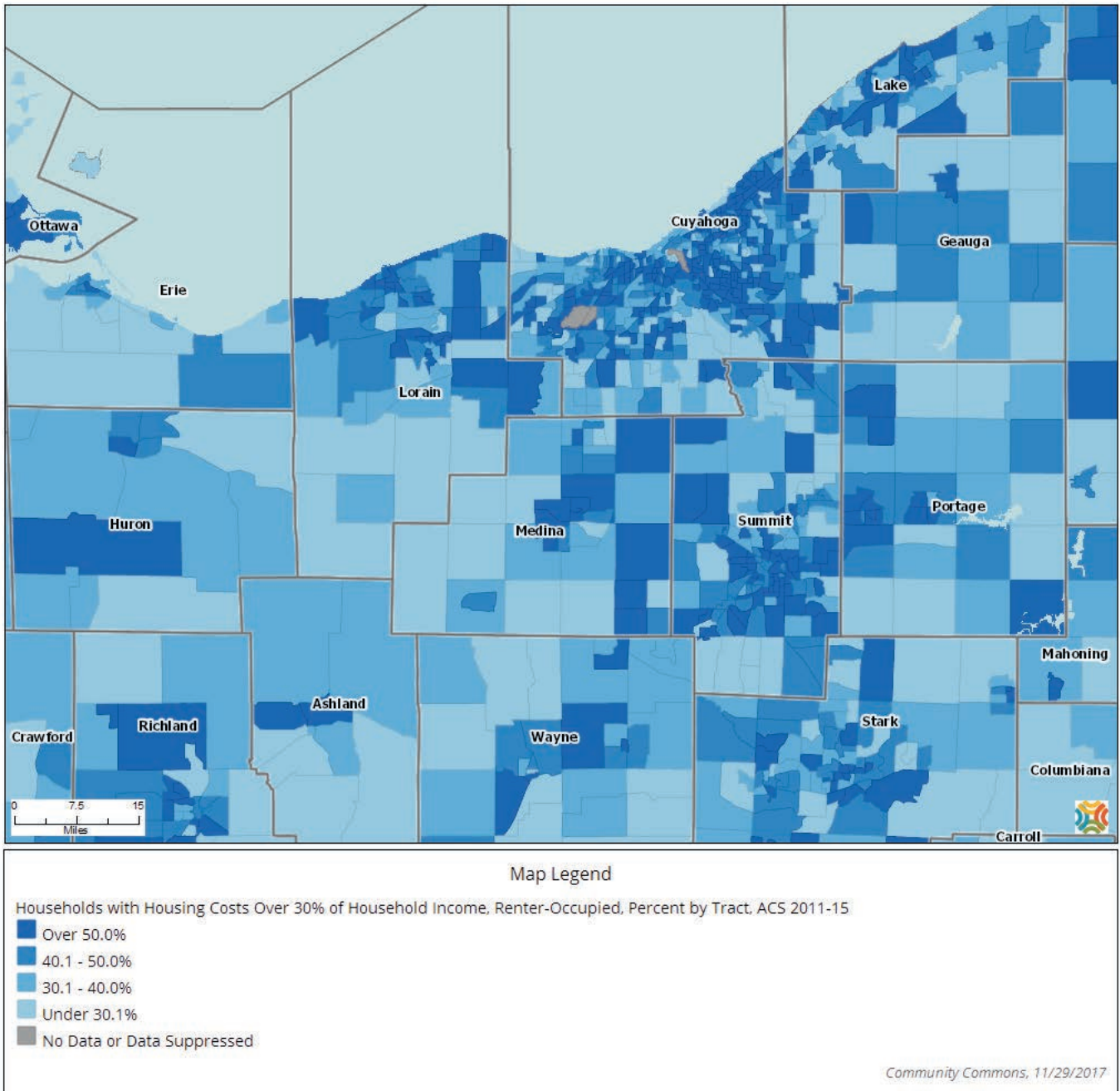
- Lorain County adults received assistance for the following in the past year: food (10%), healthcare (9%), utilities (8%), Medicare (7%), dental care (7%), prescription assistance (6%), mental illness issues (5%), rent/mortgage (5%), home repair (4%), transportation (4%), free tax preparation (3%), credit counseling (3%), alcohol or substance dependency (3%), employment (3%), legal aid services (2%), unplanned pregnancy (2%), clothing (1%), abuse or neglect issues (1%), affordable childcare (1%), emergency shelter (1%), and homelessness (<1%).
- The median household income in Lorain County in 2016 was \$53,459. The U.S. Census Bureau reports median income levels of \$50,674 for Ohio and \$55,332 for the U.S. (Source: U.S. Census Bureau, 2012-2016 American Community Survey 5-year Estimates).
- Fourteen percent (14%) of all Lorain County residents were living in poverty (Source: U.S. Census Bureau, 2012-2016 American Community Survey 5-year Estimates).
- The unemployment rate for Lorain County civilian labor force was 4.9% as of November 2017 (Source: Bureau of Labor Statistics, November 2017).

Health and Health Care

- In the past year, 11% of adults were uninsured, increasing to 23% of those with incomes less than \$25,000 and 26% of those under the age of 30.
- Lorain County adults had the following issues regarding their healthcare coverage: deductibles were too high (31%), premiums were too high (20%), co-pays were too high (19%), could not understand their insurance plan (7%), high HSA deductible (7%), opted out of certain coverage because they could not afford it (5%), difficulty navigating the Marketplace (5%), working with their insurance company (5%), limited visits (4%), service not deemed medically necessary (4%), opted out of certain coverage because they did not need it (2%), provider/facility no longer covered (2%), service no longer covered (2%), and mental health services limited/not covered (1%).
- See the Health Care Coverage, Health Care Access and Utilization and Health Status Perceptions sections for further health and health care information for Lorain County adults.



Households with Housing Costs Over 30% of Household Income, Renter-Occupied, Percent by Tract, ACS 2011-15



(Source: U.S. Census Bureau, American Community Survey, 2011-2015, as compiled by Community Commons)

Social Determinants of Health

- Social determinants of health are conditions in the environments in which people are born, live, learn, work, play, worship, and age that affect a wide range of health, functioning, and quality-of-life outcomes and risks.
- Conditions (e.g., social, economic, and physical) in these various environments and settings (e.g., school, church, workplace, and neighborhood) have been referred to as “place.” In addition to the more material attributes of “place,” the patterns of social engagement and sense of security and well-being are also affected by where people live.
- Resources that enhance quality of life can have a significant influence on population health outcomes. Examples of these resources include safe and affordable housing, access to education, public safety, availability of healthy foods, local emergency/health services, and environments free of life-threatening toxins.
- Understanding the relationship between how population groups experience “place” and the impact of “place” on health is fundamental to the social determinants of health—including both social and physical determinants.

(Source: HealthyPeople2020, updated December 12, 2017)

Education

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

Social and Community Context

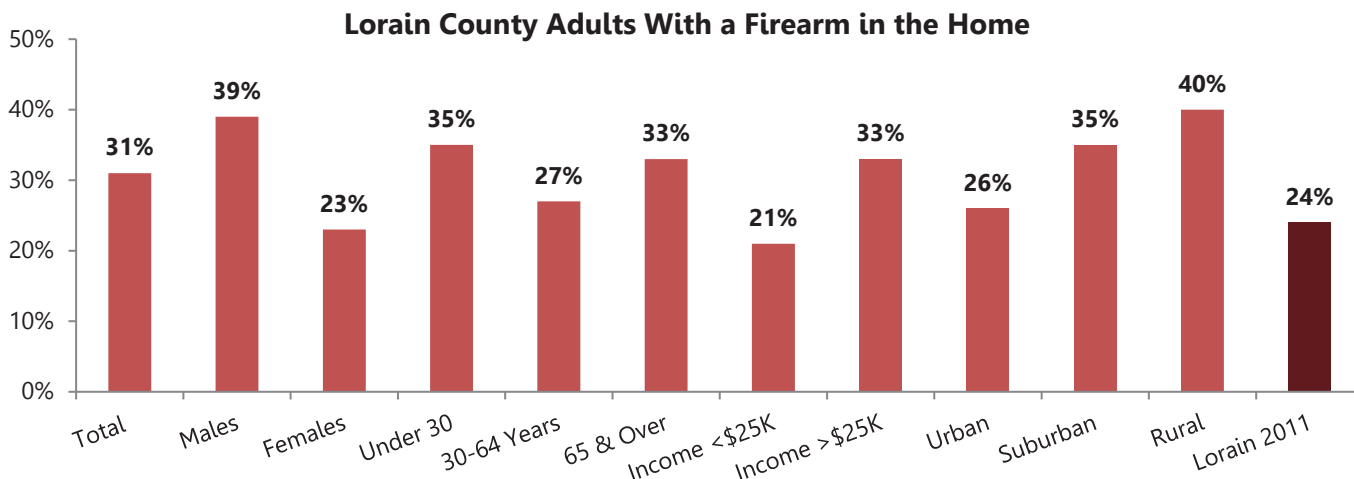
- 9% of Lorain County adults were abused in the past year. They were abused by the following: a spouse or partner (54%), someone outside their home (31%), a parent (19%), a child (7%), another family member (1%), a paid caregiver (1%), and someone else (22%).
- Lorain County adults experienced the following in the past 12 months: a close family member went to the hospital (34%), death of a family member or close friend (32%), had bills they could not pay (21%), moved to a new address (10%), someone in their household lost their job (10%), someone in their household had their hours at work reduced (8%), household income was cut by 50% (8%), someone close to them had a problem with drinking or drugs (8%), became separated or divorced (4%), they or a family member were incarcerated (3%), were abused by someone physically, emotionally, sexually, or verbally (3%), were threatened by someone close to them (3%), had someone homeless living with them (3%), someone in their household went to jail (2%), were financially exploited (1%), lost a large sum of money due to gambling activities (1%), were homeless (1%), were hit or slapped by their spouse or partner (<1%), their child was threatened by someone close to them (<1%), were involved in a physical fight (<1%), and their child was hit or slapped by their spouse or partner (<1%).
- 68% of adults indicated that all family members in their household ate a meal together every day of the week. Families ate a meal together an average of 4.9 times per week.
- Lorain County adults would have a problem getting the following if they needed them today: someone to help pay for their medical expenses (17%), someone to help if they were sick and needed to be in bed (16%), someone to loan them \$50 (16%), someone to take them to a clinic or doctor’s office if they needed a ride (14%), someone to talk to about their problems (10%), someone to accompany them to their doctor’s appointments (9%), back-up childcare (7%) and someone to explain directions from their doctor (5%).

Neighborhood and Built Environment

- Almost one-third (31%) of Lorain County adults kept a firearm in or around their home. 2% of adults reported they were unlocked and loaded.
- Lorain County adults considered their neighborhood to be extremely safe (18%), quite safe (57%), slightly safe (20%), and not safe at all (3%) from crime.

- Lorain County adults reported doing the following while driving: wearing a seatbelt (92%), talking on hand-held cell phone (40%), eating (38%), talking on hands-free cell phone (32%), texting (16%), not wearing a seatbelt (6%), using social media (4%), checking Facebook on cell phone (4%), being under the influence of alcohol (3%), being under the influence of prescription drugs (3%), reading (2%), being under the influence of recreational drugs (1%), and other activities (such as applying makeup, shaving, etc.) (3%).
- Adults thought Lorain County residents needed more education about the following: drug abuse (48%), obesity (44%), violence (43%), distracted driving (42%), bullying (41%), healthy eating (39%), nutrition (37%), gun safety (36%), DUI (33%), lack of physical activity (32%), prescription drug abuse (32%), teenage pregnancy (31%), senior/elder care (29%), childhood obesity (28%), homelessness (26%), suicide prevention (25%), tobacco use (25%), sexting (18%), cooking (18%), seat belt or restraint usage (17%), disaster preparedness (15%), bicycle safety (13%), gambling (11%), and falls (8%).

The following graph shows the percentage of Lorain County adults who had a firearm in or around the home. Examples of how to interpret the information shown on the graph include: 31% of all Lorain County adults had a firearm in or around the home, including 39% of males and 27% of those ages 30-64.



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

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

N/A-not available

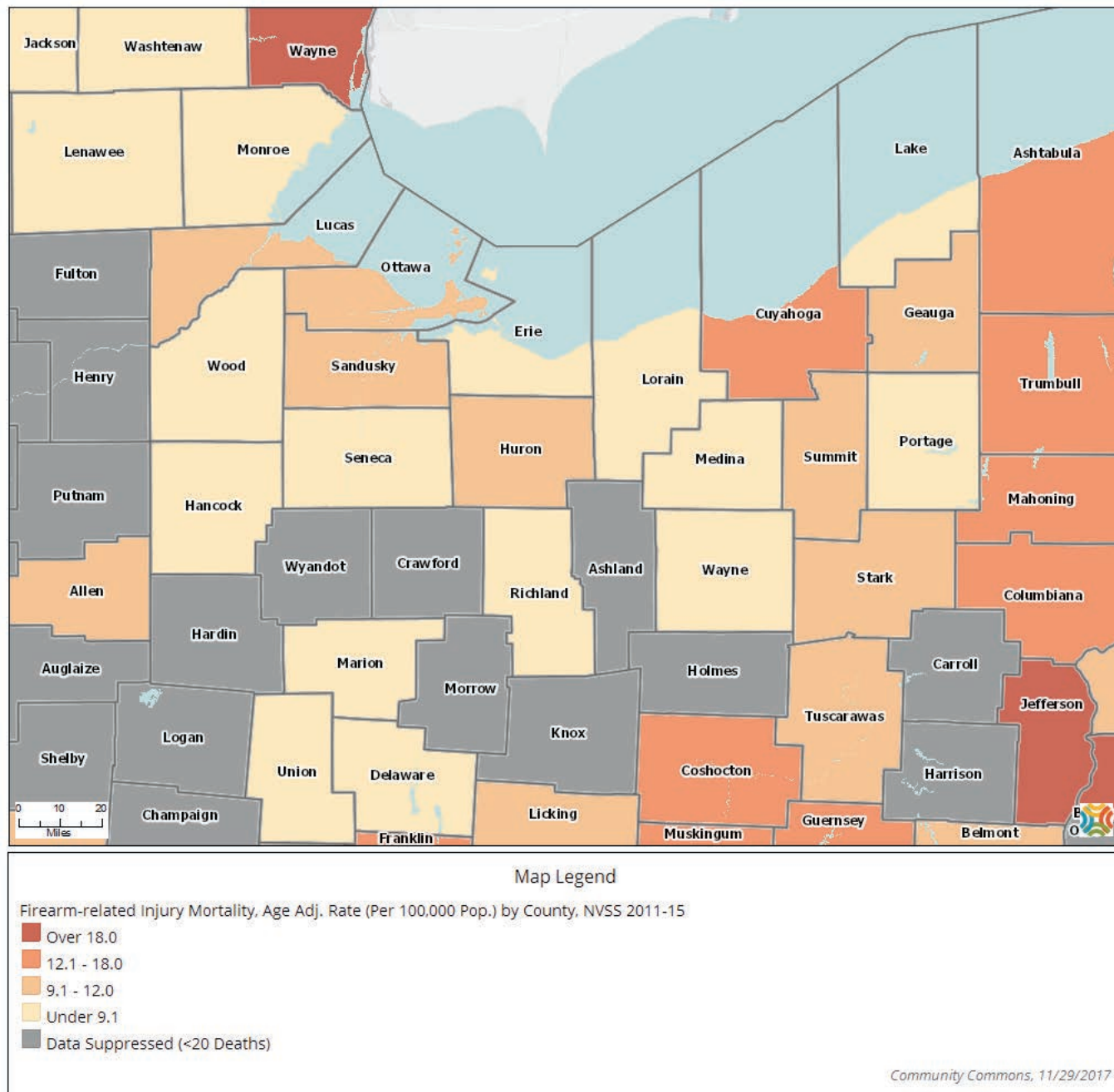
Victims of Gun Violence in America

- More than 100,000 people are shot in murders, assaults, suicides & suicide attempts, accidents or by police intervention in America in an average year.
 - 33,880 people die from gun violence and 81,114 people survive gun injuries.
- Every day, an average of 315 people is shot in America. Of those 315 people, 93 people die and 222 are shot, but survive.
 - Of the 315 people who are shot every day, an average of 46 are children and teens.
 - Of the 93 people who die, 32 are murdered, 58 are suicides, 1 die accidentally, 1 with an unknown intent and 1 by legal intervention.
 - Of the 222 people who are shot but survive, 164 are from assault, 45 are shot accidentally, 10 are suicide attempts, and 3 are police interventions.

(Source: Brady Campaign to Prevent Gun Violence, "There Are Too Many Victims of Gun Violence" Fact Sheet, June 2017)

Firearm-Related Injury Mortality, Age Adjusted Rate per 100,000 Population, 2011-2015

- There were 127 firearm-related deaths in Lorain County from 2011-2015.
- The rate of firearm-related deaths per 100,000 population for Lorain County from 2011-2015 was 8.2.

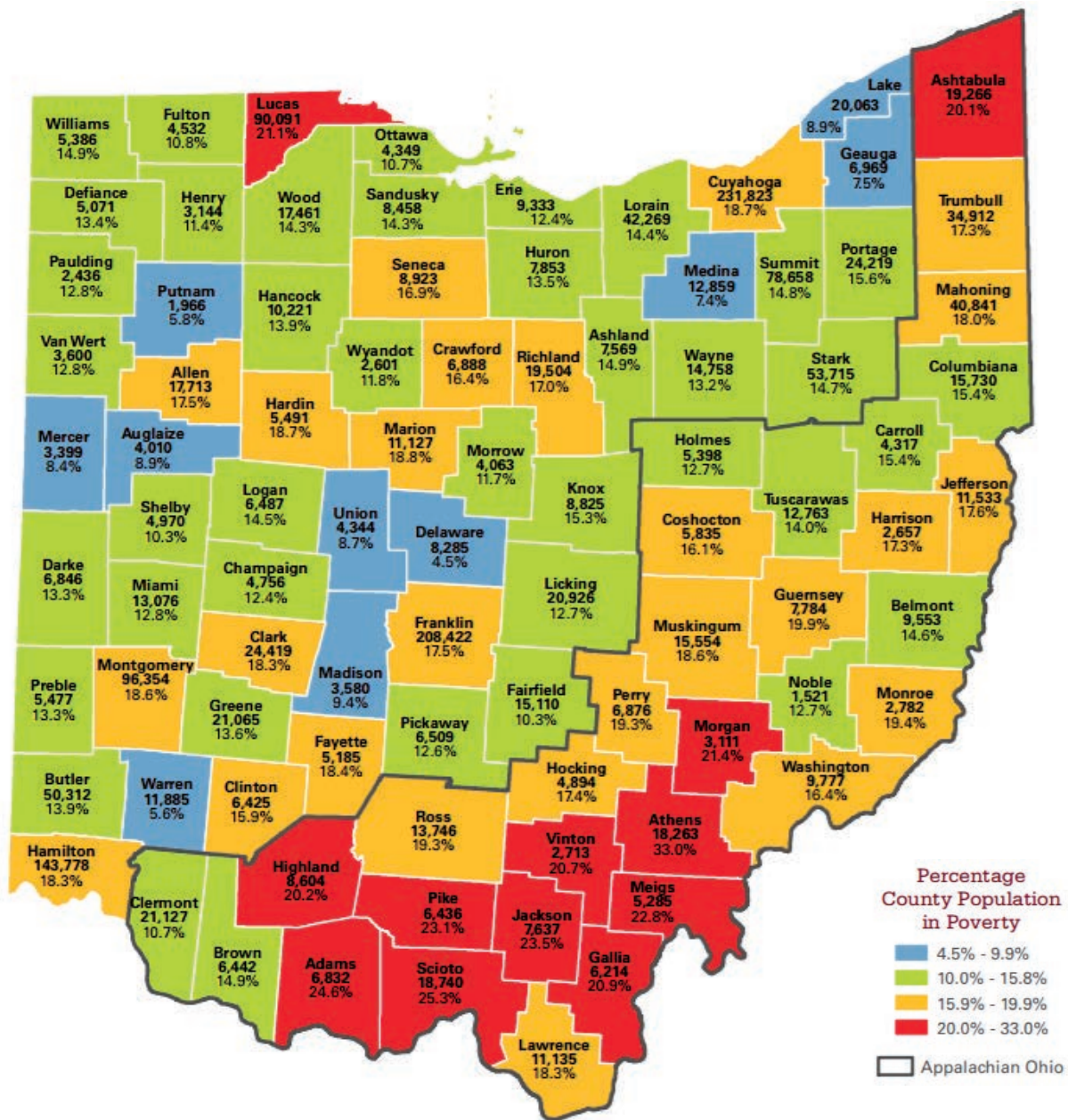


(Source: Centers for Disease Control and Prevention, National Vital Statistics System, 2011-2015, accessed via CDC Wonder, as compiled by Community Commons, obtained on 11/29/17)

The map below shows the variation in poverty rates across Ohio during the 2011-15 period.

- The 2011-2015 American Community Survey 5 year estimates that approximately 1,775,836 Ohio residents or 15.8% of the population were in poverty.
- From 2011-2015, 14% of Lorain County residents were in poverty.

Estimated Poverty Rates in Ohio by County (2011-2015)



(Source: 2011-2015 American Community Survey 5-year estimates, as compiled by Ohio Development Services Agency, Office of Research, Ohio Poverty Report, February 2017)

Social Conditions: Environmental Health

Key Findings

The top three environmental health issues for Lorain County adults were insects (11%), mold (7%), and moisture issues (6%). Eighty-four percent (84%) of adults had a working smoke detector in preparation of a disaster.

Disaster Preparedness

- Lorain County households had the following disaster preparedness supplies: cell phone (85%), working smoke detector (84%), working flashlight and working batteries (83%), cell phone with texting (81%), computer/tablet (79%), 3-day supply of nonperishable food for everyone in the household (46%), home land-line telephone (46%), working battery-operated radio and working batteries (40%), 3-day supply of prescription medication for each person who takes prescribed medicines (40%), 3-day supply of water for everyone in the household (1 gallon of water per person per day) (29%), generator (16%), communication plan (14%), disaster plan (9%), and a family disaster plan (6%).

Environmental Health

- Lorain County adults thought the following threatened their health in the past year:
 - Insects (11%)
 - Mold (7%)
 - Moisture issues (6%)
 - Plumbing problems (4%)
 - Indoor air quality (4%)
 - Rodents (4%)
 - Temperature regulation (3%)
 - Outdoor air quality (3%)
 - Cockroaches (3%)
 - Bed bugs (3%)
 - Unsafe water supply/wells (2%)
 - General living conditions (2%)
 - Food safety/food-borne infections (1%)
 - Sewage/waste water problems (1%)
 - Chemicals found in products (1%)
 - Agricultural chemicals (1%)
 - Safety hazards (1%)
 - Fracking (1%)
 - Lice (1%)
 - Radon (<1%)
 - Excess medications in home (<1%)
 - Sanitation issues (<1%)
 - Lead paint (<1%)
 - Asbestos (<1%)
 - Hazardous waste incidents, storage, and transport (<1%)

Social Conditions: Parenting

Key Findings

Sixty-seven percent (67%) of parents discussed peer pressure with their 12-to-17-year-old in the past year. Eighty-eight percent (88%) of parents reported their infant to 4-year-old child always rode in a car seat or booster seat.

Parenting

- Eighty-eight percent (88%) of parents reported their infant to 4-year-old child always rode in a car seat/booster seat when a passenger in a car, and 7% reported their child never rode in a car seat/booster seat.
- Seventy-two percent (72%) of parents reported their 5-to-8-year-old child always rode in a booster seat when a passenger in a car, and 12% reported their child never rode in a booster seat.
- Parents reported they read to their infant to 5-year-old child: every day (20%), almost every day (29%), a few times a week (24%), a few times a month (4%), and a few times a year (6%). 11% of parents indicated they did not read to their child, 2% of parents reported their child read to him/herself, and 4% reported never reading to their child due to the child's lack of interest.
- Parents were concerned about the following topics regarding their child: having a poor diet (22%), depression/anxiety/mental health (19%), bullying (15%), social media (13%), not getting enough exercise (13%), developing a weight problem (13%), texting (11%), watching TV (10%), academic performance (9%), communication and speech (7%), using alcohol (7%), using tobacco (7%), using drugs (6%), violence (6%), teen pregnancy (5%), drinking and driving (4%), hearing (3%), and getting alcohol (2%).
- Parents discussed the following sexual health and other health topics with their 12-to-17 year-old in the past year:
 - Peer pressure (67%)
 - Dating and relationships (62%)
 - Career plan/post-secondary education (59%)
 - Screen-time (58%)
 - Eating habits (56%)
 - Bullying (54%)
 - Physical activity (45%)
 - Abstinence/how to refuse sex (42%)
 - Social media issues (41%)
 - Volunteering (39%)
 - Negative effects of marijuana and other drugs (39%)
 - Body image (37%)
 - Negative effects of alcohol (31%)
 - Birth control (31%)
 - Negative effects of tobacco (29%)
 - Condom use/safer sex/STD prevention (28%)
 - Anxiety/depression/suicide (28%)
 - School/legal consequences of using tobacco/alcohol/other drugs (28%)
 - Refusal skills/peer pressure (25%)
 - Weight status (23%)

Adult Comparisons	Lorain County 2011	Lorain County 2015	Ohio 2015	U.S. 2015
Child (infant to 4-years old) who always rode in a car seat or booster seat	91%	88%	N/A	N/A
Child (5-to-8-years old) who always rode in a booster seat	70%	72%	N/A	N/A

N/A-not available

How to Help Increase Your School-Aged Child's Social Ability

Consider the following as ways to foster your school-aged child's social abilities:

- Set and provide appropriate limits, guidelines, and expectations and consistently enforce using appropriate consequences.
- Model appropriate behavior.
- Offer compliments for your child being cooperative and for any personal achievements.
- Help your child choose activities that are appropriate for your child's abilities.
- Encourage your child to talk with you and be open with his or her feelings.
- Encourage your child to read and read with your child.
- Encourage your child to get involved with hobbies and other activities.
- Encourage physical activity.
- Encourage self-discipline; expect your child to follow rules that are set.
- Teach your child to respect and listen to authority figures.
- Encourage your child to talk about peer pressure and help set guidelines to deal with peer pressure.
- Spend uninterrupted time together—giving full attention to your child.
- Limit television, video, and computer time.

(Source: Stanford Children's Health, The Growing Child: School-Age (6-12), 2017)

Social Conditions: Maternal and Infant Health

Key Findings

In 2015, 68% of Lorain County parents put their child to sleep on their back as an infant.

Maternal Health

- One in ten (10%) Lorain County adults with children did not have healthcare coverage, compared to 7% of those who did not have children living in their household.
- Of those Lorain County adults with health care coverage, 56% had coverage for their children.
- In the past year, adults went outside of Lorain County for the following maternal and child health care services: obstetrics/gynecology/NICU (8%), pediatric care (5%), pediatric therapies (2%), and developmental disability services (<1%).

ABC's of Safe Sleep – Infants should sleep alone, on their back, and in a crib.

Pregnancy and Infant Health

- Twenty-two percent (22%) of Lorain County women had been pregnant in the past 5 years.
- During their last pregnancy, Lorain County women: took a multi-vitamin (68%), got a prenatal appointment in the first 3 months (56%), took folic acid during pregnancy (45%), took folic acid pre-pregnancy (31%), received WIC services (31%), had a dental exam (27%), experienced perinatal depression (15%), looked for options for an unwanted pregnancy (15%), had an abortion (12%), smoked cigarettes (11%), consumed alcoholic beverages (7%), used e-cigarettes (5%), and did none of these things (32%).
- When asked how Lorain County parents put their child to sleep as an infant, 68% said on their back, 30% said on their side, 18% said on their stomach, and 13% said in bed with them or another person.

Sleep-Related Infant Deaths: Who is at Greater Risk?

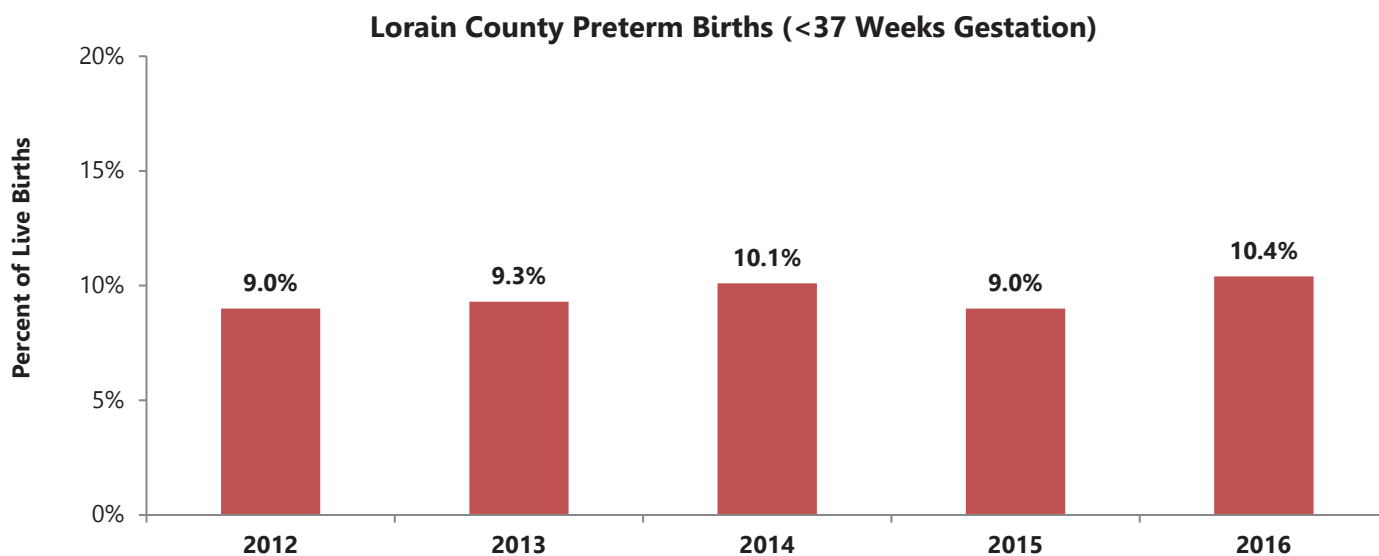
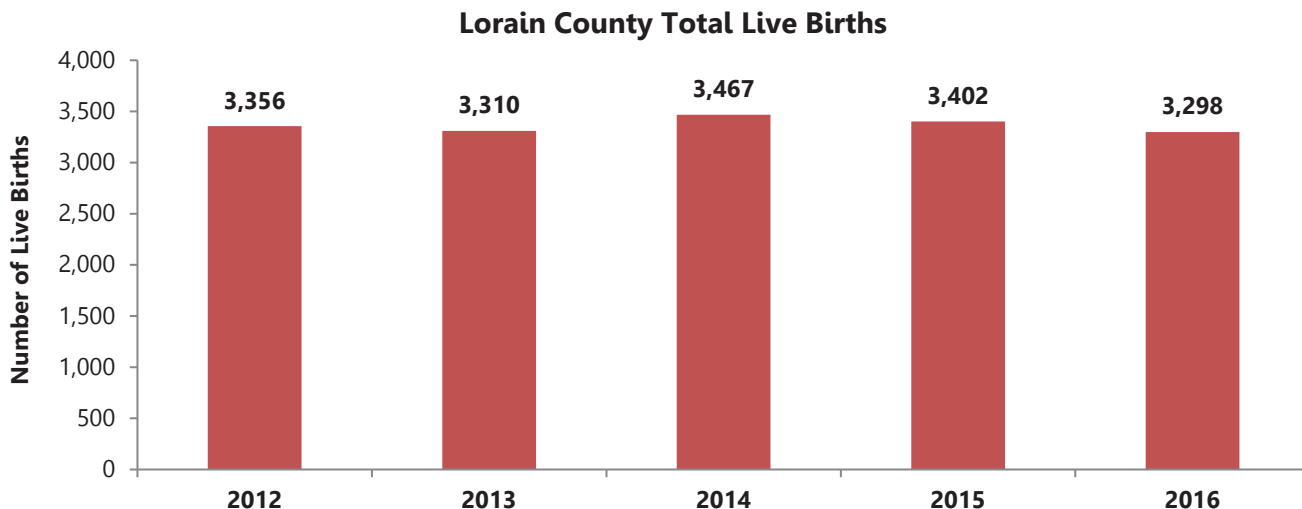
All infants are at risk for sleep-related deaths, but we know the risks are much greater for:

- **Infants who bed share:** Forty-nine percent of sleep-related deaths occurred while the infant was sharing a sleep surface with another person.
- **Infants not placed to sleep on their backs:** Only 51 percent of sleep-related deaths had been placed to sleep on their backs.
- **Infants not placed to sleep in a crib:** Seventy-one percent of sleep-related deaths occurred when infants were sleeping some place other than a crib or bassinet. Forty-four percent occurred in adult beds.
- **Infants exposed to tobacco smoke:** Thirty-five percent of sleep-related infant deaths were exposed to second-hand smoke.
- **Younger infants:** Sleep-related deaths decrease substantially after 3 months of age. Eighty-five percent occurred prior to 6 months of age.
- **African-American infants:** Forty-six percent of sleep-related deaths were African-American infants, despite only representing eighteen percent of live births in 2016.

(Source: Ohio Department of Health, Bureau of Vital Statistics, 2016 Ohio Infant Mortality Data: General Findings, obtained from: <https://www.odh.ohio.gov/l-media/ODH/ASSETS/Files/cfhs/OEI/2016-Ohio-Infant-Mortality-Report-FINAL.pdf?la=en>)

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

- From 2012-2016, there was an average of 3,367 live births per year in Lorain County.

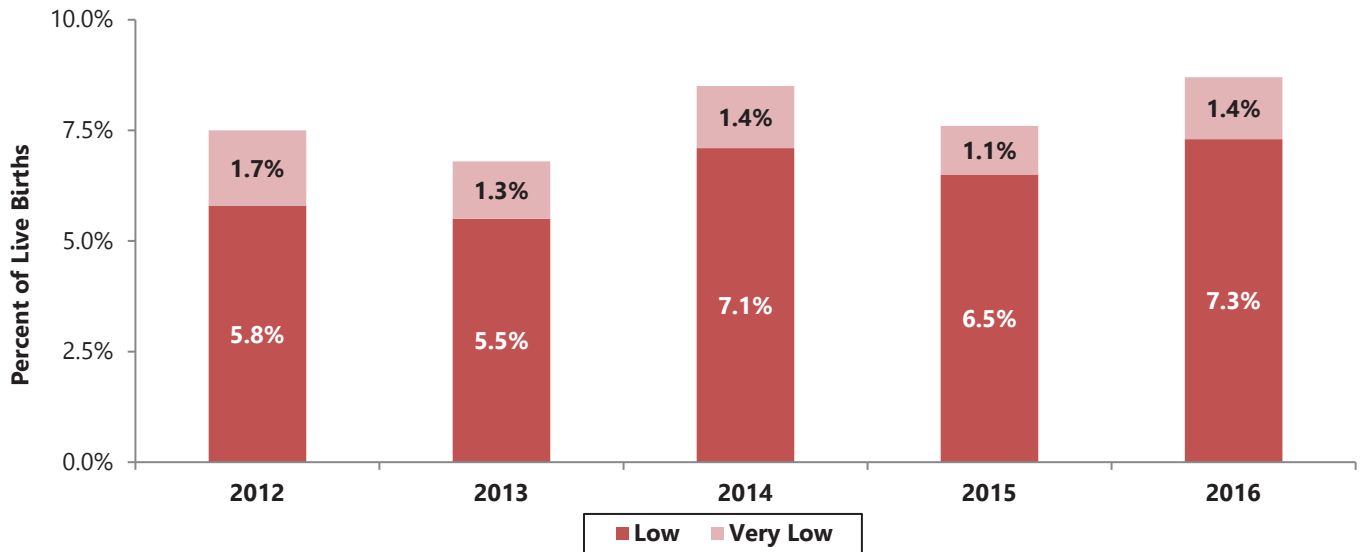


(Source for graphs: ODH, Ohio Public Health Data Warehouse Updated 2-7-18)

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

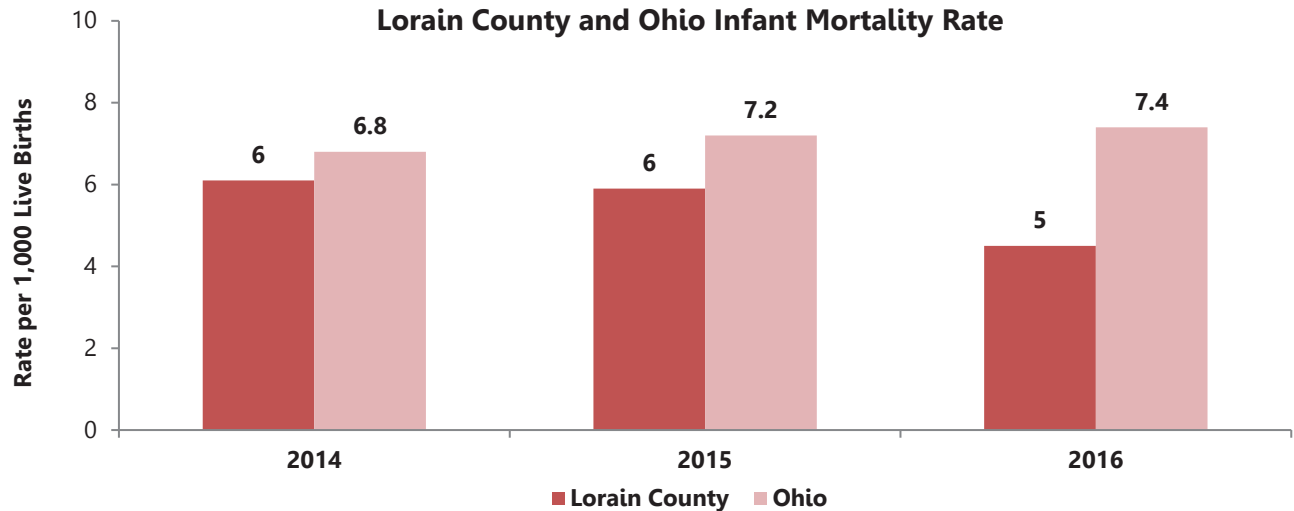
- Low birth weight is defined as weighing less than 2,500 grams or 5 pounds, 8 ounces, but greater than 3 pounds, 4 ounces. Very low birth weight is a term used to describe babies who are born weighing less than 3 pounds, 4 ounces.
- In 2016, approximately 8.7% of the Lorain County births were low or very low birthweight.

Lorain County Low and Very Low Birthweight Births



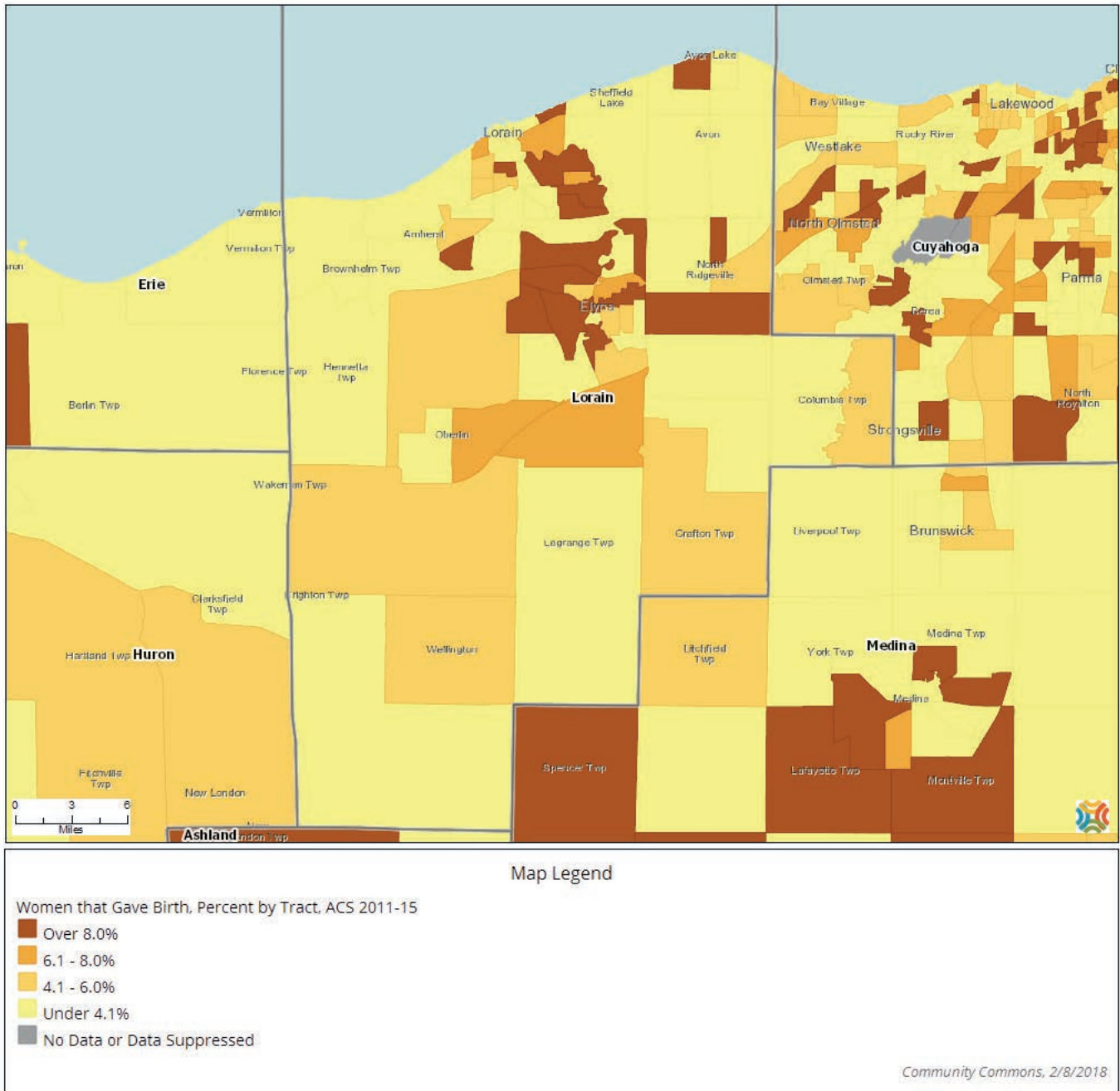
(Source: ODH, Ohio Public Health Data Warehouse Updated 2-7-18)

Lorain County and Ohio Infant Mortality Rate



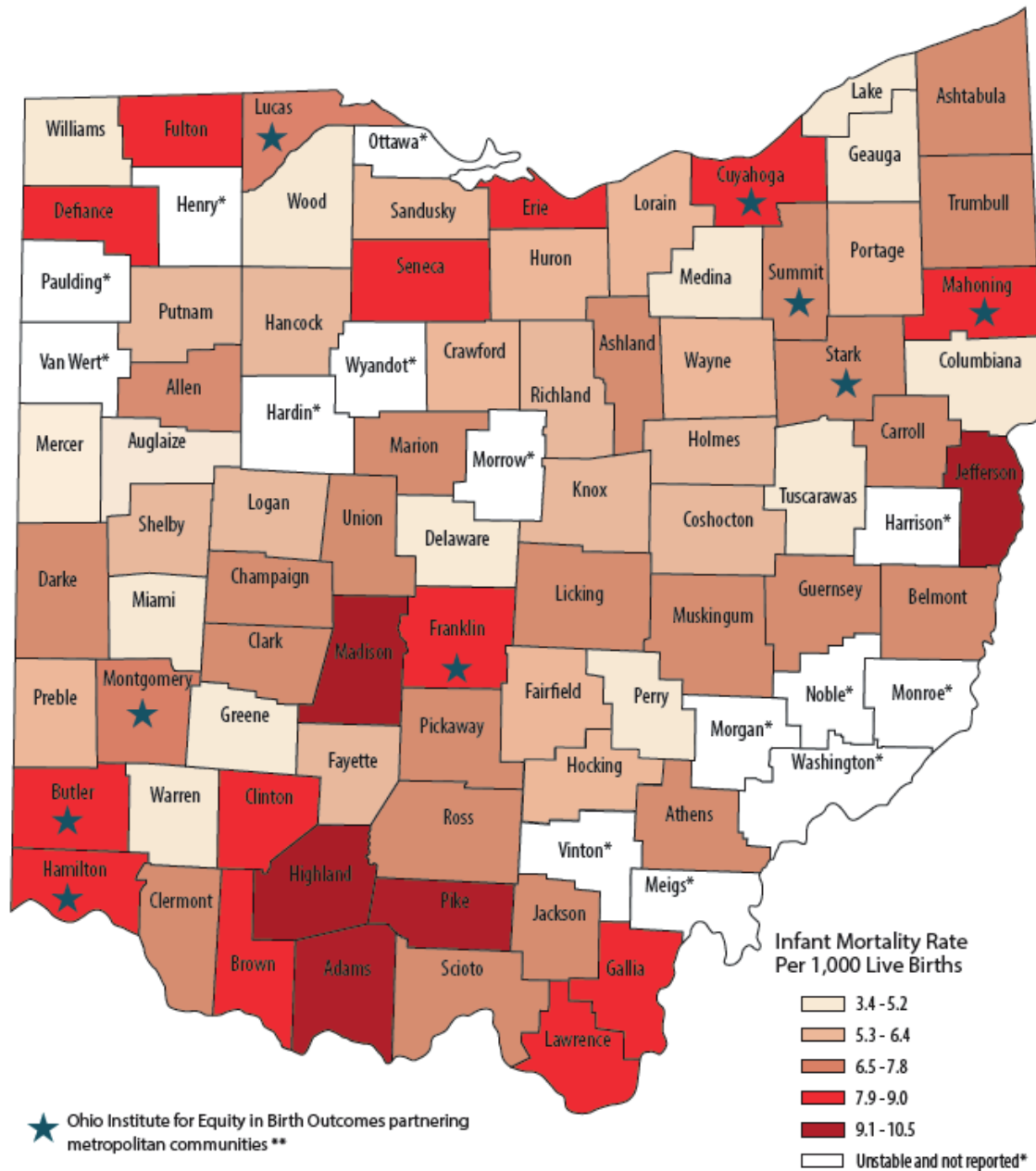
(Source: Ohio Department of Health, Bureau of Vital Statistics, Ohio Infant Mortality Data: General Findings Reports from 2014-2016, obtained from: <https://www.odh.ohio.gov/odhprograms/cfhs/octpim/latestoimd.aspx>)

Lorain County Women that Gave Birth, Percent by Census Tract, American Communities Survey, 2011-2015



(Source: American Community Survey, 2011-2015, 5 Year Estimates, as compiled by Community Commons, 2/8/18)

Ohio Infant Mortality Average 5-Year Rate by County, 2012-2016



Source: Ohio Department of Health, Bureau of Vital Statistics.

Infant mortality rate county groupings were determined by Jenks Natural Breaks. This method finds the best way to split up the ranges by minimizing the variation within each group, so the areas within each color are as close as possible in value to each other.

* Rates based on fewer than 10 infant deaths are unstable and not reported.

** Ohio Institute for Equity in Birth Outcomes partnering communities seek to improve overall birth outcomes and reduce racial and ethnic disparities in infant mortality. These metropolitan areas accounted for 59 percent of all infant deaths, and 86 percent of black infant deaths, in Ohio in 2016.

(Source: Ohio Department of Health, Bureau of Vital Statistics, 2016 Ohio Infant Mortality Data: General Findings, obtained from: <https://www.odh.ohio.gov/lmedia/ODH/ASSETS/Files/cfhs/OEI/2016-Ohio-Infant-Mortality-Report-FINAL.pdf?la=en>)

RURAL HEALTH

Key Findings

In 2015, 7% of rural Lorain County adults did not have health care coverage. Forty percent (40%) of adults keep firearms in and around their household. Thirty-seven percent (37%) of rural women have had a mammogram in the past year.

General Health and Health Care

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

- In 2015, 7% of rural Lorain County adults did not have health care coverage, compared to 11% of the rest of Lorain County adults.
- Over half (54%) of rural Lorain County adults rated their health as excellent or very good, compared to 47% of the rest of Lorain County adults.
- Rural adults were less likely to have been diagnosed with:
 - Asthma (5% compared to 15% of the rest of Lorain County adults).
 - High blood cholesterol (29% compared to 33% of the rest of Lorain County adults).
- Rural adults were more likely to have been diagnosed with:
 - Arthritis (47% compared to 34% of the rest of Lorain County adults).
 - High blood pressure (40% compared to 36% of the rest of Lorain County adults).
- Rural adults were equally as likely to have been diagnosed with:
 - Diabetes (11%).
- Rural adults were less likely to:
 - Have used marijuana in the past 6 months (2% compared to 10% of the rest of Lorain County adults).
 - Have consumed alcohol in the past 30 days (56% compared to 61% of the rest of Lorain County adults).
 - Have had 2 or more sexual partners in the past year (2% compared to 8% of the rest of Lorain County adults).
 - Be considered overweight or obese (60% compared to 69% of the rest of Lorain County adults).
 - Have had a clinical breast exam in the past year (45% compared to 53% of the rest of Lorain County adults).
 - Have had a pap smear in the past year (29% compared to 38% of the rest of Lorain County adults).
 - Have been to the dentist in the past year (59% compared to 66% of the rest of Lorain County adults).
- Rural adults were more likely to:
 - Have had a PSA test in the past year (37% compared to 27% of the rest of Lorain County adults).
 - Have had a digital rectal exam in the past year (31% compared to 17% of the rest of Lorain County adults).
 - Have had a skin cancer screening in the past 2 years (23% compared to 16% of the rest of Lorain County adults).
 - Have been to the doctor for a routine check-up in the past year (72% compared to 64% of the rest of Lorain County adults).

- Have had a limiting physical, mental or emotional problem (40% compared to 35% of the rest of Lorain County adults).
- Keep firearms in their household (40% compared to 31% of the rest of Lorain County adults).
- Consider their neighborhood to be extremely or quite safe (87% compared to 75% of all Lorain County adults).

Adult Comparisons	Lorain County Rural Adults 2011	Lorain County Rural Adults 2015	Lorain County 2015	Ohio 2016	U.S. 2016
Rated their health as excellent or very good	50%	54%	47%	51%	52%
Uninsured	7%	7%	11%	7%	10%
Visited a doctor for a routine checkup in the past year	51%	72%	64%	75%	71%
Visited the dentist in the past year	63%	59%	66%	68%	66%
Obese	35%	34%	37%	32%	30%
Overweight	33%	32%	34%	35%	35%
Diagnosed with diabetes	13%	11%	11%	11%	11%
Diagnosed with asthma	11%	5%	15%	14%	14%
Current drinker (drank alcohol at least once in the past month)	61%	56%	61%	53%	54%
Current smoker (currently smoke some or all days)	24%	20%	22%	23%	17%

(Source: 2011 Lorain County Health Assessment, 2015 Lorain County Health Assessment and 2016 BRFSS)

Suburban Health

Key Findings

Three percent (3%) of suburban adults did not have health care coverage. One-third (33%) of adults had high blood pressure. Fourteen percent (14%) were current smokers. Ninety-four percent (94%) consider their neighborhood to be extremely or quite safe.

General Health and Health Care

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

- In 2015, 3% of suburban Lorain County adults did not have health care coverage, compared to 11% of the rest of Lorain County adults.
- Sixty-two percent (62%) of suburban Lorain County adults rated their health as excellent or very good, compared to 47% of the rest of Lorain County adults.
- Suburban adults were less likely to have been diagnosed with:
 - Arthritis (29% compared to 34% of the rest of Lorain County adults).
- Suburban adults were equally as likely to have been diagnosed with:
 - Diabetes (11%).
- Suburban adults were more likely to:
 - Have consumed alcohol in the past 30 days (71% compared to 61% of the rest of Lorain County adults).
 - Have had a clinical breast exam in the past year (63% compared to 53% of the rest of Lorain County adults).
 - Have had a pap smear in the past year (42% compared to 38% of the rest of Lorain County adults).
 - Have had a PSA test in the past year (30% compared to 27% of the rest of Lorain County adults).
 - Have had a skin cancer screening in the past 2 years (19% compared to 16% of the rest of Lorain County adults).
 - Have had a colorectal cancer screening in the past 2 years (20% compared to 14% of the rest of Lorain County adults).
 - Have been to the dentist in the past year (77% compared to 66% of the rest of Lorain County adults).
 - Engage in some type of physical activity or exercise for at least 30 minutes 3 or more days per week (59% compared to 53% of the rest of Lorain County adults).
 - Keep firearms in their household (35% compared to 31% of the rest of Lorain County adults).
 - Consider their neighborhood to be extremely or quite safe (94% compared to 75% of all Lorain County adults).
- Suburban adults were less likely to:
 - Have used marijuana in the past 6 months (6% compared to 10% of the rest of Lorain County adults).
 - Have misused prescription medication in the past 6 months (5% compared to 11% of the rest of Lorain County adults).
 - Be a current smoker (14% compared to 22% of the rest of Lorain County adults).

- Have had 2 or more sexual partners in the past year (3% compared to 8% of the rest of Lorain County adults).
- Be considered overweight or obese (65% compared to 69% of the rest of Lorain County adults).
- Have a limiting physical, mental or emotional problem (26% compared to 35% of the rest of Lorain County adults).
- Suburban adults were equally as likely to:
 - Have survived a heart attack (3%).
 - Have had a mammogram in the past year (41%).
 - Have had a digital rectal exam in the past year (17%).
 - Have been diagnosed with diabetes (11%).
 - Eat 5 or more servings of fruits and vegetables per day (5%).

Adult Comparisons	Suburban Lorain County 2011	Suburban Lorain County 2015	Lorain County 2015	Ohio 2016	U.S. 2016
Rated their health as excellent or very good	56%	62%	47%	51%	52%
Uninsured	7%	3%	11%	7%	10%
Visited a doctor for a routine checkup in the past year	61%	63%	64%	75%	71%
Visited the dentist in the past year	72%	77%	66%	68%	66%
Obese	26%	30%	37%	32%	30%
Overweight	33%	32%	34%	35%	35%
Diagnosed with diabetes	9%	11%	11%	11%	11%
Diagnosed with asthma	16%	14%	15%	14%	14%
Current drinker (drank alcohol at least once in the past month)	66%	71%	61%	53%	54%
Current smoker (currently smoke some or all days)	13%	14%	22%	23%	17%

(Source: 2011 Lorain County Health Assessment, 2015 Lorain County Health Assessment and 2016 BRFSS)

Urban Health

Key Findings

Nearly one-fifth (17%) of Elyria and Lorain City adults did not have health care coverage. Nearly one-third (32%) of adults had high blood cholesterol. Seventy-three percent (73%) were classified as overweight or obese, and 27% were current smokers.

General Health and Health Care

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

- In 2015, 17% of Elyria and Lorain City adults did not have health care coverage, compared to 11% of the rest of Lorain County adults.
- Thirty-six percent (36%) of Elyria and Lorain City adults rated their health as excellent or very good, compared to 47% of the rest of Lorain County adults.
- Elyria and Lorain City adults were equally as likely to have been diagnosed with:
 - Cancer (11%).
 - Diabetes (11%).
 - High blood pressure (36%).
- Elyria and Lorain City adults were less likely to:
 - Have consumed alcohol in the past 30 days (57% compared to 61% of the rest of Lorain County adults).
 - Have had a clinical breast exam in the past year (48% compared to 53% of the rest of Lorain County adults).
 - Have had a pap smear in the past year (36% compared to 38% of the rest of Lorain County adults).
 - Have had a PSA test in the past year (22% compared to 27% of the rest of Lorain County adults).
 - Have had a digital rectal exam in the past year (14% compared to 17% of the rest of Lorain County adults).
 - Have had a skin cancer screening in the past 2 years (12% compared to 16% of the rest of Lorain County adults).
 - Have had a colorectal cancer screening in the past 2 years (10% compared to 14% of the rest of Lorain County adults).
 - Have been to the dentist in the past year (60% compared to 66% of the rest of Lorain County adults).
 - Engage in some type of physical activity or exercise for at least 30 minutes 3 or more days per week (49% compared to 53% of the rest of Lorain County adults).
 - Keep firearms in their household (26% compared to 31% of the rest of Lorain County adults).
 - Consider their neighborhood to be extremely or quite safe (59% compared to 75% of all Lorain County adults).
- Elyria and Lorain City adults were more likely to:
 - Have used marijuana in the past 6 months (16% compared to 10% of the rest of Lorain County adults).
 - Have misused prescription medication in the past 6 months (16% compared to 11% of the rest of Lorain County adults).
 - Be a current smoker (27% compared to 22% of the rest of Lorain County adults).
 - Have had a mammogram in the past year (45% compared to 41% of the rest of Lorain County adults).
 - Have had 2 or more sexual partners in the past year (13% compared to 8% of the rest of Lorain County adults).
 - Be considered overweight or obese (73% compared to 69% of the rest of Lorain County adults).
- Elyria and Lorain City adults were equally as likely to:
 - Have survived a heart attack (3%).

Adult Comparisons	City of Elyria 2011	City of Lorain 2011	Urban Lorain County 2015	Lorain County 2015	Ohio 2016	U.S. 2016
Rated their health as excellent or very good	48%	39%	36%	47%	51%	52%
Uninsured	16%	13%	17%	11%	7%	10%
Visited a doctor for a routine checkup in the past year	52%	55%	63%	64%	75%	71%
Visited the dentist in the past year	54%	52%	60%	66%	68%	66%
Obese	37%	29%	30%	37%	32%	30%
Overweight	34%	39%	33%	32%	35%	35%
Diagnosed with diabetes	13%	14%	11%	11%	11%	11%
Diagnosed with asthma	14%	14%	18%	15%	14%	14%
Current drinker (drank alcohol at least once in the past month)	60%	48%	57%	61%	53%	54%
Current smoker (currently smoke some or all days)	25%	24%	27%	22%	23%	17%

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

(Source: 2011 Lorain County Health Assessment, 2015 Lorain County Health Assessment and 2016 BRFSS)

Youth Health: Weight Status

Key Findings

During the fall of 2014, Communities that Care of Lorain County conducted the PRIDE survey in 6th, 8th and 10th grades throughout 11 districts in the county. Nine percent (9%) of Lorain County 6th grade youth ate 4 or more servings of fruit per day. 76% of Lorain County 8th grade youth participated in at least 60 minutes of physical activity on 3 or more days in the past week. Over one-fourth (29%) of 10th grade youth spent 3 or more hours watching TV on an average day.

6th Grade Nutrition & Physical Activity

- In 2014, 9% of Lorain County 6th grade youth ate 4 or more servings of fruit per day. 37% ate 1 to 3 servings of fruits per day. 9% did not eat any fruit during the past 7 days.
- Seventy percent (70% of Lorain County 6th grade youth participated in at least 60 minutes of physical activity on 3 or more days in the past week. 48% did so on 5 or more days in the past week, and 27% did so every day in the past week. 12% of youth did not participate in at least 60 minutes of physical activity on any day in the past week.
- One-third (33%) of 6th grade youth spent 3 or more hours watching TV on an average day.

8th Grade Nutrition & Physical Activity

- Six percent (6%) of Lorain County 8th grade youth ate 4 or more servings of fruit per day. 38% ate 1 to 3 servings of fruits per day. 10% did not eat any fruit during the past 7 days.
- About three-fourths (76%) of Lorain County youth participated in at least 60 minutes of physical activity on 3 or more days in the past week. 52% did so on 5 or more days in the past week, and 30% did so every day in the past week. 9% of youth did not participate in at least 60 minutes of physical activity on any day in the past week.
- About one-third (32%) of youth spent 3 or more hours watching TV on an average day.

10th Grade Nutrition & Physical Activity

- Seven percent (7%) of Lorain County 10th grade youth ate 4 or more servings of fruit per day. 33% ate 1 to 3 servings of fruits per day. 13% did not eat any fruit during the past 7 days.
- In 2014, 73% of Lorain County 10th grade youth participated in at least 60 minutes of physical activity on 3 or more days in the past week. 48% did so on 5 or more days in the past week, and 25% did so every day in the past week. 11% of youth did not participate in at least 60 minutes of physical activity on any day in the past week.
- Over one-fourth (29%) of youth spent 3 or more hours watching TV on an average day.

Youth Comparisons	Lorain County 2014 6 th Grade	Lorain County 2014 8 th Grade	Lorain County 2014 10 th Grade
Physically active at least 60 minutes per day on every day in past week	27%	30%	25%
Physically active at least 60 minutes per day on 5 or more days in past week	48%	52%	48%
Did not participate in at least 60 minutes of physical activity on at least 1 day	12%	9%	11%
Watched TV 3 or more hours per day	33%	32%	29%

Youth Health: Tobacco Use

Key Findings

The 2014 Pride Survey Report indicated that 2% of Lorain County 6th grade youth and 17% of 10th grade youth had smoked cigarettes in the past year.

6th Grade Youth Tobacco Use Behaviors

- The 2014 Pride Survey Report indicated that 2% of Lorain County 6th grade youth had smoked cigarettes in the past year.
- Two percent (2%) of Lorain County youth were current smokers, having smoked at some time in the past 30 days.
- Three percent (3%) of Lorain County youth used an e-cigarette, e-cigar, or e-hookah in the past 30 days.
- The average age of onset for smoking was 12.0 years old.
- Lorain County youth used tobacco in the following places: home (1%), friend's house (1%) and other (1%). No one reported using tobacco in school or in a car.
- Lorain County youth indicated they used tobacco: after school (<1%), week nights (<1%) and weekends (2%). No one reported using tobacco before or during school.

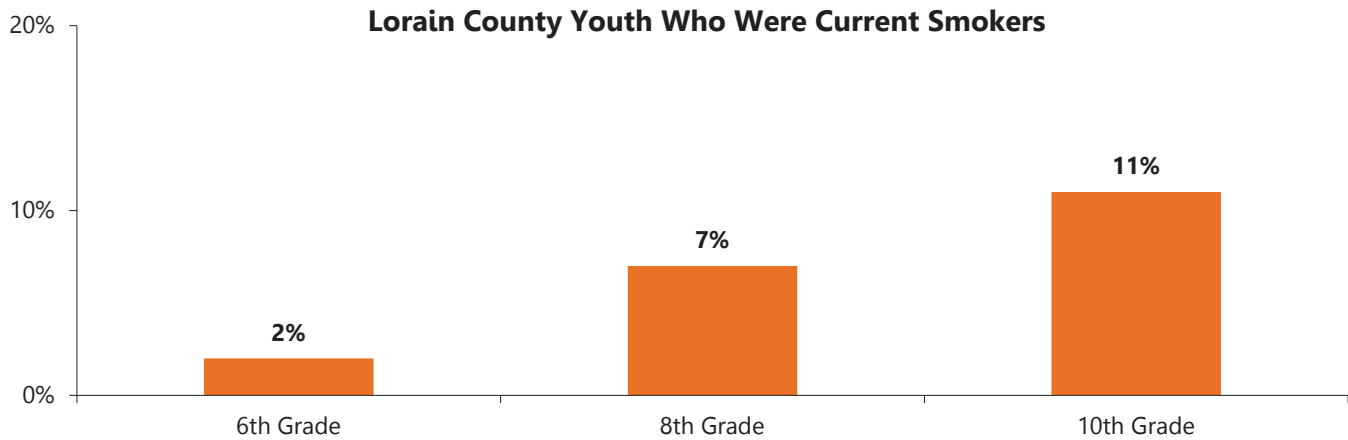
8th Grade Youth Tobacco Use Behaviors

- The 2014 Pride Survey Report indicated that 10% of Lorain County 8th grade youth had smoked cigarettes in the past year.
- Seven percent (7%) of Lorain County youth were current smokers, having smoked at some time in the past 30 days.
- Nine percent (9%) of Lorain County youth used an e-cigarette, e-cigar, or e-hookah in the past 30 days.
- The average age of onset for smoking was 12.0 years old.
- Lorain County youth used tobacco in the following places: home (4%), friend's house (4%), car (1%), school (<1%), and other (3%).
- Lorain County youth indicated they used tobacco: before school (1%), during school (<1%), after school (2%), week nights (2%) and weekends (7%).

10th Grade Youth Tobacco Use Behaviors

- The 2014 Pride Survey Report indicated that 17% of Lorain County 10th grade youth had smoked cigarettes in the past year.
- Eleven percent (11%) of Lorain County youth were current smokers, having smoked at some time in the past 30 days.
- Fourteen percent (14%) of Lorain County youth used an e-cigarette, e-cigar or e-hookah in the past 30 days.
- The average age of onset for smoking was 13.3 years old.
- Lorain County youth used tobacco in the following places: home (6%), school (1%), car (4%), friend's house (9%) and other (6%).
- Lorain County youth indicated they used tobacco: before school (3%), during school (1%), after school (6%), week nights (5%) and weekends (10%).

The following graph shows the percentage of Lorain County youth who smoked cigarettes in the past month. Examples of how to interpret the information include: 2% of Lorain County 6th grade youth were current smokers, 7% of 8th grade youth smoked, and 11% of 10th grade youth were current smokers.



14% of Lorain County 10th grade youth used an e-cigarette, e-cigar, or e-hookah in the past 30 days.

Availability of Tobacco	6 th Grade	8 th Grade	10 th Grade
Very Easy	2%	12%	21%
Fairly Easy	3%	14%	22%
Fairly Difficult	3%	7%	10%
Very Difficult	3%	3%	4%
Don't know/Can not get	89%	65%	44%

Youth Comparisons	Lorain County 2014 6 th Grade	Lorain County 2014 8 th Grade	Lorain County 2014 10 th Grade
Smoked cigarettes in the past year	2%	10%	17%
Current smokers	2%	7%	11%

E-Cigarette Use Among Youth and Young Adults

- E-cigarettes are now the most commonly used tobacco product among youth, surpassing conventional cigarettes in 2014.
- E-cigarette aerosol is not harmless “water vapor”. It can contain harmful and potentially harmful constituents, including nicotine. Nicotine exposure during adolescence can cause addiction and can harm the developing adolescent brain.
- The most recent estimates available show that 13.5% of middle school students (2015), 37.7% of high school students (2015), and 35.8% of young adults (2013–2014) had ever used an e-cigarette.
- Among middle and high school students, both ever and past-30-day e-cigarette use have more than tripled since 2011.
- The most recent data available show that the prevalence of past-30-day use of e-cigarettes is similar among high school students (16% in 2015, 13.4% in 2014) and young adults 18–24 years of age (13.6% in 2013–2014) compared to middle school students (5.3% in 2015, 3.9% in 2014) and adults 25 years of age and older (5.7% in 2013–2014).
- In 2015, 58.8% of high school students who were current users of combustible tobacco products were also current users of e-cigarettes.
- E-cigarette products can be used as a delivery system for cannabinoids and potentially for other illicit drugs. More specific surveillance measures are needed to assess the use of drugs other than nicotine in e-cigarettes.

Youth Health: Alcohol Use

Key Findings

Two percent (2%) of Lorain County 6th grade youth were current drinkers, having had a drink at some time in the past 30 days. The 2014 Pride Survey Report indicated that 19% of Lorain County 8th grade youth had alcohol in the past year.

6th Grade Youth Alcohol Use Behaviors

- The 2014 Pride Survey Report indicated that 4% of Lorain County youth had alcohol in the past year.
- Two percent (2%) of Lorain County youth were current drinkers, having had a drink at some time in the past 30 days.
- The average age of onset for drinking was 10.8 years old.
- Lorain County youth used alcohol in the following places: home (2%), car (<1%), friend's house (1%) and other (2%). No one reported using alcohol at school.
- Lorain County youth indicated they used alcohol: before school (<1%), during school (<1%), after school (1%) and weekends (2%). No one reported using alcohol on a week night.
- In the past 30 days, 8% of youth had ridden in a car driven by someone who had been drinking alcohol.

8th Grade Youth Alcohol Use Behaviors

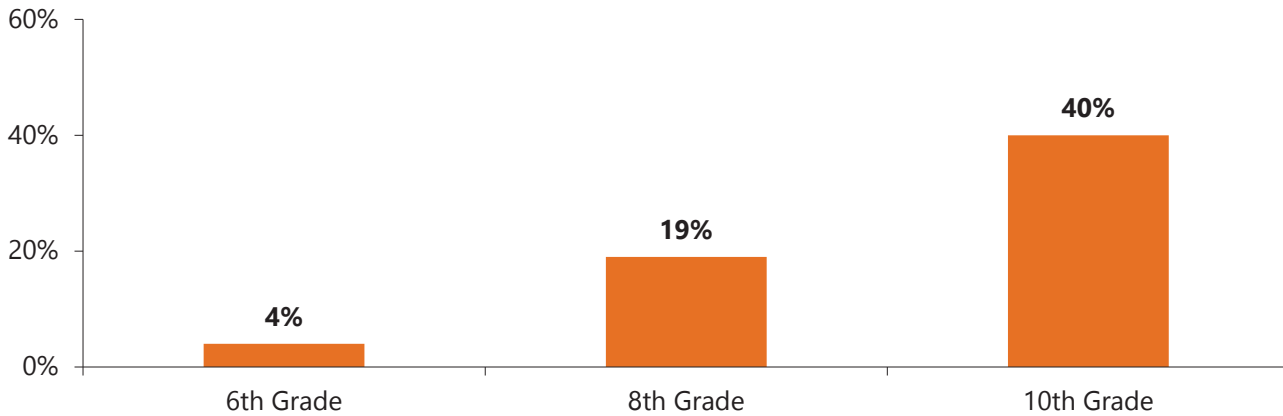
- The 2014 Pride Survey Report indicated that 19% of Lorain County youth had alcohol in the past year.
- One-tenth (10%) of Lorain County youth were current drinkers, having had a drink at some time in the past 30 days.
- The average age of onset for drinking was 12.0 years old.
- Lorain County youth used alcohol in the following places: home (10%), school (<1%), car (1%), friend's house (7%) and other (5%).
- Lorain County youth indicated they used alcohol: before school (<1%), during school (<1%), after school (2%), week nights (2%) and weekends (13%).
- In the past 30 days, 15% of youth had ridden in a car driven by someone who had been drinking alcohol. 1% of youth drivers had driven a car themselves after drinking alcohol.

10th Grade Youth Alcohol Use Behaviors

- The 2014 Pride Survey Report indicated that 40% of Lorain County youth had alcohol in the past year.
- Nearly one-fourth (22%) of Lorain County youth were current drinkers, having had a drink at some time in the past 30 days.
- The average age of onset for drinking was 13.5 years old.
- Lorain County youth used alcohol in the following places: home (16%), school (1%), car (1%), friend's house (21%) and other (9%).
- Lorain County youth indicated they used alcohol: before school (1%), during school (1%), after school (3%), week nights (4%) and weekends (29%).
- In the past 30 days, 12% of youth had ridden in a car driven by someone who had been drinking alcohol. 2% of youth drivers had driven a car themselves after drinking alcohol.

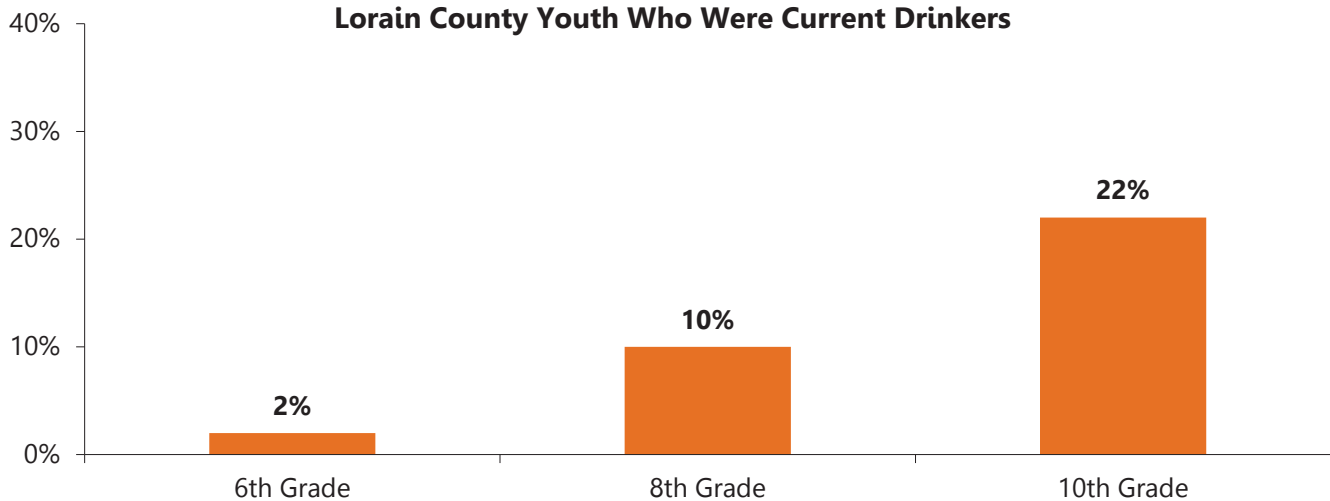
The following graphs show the percentage of Lorain County youth who had drunk alcohol in the past year and those who are current drinkers. Examples of how to interpret the information include: 4% of Lorain County 6th grade youth had drunk in the past year: 19% of 8th grade youth and 40% of 10th grade youth.

Lorain County Youth Who Drank Alcohol In The Past Year



The 2014 Pride Survey Report indicated that 40% of Lorain County 10th grade youth drank alcohol in the past year.

Lorain County Youth Who Were Current Drinkers



Availability of Alcohol to Lorain County Youth

Availability	6 th Grade	8 th Grade	10 th Grade
Very Easy	4%	14%	22%
Fairly Easy	4%	16%	25%
Fairly Difficult	3%	7%	13%
Very Difficult	4%	5%	4%
Don't know/Can't get	84%	58%	36%

Youth Comparisons	Lorain County 2014 6th grade	Lorain County 2014 8th grade	Lorain County 2014 10th grade
Youth who had alcohol in the past year	4%	19%	40%
Current drinker	2%	10%	22%
Rode with someone who was drinking	8%	15%	12%
Drank and drove (of youth drivers)	N/A	1%	2%

N/A-not available

Underage Drinking in the U.S.

Excessive drinking is responsible for more than 4,300 deaths among underage youth each year, and cost the U.S. \$24 billion in economic costs in 2010.

On average, underage drinkers consume more drinks per drinking occasion than adult drinkers.

In 2010, there were approximately 189,000 emergency room visits by persons under age 21 for injuries and other conditions linked to alcohol.

Youth who drink alcohol are more likely to experience:

- School problems, such as higher absence and poor or failing grades.
- Social problems, such as fighting and lack of participation in youth activities.
- Legal problems, such as arrest for driving or physically hurting someone while drunk.
- Physical problems, such as hangovers or illnesses.
- Unwanted, unplanned, and unprotected sexual activity.
- Disruption of normal growth and sexual development.
- Physical and sexual assault.
- Alcohol-related car crashes and other unintentional injuries, such as burns, falls, and drowning.
- Higher risk for suicide and homicide.
- Memory problems.
- Abuse of other drugs.
- Changes in brain development that may have life-long effects.
- Death from alcohol poisoning.

In general, the risk of youth experiencing these problems is greater for those who binge drink than for those who do not binge drink,

Youth who start drinking before age 15 years are five times more likely to develop alcohol dependence or abuse later in life than those who begin drinking at or after age 21 years.

Youth Health: Drug Use

Key Findings

The 2014 Pride Survey Report indicated that 4% of Lorain County 6th grade youth had used illicit drugs in the past year. Seven percent (7%) of Lorain County 8th grade youth used marijuana or hashish in the past 30 days.

6th Grade Youth Drug Use

- The 2014 Pride Survey Report indicated that 4% of Lorain County 6th grade youth had used illicit drugs in the past year.
- Two percent (2%) of Lorain County youth had used marijuana or hashish in the past 30 days.
- The average age of onset for marijuana use for the 6th grade youth was 12.8 years old.
- Lorain County youth smoked marijuana in the following places: friend's house (1%), home (<1%), school (<1%) and other (1%). No one reported smoking marijuana in a car.
- Lorain County youth indicated they smoked marijuana: on weekends (1%), week nights (<1%) before school (<1%), and during school (<1%). No one reported smoking marijuana after school.
- Lorain County youth have tried the following in the past year:
 - 1% used inhalants
 - 1% used marijuana
 - 1% used steroids
 - 1% used over-the-counter medications
 - 1% used methamphetamines
 - 1% used heroin
 - 1% used cocaine
 - <1% used ecstasy/MDMA
 - <1% used hallucinogens
- One percent (1%) of Lorain County youth used prescription drugs not prescribed for them in the past 30 days.
- Two percent (2%) of youth used over-the-counter drugs (to get high) in the past 30 days.

8th Grade Youth Drug Use

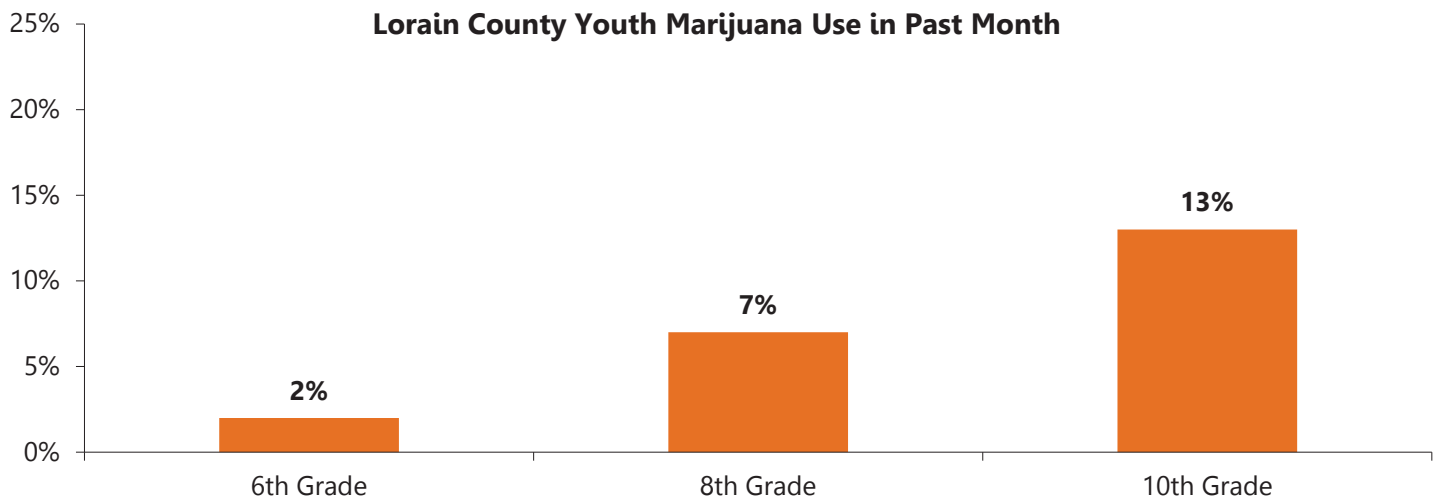
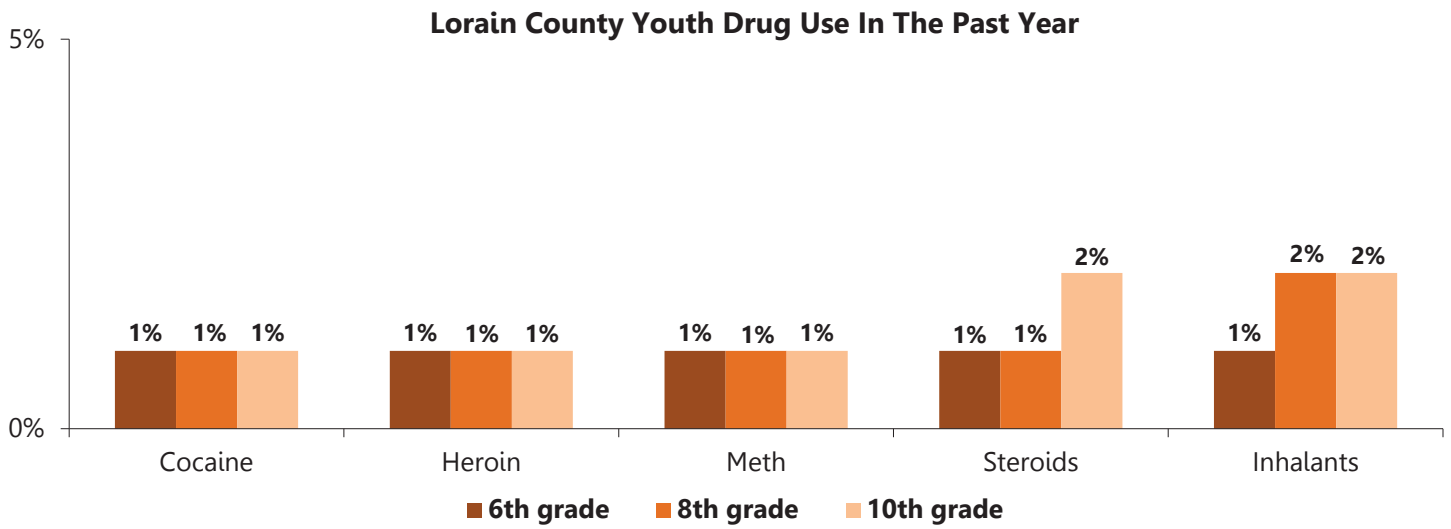
- The 2014 Pride Survey Report indicated that 11% of Lorain County 8th grade youth used illicit drugs in the past year.
- Seven percent (7%) of Lorain County 8th grade youth used marijuana or hashish in the past 30 days.
- The average age of onset for marijuana use for the 8th grade youth was 12.5 years old.
- Lorain County youth smoked marijuana in the following places: friend's house (5%), home (3%), car (1%) school (<1%) and other (4%).
- Lorain County youth indicated they smoked marijuana: on weekends (7%), week nights (1%), after school (2%), before school (<1%), and during school (<1%).

- Lorain County 8th grade youth have tried the following in the past year:
 - 9% used marijuana
 - 2% used inhalants
 - 2% used over-the-counter medications
 - 1% used steroids
 - 1% used ecstasy/MDMA
 - 1% used methamphetamines
 - 1% used heroin
 - 1% used cocaine
 - 1% used hallucinogens
- Three percent (3%) of Lorain County youth used prescription drugs not prescribed for them in the past 30 days.
- Two percent (2%) of youth used over-the-counter drugs (to get high) in the past 30 days.

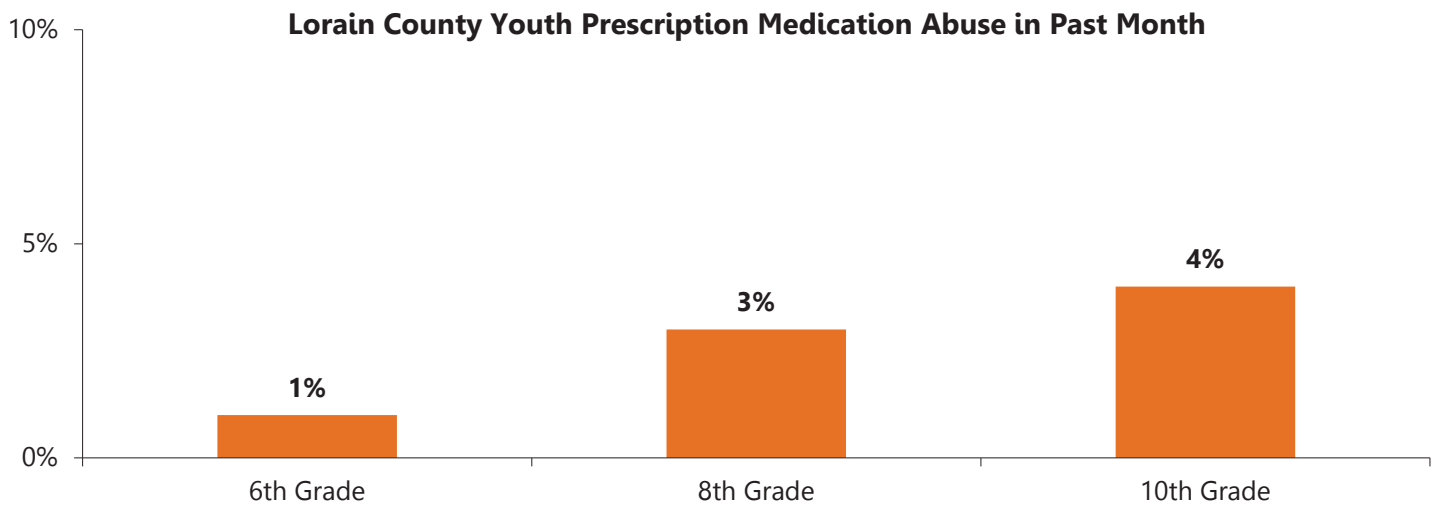
10th Grade Youth Drug Use

- The 2014 Pride Survey Report indicated that 22% of Lorain County 10th grade youth had used illicit drugs in the past year.
- Thirteen percent (13%) of Lorain County youth used marijuana or hashish in the past 30 days.
- The average age of onset for marijuana use for 10th grade youth was 13.6 years old.
- Lorain County youth smoked marijuana in the following places: friend's house (13%), home (5%), car (5%), school (1%) and other (8%).
- Lorain County youth indicated they smoked marijuana: on weekends (15%), week nights (5%), after school (5%), before school (2%), and during school (1%).
- Lorain County youth have tried the following in the past year:
 - 19% used marijuana
 - 3% used hallucinogens
 - 3% used over-the-counter medications
 - 2% used inhalants
 - 2% used steroids
 - 2% used ecstasy/MDMA
 - 1% used methamphetamines
 - 1% used heroin
 - 1% used cocaine
- Four percent (4%) of Lorain County youth used prescription drugs not prescribed for them in the past 30 days.
- Two percent (2%) of youth used over-the-counter drugs (to get high) in the past 30 days.

The following graphs are data from the 2014 Pride Survey Report indicating youth drug use in the past year and marijuana use in the past 30 days. Examples of how to interpret the information include: 1% of 6th grade youth have used cocaine in the past month, and 2% of 8th grade youth have used inhalants in the past month.



The following graph is data from the 2014 Pride Survey Report indicating youth prescription medication abuse in the past month. Examples of how to interpret the information include: 4% of 10th grade youth have misused medications in the past month.



Youth Comparisons	Lorain County 2014 6 th grade	Lorain County 2014 8 th grade	Lorain County 2014 10 th grade
Used marijuana in the past month	2%	7%	13%
Used methamphetamines in the past year	1%	1%	1%
Used cocaine in the past year	1%	1%	1%
Used heroin in the past year	1%	1%	1%
Used steroids in the past year	1%	1%	2%
Used inhalants in the past year	1%	2%	2%
Used ecstasy/MDMA in the past year	<1%	1%	2%
Used prescription drugs not prescribed for them in the past month	1%	3%	4%

Drug Facts: Drugged Driving

- Vehicle accidents are the leading cause of death among youth people aged 16 to 19. When teens' relative lack of driving experience is combined with the use of marijuana or other substances that affect cognitive and motor abilities, the results can be tragic.
- According to the 2014 National Survey on Drug Use and Health (NSDUH), an estimated 10 million people aged 12 or older reported driving under the influence of illicit drugs during the year prior to being surveyed.
- After alcohol, THC (delta-9-tetrahydrocannabinol), the active ingredient in marijuana is the substance most commonly found in the blood of impaired drivers, fatally injured drivers, and motor vehicle crash victims. Studies in several localities have found that approximately 4 to 14 percent of drivers who sustained injury or died in traffic accidents tested positive for THC.
- One NHTSA study found that in 2009, 18 percent of drivers killed in a crash tested positive for at least one drug. A 2010 study showed that 1 percent of deadly crashes involved a drugged driver.

Youth Health: Mental Health

Key Findings

One-fifth (20%) of Lorain County 6th grade youth reported they felt so sad or hopeless almost every day for two weeks or more in a row that they stopped doing some usual activities. Nearly one-fifth (17%) of 10th grade youth reported they had seriously considered attempting suicide in the past 12 months.

6th Grade Youth Mental Health

- In 2014, one-fifth (20%) of Lorain County 6th grade youth reported they felt so sad or hopeless almost every day for two weeks or more in a row that they stopped doing some usual activities.
- Eight percent (8%) of youth reported they had seriously considered attempting suicide in the past 12 months.
- In the past year, 5% of Lorain County youth had attempted suicide. 3% of youth had made more than one attempt.
- Of those who attempted suicide, 1% resulted in an injury, poisoning, or overdose that had to be treated by a doctor or nurse.
- Lorain County youth reported talking about their concerns to the following when dealing with feelings of depression or suicide: parents or other relative (17%), best friend/girlfriend/boyfriend (14%), teacher (4%), school counselor/professional counselor (4%), pastor/priest/minister (2%) and scout master/club advisor/youth leader/coach (1%). 12% reported they had no one to talk to.
- Nearly three-fifths (59%) of Lorain County youth reported they did not have feelings of depression or suicide.
- Lorain County youth reported the following ways of dealing with anxiety, stress, or depression: talk to someone (51%), sleep (37%), exercise/hobby/journal (31%), break something/violent behavior/self-harm (9%), eat/shop/gamble (8%), use medication (2%), drink alcohol (1%), and use illegal drugs (1%).
- Almost half (46%) of youth reported they would seek help if they were dealing with anxiety, stress, depression or thoughts of suicide. Of youth who reported they would not seek help, the following reasons were reported: they can handle it themselves (19%), worried about what others might think (13%), no time (7%), cost (5%), their family would not support them (4%), and transportation (3%). 11% of youth did not know where to go.

8th Grade Youth Mental Health

- In 2014, over one-fourth (27%) of Lorain County 8th grade youth reported they felt so sad or hopeless almost every day for two weeks or more in a row that they stopped doing some usual activities.
- Fifteen percent (15%) of youth reported they had seriously considered attempting suicide in the past 12 months.
- In the past year, 7% of Lorain County youth had attempted suicide. 5% of youth had made more than one attempt.
- Of those who attempted suicide, 3% resulted in an injury, poisoning, or overdose that had to be treated by a doctor or nurse.
- Lorain County youth reported talking about their concerns to the following when dealing with feelings of depression or suicide: best friend/girlfriend/boyfriend (26%), parents or other relative (17%), school counselor/professional counselor (6%), teacher (3%), pastor/priest/minister (2%) and scout master/club advisor/youth leader/coach (2%). 16% reported they had no one to talk to.

- Over half (52%) of Lorain County youth reported they did not have feelings of depression or suicide.
- Lorain County youth reported the following ways of dealing with anxiety, stress, or depression: talk to someone (53%), sleep (43%), exercise/hobby/journal (37%), eat/shop/gamble (15%), break something/violent behavior/self-harm (12%), use medication (3%), drink alcohol (3%), and use illegal drugs (2%).
- Nearly half (48%) of youth reported they would seek help if they were dealing with anxiety, stress, depression or thoughts of suicide. Of youth who reported they would not seek help the following reasons were reported: they can handle it themselves (26%), worried about what others might think (18%), no time (9%), their family would not support them (7%), cost (6%), and transportation (2%). 10% of youth did not know where to go.

10th Grade Youth Mental Health

- In 2014, over one-third (36%) of Lorain County 10th grade youth reported they felt so sad or hopeless almost every day for two weeks or more in a row that they stopped doing some usual activities.
- Almost one-fifth (17%) of youth reported they had seriously considered attempting suicide in the past 12 months.
- In the past year, 6% of Lorain County youth had attempted suicide. 2% of youth had made more than one attempt.
- Of those who attempted suicide, 3% resulted in an injury, poisoning, or overdose that had to be treated by a doctor or nurse.
- Lorain County youth reported talking about their concerns to the following when dealing with feelings of depression or suicide: best friend/girlfriend/boyfriend (23%), parents or other relative (10%), school counselor/professional counselor (3%), teacher (2%), pastor/priest/minister (2%) and scout master/club advisor/youth leader/coach (1%). 20% reported they had no one to talk to.
- Forty-one percent (41%) of Lorain County youth reported they did not have feelings of depression or suicide.
- Lorain County 10th grade youth reported the following ways of dealing with anxiety, stress, or depression: sleep (45%), talk to someone (40%), exercise/hobby/journal (35%), eat/shop/gamble (13%), break something/violent behavior/self-harm (11%), use illegal drugs (6%), drink alcohol (5%), and use medication (3%).
- Over one-third (35%) of youth reported they would seek help if they were dealing with anxiety, stress, depression or thoughts of suicide. Of youth who reported they would not seek help the following reasons were reported: they can handle it themselves (28%), worried about what others might think (18%), cost (9%), no time (8%), their family would not support them (5%), and transportation (5%). 9% of youth did not know where to go.

Youth Suicide

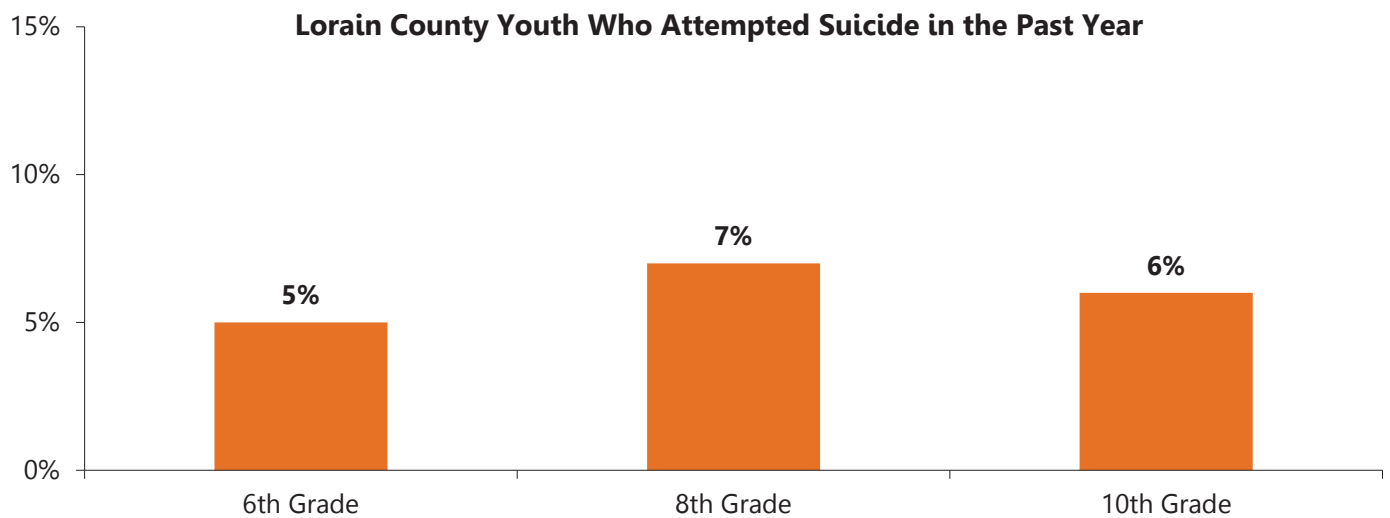
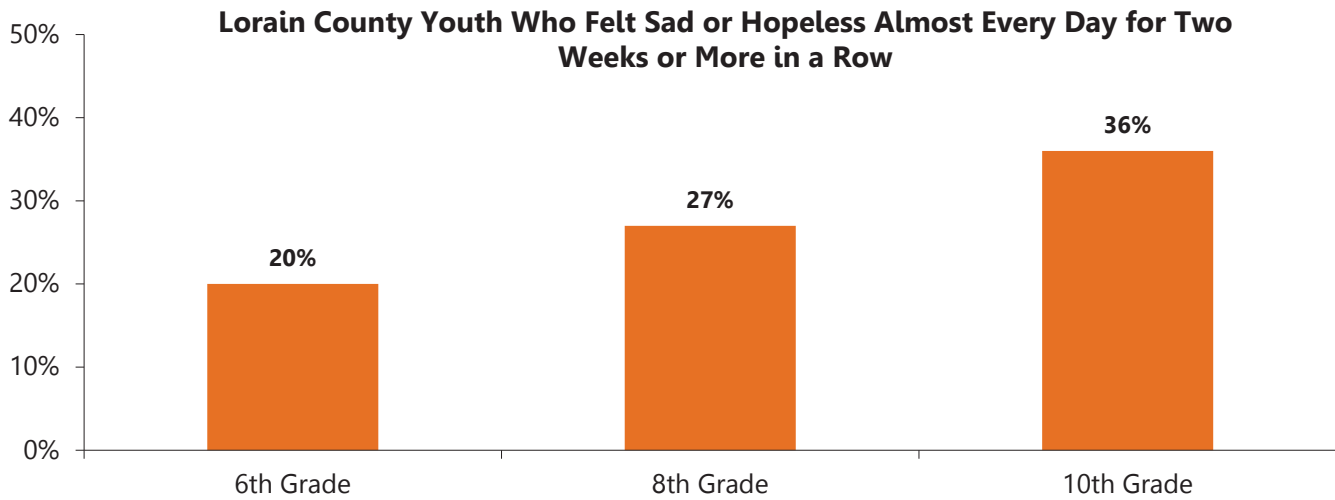
Suicide affects all youth, but some groups are at a higher risk than others. Boys are more likely than girls to die from suicide. Girls, however, are more likely to report attempting suicide than boys. Several factors can put a young person at risk for suicide. However, having these risk factors does not always mean that suicide will occur.

Risk Factors Include:

- | | |
|---|---------------------------------|
| — History of previous suicide attempts | — Family history of suicide |
| — History of depression or other mental illness | — Alcohol or drug abuse |
| — Stressful life event or loss | — Easy access to lethal methods |
| — Exposure to the suicidal behavior of others | — Incarceration |

(Source: CDC, Injury Center: Violence Prevention; Suicide Prevention; Youth Suicide, 2015)

The following graphs show the percentage of Lorain County youth who had felt sad or hopeless almost every day for two weeks or more in a row and attempted suicide in the past 12 months (i.e., the first graph shows that 20% of Lorain County youth in 6th grade had felt sad or hopeless for two weeks or more, 27% of 8th graders and 36% of 10th graders).



Youth Comparisons	Lorain County 2014 6th grade	Lorain County 2014 8th grade	Lorain County 2014 10th grade
Youth who had seriously considered attempting suicide in the past year	8%	15%	17%
Youth who had attempted suicide in the past year	5%	7%	6%
Youth who felt sad or hopeless almost every day for 2 or more weeks in a row	20%	27%	36%

Youth Health: Safety & Violence Issues

Key Findings

About one-quarter (24%) of Lorain County 10th grade youth had threatened to hurt another student by hitting, slapping or kicking. Sixteen percent (16%) of 10th grade youth hurt another student by hitting, slapping or kicking.

6th Grade Youth Violence-Related Behaviors & Personal Safety

- In 2014, 4% of Lorain County 6th grade youth had carried a knife, club or other weapon at school and 1% had carried had a handgun at school.
- The 2014 Pride Survey indicated that 1% of youth have threatened a student with a handgun, knife or club at school and an additional 1% of youth had hurt a student by using a handgun, knife or club at school.
- Seventeen percent (17%) of Lorain County 6th grade youth had threatened to hurt another student by hitting, slapping or kicking. 14% of youth hurt another student by hitting, slapping or kicking.
- Six percent (6%) of youth had been threatened with a handgun, knife or club by another student. 31% of youth indicated that another student had threatened to hit, slap or kick them.
- In the past 30 days, 8% of youth had ridden in a car driven by someone who had been drinking alcohol.
- Seventy-two percent (72%) of Lorain County 6th grade youth always wore a seatbelt when riding in a car.

8th Grade Youth Violence-Related Behaviors & Personal Safety

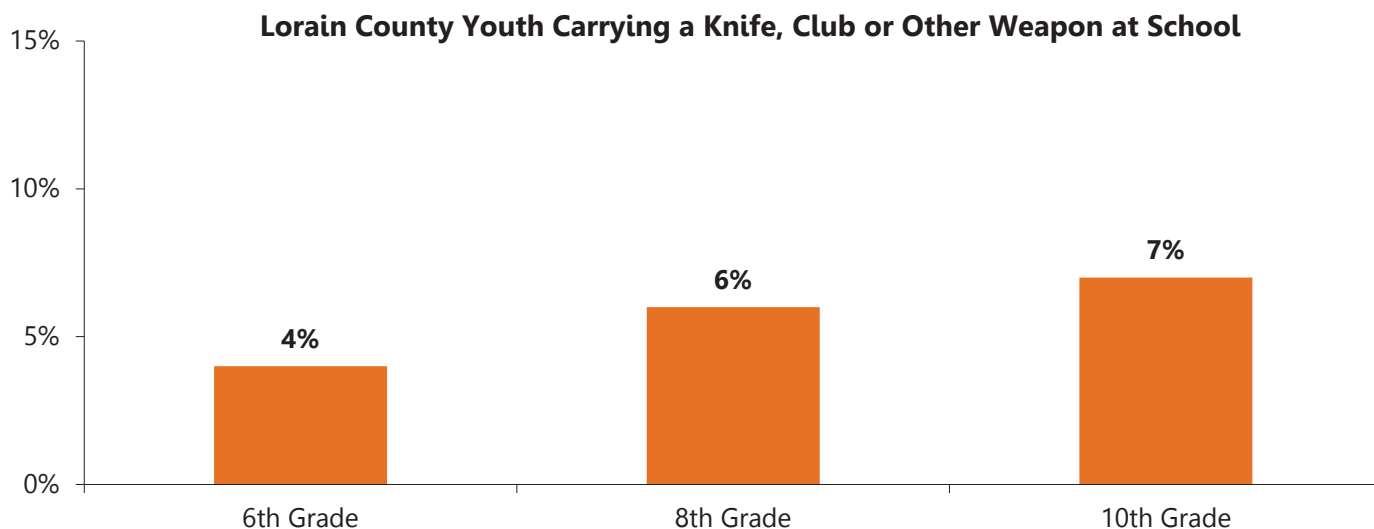
- In 2014, 2% of youth had carried a handgun at school. 6% had carried had a knife, club or other weapon at school.
- Two percent (2%) of youth had threatened a student with a handgun, knife or club at school. 1% of youth hurt a student by using a handgun, knife or club at school.
- Nearly one-third (29%) of Lorain County 8th grade youth had threatened to hurt another student by hitting, slapping or kicking. 19% of youth hurt another student by hitting, slapping or kicking.
- Eight percent (8%) of youth had been threatened with a handgun, knife or club by another student. 35% of youth indicated that another student had threatened to hit, slap or kick them.
- In the past 30 days, 15% of youth had ridden in a car driven by someone who had been drinking alcohol.
- Half (50%) of Lorain County 8th grade youth always wore a seatbelt when riding in a car.

10th Grade Youth Violence-Related Behaviors & Personal Safety

- In 2014, 1% of youth had carried a handgun at school. 7% had carried had a knife, club or other weapon at school.
- Two percent (2%) of youth had threatened a student with a handgun, knife or club at school. 1% of youth hurt a student by using a handgun, knife or club at school.

- Almost one-fourth (24%) of Lorain County youth had threatened to hurt another student by hitting, slapping or kicking. 16% of youth hurt another student by hitting, slapping or kicking.
- Five percent (5%) of youth had been threatened with a handgun, knife or club by another student. 28% of youth indicated that another student had threatened to hit, slap or kick them.
- In the past 30 days, 12% of youth had ridden in a car driven by someone who had been drinking alcohol. 2% of youth drivers had driven a car themselves after drinking alcohol.
- Forty-six percent (46%) of Lorain County 10th grade youth always wore a seatbelt when riding in a car and 43% always wore a seatbelt when driving a car.

The following graph shows Lorain County youth carrying a knife, club or other weapon at school. The graphs show the percentage of youth in each segment giving each answer (i.e., 4% of 6th grade carried a knife, club or other weapon at school; 6% of 8th graders and 7% of 10th graders).



Youth Comparisons	Lorain County 2014 6 th grade	Lorain County 2014 8 th grade	Lorain County 2014 10 th grade
Youth who carried a knife, club or other weapon at school	4%	6%	7%
Youth who had been threatened with a handgun, knife or club	6%	8%	5%
Youth who threatened to hurt another student by hitting, slapping or kicking	17%	29%	24%
Rode with someone who was drinking	8%	15%	12%
Drank and drove (of youth drivers)	N/A	1%	2%
Youth who always wore a seatbelt when driving a car	N/A	N/A	43%

N/A- Not available

Youth Health: Perceptions

Key Findings

About two-fifths (42%) of Lorain County 6th grade youth thought there was a great risk in harming themselves if they smoked one or more packs of cigarettes per day. Eighty percent (80%) of 8th grade youth reported their parents would feel it was very wrong for them to have one or two drinks of an alcoholic beverage nearly every day.

6th Grade Perceived Risk of Substance Use

- About two-fifths (42%) of Lorain County 6th grade youth thought there was a great risk in harming themselves if they smoked one or more packs of cigarettes per day.
- In 2014, 22% of 6th grade youth thought that there was no risk for smoking one or more packs of cigarettes per day.
- More than two-fifths (44%) of youth thought there was a great risk in smoking marijuana once or twice a week.
- Twenty-three percent (23%) of youth thought that there was no risk of smoking marijuana once or twice a week.
- One-fourth (25%) of Lorain County 6th grade youth thought there was a great risk for smoking e-cigarettes, e-cigars or e-hookahs.
- Twenty-eight percent (28%) of youth thought that there was no risk for smoking e-cigarettes, e-cigars or e-hookahs.
- More than half (56%) of Lorain County youth thought there was a great risk to using prescription drugs that were not prescribed for them.
- Twenty-two percent (22%) of youth thought that there was no risk in misusing prescription drugs.

8th Grade Perceived Risk of Substance Use

- More than half (57%) of Lorain County 8th grade youth thought there was a great risk in harming themselves if they smoked one or more packs of cigarettes per day.
- Eleven percent (11%) of youth thought that there was no risk for smoking one or more packs of cigarettes per day.
- Nearly two-fifths (38%) of youth thought there was a great risk in smoking marijuana once or twice a week.
- Almost one-fifth (18%) of youth thought that there was no risk of smoking marijuana once or twice a week.
- Nearly one-fifth (19%) of Lorain County 8th grade youth thought there was a great risk for smoking e-cigarettes, e-cigars or e-hookahs.
- Seventeen percent (17%) of youth thought that there was no risk for smoking e-cigarettes, e-cigars or e-hookahs.
- More than half (60%) of Lorain County youth thought there was a great risk to using prescription drugs that were not prescribed for them.
- Twelve percent (12%) of 8th grade youth thought that there was no risk in misusing prescription drugs.

10th Grade Perceived Risk of Substance Use

- Nearly three-fifths (59%) of Lorain County 10th grade youth thought there was a great risk in harming themselves if they smoked one or more packs of cigarettes per day.
- Nine percent (9%) of youth thought that there was no risk for smoking one or more packs of cigarettes per day.
- About one-fourth (24%) of 10th grade youth thought there was a great risk in smoking marijuana once or twice a week.
- Almost one-quarter (24%) of youth thought that there was no risk of smoking marijuana once or twice a week.
- In 2014, 12% of Lorain County youth thought there was a great risk for smoking e-cigarettes, e-cigars or e-hookahs.
- One-fifth (20%) of youth thought that there was no risk for smoking e-cigarettes, e-cigars or e-hookahs.
- More than three-fifths (64%) of Lorain County youth thought there was a great risk to using prescription drugs that were not prescribed for them.
- Ten percent (10%) of youth thought that there was no risk in misusing prescription drugs.

6th Grade Degree of Disapproval of Substance Use by Parents

- Over four-fifths (86%) of youth reported their parents or guardians would feel it was very wrong for them to smoke cigarettes.
- Ninety-two percent (92%) of Lorain County youth reported their parents would feel it was very wrong for them to use marijuana.
- Eighty-one percent (81%) of youth reported their parents would feel it was very wrong for them to have one or two drinks of an alcoholic beverage nearly every day.
- Ninety percent (90%) of youth reported their parents would feel it was very wrong for them to misuse prescription medications.

8th Grade Degree of Disapproval of Substance Use by Parents

- Seventy-nine percent (79%) of youth reported their parents or guardians would feel it was very wrong for them to smoke cigarettes.
- Eighty-six percent (86%) of Lorain County youth reported their parents would feel it was very wrong for them to use marijuana.
- Four-fifths (80%) of youth reported their parents would feel it was very wrong for them to have one or two drinks of an alcoholic beverage nearly every day.
- Eighty-seven percent (87%) of youth reported their parents would feel it was very wrong for them to misuse prescription medications.

10th Grade Degree of Disapproval of Substance Use by Parents

- Seventy-three percent (73%) of youth reported their parents or guardians would feel it was very wrong for them to smoke cigarettes.
- Seventy-five percent (75%) of Lorain County youth reported their parents would feel it was very wrong for them to use marijuana.

- Seventy-two percent (72%) of youth reported their parents would feel it was very wrong for them to have one or two drinks of an alcoholic beverage nearly every day.
- Eighty-eight percent (88%) of youth reported their parents would feel it was very wrong for them to misuse prescription medications.

6th Grade Degree of Disapproval of Substance Use by Peers

- Less than three-fourths (73%) of 6th grade youth reported their peers would feel it was very wrong for them to smoke cigarettes.
- Eighty-one percent (81%) of Lorain County youth reported their peers would feel it was very wrong for them to use marijuana.
- Seventy-two percent (72%) of youth reported their peers would feel it was very wrong for them to have one or two drinks of an alcoholic beverage nearly every day.
- Seventy-seven percent (77%) of youth reported their peers would feel it was very wrong for them to misuse prescription medications.

8th Grade Degree of Disapproval of Substance Use by Peers

- Almost half (49%) of Lorain County 8th grade youth reported their peers would feel it was very wrong for them to smoke cigarettes.
- Over half (55%) of Lorain County youth reported their peers would feel it was very wrong for them to use marijuana.
- Half (50%) of youth reported their peers would feel it was very wrong for them to have one or two drinks of an alcoholic beverage nearly every day.
- Sixty-four percent (64%) of youth reported their peers would feel it was very wrong for them to misuse prescription medications.

10th Grade Degree of Disapproval of Substance Use by Peers

- Less than one-third (30%) of Lorain County youth reported their peers would feel it was very wrong for them to smoke cigarettes.
- Almost one-third (31%) of Lorain County 10th grade youth reported their peers would feel it was very wrong for them to use marijuana.
- Thirty-one percent (31%) of youth reported their peers would feel it was very wrong for them to have one or two drinks of an alcoholic beverage nearly every day.
- Fifty-five percent (55%) of youth reported their peers would feel it was very wrong for them to misuse prescription medications.

6th Grade Perceived Risk of Substance Use

How much do you think people risk harming themselves if they:	No Risk	Slight Risk	Moderate Risk	Great Risk
Smoke one or more packs of cigarettes per day	22%	11%	25%	42%
Smoke e-cigarettes, e-cigars, e-hookahs	28%	22%	25%	25%
Have one or two drinks of an alcoholic beverage nearly everyday	26%	23%	23%	28%
Have five or more drinks of an alcoholic beverage once or twice a week	23%	17%	25%	35%
Smoke marijuana once or twice a week	23%	11%	23%	44%
Misusing prescription drugs	22%	6%	16%	56%

8th Grade Perceived Risk of Substance Use

How much do you think people risk harming themselves if they:	No Risk	Slight Risk	Moderate Risk	Great Risk
Smoke one or more packs of cigarettes per day	11%	8%	25%	57%
Smoke e-cigarettes, e-cigars, e-hookahs	17%	35%	30%	19%
Have one or two drinks of an alcoholic beverage nearly everyday	17%	26%	29%	28%
Have five or more drinks of an alcoholic beverage once or twice a week	13%	21%	32%	34%
Smoke marijuana once or twice a week	18%	17%	27%	38%
Misusing prescription drugs	12%	7%	21%	60%

10th Grade Perceived Risk of Substance Use

How much do you think people risk harming themselves if they:	No Risk	Slight Risk	Moderate Risk	Great Risk
Smoke one or more packs of cigarettes per day	9%	9%	23%	59%
Smoke e-cigarettes, e-cigars, e-hookahs	20%	40%	27%	12%
Have one or two drinks of an alcoholic beverage nearly everyday	14%	24%	33%	29%
Have five or more drinks of an alcoholic beverage once or twice a week	11%	23%	38%	28%
Smoke marijuana once or twice a week	24%	28%	24%	24%
Misusing prescription drugs	10%	6%	20%	64%

6th Grade Degree of Disapproval by Parents

How wrong do your parents feel it would be for you to do the following:	Not At All Wrong	A Little Bit Wrong	Wrong	Very Wrong
Smoking cigarettes	6%	1%	6%	86%
Having one or two drinks of an alcoholic beverage nearly every day	6%	3%	10%	81%
Using marijuana	6%	<1%	2%	92%
Misusing prescription drugs	5%	1%	4%	90%

8th Grade Degree of Disapproval by Parents

How wrong do your parents feel it would be for you to do the following:	Not At All Wrong	A Little Bit Wrong	Wrong	Very Wrong
Smoking cigarettes	3%	2%	16%	79%
Having one or two drinks of an alcoholic beverage nearly every day	4%	4%	13%	80%
Using marijuana	4%	3%	6%	86%
Misusing prescription drugs	3%	2%	8%	87%

10th Grade Degree of Disapproval by Parents

How wrong do your parents feel it would be for you to do the following:	Not At All Wrong	A Little Bit Wrong	Wrong	Very Wrong
Smoking cigarettes	5%	7%	16%	73%
Having one or two drinks of an alcoholic beverage nearly every day	4%	6%	18%	72%
Using marijuana	5%	8%	12%	75%
Misusing prescription drugs	4%	3%	5%	88%

6th Grade Degree of Disapproval by Peers

How wrong do your friends feel it would be for you to do the following:	Not At All Wrong	A Little Bit Wrong	Wrong	Very Wrong
Smoking cigarettes	8%	4%	16%	73%
Having one or two drinks of an alcoholic beverage nearly every day	8%	4%	16%	72%
Using marijuana	7%	3%	10%	81%
Misusing prescription drugs	7%	2%	15%	77%

8th Grade Degree of Disapproval by Peers

How wrong do your friends feel it would be for you to do the following:	Not At All Wrong	A Little Bit Wrong	Wrong	Very Wrong
Smoking cigarettes	10%	13%	29%	49%
Having one or two drinks of an alcoholic beverage nearly every day	11%	14%	26%	50%
Using marijuana	13%	12%	20%	55%
Misusing prescription drugs	7%	7%	22%	64%

10th Grade Degree of Disapproval by Peers

How wrong do your friends feel it would be for you to do the following:	Not At All Wrong	A Little Bit Wrong	Wrong	Very Wrong
Smoking cigarettes	18%	24%	29%	30%
Having one or two drinks of an alcoholic beverage nearly every day	18%	24%	27%	31%
Using marijuana	28%	20%	22%	31%
Misusing prescription drugs	10%	11%	24%	55%

Appendix I: Needs Assessment Information Sources

Source	Data Used	Website
American Association of Suicidology	<ul style="list-style-type: none"> National Suicide Statistics 	www.suicidology.org/portals/14/docs/resources/factsheets/2015/2015datapgsv1.pdf?ver=2017-01-02-220151-870
American Cancer Society, Cancer Facts and Figures 2017. Atlanta: ACS, 2017	<ul style="list-style-type: none"> 2017 Cancer Facts, Figures, and Estimates 	www.cancer.org/research/cancer-facts-statistics/all-cancer-facts-figures/cancer-facts-figures-2017.html
American College of Allergy, Asthma & Immunology, 2016	<ul style="list-style-type: none"> Asthma Facts 	http://acaai.org/news/facts-statistics/asthma
American Heart Association, 2017	<ul style="list-style-type: none"> Smoke-Free Living: Benefits and Milestones 	www.heart.org/HEARTORG/HealthyLiving/QuitSmoking/YourNon-SmokingLife/Smoke-free-Living-Benefits-Milestones_UCM_322711_Article.jsp#
Behavioral Risk Factor Surveillance System, National Center for Chronic Disease Prevention and Health Promotion, Behavioral Surveillance Branch, Centers for Disease Control	<ul style="list-style-type: none"> 2010 - 2016 Adult Ohio and U.S. Correlating Statistics 	www.cdc.gov/brfss/index.html
Brady Campaign to Prevent Gun Violence, 2017	<ul style="list-style-type: none"> Victims of Gun Violence 	www.bradycampaign.org/sites/default/files/Brady-Campaign-5Year-Gun-Deaths-Injuries-Stats_June2017.pdf
CDC, Arthritis, Key Public Health Messages	<ul style="list-style-type: none"> Arthritis: Key Public Health Messages 	www.cdc.gov/arthritis/about/key-messages.htm
CDC, Asthma, Common Asthma Triggers, 2012	<ul style="list-style-type: none"> What causes an Asthma Attack? 	www.cdc.gov/asthma/triggers.html
CDC, Alcohol and Public Health, Excessive Drinking	<ul style="list-style-type: none"> Economic Costs of Excessive Alcohol Use 	www.cdc.gov/alcohol/data-stats.htm
CDC, Alcohol and Public Health, Fact Sheets – Excessive Alcohol Use and Risks to Women’s Health	<ul style="list-style-type: none"> Excessive Alcohol Use and Risks to Women’s Health 	www.cdc.gov/alcohol/fact-sheets/womens-health.htm
CDC, Alcohol and Public Health	<ul style="list-style-type: none"> Underage Drinking in the U.S. 	www.cdc.gov/alcohol/fact-sheets/underage-drinking.htm
CDC, Breast Cancer, 2017	<ul style="list-style-type: none"> What Can I do to Reduce My Risk of Breast Cancer? 	www.cdc.gov/cancer/breast/basic_info/prevention.htm
CDC, Cancer Prevention and Control	<ul style="list-style-type: none"> Prostate Cancer Awareness 	www.cdc.gov/cancer/dcpc/resources/features/prostatecancer/index.htm
CDC, HIV in the United States: At A Glance	<ul style="list-style-type: none"> HIV in the United States 	www.cdc.gov/hiv/statistics/overview/ataglance.html
CDC, Influenza (Flu), Vaccination: Who Should Do It, Who Should Not and Who Should Take Precautions, 2017	<ul style="list-style-type: none"> Who Should Get a Yearly Flu Shot? 	www.cdc.gov/flu/protect/whoshouldvax.htm
CDC, National Center for Health Statistics, Men’s Health	<ul style="list-style-type: none"> Men’s Health Data 	www.cdc.gov/nchs/fastats/mens-health.htm
CDC, National Center for Health Statistics, Mental Health	<ul style="list-style-type: none"> Mental Health in the U.S. 	www.cdc.gov/nchs/fastats/mental-health.htm
CDC, Oral Health, 2017	<ul style="list-style-type: none"> Facts About Adult Oral Health 	www.cdc.gov/oralhealth/basics/adult-oral-health/index.html

Source	Data Used	Website
CDC, Smoking and Tobacco Use, 2017	<ul style="list-style-type: none"> Smoking and Other Health Risks 	www.cdc.gov/tobacco/data_statistics/fact_sheets/health_effects/effects_cig_smoking/index.htm
CDC, Violence Prevention	<ul style="list-style-type: none"> Understanding Sexual Violence 	www.cdc.gov/violenceprevention/pdf/SV-Factsheet.pdf
	<ul style="list-style-type: none"> Youth Suicide 	www.cdc.gov/violenceprevention/suicide/index.html
CDC Wonder	<ul style="list-style-type: none"> Some U.S. baseline statistics 	https://wonder.cdc.gov/
Community Commons	<ul style="list-style-type: none"> Private Insurance Medicare Public Funded Insurance Uninsured Access to Primary Care Physicians Access to Dentists Health Professional Shortage Area Cigarette Expenditure Beer, Wine and Liquor Stores Alcohol Beverage Expenditures Bars and Drinking Establishments Substance Abuse Treatment Facilities and Detox Services Opioid Treatment Drug Claims Mental Health Treatment Facilities Coronary Heart Disease Mortality Stroke Mortality Percent of Medicare Beneficiaries with Heart Attack Households with Housing Costs Over 30% Firearm-Related Injury Mortality Cancer Age-Adjusted Mortality COPD Readmissions Pneumonia Readmissions Medicare Beneficiaries with Diabetes Diabetes Mortality 	www.communitycommons.org/
County Health Rankings, 2017	<ul style="list-style-type: none"> Various County Indicators 	www.countyhealthrankings.org/
Healthy People 2020: U.S. Department of Health & Human Services	<ul style="list-style-type: none"> Access to Health Services All Healthy People 2020 Target Data Points Predictors of Access to Health Care 	www.healthypeople.gov/2020/topicsobjectives2020
	<ul style="list-style-type: none"> Social Determinants of Health 	www.healthypeople.gov/2020/topics-objectives/topic/social-determinants-of-health

Source	Data Used	Website
The Henry Kaiser Family Foundation	<ul style="list-style-type: none"> Key Facts about the Uninsured Population 	www.kff.org/report-section/the-uninsured-a-primer-2013-4-how-does-lack-of-insurance-affect-access-to-health-care/
National Institute on Drug Abuse, 2016	<ul style="list-style-type: none"> Drug Facts: Drugged Driving 	www.drugabuse.gov/publications/drugfacts/drugged-driving
The Ohio Automated Rx Reporting System (OARRS)	<ul style="list-style-type: none"> Lorain County and Ohio Opiate and Pain Reliever Doses per Patient, 2015-2017 Lorain County and Ohio Opiate and Pain Reliever Doses per Capita, 2015-2017 Ohio Automated Rx Reporting System (OARRS) 	www.ohiopmp.gov/Default.aspx
Ohio Medicaid Assessment Survey (OMAS) Adult Dashboard, 2015	<ul style="list-style-type: none"> Unmet needs in Dental Care Unmet Needs in Prescription Medication 	http://grcapps.osu.edu/dashboards/OMAS/adult/
Ohio Department of Health (ODH), HIV Infections Annual Surveillance Statistics	<ul style="list-style-type: none"> Lorain County Residents Living with HIV/AIDS, 2016 Lorain County Residents Living with HIV/AIDS by Race/Ethnicity, 2016 Adults Living with HIV/AIDS in Lorain County, 2012-2016 	www.odh.ohio.gov/healthstats/disease/hivdata/hcty1
Ohio Mental Health and Addiction Services (OMHAS), 2017	<ul style="list-style-type: none"> Ohio's New Limits on Prescription Opiates 	http://mha.ohio.gov/Portals/0/assets/OhioMHAS%20News%20Now/March%2031%202017%20News%20Now.pdf
Ohio Department of Public Safety	<ul style="list-style-type: none"> 2016 Lorain County and Ohio Crash Facts 	https://ext.dps.state.oh.us/crashstatistics/CrashReports.aspx
Ohio Department of Health, Bureau of Vital Statistics, 2016 Ohio Infant Mortality Data: General Findings	<ul style="list-style-type: none"> Infant Mortality Rates for Lorain County and Ohio 	www.odh.ohio.gov/-/media/ODH/ASSETS/Files/cfhs/OEI/2016-Ohio-Infant-Mortality-Report-FINAL.pdf?la=en
Ohio Department of Health, Ohio Public Health Data Warehouse 2014-2016	<ul style="list-style-type: none"> Lorain County and Ohio Birth Statistics 	www.odh.ohio.gov/healthstats/dataandstats.aspx
	<ul style="list-style-type: none"> Lorain County and Ohio Leading Causes of Death Lorain County and Ohio Mortality Statistics 	http://publicapps.odh.ohio.gov/EDW/DataBrowser/Browse/Mortality
Ohio Department of Health (ODH), STD Surveillance Data and Statistics	<ul style="list-style-type: none"> Lorain County and Ohio Chlamydia and Gonorrhea Disease Rates Lorain County Chlamydia and Gonorrhea Cases 	www.odh.ohio.gov/odhprograms/stdsurv/std1
Stanford Children's Health, The Growing Child: School-Age (6-12), 2017	<ul style="list-style-type: none"> How to Help Increase Your School-Aged Child's Social Ability 	www.stanfordchildrens.org/en/topic/default%3Fid%3Dthe-growing-child-school-age-6-to-12-years-90-P02278&sa=U&ei=eMq7VNe2I8_4yQsX-oCwAw&ved=0CEIQFjAI&usg=AFQjCNFn5tO-78ISMzUno4_7cO4dCvft1Q

Source	Data Used	Website
U. S. Department of Commerce, Census Bureau; Bureau of Economic Analysis	<ul style="list-style-type: none"> American Community Survey 5-year estimate, 2016 	www.census.gov/programs-surveys/acs/
	<ul style="list-style-type: none"> Federal Poverty Threshold 	www.census.gov/data/tables/time-series/demo/income-poverty/historical-poverty-thresholds.html
	<ul style="list-style-type: none"> Ohio and Lorain County 2016 Census Demographic Information 	https://factfinder.census.gov/faces/nav/jsf/pages/index.xhtml
	<ul style="list-style-type: none"> Small Area Income and Poverty Estimates 	www.census.gov/dud/www/saibe
U.S. Department of Health & Human Services: Surgeon General	<ul style="list-style-type: none"> E-cigarette Use Among Youth and Young Adults 	www.surgeongeneral.gov/library/2016ecigarettes/index.html#execsumm

Appendix II: Acronyms and Terms

ACS	A mbulatory C are S ensitive conditions or discharges are conditions for which hospital admission could be prevented by interventions in primary care.
AHS	A ccess to H ealth S ervices, Topic of Healthy People 2020 objectives
AOCBC	A rthritis, O steoporosis, and C hronic B ack C onditions, Topic of Healthy People 2020 objectives
Adult	Defined as 19 years of age and older.
Age-Adjusted Mortality Rates	Death rate per 100,000 adjusted for the age distribution of the population.
Adult Binge Drinking	Consumption of five alcoholic beverages or more (for males) or four or more alcoholic beverages (for females) on one occasion.
BMI	B ody M ass I ndex is defined as the contrasting measurement/relationship of weight to height.
BRFSS	B ehavior R isk F actor S urveillanc S ystem, an adult survey conducted by the CDC.
CBP	C ensus B usiness P atterns, Source of information for Community Commons maps
CDC	C enters for D isease C ontrol and P revention.
Current Smoker	Individual who has smoked at least 100 cigarettes in their lifetime and now smokes daily or on some days.
CY	C alendar Y ear
DRE	D igital R ectal E xam
FY	F iscal Y ear
HCNO	H ospital C ouncil of N orthwest O hio
HDS	H eart D isease and S troke, Topic of Healthy People 2020 objectives
HP 2020	H ealthy P eople 2020 , a comprehensive set of health objectives published by the Office of Disease Prevention and Health Promotion, U.S. Department of Health and Human Services.
Health Indicator	A measure of the health of people in a community, such as cancer mortality rates, rates of obesity, or incidence of cigarette smoking.
High Blood Cholesterol	240 mg/dL and above
High Blood Pressure	Systolic ≥ 140 and Diastolic ≥ 90
IID	I mmunizations and I nfectious D iseases, Topic of Healthy People 2020 objectives
IVP	I njury and V iolence P revention, Topic of Healthy People 2020 objectives
MHMD	M ental H ealth and M ental D isorders, Topic of Healthy People 2020 objectives
N/A	Data is not available.
NWS	N utrition and W eight S tatus, Topic of Healthy People 2020 objectives
OARRS	O hio A utomated Prescription (Rx) R eporting S ystem
ODH	O hio D epartment of H ealth
OSHP	O hio S tate H ighway P atrol

PSA test

Prostate-Specific Antigen Test

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.

SA

Substance Abuse, Topic of Healthy People 2020 objectives

TU

Tobacco Use, Topic of Healthy People 2020 objectives

YPLL/65

Years of Potential Life Lost before age 65. Indicator of premature death.

ZCTA

Zip Code Tabulation Area, Geographic Area represented through Census Business Patterns in Community Commons map

Appendix III: Methods for Weighting the 2015 Lorain County Health 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 2015 Lorain County survey, a weighting was applied prior to the analysis that weighted the survey respondents to reflect the actual distribution of Lorain County based on age, sex, race, and income.

Weightings were created for each category within sex (male, female), race (White, Non-White), Age (9 different age categories), and income (7 different income categories). The numerical value of the weight for each category was calculated by taking the percent of Lorain County within the specific category and dividing that by the percent of the sample within that same specific category. Using sex as an example, the following represents the data from the 2015 Lorain County Survey and the 2013 American Community Survey Census estimates.

2015 Lorain Survey			2013 Census Estimate		Weight
<u>Sex</u>	<u>Number</u>	<u>Percent</u>	<u>Number</u>	<u>Percent</u>	
Male	336	47.795164%	148,363	49.172412%	1.028816
Female	367	52.204836%	153,357	50.827588%	0.973618

In this example, it shows that there was a slightly larger portion of females in the sample compared to the actual portion in Lorain County. The weighting for males was calculated by taking the percent of males in Lorain County (based on Census information) (49.172412%) and dividing that by the percent found in the 2015 Lorain County sample (47.795164%) [$49.172412/47.795164 =$ weighting of 1.028816 for males]. The same was done for females [$50.827588/52.204836 =$ weighting of 0.973618 for females]. Thus males' responses are weighted heavier by a factor of 1.028816 and females' responses weighted less by a factor of 0.973618.

This same thing was done for each of the 20 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 0.910602 [0.973618 (weight for females) x 0.887233 (weight for White) x 1.181114 (weight for age 45-54) x 0.892505 (weight for income \$50-\$75k)]. Thus, each individual in the 2015 Lorain County sample has their own individual weighting based on their combination of age, race, sex, and income. See next page for each specific weighting and the numbers from which they were calculated.

Multiple sets of weightings were created and used in the statistical software package (SPSS 21.0) 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.

Category	Lorain Sample	%	2013 Census Estimates*	%	Weighting Value
Sex:					
Male	336	47.795164	148,363	49.172412	1.028816
Female	367	52.204836	153,357	50.827588	0.973618
Age:					
20-24	12	1.729107	17,688	7.953774	4.599933
25-34	31	4.466859	33,278	14.964139	3.350036
35-44	70	10.086455	39,639	17.824494	1.767171
45-54	122	17.579251	46,174	20.763091	1.181114
55-59	94	13.544669	21,060	9.470063	0.699173
60-64	96	13.832853	19,725	8.869753	0.641209
65-74	183	26.368876	24,422	10.981856	0.416470
75-84	81	11.671470	14,349	6.452324	0.552829
85+	5	0.720461	6,050	2.720507	3.776064
Race:					
White (non-Hispanic)	633	90.170940	241,384	80.002651	0.887233
Non-White	69	9.829060	60,336	19.997349	2.034513
Household Income:					
Less than \$10,000	30	4.587156	8,199	7.025406	1.531538
\$10k-\$15k	32	4.892966	6,345	5.436785	1.111143
\$15k-\$25k	93	14.220183	12,131	10.394585	0.730974
\$25k-\$35k	72	11.009174	12,145	10.406581	0.945264
\$35k-\$50	103	15.749235	17,703	15.169016	0.963159
\$50k-\$75k	143	21.865443	22,775	19.515016	0.892505
\$75k or more	181	27.675841	37,407	32.052611	1.158144
<p>Note: The weighting ratios are calculated by taking the ratio of the proportion of the population of Lorain County in each subcategory by the proportion of the sample in the Lorain County survey for that same category.</p> <p>*Lorain County population figures taken from the 2013 Census.</p>					

Appendix IV: Lorain County Sample Demographic Profile*

Variable	2015 Survey Sample	Lorain County Census American Community Survey 2010-2014 (5-year estimate)	Ohio Census 2014
Age			
20-29	13.5%	11.3%	13.1%
30-39	17.5%	11.8%	12.1%
40-49	17.1%	14.1%	13.4%
50-59	21.7%	14.9%	14.6%
60 plus	27.2%	22.0%	20.7%
Race/Ethnicity			
White	80.5%	85.3%	82.6%
Black or African American	4.7%	8.4%	12.2%
American Indian and Alaska Native	1.6%	0.2%	0.2%
Asian	0.1%	1.0%	1.8%
Other	10.1%	0.8%	1.6%
Hispanic Origin (may be of any race)	10.5%	8.8%	3.3%
Marital Status†			
Married Couple	58.1%	50.1%	48.5%
Never been married/member of an unmarried couple	20.7%	30.0%	31.1%
Divorced/Separated	13.6%	13.4%	13.9%
Widowed	5.7%	6.5%	6.5%
Education†			
Less than High School Diploma	6.0%	10.8%	11.2%
High School Diploma	23.8%	34.3%	34.5%
Some college/ College graduate	69.2%	54.7%	54.4%
Income (Families)			
\$14,999 and less	12.0%	8.4%	8.6%
\$15,000 to \$24,999	7.6%	7.3%	7.9%
\$25,000 to \$49,999	22.2%	21.3%	23.0%
\$50,000 to \$74,999	15.1%	21.4%	20.5%
\$75,000 or more	31.5%	41.7%	40.1%

* The percent's 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). Percent's may not add to 100% due to missing data (non-responses).

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

Appendix V: Demographics and Household Information

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

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

LORAIN COUNTY PROFILE

General Demographic Characteristics (Source : U.S. Census Bureau, Census 2016)

2012-2016 ACS 5-year estimates

Total Population

2016 Total Population 304,091

Largest City-Lorain City

2016 Total Population 63,714

2000 Total Population 64,097

Population By Race/Ethnicity

Total Population	304,091	100%
White Alone	259,775	85.4%
Hispanic or Latino (of any race)	28,288	9.3%
African American	25,839	8.5%
Asian	2,951	1.0%
Two or more races	10,674	3.5%
Other	3,915	1.3%
American Indian and Alaska Native	803	0.3%

Population By Age

Under 5 years	17,485	5.7%
5 to 9 years	19,292	6.3%
10 to 14 years	19,977	6.6%
15 to 19 years	20,713	6.8%
20 to 24 years	18,745	6.2%
25 to 44 years	71,458	23.5%
45 to 64 years	86,848	28.5%
65 years and more	49,573	16.3%

Median age (years)

41.2

Household By Type

Total Households	117,609	100%
Family Households (families)	79,657	67.7%
With own children <18 years	33,053	41.5%
Married-Couple Family Households	57,445	48.8%
With own children <18 years	20,641	35.9%
Female Householder, No Husband Present	16,391	13.9%
With own children <18 years	9,870	60.2%
Non-family Households	37,952	32.3%
Householder living alone	32,259	85.0%
Householder 65 years and >	11,420	35.4%
Households With Individuals < 18 years	33,053	30.8%
Households With Individuals 60 years and >	47,044	40.0%
Average Household Size	2.50 people	
Average Family Size	3.04 people	

General Demographic Characteristics, continued
(Source : U.S. Census Bureau, Census 2016)

2012-2016 ACS 5-year estimates

Median Value of Owner-Occupied Units	\$138,600
Median Monthly Owner Costs (With Mortgage)	\$1,276
Median Monthly Owner Costs (Not Mortgaged)	\$460
Median Gross Rent for Renter-Occupied Units	\$748
Median Rooms Per Housing Unit	6.1
Total Housing Units	117,609
No Telephone Service	2,979
Lacking Complete Kitchen Facilities	697
Lacking Complete Plumbing Facilities	318

Selected Social Characteristics
(Source : U.S. Census Bureau, Census 2016)

2012-2016 ACS 5-year estimates

School Enrollment

Population 3 Years and Over Enrolled In School	73,321	100%
Nursery & Preschool	4,703	6.4%
Kindergarten	3,561	4.9%
Elementary School (Grades 1-8)	30,419	41.5%
High School (Grades 9-12)	15,636	21.3%
Undergraduate College or Graduate School	19,002	25.9%

Educational Attainment

Population 25 Years and Over	207,879	100%
< 9 th Grade Education	5,554	2.7%
9 th to 12 th Grade, No Diploma	16,976	8.2%
High School Graduate (Includes Equivalency)	66,926	32.2%
Some College, No Degree	49,478	23.8%
Associate Degree	20,117	9.7%
Bachelor's Degree	30,342	14.6%
Graduate Or Professional Degree	18,486	8.9%

Percent High School Graduate or Higher	*(X)	89.2%
Percent Bachelor's Degree or Higher	*(X)	23.5%

*(X) – Not available

Selected Social Characteristics, continued
(Source : U.S. Census Bureau, Census 2016)

2012-2016 ACS 5-year estimates

Marital Status

Population 15 Years and Over	247,337	100%
Never Married	75,438	30.5%
Now Married, Excluding Separated	121,195	49.0%
Separated	4,205	1.7%
Widowed	16,819	6.8%
Female	1,732	10.3%
Divorced	29,680	12.0%
Female	3,858	13.0%

Veteran Status

Civilian Veterans 18 years and over	21,688	9.2%
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Disability Status of the Civilian Non-Institutionalized Population

Total Civilian Noninstitutionalized Population	297,506	100%
With a Disability	45,940	15.4%
Under 17 years	69,401	100%
With a Disability	5,046	10.3%
18 to 64 years	180,408	100%
With a Disability	23,809	24.2%
65 Years and Over	47,697	100%
With a Disability	17,085	75.2%

Selected Economic Characteristics
(Source: U.S. Census Bureau, Census 2016)

2012-2016 ACS 5-year estimates

Employment Status

Population 16 Years and Over	243,128	100%
In Labor Force	146,330	62.5%
Not In Labor Force	87,798	37.5%
Females 16 Years and Over	124,657	100%
In Labor Force	73,797	59.2%
Population Living With Own Children <6 Years	20,407	100%
All Parents In Family In Labor Force	14,469	70.9%

Class of Worker

Employed Civilian Population 16 Years and Over	139,444	100%
Private Wage and Salary Workers	98,036	83.2%
Government Workers	17,309	12.5%
Self-Employed Workers in Own Not Incorporated Business	3,739	4.2%
Unpaid Family Workers	5,816	0.1%

Median Earnings

Male, Full-time, Year-Round Workers	\$50,990
Female, Full-time, Year-Round Workers	\$38,329

Selected Economic Characteristics, Continued
(Source: U.S. Census Bureau, Census 2016)

2012-2016 ACS 5-year estimates

Income In 2016

Households	117,609	100%
< \$10,000	8,237	7.0%
\$10,000 to \$14,999	5,763	4.9%
\$15,000 to \$24,999	12,114	10.3%
\$25,000 to \$34,999	11,290	9.6%
\$35,000 to \$49,999	17,053	14.5%
\$50,000 to \$74,999	22,934	19.5%
\$75,000 to \$99,999	15,407	13.1%
\$100,000 to \$149,999	15,642	13.3%
\$150,000 to \$199,999	5,175	4.4%
\$200,000 or more	4,116	3.5%

Median Household Income

\$53,459

Income In 2016

Families	79,657	100%
< \$10,000	3,425	4.3%
\$10,000 to \$14,999	2,708	3.4%
\$15,000 to \$24,999	5,735	7.2%
\$25,000 to \$34,999	5,815	7.3%
\$35,000 to \$49,999	10,754	13.5%
\$50,000 to \$74,999	16,489	20.7%
\$75,000 to \$99,999	12,347	15.5%
\$100,000 to \$149,999	13,860	17.4%
\$150,000 to \$199,999	4,859	6.1%
\$200,000 or more	3,664	4.6%

Median Household Income (families)

\$66,242

Per Capita Income In 2012-2016

\$27,537

Poverty Status In 2016

% Below Poverty Level

Families	10.4%
Individuals	14.0%

Selected Economic Characteristics, Continued
(Source: U.S. Census Bureau, Census 2016)

2012-2016 ACS 5-year estimates

Occupations

Employed Civilian Population 16 Years and Over	139,444	100%
Production, Transportation, and Material Moving	22,831	16.4%
Management, business, science, and art occupations	46,229	33.2%
Sales and Office Occupations	33,905	24.3%
Service Occupations	24,782	17.8%
Natural Resources, Construction, and Maintenance	11,697	8.4%

Leading Industries

Employed Civilian Population 16 Years and Over	139,444	100%
Manufacturing	24,163	17.3%
Educational, health and social services	34,367	24.6%
Trade (retail and wholesale)	18,675	13.4%
Arts, entertainment, recreation, accommodation, and food services	12,753	9.1%
Professional, scientific, management, administrative, and waste management services	12,091	8.7%
Transportation and warehousing, and utilities	6,537	4.7%
Finance, insurance, real estate, and rental and leasing	8,266	5.9%
Other services (except public administration)	6,172	4.4%
Construction	7,811	5.6%
Public administration	5,316	3.8%
Information	2,237	1.6%
Agriculture, forestry, fishing, hunting, and mining	1,056	0.8%

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

	Income	Rank of Ohio Counties
BEA Per Capita Personal Income 2016	\$42,089	25 th of 88 counties
BEA Per Capita Personal Income 2015	\$41,371	26 th of 88 counties
BEA Per Capita Personal Income 2014	\$39,992	27 th of 88 counties
BEA Per Capita Personal Income 2013	\$38,788	27 th of 88 counties

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

(Source: U.S. Department of Commerce, Bureau of Economic Analysis, <https://www.bea.gov/newsreleases/regional/lapi/2017/lapi1117.htm>)

Poverty Rates, 5-year averages, 2012 to 2016

Category	Lorain	Ohio
Population in poverty	14.4%	15.8%
< 125% FPL (%)	18.7%	20.3%
< 150% FPL (%)	22.8%	24.8%
< 200% FPL (%)	30.5%	33.9%
Population in poverty (1999)	9.0%	10.6%

(Source: *The Ohio Poverty Report*, Ohio Development Services Agency, February 2017, <http://www.development.ohio.gov/files/research/P7005.pdf>)

Employment Statistics

Category	Lorain	Ohio
Labor Force	148,500	5,664,800
Employed	139,200	5,375,800
Unemployed	9,300	288,900
Unemployment Rate* in January 2018	6.2	5.1
Unemployment Rate* in December 2017	5.0	4.5
Unemployment Rate* in January 2017	7.4	6.1

*Rate equals unemployment divided by labor force.

(Source: Ohio Department of Job and Family Services, January 2018, <http://ohiolmi.com/laus/current.htm>)

Estimated Poverty Status in 2016

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

(Source: U.S. Census Bureau, Small Area Income and Poverty Estimates, https://www.census.gov/data-tools/demosaip/saipes.html?s_appName=saipes&map_yearSelector=2016&map_geoSelector=aa_c)

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

Size of Family Unit	No Children	One Child	Two Children	Three Children	Four Children	Five Children
1 Person <65 years	\$12,752					
1 Person 65 and >	\$11,756					
2 people Householder < 65 years	\$16,414	\$16,895				
2 People Householder 65 and >	\$14,816	\$16,831				
3 People	\$19,173	\$19,730	\$19,749			
4 People	\$25,283	\$25,696	\$24,858	\$24,944		
5 People	\$30,490	\$30,933	\$29,986	\$29,253	\$28,805	
6 People	\$35,069	\$35,208	\$34,482	\$33,787	\$32,753	\$32,140
7 People	\$40,351	\$40,603	\$39,734	\$39,129	\$38,001	\$36,685
8 People	\$45,129	\$45,528	\$44,708	\$43,990	\$42,971	\$41,678
9 People or >	\$54,287	\$54,550	\$53,825	\$53,216	\$52,216	\$50,840

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

Appendix VI: County Health Rankings

	Lorain County	Ohio	U.S.
Health Outcomes			
Premature death. Years of potential life lost before age 75 per 100,000 population (age-adjusted) (2012-2014)	7,200	7,566	6,600
Overall health. Percentage of adults reporting fair or poor health (age-adjusted) (2015)	17%	15%	15%
Physical health. Average number of physically unhealthy days reported in past 30 days (age-adjusted) (2015)	4.1	3.7	3.6
Mental health. Average number of mentally unhealthy days reported in past 30 days (age-adjusted) (2015)	3.9	4.0	3.7
Maternal and infant health. Percentage of live births with low birthweight (< 2500 grams) (2008-2014)	8%	9%	8%
Health Behaviors			
Tobacco. Percentage of adults who are current smokers (2015)	20%	22%	18%
Obesity. Percentage of adults that report a BMI of 30 or more (2015)	29%	31%	28%
Food environment. Index of factors that contribute to a healthy food environment, 0 (worst) to 10 (best) (2014)	7.3	7.0	7.3
Physical activity. Percentage of adults aged 20 and over reporting no leisure-time physical activity (2013)	22%	25%	22%
Active living environment. Percentage of population with adequate access to locations for physical activity (2010 & 2014)	89%	83%	84%
Drug and alcohol abuse. Percentage of adults reporting binge or heavy drinking (2015)	18%	19%	18%
Drug and alcohol abuse and injury. Percentage of driving deaths with alcohol involvement (2011-2015)	50%	34%	30%
Infectious disease. Number of newly diagnosed chlamydia cases per 100,000 population (2014)	402	474	456
Sexual and reproductive health. Teen birth rate per 1,000 female population, ages 15-19 (2008-2014)	32	32	32

(Source: 2017 County Health Rankings for Lorain County, Ohio and U.S. data)

	Lorain County	Ohio	U.S
Clinical Care			
Coverage and affordability. Percentage of population under age 65 without health insurance (2014)	9%	10%	14%
Access to health care/medical care. Ratio of population to primary care physicians (2014)	1,690:1	1300:1	1,320:1
Access to dental care. Ratio of population to dentists (2015)	2,200:1	1692:1	1,520:1
Access to behavioral health care. Ratio of population to mental health providers (2016)	900:1	633:1	500:1
Hospital utilization. Number of hospital stays for ambulatory-care sensitive conditions per 1,000 Medicare enrollees (2014)	71	60	50
Diabetes. Percentage of diabetic Medicare enrollees ages 65-75 that receive HbA1c monitoring (2014)	86%	85%	85%
Cancer. Percentage of female Medicare enrollees ages 67-69 that receive mammography screening (2014)	68%	61%	63%
Social and Economic Environment			
Education. Percentage of ninth-grade cohort that graduates in four years (2014-2015)	87%	81%	83%
Education. Percentage of adults ages 25-44 years with some post-secondary education (2011-2015)	64%	64%	64%
Employment, poverty, and income. Percentage of population ages 16 and older unemployed but seeking work (2015)	5%	5%	5%
Employment, poverty, and income. Percentage of children under age 18 in poverty (2015)	21%	21%	21%
Employment, poverty, and income. Ratio of household income at the 80th percentile to income at the 20th percentile (2011-2015)	4.5	4.8	5.0
Family and social support. Percentage of children that live in a household headed by single parent (2011-2015)	38%	36%	34%
Family and social support. Number of membership associations per 10,000 population (2015)	10.3	11.3	9
Violence. Number of reported violent crime offenses per 100,000 population (2012-2014)	180	290	380
Injury. Number of deaths due to injury per 100,000 population (2011-2015)	64	70%	62

(Source: 2017 County Health Rankings for Lorain County, Ohio and U.S. data)

	Lorain County	Ohio	U.S.
Physical Environment			
Air, water, and toxic substances. Average daily density of fine particulate matter in micrograms per cubic meter (PM2.5) (2012)	11.3	11.3	8.7
Air, water, and toxic substances. Indicator of the presence of health-related drinking water violations. 1 - indicates the presence of a violation, 0 - indicates no violation (FY 2013-2014)	Yes	N/A	N/A
Housing. Percentage of households with at least 1 of 4 housing problems: overcrowding, high housing costs, or lack of kitchen or plumbing facilities (2009-2013)	15%	15%	19%
Transportation. Percentage of the workforce that drives alone to work (2011-2015)	84%	83%	76%
Transportation. Among workers who commute in their car alone, the percentage that commute more than 30 minutes (2011-2015)	34%	30%	34%

(Source: 2017 County Health Rankings for Lorain County, Ohio and U.S. data)

N/A – Data is not available

Appendix VII: Priority Areas and Resources Available

The Lorain County Health Partners (LCHP) met multiple times to complete the 2014-2019 Lorain County Community Health Improvement Plan. LCHP used the Mobilizing for Action through Planning and Partnerships (MAPP) process, which is a community-driven strategic planning process for improving community health. This framework helps communities apply strategic thinking to prioritize health issues and identify resources to address them. There were nine coordinating agencies that comprised the CHIP steering committee and oversee the five priority area teams.

The Lorain County Health Partners sub-contracted with the Public Services Institute at Lorain County Community College (LCCC). They served as a neutral facilitator throughout the community health improvement planning process. LCCC used a ranking process with key pad polling to determine priorities.

Details of this process and its results can be found on the Lorain County Health Department’s website. Lorain County is focused on the following five priority areas: Access to Care; Infant Mortality Coordinated Education and Prevention; Improving Mental Health; Improving Obesity and Weight Control; and Improving Substance Abuse.

The following is a list of available facilities and resources that the University Hospitals Elyria Medical Center and Specialty Hospital of Lorain uses to assist in meeting identified community health needs:

Priority Area	Coordinating Agencies and Team Members	
Access to Care	<ul style="list-style-type: none"> • Lorain County Health & Dentistry • Mercy • University Hospitals Elyria Medical Center and Specialty Hospital of Lorain • Alzheimer’s Association • Beech Brook • Bellefaire JCB • City of Elyria • City of Lorain • Cleveland Clinic • Far West Center 	<ul style="list-style-type: none"> • Hospice of the Western Reserve • Lorain County Alcohol and Drug Abuse Services (LCADA) • Lorain County Children and Families Council • Lorain County Children Services • Lorain County Free Clinic • Lorain County General Health District • Nord Family Foundation • Wesleyan Village
Expand Coordinated Education and Prevention Services	<ul style="list-style-type: none"> • Elyria City Health District • Big Brothers Big Sisters of Lorain County • City of Elyria • Cornerstone Pregnancy Services • Family Planning Services of Lorain County • Greater Victory Church • Lorain County Alcohol and Drug Abuse Services (LCADA) • Lorain County Board of Mental Health • Lorain County Community College • Lorain County Free Clinic 	<ul style="list-style-type: none"> • Lorain County General Health District • Lorain YWCA • Mercy Hospitals Parish Nursing and Resource Mothers • Mount Zion Church • Ready Set Go...to Kindergarten • University Hospitals Elyria Medical Center • YES (Youth Empowerment Services) Zone, a United Way of Greater Lorain County Collaborative
Improving Mental Health	<ul style="list-style-type: none"> • Lorain County Board of Mental Health • Alzheimer’s Association • Beech Brook • Cleveland Clinic • Elyria City Health District • Far West Center • Gathering Hope House • Lorain County Alcohol and Drug Abuse Services (LCADA) 	<ul style="list-style-type: none"> • Lorain County Children Services • Lorain County Office on Aging • Lorain County General Health District • Nord Family Foundation • Oberlin House of the Lord Church • The Nord Center • Visiting Angels

Priority Area	Coordinating Agencies and Team Members	
Improving Obesity and Weight Control	<ul style="list-style-type: none"> • Lorain County General Health District • Lorain County Metro Parks • Catholic Charities City of Elyria • Hospice of the Western Reserve • Lorain County Community College • Lorain County Township Trustees (Huntington and Wellington Townships) 	<ul style="list-style-type: none"> • Lorain County YMCA • Mercy • Oberlin House of the Lord Church • United Way of Greater Lorain County
Improving Substance Abuse	<ul style="list-style-type: none"> • Alcohol and Drug Addiction Services Board of Lorain County • University Hospitals Elyria Medical Center and Specialty Hospital of Lorain • Communities That Care of Lorain County • Educational Services Center of Lorain County • El Centro de Servicios Sociales 	<ul style="list-style-type: none"> • Lorain County Alcohol and Drug Abuse Services (LCADA) • Lorain County Community College • Lorain County General Health District • Lorain County Sheriff's Office Drug Task Force • Mercy