TASSESSA BULL BU

2022 ERIE COUNTY

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Prepared by: CMOR

Center for Marketing & Opinion Research, LLC

Prepared for:

Erie County Board of Health Sandusky, Ohio

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Peter Schade, MPH, REHS

Health Commissioner

Erie County Health Department
Erie County Community Health Center
420 Superior Street
Sandusky, OH 44870
419-656-2796
pschade@echdohio.org
www.eriecohealthohio.com

Executive Summary

The assessment process is an ongoing cycle that includes building partnerships; coordinating a consortium; assessing data, community needs and capacity; and conducting planning for prioritization, intervention, implementation, and evaluation. This report begins the 3-year cycle. The Center for Marketing and Opinion Research (CMOR) was selected by the Erie County Board of Health to perform data collection and analysis for the 2022 Community Health Assessment (CHA) through a Community Survey, secondary data analysis, and qualitative data collection.

The first component of the project, a Community Survey, consisted of a <u>random sample telephone and web survey of Erie County, Ohio households</u>. This method was used to ensure representativeness of the adult population and to warrant statistical validity. The final sample size was 384, which resulted in an overall sampling error of +/- 5.0% within a 95% confidence level. The survey questions focused on the following areas: community need and social determinants, access to care, mental health and substance abuse, healthy living, vaccinations, chronic diseases, housing, safety, and transportation.

The second component of the project, Secondary Data Analysis, consisted of reviewing and analyzing secondary data sources to identify priority areas of concern when compared to survey data. CMOR gathered and compiled health and demographic data from various sources, which are outlined in the Research Methodology section of this report.

The third and final component consisted of collecting qualitative data to provide contextual information to support the primary and secondary data outlined above. A Community Leader survey was completed online by 50 community leaders with knowledge of and experience in community health-related issues.

When available, data was compared to previous years' information and other geographic areas such as Ohio or the United States. Analysis included survey data, health data, and demographic data. After compiling and analyzing the data from all three components, CMOR identified five priority health needs for the county (in alphabetical order):



Throughout the report, statistically significant findings and statistical significance between groupings (i.e. between age groups or between races) are indicated by an asterisk (*)

Funding for Erie County Community Health Assessment

Funding for this assessment was provided by the Erie County Health Department Board of Health, the Erie County Community Health Center Board of Directors, Firelands Health – Firelands Regional Medical Center and the Sandusky Artisans Recovery Community Center in a combined effort to provide trending data for improvement of our collective quality of life in Erie County, Ohio and across the region.

These partners continue to align their mission and vision statements with this Community Health Assessment (CHA). All are encouraged to use this data to develop policy and provide assurance to their stakeholders.

Thank you to Firelands Health – Firelands Regional Medical Center and to the Sandusky Artisans Recovery Community Center. This CHA brings value to Erie County and further supports the millions of dollars in grant funding and other resources that enable local organizations to serve this community.

Contributing Factors to Health Challenges

There are a number of factors that affect the health of a community, according to the Community Leader survey. When asked about the most important health-related issue or challenge facing Erie County, Ohio, over half of community leaders (53%) mentioned social determinants of health. These factors include transportation, affordable and available housing, access to food, childcare, and violence. Community leaders were also asked to list the problems, barriers, or gaps in services that prevent residents from receiving health-related care and services. The most common barriers mentioned were transportation issues (62%), cost (40%), lack of awareness of available programs and resources (34%), social acceptance and stigmas (20%), and health insurance (20%). The community survey shows that 17% of residents sought assistance for food in the past year while 10% sought assistance with utilities.

Erie County is a HRSA-designated **rural** county, with urban areas comprising six percent of the county's land mass. The population in poverty is much higher in the county's urban zip code, particularly in Sandusky, than in other areas (*Source: U.S. Census Bureau 2021*).

Additional contributing factors to the county's health challenges include personal income, race and aging. Residents in communities with the lowest income levels have the poorest health and the most difficulty in accessing health care. Poverty levels for children under 5 in the county are slightly higher than poverty levels for the state and have remained relatively unchanged over the past 5 years (Source: U.S. Census Bureau 2021). Seventy-four percent (74%) of community leaders felt that it was very important for the Health Department to address people living in poverty.

In Erie County Ohio, Black and multi-racial residents had the highest poverty levels (28.3% and 23.8%, respectively) compared to 9.6% of white residents (Source: U.S. Census Bureau 2021). Seventy-eight percent (78%) of community leaders felt that it was very important for the Health Department to address minority populations.

Educational attainment also contributed to poverty status. Only 24.9% of the county's population has a bachelor's degree or higher (compared to 28.9% in the state) (Source: US Census Bureau, American Fact Finder). There are no four-year colleges or universities in the county; however, there is one branch campus and 2 technical centers. This means that there are limited secondary education options within the county limits (Source: ODSA). In Erie County, demographic groups with low education levels have high poverty levels. The poverty rate for those with less than a high school diploma was 22.4%, compared to 3.3% for college graduates (Source: U.S. Census Bureau 2021).

The aging population is likely to become a priority over the next few years. Currently, the median age in the county, 44.8 years, is higher than the median age of 39.8 years for the state. Twenty-one percent (21%) of the county population is 65 years old or older, compared to 17% of the state's population (Source: U.S. Census Bureau 2021). Five percent (5%) of residents name aging and elder care as the most important health-related issue or challenge facing Erie County right now.

Process for Identifying Priority Health Needs

Survey data, health data, and demographic data were analyzed to inform CHA development. Based on this analysis, CMOR identified priority community health needs for the county. The findings from the secondary data analysis, specifically, reinforce the findings of the Community Survey and Community Health Leader Survey.



Secondary Data Analysis

Community Leader Survey







Top Priority Needs Identified

Based on Survey Results

Priority Health Needs

This section summarizes the prioritized health needs in Erie County. Listed in alphabetical order, the five prioritized needs appear in multiple analyses. In many cases, health needs differ significantly between demographic groups.

ACCESS TO HEALTH CARE

HEALTH NEED: A portion of county residents do not have access to health care providers including primary care doctors, medical specialists, dentists, and mental health professionals.

- Ten percent (10%) of community members named affordability of healthcare as the third most important health-related issue or challenge facing the county.
- More than one in ten residents (11%) sought assistance for healthcare in the past year, while 8% sought prescription assistance and 5% sought dental care assistance.
- Three-quarters (75%) of community leaders indicated that it was very important for the Health Department to address the uninsured, and 74% thought it was very important to address people in poverty.
- One-sixth of residents (16%) do not have a primary care provider.
- More than one-quarter of residents (27%) most often receive health care from a source other than a primary care provider, such as the Emergency Room (5%) or an urgent care center (9%).
- Over one-tenth (11%) of residents were unable to schedule necessary healthcare services in the past year. Dental services were named most often (31%).
- A notable portion of residents (10%) were unable to obtain prescription services in the past year. The most common barriers were cost and lack of coverage.
- Black residents are less likely to have insurance than white residents (12.5% uninsured compared to 4.2% uninsured, respectively) (Source: U.S. Census Bureau).

ALCOHOL AND SUBSTANCE USE

HEALTH NEED: Community residents and leaders are extremely concerned with addiction and overdose. Excessive alcohol and substance use can lead to an increased risk of other health problems, including injuries, violence, liver disease, and cancer.

- Addiction and overdose were named as the most important health-related issues or challenges facing the county.
 More than one-third of community leaders (37%) named addiction and overdose as the most important health-related issue or challenge.
- More than three-quarters (78%) of community leaders indicated that it was very important for the Health Department to address people with a drug or alcohol addiction.
- According to the community survey, the average number of alcoholic beverages per week was 5.5 for all residents. Groups of residents with significantly higher averages include males (7.6), residents ages 45 to 64 years old (6.3), and those with some college (5.8).
- About one in ten residents (11%) reported driving after drinking any alcoholic beverages during the past month.
- One-quarter of residents (25%) reported they or someone in their household had used marijuana in the past six months. Only a small fraction of residents (5%) reported they or someone in their household had used amphetamines, methamphetamines, or speed.
- The number of unintentional drug overdose deaths in Erie County has increased significantly since 2014 from 18.9 to 44.6 (Source: Ohio Department of Health).

CHANGING DEMOGRAPHICS, SOCIAL DETERMINANTS, AND OTHER COUNTY-SPECIFIC BARRIERS

HEALTH NEED: More than one-third of households in the county have a resident who is 65 years old or older, and this percentage has been slowly increasing each year. As the county continues to age, it will face significant challenges to meet the health needs of the aging population.

- The median age in Erie County is 44.8 years, which is higher than the median age of 39.8 for the state. Almost one-fifth (21%) of the county population is 65 years old or older, compared to 17% of the state (Source: U.S. Census Bureau).
- Five percent (5%) of residents identified aging and elder care as the most important health-related issue or challenge facing Erie County today.
- Over half (53%) of community leaders identified social determinants of health as the second most important health-related issue or challenge facing Erie County today.
- Less than half (47%) of community leaders felt there are enough services and programs currently available to address the aging population and related issues in Erie County.
- The majority (86%) of community leaders indicated it was very important for the Health Department to address the elderly population.
- More than half of community leaders (60%) identified transportation as a problem, barrier, or gap in services that prevent residents from receiving health-related care and services.
- The unemployment rate for the county (10.5%) in 2020 was higher than it was for the state (8.1%) (Source: Ohio Department of Job and Family Services).

MENTAL HEALTH

HEALTH NEED: The need for mental health treatment and intervention continues to increase, especially for youth. High diagnosis rates for anxiety and depression, as well as the number of residents feeling lonely/ isolated, substantiate this issue.

- Mental and behavioral health was identified as the second most important health-related issue or challenge facing the county. Over three-fourths (78%) of community leaders named mental and behavioral health as the most important health-related issue or challenge.
- More than one in ten residents (11%) sought assistance for mental health issues in the past year.
- On a scale in which 1 is 'not at all important' and 10 is 'very important', community leaders gave mental health services an importance rating of 9.64; the **highest** of the six issues surveyed.
- Only 33% of community leaders felt there are enough services and programs currently available to meet the mental health needs of Erie County.
- The majority (84%) of community leaders indicated it was very important for the Health Department to address people with mental illness.
- Nearly one-quarter (22%) of community members stated their mental health was not good for 11 or more days in the past month.
- Over one-fifth (21%) of residents felt sad or hopeless almost every day for two weeks or more in a row, and stopped doing usual activities in the past year.
- According to the community survey:
 - Nearly one-third of residents (31%) have been diagnosed with depression, and 39% have an immediate family member who has been diagnosed.
 - Nearly one-fifth of residents (19%) have been diagnosed with an anxiety disorder such as obsessivecompulsive disorder (OCD) or panic disorder, while 24% reported an immediate family member has been diagnosed.
 - More than one-tenth of residents (13%) have been diagnosed with post-traumatic stress disorder (PTSD), while 14% indicated an immediate family member has been diagnosed.
- More than half of community leaders (56%) disagreed that "There are a sufficient number of mental and behavioral health providers in the area."
- The rate of suicide deaths in Erie County (17.6%) is higher than the state's rate (15.0%) (Source: Ohio Department of Health).

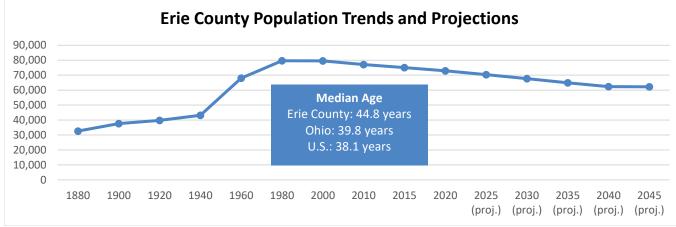
OBESITY AND HEALTHY LIFESTYLE CHOICES

HEALTH NEED: Living a healthy lifestyle lowers the risk of developing many illnesses, like heart disease and diabetes, which are prevalent in the county. A healthy lifestyle can also lead to better mental health.

- Seven percent (7%) of residents identified obesity and healthy lifestyle choices as the most important healthrelated issue or challenge facing Erie County currently. Nearly one-quarter of community leaders (22%) identified obesity and healthy lifestyle choices as the most important health-related issue or challenge.
- Slightly more than half (52%) of community leaders felt there are enough services and programs currently available to address the obesity and healthy lifestyle-related issues in Erie County.
- According to the community survey, less than half of all residents (46.2%) reported having smoked 100 or more cigarettes in their lifetime. Currently, 20% of residents reported smoking every day or some days.
- Adult smoking prevalence is the estimated percentage of the adult population that smokes every day or "most days" and has smoked at least 100 cigarettes in their lifetime. The percentage of adults who smoke in the county (23%) is slightly higher than the state average (22%) (Source: County Health Rankings).
- Nearly one-quarter (24%) of community members have not exercised in the past month. The most common barriers to exercise were health problems, lack of time, and motivation.
- Nearly two-thirds of residents (63%) reported being overweight, and more than one-third (39%) reported they were diagnosed as obese or overweight by a provider.
- More than one-tenth of residents (11%) reported having difficulty obtaining fresh fruits and vegetables.
- Nearly half (48%) of residents reported there were 6 or more days in the past month they did not acquire enough sleep or rest.
- More than one-quarter of adults (29%) in Erie County are considered physically inactive; this is slightly higher than the state average of 28% (Source: County Health Rankings).
- More than one-third of adults (40%) in Erie County have a BMI of 30 or more; this is significantly higher than the state average of 35% (Source: County Health Rankings).
- Community leaders were asked to list challenges residents in the county face in trying to maintain healthy lifestyles like exercising, eating healthy and/or trying to maintain chronic conditions such as diabetes or heart disease. The most common challenges mentioned were lack of knowledge/awareness of services (52%), access to healthy foods (38%), and finances/cost (38%).

Erie County Demographic Profile

Erie County is one of eight coastal counties situated on the eastern border of the Northwestern Ohio region. Of all counties in Ohio, Erie County has the 35th highest population with 72,900 residents. Erie County's population is projected to decrease between 2022 and 2050. The median age in the county (44.8 years) is higher than the median age in the state (39.8).

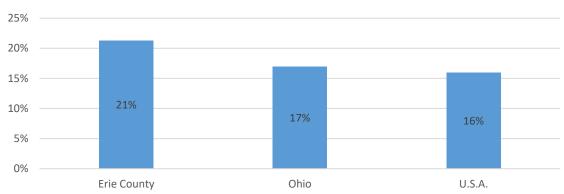


Erie County	Erie County Population Trends & Projections									
Year	Erie County	Ohio			Erie County	Ohio				
1880	32,640	3,198,062		2020	72,900	11,574,870				
1900	37,650	4,157,545		2025	70,350	11,598,670				
1920	39,789	5,759,394		2030	67,740	11,615,100				
1940	43,201	6,907,612		2035	64,910	11,635,110				
1960	68,000	9,706,397		2040	62,300	11,679,010				
1980	79,655	10,797,630		2045	62,240	11,666,880				
2000	79,551	11,353,140		2050	62,160	11,646,810				
2010	77,079	11,353,140		Change	10.740	.71.040				
2015	75,070	11,549,120]	2020-2050	-10,740	+71,940				
SOURCE: Ohio E	SOURCE: Ohio Development Services Agency, U.S. Census									

Erie County Population Trends & Projections – Children								
Voor	Erie C	ounty	Ohio					
Year	Under 5	Under 18	Under 5	Under 18				
2010	4,290	17,501	724,665	2,757,516				
2011	4,216	17,235	720,783	2,735,947				
2012	4,141	16,946	712,820	2,710,735				
2013	4,088	16,618	706,439	2,688,864				
2014	4,050	16,353	700,088	2,666,652				
2015	4,052	16,167	695,996	2,649,557				
2016	3,980	15,801	695,764	2,633,277				
2017	3,970	15,612	695,704	2,620,542				
2018	3,982	15,438	695,933	2,611,520				
2019	4,251	15,279	694,711	2,598,908				
2020	3,985	15,109	692,983	2,587,248				
Change 2010 to 2020	-7.1%	-13.7%	-4.4%	-6.2%				
SOURCE: U.S. Census Bureau								

Erie County has a higher population that is 65 years old or older compared to both Ohio and the country.

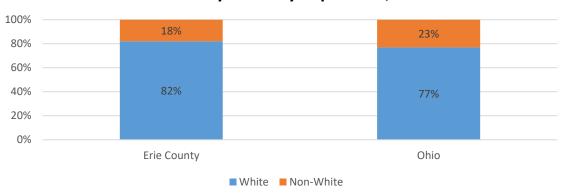




Data Source: US Census Bureau

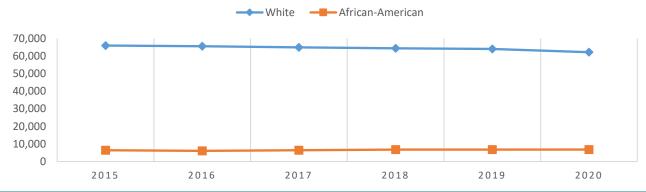
While the majority of the populations in Erie County and in Ohio are white (82% and 77%, respectively), Erie County is slightly less diverse than the state.

Erie County Minority Population, 2020



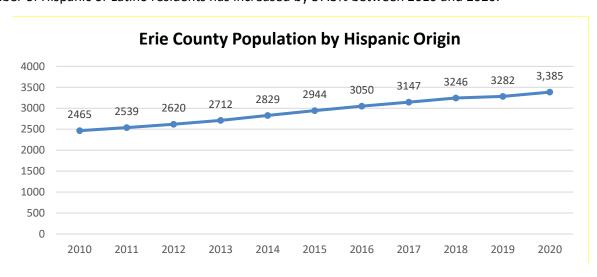
Erie County Population by Race, 2020									
	White	African American	Native American	Asian	Pacific Islander	Other Race	Two or more races		
Ohio	9,080,688	1,478,781	30,720	298,509	5,034	224,344	681,372		
Erie County	62,122	6,807	195	481	11	815	5,191		
SOURCE: U.S. Census Bureau									

Erie County Population Estimates by Race

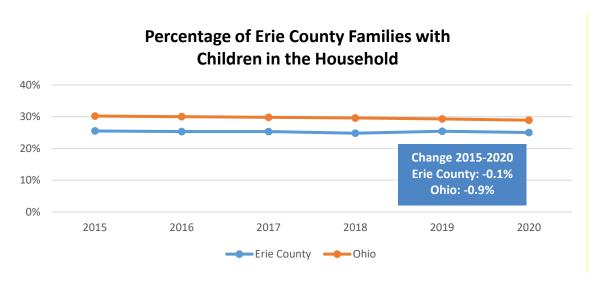


Erie County Population Estimates by Race										
	2015	2016	2017	2018	2019	2020	% Change			
White	65,913	65,526	64,861	64,312	63,928	62,122	- 5.8%			
African-American	6,411	6,066	6,389	6,765	6,769	6,807	+5.8			
Native American	249	363	186	270	292	195	-21.7%			
Asian	388	437	445	443	441	481	+19.2%			
Pacific Islander	67	86	7	6	6	11	-83.6%			
Other race	675	687	806	1,018	1,015	815	+ 17.2%			
Two or more races	2,438	2,643	2,675	2,322	2,329	5,191	+53.0%			
SOURCE: U.S. Census Bured	au, American Cor	nmunity Survey								

The number of Hispanic or Latino residents has increased by 37.3% between 2010 and 2020.



A slightly lower percentage of households in the county (25.0%) have more children in the household than in the state (28.9%). This percentage has remained stable over the past five years.



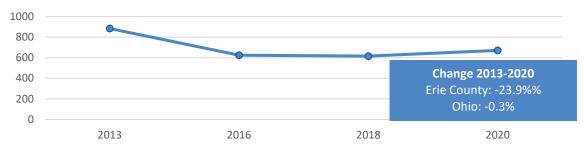
Percentage of Erie County Families with Children in the Household									
County 2015 2016 2017 2018 2019 2020 Change									
Erie County	25.5%	25.3%	25.3%	24.8%	25.4%	25.0%	-0.5%		
Ohio 30.2% 30.0% 29.8% 29.6% 29.3% 28.9% -1.3%									
SOURCE: U.S. Census Bureau, American Community Survey 5-Year Estimates									

In 2020, nearly half (47.0%) of all Erie County households were occupied by married couples. One-quarter of households (25.0%) had children under the age of 18, and more than one-third (35.8%) had at least one adult age 65 years or older. Both the average household and average family size have remained relatively stable over the past five years.

Erie County Households by Type									
Household Type	2015	2016	2017	2018	2019	2020	% Change		
Total households	31,767	31,731	31,577	31,301	31,183	31,319	-1.4%		
Married couple	47.0%	46.7%	46.6%	47.0%	47.0%	47.0%	0.0%		
Married couple with children	13.8%	13.5%	13.4%	13.1%	12.8%	NA not	-1.0%		
Male householder, with own kids	1.9%	1.7%	1.7%	1.8%	1.1%	available for 2020	-0.8%		
Female householder, with own kids	7.4%	7.5%	7.7%	7.2%	5.7%		-1.7%		
Households with children	25.5%	25.3%	25.3%	24.8%	25.4%	25.0%	-0.5%		
Households with 65+	31.6%	32.9%	33.2%	34.3%	35.0%	35.8%	+4.2%		
Average household size	2.35	2.35	2.34	2.36	2.36	2.34	-0.01		
Average family size	2.94	2.91	2.89	2.91	2.91	2.89	-0.05		
SOURCE: U.S. Census Bureau, American	Community Sur	rvev 5-Year Esti	mates						

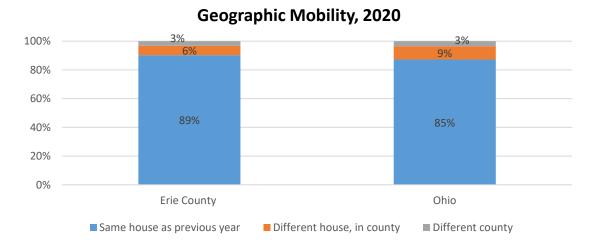
The number of children living with their grandparents in Erie County has decreased significantly since 2013 (23.9%). However, the number for the state has remained relatively the same, decreasing slightly by 0.3%.





Number of Grandparents in Erie County Raising Grandchildren								
County SFY 2013 SFY 2016 SFY 2018 SFY 2020 Change '13- '20								
Erie County	884	624	616	672	-23.9%			
Ohio	99,487	100,667	97,811	91,845	-7.7%			
SOURCE: Public Children Services Association of Ohio (PCSAO).								

Residents of Erie County tend to be slightly less geographically mobile than those of Ohio, with the majority (89%) living in the same house as last year.



Geographic Mobility, 2020					
	Same house as previous year	Different house, in county	Different County, in state	Different state	Abroad
Erie County	88.6%	6.4%	3.1%	1.8%	0.1%
Ohio	85.3%	9.1%	3.4%	1.7%	0.4%
SOURCE: Ohio Development Services Agency, Ohio County Profiles					

Community Assets & Resources

HEALTH CARE ASSETS AND RESOURCES

The ratio of population to primary care physicians, mental health providers, and dentists is slightly lower in Erie County than Ohio. Additionally, there is only one registered hospital located in Erie County. Located in Sandusky, Firelands Regional Medical Center provides services to Erie, Ottawa, Sandusky, and Huron Counties.

1
1
2
7
2

SOURCE: County Health Rankings which used data from Area Health Resource File/American Medical Association for PCP and Dentists, original source of mental health data was CMS, National Provider Identification.

* Ohio Development Services Agency, Ohio County Profiles

Major Employers

Six of the major employers in Erie County include Cedar Fair/Cedar Point, Erie County Government, Firelands Regional Medical Center, Flex-N-Gate/Ventra Corporation, Freudenberg NOK, and International Automotive Components.

Major Employers in Erie County		
Cedar Fair/Cedar Point	Flex-N-Gate/Ventra Corporation	
Erie County Government Freudenberg NOK		
Firelands Regional Medical Center International Automotive Components		
SOURCE: Ohio Development Services Agency, Ohio County Profiles		
ERIE COUNTY: https://devresearch.ohio.gov/files/research/C1023.pdf		

Education Assets and Information

There are 6 school districts in Erie County: Sandusky City, Perkins Local, Vermilion Local, Edison Local, Huron City, and Margaretta Local. The average expenditure per student is less than the state average. However, the graduation rate for Erie County (96.0%) is higher than the state (91.4%).

There are no 4-year public universities or private colleges located within Erie County. However, Bowling Green State University - Firelands, a branch of Bowling Green State University, is located in Huron, Ohio. Two Ohio technical centers are also located in Erie County: the EHOVE Career Center in Milan and the Sandusky Career Center in Sandusky.

County Education Summary, 2020		
	Erie County	Ohio
Public school buildings	23	3,033
# public students	10,708	1,535,460
# public teachers	783.3	110,338.5
Expenditures per student	\$9,957	\$10,669
Graduation Rate	96.0	91.4
# non-public schools	6	952
# non-public students	1,077	256,697
# 4-yr public universities	0	13
# 4-year branches	1	23
# 2-year public colleges	0	38
# Private colleges and universities	0	48
Public libraries (Main/Branches)	4/7	251/734
SOURCE: Ohio Development Services Agency, Ohio County Profiles ERIE COUNTY: <u>C1023.pdf (ohio.gov),</u> OHIO: <u>C1001.pdf (ohio.gov)</u>		

Community Health Assessment: Detailed Results

The three data components included in this assessment include:

- **Community Survey** The community survey took a representative sample of 384 adults in the county. Survey questions focused on the following areas: community need and social determinants, access to care, mental health and substance abuse, healthy living, vaccinations, chronic diseases, and transportation.
- **Secondary Data Analysis** Secondary data was examined to supplement survey results. Main sources of secondary data include the American Fact Finder, the Ohio Department of Health, and County Health Rankings.
- Community Health Leader Survey- Additional data was gathered to provide context for the primary and secondary data above. This included the Community Leader survey: an online survey completed by 50 community leaders who have knowledge of and/or experience in community health.

More detailed information about the data components can be found in the Research Methodology appendix.

Results of data collection and analysis are broken down into the following categories:

- → Community Needs
- → Social Determinants
- → Personal Health Status
- → Access to Health Care
- → Mental Health
- → Oral Health
- → Smoking/Tobacco Use
- → Alcohol and Substance Abuse
- → Maternal, Infant, and Child Health
- → Healthy Living
- → Communicable Diseases, Vaccinations and Prevention Services
- → Chronic Disease Management
- → Transportation
- Housing
- → Environmental Quality
- → Safety, Injury and Violence
- → Reproductive and Sexual Health

COMMUNITY NEEDS

COMMUNITY SURVEY

		% of responses	N	
Most important books	Addiction/overdoses	22.5%		
Most important health issue (open ended, Top 3)	Mental health/behavioral health	11.9%	351	
133ue (open enueu, 10p 3)	Affordability	10.2%		
	Food	16.5%		
	Mental health issues	11.4%		
	Healthcare	10.7%		
	Utilities	9.9%		
	Medicare or other health insurance	9.7%		
	Prescription assistance	7.7%		
	Employment	6.1%		
Sought assistance in past	Home repair	5.8%		
year for	Rent/mortgage assistance	5.7%	387	
	Transportation	5.6%		
	Dental care	5.2%		
	Clothing	5.0%		
	Shelter	3.0%		
	Legal aid services	2.6%		
	Affordable childcare	1.4%		
	Gambling addiction	0.3%		
	None of the above	66.1%		

All residents were asked what they thought was the most important health-related issue or challenge in Erie County. Slightly less than one-quarter (22.5%) of community residents felt that addiction/overdose was the most important health issue in the county. The second most important health-related issue was mental/behavioral health. Other health-related issues or challenges include, in order of importance, affordability (10.2%), cancer (9.9%), obesity/healthy lifestyle choices (7.1%), COVID-19 (6.8%), diabetes (5.1%), flu (4.8%), and aging/elder care (4.8%).

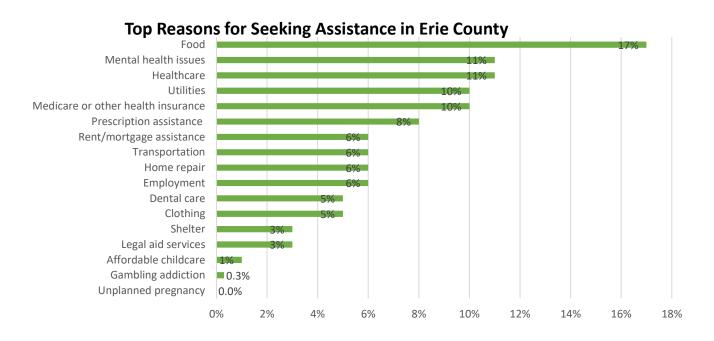
Most Important Health-related Issue or Challenge			
Issue/Challenge	# of Responses	% of Responses	
Addiction/overdose	79	22.5%	
Mental/behavioral health	42	11.9%	
Affordability	36	10.2%	
Cancer	35	9.9%	
Obesity/healthy lifestyle choices	25	7.1%	
COVID-19	24	6.8%	
Diabetes	18	5.1%	
Flu	17	4.8%	
Aging/elder care	17	4.8%	
Heart disease	14	3.9%	
Access to healthcare	14	3.9%	
Social determinants of health	9	2.5%	
Environmental factors	8	2.2%	
Safety factors	5	1.4%	
Sex education/health	5	1.4%	
Dental and vision focus	5	1.4%	
Media	3	0.8%	
Health education	3	0.8%	
Lack of exercise	3	0.8%	
Lack of nutrition	2	0.5%	
Shingles	2	0.5%	
COVID-19 vaccine divide	1	0.2%	
Suicide	1	0.2%	
Dementia	1	0.2%	
Foodborne disease	1	0.2%	
Arthritis	1	0.2%	
Discrimination	1	0.2%	
Alcohol	1	0.2%	
		(n=351)	

Question: What do you think is the MOST important health-related issue or challenge facing your community?

Residents were also given a list of seventeen issues and asked if they or a loved one sought assistance for any issue in the past year.

- → **FOOD:** One-sixth (16.5%) of residents sought assistance for food in the past year. Groups of residents more likely to have sought assistance in this area include residents aged 18 to 44 years, those with an annual income under \$25,000, residents with a high school diploma or less education, those who are employed part-time or unemployed, those who are single or divorced, and renters.
- → **MENTAL HEALTH ISSUES:** More than one in ten residents (11.4%) sought assistance for mental health issues in the past year. Groups of residents more likely to have sought assistance in this area include residents aged 18 to 44 years, those with an annual income under \$25,000, those who are single, and renters.
- → **HEALTHCARE**: About one in ten residents (10.7%) sought healthcare assistance in the past year. Groups of residents more likely to have sought assistance in this area include females, those with an annual income under \$25,000, residents with a high school diploma or less education, those who are unemployed, those who are single or divorced, and renters.
- → **UTILITIES:** About one in ten residents (9.9%) sought assistance for utilities in the past year. Groups of residents more likely to have sought assistance in this area include residents aged 18 to 44 years, those with an annual income under \$25,000, residents with a high school diploma or less education, those who are employed part-time or unemployed, those who are single or divorced, and renters.
- → MEDICARE OR OTHER HEALTH INSURANCE: About one in ten residents (9.7%) sought assistance in the past year for Medicare or other health insurance. Groups of residents more likely to have sought assistance in this area include residents age 65 years or older, those with an annual income under \$50,000, those who are unemployed, those who are single, and renters.
- → PRESCRIPTION ASSISTANCE: Less than one in ten residents (7.7%) sought prescription assistance in the past year. Groups of residents more likely to have sought assistance in this area include those with an annual income under \$25,000, those who are unemployed, and renters.
- → **EMPLOYMENT:** Only 6.1% of residents sought assistance in the past year for employment. Groups of residents more likely to have sought assistance in this area include residents aged 18 to 44 years, those with an annual income under \$50,000, residents with a college degree or less education, those who are employed part-time or unemployed, single residents, and renters.
- → **HOME REPAIR:** Fewer than 5.8% of residents sought assistance in the past year for home repair. Those with an annual income under \$50,000 were more likely to have sought assistance in this area.
- → RENT/MORTGAGE ASSISTANCE: Similarly, 5.7% of residents sought assistance in the past year for rent/ mortgage assistance. Groups of residents more likely to have sought assistance in this area include residents aged 18 to 44 years, those with an annual income under \$25,000, residents with a college degree or less education, those who are employed part-time or unemployed, and renters.
- → **TRANSPORTATION:** Over five percent (5.6%) of residents sought assistance in the past year for transportation. Groups of residents more likely to have sought assistance in this area include those with an annual income under \$25,000, residents with a high school diploma or less education, those who are unemployed, those who are single or divorced, and renters.
- → **DENTAL CARE:** Over five percent (5.2%) of residents sought assistance in the past year for dental care. Groups of residents more likely to have sought assistance in this area include those with an annual income under \$25,000, residents with a high school diploma or less education, those who are employed part-time or unemployed, and renters.

- → **CLOTHING:** One in 20 residents (5.0%) sought assistance in the past year for clothing. Groups of residents more likely to have sought assistance in this area include residents aged 18 to 44 years, those with an annual income under \$25,000, residents with a high school diploma or less education, those who are employed part-time or unemployed, those who are single or divorced, and renters.
- → SHELTER: A small number of residents (3.0%) sought assistance in the past year for shelter. Groups of residents more likely to have sought assistance in this area include those with an annual income under \$25,000, those who are employed part-time or unemployed, and renters.
- → **LEGAL AID SERVICES:** Fewer than 2.6% of residents sought assistance in the past year for legal aid services. Groups of residents more likely to have sought assistance in this area include those with an annual income under \$50,000 and those who are not married.
- → **AFFORDABLE CHILDCARE:** A small number of residents (1.4%) sought assistance in the past year for affordable childcare. Groups of residents more likely to have sought assistance in this area include residents aged 18 to 44 years, those with an annual income under \$25,000, and those who are working part-time.
- → **GAMBLING ADDICTION:** Only a small portion of residents (0.3%) sought assistance in the past year for gambling addiction. There were no statistically significant demographic differences among groups in this area.
- → **UNPLANNED PREGNANCY**: No residents sought assistance for an unplanned pregnancy in the past year.
- → NONE OF THE ABOVE: Two-thirds of residents (66.1%) did not seek assistance in the past year for any of the services mentioned above.



COMMUNITY LEADER SURVEY

Fifty (50) community leaders completed an online survey evaluating the most important health-related issues in Erie County. Community leaders then identified areas of focus for health interventions. Questions were open-ended, in which the leaders could give multiple responses.

Over three-fourths (78%) of community leaders identified mental and behavioral health issues as most important. More specifically, the following were mentioned: availability of providers/workforce, decreasing stigma, increasing service capacity, and decreasing wait times for treatment.

More than half (53%) of community leaders mentioned social determinants of health as important health-related issues or challenges. These include transportation, affordable and available housing, access to food, childcare, and violence. Social determinants of health could be addressed by connecting residents with available resources, removing barriers, and facilitating education programs.

More than one-third (37%) of community leaders identified addiction and overdose as a priority. This includes prevention, treatment, and recovery.

Other priority issues identified by community leaders include access to healthcare, COVID-19, obesity and healthy lifestyle choices, health education, vaping and smoking cessation, and prevention.

Most Important Health-related Issue or Challenge		
	# of TOTAL Responses	% of Leaders
Mental/Behavioral health	38	76%
Social determinants of health	26	52%
Addiction/Overdoses	18	36%
Access to healthcare	15	30%
COVID-19	14	28%
Obesity/Healthy lifestyle choices	11	22%
Health education	9	18%
Vaping/Smoking	4	8%
Alcohol	3	6%
Dental and Vision focus	3	6%
Environmental factors	2	4%
Heart disease	2	4%
Safety factors	2	4%
Cancer	1	2.0%
Aging/Elder care	1	2.0%
Affordability	1	2.0%
Prenatal	1	2.0%
Total	151	(n=50)

When asked what needs to be done to address priority health issues, leaders recommended the following: increased resources throughout the county, collaboration, outreach and education, increased funding, and addressing basic needs.

What Needs to be Done to Address Issues in Erie County **What Needs Addressed** Issue PLEASE NOTE: recommendations are verbatim/word-for word; only minor grammatical changes were made to the responses given by community leaders below. In-home family counseling, mental health crisis response unit More access & awareness Mental health services, promotion of services, stigma reduction efforts, routine screenings • Find more resources to evaluate students Resources, public/private partnerships, recruitment of providers and staff, virtual and Increased access to resources/reducing stigma More resources for care More counselors Remove stigma, increase availability More services available Increased access to services More providers, quality services - less wait time Increase capacity and reduce wait times for services Increase Behavioral Health Workforce Long-term in-patient hospital Eliminate state barriers to funding sources like Medicaid and Medicare Education More transparency so that information relating to the treatment and/or diagnosis of Mental/Behavioral persons health Collaborations, full circle, more resources ID gaps in service and seek ways to compensate for those gaps. Break the stigma campaigns, offer satellite services More youth directed mental health providers Address disparities in accessing treatment Increase awareness Accessible care Coping skills, prevention Do we have enough counselors to help people understand talking about it will help? Services where people are located - pop up clinics More coordinated efforts Educate regarding problem identification and make resources available **Professionals** Provide in school mental health services Increase capacity, reduce wait times The demand for mental health exceeds the capacity of the local resources for both adults and youth Education on mental health Increase capacity and what constitutes a crisis and need for stabilization. Grants to provide programs for family counseling Reality based marketing for what healthy food tastes like, public awareness about food

Better access to programs like SNAP and WIC, more outreach Public transportation specifically for medical appointments

2022 Erie County CHA

Social determinants

of health

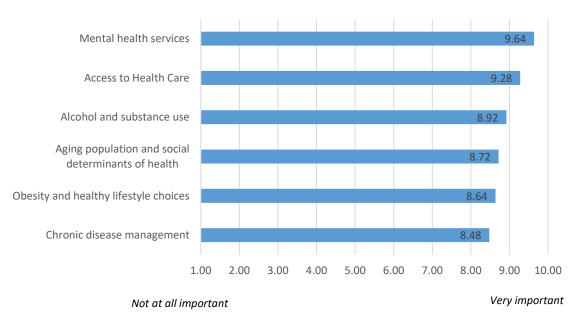
addictions

What Needs to be Do	ne to Address Issues in Erie County
Issue	What Needs Addressed
	Community subsidized farm to table
	• Grants
	Secure funding
	Housing Improvement Funding
	 May not seem like a health issue, but even for the hospital, transportation is limited.
	More bike paths/well-lit sidewalks
	Reduce or eliminate food deserts
	Community subsidized group housing
	• Grants
	• Larger efforts from local businesses to donate/address/distribute to those in need.
	More focus on the family unit surviving
	We lack safe adequate housing in our community to meet the basic needs of our citizens
	Upgrade, build low-cost affordable housing
	State minimum payment
	Development of programs
	Get involved in public recreation as mental health care
	Healthy coping mechanisms, access to care
	Build community, offer education within neighborhoods, address generational trauma
	Public/private partnerships, support of resources such as Victory Kitchen and OHGO
	Continued efforts to absorb a larger majority of qualified Moms into existing programs
	We need a provider that will follow best practices in field
	Addiction prevention and recovery
	• Work with others in the community to reach families/individual to facilitate treatment
	More funding for projects and treatment
	Increase awareness
	Continue education and treatment sooner
	• Early intervention in schools and more PSA information about the importance of healthy
	living
Addiction/Overdose	 Increased access to resources/reducing stigma
Addiction/ Overdose	More inclusive services
	More providers, quality services - less wait time
	 Increase capacity and available service providers using best practices
	Continue Narcan efforts, rehab opportunities
	• Increase capacity, reduce wait times, and increase use of providers using best practices
	Peer support, more paths to recovery
	Continue to educate the public and provide resources and expand access to care
	Education at all levels
	Mental health and substance use services, circle of care, stigma reduction efforts
	Collaborative efforts among care giving organizations
	Network to connect patients and residents, community collaboration, and outreach
	Collaboration and mutual support
	Accessibility for seniors, low income, and disabled
Access to healthcare	Patient/Insurance education
	More providers, quality services - less wait time
	Increase providers, community service coordination
	Focus on funding services and vote out Republicans
	More accessible offices

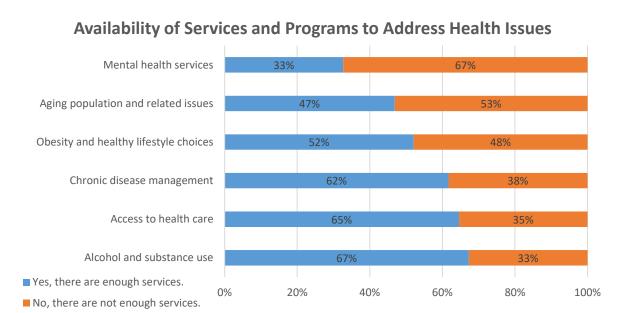
Issue	Done to Address Issues in Erie County What Needs Addressed
13300	Reaching out to those without doctors in the community and help arrange community
	sign ups
	Provide a pediatric service
	Bring doctors to where people are- work, school, homes
	Increased education about existing medical/dental services
	 Improved access, especially for low socioeconomic status families, expanded offerings fo
	appointments
	Work with and refer to other health institutions
	Mass messaging county wide
	Marketing Campaign
	Market Benefits and Reduce Stigma
	Education and interventions
	Public education
COVID 10	Promote vaccines
COVID-19	Increase public awareness of communicable diseases and educate on benefits of vaccines
	Education
	More education
	 Increase access to resources/accessibility
	Education and incentives
	Community collaboration to reach people
	Identify trends and educate public
	Take fresh food bank opportunities further outside of the city to rural areas that truly are
	a food desert
	Community markets/farmers markets
	Healing trauma, less stress, address food deserts
	Funding to stimulate awareness and education
Obesity/Healthy	Increased education about existing supports
lifestyle choices	Community partnerships to raise awareness, better access to care, incentivizing
	preventive care
	Access to program, infrastructure changes to increase mobility and walkability, access to healthy food.
	healthy food Impact social determinants, chronic disease management programs
	 Impact social determinants, chronic disease management programs Education and support
	• •
	 Classes related to public service for staff Consistent messages
	 Consistent messages Educational materials, educational events, incentive programs
Health education	Better explanation of your work to the public
i leaith euutation	New website, more community outreach
	Reach the public on public's language
	State subsidized local college certification

Community Leaders were given a list of health-related issues identified through the community survey and asked, based on their professional experience, to rank each issue on a scale of 1 (not at all important) to 10 (very important). Responses were averaged; it should be noted that all six issues had an average importance of 8.48 or higher. The top three issues, based on the rankings, were (1) mental health services, (2) access to health care and (3) alcohol and substance abuse.

Importance of the Top 6 Health-Related Issues/ Challenges in Erie County



Health leaders were also asked if they thought there were adequate services and programs in place to address each issue. Health leaders noted that there are adequate services for alcohol and substance abuse, chronic disease management, and access to healthcare.



What is Missing from Erie County to Address Health-Related Issues/ Challenges			
Issues	What is Missing		
	Funding/Access to supports and services (mentioned by 11 residents)		
	Access to guardians and competency evaluations		
	Appropriate housing, availability, and accessibility outside of Sandusky		
	Lack of family support		
	Development of the Home Care model which will allow an older adult to stay at home in a sa		
	healthy environment. This includes wrapping all those services around the older adult including		
	SDOH and all the providers talking to each other about that person's care		
	Funding to address these with those most in need		
	Resources available in the rural areas		
	Programs to support the aging population and to improve SDOH		
	Not many services provided		
Aging Population	Need for in-home supports and services and easily accessible transportation 24/7		
and Related	Case management to make sure they can navigate the depth of services to get what they need		
Issues	Good transportation, stable employment, and income		
	Grant funding and services to enable elderly residents to safely remain in their homes as they age		
	Awareness/Knowledge/Educational programs (mentioned by 5 residents)		
	Awareness and programs		
	Better community education campaigns		
	I think we have a strong foundation of services available, but community knowledge of resources		
	needs to increase, as well as connections and referrals. Often it can feel as though agencies are		
	working against each other instead of with each other		
	No awareness of anywhere specializing in age-related issues		
	More coordinated education and resources		
	Cost of care/Social determinants (mentioned by 3 residents)		
	Cost of care		

	om Erie County to Address Health-Related Issues/ Challenges
Issues	What is Missing
	 Better screening and awareness of social determinants, connecting community resources in a more unified way, removing barriers for those in financial distress (for example - developing a voucher program to subsidize STS having to charge for transportation to/from medical appointments or to/from grocery store for food
	Outreach to low-income seniors
	Providers specializing in Geriatric Medicine (mentioned by 2 residents)
	 We have very few options for doctors that specialize in geriatric medicine, and we do not have psychiatry in the area that specializes in geriatric psychiatry, even within the nursing homes in the area. This is critical because we see so many elderly people with issues related to medication interactions/polypharmacy problems and there is no one that is sitting down and taking a critical look at it from a geriatric medicine specialty perspective Doctors/NP's who specialize is geriatric issues
	Other missing items
	Further development and collaboration
	Increase need on the horizon
	 I do not feel like our community is properly serving our aging population for mental health. We continue to see elderly people living on their own and living in terrible conditions. Agencies try to help, but if they are competent, we can do very little to help them when they refuse help Help those with needs, especially those who do not live close to relatives
	 Older adults believe for the sake of maintaining their independent lifestyle they believe they are best served, by NOT telling their doctor when they sense they are experiencing a functional deficit
	Education/Information (mentioned by 3 residents)
	Non-insurance related information/access
	Education earlier in life to prevent chronic disease onset
	Awareness and programs Consumption of the American device and the Americ
	Case management (mentioned by 3 residents)
	Ability to follow patients from hospital/facility to community to encourage/ensure compliance with plan of case.
	with plan of care
	 Follow up/ Case Management to get them to live a better life and educate them on their disease Engagement and collaboration (mentioned by 3 residents)
	Not getting people to engage the system if they need help
Chronic disease management	 We need more ways to incentivize people to follow-up for chronic disease management. There needs to be a complete program in place that includes case management, transportation, access to medication, home visits, etc.
	Continued development of community collaboration
	Specialty treatment (mentioned by 2 residents)
	 Specialty care linked with services that provides ongoing monitoring and interventions for the underinsured
	More specialists needed within Erie County
	Access (mentioned by 2 residents)
	Better access to PCPs to manage effectively
	More options and supports (mentioned by 2 residents)
	Need for in-home supports and services and easily accessible transportation 24/7
	 More treatment options for individuals with chronic diseases Other missing items

What is Missing fro	om Erie County to Address Health-Related Issues/ Challenges
Issues	What is Missing
	 Group appointments. For those who are willing, hold group appointments of 10 people who are not managing their BP or CHF or Diabetes. Patients learn from other patient's experiences. Cleveland Clinic has Functional Medicine: Functioning for Life is a robust 10-week program of shared medical appointments designed for new patients to the Center for Functional Medicine. Disease-specific programs have been developed and patients can select the series that is right for them. These group appointments introduce patients to the functional medicine approach and provide the necessary laboratory testing, health information and dietary guidance needed to achieve optimal wellness. Each week, patients will interact with a multidisciplinary team of functional medicine providers including physicians, physician assistants, nurse practitioners, dietitians, health coaches and behavioral health therapists I don't think enough people seek or utilize the services offered in the community to manage their diseases Very expensive, universal healthcare, medication management
	 Funding for non-reimbursable services More providers (mentioned by 7 residents)
	 Consultative geriatricians- training primary care/internal medicine professions so they don't take it as a personal affront when a patient wants the PCP to consult with a Geriatrician. Veterans PCPs don't see a Geriatrician have any expertise that the PCP doesn't already have themselves. Geriatricians know how to address things that PCPs are uncomfortable dealing with More specialists
	More physicians who specialize in healthcare issues for Senior Citizens
	• The physician workforce in the area is aging. It is tough to recruit to rural areas
	Transportation and other social determinants (mentioned by 5 residents)
	 Those with lower socioeconomic status and/or poor health literacy have significantly greater barriers to care due to education/awareness, financial and transportation related issues Financial need, transportation
	People who live in poverty do not have adequate access
	Dentists not accepting Medicaid (mentioned by 4 residents)
Access to Health Care	 There are very few dentists in the area that accept Medicaid. Except the ECHD and at FHS, they are good but cannot handle complex issues. There are not any providers in the area that will handle complex issues for people with Medicaid- they have to go to Fremont or all the way to Columbus
	Lack of information/ Education/ Partnerships (mentioned by 3 residents)
	 Not enough information about resources getting to people who need services Health care providers and social service agencies do not have the education to understand priorities of patients with various issues Better partnerships with Serving our Seniors and Senior Center
	Engagement (mentioned by 2 residents)
	 Engagement- people who are not health literate do not understand the 'whys' behind things.
	Other missing items
	Specialists' appointments can be months out
	Doctors of color
	 Funding for ongoing specialty care beyond primary care
	 Individuals don't seem to take responsibility for scheduling an appointment to establish care with
	a doctor or dentist. The emergency room is being used to provide routine care that should be
	provided by primary care
	L

What is Missing from Erie County to Address Health-Related Issues/ Challenges					
Issues	What is Missing				
	 Internal medicine, psychiatry, dentists, and mid-level provider are not adequately replacing physicians More accessible offices 				
	Treatment services/programs/supports (mentioned by 5 residents)				
	 Adults' system is ok. For Youth, what is available is provided ineffectively and does not follow best practices Easy access to drugs/alcohol, hard to link to treatment services Increase capacity for services More OP services More peers support. More options for recovery support- the same path doesn't work for everyone. More after- hours options for appointments to accommodate those with day-time 				
	work schedules				
	Education and engagement/Stigma reduction (mentioned by 3 residents)				
	 Increase awareness of existing agencies to help reduce the stigma of seeking help Not getting people to engage the system if they need help. Services may be available, but people are not seeking the help or are not being pushed in the right direction Outreach, Awareness, Break Stigma, Services 				
Alcohol and	Collaboration (mentioned by 2 residents)				
Substance Use	 Faster access to services, providers that utilize best practice standards, case management services, linkage to recovery supports Transportation to and from appointments, care without judgement. Plans for care after detox treatment and sober living Long term assistance (mentioned by 1 respondent) Extended stay detox and referral services to ensure successful outcomes. Long-term phased approach over years rather than months Affordable healthcare/help (mentioned by 1 respondent) Funding for non-Medicaid covered services and provider choice Other missing items I think the county needs stricter standards through the courts for mandated treatment for alcohol and substance use I think we need to establish a better line on when we provide opportunities for rehab and when we switch to oversight and either aggressive probation or incarceration. Some people don't want help and there's no accountability for behavior 				
	Timely care/Accessibility (mentioned by 9 residents)				
Mental health services	 Less wait times for assessments of all kinds Long wait lists Professional help for all ages/needs that is accessible Wait times are too long More access to care Access and physicians and staff available to meet the growing needs of our community. Increase capacity for services Wait times are too long 				
	More providers/locations/treatment centers/resources in community (mentioned by 8 residents)				
	 More providers Lack of long-term in-patient beds for those who are chronically mentally ill. Not enough providers or mental health hospitals to provide care 				

What is Missing from Erie County to Address Health-Related Issues/ Challenges

Issues What is Missing

- Primarily there is a lack of residential mental health services across the state, particularly for individuals in need of long-term residential mental health treatment
- Providers, full circle care
- Shortage of providers
- In-home family therapy, mobile crisis response, the option of case management within each mental health agency, respite for parents/guardians with children having mental health diagnosis
- Community supports for parents, resources, and access to care particularly in youth
- Adult system is ok, not great. For Youth there's not much available and less that is effectively provided

Workforce/Staff shortages (mentioned by 5 residents)

- Not enough clinicians
- Not enough social workers, therapists, and doctors. Not enough IP for crisis management
- Mental health practitioners Erie County simply does not have enough psychologists
- Lack of providers to serve the community
- Just not enough services for the current crisis. Can we add more counselors in schools?

Education and information/Stigma reduction (mentioned by 5 residents)

- Outreach, Awareness, Break Stigma, Services
- Mental Health has a stigma and not enough people admit or recognize they have a problem. Far
 too often we are reactive toward people who have mental health issues instead of being
 proactive in helping the person before an incident occurs
- Reduce the stigma of getting help
- Social acceptance of help
- Better understanding for Professionals who directly handle mental health cases

Specific kinds of care/treatment approaches (mentioned by 4 residents)

- Primarily child and adolescent service providers and facilities
- More family counseling
- Mental Health services in school is a biggie, there should be several in the schools, how are we
 addressing this in schools, who is addressing stigma around it, prevention in schools will reduce
 many from having substance use problems later in life, we are missing specialized mental health
 providers in our area, not enough or you have to go towards Cleveland for specialization
- Short term triage/crisis stabilization to manage a person while they are connected to necessary services. Also need additional mental health services in schools

Knowing where to go for help (mentioned by 2 residents)

- Understanding how to get help/services
- Not getting people to engage the system if they need help. Services may be available, but people
 are not seeking the help or are not being pushed in the right direction

Funding/Insurance/Affordability (mentioned by 4 residents)

- Federal government funded in-patient care facilities
- Better partnerships between existing agencies to ensure all facets of our population are aware of the resources available
- Expanding traditional health insurance plans to include mental health services.
- Cost of care

Address social determinants of health (mentioned by 3 residents)

- Expansion of publicly available mental health services for low to middle income persons
- Pop up clinics throughout neighborhoods where transportation is a barrier
- Barriers to attend appointments transportation/living in crisis

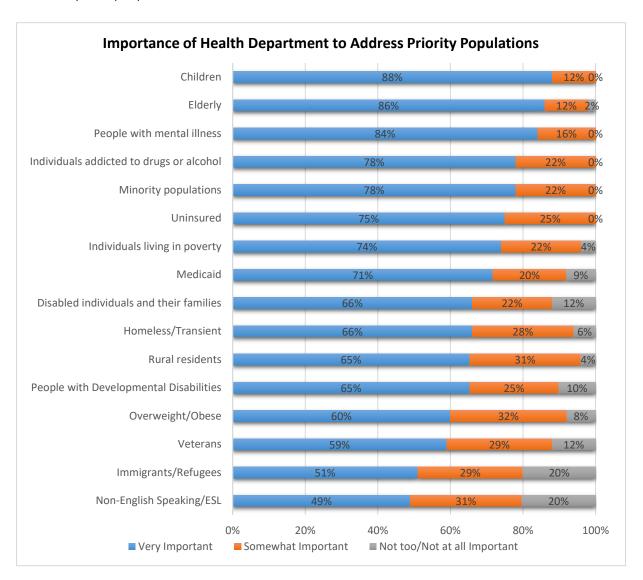
Issues	What is Missing
133003	Integration/Coordination/Collaboration (mentioned by 2 residents)
	Integration of physical and mental health services. Some mental health/addiction issues are
	driven by physical health issues. Treating these separately reduces good health outcomes
	 Leveraging telehealth and virtual care. Connecting various mental health resources in a
	coordinated fashion vs fragmentation and competition that exists in many areas today
	Public/private partnership opportunities?
	Other missing items
	The ability to hold persons who fail to comply with treatment programs and continue to create
	disruptions/crimes/whatever. Red flag laws for firearms possession
	Need broader definition of what constitutes a crisis
	Education, information, and buy-In (mentioned by 6 residents)
	Education on eating healthy
	Education Education
	Education on healthy lifestyles Columnia and a filiping healthy lifestyle vs. not.
	Education- cost of living healthy lifestyle vs not
	More education about taking responsibility and access to services
	Education and services assistance for high-risk children and adults Constitution of the formula of the fo
	Specific programs/approaches (mentioned by 5 residents)
	Walking and biking trails
	Healthy living mentorship
	More intervention in schools
	Physical education needs to be a higher priority in school
	Visibility of programs to identify dangers and consequences at elementary school level
	More programs, resources, supports (mentioned by 5 residents)
	Awareness and different activities individuals can participate in
	Connectivity and walkability, access to physical activity programs
	Opportunity to choose healthy lifestyles
esity and	Outreach, Awareness, Break Stigma, Services
althy lifestyles	Programs, resources, access to gyms
oices	Food access/Nutrition (mentioned by 4 residents)
	Healthy food options
	Healthier on-the-go food options. People are busy and need healthy drive-thru options. Food
	deserts within the city of Sandusky need addressed
	Healthy food choices
	• Quality food at affordable prices, and educational tools to teach people how to prepare whole
	food
	Access and Affordability (mentioned by 4 residents)
	Accessible and affordable
	 Access to healthy food and recreational spaces during cold weather
	Access to healthy foods, affordable foods, and knowledge of healthy eating/cooking could all
	affect obesity rate in our county. There are many ongoing efforts to effect change in these are
	however it's a matter of ensuring our efforts are affective and ensuring widespread access
	Primary care access
	Collaboration and coordination (mentioned by 1 respondent)
	Better community messaging, education, awareness. Integrating community health efforts

What is Missing from Erie County to Address Health-Related Issues/ Challenges			
Issues	What is Missing		
	Other missing items		
	 Services may be available, but people are not seeking the help or are not being pushed in the right direction Convenience 		
	People have an apathy toward obesity and healthy lifestyle choices. We can encourage healthy lifestyles, but if the public chooses not to listen, they continue their unhealthy path		
	• Stigma		

Over one-third (36%) of community leaders reported that there were additional important health issues that they would like to see the Health Department focus on over the next three years. The most common responses were mental health services, vaccinations, and community collaboration.

	# Responses	% of Leaders
Mental health services	5	10.0%
Vaccinations	4	8.0%
Community collaboration	4	8.0%
Social determinants	2	4.0%
Aging population	2	4.0%
Drug and alcohol use in youth	1	2.0%
Addiction	1	2.0%
Environmental health	1	2.0%
Educational programs	1	2.0%
Firearms injuries	1	2.0%
Miscellaneous	1	2.0%

Community leaders were asked how important it is for the Erie County Health Department to address each **demographic group**. Most community leaders (80% or more) thought it was very important to address three specific groups: children, the elderly, and people with mental illness.



Community leaders listed **problems, barriers, or gaps in services** that prevent residents from receiving health-related care and services. The most common barriers to service were transportation issues (62.0%), cost (40.0%), and education/awareness of services (34.0%).

Problems, Barriers, or Gaps in Services				
	# of TOTAL Responses	% of Leaders		
Transportation issues	31	62.0%		
Cost	20	40.0%		
Education/awareness	17	34.0%		
Social acceptance/stigmas	10	20.0%		
Health insurance	10	20.0%		
Uncertainty/fear	6	12.0%		
Mental health	6	12.0%		
Personal unwillingness to seek care/Social norms	5	10.0%		
Language/Cultural barriers	5	10.0%		
Poverty/income inequality	4	8.0%		
Awareness of what is available	4	8.0%		
Availability	4	8.0%		
Hours services are provided	4	8.0%		
Waiting lists	4	8.0%		
Lack of resources/services	3	6.0%		
Not enough options	3	6.0%		
Trust	2	4.0%		
Communication issues	2	4.0%		
Engagement	2	4.0%		
Lack of support	2	4.0%		
Lack of in-home supports	2	4.0%		
Follow ups/primary care issues	2	4.0%		
Lack of life skills	2	4.0%		
Knowledge of insurance	1	2.0%		
Childcare	1	2.0%		
Unable to leave home	1	2.0%		
Miscellaneous	11	22.0%		
Total	164	(n=50)		

Question: What are some problems, barriers, or gaps in services that prevent residents from receiving health-related care and services they need?

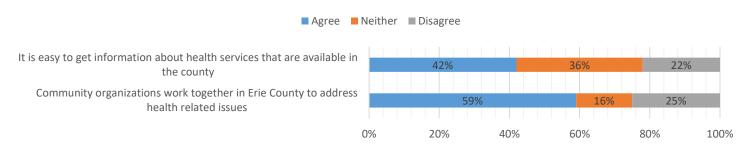
Community leaders were asked what is being done well to address health and quality of life. Nearly one-third of residents (32.0%) mentioned something related to the Health Department. Specific to the Health Department, the following were mentioned: quality of the staff, variety of programs and services offered, collaboration with the community and other agencies, and the amount of information provided to the community.

Leaders reported the following strengths: many/ a variety of services and programs available (32.0%), strong agencies and agencies working together (14.0%), and parks and recreational opportunities (12.0%).

Erie County Strengths: What is Being Done Well				
	# of TOTAL Responses	% of Leaders		
Health Department	16	32.0%		
Many/variety of programming/services available	11	22.0%		
Agencies work together/Strong organizations	7	14.0%		
Parks and recreational opportunities	6	12.0%		
Addressing the pandemic	4	8.0%		
Addiction services and supports	4	8.0%		
Many opportunities for health-related education	4	8.0%		
Expansion of services	3	6.0%		
Good hospital system	3	6.0%		
Awareness of issues and needs in the community	3	6.0%		
Food drives/pantries	2	4.0%		
Total	63	(n=50)		
Question: In your opinion, what is being done well in Erie County in the areas of health and quality of life?				

More than half (59.2%) of community leaders agree that "community organizations work together in Erie County to address health-related issues" with 12.2% in strong agreement. Nearly one-quarter, 24.5%, disagreed with this statement. Less than half (42.0%) of community leaders agree that "it is easy to get information about health services that are available in the county," with 6.0% in strong agreement. Around one-fifth (22.0%) disagree with this statement.

Access to Health Information



SOCIAL DETERMINANTS

SECONDARY DATA ANALYSIS

The percentage of the population aged 18-24 years with a high school degree or more education is slightly lower in Erie County than in the state. However, the percentage of the population with a high school degree or more education for those age 25 years and older is slightly higher than the state average (92.2% for Erie County and 90.8% for state). Only 24.9% of Erie County residents have a bachelor's degree or more education; this is less than the state average of 28.9%.

Educational Attainment by Degree and Age								
	2016	2017	2018	2019	2020	Change 2016-2020		
Percentage that h	nave high scho	ol degree or h	igher, ages 18-	24 years				
Erie County	88.7%	89.9%	89.7%	90.7%	87.9%	-0.8%		
Ohio	86.0%	86.4%	86.8%	87.0%	87.3%	+1.3%		
Percentage that h	nave high scho	ol degree or h	igher, age 25 y	ears and older				
Erie County	90.6%	91.6%	91.9%	91.8%	92.2%	+1.6%		
Ohio	89.5%	89.8%	90.1%	90.4%	90.8%	+1.3%		
Percentage that h	nave bachelor'	s degree or hig	gher, age 25 ye	ars and older				
Erie County	21.6%	22.4%	22.7%	23.2%	24.9%	+3.3%		
Ohio	26.7%	27.2%	27.8%	28.3%	28.9%	+2.2%		
SOURCE: United States Census Bureau, American Fact Finder								

Measures of unemployment include persons who were not employed but who were actively seeking work, those waiting to be called back to a job from which they were laid off, or those waiting to report within thirty days. In 2020, the unemployment rate for the county was higher than it was for the state (10.5% for Erie County and 8.1% for the state). Rates for both the county and state increased over the five-year period.

Unemployed Residents in Erie County								
	2016	2017	2018	2029	2020	% Change 16 -21		
Erie County	5.5%	6.1%	5.6%	5.0%	10.5%	+5.0%		
Ohio	5.0%	5.0%	4.5%	4.2%	8.1%	+3.1%		
	SOURCE: Ohio Department of Job and Family Services, Office of Workforce Development, Bureau of Labor Market Information, Local Area Unemployment Statistics. Data extracted from Civilian Labor Force Estimates Query tool							

The percentage of the population in poverty in Erie County is slightly lower than that of the state (11.9% compared to 13.6%, respectively).

Total Perce	Total Percentage of Population in Poverty									
	# Pop (2020)	2016	2017	2018	2019	2020	Change 2016-2020			
Erie	73,261	12.8%	13.0%	12.0%	11.7%	11.9%				
County							-0.9%			
Ohio	11,350,378	15.4%	14.9%	14.5%	14.0%	13.6%	-1.8%			
SOURCE: U.S.	SOURCE: U.S. Census Bureau, American Fact Finder, American Community Survey 5-Year Estimates									

Nearly one-quarter of children under the age of 5 are in poverty in Erie County. The percentage of children under 18 years of age in poverty is slightly lower in Erie County than the state (17.3% compared to 19.1%, respectively). Poverty levels for children have slightly decreased over the past five years.

Erie County Percentage of Children under 18 Years in Poverty											
	# Children (2020)	20:	16	2017	2	018	2019	2020	Change 2016-2020		
Erie County	14,906	18.9	9%	19.1%	17	7.8%	17.9%	17.3%	-1.6%		
Ohio	2,545,054	22.:	1%	21.3%	20	0.8%	19.9%	19.1%	-3.0%		
Percentage of	of Children ui	nder 5 Y	ears in	Poverty							
	# Children	(2020)		2016			2020	Change	2016-2020		
Erie County	3,948	3		23.5%		22.1%		22.1%			1.4%
Ohio	679,42	28		26.1%	21.8% -4.3%		4.3%				
SOURCE: U.S. Census Bureau, American Fact Finder, American Community Survey 5-Year Estimates											

Children under the age of 5 years had the highest level of poverty (22.1%), while those 65 years old and older had the lowest poverty level (5.9%). Females were more likely than males to be in poverty (13.5% compared to 10.3%). Black (38.3%) and multi-racial (23.8%) residents had the highest poverty levels. Additionally, the lower the education level, the higher the poverty level for that demographic group (the poverty rate for those with less than a high school diploma was 22.4%, compared to 3.3% for college graduates). The poverty rate for the unemployed is significantly higher than that of the employed population (26.7% compared to 5.9%).

Percentage of Po	pulation in Po	verty by Age	Group				
Age	Pop 2020	2016	2017	2018	2019	2020	Change 2016-2020
Under 5	3,948	23.5%	23.8%	21.8%	22.0%	22.1%	-1.4%
5-17	10,958	17.4%	17.5%	16.3%	16.4%	15.5%	-1.9%
18-34	14,355	20.1%	19.9%	17.4%	16.0%	16.4%	-3.7%
35-64	28,454	9.3%	10.2%	9.8%	9.9%	10.2%	+0.9%
65+	15,546	6.3%	5.5%	5.4%	5.0%	5.9%	-0.4%
Erie County Perce	entage of Popi	ulation in Pov	erty by Gende	r			
Male	35,717	11.8%	11.3%	9.9%	9.9%	10.3%	-1.5%
Female	37,544	13.8%	14.6%	14.0%	13.4%	13.5%	-0.3%
Erie County Perce	entage of Popi	ulation in Pov	erty by Race a	nd Ethnicity			
White	62,157	10.4%	10.5%	9.5%	9.2%	9.6%	-0.8%
Black	6,567	26.9%	30.8%	27.8%	28.6%	28.3%	+1.4%
Asian	578	6.7%	0.7%	0.7%	0.5%	0.9%	-5.8%
Two or more	2,777	33.8%	29.6%	26.3%	26.4%	23.8%	-10.0%
Hispanic/Latino	3,340	37.7%	32.5%	28.9%	23.7%	18.7%	-19.0%
Erie County Perce	entage of Popi	ulation in Pov	erty by Educat	ion Level			
Less than HS	4,000	21.9%	24.0%	24.6%	22.8%	22.4%	+0.5%
HS grad	18,307	10.1%	11.5%	10.7%	11.1%	12.5%	+2.4%
Some college	17,033	9.8%	8.8%	7.8%	7.0%	7.8%	-2.0%
College grad	13,231	4.6%	4.1%	4.0%	4.2%	3.3%	-1.3%
Erie County Perce	entage of Popi	ulation in Pov	erty by Emplo	yment Status			
Employed	35,683	6.7%	7.2%	6.9%	6.6%	5.9%	-0.8%
Unemployed	2,153	31.4%	34.0%	27.4%	23.0%	26.7%	-4.7%

SOURCE: U.S. Census Bureau, American Fact Finder, American Community Survey 5-Year Estimates

The poverty rates for female-headed households, both overall and with children under 18, are significantly higher than those of married family households.

Percentage of Families in Poverty by Family Status									
Status	Pop 2020	2016	2017	2018	2019	2020	Change 2016-2020		
All families	19,998	9.6%	9.4%	8.8%	7.2%	8.5%	-1.1%		
Married families	14,713	3.1%	2.6%	2.8%	1.7%	2.5%	-0.6%		
Female headed	3,846	31.2%	32.5%	29.5%	23.8%	29.5%	-1.7%		
Percentage of Fam	ilies with Chi	dren under 18	8 in Poverty b	y Family Statu	ıs				
All families	7,778	18.3%	18.2%	16.9%	17.4%	16.9%	-1.4%		
Married families	4,435	4.0%	4.0%	5.0%	5.2%	4.1%	+0.1%		
Female headed	2,520	43.5%	43.8%	39.0%	37.6%	40.9%	-2.6%		
SOURCE: U.S. Census B	ureau, 2015-201	9 American Comn	nunity Survey 5-Y	ear Estimates					

Poverty levels are highest in Sandusky and Castalia.

Poverty Rates by Zip Code, 2020							
Zip Code	Population	# below poverty	% below poverty	# at 125% of poverty level	# at 200% of poverty level		
44870 (Sandusky)	38,489	6,077	15.8%	8,528	14,402		
44824 (Castalia)	3,826	500	13.0%	787	1,056		
44839 (Huron)	12,097	1,256	10.4%	1,391	2,397		
44814 (Berlin Heights)	2,545	203	8.0%	217	420		
44846 (Milan)	3,289	187	5.7%	203	399		
44089 (Vermilion)	15,429	664	4.3%	1,011	2,994		
43438 (Kelleys Island)	283	8	2.8%	19	48		
44816 (Birmingham)	15	0	0.0%	0	15		
SOURCE: U.S. Census Bureau, American I	act Finder, Americai	n Community Survey	5-Year Estimates				

PERSONAL HEALTH STATUS

COMMUNITY SURVEY

Summary: Personal Health Status						
		% of Residents	N			
	Excellent	15.3%				
	Good	56.0%				
Personal description of health	Fair	23.9%	387			
	Poor	4.1%				
	Very Poor	0.7%				
	Average number of days not well	4.65				
Number of douglis neet	None	51.9%				
Number of days in past month that PHYSICAL health	1-5	26.6%	386			
was not good	6-10	7.7%				
was not good	11-20	6.1%				
	More than 20	7.7%				
	Average number of days not well	6.93				
Number of doug in post	None	44.6%				
Number of days in past month that MENTAL health	1-5	21.8%	387			
was not good	6-10	11.2%	367			
was not good	11-20	9.2%				
	More than 20	13.2%				
	Average number of days kept from activities	4.23				
Number of Days Poor	None	62.1%				
MENTAL or PHYSICAL Health	1-5	17.1%	387			
Kept from Usual Activities	6-10	6.5%	301			
	11-20	6.7%				
	More than 20	7.6%				

Less than one-fifth of all residents (15.3%) rate their health as excellent. More than half (56.0%) rate their health as good. Combined, 71.3% have a favorable rating of their health. Almost one-quarter (23.9%) of residents rate their health as fair. Only a small percentage of residents (4.8%) have an unfavorable rating of their health, with 4.1% rating their health as poor and 0.7% as very poor.

Groups of residents more likely to rate their health favorably include those with an annual income over \$75,000, college graduates, residents who are employed full-time or retired, married residents, those with children in the home, white residents, and homeowners. Groups of residents more likely to have a fair or unfavorable rating of their health include residents with an annual income of \$50,000 to \$75,000, those with some college or less education, unemployed residents, those who are divorced, residents without children in the home, non-white residents, and renters.

Personal Health Rating Among Erie County Residents

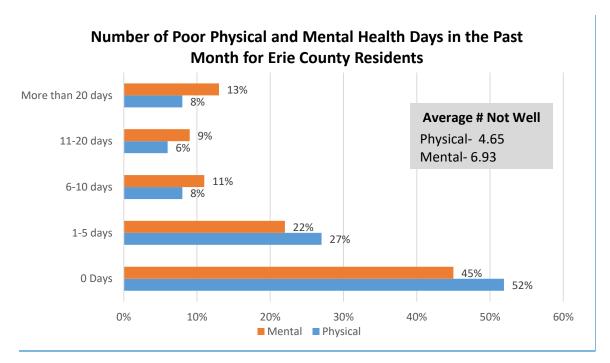


*Please note that response scales were changed in 2022 from excellent, very good, good, fair, poor TO excellent, good, fair, poor, very poor.

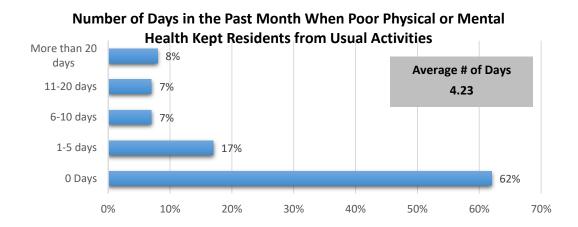
Almost half of all residents (44.6%) didn't have any days in the past 30 days in which their **mental health** was not good due to stress, depression, and problems with emotions. About one-fifth (21.8%) reported their mental health was not good one to five days in the past month (30 days); 11.2% reported it was not good six to ten days in the past month. A small portion of residents (9.2%) indicated their mental health was not good 11-20 days in the past month. Nearly one-sixth of residents (13.2%) indicated that their mental health was not good for 20 or more days in the past month.

Groups of residents more likely to have 11 or more bad mental health days in the past month (30 days) include residents aged 18 to 44 years, those with an annual income under \$25,000, those with a high school diploma or less education, those who are unemployed, those who are single, those with children in the home, and renters.

Half of Erie County's residents (51.9%) had no days in the past month (30 days) in which their **physical health** was not good due to physical illness or injury. About one-quarter (26.6%) reported that their physical health was not good one to five days in the past month; 7.7% reported it was not good 6-10 days in the past month. A small portion (6.1%) indicated it was not good 11-20 days. Less than one-tenth of residents (7.7%) indicated their physical health was not good for 20 or more days in the past month. Groups of residents more likely to have 11 or more bad physical health days in the month include obese residents, those aged 45 to 64 years, those without children in the home, and those who are unemployed.



More than one-third (37.9%) of residents reported that poor mental health kept them from doing their usual activities such as self-care, work, or recreation in the past month (30 days). Of those residents, 17.1% indicated they were kept from their usual activities 1 to 5 days in the past month. A small portion of residents (6.5%) indicated 6 to 10 days; 6.7% reported 11 to 20 days. A total of 7.6% of residents indicated they were kept from their usual activities for more than 20 days in the past month. Groups of residents more likely to have been kept from usual activities for 11 or more days in the past month because of poor physical or mental health include obese residents, those aged 18 to 44 years, those with an annual income under \$50,000, females, residents with a high school diploma or less education, those who are unemployed or employed part-time, those who are single, non-white residents, and renters.



ACCESS TO HEALTH CARE

COMMUNITY SURVEY

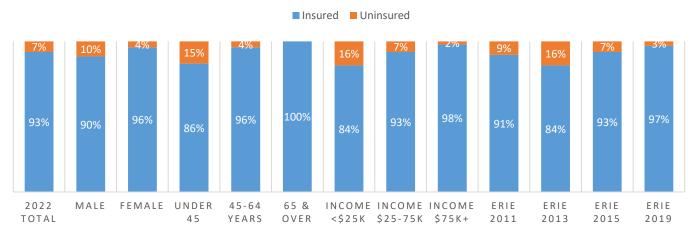
Summary: Insurance Coverage							
		% of	N				
		Residents	<u> </u>				
Currently has health	Insured	93.0%	387				
insurance	Not insured	7.0%	367				
Why no Insurance	Cannot afford	57.5%					
(open ended top 3, of	Unemployed	29.8%	22				
those without insurance)	Personal choice	12.7%					
	Private insurance- employer paid	41.1%					
Type of Insurance	Private insurance- self paid	11.4%					
coverage	Medicare	32.0%	358				
(of those with insurance)	Medicaid	13.1%					
	VA Coverage	2.4%					
	Hospitalization	88.0%					
	Emergency room care	89.9%					
	Prescription assistance	82.8%					
	Preventative care	82.5%					
Complete and the comple	Vision services	69.4%					
Services covered by insurance	Dental services	69.2%	360				
(of those with insurance)	Long term care	31.4%	300				
(b) those with insurance)	Family planning (birth control)	36.0%					
	Mental health	63.9%					
	Alcohol and drug treatment	43.8%					
	Prenatal/maternity	40.3%					
	Chiropractic	42.1%					

Seven percent (7.0%) of residents do not have insurance coverage. More than one-third (41.1%) are covered by employer-paid plans, 11.4% are covered by private insurance, 32.0% are covered by Medicare, 13.1% by Medicaid, and 2.4% by VA. The most common reason for being uninsured was not being able to afford it. Groups of residents more likely to **NOT have insurance** coverage include residents aged 18 to 44 years, those with an annual income under \$25,000, males, residents with some college or less education, those who are unemployed, single residents, non-white residents,

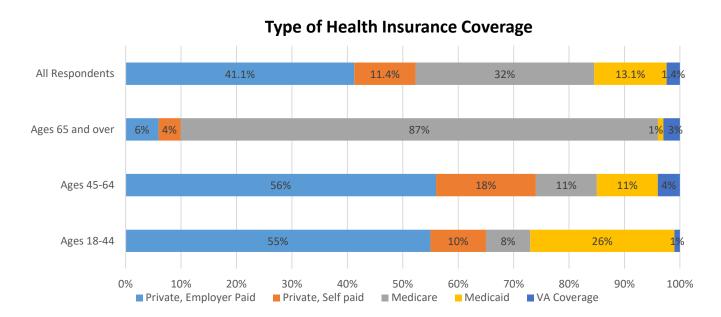
Barriers to Insurance Coverage (asked of those with no insurance)							
# %							
Cannot afford	13	57.5%					
Unemployed	6	29.8%					
Personal choice 3 12.7%							
Total 22 (n=22)							

and renters. Groups of residents more likely to **have private insurance** include residents aged 45 to 64 years, those with an annual income over \$75,000, males, college graduates, those who are employed full-time, married, homeowners, white residents, and those with children in the home. Groups of residents more likely to **have Medicare or Medicaid** include residents age 65 years old and over, those with an annual income under \$25,000, females, those with a high school diploma or less education, residents who are retired or unemployed, those who are divorced or widowed, renters, non-white residents, and those without children in the home.

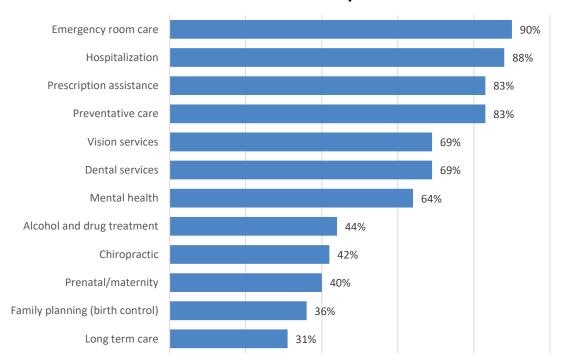
Erie County Residents with Health Insurance Coverage



Among most residents with health insurance, services that are covered include Emergency Room care (89.9%), hospitalization (88.0%), prescription assistance (82.8%), and preventative care (82.5%). More than half of residents with insurance have vision coverage (69.4%), dental coverage (69.2%), or mental health coverage (63.9%). Less than half of residents have coverage for alcohol and drug addiction (43.8%), chiropractic coverage (42.1%), and prenatal/maternity coverage (40.3%). Less than one-third of insured residents have family planning/birth control coverage (36.0%) or long-term care (31.4%).



Health Services Covered by Insurance

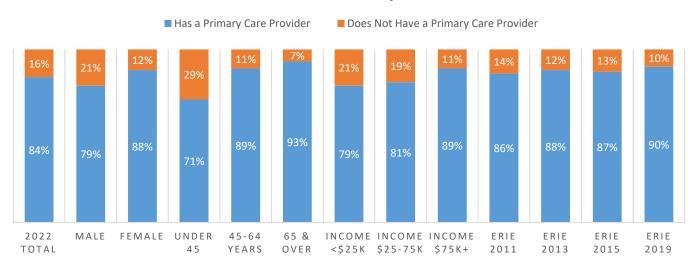


Summary: Access to Health	Care		
		% of	N
		Residents	- 14
Have primary care	Yes	83.6%	387
provider	No	16.4%	307
tarretti aftirma da sa tarr	Within past year	79.9%	
	Within past 2 years	6.8%	
Length of time since last routine check-up	Within past 5 years	4.3%	387
routine check-up	5 or more years ago	6.5%	
	Never	2.4%	
	Primary care or family doctor	73.4%	
	The emergency room	5.2%	
	Urgent Care	8.5%	
Where receive health care	Health Department clinic	1.9%	207
most often	VA hospital	2.2%	387
	Community health center	2.6%	
	Telemedicine	1.8%	
	Somewhere else	4.3%	
	Doctor	66.8%	
	Internet	17.3%	
Where get most medical	Nurse	5.5%	
information	Family members	4.6%	387
	Friends	0.8%	
	Pharmacy	0.8%	
	Other source	4.2%	
Likelihood of using	Very likely	34.8%	
telehealth or	Somewhat likely	39.9%	387
telemedicine	Not at all likely	25.3%	
Likelihood of using at-	Very likely	18.7%	
home primary care	Somewhat likely	42.3%	387
services	Not at all likely	39.0%	
Like to see services or	Yes	32.9%	
programs offered in area	No	67.1%	387
Programs or services	Mental health	20.2%	
would like to see offered	Addiction	12.1%	124
(open ended top 3)	Affordable care	10.5%	
Services needed unable to	Yes	11.1%	
get in past year	No	88.9%	387
-	Yes	10.1%	
Prescription unable to get	No	89.9%	387

Primary Care Providers

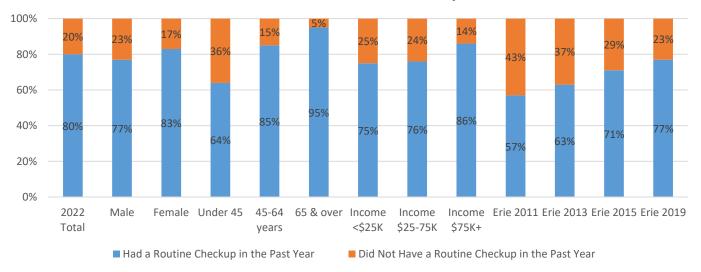
Most residents (83.6%) have one person or group that they think of as their health care provider. Residents who are more likely to have a primary care provider include residents aged 65 years old and over, females, college graduates, retirees, those who are married or divorced, homeowners, and white residents.

Residents with a Primary Care Provider



More than three-quarters (79.9%) of residents have received a routine checkup within the past year. A notable percentage (6.5%) have not received a routine medical checkup in five or more years, while 2.4% have never had a routine checkup. The older the respondent, the more likely they were to have had a routine checkup in the past year. Residents who are more likely to have had a routine checkup in the last year also include those with an annual income over \$50,000, college graduates, retirees, those who are widowed, homeowners, and white residents.

Residents Who Have Had a Routine Checkup in the Past Year



Access to Care

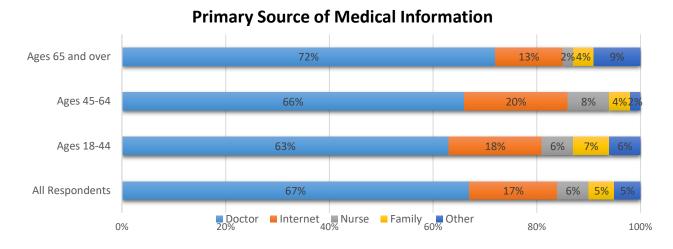
About three-quarters (73.4%) of residents receive their health care from a primary care doctor. Another 8.5% of residents rely on an urgent care center as their primary source of health care, while 5.2% rely on an emergency room. Groups of residents more likely to use a primary care or family doctor include residents aged 45 years and over, those with an annual income over \$75,000, females, college graduates, retirees, those who are married and widowed, homeowners, and white residents. Groups of residents more likely to use something other than a primary care or family doctor include residents aged 18 to 44 years, those with an annual income of \$25,000 to \$50,000, males, residents with a high school diploma or less education, those who are unemployed, those who are single, renters, and non-white residents.

Primary care or family doctor 73% **Urgent Care** 9% Emergency room Somewhere Community health center Telemedicine 2% **VA Hospital** 2% Health department clinic

Where Residents Receive Healthcare Most Often

Finding Medical Information

Two-thirds (66.8%) of residents receive most of their information from their doctor. A notable number (17.3%) of residents find most of their medical information on the internet. Groups of residents more likely to use a primary care or family doctor include residents aged 65 years and over, those with a high school diploma or less education, and non-white residents. Groups of residents more likely to use something other than a primary care or family doctor include residents aged 18 to 44 years, those with some college education, and white residents.



Online and At-Home Services

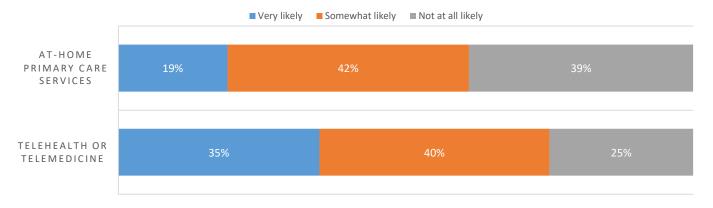
Around one-third (34.8%) of residents said they would be very likely to use telehealth or telemedicine, while 39.9% would be somewhat likely and 25.3% would be not at all likely to use the services. Groups of residents more likely to

2022 Erie County CHA

very likely use telehealth or telemedicine include residents aged 18 to 44 years, those who are employed full-time, those who are single, and white residents.

Less than one-fifth (18.7%) of residents would be *very likely* to use at-home primary care services if they were available. Less than half of Erie County's residents (42.3%) would be *somewhat likely* to use these services, and 39.0% would be *not at all likely* to use these services. There were no statistically significant demographic groups *more likely* to *very likely* to use at-home primary care services.

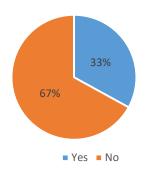
Likelihood of Using At-Home or Telehealth Services



<u>Healthcare, Health Education, Public Health</u> <u>Programs and Services</u>

One-third (32.9%) of residents have healthcare, health education or public health programs or services they would like to see offered in their community. Of these residents, one-fifth (20.2%) said they would like to see mental health programs; 12.1% would like to see programs targeting addiction; and 10.5% would like to see programs for affordable care.

Would Like To See Programs Offered In Area



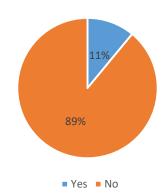
Programs or Services Residents Would Like to See Offered in Erie County						
	# of Responses	% of Responses				
Mental health	25	20.2%				
Addiction	15	12.1%				
Affordable care	13	10.5%				
Walk-in facilities	11	8.9%				
Wellness centers	10	8.1%				
Accurate information	8	6.5%				
Sex education	7	5.6%				
Aging	7	5.6%				
Weight management	5	4.0%				
Diabetes	4	3.2%				
Nutrition	3	2.4%				
Dental and vison	3	2.4%				
In-home visits	3	2.4%				
Health screenings	3	2.4%				
Auto-immune disease	2	1.6%				
Pain management	1	0.8%				
Genetic and rare disease	1	0.8%				
Heart health	1	0.8%				
Autism	1	0.8%				
Video chats	1	0.8%				
Total	124	(n=124)				

Needs Services

More than one-tenth of residents (11.1%) reported there were healthcare services they or a family member needed in the past year that they were unable to get. Groups of residents more likely to encounter barriers to service include those with an annual income under \$75,000, females, those who are employed part-time or unemployed, those who are single, and renters.

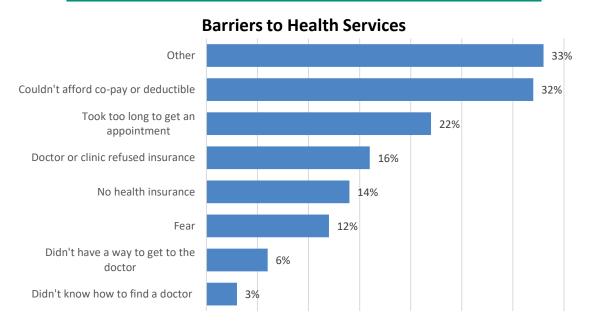
The three services needed most often are dental, surgery, and other specialists/tests and procedures. The most common barrier to service is inability to afford the co-pay or deductible.

Experienced Barriers that Prevented Access to Services



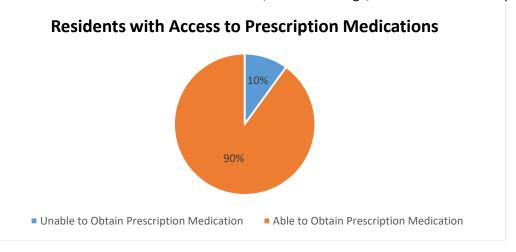
Health Services Needed		
	# of	% of
	Responses	Responses
Dental	13	31.7%
Surgery	6	14.6%
Other specialist test/procedure	6	14.6%
Mental health services	5	12.2%
Lung treatment/Pulmonologist	3	7.3%
Prescription medicine	2	4.9%
Emergency services	2	4.9%
COVID-19 related services	2	4.9%
Physical	1	2.4%
Vision	1	2.4%
Total	41	(n=41)

Question: Were there any healthcare services that you or a family member needed in the past year that you were unable to get?



Needs Prescription

Over one-tenth (10.1%) of residents were unable to obtain prescription services for themselves or a family member in the past year. The most common barriers to service were cost, lack of coverage, and lack of a doctor's prescription.



Barriers to Prescription Medication Ac	cess		
		# of Responses	% of Responses
Cost		14	36.8%
No coverage		13	34.2%
Lacked doctor prescription		6	15.8%
Out of stock		2	5.3%
Pharmacy was closed		2	5.3%
No transportation		1	2.6%
T	otal	38	(n=38)
Question: What was the reason?			

SECONDARY DATA ANALYSIS

Over the past five years, the percentage of individuals without health insurance decreased by 1.5%. Black residents are more likely to be uninsured than white residents (12.5% uninsured compared to 4.2% uninsured, respectively). The percentage of residents without insurance under the age of 19 years (4.5%) is lower than the percentage of uninsured residents aged 19 years or older (7.9%).

Percent of Erie County Residents Who Are Uninsured									
	2017	2018	2019	2020	% Change 2016-2020				
Erie County	6.9%	5.0%	4.7%	5.4%	-1.5%				
White	6.1%	4.0%	4.0%	4.2%	-1.9%				
Black	11.2%	10.0%	8.0%	12.5%	+1.3%				
Under 19	4.6%	4.7%	3.6%	4.5%	-0.1%				
19 and older	10.4%	7.2%	7.0%	7.9%	-2.5%				
SOURCE: U.S. Census Bureau, American Community Survey 5-Year Estimates									

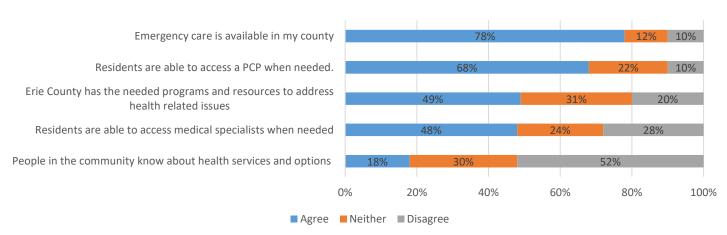
Primary care physicians include non-federal, practicing physicians (M.D.'s and D.O.'s) under the age of 75 years specializing in general practice medicine, family medicine, internal medicine, and pediatrics. In Ohio, there is one primary care physician for every 1,290 residents. Erie County's ratio is lower than the state ratio, with one primary care physician for every 1,240 residents.

Ratio of P	Ratio of Primary Care Physicians to Residents									
	20:	2016 2017 2018 2019					% Change			
	# of PCP	Ratio	# of PCP	Ratio	# of PCP	Ratio	# of PCP	Ratio	/o Change	
Erie	56	1,340:1	F-7	1 210.1	56	1,330:1	60	1,240:1		
County			57	1,310:1					0.0	
Ohio	-	1,300:1	-	1,310:1	-	1,300:1	-	1,290:1	-0.4	
SOURCE: Cou	SOURCE: County Health Ranking. Original Source: HRSA Area Resource File. http://www.countyhealthrankings.org/									

COMMUNITY LEADER SURVEY

- → More than three-quarters (78.0%) of community leaders agree that "emergency care is available in my county," with 26.0% in strong agreement. One-tenth (10.0%) of leaders disagree with this statement.
- → More than two-thirds (68.4%) of community leaders agree that "residents in Erie County are able to access a primary care doctor when needed," with 22.0% in strong agreement. One-tenth (10.0%) of leaders disagree with this statement.
- → Nearly one-fifth (18.0%) of community leaders agree that "people in the community know about the health services and options that are available to them," with 2.0% in strong agreement. More than half (52.0%) of leaders disagree with this statement.
- → Nearly half (48.0%) of community leaders agree that "residents in Erie County are able to access medical specialists when needed (cardiologist, dermatologist, etc.)," with 10.0% in strong agreement. More than one-quarter (28.0%) of leaders disagree with this statement.
- → Nearly half (49.0%) of community leaders agree that "Erie County has the needed programs and resources to address health-related issues," with 4.1% in strong agreement. One-fifth (20.4%) of leaders disagree with this statement.

Access to Care



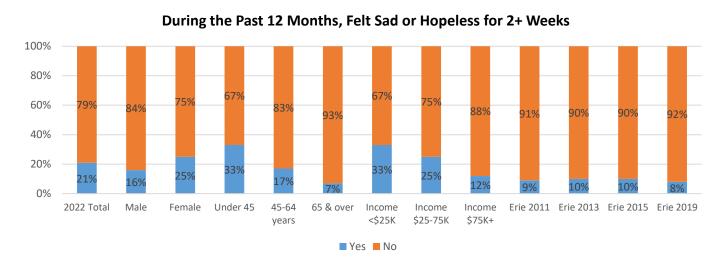
MENTAL HEALTH

COMMUNITY SURVEY

Summary: Mental Health		% of residents	#
	Felt sad or hopeless 2+ weeks	20.6%	<u>"</u>
During past 12 months	Ever seriously consider suicide	7.5%	387
	Has died by suicide	44.5%	
Do you know someone	Has talked about thoughts of suicide	34.2%	387
who	Has attempted suicide, but did not die	28.1%	307
	Anxiety disorder such as OCD or panic	18.7%	
	ADD/ADHD	10.7%	
	Posttraumatic stress disorder	13.2%	
	Seasonal affective disorder	9.4%	
	Alcohol/Substance Abuse/Dependence	7.0%	
Been Diagnosed by	Postpartum depression	4.6%	
Medical Professional	Bipolar	9.3%	387
	Developmental disability	3.8%	
	Other mental health disorder	5.9%	
	Eating disorder	4.4%	
	Schizophrenia	1.7%	
	Problem gambling	1.7%	
	Depression	30.5%	
	Anxiety disorder such as OCD or panic	23.9%	
	ADD/ADHD	29.5%	
	Posttraumatic stress disorder	13.5%	
	Seasonal affective disorder	13.7%	
mmediate	Alcohol/Substance Abuse/Dependence	31.1%	
Family Member Been	Postpartum depression	11.4%	
Diagnosed by Medical	Bipolar	20.8%	387
Professional	Developmental disability	15.5%	
	Other mental health disorder	13.9%	
	Eating disorder	9.2%	
	Schizophrenia	9.6%	
	Problem gambling	7.5%	
	Depression	39.1%	

More than one in five residents, 21%, *felt so sad or hopeless for two or more weeks that they stopped doing some usual activities* in the past 12 months. Groups of residents more likely to have felt sad or hopeless for two weeks or more in a row include residents aged 18 to 44 years, those with an annual income under \$25,000, females, residents with some college or less education, those who are employed part-time or unemployed, single residents, and renters.

Only a small percentage of residents, 7.5%, *seriously considered suicide* in the past year. Groups of residents more likely to have seriously considered suicide include residents aged 18 to 44 years, those with a high school diploma or less education, residents who are employed part-time, single residents, and renters.



100% 80% 60% 899 94% 91% 95% 97% 96% 40% 20% 119 0% 2022 Total Male Under 45 45-64 Erie 2011 Erie 2013 Erie 2015 Erie 2019 Female 65 & over Income Income Income

<\$25K

Yes No

vears

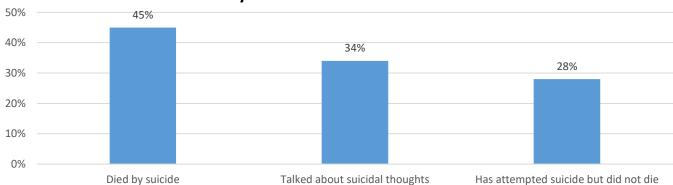
\$25-75K

\$75K+

During the Past 12 Months, Seriously Considered Suicide

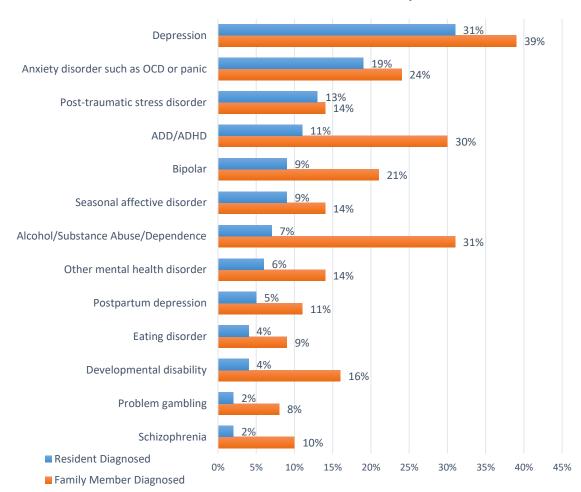
Nearly half (44.5%) of residents know someone who has *died by suicide*. Groups of residents more likely to know someone who has died by suicide include males, residents with some college education, those who are employed, and white residents. More than one-third (34.2%) know someone who has *talked about thoughts of suicide*. Groups of residents more likely to know someone who has talked about suicidal thoughts include residents aged 18 to 44 years, those who are unemployed, those who are single, renters, and those with children in the home. More than one-quarter (28.1%) know someone who has *attempted suicide but did not die*. Groups of residents more likely to know someone who has attempted suicide but did not die include residents aged 18 to 44 years, those with an annual income under \$50,000, residents with some college education, those who are employed part-time, those who are single, renters, and those with children in the home.

Community Residents who Know Someone Who. . .



Depression, anxiety disorder, posttraumatic stress disorder, ADD/ADHD, bipolar, seasonal affective disorder, alcohol/substance abuse disorder, other mental health disorder, postpartum depression, eating disorder, developmental disability, gambling, and schizophrenia are common mental health conditions in Erie County.

Mental Health Status in Erie County



<u>Depression</u>: Nearly one-third (30.5%) of residents have been diagnosed with depression, while 39.1% have an immediate family member who has been diagnosed. Groups of residents more likely to have been diagnosed with depression include residents aged 18 to 44 years, those with an annual income under \$50,000, females, residents with some college or less education, those who are employed part-time or unemployed, those who are single, renters, those with children in the home, and nonwhite residents.

Anxiety Disorder such as OCD or Panic Disorder: Nearly one-fifth (18.7%) of residents have been diagnosed with an anxiety disorder such as obsessive-compulsive disorder (OCD) or panic disorder, while 23.9% reported an immediate family member has been diagnosed. Groups of residents more likely to have been diagnosed with an anxiety disorder include residents aged 18 to 44 years, those with an annual income under \$50,000, females, residents with some college or less education, those who are employed part-time, those who are single renters, those with children in the home, and non-white residents.

<u>Post-traumatic Stress Disorder</u>: More than one-tenth (13.2%) of residents have been diagnosed with post-traumatic stress disorder or PTSD, while 13.5% indicated an immediate family member has been diagnosed. Groups of residents more likely to have been diagnosed with PTSD include residents aged 18 to 44 years, those with an annual income under \$75,000, females, residents with some college or less education, those who are employed part-time, those who are single, renters, those with children in the home, and non-white residents.

<u>ADD/ADHD</u>: One-tenth (10.7%) of residents have been diagnosed with attention deficit disorder or ADD/ADHD, while over one-quarter (29.5%) have an immediate family member who has been diagnosed. Groups of residents more likely to have been diagnosed with ADD or ADHD include residents aged 18 to 44 years, those with an annual income under \$50,000, residents with a high school diploma or less education, those who are unemployed, those who are single, renters, those with children in the home, and non-white residents.

<u>Bipolar Disorder</u>: Nearly one-tenth (9.3%) of residents have been diagnosed with bipolar disorder, while one-fifth (20.8%) have an immediate family member who has been diagnosed. Groups of residents more likely to have been diagnosed bipolar disorder include residents aged 18 to 44 years, those with an annual income under \$25,000, females, residents with a high school diploma or less education, those who are employed part-time, those who are single, renters, and non-white residents.

<u>Seasonal Affective Disorder</u>: Nearly one-tenth (9.4%) of residents have been diagnosed with seasonal affective disorder, while 13.7% have an immediate family member who had been diagnosed. Groups of residents more likely to have been diagnosed with seasonal affective disorder include residents aged 18 to 44 years, those with an annual income under \$50,000, those who are employed part-time, renters, and non-white residents.

Alcohol/ Substance Abuse/ Dependence: Less than one-tenth (7.0%) of residents have been diagnosed with alcohol/ substance abuse/ dependence, while nearly one-third of residents (31.1%) have an immediate family member who has been diagnosed. Groups of residents more likely to have been diagnosed with alcohol/ substance abuse/ dependence include residents aged 18 to 44 years, those with an annual income under \$50,000, females, residents with a high school diploma or less education, those who are unemployed or employed part-time, and renters.

<u>Other Mental Health Disorder</u>: A small percentage (5.9%) of residents have another mental health disorder that was not listed, while 13.9% have an immediate family member with another mental health disorder.

<u>Postpartum Depression</u>: A small percentage (4.6%) of residents have been diagnosed with postpartum depression, while 11.4% have an immediate family member who has been diagnosed. Groups of residents more likely to have been

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diagnosed with postpartum depression include residents aged 18 to 44 years, females, residents with a high school diploma or less education, those who are employed part-time, renters, and those with children in the home.

<u>Eating Disorder</u>: A small percentage (4.4%) of residents have been diagnosed with an eating disorder, and nearly one-tenth of residents (9.2%) have an immediate family member who has been diagnosed. Groups of residents more likely to have been diagnosed with an eating disorder include residents aged 18 to 44 years, those with an annual income of \$25,000 to \$50,000, females, residents with a high school diploma or less education, those who are employed part-time, single residents, renters, and non-white residents.

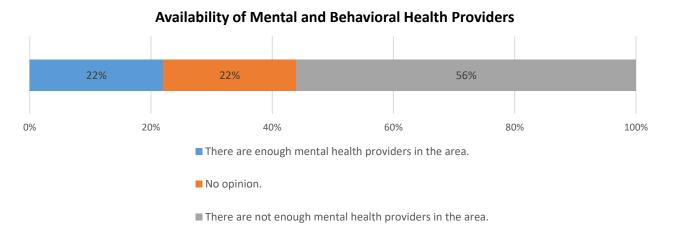
<u>Developmental Disability</u>: A small percentage (3.8%) of residents have been diagnosed with a developmental disability, while 15.5% have an immediate family member who has been diagnosed. Groups of residents more likely to have been diagnosed with a developmental disability include residents aged 18 to 44 years, those with an annual income under \$50,000, residents with a high school diploma or less education, those who are unemployed, renters, those with children in the home, and non-white residents.

<u>Schizophrenia</u>: A small percentage (1.7%) of residents have been diagnosed with schizophrenia, while 9.6% have an immediate family member who has been diagnosed. Groups of residents more likely to have been diagnosed with schizophrenia include residents aged 18 to 44 years, those with an annual income under \$25,000, residents with a high school diploma or less education, those who are unemployed, those who are single or divorced, renters and non-white residents.

<u>Problem Gambling</u>: A small percentage (1.7%) of residents have a problem gambling, while 7.5% know of an immediate family member with this problem. Groups of residents more likely to have a gambling problem include residents aged 18 to 44 years, residents with a high school diploma or less education, those who are employed part-time, those who are single, renters, and non-white residents.

COMMUNITY LEADER SURVEY

More than one-fifth (22%) of community leaders agree that "there are a sufficient number of mental and behavioral health providers in the area." More than half (56.0%) disagree with this statement, and 20.0% strongly disagree.



SECONDARY DATA ANALYSIS

Mental health providers include psychiatrists, psychologists, licensed clinical social workers, counselors, marriage and family therapists, mental health providers that treat alcohol and other drug abuse, and advanced practice nurses specializing in mental health care. In Ohio, there is one mental health provider for every 350 residents. The ratio in Erie County is slightly higher, with one mental health provider for every 370 county residents.

Availability of	Availability of Mental Health Providers										
	2017		201	8	20	19	20	20	20	21	
	# of Provider	Ratio	# of Provider	Ratio	# of Provider	Ratio	# of Provider	Ratio	# of Provider	Ratio	
Erie County	156	480:1	161	460:1	177	420:1	184	400:1	198	370:1	
Ohio	-	560:1	-	470:1	-	410:1	-	380:1	-	350:1	
SOURCE: County	SOURCE: County Health Ranking. Original Source: HRSA Area Resource File.										

The rate of suicide deaths in Erie County has slightly varied over the past five years and is higher than the state's rate.

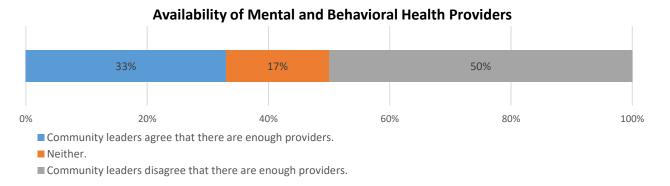
Erie County Su	icide Death I	Rate				
	2017	2018	2019	2020	2021	Rate Change
Erie County	16.0	12.1	18.9	9.5	17.6	+1.6
Ohio	14.9	15.7	15.5	15.5	15.0	+0.1
Erie County Su	icide Death I	Rate by Age (Group			
5-14	0.0	0.0	12.0	0.0	0.0	0
15-24	11.4	23.1	58.9	24.0	36.0	+24.6
25-34	23.9	11.7	11.7	0.0	0.0	-23.9
35-44	12.9	25.7	25.7	12.7	38.2	+25.3
45-54	20.6	0.0	11.0	22.8	11.4	-9.2
55-64	17.2	0.0	17.5	8.9	8.9	-8.3
65-74	32.8	43.4	10.6	0.0	10.2	-22.6
75-84	0.0	0.0	19.9	19.8	79.1	+79.1
85+	46.9	0.0	0.0	0.0	0.0	-46.9
SOURCE: Ohio Dep	partment of Hea	lth, Data Warel	nouse			

Poor mental health days are defined as days during the last month when mental health was not good due to stress, depression, and problems with emotions. The average number of poor mental health days in Erie County was the same as Ohio, measuring 5.2 days.

Number of Poor Mental Health Days in the Past 30 Days								
	Change							
Erie County	3.9	3.9	4.3	4.9	5.2	+1.3		
Ohio	+1.2							
SOURCE: County	Health Ran	kings						

COMMUNITY LEADERS

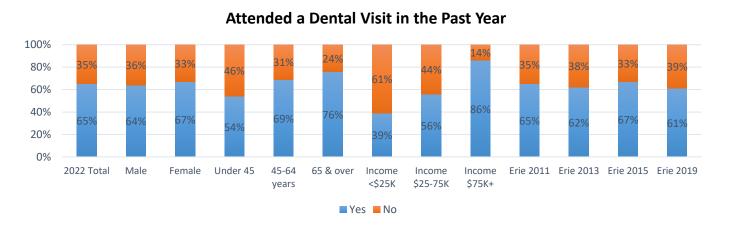
Half (50.0%) of community leaders disagree that "there is a sufficient number of mental and behavioral health providers in the area." Only one-third (33.3%) of leaders agree with this statement.



ORAL HEALTH

COMMUNITY SURVEY

Nearly two-thirds (65.2%) of residents have seen a dentist in the past year. An additional 14.1% have seen a dentist in the past two years, and 8.9% in the last five years. One in ten residents (10.8%) have not seen a dentist in five or more years, and a small portion (1.0%) have never seen a dentist at all. Groups of residents most likely to have visited the dentist in the past year include residents who are 65 years old and older, those with an annual income over \$75,000, college graduates, those who are employed full-time or retired, those who are married or widowed, homeowners, and non-white residents. Groups of residents most likely to have not had a dental visit in the past five years include residents aged 18 to 44 years, those with an annual income under \$25,000, residents with some college or less education, those who are unemployed, those who are single or divorced, and renters.



The most common barriers to dental visits in the past year were the cost, lack of dental insurance, having no problems with teeth, and being scared.

Barriers to Dental Health Visits						
	# of Responses	% of Responses				
Cost	28	22.0%				
No dental insurance	24	18.8%				
No problems with teeth	16	12.5%				
Scared	13	10.2%				
Wear dentures	11	8.6%				
Time	10	7.8%				
Limitations due to pandemic	8	6.3%				
Busy schedule	4	3.1%				
Need to find another dentist	3	2.3%				
Do not have a dentist	3	2.3%				
Distance	3	2.3%				
Health problems	2	1.6%				
Difficulty getting appointment	1	0.8%				
Does not accept my Medicaid insurance	1	0.8%				
Motivation	1	0.8%				
Total	128	(n=128)				
Question: What is the main reason have not visited the dentist?						

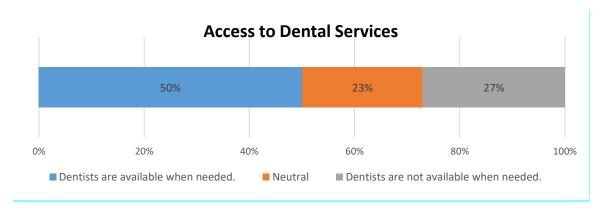
SECONDARY DATA ANALYSIS

The ratio of population per number of dentists has been decreasing over the past five years in the state and increasing in the county. This ratio is slightly lower in Erie County than it is for the state as a whole.

Availability of	Availability of Dental Providers										
	2016		20	17	20	18	20	19	2020		%
	# of Dentists	Ratio	# of Dentists	Ratio	# of Dentists	Ratio	# of Dentists	Ratio	# of Dentists	Ratio	Change
Erie County	50	1,500:1	50	1,500:1	47	1,590:1	49	1,520:1	48	1,540:1	-4.0%
Ohio	-	1,660:1	-	1,620:1	-	1,610:1	-	1,560:1	-	1,570:1	-
SOURCE: County	SOURCE: County Health Ranking. Original Source: HRSA Area Resource File. http://www.countyhealthrankings.org/										

COMMUNITY LEADER SURVEY

Half (50.0%) of community leaders agree that "residents in Erie County are able to access a dentist when needed," with 16.7% in strong agreement. Over one-quarter (27.1%) of leaders disagree with this statement.

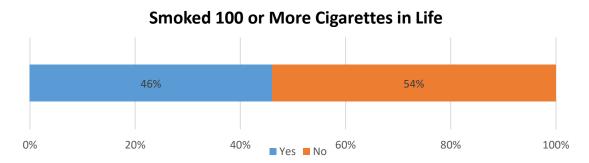


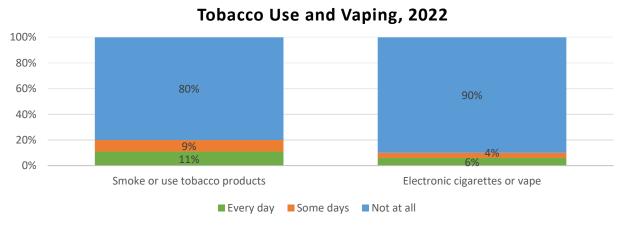
SMOKING/TOBACCO USE

COMMUNITY SURVEY

Summary: Smoking and Tobac	co Use		
		% of Residents	N
Smoked 100 or more	Yes	46.2%	387
cigarettes in life	No	367	
	Everyday	11.1%	
Tobacco usage	Some days	8.6%	387
	Not at all	80.3%	
Electronic Cigarette/Vape Usage	Everyday	6.2%	
	Some days	3.6%	387
	Not at all	90.2%	
Trying to quit or willing to	Yes	58.0%	76
quit smoking	No	42.0%	70
How harmful are electronic	Very harmful	65.6%	
cigarettes, e-cigarettes, or	Somewhat harmful	23.4%	381
vaping is to: You	Not at all harmful	11.0%	
How harmful are electronic	Very harmful	79.0%	
cigarettes, e-cigarettes, or	Somewhat harmful	15.8%	385
vaping is to: Youth	Not at all harmful	5.2%	
How harmful are electronic	Very harmful	67.2%	
cigarettes, e-cigarettes, or	Somewhat harmful	27.7%	385
vaping is to: Other adults	Not at all harmful	5.1%	

Less than half (46.2%) of residents have smoked 100 or more cigarettes in their lifetime. Groups of residents more likely to have smoked 100 or more cigarettes in their lifetime include residents aged 45 years and over, those with an annual income of \$50,000 to \$75,000, males, residents with some college or less education, those who are divorced, renters, those without children in the home, and white residents.

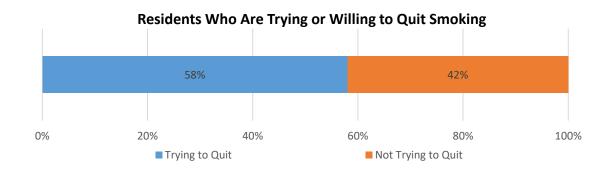


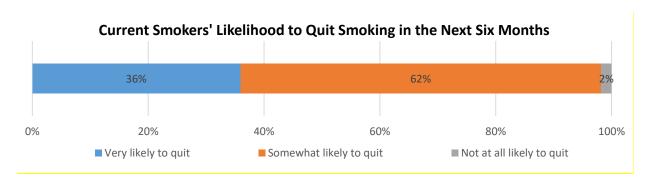


Around one-tenth (11.1%) of residents currently smoke cigarettes, cigars, chewing tobacco or use other tobacco *every day*. Around eight percent (8.6%) of residents smoke cigarettes or use tobacco less frequently or only *some days*. The remaining portion, 80.3%, smoke *not at all*. Groups of residents more likely to smoke or use tobacco include residents aged 18 to 44 years, those with an annual income under \$75,000, residents with a high school diploma or less education, those who are unemployed, those who are single, renters, and non-white residents.

A small portion (6.2%) of residents currently smoke e-cigarettes or vape **every day.** Another small portion (3.6%) use e-cigarettes or vape **some days**, and the majority (90.2%) smoke or vape **not at all**. Groups of residents that were more likely to smoke e-cigarettes or vape include residents aged 18 to 44 years, those with an annual income under \$75,000, females, residents with a high school diploma or less education, those who are single, and renters.

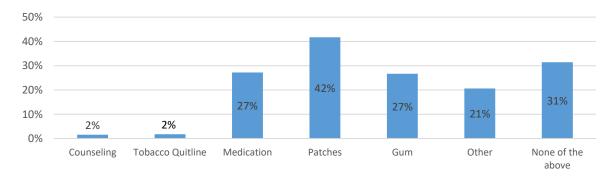
Of the residents who currently smoke or vape, more than half (58.0%) are trying to or willing to quit smoking. Over one-third (35.9%) of those who smoke or vape are **very likely** to quit within the next six months. More than half (62.3%) are **somewhat likely** to quit, while a small portion (1.8%) are **not at all likely** to quit.





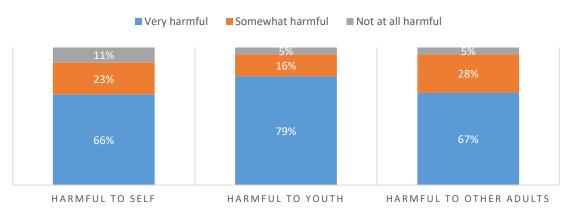
Residents who are currently trying to quit smoking have tried a variety of methods. Nearly half (41.7%) have tried patches, while 27.2% tried medication. Over one-fourth (26.7%) tried gum, 1.8% the tobacco quit line, and 1.6% utilized counseling. Nearly one-third (31.4%) of current smokers have not tried any of those methods, and 20.6% tried another method that was not mentioned.

Methods Tried by Current Smokers to Quit Smoking



More than three-quarters (79.0%) of all residents feel that vaping among youth is very harmful, with 15.8% feeling that it is somewhat harmful and 5.2% feeling that it is not at all harmful. Slightly more than two-thirds (67.2%) of residents feel that vaping among other adults is very harmful, with 27.7% feeling that it is somewhat harmful, and 5.1% feeling that it was not at all harmful. Similarly, two thirds of residents (65.6%) felt that vaping themselves was very harmful, with 23.4% feeling that it was somewhat harmful and 11.0% feeling that it is not at all harmful. Groups of residents more likely to feel that vaping among **youth** is very harmful include residents aged 45 years and over, females, college graduates, those who are married or divorced, and white residents. Groups of residents more likely to feel that vaping among **adults** is very harmful include residents aged 45 years and over, those with an annual income over \$50,000, females, college graduates, and homeowners.

Perceptions of Harm Caused by Cigarettes, E-Cigarettes, and Vaping



SECONDARY DATA ANALYSIS

Adult smoking prevalence is the estimated percent of the adult population that currently smokes every day or "most days" and has smoked at least 100 cigarettes in their lifetime. The percentage of adults who smoke in the county is slightly higher than the state average (23% in the county compared to 22% in Ohio).

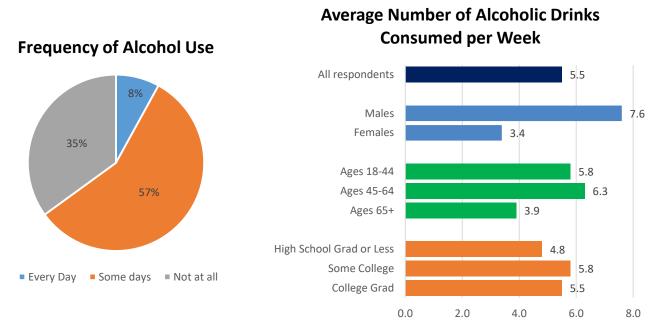
Percent of Erie County Adults that Currently Smoke								
2015 2016 2017 2018 2019								
Erie County	20%	20%	18%	22%	23%	+3.0%		
Ohio 22% 23% 21% 21% 22%								
SOURCE: County He	SOURCE: County Health Rankings							

ALCOHOL AND SUBSTANCE ABUSE

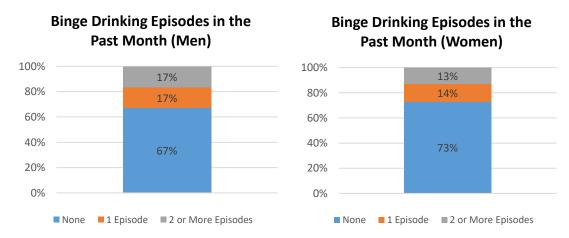
COMMUNITY SURVEY

Summary: Alcohol and Substance		%	N	
	Every day	7.9%	N	
	Some days	57.1%	387	
Alcohol consumption	Not at all	35.0%	307	
	Average number of drinks per week	5.50	387	
	None	67.0%	307	
# of days had 5+ drinks past	1	16.5%	184	
month (men)	2 or more	16.5%	104	
	None	73.1%		
t of days had 4+ drinks past	1	14.3%	198	
month (women)	2 or more	12.5%	130	
Driven after drinking alcohol in pa		10.6%	387	
arter armining alcohor in pe	Very harmful	26.3%	307	
How harmful alcohol is to: You	Somewhat harmful	48.2%	383	
1311 Harrinar alconor is to. 100	Not at all harmful	25.5%	. 505	
	Very harmful	71.8%		
How harmful alcohol is to: Youth	Somewhat harmful	22.5%	385	
now ilai ilii di alcolloi is to. Toutil	Not at all harmful	5.7%		
	Very harmful	27.3%	+	
How harmful alcohol is to: Other adults	Somewhat harmful	61.3%	383	
	Not at all harmful	11.4%		
Anyone in household seeking help	4.5%	386		
myone in nousenoid seeking neip	Marijuana	25.4%	380	
	Amphetamines, methamphetamines, or speed	5.0%		
	Cocaine or crack	1.4%		
	Heroin	0.9%		
During the last 6 months, did	LSD or other hallucinogens	1.6%		
anyone in household use	Inhalants	0.0%	387	
, , , , , , , , , , , , , , , , , , , ,	Ecstasy or GHB	1.1%	-	
	Bath salts used illegally	0.0%	-	
	Something else	1.3%		
	None of the above	72.6%		
	Taken any prescription medications	80.0%		
n past year	Taken prescriptions not belonging to them	2.6%	387	
	Taken prescriptions different than prescribed	3.5%	- 38/	
Anyone in household seeking help	3.9%	387		
,	Self-help	8.4%	557	
	Counseling	12.3%	71	
Utilizing resources for substance				
_	Detox	4.8%		
use disorder	Detox Medication assisted treatment	4.8% 9.6%	, -	

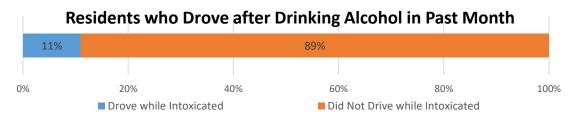
A small portion (7.9%) of residents drink alcoholic beverages such as beer, wine, malt beverages or liquor every day. Over half (57.1%) drink alcohol some days. More than one-third (35.0%) of residents don't drink alcoholic beverages at all. Groups of residents more likely to drink alcoholic beverages include those with an annual income of \$50,000 or more, residents with some college or more education, residents who are employed full-time, homeowners, and white residents. The average number of alcoholic beverages per week was 5.5 for all residents. Groups of residents with significantly higher averages include males (7.6 drinks), residents aged 45 to 64 years (6.3 drinks), and those with some college (5.8 drinks).



Binge drinking is defined as drinking five or more alcoholic drinks on one occasion (men) or drinking four or more alcoholic drinks on one occasion (women). For males, over half (67.0%) drank five or more alcoholic drinks zero times in the past month, while 16.5% binged one time. The remaining 16.5% of males drank five or more drinks on one occasion two or more times in the past month. For females, nearly three quarters (73.1%) drank four or more alcoholic drinks zero times in the past month, while 14.3% binged one time. The remaining 12.5% of females drank four or more drinks on one occasion two or more times in the past month.



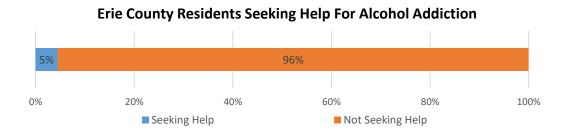
About one in ten (10.6%) residents reported driving after drinking any alcoholic beverages during the past month. Males are more likely to report driving after drinking.



Less than three-quarters (71.8%) of all residents feel that drinking alcohol among youth is very harmful, with 22.5% feeling that it is somewhat harmful and 5.7% feeling that it is not at all harmful. More than one-quarter (27.3%) of residents feel that drinking alcohol among other adults is very harmful, with 61.3% feeling that it is somewhat harmful and 11.4% feeling that it is not at all harmful. Similarly, 26.3% of residents feel that drinking alcohol themselves is very harmful, with 48.2% feeling that it is somewhat harmful and 25.5% feeling that it is not at all harmful. Groups of residents who feel that drinking alcohol is very harmful to **youth** include residents aged 45 to 64 years, females, those who are unemployed, those who are married or divorced, and homeowners. Groups of residents who feel that drinking alcohol is very harmful to **adults** include residents with an annual income under \$25,000, those with some college education, those who are single, and renters.

Perceptions of Harm Caused by Drinking Alcohol 100% 6% 11% 26% 23% 80% 60% 61% 48% 40% 72% 20% 27% 0% Harmful to You Harmful to Youth Harmful to Other Adults ■ Very harmful ■ Somewhat harmful ■ Not at all harmful

A small portion (4.5%) of residents have been seeking help for alcohol addiction. Of those that are seeking help, 21.8% have utilized self-help therapy, 11.4% have utilized Alcoholics Anonymous (AA) counseling, 9.4% used medications, and

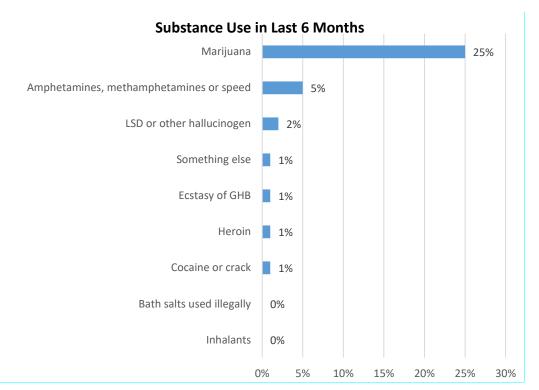


One-quarter (25.4%) of residents reported they or someone in their household had used marijuana in the past six months. Only a small fraction of residents (5.0%) reported they or someone in their household had used amphetamines, methamphetamines, or speed. Even fewer residents (1.4%) reported using cocaine or crack, 0.9%

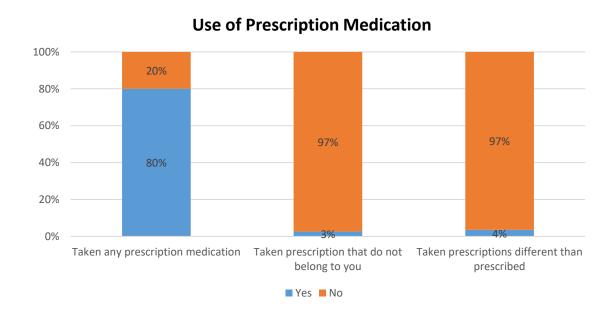
2022 Erie County CHA

2.8% used detox.

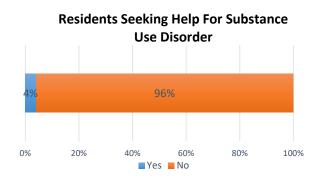
heroin, 1.6% LSD or other hallucinogens, 0% inhalants, 1.1% ecstasy or GHB, and 0.0% bath salts used illegally. Groups of residents more likely to have used marijuana in the past six months include residents aged 18 to 44 years, those with an annual income under \$50,000, residents with a high school diploma or less education, those who are employed part-time, those who are single, and renters.



Most residents (80.0%) have taken prescription medications in the past year. Only a small percentage of residents reported taking prescriptions that did not belong to them (2.6%) or taking a prescription differently than prescribed, such as more frequently or in higher doses than directed by a doctor (3.5%).



A small portion (3.9%) of residents are currently seeking help for substance use disorder. Of those who are seeking help, counseling (12.3%), medication-assisted treatment (9.6%), self-help (8.4%), and detox (4.8%) have been utilized. Half (50.0%) of residents report cost as a barrier to treatment. Other barriers include transportation (25%), no support system (12.5%), and no treatment center (12.5%).



Barriers to Treatment for Substance Use							
	#	%					
Cost	4	50.0%					
Transportation	2	25.0%					
No support system	1	12.5%					
No treatment center	1	12.5%					
Total	8	(n=8)					

SECONDARY DATA ANALYSIS

Excessive drinking is defined as binge drinking or heavy drinking. Binge drinking is defined as consuming four or more (women) or 5 or more (men) alcoholic beverages on a single occasion in the past 30 days. Heavy drinking is defined as drinking more than one (women) or two (men) drinks per day on average. The percentage of adults reporting binge or heavy drinking was slightly lower in Erie County (19%) than the state (21%).

Percentage of Adults Reporting Binge or Heavy Drinking							
	2015	2016	2017	2018	2019	Change	
Erie County	18%	18%	19%	18%	19%	+1.0%	
Ohio	19%	19%	20%	18%	21%	+2.0%	
SOURCE: County Health Rankinas							

In 2020, the percentage of driving deaths with alcohol involvement in Erie County (28%) was lower than the state (33%).

Percentage of Driving Deaths with Alcohol Involvement								
	2016	2017	2018	2019	2020	Change		
Erie County	25%	22%	27%	27%	28%	+3.0%		
Ohio	34%	33%	33%	32%	33%	-1.0%		
SOURCE: County Health Ranking. Original Source: National Center for Health Statistics								

On average, 34.2% of client admissions in the county were associated with a primary diagnosis of alcohol abuse or dependence in SFY 2020. It should be noted this data comes from the Ohio Mental Health & Addiction Services (OhioMHAS) and Multi Agency Community Information System (MACSIS). While MACSIS data is required for billing purposes, there are minimal sanctions for failing to submit, so underreporting of these numbers is likely. It should also be noted that reported data only reflects information for clients whose treatment was provided with public dollars.

Percentage of Unduplicated Clients Receiving Treatment for Alcohol Use Disorder								
SFY 2016 SFY 2017 SFY 2018 SFY 2019 SFY 2020 Change								
Erie County	29.0%	33.3%	32.9%	37.5%	34.2%	+5.2%		
Ohio Avg.	20.3%	24.1%	21.2%	21.5%	19.2%	-1.1%		
SOURCE: Ohio Mental Health & Addiction Services, Multi Agency Community Information Systems.								

The number of unintentional drug overdose deaths in Erie County has increased significantly since 2014. In 2020, the unintentional drug overdose death rate for Ohio was higher than the rate for Erie County.

Unintentional Drug Overdose Death Rate, 2013-2020									
	2014	2015	2016	2017	2018	2019	2020	Change	
Erie County	18.9	23.3	27.9	33.9	38.7	39.4	44.6	+25.7	
Ohio	22.7	27.7	35.7	42.8	33.2	35.4	45.6	+22.9	
SOURCE: Ohio Department of Health									

On average, 34.3% of client admissions in the county were associated with a primary diagnosis of opiate abuse or dependence in SFY 2020. This is significantly lower than the state average (49.4%).

Percentage of Unduplicated Clients Receiving Treatment for Opiate Use Disorder									
SFY 2016 SFY 2017 SFY 2018 SFY 2019 SFY 2020 Change									
Erie County	36.9%	31.4%	35.4%	33.1%	34.3%	-2.6%			
Ohio Avg. 49.9% 48.1% 49.4% 48.4% 49.4% - 0.5%									
SOURCE: Ohio Mental Health & Addiction Services, Multi Agency Community Information Systems.									

On average, 17.0% of client admissions in the county were associated with a primary diagnosis of cannabis abuse or dependence in SFY 2020. This is slightly higher than the state average (12.0%).

Percentage of Unduplicated Clients Receiving Treatment for Cannabis Use Disorder								
	SFY 2016	SFY 2017	SFY 2018	SFY 2019	SFY 2020	Change		
Erie County	20.2%	23.3%	18.6%	18.6%	17.0%	-3.2%		
Ohio Avg.	17.2%	17.0%	15.5%	14.7%	12.0%	-5.2%		
SOURCE: Ohio Mental Health & Addiction Services, Multi Agency Community Information Systems.								

Doses per capita is a measure that gives the average number of doses dispensed for each individual resident in a county in a year. Rates are likely underestimated because data from drugs dispensed at physician offices and the Veteran's administration are not included in the calculations. In 2021, the rate for the county (28.2%) was slightly higher than the state (27.2%). Over the five-year time span in which data is available, rates have decreased in both the county and the state.

Prescription Opioid Doses per Capita									
	2017	2018	2019	2020	2021	Rate Change			
Erie County	57.2	46.4	38.2	32.2	28.2	-29.0			
Ohio 49.3 40.5 36.0 30.4 27.2 -22.1									
SOURCE: Ohio Mental Health & Addiction Services, Multi Agency Community Information Systems.									

The table below examines per capita distribution of prescription benzodiazepines with data from The Ohio State Board of Pharmacy's automated prescription reporting system (OARRS). In 2021, the rate for the county (16.3%) was slightly higher than the state (13.8%). Over the five-year time span in which data is available, rates have decreased in both the county and the state.

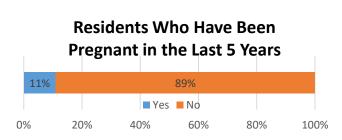
Prescription Benzodiazepine Doses per Capita									
	2017	2018	2019	2020	2021	Rate Change			
Erie County	22.3	18.9	38.2	17.6	16.3	-6.0			
Ohio	20.0	17.1	36.0	14.9	13.8	-6.2			
SOURCE: Ohio Mental Health & Addiction Services, Multi Agency Community Information Systems.									

MATERNAL, INFANT AND CHILD HEALTH

COMMUNITY SURVEY

Summary: Pregnancy Health				
		# of	% of	
		Responses	Responses	
Been pregnant in the last	Yes	10.6%	199	
five years	No	89.4%	133	
	Took a multi-vitamin with folic acid	78.3%		
	Received prenatal care within first 3 months	75.8%		
	Received Dental exam	75.8%		
	Received WIC services	50.2%		
	Experienced depression	48.5%		
During last pregnancy	Experienced domestic violence	15.6%		
	Smoked cigarettes or used other tobacco products	8.7%	21	
	Used marijuana	4.3%		
	Used electronic cigarettes or other vaper products	0.0%		
	Consumed alcoholic beverages	0.0%		
	Used opiates or prescription painkillers	0.0%		
	Used any drugs not prescribed	0.0%		
	None of the above	4.3%		
Planned pregnancy	Yes	45.4%	21	
Planned pregnancy	No	54.6%	21	
Plan for after-birth care	Yes	64.5%	21	
Plan for after-pirth care	No	35.5%	21	
Had child born	Yes	13.7%	387	
prematurely	No	86.3%	387	
Summary: Child Health				
Children in home under 18	Yes	26.2%	207	
Ciliuren in nome under 18	No	73.8%	387	
Children up to date on	Yes	96.0%	% 101	
recommended vaccines	No	4.0%		
Children get annual well	Yes	91.0%	101	
checkups	No	9.0%	101	

About one-tenth (10.6%) of residents report being pregnant within the past five years. More than three-quarters (78.3%) of those who had been pregnant within the last five years took a multi-vitamin with folic acid. Three-quarters (75.8%) received prenatal care within the first 3 months of their pregnancy. Likewise, 75.8% received a dental exam. About half (50.2%) received WIC (Women, Infants and Children)



nutrition services, and 48.5% experienced depression either during or after pregnancy. Close to one-sixth (15.6%) of residents experienced domestic violence during their pregnancy. Less than one-tenth (8.7%) smoked cigarettes or used other tobacco products during pregnancy, and 4.3% used marijuana.

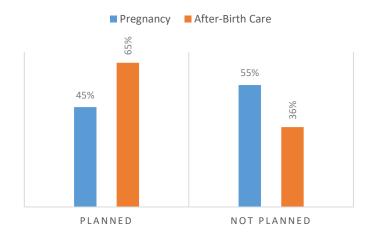
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No residents (0.0%) used electronic cigarettes or other vapor products, consumed alcoholic beverages, used opiates or prescription painkillers, or used any drugs not prescribed to them during their pregnancy.

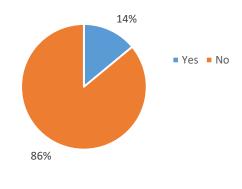
Activities Performed During Last Pregnancy	
	%
Took a multi-vitamin with folic acid	78.3%
Received prenatal care within first 3 months	75.8%
Received dental exam	75.8%
Received WIC services	50.2%
Experienced depression, either during or after pregnancy	48.5%
Experienced domestic violence	15.6%
Smoked cigarettes or used other tobacco products	8.7%
Used marijuana	4.3%
Used electronic cigarettes or other vaper products	0.0%
Consumed alcoholic beverages	0.0%
Used opiates or prescription painkillers	0.0%
Used any drugs not prescribed	0.0%
None of the above	4.3%
Question: During your last pregnancy, did you do any of the following?	

More than half (54.6%) of those who had been pregnant within the past five years did not plan their pregnancy, while 45.4% did plan. Close to two-thirds (64.5%) planned for after birth, considering child care and finances, while 35.5% did not. When asked if they or an immediate family member had a child that was born prematurely (less than 37 weeks gestation), the majority 86.3% said no. Over one in ten (13.7%) residents, however, have experienced premature birth.

Planned Pregnancies in the Past 5 Years

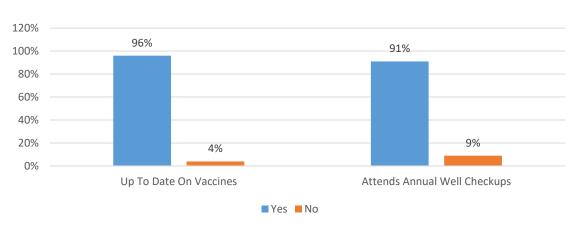


Resident or Family Member Had a Premature Birth Experience



More than one-quarter (26.2%) of residents have children under 18 in their home. Of those with children, the majority (96.0%) report that their children are up-to-date on reccomended vaccines. This does not include the COVID-19 vaccine. Likewise, 91.0% of residents with children report that their children received annual well-child check-ups from a pediatrician or family doctor.

Health Status of Erie County Children



SECONDARY DATA ANALYSIS

In 2021, a small percentage of births were low birth weight (7.1%) and an even lower percentage was a very low birth weight (1.3%).

Erie County Low and Very Low Birth Weight										
	2017 2018 2019 2020 2021							21		
	Case Count	Birth Count %	Case Count	Birth Count %	Case Count	Birth Count %	Case Count	Birth Count %	Case Count	Birth Count %
Very low	11	1.4%	12	1.4%	8	1.0%	7	1.0%	9	1.3%
Low	42	5.3%	53	6.5%	52	6.9%	62	8.8%	48	7.1%
VLBW= Births le	ss than 3 nou	nds. 3 ounces	. I BW= Birth	s less than 5 i	ounds, 8 oui	ices, SOURCE	: Ohio Denar	tment of Hea	lth Data War	ehouse

The percentage of white women with low and very low birthweight (LBW) babies was considerably lower than the percentage of Black women with LBW babies.

Erie County Low Birth Weight by Race 2017 2018 2019 2020 2021							21			
	Case	Birth								
	Count	Count %								
White LBW	35	5.2%	39	5.6%	33	5.6%	43	7.6%	29	5.4%
Black LBW	6	5.4%	14	12.7%	17	11.4%	14	12.7%	18	15.6%

About 10% of births in both Erie County and the state in 2021 were *pre-term*, with a very small percentage being *very pre-term*.

Gestational Age Distribution, 2021							
Term	Erie (County	Ohio				
Term	Case Count	Birth Count %	Case Count	Birth Count %			
Very pre-term (<32 weeks)	12	1.7%	2,259	1.7%			
Pre-term (32-37 weeks)	54	7.9%	11,500	8.8%			
Term (37 to 41 weeks)	609	90.0%	115,654	89.1%			
Post-term (42+ weeks) 1 0.1% 329 0.2%							
SOURCE: Ohio Department of Health Data	Warehouse						

The percentage of pregnant women accessing prenatal care in the first trimester in the county is slightly lower than the state (64.7% compared to 70.0%, respectively).

Trimester of Entry into Prenatal Care							
	2017	2018	2019	2020	2021		
ERIE COUNTY	ERIE COUNTY						
None	1.4%	2.3%	1.7%	0.7%	0.8%		
First Trimester	70.7%	74.3%	68.4%	70.5%	64.7%		
Second Trimester	12.2%	11.3%	16.1%	14.7%	16.1%		
Third Trimester	3.3%	2.4%	2.6%	2.8%	4.1%		
ОНЮ							
None	1.5%	1.5%	1.5%	1.5%	1.6%		
First Trimester	66.5%	67.9%	68.6%	68.9%	70.0%		
Second Trimester	19.8%	19.5%	19.5%	19.5%	18.2%		
Third Trimester	4.7%	4.5%	4.4%	4.2%	3.8%		
SOURCE: Ohio Department of Health Date	ta Warehous	е					

The number of births for women of childbearing age has decreased over the last five years in both Erie County and the State of Ohio, although the county rate is decreasing more rapidly.

Live Birth Count						
	2017	2018	2019	2020	2021	Change
Erie County	785	811	743	700	676	-13.9%
Ohio 136,782 135,097 134,424 129,179 129,750						
SOURCE: Ohio Department of Health Data Warehouse.						

The number of births to young mothers decreased significantly from 2017 to 2021 in both Erie County and the state.

Number of Births by Young Mothers, 2017-2021									
		20	17		2021				Change
	>15	15-17	18-19	Total	>15	15-17	18-19	Total	2017-2021
Erie	0	11	28	39	1	3	25	29	-25.6%
County		11	20	39		3	25	29	-23.0%
Ohio	79	1,867	5,926	7,892	102	1,380	4,411	5,893	-25.3%
SOURCE: Ohio	SOURCE: Ohio Health Department Secure Data Warehouse								

The adolescent birth rate for teens aged 15-19 years in the county is the same as the rate in the state. It should be noted that the teen adolescent birth rates in both Erie County and Ohio have been declining each year.

Teen Birth Rate							
	2016	2017	2018	2019	2020	Change	
Erie County	36	33	29	27	24	-33.3%	
Ohio	34	32	28	26	24	-29.4%	
Rate is the Number of births	Rate is the Number of births per 1.000 female population ages 15-19. SOURCE: County Health Rankings						

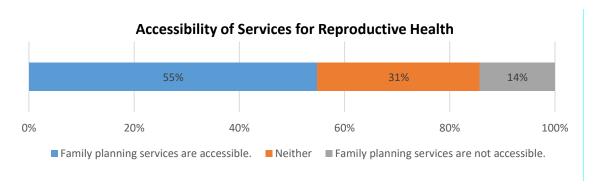
In 2019, the infant mortality rate in Erie County was 0.0. This is considerably lower than Ohio's infant mortality rate of 6.9.

Infant Mortality Rate, 2015 and 2019							
2015 2019							
	# of Deaths	# of Births	Rate*	# of Deaths	# of Births	Rate*	
Erie County	3	785	*	6	744	*	
Ohio	1,005	139,312	7.2	929	134,560	6.9	
Number of all in	Number of all infant deaths (within 1 year) per 1 000 live hirths. *Rates of fewer than 10 deaths do not meet standards						

COMMUNITY LEADER SURVEY

of reliability and are suppressed

One half (55.1%) of community leaders agree that "family planning services are accessible and available to adequately address the reproductive health needs in the community." Nearly one-tenth (8.2%) of leaders strongly agree with this statement. However, more than one in ten leaders (14.3%) disagree with the statement.



HEALTHY LIVING – WEIGHT AND EXERCISE

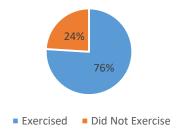
COMMUNITY SURVEY

		# of	% of	
		Responses	Responses	
Exercised in the past	Yes	75.6%	207	
month	No	24.4%	387	
How often residents	None	6.1%		
participated in	1-2 times	33.9%		
exercise in an average	3-4 times	33.5%		
week	5-7 times	26.4%	293	
What makes it	Health problem	44.5%	90	
difficult to exercise	Time	17.2%		
(top 3)	Motivation	11.5%		
	Overweight	63.2%		
Self-described weight	About right	34.7%		
- 0 •	Underweight	2.1%	387	
Been told obese or	Yes	39.3%		
overweight by doctor	No	60.7%	387	
Summary: Healthy Living	g- Food and nutrition	· · · · · · · · · · · · · · · · · · ·		
	Cost of food	31.5%		
	Quality of food	11.6%		
What makes it difficult	Distance from the store	8.2%		
to get food needed	Time for shopping	17.3%	387	
-	Safety	2.2%		
	Something else	4.9%		
How difficult to get	Very difficult	2.7%		
fresh fruits &	Somewhat difficult	8.4%	387	
vegetables	Not too/not at all difficult	88.9%		
	0-1 times/week	14.0%		
	2-4 times/week	38.5%		
How often eat fresh	Once a day	23.3%	387	
fruits and vegetables	2-4 times a day	18.7%		
	5 or more times a day	5.5%		
	None	19.1%		
# of restaurant or	1-2 meals	59.2%		
takeout meals a week	3-4 meals	17.0%	387	
	5 or more meals	4.7%		
	0	25.7%		
	1-3 times per week	24.9%		
# times drink pop or	4-6 times per week	12.6%		
	·		387	
other unhealthy drinks	1 time per day	12.1%		
other unhealthy drinks	1 time per day 2-3 times per day	12.1% 17.7%		

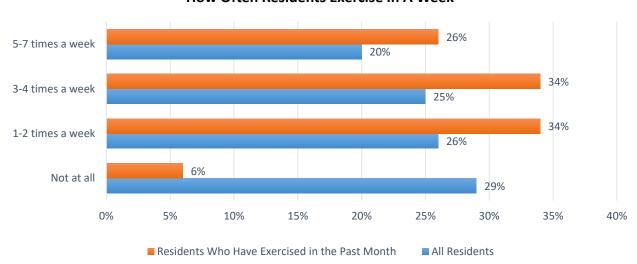
Physical activity or exercise includes walking, running, lifting weights, team sports, golf, or gardening for exercise. Slightly over three-quarters (75.6%) of residents have exercised in the past month. Groups of residents more likely to exercise include those with an annual income over \$75,000, males, college graduates, those who are single or married, and homeowners.

Of all residents who have exercised in the past month, one-third (33.9%) exercise one to two times a week, 33.5% exercise 3 to 4 times per week, and more than one-quarter (26.4%) exercise 5 to 7 times a week.

Residents Who Have Exercised in Past Month



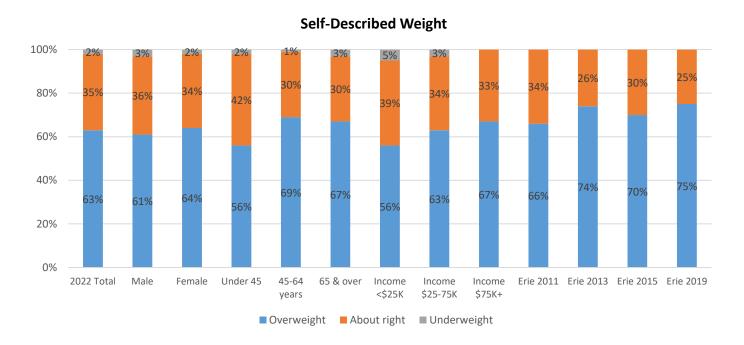
How Often Residents Exercise In A Week



Less than half (45.0%) of community members who do not exercise have a health problem that prevents them from exercising. Nearly one-fifth (18.0%) of inactive residents do not have the time to exercise. Other barriers to exercise include lack of motivation (11.2%) and weather (10.1%).

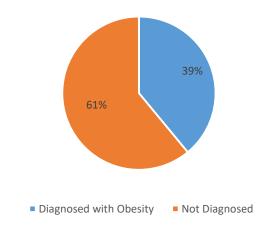
Barriers to Regular Exercise		
	#	%
Health problem	40	45.0%
Time	16	18.0%
Motivation	10	11.2%
Weather	9	10.1%
Schedule	4	4.5%
No energy	4	4.5%
Job is physical	3	3.4%
Age	2	2.2%
Disability	1	1.1%
Total	89	(n=89)

Over half (63.2%) of residents report being overweight and a small portion (2.1%) report being underweight. The remaining 35% of residents describe their weight as "about right." Groups of residents more likely to report being overweight include those with an annual income of \$50,000 or more, those who are married or divorced, homeowners, and white residents.



Over one-third (39.3%) of residents have been told by a doctor they are obese or overweight, while 60.7% have not. White residents are more likely to have been told by a doctor they are overweight.

Diagnosed with Obesity by a Doctor

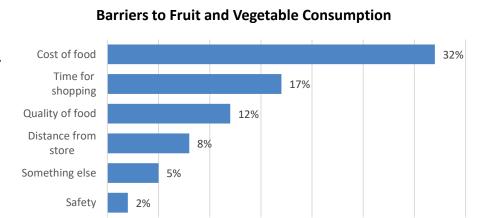


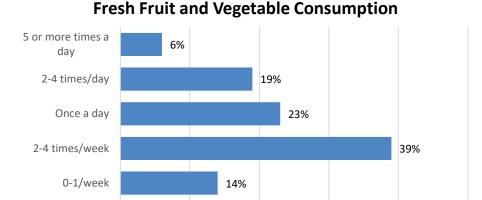
HEALTHY LIVING – FRUITS AND VEGETABLES

The majority (89.0%) of residents believe it is not too difficult or not at all difficult to get fresh fruit and vegetables in Erie County. Less than one tenth (8.0%) of residents have a somewhat difficult time and 3.0% of residents have a very difficult time getting fresh fruits and vegetables. The most common barrier making it difficult to get fruits and vegetables is cost (32.0%). Nearly one-fifth (17.3%) of residents do not have time to shop. Other barriers to fruit and vegetable consumption include quality of food (11.6%), distance from the store (8.2%), and safety (2.2%).

Slightly more than one-tenth (11.1%) of residents have difficulty getting fresh fruits and vegetables. Of these residents, 2.7% say it is very difficult and 8.4% say it is somewhat difficult. Groups of residents more likely to have difficulty getting fresh fruits and vegetables include residents with an annual income under \$50,000, females, renters, and non-white residents.

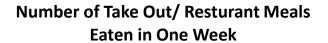
More than one-tenth (14.0%) of residents eat fresh fruits and vegetables zero to one time a week, while 38.5% eat fresh fruits and vegetables two to four times a week, and nearly one-quarter (23.3%) eat fresh fruits and vegetables once a day. Almost a fifth of residents (18.7%) eat fresh fruits or vegetables two to four times a day and 5.5% eat fresh fruits and vegetables five or more times a day. Groups of residents more

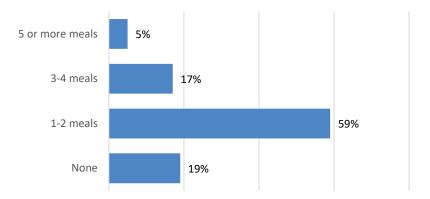




likely to NOT eat fresh fruits and vegetables daily include residents with an annual income under \$75,000, those with some college or less education, those who are single or divorced, and renters.

Over half (59.2%) of residents eat out at a restaurant or take out a meal one to two times a week, while 17.0% eat out three to four times a week. A small number of residents (4.7%) eat out five or more times a week. Less than one-fifth (19.1%) don't eat out at all. Groups of residents more likely to eat at a restaurant or take out three or more times a week include residents with an annual income of \$50,000 to \$75,000, males, those with some college education, residents who work full-time, those who are single, renters, and those with children in the home.

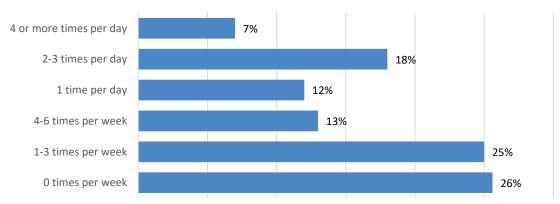




HEALTHY LIVING – UNHEALTHY DRINKS

Over one-quarter of residents (25.7%) have not drank soda, diet pop, iced coffee, punch, Kool-Aid, sports or energy drinks, or other fruit flavored drink in the past week. Likewise, 24.9% reported drinking soda or unhealthy drinks one to three times per week, and 12.6%, reported drinking soda or unhealthy drinks, four to six times per week. More than one-tenth (12.1%) reported one time per day, followed by 17.7% two to three times per day, and 7.0% four or more times a day. Groups of residents more likely to drink soda or unhealthy drinks at least once a day include residents ages 18 to 44, those with an annual income under \$25,000, those with a high school diploma or less education, those who are unemployed, those who are single or divorced, and renters.

Soda/ Unhealthy Drink Consumption



HEALTHY LIVING - SLEEP

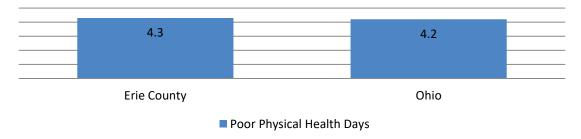
A small portion (1.8%) of residents get an average of zero to four hours of sleep in a 24-hour period. One-third (33.0%) report five to six hours, 53.9% report seven to eight hours, and 8.1% report more than eight hours. Residents were also asked how many days in the past 30 days they felt not getting enough sleep or rest. Nearly one-fifth of residents reported there were no days where they did not get enough sleep or rest, while one-third (33.0%) reported one to five days. Over one in ten residents (12.2%) reported six to ten days, 17.7% reported eleven to twenty days, and 18.4% more than 20 days. Groups of residents most likely to get an average of six or less hours of sleep a night include residents aged 18 to 44 years, those with an annual income under \$75,000, residents with a high school diploma or less education, those who are not retired, those who are single, and renters.

Summary: Sleep and Rest				
		% of Residents	N	
	0-4 hours	1.8%		
House of cloop in 24 hours	5-6 hours	33.0%		
Hours of sleep in 24-hour period	7-8 hours	53.9%	386	
periou	9-10 hours	7.0%		
	More than 10 hours	1.1%		
	None	18.8%		
Number of days in past	1-5	33.0%		
month did not get enough	6-10	12.2%	386	
sleep or rest	11-20	17.7%		
	More than 20	18.4%		

SECONDARY DATA ANALYSIS

Poor physical health days are defined as days in the past month (30 days) where physical health was not good due to physical illness and injury. The average number of poor physical health days in Erie County was nearly the same as that of the state.

Number of Poor Physical Health Days, 2019



Number of Poor Physical Health Days							
		Poor Physical Health Days					
	2015	2016	2017	2018	2019		
Erie County	4.0	4.0	4.1	4.3	4.3		
Ohio	3.7	4.0	3.9	4.1	4.2		

SOURCE: County Health Ranking. Original Source: The Behavioral Risk Factor Surveillance System (BRFSS)

Physical inactivity is the estimated percent of adults ages 20 and older reporting no physical activity during leisure time. Examples of physical activities include running, calisthenics, golf, gardening, or walking for exercise. More than one-quarter of adults in Erie County are considered physically inactive, and this number has remained consistent over the last several years.

Percentage of Adults Physically Inactive							
	2015	2016	2017	2018	2019	% Change	
Erie County	29%	29%	29%	2018 data	29%	0%	
Ohio	25%	26%	26%	not available.	28%	+3%	
SOURCE: County Health Rankings							

The table below represents the percentage of population with adequate access to locations for physical activity. Locations for physical activity are defined as parks or recreational facilities. The percentage of Erie County residents with access to locations for physical activity is slightly higher than the state average. More than three-quarters (82.0%) of county residents have access to locations for physical activity compared to a statewide average (77.0%).

% of Population with Access to Locations for Physical Activity									
	2013	2014	2016	2018	2020-2021	% Change			
Erie County	81%	80%	73%	85%	82%	+1%			
Ohio	83%	83%	85%	84%	77%	-6%			
SOURCE: County Health Rankings. Original Source: Business Analyst, Delorme map data									

More than one-third of adults in both Erie County and Ohio have a BMI of 30 or more. The percentage of obese adults has increased slightly over the past several years.

Adult Obesity - Percentage of Adults that Report a BMI of 30 or More								
	2015	2016	2017	2018	2019	% Change		
Erie County	35%	33%	34%	NA 2018 data	40%	+5%		
Ohio	32%	32%	34%	not available	35%	+3%		
SOURCE: County Health Rankings								

The Food Environment Index equally weighs two indicators of the food environment: (1) limited access to healthy foods, which estimates the percentage of the population who are low income and do not live close to a grocery store; and (2) food insecurity, which estimates the percentage of the population who did not have access to a reliable source of food during the past year. The Food Environment Index ranges from zero (worst) to ten (best). The Food Environment Index is better in Erie County than Ohio.

Food Environment Index									
	2015	2016	2017	2018	2019	% Change			
Erie County	7.3	7.4	7.2	7.3	7.6	+0.3%			
Ohio	6.6	6.7	6.7	6.8	6.8	+0.2%			
SOURCE: County Health Rankings									

The percentage of the population who are food insecure is nearly the same in Erie County and the state.

Food Insecurity Rate								
	2017	2018	2019	% Change				
Erie County	14.2%	13.5%	13.0%	-1.2%				
Ohio	14.5%	13.9%	13.2%	-1.3%				
Source: Feeding America, Map the Meal Gap								

COMMUNITY LEADER SURVEY

Community leaders identified three main barriers to healthy living: lack of knowledge/awareness of services (52.0%), cost and access to healthy foods (38.0%), and finances/cost (22.0%).

Health Challenges Faced by the Community		
Barrier to Healthy Living	# of TOTAL Responses	% of Leaders
Lack of knowledge/awareness	26	52.0%
Access to/cost of healthy foods	19	38.0%
Finances/cost	11	22.0%
Access/affordability to gyms and other programs	10	20.0%
Busy lifestyle/not enough time	10	20.0%
Motivation	9	18.0%
Fast food being cheap/easily accessible	5	10.0%
Generation patterns	5	10.0%
Poor decision making/lifestyle	5	10.0%
Poverty	4	8.0%
Transportation	4	8.0%
Mental health	3	6.0%
Lack of resources	3	6.0%
Lack of providers	3	6.0%
Cost of medication	3	6.0%
Lack of opportunities	2	4.0%
Cultural/language barriers	2	4.0%
Early awareness	2	4.0%
Access to care	2	4.0%
Overeating	1	2.0%
Social acceptance	1	2.0%
Fear	1	2.0%
Health insurance	1	2.0%
Smoking/tobacco use	1	2.0%
Miscellaneous	10	20.0%
Total	143	(n=50)

Question: What challenges do people in the community face in trying to maintain healthy lifestyles like exercising and eating healthy and/or trying to manage chronic conditions like diabetes or heart disease?

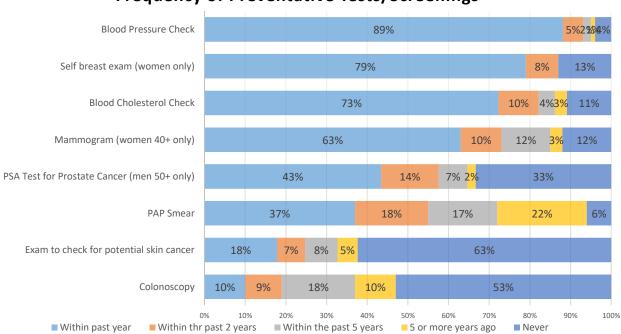
COMMUNICABLE DISEASES, VACCINATIONS AND PREVENTION SERVICES

COMMUNITY SURVEY

Summary: Prevention, Testing an	d Screening		
		%	N
How long since: had blood	Within the past year	72.7%	
	Within the past 2 years	9.6%	
How long since: had blood cholesterol checked	Within the past 5 years	3.8%	385
Cholesterol Checked	5 or more years ago	2.7%	
	Never	11.1%	
How long since: had blood	Within the past year	88.7%	
	Within the past 2 years	4.9%	
	Within the past 5 years	1.8%	387
pressure checked	5 or more years ago	0.8%	
	Never	3.9%	
Have ever: had a colonoscopy		47.1%	387
Have ever: had a skin cancer exa	n	37.0%	387
Have ever: had a mammogram (A	sked only of females 40+)	88.6%	146
Have ever: performed self-breast	exam (Asked only of females)	87.1%	199
Have ever: had a PAP smear (Asked only of females)		94.0%	199
Have ever: test for prostate cancer (Asked only of males 50+)		66.6%	107

Of all the tests and screenings below, blood pressure checks were performed most frequently in the past year.

Frequency of Preventative Tests/Screenings



Blood Pressure Check: The majority of residents (96%) had their blood pressure checked sometime in the past, with 89% having it checked within the past year. A small percentage of residents (5%) have never had their blood pressure checked or have not had it checked in the past five years. Groups of residents more likely to have never had their blood pressure checked include males, residents aged 25 to 44 years, those with a high school diploma or less education, those who are employed part-time, those with an annual income under \$25,000, those who are single, renters, those without a regular healthcare provider, and those without health insurance. Groups of residents more likely to have had their blood pressure checked in the past year include females, residents aged 65 years and over, college graduates, retirees, those with an annual income over \$75,000, those who are widowed, homeowners, those with a regular healthcare provider, and those with health insurance.

Performed Self-Breast Exam (women only): The majority of female residents (87%) have performed a self-breast exam in the past, with more than three-quarters (79%) reporting within the past year and 42% in the past month. Less than one-sixth (13%) have never performed a self-breast exam and an additional 8% reported that it has been more than a year since they last performed a self-breast exam. Groups of female residents more likely to have **never** had done a self-breast exam include residents aged 18 to 44 years, those who are employed part-time, those who are single or divorced, renters, and those without a regular healthcare provider or health insurance. Groups of female residents more likely to have done a self-breast exam **in the past month** include residents aged 45 years and over and those with health insurance.

Blood Cholesterol Check: The majority of residents (96%) had their blood cholesterol checked sometime in the past, with 73% having it checked within the past year. Nearly one-sixth of residents (14%) have never had their blood cholesterol checked or have not had it checked within the past five years. Groups of residents more likely to have **never** had their blood cholesterol checked include residents aged 18-44 years, those with a high school diploma or less education, those who are employed part-time, those with an annual income under \$50,000, those who are single, renters, and those without a regular healthcare provider. Groups of residents more likely to have had their blood cholesterol checked **in the past year** include males, residents aged 65 years and over, college graduates, retirees, those with an annual income over \$75,000, those who are married or widowed, and homeowners.

Mammogram (women ages 40 and over): A majority of female residents aged 40 years and over (89%) had a mammogram sometime in the past, with 63% having one within the past year. More than one-tenth of female residents (11%) aged 40 years and over have never had a mammogram, and an additional 3% have not had one in the past five years. Residents aged 40 to 44 years are more likely to have **never** had a mammogram. Groups of residents more likely to have had a mammogram **in the past year** include those with a regular healthcare provider and health insurance.

PSA test for Prostate Cancer (men ages 50 and over): One-sixth of male residents (67%) aged 50 and over have had a PSA test sometime in the past, with 43% having a test within the past year. One-third of male residents (33%) aged 50 years and over have never had a PSA test. Groups of residents more likely to have **never** had a PSA test include residents aged 50 to 64 years and those who are employed part-time.

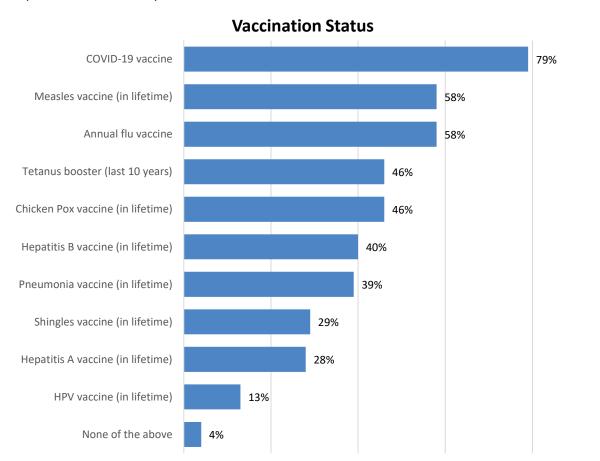
PAP smear (women only): The majority of female residents (94.0%) have had a PAP smear sometime in the past, with 37% having one within the past year. Less than one in ten female residents (6.0%) have never had a PAP smear. Groups of female residents more likely to have **never** had a PAP smear include residents aged 18 to 24 years, those with a high school diploma or less education, those who are employed part-time, those with an annual income under \$50,000, and those who are single. Groups of residents more likely to have had a pap smear **in the past year** include residents aged 18 to 44 years, those who are employed, and those who are married.

Skin Cancer Exam: Over one-third of residents (37%) have had an exam to check for potential skin cancer sometime in the past, with 18% having the exam within the past year. Almost two-thirds (63%) have never had a skin cancer exam and an additional 5% have not had one in the past five years. Groups of residents more likely to have **never** had a skin cancer exam include males, residents aged 18 to 44 years, those with a high school diploma or less education, those who are not retired, those with an annual income under \$25,000, those who are single, renters, those without children in the home, and those without a regular healthcare provider or health insurance. Groups of residents more likely to have had a skin cancer exam **in the past year** include residents aged 65 years and over, those who are married, and homeowners.

Colonoscopy: Nearly half of residents (47.1%) have had a colonoscopy sometime in the past, with 10% having the test within the past year. More than half (52.9%) have never had a colonoscopy, and an additional 10% have not had a colonoscopy in the past five years. Groups of residents more likely to have **never** had a colonoscopy include residents aged 18 to 44 years, those with some college or less education, those who are not retired, those with an annual income under \$50,000, those who are single, renters, those without children in the home, and those without a regular healthcare provider or health insurance. Married residents were more likely to have had a colonoscopy **in the past year.**

VACCINATIONS

Over three-quarters of Erie County residents have been vaccinated for COVID-19.



- → COVID-19 Vaccine: More than three quarters of residents (79.1%) have received a COVID-19 vaccine. Groups of residents more likely to have received a COVID-19 vaccine include insured residents, those with a primary care provider, residents aged 65 years and over, those with an annual income over \$75,000, college graduates, those who are employed full-time or retired, those who are married or widowed, homeowners, and those without children in the home.
- → Flu Vaccine: More than half of residents (58.1%) have received an annual flu vaccine. Groups of residents more likely to have received a flu vaccine include insured residents, those with a primary care provider, residents aged 18 to 44 years, those with an annual income of \$50,000 or more, males, college graduates, retirees, those who are widowed and married, homeowners, and those without children in the home.
- → **Measles Vaccine:** Over half of residents (57.8%) have received a measles vaccine in their lifetime. Groups of residents more likely to have received a measles vaccine include those with an annual income over \$75,000 and those with children in the home.
- → **Tetanus Booster:** Nearly half of residents (46.1%) have received a tetanus booster in the past ten years. Groups of residents more likely to have received a tetanus booster include residents aged 18 to 44 years, those with an annual income of \$75,000 or more, college graduates, and those with children in the home.
- → **Chicken Pox Vaccine:** Nearly half of residents (45.5%) have received a chicken pox vaccine in their lifetime. Groups of residents more likely to have received a chicken pox vaccine include males, those who are single, and renters.
- → Hepatitis B Vaccine: More than one-third of residents (39.7%) have received a Hepatitis B vaccine in their lifetime. Groups of residents more likely to have received a Hepatitis B vaccine include residents aged 18 to 44 years, those with an annual income of \$75,000 or more, females, residents with some college or more education, those who are employed, those who are single, and those with children in the home.
- → **Pneumonia Vaccine-** More than one-third of residents (39.1%) have received a pneumonia vaccine in their lifetime. Groups of residents more likely to have received a pneumonia vaccine include insured residents, those with a primary care provider, residents aged 65 years and over, retirees, those who are widowed, those without children in the home, and white residents.
- → **Shingles Vaccine** Less than one-third of residents (29.3%) have received a shingles vaccine in their lifetime. Groups of residents more likely to have received a shingles vaccine include residents aged 65 years and over, those with some college or more education, retirees, those who are widowed, homeowners, those without children in the home, and white residents.
- → Hepatitis A Vaccine- More than one-quarter of residents (27.7%) have received a Hepatitis A vaccine in their lifetime. Groups of residents more likely to have received a Hepatitis A vaccine include residents aged 18 to 44 years, those with an annual income over \$75,000, employed residents, those who are single, residents with children in the home, and those without health insurance.
- → **HPV Vaccine** Slightly more than one in ten residents (12.8%) have received an HPV vaccine in their lifetime. Groups of residents more likely to have received an HPV vaccine include residents aged 18 to 44 years, females, those who are employed part-time, those who are single, renters, and those with children in the home.

Of those who have not been vaccinated for COVID-19, barriers to vaccination include opposition to the vaccine (68.4%), personal choice (7.9%), autoimmune disease (6.6%), and adverse reaction (6.6%).

Barriers to COVID-19 Vaccination						
	# of Responses	% of Responses				
Opposition to vaccine	52	68.4%				
Personal choice	6	7.9%				
Autoimmune disease	5	6.6%				
Person had reaction after receiving vaccine	5	6.6%				
Had COVID	3	3.9%				
Availability	1	1.3%				
Vaccinated person got COVID	1	1.3%				
Cost	1	1.3%				
Religious reason	1	1.3%				
Do not like shots	1	1.3%				
Doctor advised against vaccine	1	1.3%				
Total	76	(n=76)				
Question: What is the main reason you have not i	eceived the COVID-1	.9 vaccine?				

SECONDARY DATA ANALYSIS

Disease rates were higher for most communicable diseases in the state of Ohio when compared to Erie County. The communicable diseases that had slightly higher rates in Erie County than the state of Ohio were Giardiasis (+1.2 difference), Lyme (+1.0 difference), Mumps (+0.3 difference), and Varicella (+3.0 difference).

Communicable Disease Rates, 2019								
	Erie C	ounty	Oł	Difference				
Communicable Disease	Case Count	Rate per 100,000	Case Count	Rate per 100,000	per 100,000			
Campylobacteriosis	11	14.8	2,438	20.9	-3.1			
Cryptosporidiosis	2	2.7	664	5.9	-5.4			
E-coli	3	4.0	591	5.1	-1.3			
Giardiasis	7	9.4	451	3.9	+1.2			
Hepatitis A	1	1.3	1,624	13.9	-11.5			
Hepatitis E	0	0.0	0	0.0	0			
Influenza associated hospitalizations	61	82.1	10,886	93.1	-24.8			
Lyme	3	4.0	460	3.9	+1.0			
Mumps	1	1.3	69	0.6	+0.3			
Salmonellosis	10	13.5	1,600	13.7	-1.8			
Shigellosis	1	1.3	425	3.6	-3.1			
Spotted Fever, Rickettsiosis	0	0.0	49	0.4	-0.1			
Streptococcal, Group A, invasive	1	1.3	780	6.7	-2.4			
Streptococcal pneumoniae, invasive	8	10.8	1,273	10.9	-1.7			
Varicella	3	4.0	413	3.5	+3.0			
Yersiniosis	0	0.0	112	1.0	-0.2			
SOURCE: Ohio Department of Health, Rate=per	100,000 populatio	n, number of case	es is confirmed an	d probable				

Influenza-associated hospitalization rates have risen significantly over the past four years.

Communicable Disease Coun	ts and Ra	tes, Erie C	ounty, 20	016-2019					
Communicable Disease	20	16	20	17	20	18	20	19	Rate
Communicable Disease	#	Rate	#	Rate	#	Rate	#	Rate	Change
			ENTERIC I	DISEASES					
Campylobacter	16	21.3	15	20.0	12	16.1	11	14.8	-6.5
Cryptosporidiosis	4	5.3	1	1.3	2	2.7	2	2.7	-2.6
E-coli, unspecified	0	0.0	0	0.0	0	0.0	3	4.0	+4.0
Giardiasis	2	2.7	4	5.3	2	2.7	7	9.4	+6.7
Listeriosis	0	0.0	0	0.0	0	0.0	0	0.0	0
Salmonellosis	10	13.3	9	12.0	10	13.4	10	13.5	+0.2
Shigellosis	1	1.3	1	1.3	0	0.0	1	1.3	0
Yersiniosis	0	0.0	0	0.0	0	0.0	0	0.0	0
			HEPA	TITIS					
Hepatitis A	1	1.3	0	0.0	1	1.3	1	1.3	0
Hepatitis E	0	0.0	0	0.0	0	0.0	0	0.0	0
		VACCIN	E PREVEN	TABLE DIS	SEASES				
Influenza-associated hosp.	24	32.0	47	62.8	117	156.8	61	82.1	+50.1
Pertussis	0	0.0	4	5.3	1	1.3	0	0.0	0
Varicella	4	5.3	5	6.7	7	9.4	3	4.0	-1.3
		VECTO	RBORNE A	AND ZOOI	NOTIC				
Lyme Disease	0	0.0	0	0.0	1	1.3	3	4.0	+4.0
Malaria	0	0.0	0	0.0	0	0.0	0	0.0	0
		OTHER	REPORT	ABLE DISE	ASES				
Legionnaire's	2	2.7	3	4.0	2	2.7	3	4.0	+1.3
Meningitis (viral)	0	0.0	3	4.0	2	2.7	3	4.0	+4.0
Streptococcal, Group A	5	6.7	1	1.3	2	2.7	1	1.3	-5.4
TSS- Toxic Shock Syndrome	0	0.0	0	0.0	0	0.0	0	0.0	0
Streptococcus pneumoniae	7	9.3	10	13.4	2	2.7	8	10.8	+1.5
SOURCE: Ohio Department of Health	n, Rate=per	100,000 pop	ulation, nui	mber of case	s is confirm	ed and prob	able		

Preventable hospital stays are defined as the hospital discharge rate for ambulatory care-sensitive conditions per 1,000 Medicare enrollees. Ambulatory-care sensitive conditions (ACSC) are usually addressed in an outpatient setting and do not normally require hospitalization if the condition is well-managed. Hospitalization for diagnoses treatable in outpatient services suggests the quality of care provided in the outpatient setting was less than ideal. The measure may also represent a tendency to overuse hospitals as a main source of care. Over the past four years, the number of preventable hospital stays has slightly increased by 1.1% in the county, while it has significantly decreased by 15.5% in the state.

Preventable Hospital Stays								
	2016	2017	2018	2019	% Change			
Erie County	5,348	6,314	5,384	5,404	+1.1%			
Ohio 5,135 5,168 4,901 4,338 -15.5 %								
SOURCE: County	Health Rankings							

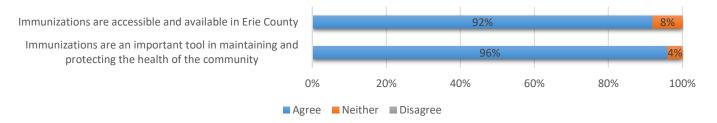
About half (46%) of female Medicare enrollees in Erie County aged 67-69 had at least one mammogram over a two-year period.

Mammography Screening Among Female Medicare Enrollees Age 67-69 Years									
	2016 2017 2018 2019 % Change								
Erie County	40%	43%	43%	46%	+6%				
Ohio 41% 43% 43% 45% + 4%									
SOURCE: County	SOURCE: County Health Rankings								

COMMUNITY LEADER SURVEY

The majority (92%) of community leaders agree that "immunizations are accessible and available in Erie County," with 70.0% in strong agreement. Less than one-tenth (8%) of community leaders did not have an opinion. Similarly, 95.8% of leaders agreed that "immunizations are an important tool in maintaining and protecting the health of the community," with 87.5% in strong agreement. A small portion (4.2%) of leaders did not have an opinion.

Availability of Immunizations in Erie County



CHRONIC DISEASE MANAGEMENT

COMMUNITY SURVEY

The most prevalent chronic diseases and risk factors are high blood pressure, arthritis, high cholesterol, diabetes, and cancer.

Summary: Chronic Disease Diagn	Summary: Chronic Disease Diagnosis and Management								
Chronic Disease	Been Di	Currently doing							
Cilionic Disease	Resident	Member of Household	anything to manage it						
High blood pressure	38.8%	26.6%	100.0%						
High cholesterol	29.4%	22.2%	100.0%						
Arthritis	30.9%	23.1%	62.0%						
Diabetes	13.6%	17.8%	96.9%						
Any form of cancer	9.9%	18.5%	70.8%						
Asthma	11.2%	16.7%	63.0%						
Heart disease or heart attack	8.3%	14.3%	100.0%						
Kidney disease	3.1%	7.2%	76.1%						
Respiratory disease	4.4%	9.6%	90.6%						
Stroke	3.0%	7.9%	85.7%						
Alzheimer's	0.7%	7.0%	29.2%						

- → HIGH BLOOD PRESSURE: More than half (54.8%) of residents reported either they or a member of their household was diagnosed with high blood pressure. More specifically, 38.8% of residents have been diagnosed with high blood pressure and 26.6% have a member of their household with the risk factor. Those more likely to be diagnosed with high blood pressure include those who are retired or unemployed, those without children in the home, and overweight residents.
- → HIGH CHOLESTEROL: Less than half (43.3%) of residents reported either they or a member of their household was diagnosed with high cholesterol. More specifically, 29.4% of residents have been diagnosed with high cholesterol and 22.2% have a member of their household with the risk factor. Those more likely to be diagnosed with high cholesterol include residents aged 65 years and over, those with an annual income under \$25,000, residents with a high school diploma or less education, those who are retired or unemployed, married residents, and those without children in the home.
- → **ARTHRITIS:** Less than half (45.4%) of residents reported either they or a member of their household was diagnosed with arthritis. More specifically, 30.9% of residents have been diagnosed with arthritis and 23.1% have a member of their household with the chronic disease. Those more likely to be diagnosed with arthritis include residents aged 65 years and over, those with an annual income under \$50,000, females, residents with some college or less education, those who work part-time or are retired, and those without children in the home.
- → **DIABETES:** Less than one-third (29.2%) of residents reported either they or a member of their household was diagnosed with diabetes. More specifically, 13.6% of residents have been diagnosed with diabetes and 17.8% have a member of their household with the chronic disease. Those more likely to be diagnosed with diabetes include those with an annual income under \$25,000 and those without health insurance.
- → CANCER: More than one-quarter (25.4%) of residents reported either they or a member of their household was diagnosed with any form of cancer. More specifically, 9.9% of residents have been diagnosed with cancer and 18.5% have a member of their household with the chronic disease. Those more likely to be diagnosed with cancer include those who are employed part-time or unemployed, those who are single, renters, r those without children in the home, non-white residents, and those without a healthcare provider or health insurance.
- → **ASTHMA:** Slightly more one-quarter (27.9%) of residents reported either they or a member of their household was diagnosed with asthma. More specifically, 11.2% of residents have been diagnosed with asthma and 16.7% have a member of their household with the chronic disease. Those more likely to be diagnosed with asthma include residents aged 18 to 44 years, those with an annual income under \$50,000, those with a high school diploma or less education, those who are employed part-time or unemployed, those who are single, renters, those with children in the home, non-white residents, and those without a primary care doctor or health insurance.
- → **HEART DISEASE:** Over one-fifth (21.8%) of residents reported either they or a member of their household was diagnosed with heart disease or heart attack. More specifically, 8.3% of residents have been diagnosed with heart disease and 14.3% have a member of their household with the chronic disease. Those more likely to be diagnosed with heart disease include residents aged 65 years and over, those with a high school diploma or less education, those who are employed part-time or retired, those without children in the home, non-white residents, and those without health insurance.
- → **KIDNEY DISEASE:** About one in ten (10.3%) residents reported either they or a member of their household was diagnosed with kidney disease. More specifically, 3.1% of residents have been diagnosed with kidney disease and 7.2% have a member of their household with the chronic disease. Those more likely to be diagnosed with kidney disease include residents aged 18 to 44 years, renters, non-white residents, and those without health insurance.
- → **RESPIRATORY DISEASE**: More than one in ten (13.8%) residents reported either they or a member of their household was diagnosed with respiratory disease. More specifically, 4.4% of residents have been diagnosed with respiratory disease and 9.6% have a member of their household with the chronic disease. Those more likely to be diagnosed with respiratory disease include residents aged 18 to 44 years, those with an annual income under

- \$50,000, those with a high school diploma or less education, those who are unemployed, those who are single or divorced, renters, those without children in the home, and non-white residents.
- → STROKE: About one in ten (10.8%) residents reported either they or a member of their household was diagnosed with Stroke. More specifically, 3.0% of residents have been diagnosed with stroke and 7.9% have a member of their household with the chronic disease. Those more likely to be diagnosed with stroke include residents aged 18 to 44 years, those with a high school diploma or less education, those who are employed part-time, renters, non-white residents, and those without a healthcare provider or health insurance.
- → ALZHEIMER'S: Less than one in ten (7.7%) residents reported either they or a member of their household was diagnosed with Alzheimer's. More specifically, 0.7% of residents have been diagnosed with Alzheimer's and 7.0% have a member of their household with the chronic disease. Those more likely to be diagnosed with Alzheimer's include those with a high school diploma or less education, those who are unemployed, those who are single, renters, and non-white residents.

SECONDARY DATA ANALYSIS

The number of resident deaths in Erie County has increased by 17.2% over the past five years.

Resident Dea	aths by Age Gr	oup					
	2016	2017	2018	2019	2020	2021	% Change
Erie County	969	1,001	954	965	1,182	1,136	+17.2%
Ohio	119,574	123,650	124,294	123,705	143,661	147,569	+23.4%
ERIE COUNTY	Y BY AGE GRO	UP					
<1	6	4	6	6	6	10	+60.0
1-4	2	1	0	0	1	1	-50.0%
5-14	2	0	2	1	0	1	-50.0%
15-24	16	10	7	11	12	7	-56.2%
25-34	16	9	15	14	16	18	+11.1
35-44	25	34	30	20	35	25	0.0%
45-54	61	55	29	36	47	49	-19.7%
55-64	122	117	88	129	123	149	+18.1
65-74	163	202	208	182	231	227	+28.2%
75-84	225	234	235	226	319	300	+25.0%
85+	331	335	334	340	389	349	+5.2%
SOURCE: Ohio D	epartment of Hed	alth, ODH Data W	arehouse				

The top two causes of death in Erie County in 2021 were cancer and heart disease.

General Causes of Death in Erie County (death per 100,000 population)												
			Erie (County					C	hio		
	2017	2018	2019	2020	2021	Change	2017	2018	2019	2020	2021	Change
Malignant Neoplasms	106.3	133.5	142.7	135.0	148.3	+42.0	158.8	145.1	151.2	147.2	148.6	-10.2
Diseases of the Heart	189.1	191.1	179.0	125.4	169.8	-19.3	186.4	191.7	189.2	196.7	196.4	+10.0
Alzheimer's Disease	41.9	52.5	41.5	48.3	35.7	-6.2	33.6	35.1	33.7	38.0	31.7	-1.9
CLRD	62.4	70.7	45.4	53.4	43.6	-18.8	48.5	49.1	46.0	44.6	40.6	-7.9
Cerebrovascular	40.2	31.9	40.8	51.0	64.2	+24.0	42.9	42.8	42.3	45.4	46.4	+3.5
Unintentional Injuries	78.4	61.3	49.7	89.9	51.9	-26.5	65.1	55.0	58.8	68.3	71.0	+5.9
Diabetes	29.1	26.6	19.5	25.8	36.3	+7.2	25.2	25.4	25.5	28.3	29.0	+3.8
Suicide	14.1	*	20.3	*	17.7	+3.6	14.8	15.3	15.2	13.8	14.6	2
Flu & Pneumonia	9.4	9.3	10.6	10.5	10.0	+0.6	14.9	15.8	12.7	13.3	10.9	-4.0

The most prevalent cancers in Erie County in 2019 were breast, lung/ bronchus, and prostate. Cancer incidence rates were considerably higher in Erie County than Ohio for the following types of cancer: leukemia, melanoma of the skin, other sites/types, and thyroid.

Cancer Incidence by Type	Cancer Incidence by Type									
		Numbe	r of Cases		Age Adjusted	% Change				
	2016	2017	2018	2019	Rate (2019)	2016-2019				
ERIE COUNTY										
Bladder	24	26	28	20	16.6	-16.7%				
Brain and other CNS	2	5	4	9	9.8	+77.8%				
Breast	72	65	66	75	68.2	+4.0%				
Cervix	3	1	6	3	*	0.0%				
Colon & Rectum	52	47	49	43	38.2	-17.3%				
Esophagus	7	7	6	5	4.8	-28.6%				
Hodgkin's Lymphoma	3	1	4	2	*	-33.3%				
Kidney & Renal Pelvis	22	18	14	19	18.9	-13.7%				
Larynx	9	3	3	4	*	-55.6%				
Leukemia	12	13	16	14	14.3	+14.3%				
Liver & Intrahepatic Bile Duct	4	10	5	7	6.3	+42.9%				
Lung and Bronchus	75	93	62	66	53.5	-12.0%				
Melanoma of the Skin	31	41	30	48	40.8	+35.4%				
Multiple Myeloma	9	13	6	10	7.5	+10.0%				
Non-Hodgkin's Lymphoma	16	20	18	16	12.7	0.0%				
Oral Cavity & Pharynx	17	17	12	12	11.2	-29.4%				
Other Sites/Types	39	44	43	41	36.7	+4.9%				
Ovary	1	4	6	2	*	+50%				
Pancreas	6	18	15	13	11.8	+53.8%				
Prostate	59	65	54	72	118.2	+18.0%				
Stomach	10	6	3	9	6.6	-10.0%				
Testis	1	3	2	2	*	+50.0%				
Thyroid	24	21	16	19	21.9	-20.8%				
Uterus	15	29	14	20	32.8	+33.3%				
TOTAL	513	570	482	531	466.4	+3.5%				

2022 Erie County CHA

*Indicates rates have been suppressed for counts <10

Cancer Incidence by Type						
		OF	IIO			
Bladder	3,201	3,244	3,302	3,318	21.3	+3.6%
Brain and Other CNS	935	959	904	931	7.0	-0.4%
Breast	9,818	9,956	9,909	10,149	70.1	+3.3%
Cervix	491	492	450	499	8.0	+1.6%
Colon & Rectum	5,834	5,828	5,819	5,608	37.8	-3.8%
Esophagus	823	833	860	931	5.9	+13.1%
Hodgkin's Lymphoma	332	330	288	352	3.0	+6.0%
Kidney & Renal Pelvis	2,519	2,540	2,529	2,625	17.8	+4.2%
Larynx	583	598	547	572	3.7	-6.1%
Leukemia	1,677	1,720	1,678	1,712	12.0	-2.0%
Liver & Intrahepatic Bile Duct	1,162	1,157	1,162	1,228	7.6	+5.6%
Lung and Bronchus	10,001	9,954	10,025	10,134	63.9	+1.3%
Melanoma of the Skin	3,615	3,406	3,403	3,825	26.7	+5.8%
Multiple Myeloma	953	902	920	932	6.0	-2.2%
Non-Hodgkin's Lymphoma	2,691	2,777	2,768	2,862	19.3	+6.3%
Oral Cavity & Pharynx	1,765	1,843	1,857	1,946	12.9	+0.2%
Other Sites/Types	5,124	5,189	5,043	5,254	12.9	+2.5%
Ovary	743	775	709	716	9.3	-3.6%
Pancreas	1,897	2,008	2,189	2,155	13.8	+13.6%
Prostate	7,498	8,391	8,567	9,105	118.9	+21.4%
Stomach	891	886	835	811	5.4	-8.9%
Testis	295	282	305	312	5.9	+5.7%
Thyroid	1,909	1,848	1,838	1,848	14.8	-3.2%
Uterus	2,498	2,571	2,469	2,545	31.6	+1.8%
TOTAL	67,255	68,489	68,376	70,370	468.0	+4.6%
SOURCE: Ohio Department of Health E	Data Warehouse,	*indicates wher	e rates may be u	nstable for case	counts less than five	

Disabilities include difficulties with hearing, vision, cognition, ambulation, and self-care. The percentage of the population with disabilities has remained consistent over the past four years.

Disability Status by Age						
	2016	2017	2018	2019	2020	Change
Total Population	74,861	74,420	74,195	73,870	73,442	-1.9%
% with a Disability	14.1%	14.5%	14.8%	15.1%	14.7%	+0.6%
# with a Disability	10,546	10,804	11,014	11,145	10,812	+2.5%
# under 5	11	14	3	3	2	-81.8%
<i>#5-17</i>	549	474	569	628	690	+25.6%
#18-34	888	896	996	984	987	+11.1%
#35-64	4,218	4,324	4,362	4,525	4,526	+7.3%
#65-74	2,063	2,162	2,197	2,093	1,936	-6.1%
75 years and older	2,817	2,934	2,887	2,912	2,671	-5.1%
SOURCE: U.S. Census Bureau, A	merican Commi	unity Survey 5-Ye	ear Estimates			

Students with disabilities will have Individual Education Plans (IEPs) at school. Margaretta Local Schools and Sandusky City Schools have the highest percentage of students with disabilities in the county.

Students with Disabilities, 2020-2021 District Level Data							
District	# Total Students	# Students Disabilities	% Students Disabilities				
Sandusky City Schools	3,049	460	15.1%				
Perkins Local Schools	1,783	195	11.0%				
Vermilion Local Schools	1,678	246	14.7%				
Edison Local Schools	1,407	162	11.5%				
Huron City Schools	1,241	160	12.9%				
Margaretta Local Schools	1,081	210	19.4%				
COUNTY TOTAL	10,239	1,433	13.9%				
SOURCE: Ohio Department of Education							

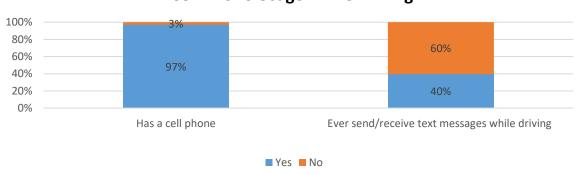
TRANSPORTATION

COMMUNITY SURVEY

Summary: Transportation and Safe Driving				
		%	#	
Have a cell phone	97.3%	387		
Ever send or received texts/emails while driv	ring	39.5%	377	
	Always	87.7%		
How often use a seat belt while driving or	Most of the time	6.8%	207	
riding in a car	Sometimes	3.7%	387	
	Never	1.9%		
	Own car	86.0%		
	Walk	5.9%		
	Family member/friend	4.4%		
Type of transportation used most often	Public Transit	1.7%	387	
	Bike	0.9%		
	Borrowed car	0.2%		
	Other	0.9%		

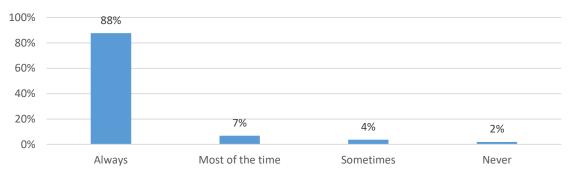
The majority (97.3%) of residents have a cell phone. More than one-third (39.5%) of those with a cell phone reported ever sending or receiving text messages or e-mails while driving. Groups of residents more likely to send and/or receive text messages when driving include residents aged 18 to 44 years, those with an annual income over \$75,000, males, those who are employed, those who are single, and white residents.

Cell Phone Usage While Driving



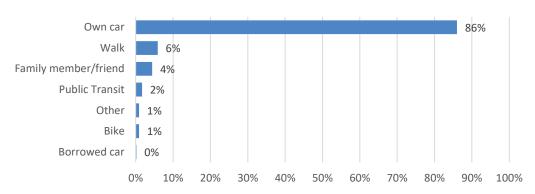
Most residents (87.7%) always wear a seatbelt when driving or riding in a care. A small portion (6.8%) wear seatbelts most of the time, 3.7% wear them sometimes, and 1.9% never wear a seatbelt. Groups of residents more likely to NOT wear a seatbelt include those with an annual income under \$50,000, residents with some college or less education, those who are non-married, and those without health insurance.

Seat Belt Use While Driving or Riding in Car



Most residents (86.0%) use their own car when commuting. Groups of residents more likely to **own a car** include residents aged 45 years and over, those with an annual income over \$50,000, college graduates, those who are employed full-time or retired, those who are married, homeowners, and white residents. A small number of residents (5.9%) regularly **walk** when needing to go somewhere. Groups of residents more likely to walk include residents aged 18 to 44 years, those with an annual income under \$25,000, males, residents with a high school diploma or less education, those who are unemployed, those who are single, renters, and non-white residents. Even fewer residents (4.4%) regularly commute **by riding with family and friends**. Groups of residents more likely to get rides from family and friends include residents aged 18 to 44 years, those with an annual income under \$50,000, females, residents with a high school diploma or less education, those who are employed part-time, those who are single or widowed, renters, and non-white residents. Less than one-tenth of residents (1.7%) use **public transit** when needing to go somewhere. Other modes of transportation were used much less often: **bike** (0.9%), **borrowing a car** (0.2%), and **other** (0.9%).

Modes of Transportation



SECONDARY DATA ANALYSIS

Driving alone to work is an indicator of poor public transit infrastructure and sedentary behaviors. Most of the workforce in Erie County (85%) drives alone to work, and this percentage has stayed stagnant over time.

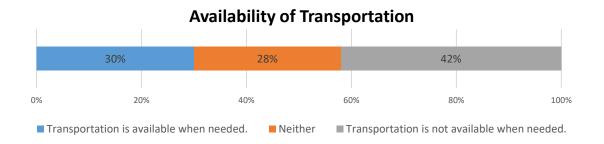
Percentage of Workforce that Drives Alone to Work								
	2016	2017	2018	2019	2020	% Change		
Erie County	84%	85%	85%	85%	85%	+1%		
Ohio 83% 83% 83% 82% - 1%								
SOURCE: County	SOURCE: County Health Rankings							

Among workers who commute in their car alone, the percentage that commute more than 30 minutes in Erie County was significantly lower than the state percentage (22% compared to 31%, respectively).

Long Commute: Percentage of Workforce Drives Alone for >30 Minutes									
	2012- 2013-2017 2014-2018 2015-2019 2016-2020 2016								
	2010								
Erie County	32%	22%	22%	21%	22%	-10%			
Ohio	30%	30%	31%	31%	31%	+1%			
SOURCE: County	Health Ranking.	S							

COMMUNITY LEADER SURVEY

Nearly one-third (30.0%) of community leaders agreed that "transportation for medical appointments is available for residents in Erie County when needed," with 6.0% in strong agreement. More than one-third (42.0%) disagreed.



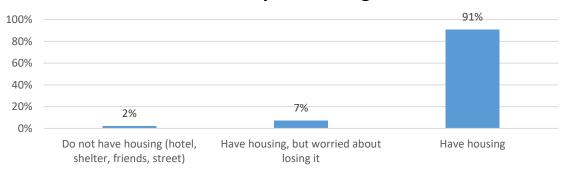
HOUSING

COMMUNITY SURVEY

Summary: Housing										
		%	#							
	Do not have housing	2.1%								
Housing situation today	Have it, but worried about losing	7.1%	387							
	Have housing	90.8%								
	Mold	7.8%								
	Water leaks	7.5%								
Uava nyahlawa in nlasa	Bug infestation	3.0%								
Have problems in place live in with	Inadequate heat	2.6%	387							
live ili with	Oven or stove not working	2.6%	367							
	Smoke detector issues	2.6%								
	Lead paint or pipes	0.8%								
	Other	4.6%								

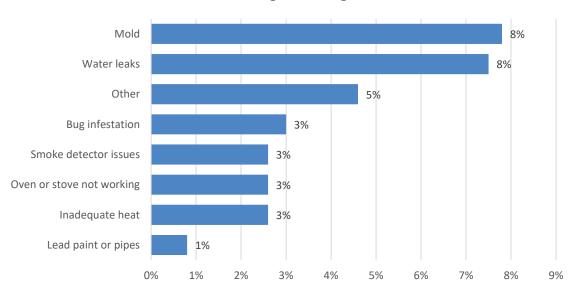
The majority (90.8%) of residents have stable housing. Less than one-tenth of residents (7.1%) have housing, but are worried about losing it. A small number (7.1%) do not have housing and are staying at a hotel, shelter, friend's house or on the street. Groups of residents more likely to not have housing include residents aged 18 to 44 years, those with an annual income under \$50,000, residents with a high school diploma or less education, those who are employed part-time, those who are single or divorced, renters, and non-white residents.

Stability of Housing



Nearly one in ten residents (7.8%) have a problem with mold where they live, and 7.5% have a problem with water leaks. A small number have a problem with bug infestation (3.0%), no smoke detectors or detectors not working (2.6%), oven or stove not working (2.6%), inadequate heat (2.6%), and lead paint or pipes (0.8%). Groups of residents more likely to encounter one or more of these issues include residents aged 18 to 64 years, those with an annual income under \$75,000, residents with some college or less education, those who are employed part-time or unemployed, those who are single or divorced, renters, those with children in the home, and non-white residents.





SECONDARY DATA

More than two-thirds (69.2%) of housing units in Erie County are owner-occupied, while 30.8% are renter-occupied. The percentage of vacant houses is significantly higher in Erie County (17.6%) than Ohio (10.1%). The median value of a house in Erie County (\$139,900) is lower than the state (\$145,700). Monthly expenses for both homeowners and renters are slightly lower in Erie County than the state.

Housing Units, 2020												
	% Owner	% Renter	% Vacant	Median	Median	Median	Median Monthly					
	Occupied	Occupied	% Vacant	Year Built	Value	Gross Rent	Owners Cost					
Erie County	69.2%	30.8%	17.6%	1964	\$139,900	\$756	\$1,173					
Ohio 66.1% 33.9% 10.1% 1968 \$145,700 \$808 \$1,282												
SOURCE: Ohio Devel	opment Services	Agency, Ohio Coι	unty Profiles									

Nearly three-quarters (72.5%) of housing units in Erie County are single-detached dwellings. This is slightly higher than the state percentage (68.4%).

Percentage as Share of Housing Units, 2019										
Single-Detached Units of Multi-family Mobile Ho										
Erie County	72.5%	12.6%	3.2%							
Ohio	68.4%	14.8%	3.6%							
SOURCE: OHFA, 2021 Ohio Housing Needs Assessment										

ENVIRONMENTAL QUALITY

SECONDARY DATA

Fine particulate matter is defined as particles of air pollutants with an aerodynamic diameter less than 2.5 micrometers. These particles can be directly emitted from sources such as forest fires, or they can form when gases emitted from power plants, industries, and automobiles react in the air. Particulate matter has been getting slightly better in the county since 2012, and remains consistent with the state average.

Air Pollution - Particulate matter (PM2.5)											
2012 2014 2016 2018 % Change											
Erie County	11.1	11.1	9.0	9.0	-2.1						
Ohio	Ohio 11.3 11.5 9.0 9.0 -2.3										
SOURCE: County Health Ranking, Air Data Quality Index Report											

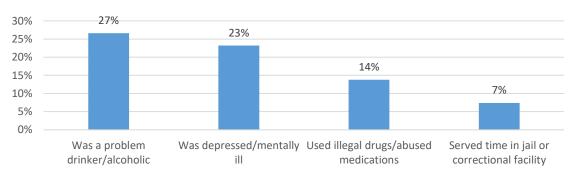
SAFETY, INJURY AND VIOLENCE

COMMUNITY SURVEY

Summary: Adverse Childhood Experiences								
		% of residents	# of residents					
	Was depressed/mentally ill	23.2%						
Lived with someone	Was a problem drinker/alcoholic	26.6%	207					
as a child who was	Used illegal drugs/abused medications	13.8%	387					
was	Served time in jail or correctional facility	7.4%						
	Parents divorced/separated	26.7%						
	Physically/sexually/emotionally/financially/verbally abused	23.4%						
	Family did not look out, feel close, support each other	14.0%	387					
Happen as a child	Parents or adults physically hurt each other	10.8%						
	Not enough to eat, had dirty clothes, no one to protect	6.9%						
	Parents were not married	5.3%						
	By a spouse	34.3%						
Been abused by	By a parent	56.7%						
(of those who have	By a child	7.7%	90					
been abused in past)	By a paid caregiver	0.9%						
	By another person outside of home	42.2%						
	Verbally	75.8%						
How abused	Emotionally	73.8%						
(of those who have	Sexually	52.9%	90					
been abused in past)	Physically	62.8%						
	Financially	24.7%						

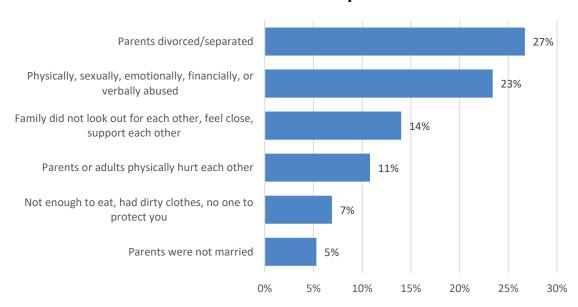
More than one-quarter (26.6%) of residents lived with someone as a child who was a problem drinker or alcoholic. Over one-fifth (23.2%) lived with someone who was depressed or mentally ill. Less than one-sixth (13.8%) lived with someone as a child who used illegal drugs or abused medications. Less than one-tenth (7.4%) lived with someone who had served time in jail or a correctional facility.

Residents Lived with Someone as a Child Who. . .



More than one-quarter (26.7%) of residents had parents who were divorced or separated as a child. Less than one-quarter (23.4%) of residents were abused physically, sexually, emotionally, financially, or verbally as a child. Less than one-fifth (14.0%) of residents had family that did not look out for each other, feel close to each other, or support each other as a child. About one in ten (10.8%) residents had parents or adults who physically hurt each other. Less than one in ten (6.9%) residents did not have enough to eat, had dirty clothes, and had no one to protect them as a child, and 5.3% had parents who were not married.

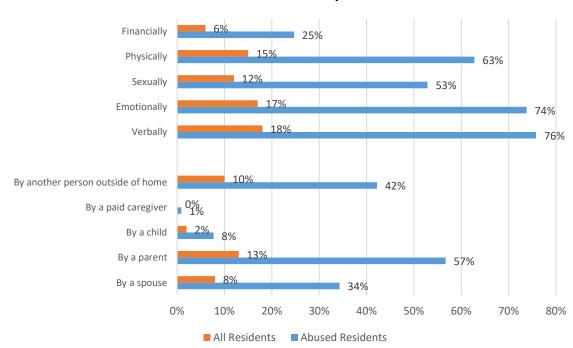
Adverse Childhood Experiences



Groups of residents more likely to have had one or more of these adverse childhood experiences include residents aged 18 to 44 years, those with an annual income under \$25,000, females, residents with some college or less education, those who are unemployed or employed part-time, those who are single, and renters.

Over half (56.7%) of residents were abused by a parent. Other abusers include another person outside of the home (42.2%), a spouse (34.3%), a child (7.7%), and a paid caregiver (0.9%). The most common form of abuse was verbal abuse (75.8%). Other types of abuse include emotional (73.8%), physical (62.8%), sexual (52.9%), and financial (24.7%).

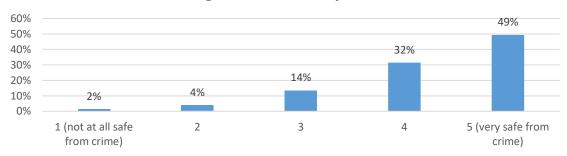
Abuse and Relationship to Abuser



Summary: Community and Gun Safety									
		% of residents	# of residents						
	1 (not at all safe)	1.5%							
How safe from crime is	2	4.0%							
neighborhood	3	13.6%	387						
Heighborhood	4	31.5%							
	5 (very safe)	49.4%							
Firearms kept in or around	Yes	41.2%	200						
home	No	58.8%	386						
Firearms locked and loaded	Firearms locked	69.5%	220						
(those with firearms)	Firearms loaded	40.4%	230						

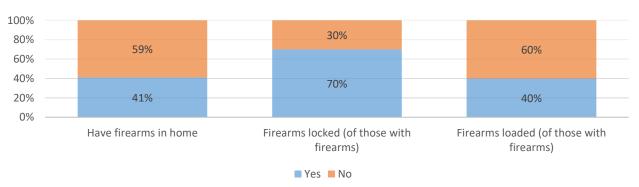
The majority (80.9%) of residents felt that their neighborhood was safe or very safe from crime, while 5.5% felt that their neighborhood was not very or not at all safe. Groups of residents more likely to think that their neighborhood was **safe** from crime include residents aged 65 years and over, those with an annual income over \$50,000, college graduates, those who are employed full-time or retired, those who are widowed or married, homeowners, and white residents. Groups of residents more likely to think that their neighborhood was **not safe** from crime include residents aged 18 to 44 years, those with an annual income under \$50,000, residents with a high school diploma or less education, those who are unemployed, those who are single, and renters.

Neighborhood Safety: Crime



Almost half (41.2%) of residents currently keep firearms in or around their home. Of those with firearms, more than half (69.5%) keep them locked and 40.4% keep them loaded. Groups of residents more likely to have firearms in or around their home include residents with an annual income of \$50,000 or more, males, those who are employed full-time, those who are married, homeowners, those who have children in the home, and white residents.

Firearms in the Home



SECONDARY DATA ANALYSIS

The death rate for unintentional injuries in Erie County increased slightly between 2017 and 2020 (a rate was unavailable in 2021). Homicides are rare in Erie County, with no homicides over the past 5 years.

Unintentional Injury and Homicide Death Rate (death per 100,000 population)												
Erie County Ohio												
	2017 2018 2019 2020 2021 Change 2017 2018 2019 2020 2021 Change								Change			
Unintentional Injuries	7.7	*	8.8	11.0	*	+3.3^	65.1	55.0	58.8	68.4	71.0	+5.9
Homicide * * * * * - 7.6 6.9 6.6 9.1 9.4 +1.8												
SOURCE: Ohio Departmen	t of Health	, ODH Dat	a Wareho	ouse, *Indi	icates rate	s have bee	en suppre	ssed for	counts <1	0, ^chang	ge based o	off of

2017 to 2020

The violent crime rate is represented as an annual rate per 100,000 population. Violent crimes are defined as offenses that involve face-to-face confrontation between the victim and the perpetrator, including homicide, forcible rape, robbery, and aggravated assault. The violent crime rate for Erie County is significantly lower than the state.

Violent Crime Rate												
2008-2010 2009-2011 2010-2012 2012-2014 2014-2016 % Change												
Erie County	222	204	187	116	82	-63.0%						
Ohio 332 318 307 290 293 - 11.7 %												
SOURCE: County	SOURCE: County Health Rankings											

The firearm fatality rate is defined as the number of deaths due to firearms per 100,000 population. This is slightly lower in the county than it is in the state, and the county rate over the past five years has remained at less than 10.

Homicide by Firearm Fatality Rate										
2017 2018 2019 2020 2021 % Change										
Erie County	*	*	*	*	*	-				
Ohio 5.8 5.0 5.2 7.6 8.1 +2.3										
SOURCE: Ohio Department of Health, Ohio Data Warehouse, *Indicates rates have been suppressed for counts <10										

Over the past five years, the total number of maltreatment allegations in the county has increased. Allegations of physical abuse, neglect, sexual abuse, and emotional maltreatment are most common. At the same time, the number of families in need of services or dependency has been declining.

Total Number of Malt	Total Number of Maltreatment Allegations, 2013- 2020										
	SFY 2013	SFY 2016	SFY 2018	SFY 2020	Change						
Erie County	532	507	481	552	+3.6%						
Ohio	100,139	97,602	101,243	94,973	-5.2%						
Count of Maltreatmer	nt Allegations	by Maltreatm	nent Type: PH	YSICAL ABUSE							
Erie County	70	60	59	83	+15.7%						
Ohio	28,817	29,659	30,264	29,442	+2.1%						
Count of Maltreatmer	nt Allegations	by Maltreatm	nent Type: NE	GLECT							
Erie County	270	243	230	287	+5.9%						
Ohio	28,819	25,098	25,827	23,743	-17.6%						
Count of Maltreatmer	nt Allegations	by Maltreatm	nent Type: SE>	(UAL ABUSE							
Erie County	59	58	64	61	+3.3%						
Ohio	10,153	9,040	9,137	8,548	-15.8%						
Count of Maltreatmer	nt Allegations:	EMOTIONAL	MALTREATM	ENT							
Erie County	1	4	4	6	+83.3%						
Ohio	1,505	1,301	1,203	950	-36.9%						
Count of Maltreatmer	nt Allegations:	MULTIPLE A	LLEGATIONS								
Erie County	55	52	52	55	0.0%						
Ohio	13,348	13,827	17,861	18,995	+29.7%						
Count of Maltreatmer	nt Allegations:	FAMILY IN N	EED OF								
Erie County	77	90	72	22	-71.4%						
Ohio	17,541	18,856	17,001	12,346	-29.6%						
SOURCE: Public Children Sei	rvices Association	of Ohio (PCSAO,) PCSAO Factboo	k							

The table below shows the number of youths under age 18 adjudicated for felony-level offenses over a five-year period. The rate is the number of adjudications per 1,000 youths in the population. Overall, only 36 youths in Erie County were adjudicated for felony-level offenses. However, this number has been increasing significantly faster over the years than the state.

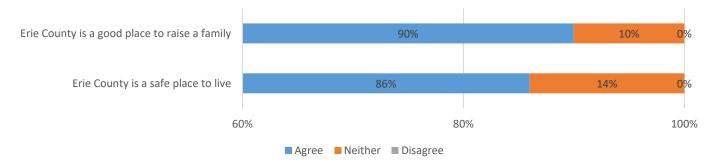
Adolescen	Adolescents Adjudicated for Felonies													
	20	2017		2018		2019		20	0/ Change					
	#	Rate per 1,000	#	Rate per 1,000	#	Rate per 1,000	#	Rate per 1,000	% Change 2017-2020					
Erie	22	1.4	35	2.3	21	1.4	36	2.4						
County									+ 38.9%					
Ohio	4,496	1.7	4,195	1.6	3,365	1.4	3,075	1.3	-31.6%					

The # of those under age 18 adjudicated for felony-level offenses. The rate is the number of adjudications per 1,000 adolescents in the population. SOURCE: Kids Count Data Center. http://datacenter.kidscount.org/data/tables/2490-adolescents-adjudicated-for-felonies?loc=37&loct=5#detailed/5/5180,5192,5215,5224,5227,5229,5244,5253-5255,5262/false/573,869,36,868,867/any/10247,15677.

COMMUNITY LEADER SURVEY

The majority (86%) of community leaders agree that "Erie County is a safe place to live." Likewise, 89.8% of community leaders agree that "Erie County is a good place to raise a family."

Leaders' Perceptions of Community Safety



REPRODUCTIVE AND SEXUAL HEALTH

SECONDARY DATA ANALYSIS

The HIV infection rate is the number of persons with a reported diagnosis of HIV infection per 100,000 population. The HIV infection rate in Erie County has increased over the past five years and is higher than Ohio's rate.

HIV Infection	HIV Infection Rate								
	2016	2017	2018	2019	2020	Change			
Erie County	*	*	6.7	*	10.9	+3.3			
Ohio	8.3	8.4	8.2	7.7	7.7 -0.6				
Ohio Department	Ohio Department of Health, HIV Surveillance, *Indicates rate not calculated for case count <5								

The rate below depicts the number of persons living with diagnosed HIV per 100,000 population. While the rate in Erie County has increased considerably over the past five years, it is still significantly lower than the state.

Rate of Population Living with Diagnosed HIV Infection									
	2016	2017	2018	2019	2020	Change			
Erie County	111.8	113.6	123.3	119.8	131.6	+19.8			
Ohio	196.1	202.3	204.4	209.4	214.6	+18.5			
Ohio Departmen	Ohio Department of Health, HIV Surveillance								

The gonorrhea rate is the number of persons per 100,000 population diagnosed with gonorrhea. In 2016, the gonorrhea rate for Erie County was higher than the rate for the state. This is no longer true in 2020, as the Erie County rate is now lower.

Gonorrhea R	ate					
	2016	2017	2018	2019	2020	Change
Erie County	245.0	332.8	241.6	153.5	250.5	+5.5
Ohio	176.8	205.8	216.2	224.0	262.6	+85.8
Ohio Departmer	nt of Health, S	STD Surveillance				

The chlamydia rate is the number of persons per 100,000 population diagnosed with chlamydia. The chlamydia rate for Erie County is considerably lower than the state's rate.

Chlamydia Rate									
	2016	2017	2018	2019	2020	Change			
Erie County	245.0	332.8	241.6	153.5	250.5	+5.5			
Ohio	521.8	526.8	543.1	561.9	504.8	-17.0			
Ohio Departmen	Ohio Department of Health, STD Surveillance								

The syphilis rate is the number of persons per 100,000 population diagnosed with syphilis. The syphilis rate for Erie County is considerably lower than the state's rate; however the rate has been increasing in the county.

Syphilis Rate										
	2016	2017	2018	2019	2020	Change				
Erie County	4.0	17.4	4.0	6.7	16.2	+12.2				
Ohio	13.9	16.5	16.4	17.3	20.9	+7.0				
SOURCE: Ohio De	partment of	SOURCE: Ohio Department of Health, STD Surveillance								

Appendix: Survey Results – Year to Year Comparisons

1 1	•			•		
Summary: Persona	l Health Status					
		2022	2019	2015	2013	2011
Health	Excellent/Very Good/Good	71%	83%	85%	84%	89%
Perception ¹	Fair/Poor	29%	17%	15%	16%	11%
Rated physical hea	Ith as not good 4 or more days last month	29%	21%	20%	19%	18%
Average number of	f days physical health not good	4.7	4.3	3.3	3.5	NA
Rated mental healt	th as not good 4 or more days last month	40%	21%	19%	23%	18%
Average number of	f days mental health not good	6.9	3.5	3.1	3.6 NA	
Poor physical or me	ental health kept from activities	38%	27%	22%	21% 2	
Summary: Insurance	e Coverage					
Currently uninsured	I	7%	3%	7%	16%	9%
•	Private insurance- employer paid	41%	42%	NA	NA	NA
Type of Insurance	Private insurance- self paid	11%	4%	NA	NA	NA
coverage	Medicare	32%	40%	NA	NA	NA
(of those with	Medicaid	13%	4%	NA	NA	NA
insurance)	VA Coverage	2%	2%	NA	NA	NA
	Other	NA	8%	NA	NA	NA
	Prescription assistance	83%	89%	NA	NA	NA
Services covered	Preventative care	83%	82%	NA	NA	NA
by insurance	Vision services	69%	55%	NA	NA	NA
(of those with	Dental services	69%	57%	NA	NA	NA
insurance)	Mental health	64%	66%	NA	NA	NA
	Alcohol and drug treatment	44%	47%	NA	NA	NA
Summary: Access to	Health Care					
Have regular primar	ry care provider	84%	90%	87%	88%	86%
Had a routine check	-up in past year	80%	77%	71%	63%	57%
Summary: Mental I	Health					
During past 12	Felt sad or hopeless 2+ weeks	21%	8%	10%	10%	9%
months	Ever seriously consider suicide	8%	4%	3%	2%	3%
	Anxiety disorder such as OCD or panic	19%	10%	NA	NA	NA
	ADD/ADHD	11%	5%	NA	NA	NA
	Posttraumatic stress disorder	13%	3%	NA	NA	NA
	Alcohol/Substance Abuse/Dependence	7%	4%	NA	NA	NA
Been Diagnosed	Bipolar	9%	3%	NA	NA	NA
by Medical	Developmental disability	4%	1%	NA	NA	NA
Professional	Other mental health disorder	6%	1%	NA	NA	NA
	Eating disorder	4%	1%	NA	NA	NA
		4% 2%	1% <1%	NA NA	NA NA	NA NA
	Eating disorder Schizophrenia Problem gambling				+	

¹ In 2022, scale was: excellent, good, fair, poor, very poor. Prior to 2022, scale was: excellent, very good, good, fair, and poor.

Summary: Access to	Oral Health Care					
		2022	2019	2015	2013	2011
Dental Checkup wit	hin past year	65%	61%	67%	62%	65%
Summary: Smoking		0370	01/0	3 7,70	02/0	3373
	Current smoker	20%²	12%	20%	21%	26%
Smoking behavior	Past smoker	26%	38%	25%	24%	22%
3	Never smoked	54%	50%	55%	55%	52%
Summary: Alcohol a	and Substance Abuse					
Percentage of adult		65%	63%	62%	54%	65%
	g alcohol in past month	11%	9%	7%	6%	8%
Adult recreational r	•	25%	5%	9%	7%	11%
Past year taken j	prescriptions not belonging to them/	20/	00/			
taken different than	n prescribed	3%	8%	NA	NA	NA
Summary: Child Hea	alth					
Children up to date	on recommended vaccines	96%	82%	NA	NA	NA
Summary: Healthy I	Living- Weight and Exercise					
Self-described	Overweight	63%	75%	70%	74%	66%
weight	About right	35%	24%	30%	26%	34%
weight	Underweight	2%	NA	NA	NA	NA
Been told obese or	overweight by a doctor	39%	32%	NA	NA	NA
Summary: Prevention	on, Testing and Screening					
Had colonoscopy in	past 5 years (ages 50+)	54%	53%	NA	NA	NA
Received	Annual flu vaccine	58%	64%	49%	48%	34%
vaccines:	Pneumonia vaccine (age 65+, in lifetime)	78%	80%	54%	50%	46%
vaccines.	Shingles vaccine (in lifetime)	29%	35%	14%	8%	NA
Summary: Women'	s Health					
Mammogram (40 a	nd over) in past year	63%	64%	NA	NA	NA
Breast exam in past	year (2022 self-exam, other year, clinical)	79%	46%	54%	56%	62%
Pap smear in past y	ear	37%	28%	46%	48%	56%
Overweight or obes	e	64%	68%	NA	NA	NA
High blood pressure	2	34%	43%	NA	NA	NA
High cholesterol		27%	42%	NA	NA	NA
	⁻ 2022, this is everyday smokers)	11%	7%	NA	NA	NA
Summary: Men's He						
PSA test (50 and ov		43%	48%	NA	NA	NA
Overweight or obes		62%	81%	NA	NA	NA
High blood pressure	9	44%	48%	NA	NA	NA
High cholesterol		33%	53%	NA	NA	NA
Current smoker (for	2022, this is everyday smokers)	11%	16%	NA	NA	NA

² Includes smokers who currently smoke somedays (9%) and every day (11%)

³ In 2022, includes adults who currently drink every day or somedays. Prior to 2022, this was adults who had at least 1 drink in past month.

⁴ In 2022, included both respondent and anyone in household

Summary: Chronic	Illnesses					
		2022	2019	2015	2013	2011
	High blood pressure	39%	48%	36%	31%	28%
Resident been	High cholesterol	29%	48%	39%	35%	31%
diagnosed with	Arthritis	31%	48%	NA	NA	NA
	Diabetes	14%	21%	12%	10%	13%
	Any form of cancer	10%	23%	NA	NA	NA
	Asthma	11%	9%	14%	15%	13%
	Heart disease or heart attack	8%	8%	6%	7%	4%
	Stroke	3%	5%	4%	4%	2%
Summary: Housing						
Have mold problem	ns in home	8%	7%	NA	NA	NA
Summary: Adverse	Childhood Experiences					
Experienced 4 or m	ore ACEs in lifetime	17%	6%	NA	NA	NA
Summary: Feelings	of Safety in the Community					
Firearms kept in or	around home	41%	44%	35%	41%	41%

Appendix: Survey Results by Income

		% of all	Under	\$25-	\$49-	Over
		residents	\$25,000	\$49,000	\$75,000	\$75,000
Summary: Community No	eeds					
	Food*	16.5%	49.2%	22.0%	14.3%	1.3%
	Mental health issues*	11.4%	19.0%	14.9%	11.1%	7.1%
	Healthcare*	10.7%	24.2%	13.9%	6.3%	5.8%
	Utilities*	9.9%	15.9%	7.2%	4.8%	9.8%
	Medicare or other health insurance*	9.7%	20.6%	15.8%	4.8%	2.6%
	Prescription assistance*	7.7%	19.1%	9.0%	6.3%	2.6%
	Employment*	6.1%	9.5%	10.9%	4.8%	2.6%
Sought assistance in	Home repair*	5.8%	9.7%	9.9%	1.6%	3.2%
past year for	Rent/mortgage assistance*	5.7%	22.2%	6.0%	3.2%	0.0%
•	Transportation*	5.6%	22.2%	5.9%	0.0%	0.6%
	Dental care*	5.2%	19.0%	4.0%	3.2%	1.3%
	Clothing*	5.0%	17.7%	4.0%	4.8%	0.6%
	Shelter*	3.0%	9.7%	4.0%	1.6%	0.0%
	Legal aid services*	2.6%	4.8%	5.0%	3.2%	0.0%
	Affordable childcare*	1.4%	6.3%	1.0%	0.0%	0.6%
	Gambling addiction	0.3%	0.0%	0.0%	0.0%	0.6%
	None of the above	66.1%	33.9%	51.5%	\$75,000 \$3 14.3% 11.1% 6.3% 4.8% 4.8% 4.8% 1.6% 3.2% 0.0% 3.2% 4.8% 1.6% 3.2% 0.0% 76.2% 4.8% 49.2% 33.3% 11.1% 1.6% 5.69 47.6% 23.8% 6.4% 11.1% 11.1% 11.1% 9.06 39.1% 21.9% 9.4% 10.9% 18.8% 4.96 64.1%	83.9%
Summary: Personal Healt	h Status					
	Excellent	15.3%	9.7%	12.9%	4.8%	23.9%
Darconal description of	Good	56.0%	45.2%	49.5%	49.2%	65.8%
Personal description of health	Fair	23.9%	38.7%	33.7%	33.3%	8.4%
licaitii	Poor	4.1%	3.2%	4.0%	11.1%	1.9%
	Very Poor	0.7%	3.2%	0.0%	14.3% 11.1% 6.3% 4.8% 4.8% 6.3% 4.8% 1.6% 3.2% 0.0% 3.2% 4.8% 1.6% 3.2% 0.0% 76.2% 4.8% 49.2% 33.3% 11.1% 1.6% 5.69 47.6% 23.8% 6.4% 11.1% 11.1% 9.06 39.1% 21.9% 9.4% 10.9% 18.8% 4.96 64.1% 14.1% 6.3% 3.1%	0.0%
	Average number of days not well	4.65	5.99	5.13	5.69	3.51
Number of days in nest	None	51.9%	51.6%	46.5%	47.6%	54.8%
Number of days in past month that PHYSICAL	1-5	26.6%	18.8%	32.7%	23.8%	27.7%
health was not good*	6-10	7.7%	9.4%	5.0%	6.4%	8.4%
neutti was not good	11-20	6.1%	7.9%	8.0%	11.1%	3.2%
	More than 20	7.7%	12.5%	7.9%	11.1%	5.8%
	Average number of days not well	6.93	10.86	7.45	9.06	4.39
Number of days in past	None	44.6%	37.5%	39.0%		51.9%
month that MENTAL	1-5	21.8%	12.5%	26.0%	21.9%	23.1%
health was not good*	6-10	11.2%	14.1%	12.0%		10.9%
incareir was not good	11-20	9.2%	10.9%	7.0%	10.9%	5.0%
	More than 20	13.2%	25.0%	16.0%	18.8%	5.1%
Number of Dave Boos	Average # days kept from activities	4.23	5.90	6.59	4.96	1.89
Number of Days Poor MENTAL or PHYSICAL	None	62.1%	56.5%	52.0%	64.1%	68.8%
Health Kept from Usual	1-5	17.1%	14.5%	17.0%	14.1%	20.1%
Activities*	6-10	6.5%	6.5%	8.0%	6.3%	5.2%
, tetivities	11-20	6.7%	11.3%	9.0%	3.1%	4.5%
	More than 20	7.6%	11.3%	14.0%	12.5%	1.2%

		% of all	Under	\$25-	\$49-	Over
		residents	\$25,000	\$49,000		\$75,000
Summary: Insurance Cov	erage		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		, ,	
Currently not insured*		7.0%	15.9%	10.9%	1.6%	1.9%
•	Private insurance- employer paid	41.1%	3.8%	25.6%		64.7%
Type of Insurance	Private insurance- self paid	11.4%	3.8%	10.0%		12.7%
coverage	Medicare	32.0%	46.2%	40.0%	1	19.3%
(of those with	Medicaid	13.1%	46.2%	16.7%	6.5%	2.7%
insurance)*	VA Coverage	2.4%	0.0%	7.8%	1.6%	0.7%
	Hospitalization*	88.0%	73.6%	82.2%	93.4%	94.1%
	Emergency room care	89.9%	84.9%	85.6%	1.6%	92.8%
	Prescription assistance	82.8%	75.5%	83.1%	85.2%	84.2%
	Preventative care*	82.5%	69.2%	80.9%	82.3%	88.8%
	Vision services	69.4%	71.2%	67.8%	59.7%	74.3%
Services covered by	Dental services*	69.2%	62.3%	64.4%	59.7%	78.9%
insurance	Long term care*	31.4%	24.5%	25.8%	% 1.6% % 37.1% % 37.1% % 37.1% % 6.5% % 93.4% % 91.8% % 85.2% % 59.7% % 59.7% % 59.7% % 32.3% % 45.9% % 40.3% % 46.8% % 82.5% % 82.5% % 46.8% % 82.5% % 82.5% % 82.5% % 1.6% % 1.6% % 1.6% % 1.6% % 1.6% % 1.6% % 1.6% % 1.6% % 1.6% % 1.6% % 1.6% % 1.6% % 1.6%<	39.5%
(of those with insurance)	Family planning (birth control)	36.0%	32.1%	32.2%	32.3%	42.1%
	Mental health	63.9%	65.4%	60.0%	54.1%	71.1%
	Alcohol and drug treatment*	43.8%	28.3%	33.7%	45.9%	54.9%
	Prenatal/maternity*	40.3%	24.5%	31.1%	\$75,000 1.6% 37.1% 17.7% 37.1% 6.5% 1.6% 93.4% 91.8% 85.2% 82.3% 59.7% 59.7% 25.8% 32.3% 54.1% 45.9% 40.3% 46.8% 82.5% 82.5% 4.8% 1.6% 11.1% 0.0% 79.0% 3.2% 14.5% 0.0% 0.0% 1.6% 1.1% 1.6% 1.6% 3.1% 0.0% 7.8% 39.7% 30.2% 30.2% 41.3%	51.3%
	Chiropractic	42.1%	50.0%	33.3%	\$75,000 1.6% 37.1% 17.7% 37.1% 6.5% 1.6% 93.4% 91.8% 85.2% 82.3% 59.7% 59.7% 25.8% 32.3% 54.1% 45.9% 40.3% 46.8% 82.5% 82.5% 4.8% 1.6% 11.1% 0.0% 79.0% 3.2% 14.5% 0.0% 0.0% 1.6% 3.1% 0.0% 7.8% 39.7% 30.2% 30.2% 12.7% 41.3%	42.8%
Summary: Access to Heal	th Care					
Have primary care provid	ler	83.6%	79.4%	80.2%	82.5%	89.0%
	Within past year	79.9%	75.0%	71.3%	82.5%	85.8%
Lawath of times since last	Within past 2 years	6.8%	9.4%	7.9%	4.8%	6.5%
Length of time since last routine check-up*	Within past 5 years	4.3%	4.7%	5.9%	\$75,000 1.6% 37.1% 17.7% 37.1% 6.5% 1.6% 93.4% 91.8% 85.2% 82.3% 59.7% 59.7% 25.8% 32.3% 54.1% 45.9% 40.3% 46.8% 82.5% 82.5% 4.8% 1.6% 11.1% 0.0% 79.0% 3.2% 14.5% 0.0% 0.0% 1.6% 1.1% 1.6% 3.1% 0.0% 7.8% 39.7% 30.2% 30.2% 41.3%	3.2%
routine check-up	5 or more years ago	6.5%	3.1%	9.9%	11.1%	4.5%
	Never	2.4%	7.8%	5.0%	0.0%	0.0%
	Primary care or family doctor	73.4%	70.3%	58.8%	1.6% 37.1% 17.7% 37.1% 6.5% 1.6% 93.4% 91.8% 85.2% 82.3% 59.7% 25.8% 32.3% 54.1% 45.9% 40.3% 46.8% 82.5% 82.5% 4.8% 1.6% 11.1% 0.0% 79.0% 3.2% 14.5% 0.0% 0.0% 1.6% 1.1% 1.6% 1.1% 1.6% 3.1% 0.0% 7.8% 39.7% 30.2% 14.3%	80.1%
	The Emergency Room	5.2%	7.8%	7.8%		3.8%
	Urgent Care	8.5%	4.7%	7.8%	14.5%	8.3%
Where receive health	Health Department clinic	1.9%	1.6%	5.9%	\$75,000 1.6% 37.1% 17.7% 37.1% 6.5% 1.6% 93.4% 91.8% 85.2% 82.3% 59.7% 59.7% 25.8% 32.3% 54.1% 45.9% 40.3% 46.8% 82.5% 82.5% 4.8% 1.6% 11.1% 0.0% 79.0% 3.2% 14.5% 0.0% 0.0% 1.6% 1.1% 1.6% 1.1% 1.6% 3.1% 0.0% 7.8% 39.7% 30.2% 12.7% 41.3%	0.0%
care most often*	VA hospital	2.2%	3.1%	6.9%	0.0%	0.0%
	Community health center	2.6%	4.7%	2.9%	1.6%	2.6%
	Telemedicine	1.8%	1.6%	0.0%	1.1%	3.8%
	Somewhere else	4.3%	6.3%	9.8%	1.6%	1.3%
	Doctor	66.8%	63.5%	67.0%	70.3%	68.4%
	Internet	17.3%	22.2%	17.0%	15.6%	15.5%
Where get most	Nurse	5.5%	3.2%	7.0%	\$75,000 1.6% 37.1% 17.7% 37.1% 6.5% 1.6% 93.4% 91.8% 85.2% 82.3% 59.7% 59.7% 25.8% 32.3% 54.1% 45.9% 40.3% 46.8% 82.5% 82.5% 4.8% 1.6% 11.1% 0.0% 79.0% 3.2% 14.5% 0.0% 7.8% 39.7% 30.2% 30.2% 12.7% 41.3%	7.1%
medical information	Family members	4.6%	6.3%	4.0%	3.1%	4.5%
	Friends	0.8%	0.0%	2.0%	-	0.6%
	Other source	4.2%	3.2%	3.0%		3.2%
Likelihood of using	Very likely	34.8%	31.7%	30.0%		38.7%
telehealth or	Somewhat likely	39.9%	38.1%	42.0%		41.9%
telemedicine	Not at all likely	25.3%	30.2%	28.0%		19.4%
Likelihood of using at-	Very likely	18.7%	15.9%	18.0%		23.2%
home primary care	Somewhat likely	42.3%	44.4%	42.0%		43.2%
services	Not at all likely	39.0%	39.7%	40.0%	46.0%	33.5%

		% of all	Under	\$25-	\$49-	Over
		residents	\$25,000	\$49,000		\$75,000
Like to see services or pro	ograms offered	32.9%	27.0%	39.6%	34.9%	30.3%
Services needed unable t	o get in past year*	11.1%	17.5%	17.8%	17.5%	2.6%
	No health insurance	14.1%	10.0%	16.7%	18.2%	0.0%
	Couldn't afford co-pay or deductible*	32.1%	0.0%	33.3%	72.7%	0.0%
Why unable to get	Didn't have a way to get to the doctor	5.7%	0.0%	11.1%	0.0%	0.0%
needed service	Doctor or clinic refused insurance	16.1%	30.0%	16.7%	9.1%	0.0%
	Didn't know how to find a doctor	3.4%	0.0%	5.6%	0.0%	0.0%
	Took too long to get an appointment	22.2%	18.2%	16.7%	36.4%	33.3%
	Fear	12.3%	9.1%	16.7%	9.1%	0.0%
Prescription unable to ge	t	10.1%	11.1%	11.0%	14.3%	7.7%
Summary: Mental Health						
During past 12	Felt sad or hopeless 2+ weeks*	20.6%	33.3%	23.8%	27.0%	11.6%
months	Ever seriously consider suicide	7.5%	11.1%	10.0%	7.9%	4.5%
De veu les europe	Has died by suicide	44.5%	49.2%	38.6%	41.3%	47.1%
Do you know someone who	Has talked about thoughts of suicide	34.2%	42.9%	37.6%	33.3%	28.4%
WIIO	Has attempted suicide, but not die*	28.1%	38.1%	33.7%	30.2%	19.4%
	Anxiety disorder*	18.7%	20.6%	27.0%	19.0%	11.6%
	ADD/ADHD	10.7%	15.9%	9.9%	15.9%	7.7%
	Posttraumatic stress disorder*	13.2%	15.9%	17.0%	23.8%	5.8%
	Seasonal affective disorder*	9.4%	14.5%	13.9%	6.3%	5.8%
Been Diegnesed by	Alcohol/Substance Abuse *	7.0%	14.3%	9.9%	12.7%	0.6%
Been Diagnosed by Medical Professional	Postpartum depression	4.6%	9.7%	5.0%	4.8%	2.6%
Medical Professional	Bipolar*	9.3%	19.0%	14.0%	9.7%	1.9%
	Developmental disability*	3.8%	11.3%	6.0%	1.6%	0.0%
	Eating disorder*	4.4%	3.2%	11.9%	1.6%	0.6%
	Schizophrenia	1.7%	3.2%	2.0%	4.8%	0.0%
	Problem gambling*	1.7%	0.0%	1.0%	6.3%	0.6%
	Depression*	30.5%	41.9%	35.6%	38.7%	18.7%
	Anxiety disorder *	23.9%	31.7%	29.0%	8.1%	23.2%
	ADD/ADHD	29.5%	33.3%	36.6%	21.0%	27.0%
	Posttraumatic stress disorder*	13.5%	20.6%	19.8%	9.5%	9.0%
	Seasonal affective disorder*	13.7%	25.4%	11.9%	7.9%	12.9%
	Alcohol/Substance Abuse *	31.1%	42.9%	37.0%	19.0%	28.4%
Immediate	Postpartum depression	11.4%	17.5%	12.9%	4.8%	11.6%
Family Member Been Diagnosed by Medical	Bipolar*	20.8%	31.7%	23.0%	17.5%	15.5%
Professional	Developmental disability*	15.5%	21.0%	21.8%	8.1%	11.6%
i i di Cooldiai	Eating disorder*	9.2%	14.3%	13.0%	3.2%	7.1%
	Schizophrenia*	9.6%	19.0%	12.9%	7.9%	4.5%
	Problem gambling	7.5%	9.75	11.9%	3.2%	5.8%
	Depression*	39.1%	48.4%	44.6%	19.0%	39.4%
Summary: Access to Oral						
	Within past year	65.2%	.38.1%	56.4%	55.6%	85.8%
Last Dental Checkup*	Within past 2 years	14.1%	25.4%	16.8%	17.5%	7.1%
and Delital Glicology	Within past 5 years	8.9%	14.3%	11.9%	9.5%	3.2%
	5 or more years ago	10.8%	19.0%	12.9%	\$75,000 34.9% 17.5% 18.2% 72.7% 0.0% 9.1% 0.0% 36.4% 9.1% 14.3% 27.0% 7.9% 41.3% 33.3% 30.2% 19.0% 15.9% 23.8% 6.3% 12.7% 4.8% 9.7% 1.6% 1.6% 4.8% 6.3% 38.7% 8.1% 21.0% 9.5% 7.9% 19.0% 4.8% 17.5% 8.1% 3.2% 7.9% 3.2% 19.0%	3.9%

Never 1.0% 3.2% 2.0% 0.0%			% of all	Under	\$25-	\$49-	Over
Never							
Summary: Sleep and Restance O-3 hours 1.8% 4.8% 2.0% 3.1% 0.0%		Never					
Number of days in past							
Hours of sleep in 24 A7 hours	Summary: Sleep and Rest						
None Section Section		0-3 hours	1.8%	4.8%	2.0%	3.1%	0.0%
8-10 hours 33.2%	Hours of sleep in 24-	4-7 hours	64.2%	52.4%	68.3%	59.4%	68.2%
None	hour period	8-10 hours	33.2%	41.3%	27.7%	35.9%	31.8%
Number of days in past month did not get enough sleep or rest*		More than 10 hours	1.0%	1.6%	2.0%	0.0%	0.0%
Month did not get enough sleep or rest* 6-10 12.2% 8.1% 13.0% 14.3% 12.9%		None	18.8%	29.0%	17.0%	17.5%	16.1%
Commonth did not get enough sleep or rest* 6-10 11-20 17.7% 19.4% 24.0% 20.6% 12.9% 11-20 17.7% 19.4% 24.0% 20.6% 12.9% 17.4% 19.0% 15.9% 17.4% 19.0% 15.9% 17.4% 19.0% 15.9% 17.4% 19.0% 15.8% 11.3% 13.0% 14.3% 12.9% 17.4% 19.0% 15.8% 11.3% 15.1% 17.4% 19.0% 15.8% 11.3% 15.1% 17.4% 19.0% 15.8% 11.3% 15.1% 17.7% 2.6% 17.4% 19.0% 15.8% 11.3% 15.1% 17.7% 2.6% 17.4% 19.0% 15.8% 11.3% 15.1% 11.9% 17.7% 2.6% 17.4% 19.0% 15.8% 11.3% 15.1% 17.7% 2.6% 17.4% 19.0% 15.8% 11.3% 15.1% 17.7% 2.6% 17.4% 19.0% 15.8% 11.3% 15.1% 17.7% 2.6% 17.4% 19.0% 15.8% 11.3% 15.1% 17.7% 2.6% 17.4% 19.0% 15.8% 11.1% 11.9% 17.7% 2.6% 17.4% 19.0% 15.8% 11.1% 11.9% 17.7% 2.6% 17.4% 19.0% 17.7% 2.6% 17.4% 19.0% 17.7% 2.6% 17.4% 19.0% 17.7% 2.6% 17.4% 19.0% 17.7% 2.6% 17.4% 17.7% 2.6% 17.4% 17.2%	Number of days in past	1-5	33.0%	22.6%	28.0%	31.7%	40.6%
11-20	month did not get	6-10	12.2%	8.1%	13.0%	14.3%	12.9%
More than 20 18.4% 21.0% 18.0% 15.9% 17.4%	enough sleep or rest*	11-20	17.7%	19.4%	24.0%	20.6%	12.9%
Smoked 100 or more cigarettes in life*		More than 20	18.4%		18.0%	15.9%	17.4%
Everyday	Summary: Smoking and T	obacco Use					
Some days Some days Rota tall Rota	<u> </u>		46.2%	52.4%	44.6%	62.9%	36.8%
Some days Not at all 80.3% 69.8% 72.3% 71.0% 92.3% 71.0% 92.3% 50.0% 50.			11.1%	19.0%	15.8%	11.3%	5.1%
Electronic Cigarette/Vape Usage* Some days 3.6% 4.8% 8.9% 3.2% 0.0%	Tobacco usage*	Some days	8.6%	11.1%	11.9%	17.7%	2.6%
Electronic Cigarette/Vape Usage* Some days 3.6% 4.8% 8.9% 3.2% 0.0%	-	Not at all	80.3%	69.8%	72.3%	71.0%	92.3%
Some days 3.6% 4.8% 8.9% 3.2% 0.0%		Everyday	6.2%	6.5%	7.9%	11.1%	3.2%
Not at all 90.2% 88.7% 83.2% 85.7% 96.8%			3.6%	4.8%	8.9%	3.2%	0.0%
Very likely 35.9% 36.4% 35.7% 33.3% 50.0%	Cigarette/Vape Usage*	•	90.2%	88.7%	83.2%	85.7%	96.8%
Very likely 35.9% 36.4% 35.7% 33.3% 50.0%	Trying to quit or willing to	quit smoking	58.0%	57.9%	48.1%	77.8%	50.0%
Somewhat likely 1.8% 0.0% 0.0% 6.7% 0.0%			35.9%	36.4%	35.7%	33.3%	50.0%
Not at all likely			62.3%	63.6%	64.3%	60.0%	50.0%
Counseling* 1.6% 0.0% 0.0% 33.3% 2.2%	next 6 months	·	1.8%	0.0%	0.0%	6.7%	0.0%
Tobacco Quit line 1.8% 0.0% 7.1% 0.0% 0		Counseling*	1.6%	0.0%	0.0%	33.3%	2.2%
Patches*	Have tried method to		1.8%	0.0%	7.1%	0.0%	0.0%
Gum 26.7% 9.1% 21.4% 50.0% 20.0%	quit smoking	Medication	27.2%	18.2%	23.1%	28.6%	50.0%
How harmful are electronic cigarettes, or vaping is to: You* Not at all harmful 11.0% 14.5% 9.2% 3.2% 11.8% 19.0% 13.0% 14.5% 19.0% 13.0% 14.5% 19.0% 13.0% 14.5% 15.1% 15.8% 17.5% 15.8% 19.0% 13.0% 15.2%		Patches*	41.7%	45.5%	15.4%	64.3%	33.3%
Somewhat harmful 23.4% 29.0% 31.6% 28.6% 15.1%		Gum	26.7%	9.1%	21.4%	50.0%	20.0%
vaping is to: You* Not at all harmful 11.0% 14.5% 9.2% 3.2% 11.8% How harmful are electronic cigarettes, or vaping is to: Youth* Very harmful 79.0% 74.6% 77.2% 81.0% 81.8% How harmful are electronic cigarettes, or vaping is to: adults* Very harmful 5.2% 7.9% 6.9% 0.0% 5.2% Somewhat harmful 27.7% 24.2% 35.6% 28.6% 22.4% Vaping is to: adults* Not at all harmful 5.1% 12.9% 5.9% 1.6% 3.8% Summary: Alcohol and Substance Abuse Every day 7.9% 9.5% 5.0% 11.3% 8.4% Alcohol consumption* Every day 7.9% 9.5% 5.0% 11.3% 8.4% Alcohol consumption* Every day 7.9% 9.5% 5.0% 11.3% 8.4% Alcohol consumption* Average number of drinks per week 5.50 7.01 3.89 8.60 4.76 Average number of drinks per week 5.50 7.01 3.89 8.60 4.76	How harmful are	Very harmful	65.6%	56.5%	59.2%	68.3%	73.0%
vaping is to: You* Not at all harmful 11.0% 14.5% 9.2% 3.2% 11.8% How harmful are electronic cigarettes, or vaping is to: Youth* Very harmful 79.0% 74.6% 77.2% 81.0% 81.8% How harmful are electronic cigarettes, or vaping is to: adults* Very harmful 5.2% 7.9% 6.9% 0.0% 5.2% Somewhat harmful 27.7% 24.2% 35.6% 28.6% 22.4% Vaping is to: adults* Not at all harmful 5.1% 12.9% 5.9% 1.6% 3.8% Summary: Alcohol and Substance Abuse Every day 7.9% 9.5% 5.0% 11.3% 8.4% Alcohol consumption* Every day 7.9% 9.5% 5.0% 11.3% 8.4% Alcohol consumption* Every day 7.9% 9.5% 5.0% 11.3% 8.4% Alcohol consumption* Average number of drinks per week 5.50 7.01 3.89 8.60 4.76 Average number of drinks per week 5.50 7.01 3.89 8.60 4.76	electronic cigarettes, or	·	23.4%	29.0%	31.6%	28.6%	15.1%
Somewhat harmful 15.8% 17.5% 15.8% 19.0% 13.0%	vaping is to: You*		1				
Somewhat harmful 15.8% 17.5% 15.8% 19.0% 13.0%	How harmful are	Very harmful	79.0%	74.6%	77.2%	81.0%	81.8%
How harmful are electronic cigarettes, or Somewhat harmful 27.7% 24.2% 35.6% 28.6% 22.4% 24.2% 35.6% 28.6% 22.4% 24.2% 24.	electronic cigarettes, or	Somewhat harmful	15.8%	17.5%	15.8%	19.0%	13.0%
Somewhat harmful 27.7% 24.2% 35.6% 28.6% 22.4%	vaping is to: Youth*	Not at all harmful	5.2%	7.9%	6.9%	0.0%	5.2%
vaping is to: adults* Not at all harmful 5.1% 12.9% 5.9% 1.6% 3.8% Summary: Alcohol and Substance Abuse Alcohol consumption* Every day 7.9% 9.5% 5.0% 11.3% 8.4% Some days 57.1% 34.9% 58.4% 58.1% 64.5% Not at all 35.0% 55.6% 36.6% 30.6% 27.1% Average number of drinks per week 5.50 7.01 3.89 8.60 4.76 # of days had 5+ drinks per week None 67.0% 79.3% 77.4% 54.8% 64.4% 1 16.5% 10.3% 16.1% 19.4% 19.5%	How harmful are	Very harmful	67.2%	62.9%	58.4%	69.8%	73.7%
Summary: Alcohol and Substance Abuse Every day 7.9% 9.5% 5.0% 11.3% 8.4%	electronic cigarettes, or	Somewhat harmful	27.7%	24.2%	35.6%	28.6%	22.4%
Alcohol consumption* Every day 7.9% 9.5% 5.0% 11.3% 8.4% Some days 57.1% 34.9% 58.4% 58.1% 64.5% Not at all 35.0% 55.6% 36.6% 30.6% 27.1% Average number of drinks per week 5.50 7.01 3.89 8.60 4.76 # of days had 5+ drinks per week None 67.0% 79.3% 77.4% 54.8% 64.4% 1 16.5% 10.3% 16.1% 19.4% 19.5%	vaping is to: adults*	Not at all harmful	5.1%	12.9%	5.9%	1.6%	3.8%
Alcohol consumption* Some days 57.1% 34.9% 58.4% 58.1% 64.5% Not at all 35.0% 55.6% 36.6% 30.6% 27.1% Average number of drinks per week 5.50 7.01 3.89 8.60 4.76 # of days had 5+ drinks per week 67.0% 79.3% 77.4% 54.8% 64.4% 1 16.5% 10.3% 16.1% 19.4% 19.5%	Summary: Alcohol and Su	ıbstance Abuse					
Not at all		Every day	7.9%	9.5%	5.0%	11.3%	8.4%
Not at all 35.0% 55.6% 36.6% 30.6% 27.1% Average number of drinks per week 5.50 7.01 3.89 8.60 4.76 # of days had 5+ drinks per week 67.0% 79.3% 77.4% 54.8% 64.4% apst month (men) 16.5% 10.3% 16.1% 19.4% 19.5% The property of the property of the period	Alcohol consumeration*	Some days	57.1%	34.9%	58.4%	58.1%	64.5%
# of days had 5+ drinks past month (men) None 67.0% 79.3% 77.4% 54.8% 64.4% 1 16.5% 10.3% 16.1% 19.4% 19.5%	Alcohol consumption*	Not at all	35.0%	55.6%	36.6%	30.6%	27.1%
# of days had 5+ drinks past month (men) 1 16.5% 10.3% 16.1% 19.4% 19.5%		Average number of drinks per week	5.50	7.01	3.89	8.60	4.76
past month (men) 1 16.5% 10.3% 16.1% 19.4% 19.5%	Hafdmaterder III	None	67.0%	79.3%	77.4%	54.8%	64.4%
2 or more 16.5% 10.3% 6.5% 25.8% 16.1%		1	16.5%	10.3%	16.1%	19.4%	19.5%
	pust month (men)	2 or more	16.5%	10.3%	6.5%	25.8%	16.1%

		% of all	Under	\$25-	\$49-	Over
		residents	\$25,000	\$49,000	\$75,000	\$75,000
	None	73.1%	73.5%	69.2%	80.6%	74.2%
# of days had 4+ drinks	1	14.3%	20.6%	12.3%	12.9%	12.1%
past month (women)	2 or more	12.5%	5.9%	18.5%	6.5%	13.6%
Driven after drinking alco	I .	10.6%	3.2%	10.9%	11.1%	14.2%
	Very harmful	26.3%	42.9%	26.0%	31.1%	18.2%
How harmful alcohol is	Somewhat harmful	48.2%	41.3%	47.0%	37.7%	57.8%
to: You*	Not at all harmful	25.5%	15.9%	27.0%	31.1%	24.0%
	Very harmful	71.8%	76.2%	72.0%	69.8%	71.4%
How harmful alcohol is	Somewhat harmful	22.5%	17.5%	21.1%	22.2%	26.0%
to: Youth	Not at all harmful	5.7%	6.3%	7.0%	7.9%	2.6%
How harmful alcohol is	Very harmful	27.3%	41.9%	21.2%	40.3%	20.6%
How harmful alcohol is to: Other adults*	Somewhat harmful	61.3%	45.2%	66.7%	43.5%	71.0%
	Not at all harmful	11.4%	12.9%	12.1%	16.1%	8.4%
Anyone in household see		4.5%	8.2%	4.0%	1.6%	3.9%
, one in nouschold see	Self-help therapy, (AA)	21.8%	50.0%	17.6%	16.7%	18.2%
	Counseling	11.4%	0.0%	17.6%	20.05	9.4%
Utilizing resources for	Medications	9.4%	20.0%	11.1%	16.7%	6.3%
alcohol addiction	Detox	2.8%	0.0%	0.0%	0.0%	6.1%
	Other	2.8%	0.0%	0.0%	0.0%	6.1%
	Marijuana*	25.4%	37.9%	19.4%	15.5%	25.3%
	Amphetamines or speed*	5.0%	7.9%	8.9%	1.6%	2.6%
	Cocaine or crack*	1.4%	3.2%	1.0%	4.8%	0.0%
	Heroin	0.9%	1.6%	3.0%	0.0%	0.0%
During the last 6	LSD or other hallucinogen*	1.6%	4.8%	3.0%	0.0%	0.0%
months, has anyone in	Inhalants	0.0%	0.0%	0.0%	0.0%	0.0%
household used	Ecstasy or GHB*	1.1%	1.6%	3.0%	0.0%	0.0%
	Bath salts used illegally	0.0%	0.0%	0.0%	0.0%	0.0%
	Something else	1.3%	0.0%	3.0%	0.0%	1.3%
	None of the above*	72.6%	58.1%	64.4%	79.4%	81.3%
	Any prescription medications	80.0%	76.2%	78.2%	84.1%	80.0%
In past year taken	Not belonging to them					0.6%
prescriptions	Different than prescribed	2.6% 3.5%	1.6% 4.2%	8.9% 7.6%	0.0%	2.4%
Anyone in household see	king help for substance use *	3.9%	6.3%	7.0%	4.8%	0.6%
Anyone in nousenoid see	Self-help	8.4%	11.1%	19.0%	0.0%	3.4%
Utilizing resources for	Counseling*	12.3%	20.0%	23.8%	25.0%	0.0%
substance use disorder	Detox	4.8%	0.0%	14.3%	0.0%	0.0%
	Medication assisted treatment	9.6%	11.1%	19.0%	12.5%	3.4%
	Other	1.1%	10.0%	0.0%	0.0%	0.0%
Summary: Pregnancy Hea	l .	1.1/0	10.070	0.070	0.070	0.070
Been pregnant in the last		10.6%	12.1%	10.4%	15.6%	7.5%
Decii pregnant in the last	Received prenatal care in first 3 months	75.8%	75.0%	85.7%	40.0%	100.0%
	Received Dental exam*	75.8%	0.0%	28.6%	0.0%	80.0%
During last pregnancy	Received WIC services *	50.2%	75.0%	85.7%	40.0%	0.0%
	Took a multi-vitamin with folic acid	78.3%	100.0%	71.4%	60.0%	80.0%
	Smoked cigarettes or tobacco	8.7%	0.0%	14.3%	20.0%	0.0%
	Used marijuana	4.3%	0.0%	14.3%	0.0%	0.0%

		% of all	Under	\$25-	\$49-	Over
		residents	\$25,000	\$49,000	\$75,000	\$75,000
	Experienced depression *	48.5%	100.0%	71.4%	20.0%	0.0%
	Experienced domestic violence	15.6%	25.0%	14.3%	20.0%	0.0%
Planned pregnancy		45.4%	25.0%	57.1%	20.0%	66.7%
Plan for after-birth care		64.5%	50.0%	71.4%	40.0%	100.0%
Self/family had child born	n prematurely	13.7%	12.7%	15.8%	12.7%	12.9%
Summary: Child Health						
Children in home under 1	.8	26.2%	23.8%	27.7%	14.3%	31.0%
Children up to date on re	commended vaccines	96.0%	93.3%	88.9%	100.0%	100.0%
Children get annual well	checkups	91.0%	100.0%	96.3%	77.8%	87.5%
Summary: Healthy Living	- Weight and Exercise					
Exercise in past month*		75.6%	71.4%	68.3%	61.9%	87.7%
	None	6.1%	22.7%	7.2%	0.0%	2.2%
How often participated	1-2 times	33.9%	34.1%	27.5%	43.6%	35.3%
in exercise in an	3-4 times	33.5%	25.0%	40.6%	30.8%	33.8%
average week*	5-7 times	26.4%	18.2%	24.6%	25.6%	28.7%
	Overweight	63.2%	56.5%	56.4%	71.4%	66.7%
Self-described weight*	About right	34.7%	38.7%	40.6%	23.8%	33.3%
	Underweight	2.1%	4.8%	3.0%	4.8%	0.0%
Been told obese or overw	veight by a doctor	39.3%	41.9%	35.6%	35.5%	41.9%
Summary: Healthy Living	- Food and nutrition					
	Cost of food*	31.5%	36.5%	45.5%	27.0%	22.6%
	Quality of food	11.6%	9.5%	14.9%	17.5%	8.4%
What makes it difficult	Distance from the store*	8.2%	17.5%	6.9%	6.3%	6.5%
to get food needed	Time for shopping	17.3%	11.1%	22.8%	17.5%	16.8%
	Safety*	2.2%	1.6%	4.0%	4.8%	0.0%
	Something else	4.9%	3.2%	5.9%	8.1%	3.9%
How difficult to get	Very difficult	2.7%	9.7%	0.0%	3.2%	1.3%
fresh fruits &	Somewhat difficult	8.4%	8.1%	20.8%	4.8%	1.9%
vegetables*	Not too/not at all difficult	88.9%	82.3%	79.2%	92.1%	96.8%
	0-1 times/week	14.0%	31.7%	17.8%	17.2%	3.2%
How often eat fresh	2-4 times/week	38.5%	31.7%	34.7%	50.0%	39.4%
fruits and vegetables*	Once a day	23.3%	14.3%	25.7%	14.1%	28.4%
naits and vegetables	2-4 times a day	18.7%	12.7%	17.8%	15.6%	22.6%
	5 or more times a day	5.5%	9.5%	4.0%	3.1%	6.5%
	None	19.1%	46.0%	24.5%	9.5%	9.7%
# of restaurant or	1-2 meals	59.2%	36.5%	52.0%	60.3%	70.3%
takeout meals a week*	3-4 meals	17.0%	11.1%	18.6%	23.8%	16.1%
	5 or more meals	4.7%	6.3%	4.9%	6.3%	3.9%
	0	25.7%	23.8%	18.6%	18.8%	34.8%
# times drink pop or other unhealthy drinks*	1-3 times per week	24.9%	14.3%	29.4%	28.1%	24.5%
	4-6 times per week	12.6%	15.9%	14.7%	9.4%	11.6%
	1 time per day	12.1%	4.8%	14.7%	9.4%	11.6%
	2-3 times per day	17.7%	22.2%	15.7%	23.4%	14.8%
	4 or more times per day	7.0%	19.0%	6.9%	7.8%	1.9%
Summary: Prevention, Te	sting and Screening					
	Within the past year	77.9%	75.8%	67.2%	78.9%	85.5%

		% of all	Under	\$25-	\$49-	Over
		residents	\$25,000	\$49,000	\$75,000	\$75,000
	Within the past 2 years	10.7%	18.2%	10.3%	7.9%	9.2%
How long since: had	Within the past 5 years	3.9%	3.0%	6.9%	2.6%	2.6%
blood cholesterol	5 or more years ago	0.8%	0.0%	1.7%	0.0%	1.3%
checked	Never	6.7%	3.0%	13.8%	10.5%	1.3%
	Within the past year	89.9%	82.5%	87.1%	87.5%	96.3%
How long since: had	Within the past 2 years	6.1%	15.0%	6.5%	5.0%	2.4%
blood pressure	Within the past 5 years	1.4%	2.5%	1.6%	2.5%	0.0%
checked*	5 or more years ago	1.3%	0.0%	3.2%	0.0%	1.2%
	Never	1.3%	0.0%	1.6%	5.0%	0.0%
Have ever: had a colonos		47.1%	38.1%	40.6%	54.0%	52.3%
How long since: had a	Within the past year	20.9%	34.8%	9.8%	11.8%	26.3%
colonoscopy	Within the past 2 years	19.8%	13.0%	24.4%	17.6%	21.3%
Cololioscopy	Within the past 5 years	38.4%	34.8%	51.2%	44.1%	31.3%
	5 or more years ago	20.9%	17.4%	14.6%	26.5%	21.3%
Have ever: had a skin can		37.0%	25.4%	35.6%	30.6%	45.8%
Tiave ever. Had a skill call	Within the past year	49.4%	31.3%	48.6%	42.1%	56.3%
How long since: had a	Within the past years Within the past 2 years	18.1%	37.5%	17.1%	26.3%	11.3%
skin cancer exam	Within the past 5 years	18.3%	25.0%	17.1%	21.1%	16.9%
Skiii Calicel Caalii	5 or more years ago	14.3%	6.3%	17.1%	10.5%	15.5%
Have ever: had a mamme	ogram (Asked only of females) *	70.2%	56.3%	61.2%	87.1%	77.6%
Tiave ever. Had a maining	Within the past year	67.0%	78.9%	57.1%	66.7%	70.6%
How long since: had a	Within the past years Within the past 2 years	14.8%	10.5%	14.3%	18.5%	15.7%
mammogram	Within the past 2 years Within the past 5 years	13.5%	10.5%	23.8%	7.4%	7.8%
mammogram	5 or more years ago	4.7%	0.0%	4.8%	7.4%	5.9%
Have ever: performed sel	f-breast exam (Asked only of females)	87.1%	84.8%	82.1%	90.3%	91.0%
How long since:	Within past month	47.7%	46.4%	50.9%	39.3%	49.2%
performed self- breast	Within past 6 months	29.8%	21.4%	27.3%	28.6%	37.7%
exam	Within past of months Within past year	13.2%	17.9%	12.7%	21.4%	6.6%
	More than a year ago	9.3%	14.3%	9.1%	10.7%	6.6%
Have ever; had a BAB sm	ear (Asked only of females) *	94.0%	96.9%	88.1%	10.7%	97.0%
	Within the past year		41.9%	33.9%	34.4%	45.3%
How long since: last	Within the past years Within the past 2 years	39.0% 19.4%	16.1%	22.0%	9.4%	23.4%
PAP smear*	Within the past 2 years Within the past 5 years	17.9%	19.4%	20.3%	15.6%	17.2%
i Ai Silicui	5 or more years ago	23.7%	22.6%	23.7%	40.6%	14.1%
Have ever: test for prosts	nte cancer (Asked only of males) *	40.9%	43.3%	48.4%	34.4%	40.2%
nave even test for prosta	Within the past year	63.1%	69.2%	73.3%	36.4%	62.9%
How long since: test for	Within the past years Within the past 2 years	20.4%	15.4%	13.3%	18.2%	25.7%
prostate cancer	Within the past 2 years Within the past 5 years	13.2%	15.4%	6.7%	36.4%	8.6%
prostate tancer	5 or more years ago	3.2%	0.0%	6.7%	9.1%	2.9%
Summary: Immunizations		3.2/0	0.070	0.7/0	J.1/0	2.3/0
- Sammary, mimunizations	Tetanus booster (last 10 years) *	46.1%	35.5%	46.5%	38.1%	52.9%
	COVID-19 vaccine	79.1%	71.4%	77.2%	77.8%	85.8%
	Measles vaccine (in lifetime) *	57.8%	47.6%	62.4%	47.6%	63.2%
Received vaccines:	Annual flu vaccine*	58.1%	44.4%	52.5%	62.9%	65.2%
				 		44.5%
	Chicken Pox vaccine (in lifetime)	45.5%	46.8%	50.5%	39.7% 46.0%	
	Pneumonia vaccine (in lifetime)	39.1%	38.1%	44.6%	46.0%	32.3%

		% of all	Under	\$25-	\$49-	Over
		residents	\$25,000	\$49,000	\$75,000	\$75,000
	Shingles vaccine (in lifetime)	29.3%	30.2%	29.7%	30.2%	27.1%
	HPV vaccine (in lifetime)	12.8%	11.1%	19.0%	14.3%	9.0%
	Hepatitis A vaccine (in lifetime) *	27.7%	11.3%	30.7%	25.8%	32.3%
	Hepatitis B vaccine (in lifetime) *	39.7%	17.5%	41.6%	39.7%	47.7%
Summary: Been Diagnose	, , ,					
	High blood pressure	38.8%	41.3%	34.7%	44.4%	36.8%
	High cholesterol	29.4%	31.7%	23.8%	37.1%	28.4%
	Arthritis*	30.9%	33.9%	33.7%	41.3%	23.2%
	Diabetes	13.6%	20.6%	11.0%	15.9%	10.3%
Destrict has been	Any form of cancer	9.9%	14.3%	5.0%	11.1%	11.0%
Resident has been	Asthma*	11.2%	19.0%	10.9%	16.1%	5.8%
diagnosed with	Heart disease or heart attack	8.3%	7.9%	10.0%	6.3%	6.5%
	Kidney disease	3.1%	1.6%	3.0%	3.2%	3.9%
	Respiratory disease*	4.4%	6.3%	9.0%	6.3%	0.0%
	Stroke*	3.0%	3.2%	2.0%	9.5%	0.6%
	Alzheimer's	0.7%	3.2%	1.0%	0.0%	0.0%
	High blood pressure	26.6%	30.2%	26.7%	27.0%	24.5%
	High cholesterol	22.2%	27.4%	22.0%	12.7%	23.9%
	Arthritis	23.1%	27.4%	29.7%	12.7%	21.9%
	Diabetes	17.8%	25.4%	18.8%	11.1%	18.1%
Member of household	Any form of cancer	18.5%	25.4%	20.8%	15.9%	14.8%
been diagnosed with	Asthma*	16.7%	25.4%	25.0%	16.1%	8.4%
been diagnosed with	Heart disease or heart attack	14.3%	22.2%	17.8%	12.7%	10.3%
	Kidney disease	7.2%	12.7%	10.9%	3.2%	5.2%
	Respiratory disease*	9.6%	23.8%	14.9%	3.2%	3.2%
	Stroke	7.9%	12.7%	11.9%	3.2%	5.8%
	Alzheimer's	7.0%	8.1%	10.9%	3.2%	5.8%
Summary: Transportation	on and Safe Driving					
Have a cell phone*		97.3%	92.1%	96.0%	98.4%	99.4%
Ever send or received te	xts/emails while driving*	39.5%	25.9%	40.2%	29.0%	47.4%
	Always	87.7%	82.3%	82.2%	92.2%	92.9%
How often use a seat	Most of the time	6.8%	14.5%	6.9%	1.6%	5.8%
belt while driving or	Sometimes	3.7%	1.6%	8.9%	1.6%	0.6%
riding in a car*	Never	1.9%	1.6%	2.0%	4.7%	0.6%
	Walk	5.9%	13.1%	7.9%	3.2%	3.2%
	Bike	0.9%	0.0%	1.0%	3.2%	0.0%
	Public Transit	1.7%	4.9%	2.0%	0.0%	0.6%
Type of transportation	Own car	86.0%	70.5%	76.2%	92.1%	95.5%
used most often*	Borrowed car	0.2%	0.0%	1.0%	0.0%	0.0%
	Family member/friend	4.4%	11.5%	8.9%	1.6%	0.0%
	Other	0.9%	0.0%	3.0%	0.0%	0.6%

		% of all	Under	\$25-	\$49-	Over
		residents	\$25,000	\$49,000	\$75,000	\$75,000
Summary: Housing		residents	723,000	743,000	773,000	773,000
Julillary. Housing	Do not have housing	2.1%	6.3%	3.9%	1.6%	0.0%
Housing situation	Have housing, but worried	7.1%	19.0%	10.8%	1.6%	2.6%
today*	Have housing	90.8%	74.6%	85.3%	96.8%	97.4%
	Bug infestation	3.0%	4.8%	3.0%	4.8%	1.3%
He could not	Mold	7.8%	8.1%	12.9%	7.9%	4.5%
	Lead paint or pipes	0.8%	1.6%	2.0%	1.6%	0.0%
Have problems in	Inadequate heat	2.6%	3.2%	5.0%	0.0%	1.9%
place live in with	Oven or stove not working*	2.6%	11.1%	3.0%	1.6%	0.0%
	No or not working smoke detectors*	2.6%	7.9%	3.0%	1.6%	0.6%
	Water leaks*	7.5%	12.7%	11.0%	7.9%	2.6%
	Other	4.6%	4.8%	6.0%	4.8%	3.2%
Summary: Adverse Child	I .	4.0%	4.070	0.076	4.070	3.2/0
Summary: Adverse Child	Was depressed/mentally ill	23.2%	25.8%	29.7%	23.8%	18.0%
Lived with someone as	Was a problem drinker/alcoholic*	26.6%	39.7%	29.7%	23.8%	21.3%
a child who was	Used illegal drugs/abused meds*	13.8%	22.2%	16.8%		8.4%
		7.4%		10.0%	14.55%	
	Served time in jail* Parents divorced/separated*		14.3%	+	9.5%	2.6%
		26.7%	35.5%	31.7%	28.6%	20.0%
	Parents were not married*	5.3%	6.3%	10.9%	4.8%	1.9%
Happen as a child	Parents physically hurt each other* Abused*	10.8%	16.1%	16.8%	9.5%	5.2%
		23.4%	34.9%	31.7%	17.5%	16.8%
	Family did not support each other*	14.0%	23.8%	17.8%	14.5%	7.7%
	Not enough to eat, had dirty clothes*	6.9%	14.3%	9.9%	4.8%	2.6%
	By a spouse	34.3%	27.3%	40.6%	36.4%	28.0%
B It It	By a parent	56.7%	54.5%	61.3%	60.0%	52.0%
Been abused by	By a child	7.7%	4.5%	6.3%	9.1%	12.0%
	By a paid caregiver	0.9%	0.0%	0.0%	0.0%	3.8%
	By another person outside of home	42.2%	40.9%	50.0%	36.4%	36.0%
	Verbally	75.8%	72.7%	84.4%	90.9%	61.5%
How abused	Emotionally	73.8%	78.3%	75.0%	90.9%	57.7%
(of those who have	Sexually	52.9%	54.5%	65.6%	54.5%	36.0%
been abused in past)	Physically	62.8%	54.5%	65.6%	81.8%	61.5%
	Financially	24.7%	17.4%	34.4%	30.0%	19.2%
Summary: Feelings of Sa	fety in the Community					
	1 (not at all safe)	1.5%	6.3%	2.0%	0.0%	0.0%
Ham and form outer to	2	4.0%	6.3%	9.0%	3.2%	0.0%
How safe from crime is	3	13.6%	23.8%	15.0%	6.3%	11.0%
neighborhood*	4	31.5%	23.8%	34.0%	34.9%	32.3%
	5 (very safe)	49.4%	39.7%	40.0%	55.6%	56.8%
Firearms kept in or arou		41.2%	28.6%	30.0%	51.6%	49.7%
Firearms locked and	Firearms locked	69.5%	50.0%	76.7%	62.5%	72.7%
loaded	Firearms loaded	40.4%	43.8%	33.3%	34.4%	42.9%

Appendix: Survey Results by Age

		% of all residents	Ages 65+	Ages 45- 64	Ages 18- 44
Summary: Community Need	s				
	Food*	16.5%	10.6%	13.8%	22.8%
	Mental health issues*	11.4%	3.9%	10.1%	17.4%
	Healthcare*	10.7%	4.8%	13.8%	11.7%
	Utilities*	9.9%	4.8%	7.2%	15.9%
	Medicare or other health insurance*	9.7%	17.3%	3.6%	10.4%
	Prescription assistance	7.7%	8.7%	6.5%	8.3%
	Employment*	6.1%	0.0%	5.8%	11.0%
Sought assistance in past	Home repair	5.8%	5.8%	7.2%	4.2%
year for	Rent/mortgage assistance*	5.7%	1.0%	2.9%	11.7%
	Transportation	5.6%	7.7%	3.6%	6.2%
	Dental care	5.2%	3.8%	4.3%	6.9%
	Clothing*	5.0%	1.0%	3.6%	9.0%
	Shelter	3.0%	0.0%	2.9%	4.9%
	Legal aid services	2.6%	2.9%	4.3%	0.7%
	Affordable childcare*	1.4%	0.0%	0.0%	4.1%
	Gambling addiction	0.3%	0.0%	0.7%	0.0%
	None of the above	66.1%	72.1%	68.1%	60.0%
Summary: Personal Health S	tatus				
-	Excellent	15.3%	20.0%	12.9%	14.5%
Barra and described and	Good	56.0%	51.4%	59.0%	55.9%
Personal description of	Fair	23.9%	24.8%	23.7%	23.4%
health	Poor	4.1%	3.8%	3.6%	4.8%
	Very Poor	0.7%	0.0%	0.7%	1.4%
	Average number of days not well	4.65	4.49	5.41	4.03
	None	51.9%	59.0%	48.9%	49.0%
Number of days in past	1-5	26.6%	22.9%	27.0%	29.0%
month that PHYSICAL	6-10	7.7%	4.8%	5.1%	11.7%
health was not good*	11-20	6.1%	4.8%	8.8%	4.8%
	More than 20	7.7%	8.6%	10.2%	5.5%
	Average number of days not well	6.93	2.87	5.60	11.13
No color of the Color	None	44.6%	66.0%	46.4%	27.6%
Number of days in past month that MENTAL health was not good*	1-5	21.8%	20.4%	25.7%	19.3%
	6-10	11.2%	6.8%	11.4%	14.5%
	11-20	9.2%	2.0%	6.4%	16.6%
	More than 20	13.2%	4.9%	10.0%	22.1%
	Average # days kept from activities	4.23	2.27	4.52	5.37
Number of Days Poor	None	62.1%	79.4%	58.7%	54.2%
MENTAL or PHYSICAL	1-5	17.1%	9.8%	18.8%	20.1%

		% of all	Ages 65+	Ages 45-	Ages 18-
		residents		64	44
Health Kept from Usual	6-10	6.5%	4.0%	8.0%	6.9%
Activities	11-20	6.7%	3.0%	7.2%	9.0%
	More than 20	7.6%	3.9%	7.2%	9.7%
Summary: Insurance Coverage					
Currently not insured*		7.0%	0.0%	4.3%	14.5%
	Private insurance- employer paid	41.1%	5.8%	56.1%	55.4%
Type of Insurance coverage*	Private insurance- self paid	11.4%	3.8%	18.2%	9.9%
(of those with insurance)	Medicare	32.0%	86.5%	10.6%	8.3%
(e) and a mean and e)	Medicaid	13.1%	1.0%	11.4%	25.6%
	VA Coverage	2.4%	2.9%	3.8%	0.8%
	Hospitalization*	88.0%	93.3%	94.7%	76.6%
	Emergency room care	89.9%	90.4%	92.5%	86.3%
	Prescription assistance	82.8%	78.6%	84.1%	84.7%
	Preventative care*	82.5%	87.4%	90.2%	71.0%
Sarvisas savarad by	Vision services*	69.4%	54.8%	71.2%	79.0%
Services covered by insurance	Dental services*	69.2%	51.0%	74.2%	79.8%
(of those with insurance)	Long term care	31.4%	23.1%	33.8%	35.5%
(o) those with insurance)	Family planning (birth control) *	36.0%	9.6%	32.3%	62.1%
	Mental health*	63.9%	48.1%	69.2%	71.0%
	Alcohol and drug treatment*	43.8%	33.7%	51.5%	44.4%
	Prenatal/maternity*	40.3%	14.4%	42.1%	59.7%
	Chiropractic*	42.1%	34.6%	39.4%	50.8%
Summary: Access to Health Ca	re				
Have primary care provider*		83.6%	93.3%	89.2%	71.0%
	Within past year	79.9%	95.2%	84.9%	63.9%
Length of time since last	Within past 2 years	6.8%	2.9%	6.5%	9.7%
routine check-up*	Within past 5 years	4.3%	0.0%	3.6%	8.3%
routine check-up	5 or more years ago	6.5%	1.9%	2.9%	13.2%
	Never	2.4%	0.0%	2.2%	4.9%
	Primary care or family doctor	73.4%	88.5%	82.6%	54.2%
	The emergency room	5.2%	1.0%	2.9%	10.4%
	Urgent Care	8.5%	2.9%	4.3%	16.7%
Where receive health care	Health Department clinic	1.9%	1.0%	1.4%	2.8%
most often	VA hospital	2.2%	2.9%	2.2%	2.1%
	Community health center	2.6%	2.9%	0.7%	4.2%
	Telemedicine	1.8%	0.0%	0.7%	4.2%
	Somewhere else	4.3%	1.0%	5.1%	5.6%
	Doctor	66.8%	72.1%	65.9%	63.4%
	Internet	17.3%	12.5%	20.3%	17.9%
Where get most medical	Nurse	5.5%	2.9%	8.0%	5.5%
information	Family members	4.6%	3.8%	3.6%	6.9%
	Friends	0.8%	1.0%	0.0%	1.4%
	Pharmacy	0.8%	2.9%	0.0%	0.0%
	Other source	4.2%	5.8%	2.2%	4.8%
Libelih and of weign	Very likely	34.8%	19.4%	37.4%	43.1%
Likelihood of using	VCI y likely	3 1.070	13.170	37.170	73.1/0

		% of all	Ages 65+	Ages 45-	Ages 18-
	Not at all likely	residents		64 22.0%	22.20/
Likelihood of using at-home	Not at all likely Very likely	25.3% 18.7%	33.0% 15.4%	23.0% 18.7%	22.2% 20.7%
primary care services	Somewhat likely	42.3%	45.2%	43.2%	39.3%
primary care services	Not at all likely	39.0%	39.4%	38.1%	40.0%
Like to see services or program	1	32.9%	28.8%	36.7%	32.4%
Services needed unable to get		11.1%	5.8%	12.3%	13.2%
Services needed unable to get	No health insurance	14.1%	16.7%	5.9%	20.0%
	Couldn't afford co-pay or deductible	32.1%	14.3%	27.8%	45.0%
Why unable to get needed	Didn't have a way to get to the doctor	5.7%	14.3%	5.9%	5.3%
service	Doctor or clinic refused insurance	16.1%	14.3%	17.6%	15.8%
	Didn't know how to find a doctor	3.4%	0.0%	0.0%	5.3%
	Took too long to get an appointment	22.2%	0.0%	17.6%	25.0%
	Fear	12.3%	14.3%	5.9%	15.8%
Prescription unable to get		10.1%	9.7%	10.1%	10.3%
Summary: Mental Health					
	Felt sad or hopeless 2+ weeks*	20.6%	6.7%	17.4%	33.3%
During past 12 months	Ever seriously consider suicide*	7.5%	1.0%	6.5%	13.1%
	Has died by suicide	44.5%	42.3%	46.4%	44.4%
Do you know someone	Talked about thoughts of suicide*	34.2%	11.5%	26.1%	58.3%
who	Attempted suicide, but did not die*	28.1%	11.5%	20.9%	47.6%
	Anxiety disorder *	18.7%	6.7%	13.8%	31.7%
	ADD/ADHD	10.7%	1.0%	8.6%	19.4%
	Posttraumatic stress disorder*	13.2%	1.9%	9.4%	24.8%
	Seasonal affective disorder*	9.4%	2.9%	9.4%	13.9%
	Alcohol/Substance Abuse	7.0%	3.8%	6.5%	9.7%
Been Diagnosed by Medical	Postpartum depression*	4.6%	1.0%	4.3%	7.6%
Professional	Bipolar*	9.3%	1.0%	4.3%	20.0%
	Developmental disability*	3.8%	2.9%	1.4%	6.9%
	Other mental health disorder*	5.9%	1.0%	5.0%	10.3%
	Eating disorder*	4.4%	2.9%	1.4%	8.3%
	Schizophrenia	1.7%	0.0%	2.2%	2.8%
	Problem gambling	1.7%	1.0%	0.7%	2.8%
	Depression*	30.5%	14.4%	24.5%	48.3%
	Anxiety disorder*	23.9%	12.5%	18.0%	37.5%
	ADD/ADHD*	29.5%	12.5%	26.6%	44.1%
	Posttraumatic stress disorder*	13.5%	7.7%	8.6%	22.2%
	Seasonal affective disorder*	13.7%	4.8%	11.6%	21.5%
	Alcohol/Substance Abuse *	31.1%	21.25%	22.5%	46.5%
Immediate	Postpartum depression*	11.4%	5.8%	3.6%	22.9%
Family Member Been	Bipolar*	20.8%	11.5%	15.2%	33.1%
Diagnosed by Medical	Developmental disability*	15.5%	9.6%	9.4%	26.2%
Professional	Other mental health disorder*	13.9%	2.9%	11.5%	24.3%
	Eating disorder*	9.2%	7.7%	5.8%	13.8%
	Schizophrenia*	9.6%	5.8%	5.0%	17.2%
	Problem gambling*	7.5%	3.8%	3.6%	13.8%
	1 TODICHI BUHDINIS	7.5/0	3.070	3.070	13.070

		% of all	Ages 65+	Ages 45-	Ages 18-
		residents		64	44
	Depression*	39.1%	25.0%	33.3%	54.9%
Summary: Access to Oral Hea	lth Care				
	Within past year	65.2%	76.0%	68.8%	53.8%
	Within past 2 years	14.1%	7.7%	15.2%	17.9%
Last Dental Checkup*	Within past 5 years	8.9%	5.8%	8.0%	12.4%
	5 or more years ago	10.8%	10.6%	8.0%	13.1%
	Never	1.0%	0.0%	0.0%	2.8%
Summary: Sleep and Rest					
	0-3 hours	1.8%	0.0%	0.7%	4.2%
Hours of sleep in 24-hour	4-7 hours	64.2%	52.9%	69.6%	66.7%
period	8-10 hours	33.2%	44.2%	29.7%	28.5%
	More than 10 hours	1.0%	3.0%	0.0%	0.7%
	None	18.8%	30.2%	15.7%	13.1%
Number of days in past	1-5	33.0%	41.5%	32.9%	26.9%
month did not get enough	6-10	12.2%	11.3%	16.4%	9.0%
sleep or rest	11-20	17.7%	9.4%	13.6%	27.6%
	More than 20	18.4%	7.5%	21.4%	23.4%
Summary: Smoking and Toba	cco Use				
Smoked 100 or more cigarett	es in life*	46.2%	54.8%	51.4%	35.2%
	Everyday	11.1%	4.9%	11.5%	15.2%
Tobacco usage*	Some days	8.6%	1.0%	9.4%	13.1%
	Not at all	80.3%	94.2%	79.1%	71.7%
Electronic Cigarette/Vape	Everyday	6.2%	1.9%	6.5%	9.0%
Usage*	Some days	3.6%	1.0%	2.9%	6.9%
Usage	Not at all	90.2%	97.1%	90.6%	84.1%
Trying to quit or willing to qu	it smoking	58.0%	42.9%	69.0%	53.7%
Likelihood of quitting	Very likely	35.9%	33.3%	20.0%	50.0%
smoking or vaping in next 6	Somewhat likely	62.3%	66.7%	75.0%	50.0%
months	Not at all likely	1.8%	0.0%	5.0%	0.0%
	Counseling*	1.6%	33.3%	0.0%	0.0%
Have tried method to quit	Tobacco Quit line	1.8%	0.0%	5.0%	0.0%
smoking	Medication	27.2%	33.3%	40.0%	18.2%
	Patches	41.7%	33.3%	47.4%	38.1%
	Gum	26.7%	50.0%	25.0%	27.3%
How harmful are cigarettes,	Very harmful	65.6%	74.3%	71.0%	54.2%
e-cigarettes, or vaping to:	Somewhat harmful	23.4%	16.8%	22.5%	28.9%
You*	Not at all harmful	11.0%	8.9%	6.5%	16.9%
How harmful are cigarettes,	Very harmful	79.0%	86.4%	82.6%	70.3%
e-cigarettes, or vaping to:	Somewhat harmful	15.8%	10.7%	14.5%	20.7%
Youth*	Not at all harmful	5.2%	2.9%	2.9%	9.0%
	Very harmful	67.2%	77.2%	69.8%	57.9%
	Somewhat harmful	27.7%	18.8%	25.2%	35.9%

		% of all	A 700 651	Ages 45-	Ages 18-
		residents	Ages 65+	64	44
How harmful are cigarettes, e-cigarettes, or vaping to: Other adults*	Not at all harmful	5.1%	4.0%	5.0%	6.2%
Summary: Alcohol and Subst	ance Abuse				
	Every day	7.9%	10.6%	7.2%	6.9%
Alcohol consumption	Some days	57.1%	51.0%	65.5%	53.8%
Alcohol consumption	Not at all	35.0%	38.5%	27.3%	39.3%
	Average number of drinks per week	5.50	3.85	6.32	5.77
# of days had 5+ drinks past	None	67.0%	91.7%	54.4%	63.2%
month (men)*	1	16.5%	4.2%	25.0%	17.6%
	2 or more	16.5%	4.2%	20.6%	19.1%
f of days had 4+ drinks past	None	73.1%	88.9%	72.5%	63.5%
month (women)*	1	14.3%	5.6%	11.6%	23.0%
month (women)	2 or more	12.5%	5.6%	15.95%	13.5%
Driven after drinking	Yes	10.6%	12.6%	8.0%	11.1%
alcohol in past month	No	89.4%	87.4%	92.0%	88.9%
How harmful alcohol is to:	Very harmful	26.3%	27.5%	21.0%	30.1%
You*	Somewhat harmful	48.2%	39.2%	52.9%	50.0%
100	Not at all harmful	25.5%	33.3%	26.1%	19.9%
How barmful alcohol is to	Very harmful	71.8%	70.9%	76.1%	68.8%
	Somewhat harmful	22.5%	26.2%	21.0%	20.8%
low harmful alcohol is to: outh*	Not at all harmful	5.7%	2.9%	2.9%	10.4%
How harmful alcohol is to:	Very harmful	27.3%	28.0%	22.5%	31.9%
Other adults	Somewhat harmful	61.3%	60.0%	68.1%	55.6%
Other addits	Not at all harmful	11.4%	12.0%	9.4%	12.5%
Anyone in household seeking	help for alcohol addiction	4.5%	5.8%	2.9%	5.5%
	Self-help therapy	21.8%	18.2%	17.6%	26.7%
Hailining vocativess for	Counseling	11.4%	8.7%	17.6%	10.0%
Utilizing resources for alcohol addiction	Medications	9.4%	4.3%	17.6%	10.0%
alconor addiction	Detox	2.8%	0.0%	0.0%	6.7%
	Other	2.8%	0.0%	0.0%	6.7%
	Marijuana*	25.4%	15.5%	19.4%	37.9%
	Amphetamines, methamphetamines*	5.0%	0.0%	2.2%	11.1%
	Cocaine or crack*	1.4%	1.0%	0.0%	3.4%
Disting the last Constitution	Heroin	0.9%	1.0%	0.0%	2.1%
During the last 6 months,	LSD or other hallucinogen*	1.6%	0.0%	0.0%	4.2%
has anyone in household used	Inhalants	0.0%	0.0%	0.0%	0.0%
uocu	Ecstasy or GHB*	1.1%	0.0%	0.0%	2.8%
	Bath salts used illegally	0.0%	0.0%	0.0%	0.0%
	Something else	1.3%	0.0%	1.4%	2.1%
	None of the above*	72.6%	84.5%	79.1%	57.9%
	Taken any prescription medications*	80.0%	94.2%	82.0%	68.1%

		% of all	Ages 65+	Ages 45-	Ages 18-
		residents		64	44
In past year take	Not belonging to them*	2.6%	0.0%	1.4%	6.2%
prescriptions	Different than prescribed*	3.5%	0.0%	4.4%	6.1%
Anyone in household seekin	g help for substance use disorder*	3.9%	1.9%	1.4%	7.6%
	Self-help	8.4%	5.0%	5.6%	12.1%
Utilizing resources for	Counseling*	12.3%	5.0%	5.6%	21.2%
substance use disorder	Detox	4.8%	0.0%	0.0%	9.1%
	Medication assisted treatment	9.6%	5.0%	11.1%	12.1%
	Other	1.1%	5.0%	0.0%	0.0%
Summary: Pregnancy Health					
Been pregnant in the last fiv	e years*	10.6%	0.0%	1.4%	27.0%
	Prenatal care within first 3 months	75.8%	0.0%	100.0%	75.0%
	Received Dental exam	75.8%	0.0%	100.0%	28.6%
B 4	Received WIC services	50.2%	0.0%	0.0%	52.4%
During last pregnancy	Took a multi-vitamin with folic acid	78.3%	0.0%	100.0%	76.2%
	Smoked cigarettes	8.7%	0.0%	0.0%	9.5%
	Used marijuana	4.3%	0.0%	0.0%	5.0%
	Experienced depression	48.5%	0.0%	0.0%	50.0%
	Experienced domestic violence	15.6%	0.0%	0.0%	15.0%
Planned pregnancy		45.4%	0.0%	100.0%	42.9%
Plan for after-birth care		64.5%	0.0%	100.0%	61.9%
Self/immediate family mem	ber had child born prematurely	13.7%	7.8%	13.7%	17.9%
Summary: Child Health	· · ·				
Children in home under 18*		26.2%	2.9%	16.7%	52.1%
Children up to date on recor	nmended vaccines	96.0%	100.0%	91.7%	97.3%
Children get annual well che		91.0%	100.0%	100.0%	88.05
Summary: Healthy Living- W	eight and Exercise				
Exercise in past month		75.6%	71.8%	75.5%	78.5%
·	None	6.1%	9.9%	5.7%	10.6%
How often participated in	1-2 times	33.9%	37.3%	27.6%	37.2%
exercise in an average	3-4 times	33.5%	37.3%	35.2%	29.2%
week*	5-7 times	26.4%	25.3%	31.4%	23.0%
	Overweight	63.2%	67.3%	68.1%	55.9%
Self-described weight	About right	34.7%	29.8%	30.4%	42.1%
C	Underweight	2.1%	2.9%	1.4%	2.1%
Been told obese or overweig	-	39.3%	40.4%	38.8%	38.9%
Summary: Healthy Living- Fo	•				
, , ,	Cost of food*	31.5%	23.1%	28.1%	40.7%
	Quality of food*	11.6%	15.4%	14.4%	6.3%
What makes it difficult to	Distance from the store	8.2%	6.7%	6.5%	11.1%
get food needed	Time for shopping*	17.3%	4.8%	15.2%	27.6%
-	Safety	2.2%	1.9%	1.4%	2.8%
	Something else	4.9%	1.9%	5.8%	6.2%
How difficult to get fresh	Very difficult	2.7%	1.9%	1.4%	4.8%
fruits & vegetables	Somewhat difficult	8.4%	3.8%	7.2%	12.4%
	CCCirriat annioalt	0.170	0.070	7.2/0	

		% of all		Ages 45-	Ages 18-
		residents	Ages 65+	64	44
	Not too/not at all difficult	88.9%	94.2%	91.4%	82.8%
	0-1 times/week	14.0%	10.6%	15.9%	14.5%
	2-4 times/week	38.5%	34.6%	42.8%	37.2%
How often eat fresh fruits	Once a day	23.3%	27.9%	18.1%	24.8%
and vegetables	2-4 times a day	18.7%	22.1%	19.6%	15.2%
	5 or more times a day	5.5%	4.8%	3.6%	8.3%
	None	19.1%	23.1%	18.0%	17.2%
# of restaurant or takeout	1-2 meals	59.2%	57.7%	64.7%	54.5%
meals a week	3-4 meals	17.0%	13.5%	13.7%	22.8%
	5 or more meals	4.7%	5.8%	3.6%	5.5%
	0	25.7%	23.1%	29.7%	13.8%
	1-3 times per week	24.9%	37.5%	26.1%	22.1%
# times drink pop or other	4-6 times per week	12.6%	26.9%	10.9%	17.2%
unhealthy drinks	1 time per day	12.1%	8.7%	9.4%	14.5%
•	2-3 times per day	17.7%	11.5%	15.2%	24.1%
	4 or more times per day	7.0%	2.9%	8.7%	8.3%
Summary: Prevention, Testin	· · · ·				
	Within the past year	77.9%	92.8%	79.5%	56.6%
	Within the past 2 years	10.7%	7.2%	10.8%	15.1%
How long since: had blood	Within the past 5 years	3.9%	0.0%	4.8%	7.5%
cholesterol checked*	5 or more years ago	0.8%	0.0%	1.2%	1.9%
	Never	6.7%	0.0%	3.6%	18.9%
	Within the past year	89.9%	98.7%	90.7%	78.1%
	Within the past 2 years	6.1%	1.3%	4.7%	14.1%
How long since: had blood	Within the past 5 years	1.4%	0.0%	1.2%	3.1%
pressure checked*	5 or more years ago	1.3%	0.0%	3.5%	0.0%
	Never	1.3%	0.0%	0.0%	4.7%
Have ever: had a colonoscop	y*	47.1%	85.6%	52.9%	13.8%
	Within the past year	20.9%	15.7%	27.0%	20.0%
How long since: had a	Within the past 2 years	19.8%	22.5%	18.9%	15.0%
colonoscopy	Within the past 5 years	38.4%	39.3%	33.8%	50.0%
	5 or more years ago	20.9%	22.5%	20.3%	15.0%
Have ever: had a skin cancer	exam*	37.0%	64.4%	37.0%	17.4%
	Within the past year	49.4%	53.7%	53.8%	28.0%
How long since: had a skin	Within the past 2 years	18.1%	20.9%	17.3%	12.0%
cancer exam	Within the past 5 years	18.3%	14.9%	13.5%	36.0%
	5 or more years ago	14.3%	10.4%	15.4%	24.0%
Have ever: had a mammogra	m (Asked only of females)*	70.2%	94.6%	90.0%	32.4%
	Within the past year	67.0%	78.8%	68.3%	40.0%
How long since: had a mammogram*	Within the past 2 years	14.8%	7.7%	14.3%	32.0%
iliailiilogi alli	Within the past 5 years	13.5%	11.5%	14.3%	16.0%
	5 or more years ago	4.7%	1.9%	3.2%	12.0%
Have ever: performed self-br	east exam (Asked only of females)*	87.1%	98.2%	90.0%	75.7%
	Within past month	47.7%	53.7%	52.4%	37.5%

		% of all residents	Ages 65+	Ages 45-	Ages 18- 44
How long since: performed	Within past 6 months	29.8%	24.1%	27.0%	37.5%
self- breast exam	Within past 9 months Within past year	13.2%	11.1%	14.3%	14.3%
Sen Breast exam	More than a year ago	9.3%	11.1%	6.3%	10.7%
Have ever: had a PAP smear		94.0%	100.0%	98.6%	85.1%
Trave ever. Trad a FAF Sinear	Within the past year	39.0%	25.5%	36.8%	54.0%
How long since: last PAP	Within the past 2 years	19.4%	18.2%	16.2%	22.2%
smear*	Within the past 5 years	17.9%	12.7%	23.5%	17.5%
	5 or more years ago	23.7%	43.6%	23.5%	6.3%
Have ever: test for prostate of	, ,	40.9%	87.5%	42.6%	5.9%
Thave even test for prostate t	Within the past year	63.1%	54.8%	75.9%	50.0%
How long since: test for	Within the past 2 years	20.4%	21.4%	24.1%	0.0%
prostate cancer*	Within the past 5 years	13.2%	19.0%	0.0%	50.0%
prostate carreer	5 or more years ago	3.2%	4.8%	0.0%	0.0%
Summary: Immunizations	5 of filore years ago	J.Z/0	7.0/0	0.070	0.070
Janimary: miniamzacions	Tetanus booster (last 10 years) *	46.1%	50.0%	33.8%	55.2%
	COVID-19 vaccine *	79.1%	93.3%	77.0%	70.8%
	Measles vaccine (in lifetime) *	57.8%	55.8%	56.1%	61.4%
	Annual flu vaccine*	58.1%	80.8%	53.2%	46.5%
	Chicken Pox vaccine (in lifetime)	45.5%	48.1%	41.0%	47.9%
Received vaccines:	Pneumonia vaccine (in lifetime) *	39.1%	77.9%	28.3%	21.5%
	Shingles vaccine (in lifetime) *	29.3%	60.6%	19.4%	16.6%
	HPV vaccine (in lifetime) *	12.8%	6.8%	1.4%	27.8%
	Hepatitis A vaccine (in lifetime) *	27.7%	14.4%	19.4%	45.1%
	Hepatitis B vaccine (in lifetime) *	39.7%	26.9%	32.4%	55.9%
Summary: Been Diagnosed w		33.770	20.570	32.470	33.370
Janimary. Been Biagnosea W	High blood pressure*	38.8%	65.4%	39.9%	18.6%
	High cholesterol*	29.4%	54.4%	32.4%	8.3%
	Arthritis*	30.9%	53.8%	29.0%	16.0%
	Diabetes*	13.6%	27.9%	12.3%	4.8%
	Any form of cancer*	9.9%	21.2%	8.0%	3.5%
Resident been diagnosed	Asthma	11.2%	6.7%	12.2%	13.2%
with	Heart disease or heart attack*	8.3%	22.1%	6.5%	0.0%
	Kidney disease*	3.1%	7.7%	0.7%	2.1%
	Respiratory disease*	4.4%	9.6%	4.3%	0.7%
	Stroke	3.0%	3.8%	4.3%	1.4%
	Alzheimer's	0.7%	1.0%	0.0%	1.4%
	High blood pressure*	26.6%	21.2%	23.2%	33.1%
	High cholesterol	22.2%	24.0%	18.0%	25.0%
	Arthritis*	23.1%	16.3%	20.9%	30.3%
	Diabetes*	17.8%	9.6%	12.9%	28.3%
Member of household been	Any form of cancer*	18.5%	10.6%	13.7%	29.0%
diagnosed with	Asthma*	16.7%	2.9%	12.9%	30.3%
	Heart disease or heart attack	14.3%	9.6%	12.9%	19.3%
	Kidney disease*	7.2%	3.8%	2.9%	13.8%
	Nulley disease	1.270	3.0%	2.570	13.0%

		% of all	Ages 65+	Ages 45-	Ages 18-
		residents		64	44
	Respiratory disease*	9.6%	3.8%	3.6%	19.3%
	Stroke*	7.9%	3.8%	3.6%	15.2%
	Alzheimer's *	7.0%	3.8%	1.4%	14.5%
Summary: Transportation and	d Safe Driving		22.22		
Have a cell phone		97.3%	96.2%	99.3%	96.5%
Ever send or received texts/e		39.5%	23.0%	42.8%	48.6%
How often use a seat belt	Always	87.7%	88.5%	87.1%	86.9%
while driving or riding in a	Most of the time	6.8%	6.7%	7.2%	6.2%
car	Sometimes	3.7%	3.8%	1.4%	6.2%
	Never	1.9%	1.0%	4.3%	0.7%
	Walk	5.9%	2.9%	2.9%	10.4%
	Bike	0.9%	0.0%	0.0%	2.1%
Type of transportation used	Public Transit	1.7%	0.0%	1.4%	3.5%
most often*	Own car	86.0%	92.3%	92.8%	75.0%
most often	Borrowed car	0.2%	1.0%	0.0%	0.0%
	Family member/friend	4.4%	3.8%	2.2%	6.9%
	Other	0.9%	0.0%	0.7%	2.1%
Summary: Housing					
	Do not have housing	2.1%	1.0%	0.75%	4.8%
Housing situation today*	Have housing, but worried	7.1%	3.8%	5.0%	11.0%
	Have housing	90.8%	95.2%	94.2%	84.1%
	Bug infestation*	3.0%	0.0%	2.2%	6.2%
	Mold	7.8%	3.8%	7.9%	11.0%
	Lead paint or pipes	0.8%	1.0%	1.4%	0.7%
Have experienced a	Inadequate heat*	2.6%	0.0%	0.0%	6.9%
problem in their home	Oven or stove not working	2.6%	1.0%	2.9%	3.4%
	No or not working smoke detectors	2.6%	1.0%	2.9%	4.1%
	Water leaks*	7.5%	1.0%	5.8%	13.2%
	Other	4.6%	1.0%	5.0%	6.3%
Summary: Adverse Childhood	Experiences				
	Was depressed/mentally ill*	23.2%	9.6%	20.9%	35.2%
Lived with someone as a	Was a problem drinker/alcoholic	26.6%	18.3%	28.3%	31.0%
child who was	Used illegal drugs/abused meds*	13.8%	5.8%	10.8%	22.2%
	Served time in jail*	7.4%	1.9%	2.2%	16.0%
	Parents divorced/separated*	26.7%	11.5%	25.9%	38.6%
	Parents were not married*	5.3%	0.0%	2.2%	12.4%
Hamman as a shild	Parents physically hurt each other*	10.8%	7.7%	7.2%	16.6%
Happen as a child	Abused*				
		23.4%	18.3%	19.4%	31.0%
	Family did not support each other*	14.0%	6.7%	12.3%	20.8%
	Not enough to eat, etc.*	6.9%	5.8%	3.6%	11.0%
Been abused by	By a spouse	34.3%	31.6%	33.3%	35.6%

		% of all residents	Ages 65+	Ages 45- 64	Ages 18- 44
	By a parent	56.7%	57.9%	44.4%	63.6%
	By a child	7.7%	0.0%	7.4%	11.1%
	By a paid caregiver	0.9%	0.0%	3.7%	0.0%
	By another person outside of home	42.2%	31.6%	29.6%	53.3%
	Verbally	75.8%	63.2%	74.1%	81.8%
How abused	Emotionally	73.8%	63.2%	66.7%	82.2%
(of those who have been	Sexually	52.9%	42.1%	44.4%	62.2%
abused in past)	Physically	62.8%	68.4%	59.3%	62.2%
	Financially	24.7%	11.1%	22.2%	31.1%
Summary: Feelings of Safety in the Community					
How safe from crime is	1 (not at all safe)	1.5%	0.0%	0.0%	4.2%
neighborhood*	2	4.0%	1.9%	1.4%	7.7%
	3	13.6%	9.6%	17.3%	12.6%
	4	31.5%	28.8%	36.7%	28.7%
	5 (very safe)	49.4%	59.6%	44.6%	46.9%
Firearms kept in or around home		41.2%	36.9%	41.0%	44.0%
Firearms locked and loaded	Firearms locked*	69.5%	54.1%	61.4%	85.7%
(those with firearms)	Firearms loaded	40.4%	34.2%	38.6%	45.2%

Appendix: Research Methodology

The Center for Marketing and Opinion Research (CMOR) conducted the 2022 Erie County Community Health Needs Assessment on behalf of the Erie County Board of Health.

This report identifies indicators in the following focus areas:

- Community Needs
- Social Determinants
- Personal Health Status
- Access to Health Care
- Mental Health
- Oral Health
- Smoking/Tobacco Use
- Alcohol and Substance Abuse
- Maternal, Infant, and Child Health
- Healthy Living
- Communicable Diseases, Vaccinations, and Prevention Services
- Chronic Disease Management
- Transportation
- Housing
- Environmental Quality
- Safety, Injury and Violence
- Reproductive and Sexual Health

COMMUNITY SURVEY

The first component of the Community Health Assessment consisted of the collection of primary data utilizing a random sample telephone survey of Erie County households that included a representative sample of Erie County residents. A combination of telephone and web interviews were utilized to ensure representativeness of the population. This method also ensured that the correct number of interviews would be completed to meet the targeted sampling error.

The final sample size consisted of 388 residents. The general population statistics derived from the sample size provide a precision level of plus or minus 5% within a 95% confidence interval. Data collection began on March 2nd and ended on April 25th, 2022. Most calling took place between the evening hours of 5:15 pm and 9:15 pm. Interviews were conducted during the day and on some weekends to accommodate resident schedules. The interviews took an average of 28 minutes.

COMMUNITY LEADER SURVEY

In addition to the process mentioned above, additional data was gathered to provide contextual information for the primary and secondary data. Contextual data included an online Community Leader Survey, completed by 50 community leaders. These surveys were completed between June 16th and July 5th, 2022.

^{*}Throughout the report, statistically significant findings and statistical significance between groupings (i.e., between age groups or between races) are indicated by an asterisk (*).

SECONDARY DATA ANALYSIS

A third contributing factor to the CHA was secondary data analysis. This consisted of reviewing and analyzing secondary data sources to identify priority areas of concern when analyzed alongside survey data. CMOR gathered and compiled health and demographic data from various sources (outlined below). After gathering the data, CMOR sorted the information by category. In addition to the report narrative, data was visually displayed with charts and tables. When available, data was compared to previous five years' information as well as other geographic areas such as Ohio. Analysis included survey data in conjunction with health and demographic data. Using all data available, CMOR identified priorities for the county.

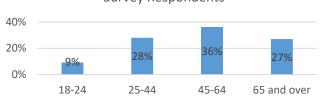
Sources of Data:

- → Behavioral Risk Factor Surveillance System (BRFSS)
- → Dartmouth Atlas of Health Care
- Feeding America
- → Kids Count Data Center
- → National Center for Health Statistics/Census Bureau
- → Ohio Department of Development (ODSA)
- → Ohio Development Services Agency, Ohio County Profiles
- → Ohio Department of Education
- → Ohio Department of Health Data Warehouse
- → Ohio Department of Health, STD Surveillance
- → Ohio Housing Finance Agency (OHFA)
- → Ohio Department of Job and Family Services
- → Ohio Mental Health and Addiction Services
- → Public Children Services Association of Ohio (PCSAO)
- → U.S. Census Bureau American Fact Finder, American Community Survey

Appendix: Participant Characteristics

COMMUNITY SURVEY

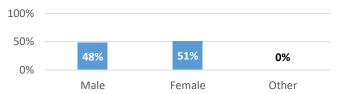
Age Distribution of Community
Survey Respondents



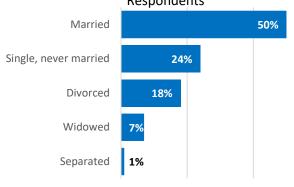
Age	N	%
18-24	36	9.3%
25-44	108	27.9%
45-64	139	35.9%
65 and over	104	26.9%
Total	387	100.0%

Gender N % Male 186 48.1% Female 200 51.7% Other 1 0.25% Total 387 100.0%

Gender Distribution of Community Survey Respondents



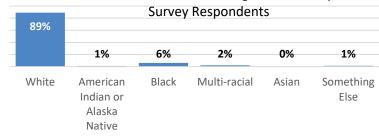
Marital Status of Community Survey Respondents



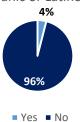
Marital Status	N	%
Married	194	50.3%
Single, never married	92	23.8%
Divorced	69	18.0%
Widowed	26	6.7%
Separated	5	1.3%
Total	386	100.0%

Race Ν % White 346 89.4% American Indian/Alaska Native 4 1.0% Black 23 5.9% Multi-racial 7 1.8% Asian 1 0.3% Something else 6 1.6% 387 **Total** 100%

Distribution of Race Among Community



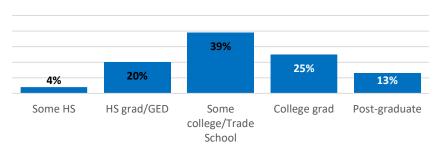
Community Survey Respondents of Hispanic or Latino Origin



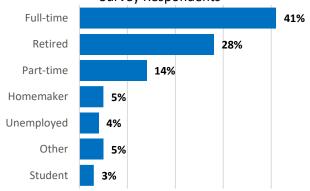
Hispanic or Latino Origin	N	%
Yes	16	4.1%
No	371	95.9%
Total	387	100.0%

Education	N	%
Some High School	17	4.4%
HS grad/GED	76	19.7%
Some college/Trade	149	38.6%
College grad	95	24.6%
Post-graduate	49	12.7%
Total	386	100.0%

Educational Attainment Among Community Survey Respondents



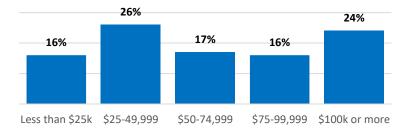
Employment Status Among Community Survey Respondents



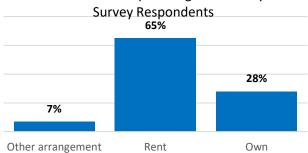
Employment Status	N	%
Full-time	160	41.3%
Retired	107	27.6%
Part-time	53	13.7%
Homemaker	21	5.4%
Unemployed	16	4.1%
Other	18	4.7%
Student	12	3.1%
Total	387	100.0%

Income	N	%
Less than \$25k	63	16.5%
\$25-49,999	101	26.4%
\$50-74,999	63	16.5%
\$75-99,999	62	16.2%
\$100k or more	93	24.4%
Total	382	100.0%

Distribution of Household Income Among Community Survey Respondents



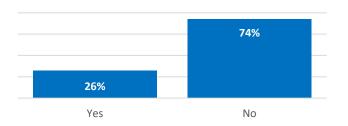
Home Ownership Among Community



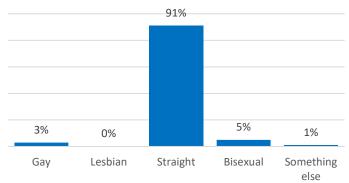
Own or Rent	N	%
Own	108	27.9%
Rent	253	65.4%
Other arrangement	26	6.7%
Total	387	100.0%

Have Children	N	%
Yes	101	26.1%
No	286	73.9%
Total	387	100.0%

Community Respondents With Children in the Household



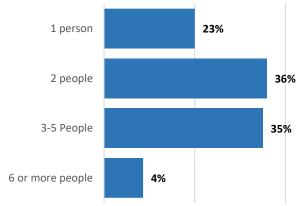
Self-Reported Sexual Identity Among Community Survey Respondents



	N	%
Gay	10	2.6%
Lesbian	1	0.3%
Straight	352	91.0%
Bisexual	18	4.7%
Other	5	1.3%
Total	386	100.0%

Number of People in Ν % Household 23.2% 1 person 90 2 people 141 36.3% 3-5 people 142 36.6% 3.9% 6 or more people 15 388 100.0% **Total**

Average Household Size Among Community Survey Respondents

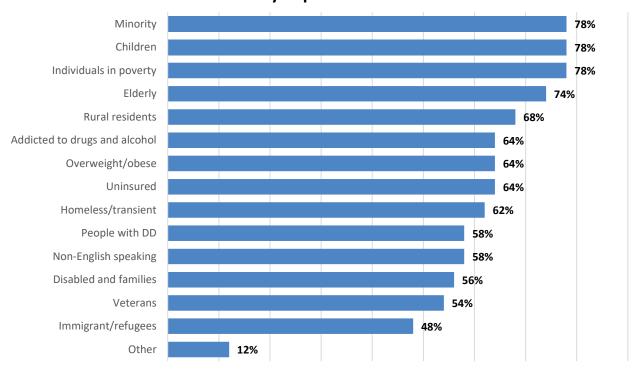


Distribution of Community Survey Respondents by City				
City/Township	N	%		
Sandusky	136	35.4%		
Perkins Township	56	14.6%		
Huron	52	13.5%		
Vermilion	42	11.3%		
Vermilion Township	17	4.4%		
Huron Township	17	4.4%		
Castalia	12	3.1%		
Milan	10	2.6%		
Margaretta Township	10	2.6%		
Milan Township	8	2.1%		
Berlin Heights	7	1.8%		
Berlin Township	5	1.3%		
Florence Township	4	1.0%		
Bayview	3	0.8%		
Groton Township	2	0.5%		
Kelleys Island	1	0.3%		
Oxford Township	1	0.3%		
Bellevue	1	0.3%		
Total	384	100.0%		

Distribution of Community Survey Respondents by Zip Code				
Zip Code	N	%		
44870	200	51.7%		
44839	76	19.6%		
44089	58	15.0%		
44824	19	4.9%		
44814	13	3.4%		
44846	16	4.1%		
44889	2	0.5%		
43438	2	0.5%		
44811	1	0.3%		
Total	387	100.0%		

COMMUNITY LEADER SURVEY

Priority Populations of Focus



Sectors Org. Associates With	N	%
Nonprofit	10	20.0%
Government	21	42.0%
Health care	14	28.0%
Education	2	4.0%
Business/private sector	1	2.0%
Other	2	4.0%
Total	50	100.0%

Primary Service Area	N	%
Erie County	25	51%
Multi-county including Erie County	16	32.7%
City of Vermilion	2	4.1%
Sandusky	2	4.1%
City of Bayview	1	2.0%
City of Huron	1	2.0%
Kelleys Island	1	2.0%
Low-income communities in Erie County	1	2.0%
Total	49	100.0%