

# HEALTH PATHWAYS

Many chronic health conditions are rooted in social inequities, particularly among Greater Cleveland's low-income residents and communities of color. The Health Pathways strategy targets medical and social determinants of health to address chronic health conditions and improve health outcomes.

## Racial Disparities

In almost all measures of health conditions and outcomes, BIPOC residents in Cuyahoga County fare worse than their White peers. Programs and services that address community conditions or offer preventive health can help reduce racial disparities in health.

## Community Conditions

Community health includes the built environment and access to quality food. Cuyahoga County's low rating of "F" in air quality exacerbates health issues and Cleveland's aging housing stock with lead paint is a "public health crisis with a housing solution." While food insecurity has decreased from 2017 to 2021, early 2023 data from United Way 211 indicates a greater need for food, especially after the expiration of expanded SNAP benefits in March 2023.

## Trauma and Behavioral Health

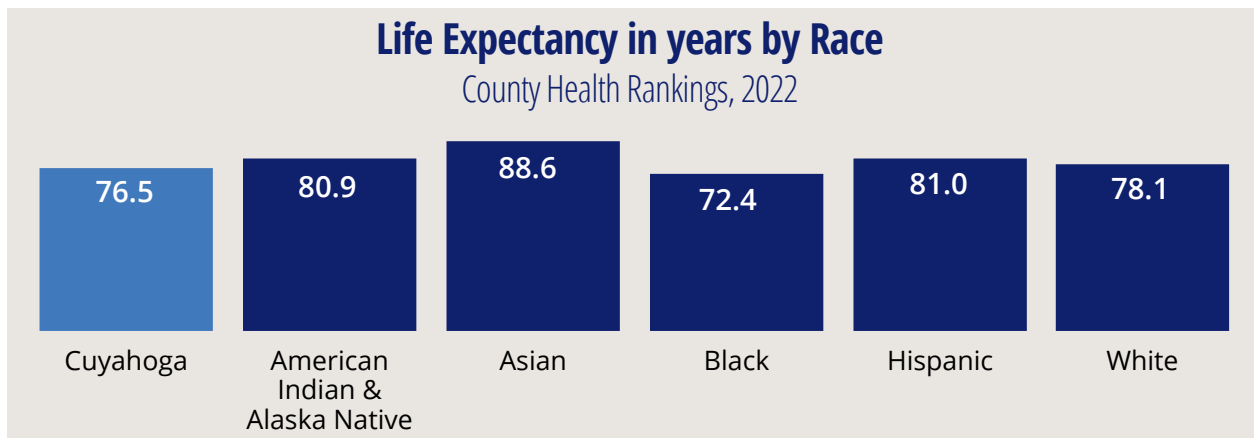
In Ohio, over 40% of children have adverse child experiences (ACEs), higher than the national average. Trauma including ACEs, exposure to crime and oppression due to systemic racism can result in behavioral health needs, and Cuyahoga County fares worse than the national average across all behavioral health measures. Therefore, trauma-informed care should be embedded in all human services..



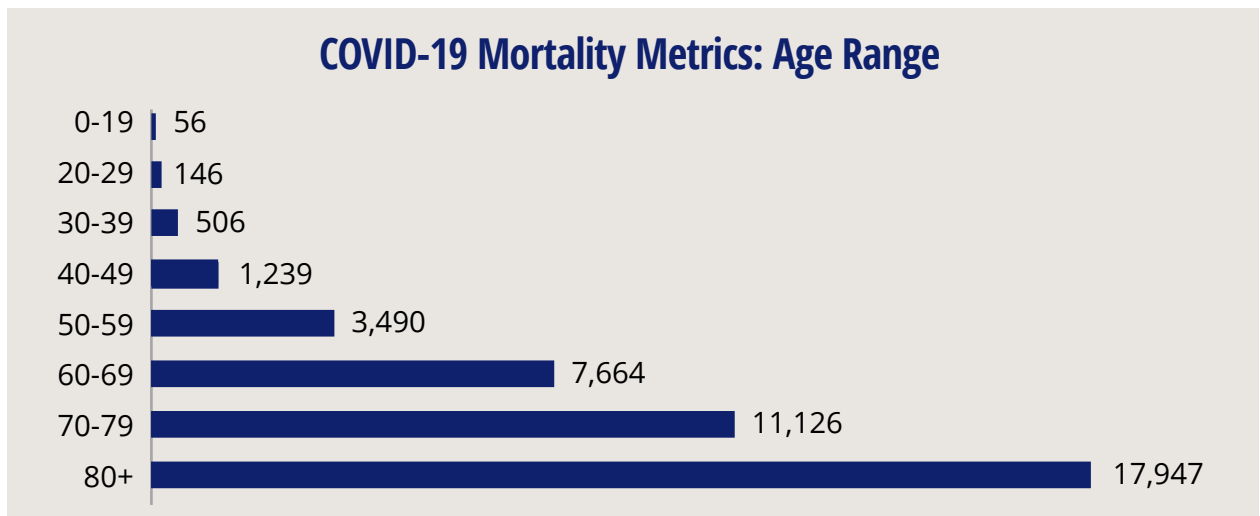
# SECONDARY DATA: HEALTH CONDITIONS AND OUTCOMES

## Life Expectancy

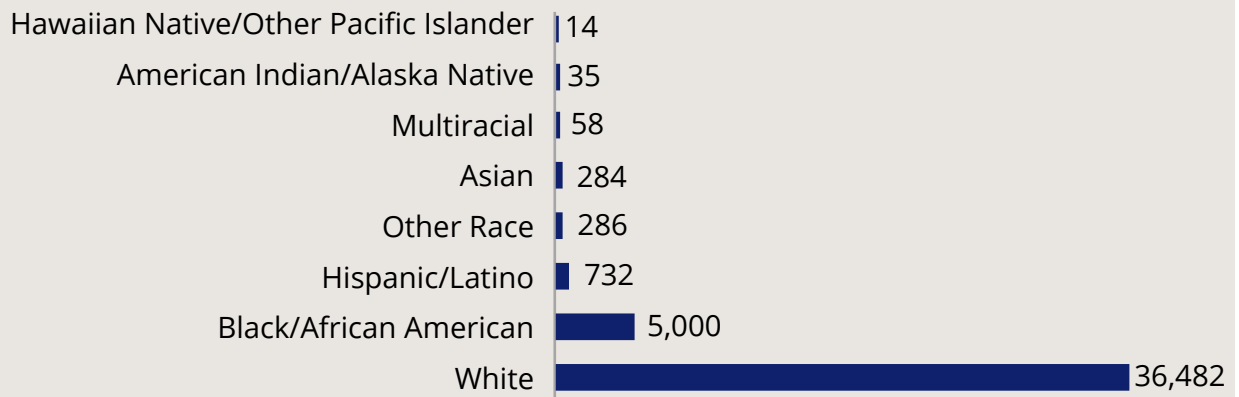
The County Health Rankings & Roadmaps provides nationwide county-level data on health outcomes and factors. In Cuyahoga County, the overall life expectancy is 76.5 years, which is comparable to the state average but slightly lower than the national average of 78.5 years. With the exception of Black residents, all other racial and ethnic groups have higher life expectancies than the county average. Black residents have a life expectancy that is 5.7 years less than their White counterparts, who have the next lowest life expectancy.



The State of Ohio's COVID-19 Mortality Metrics are published on the Ohio Department of Health dashboard. As of the time of writing this report, COVID-19 has resulted in 42,174 deaths across all 88 counties in Ohio. The age group that has experienced the highest number of deaths due to COVID-19 is individuals aged 80 and older. Among Ohio residents who have died due to COVID-19, those who identified as White had the highest number of deaths.



## COVID-19 Mortality Metrics: Race

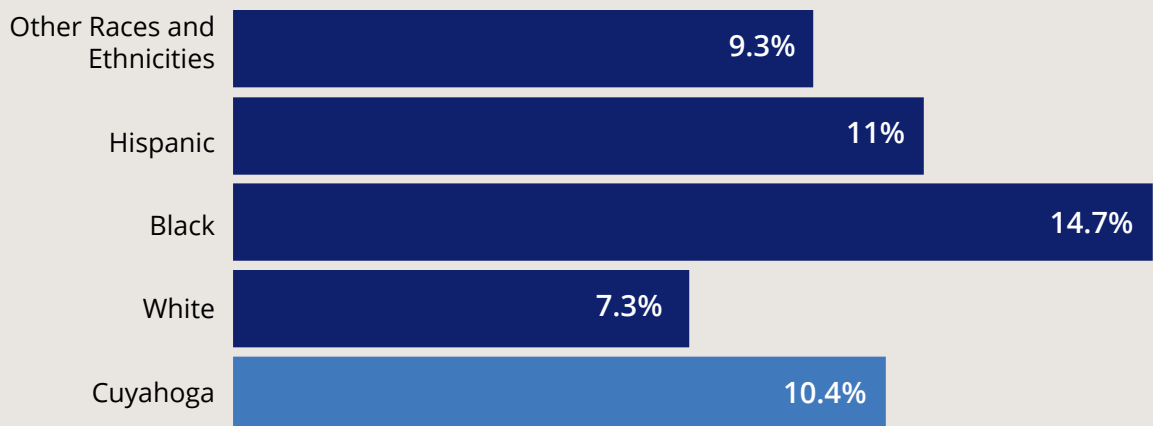


## Pre/Post Natal Care

In Cuyahoga County, low birth weights are primarily due to premature births occurring before 37 weeks of pregnancy. Approximately 10.4% of babies born in the county are considered to have low birth weights, with Black, Hispanic, and babies of other races and ethnicities having a higher incidence of low birth weight than their White peers. According to the March of Dimes, low birth weight babies are more likely to experience breathing problems, bleeding in the brain, intestinal complications, jaundice and infections. Access to prenatal care is essential in reducing the risk of low birth weight.

## Share of babies born weighing less than 5lb 8oz out of all births

Urban Institute Mobility Index

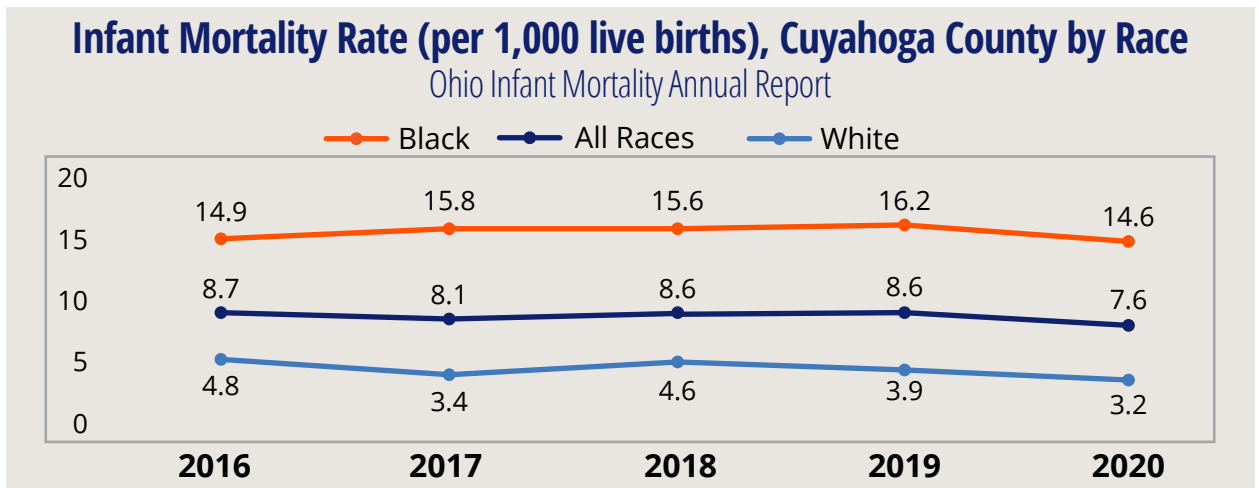


Source: Urban Institute Mobility Index Analysis, Cuyahoga, OH, 2018, Provided February 2023

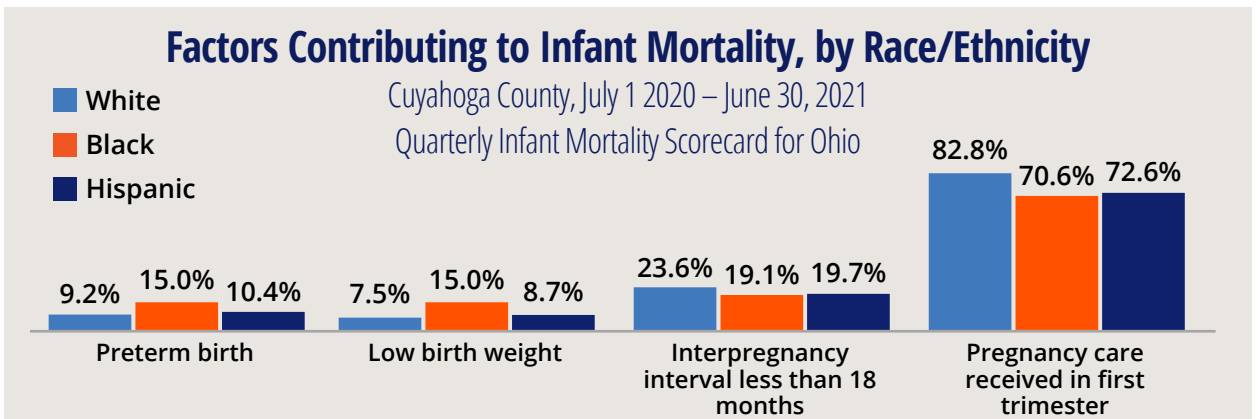
## Infant Mortality

In 2020, 101 Cuyahoga County infants died before their first birthday, for an overall infant mortality rate of 7.7 deaths per 1,000 live births. About two-thirds of those deaths occurred in the neonatal period, which is the first 27 days of life. Preterm birth, complications during delivery and birth defects are the leading causes of most neonatal deaths according to the World Health Organization.

Trends are even more concerning for Black babies. First Year Cleveland reported that 73% of all babies who died in 2020 were African American from all socioeconomic levels. The infant mortality rate for Black babies was more than 4.5 times higher than the rate for White babies. The gap has not closed substantially over the past several years.

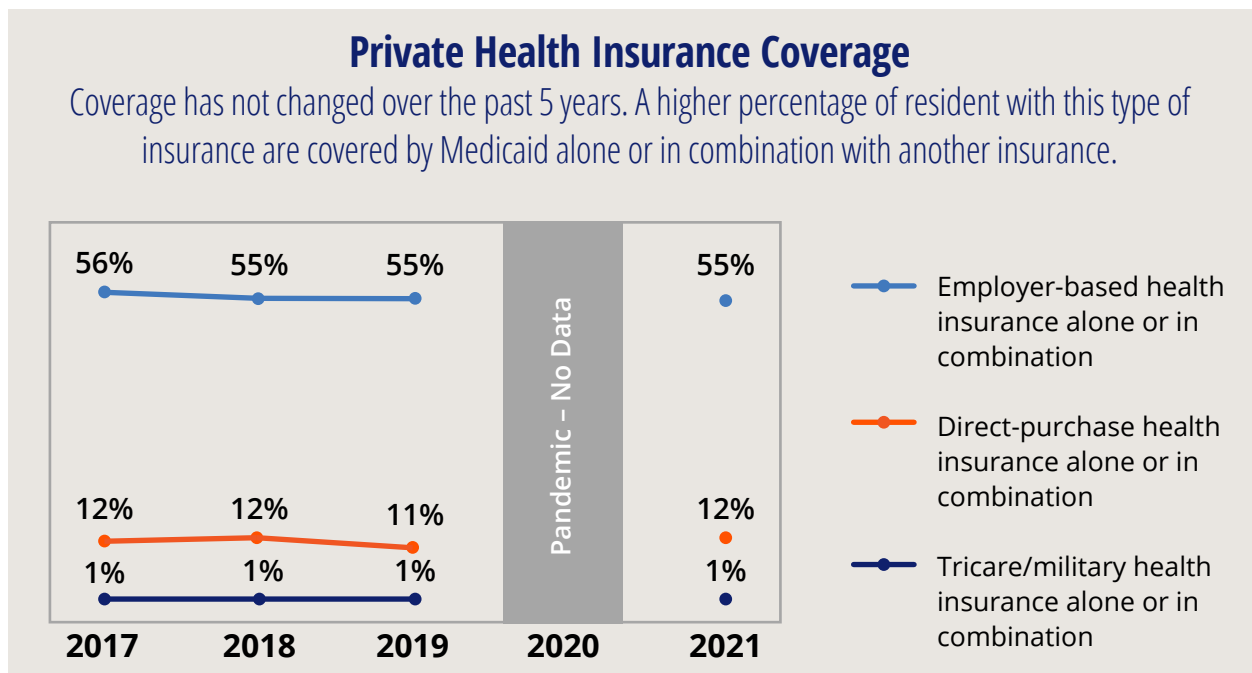
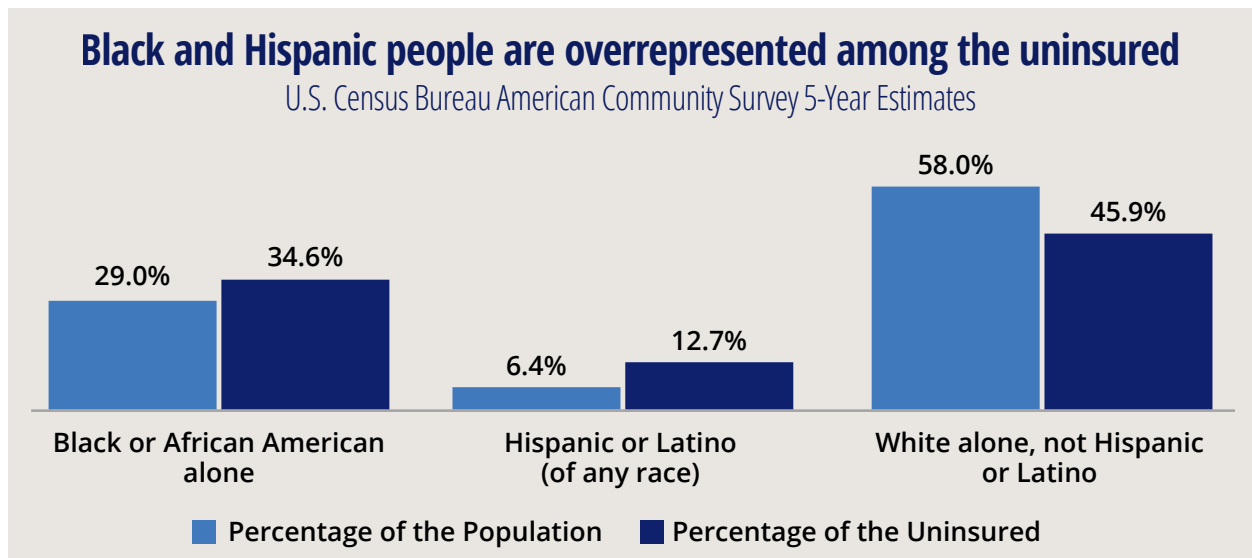


Ensuring access to prenatal care is essential to promoting the health of both the mother and baby, particularly during the first trimester. The National Institute of Health has emphasized that prenatal care can reduce the risk of pregnancy complications and complications for the fetus and infant. It also helps ensure that any medications taken during pregnancy are safe for both the mother and fetus. The Center for American Progress has identified three promising approaches to overcome barriers to prenatal care that have proven effective with Black families. These approaches include group-based care, doula-based programs, and patient-centered team-based models.



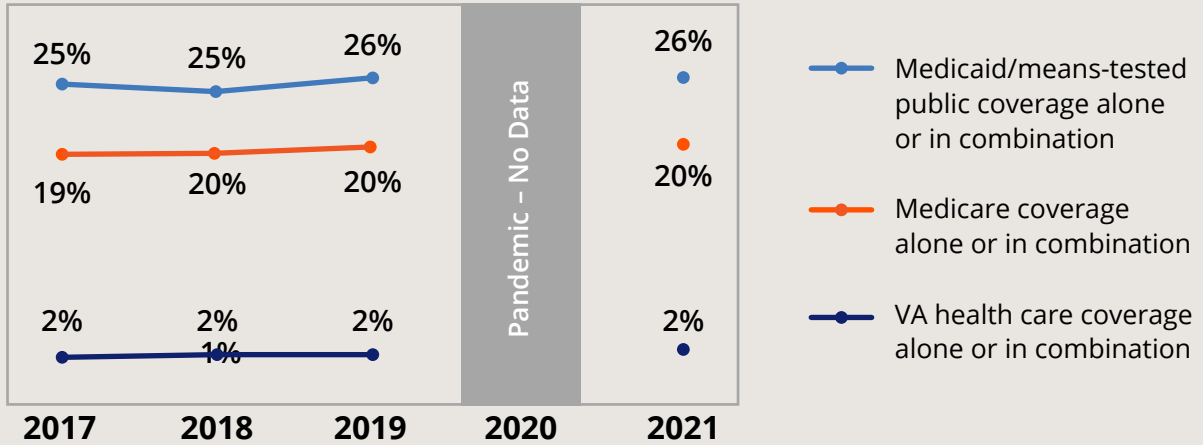
## Access to Health Services

Access to healthcare is important for individuals to address their healthcare needs, and having health coverage, local care options and a regular source of care can facilitate access. In Cuyahoga County, 5.5% of the population, or 68,368 individuals, lacked health insurance in 2021. Working-age adults were more likely to be uninsured, given that Medicare is available for older adults, and Medicaid is available for children in families with incomes up to 200% of the federal poverty level. While there were fewer than 8,000 uninsured children in the county, almost 60,000 working-age adults lacked coverage. Older adults represented a small proportion (1.5%) of those without health insurance in the county.



## Public Health Insurance Coverage

Coverage has not changed over the past 5 years. A higher percentage of resident with this type of insurance are covered by Medicaid alone or in combination with another insurance.

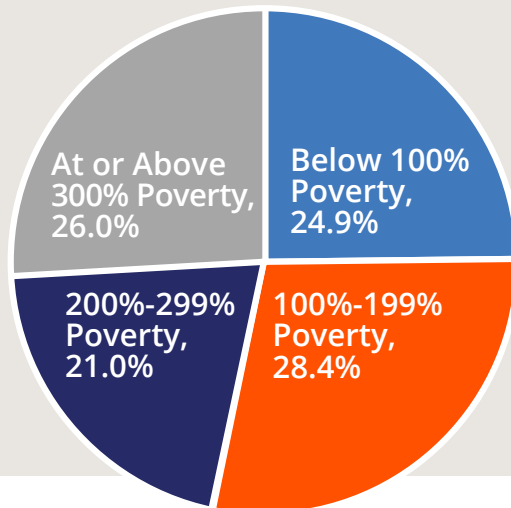


In terms of the uninsured population in Cuyahoga County, there is an almost equal distribution among those with lower and higher incomes.

The County Health Rankings' health model takes into account several healthcare access indicators. Cuyahoga County performs better than the rest of the state in terms of provider availability, with 870 residents per primary care physician and 920 per dentist. These figures are significantly lower than the state average of 1290:1 and 1570:1, respectively. The county also has a relatively low ratio of 230 residents per mental health provider, which includes therapists specializing in substance abuse and marriage and family therapy.

## Uninsured Individuals in Cuyahoga County, by Income to Poverty Ratio, 2021

U.S. Census Bureau American Community Survey 5-Year Estimates



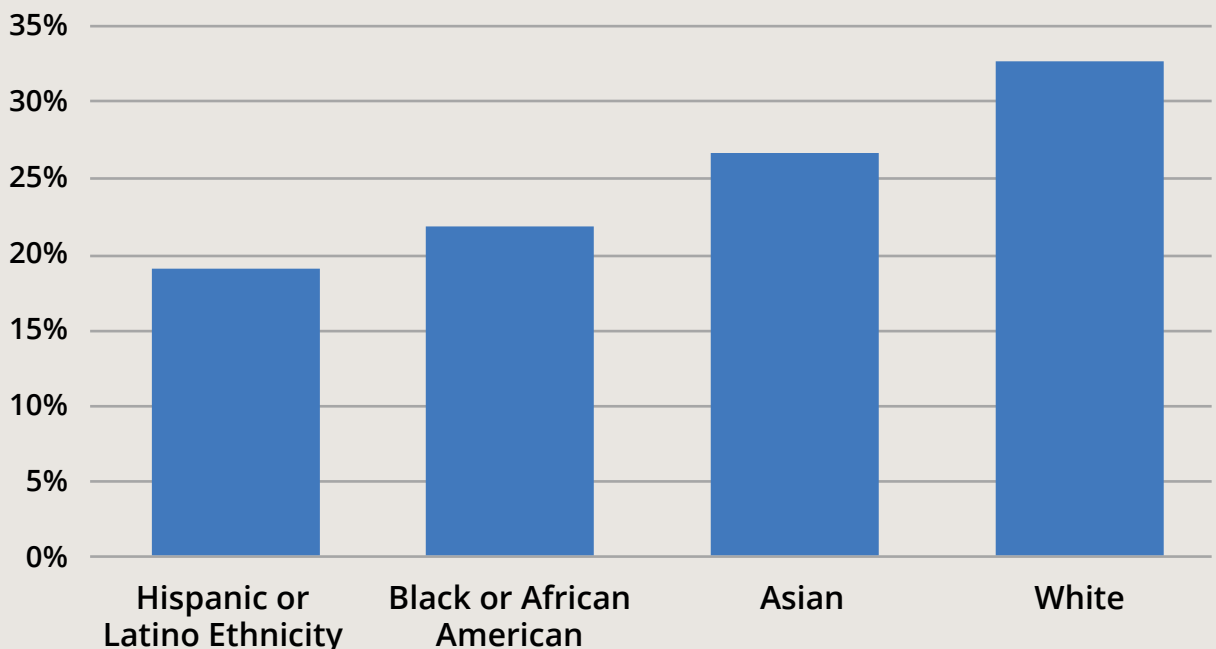
However, despite 90.7% of Cuyahoga County adults having a regular source of care in 2021, based on the Ohio Medicaid Assessment Survey, 17.9% found it more challenging to access the care they required than three years ago. More than one-quarter of adults postponed or avoided getting the healthcare they needed in the previous year, with the most common reasons being the cost, unavailability of preferred provider, inability to locate a provider or lack of transportation.

## COVID-19 Vaccination

The availability of vaccines for severe COVID-19 illness facilitated the resumption of in-person services by schools and service providers, and allowed most people to return to normal activities. In Ohio, the first vaccines for adults were introduced in late December 2020. To date, more than 875,700 residents of Cuyahoga County have received at least one dose of the COVID-19 vaccine. While nearly three-quarters of the population over the age of 5 in the county have received the first dose, only 22% have been fully vaccinated with the updated bi-valent booster, which was released in September 2022.

### Share of Vaccinated Individuals who are Up-to-date with Boosters, by Race/Ethnicity – Cuyahoga County

Ohio COVID-19 Vaccination Dashboard, Accessed 3/15/2023



12/14/2020  
First Vaccine  
Started

12/22/2020  
First Vaccine  
Completed

8/13/2021  
Initial First  
Booster

3/29/2022  
Initial Second  
Booster

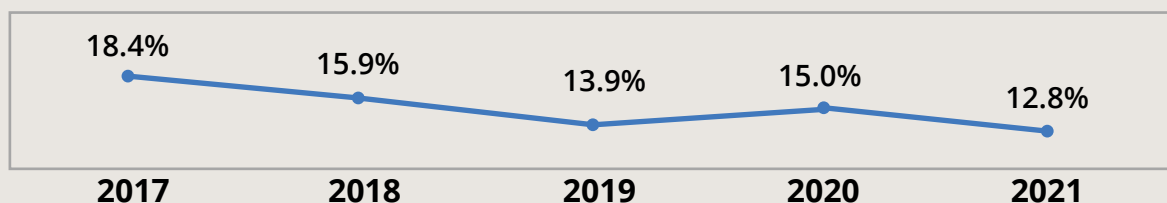
9/1/2022  
First Bi-Valent  
Update

## Food Insecurity

**Food insecurity** is a lack of consistent access to enough food for an active, healthy life and is associated with a lack of available financial resources for food at the household level. In Cuyahoga County, 161,670 people were food insecure in 2021, according to Feeding America. This placed the food insecurity rate in the county at 12.8% that year. More than half (55%) of those who were food insecure were below the SNAP threshold of 130% of the federal poverty level, while 45% were above it.

### Food Insecurity – Cuyahoga County

The percentage of people of all ages who are food insecure in Cuyahoga has declined significantly since 2017, even after the pandemic. The food insecurity rate in 2021 was the lowest it had been in 5 years.



Source: Feeding America, 2021

## Environmental Quality

Environmental quality data was accessed through Healthyneo.org in March 2023. Poor environmental quality such as pollutants in air and water, inadequate maintenance of public buildings and infrastructure, hazards in homes, limited access to public amenities leading to less physical activity and extreme weather conditions can contribute to health problems.



The American Lung Association has rated Cuyahoga County an "F" in Air Quality. The rating has not changed over the past decade. Poor air quality can make breathing difficult and worsen existing lung conditions, with children, people with lung disease, and older adults being especially vulnerable.



The Physical Health Environment in Cuyahoga County is ranked 85 according to County Health Rankings. This ranking takes into account fine particulate matter, drinking water violations, severe housing problems, driving alone to work and a long commute while driving alone; Cuyahoga is in the worst 25% of Ohio counties for this measure.



In 2021, Cuyahoga County experienced 25 Extreme Heat Days according to the National Environmental Public Health Tracking Record, and the number of high heat days over the past 9 years has varied between 12 and 46. Extreme heat can cause heat rash, heat exhaustion, and heat stroke and is a leading cause of weather-related deaths. The county also had 30 Extreme Precipitation Days in 2021, which can lead to more frequent extreme storms and flooding incidents.

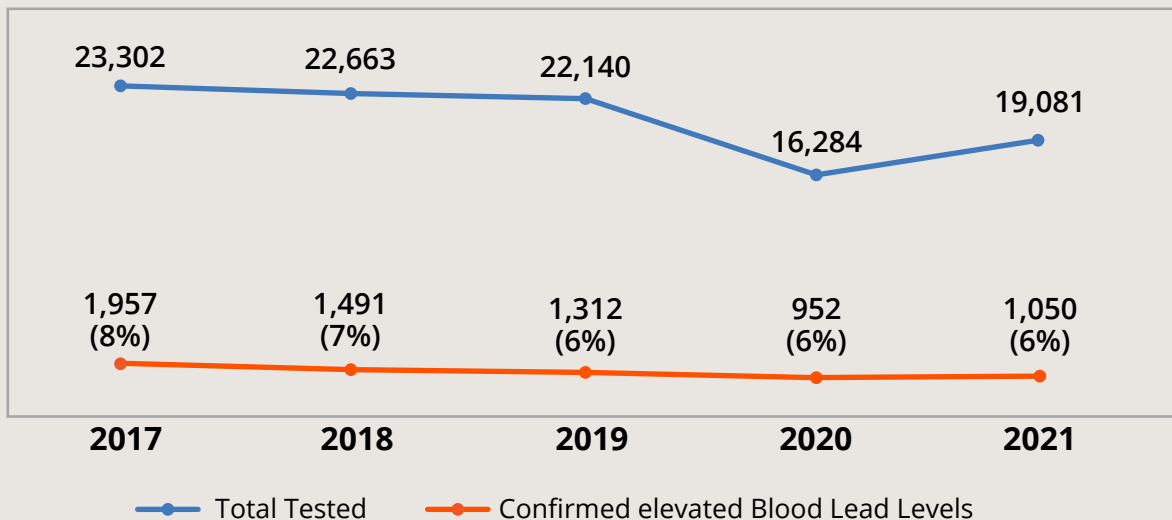


## Lead Poisoning

The age of available housing is a significant factor in determining the quality of housing and potential health hazards. According to Healthy Northeast Ohio's website, houses built before 1950 that have not undergone substantial updates may contain hazardous materials. For example, lead-based paint, which was banned in the United States in 1977, is a known toxin that can cause nervous system damage, stunted growth and delayed development, especially in children under 6 years of age. The long-term inhalation of asbestos fibers from insulation in older homes can also trigger cancer development and other lung diseases such as asbestosis.

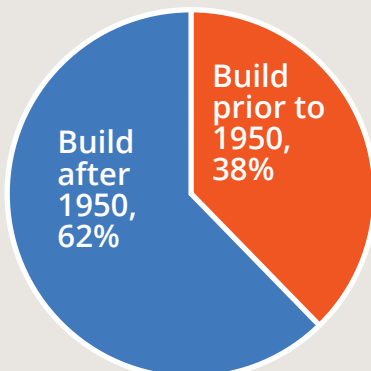
### Blood Levels of Lead – Cuyahoga County

In the last 5 years, confirmed elevated blood levels of lead in children under 6 have decreased in Cuyahoga County.



Source: Ohio Department of Health

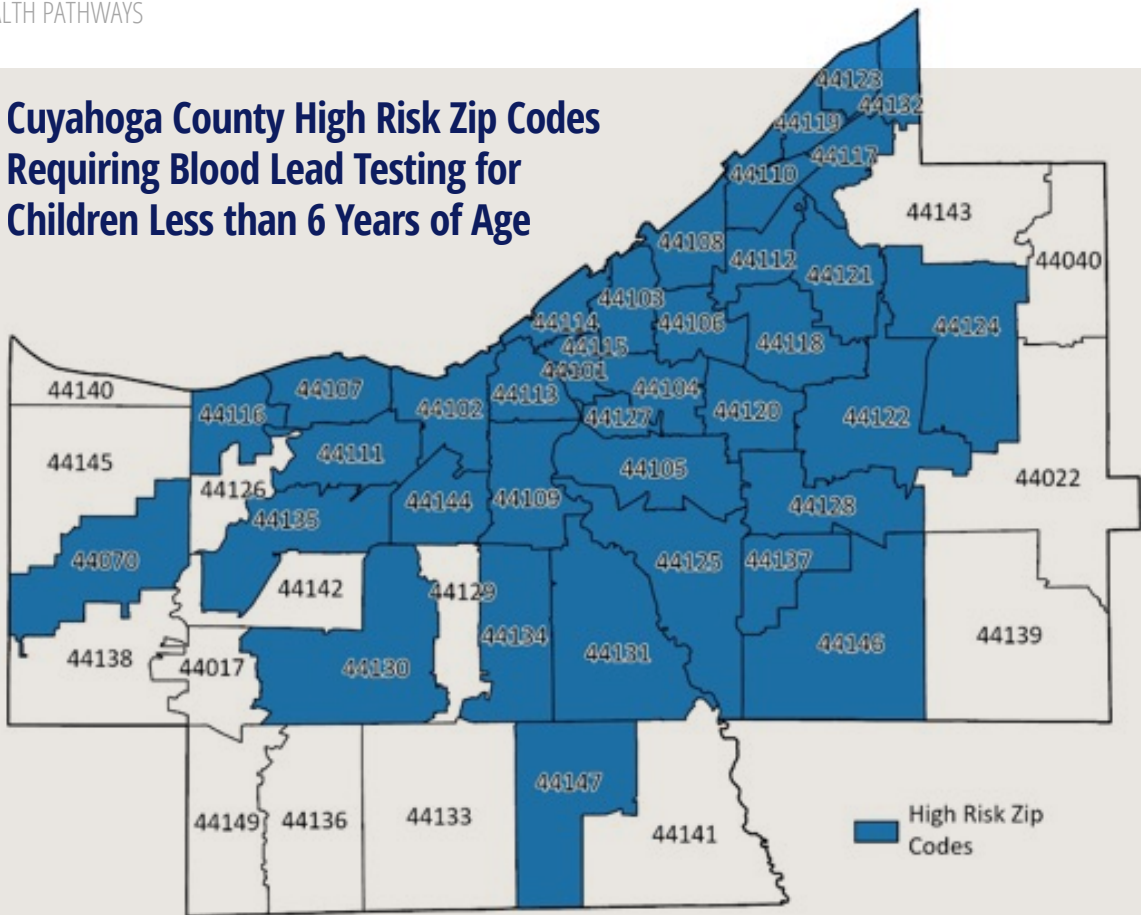
### Age of Housing



Source: U.S. Census Bureau ACS 5-year averages 2021 accessed on Healthy Northeast Ohio March 2023



## Cuyahoga County High Risk Zip Codes Requiring Blood Lead Testing for Children Less than 6 Years of Age



Source: Ohio Department of Health

In Cuyahoga County, nearly two out of every five homes were built before 1950, which is one reason why blood lead testing for children under 6 years of age is required for many zip codes. In 2021, there were 1,050 confirmed cases of elevated blood lead levels in children in Cuyahoga County, which can lead to permanent, irreversible effects on their brains, organs, mental, and behavioral health. Low-income children and families of color are disproportionately affected by lead poisoning, which is more prevalent in historically redlined neighborhoods, perpetuating generational poverty and racial injustice.

In Ohio, an elevated level of lead is defined as 5  $\mu\text{g}/\text{dL}$  of blood, but the Lead Exposure and Prevention Advisory Committee recommended updating the reference value to 3.5  $\mu\text{g}/\text{dL}$ . In 2021, 70% of elevated blood lead levels in children were between 5-10  $\mu\text{g}/\text{dL}$ , and an additional 29% were between 10-45  $\mu\text{g}/\text{dL}$ . Half of one percent of blood tests revealed lead levels of 45  $\mu\text{g}/\text{dL}$  or greater, indicating the need for active treatment to remove the lead from a child's body. Even at lower levels, additional testing and monitoring are necessary, and the source of lead exposure must be identified and removed.

### Confirmed elevated blood levels in 2021 for children less than 6 years of age

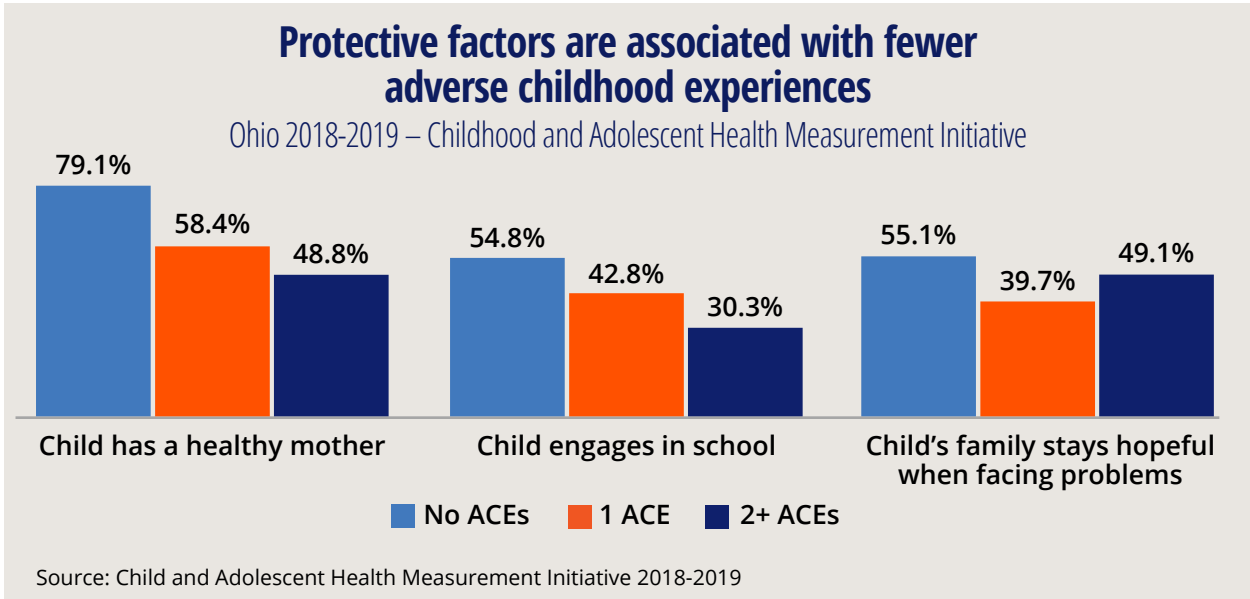
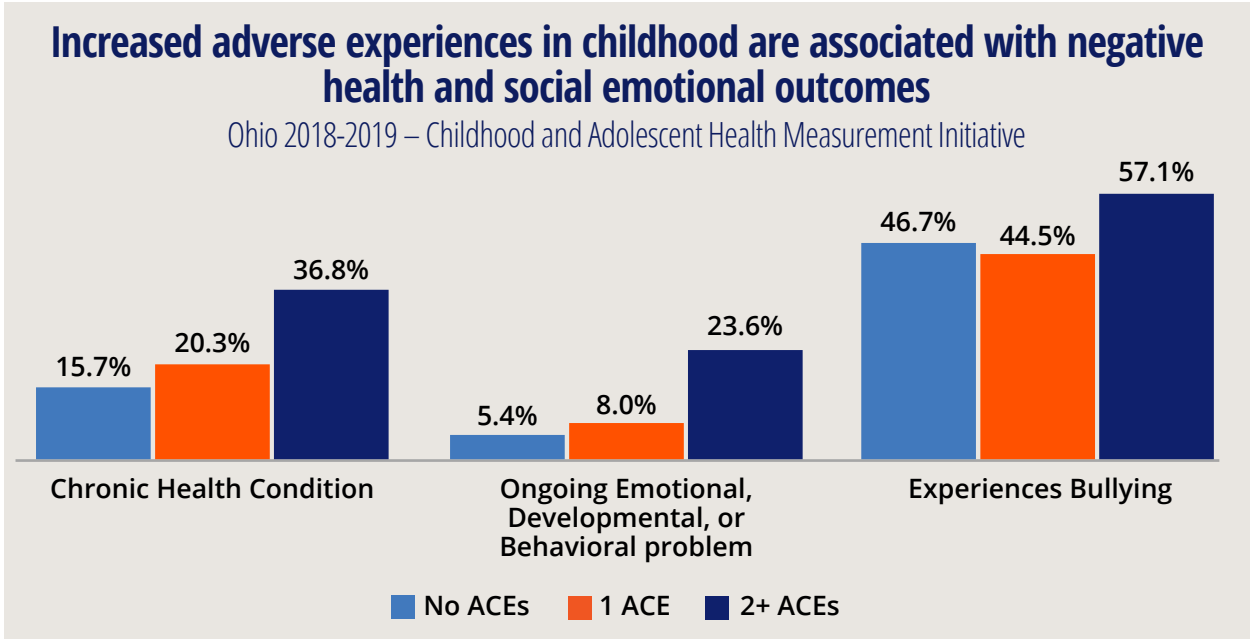
739  
5-<10  $\mu\text{g}/\text{dL}$

306  
10-<45  $\mu\text{g}/\text{dL}$

5  
45+  $\mu\text{g}/\text{dL}$

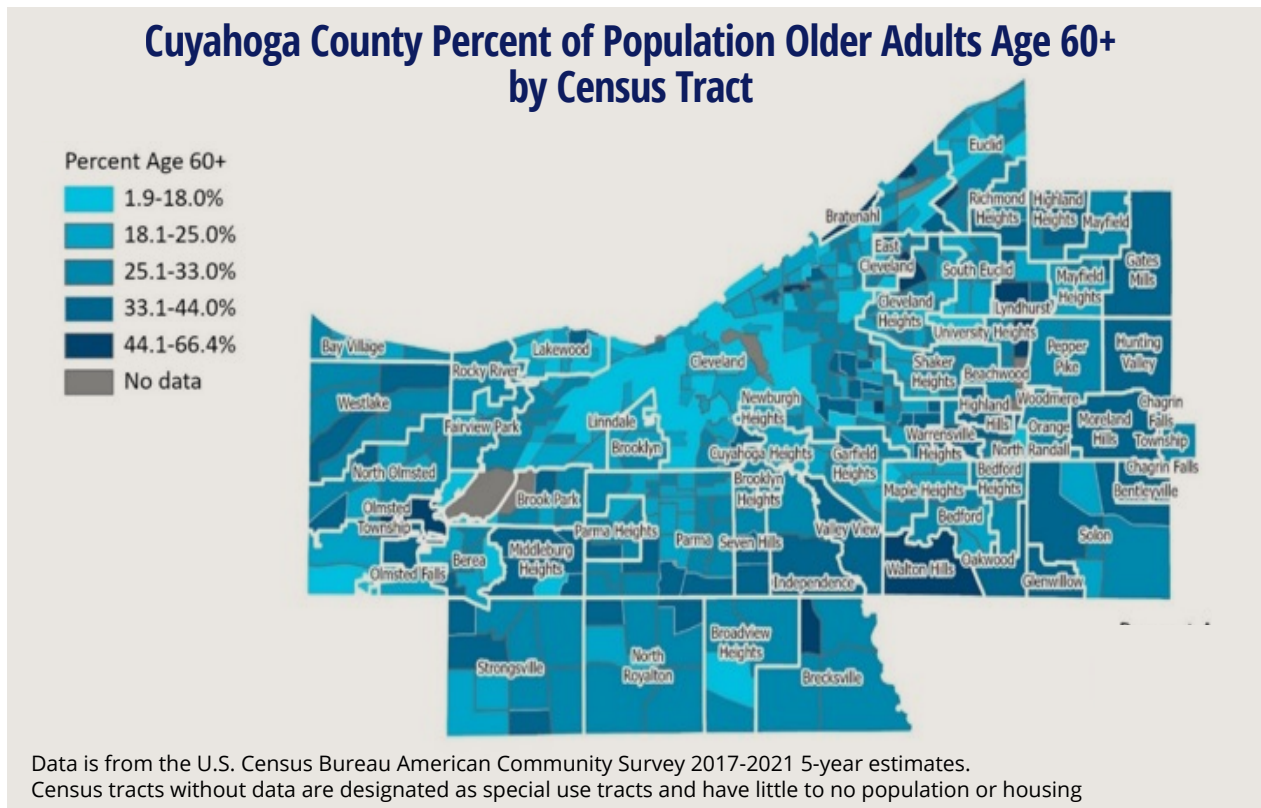
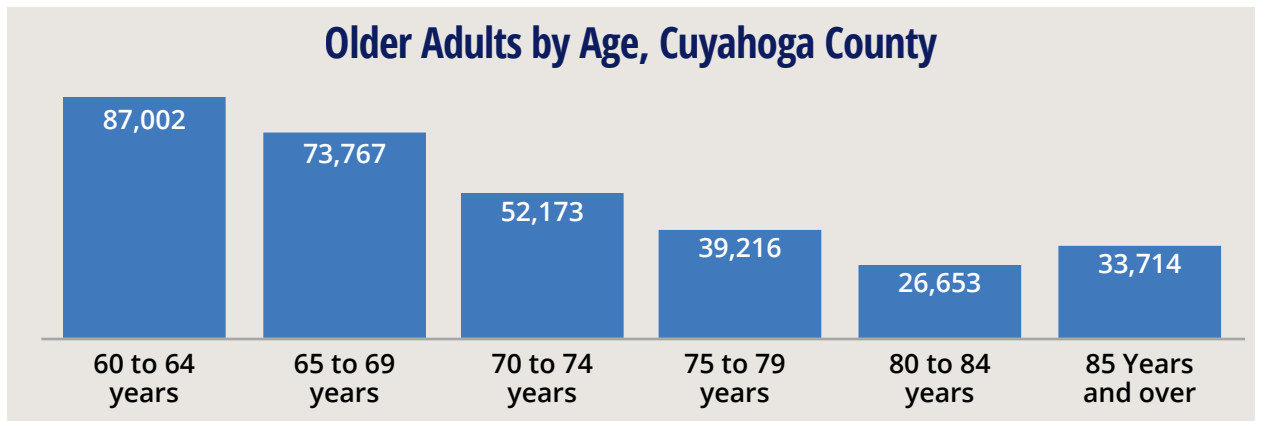
# Adverse Childhood Experiences

**Adverse Childhood Experiences (ACEs)** are potentially traumatic events or conditions that occur in childhood, such as witnessing violence in the community, growing up in a household with substance use or mental health problems, parental separation or experiencing violence, abuse or neglect. In Ohio, slightly more than half of children (57% have not faced any ACEs). However, 20% of children have experienced at least one ACE and 22% have had two or more such experiences. These rates are slightly higher than the national average. Studies conducted by the CDC and Kaiser have revealed that children with ACEs are more likely to suffer from chronic physical or mental health problems, as well as being involved in bullying as either victims or perpetrators.

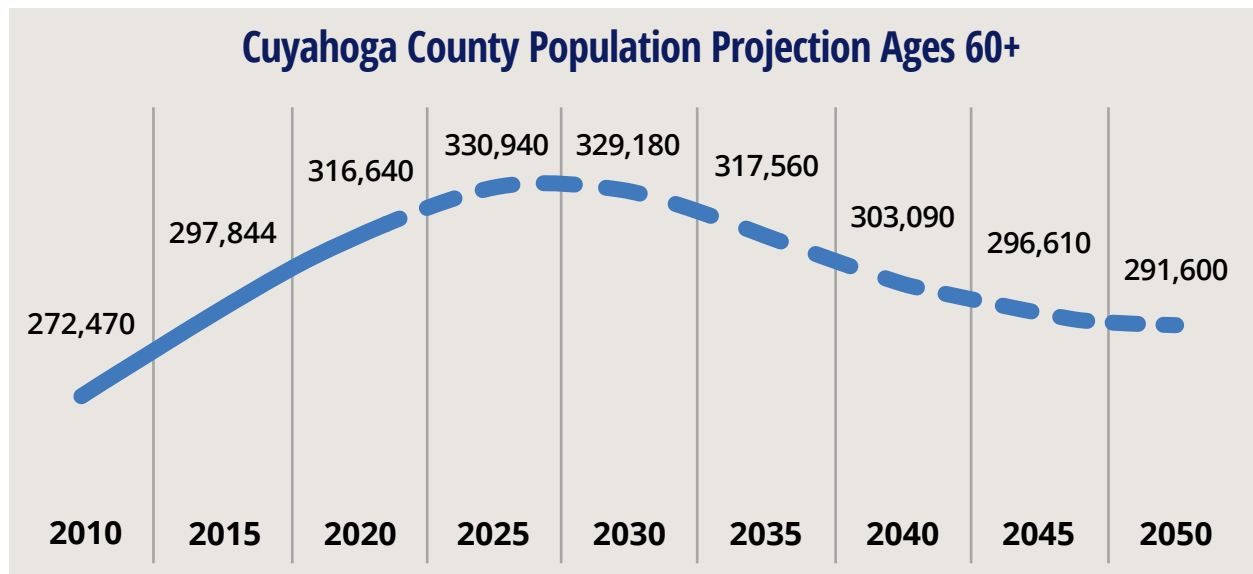


## Older Adults

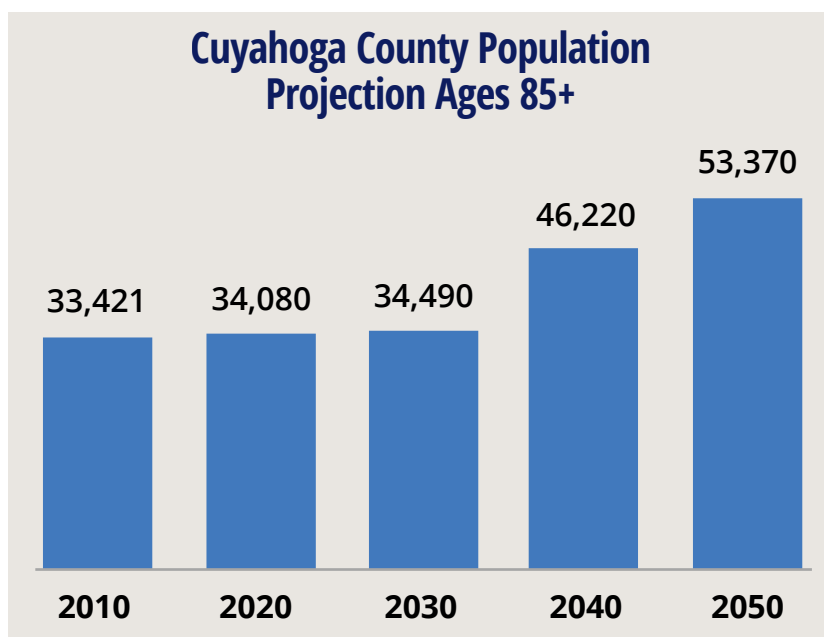
Cuyahoga County has a population of over 312,000 residents aged 65 and older, with a gradual decrease in numbers between groups of five-year increments by approximately 11-15,000. Interestingly, the percentage of those aged 85 and older is higher than those between the ages of 80 to 84, reflecting a growing population of individuals in their late 80s, 90s, and 100s. The following map displays the percentage of residents aged 60 and over in each census tract throughout the county, with darker colors indicating a higher concentration of older adults in the community. It is worth noting that the city center of Cleveland has a lower concentration of older adults compared to many of the surrounding suburbs, as well as those in the outlying suburbs.



Starting in the 2010s the older adult population across the country begin to increase as baby boomers joined the ranks of older adults. This population is projected to increase steadily for the next few years before it begins to decline again in the 2030s.



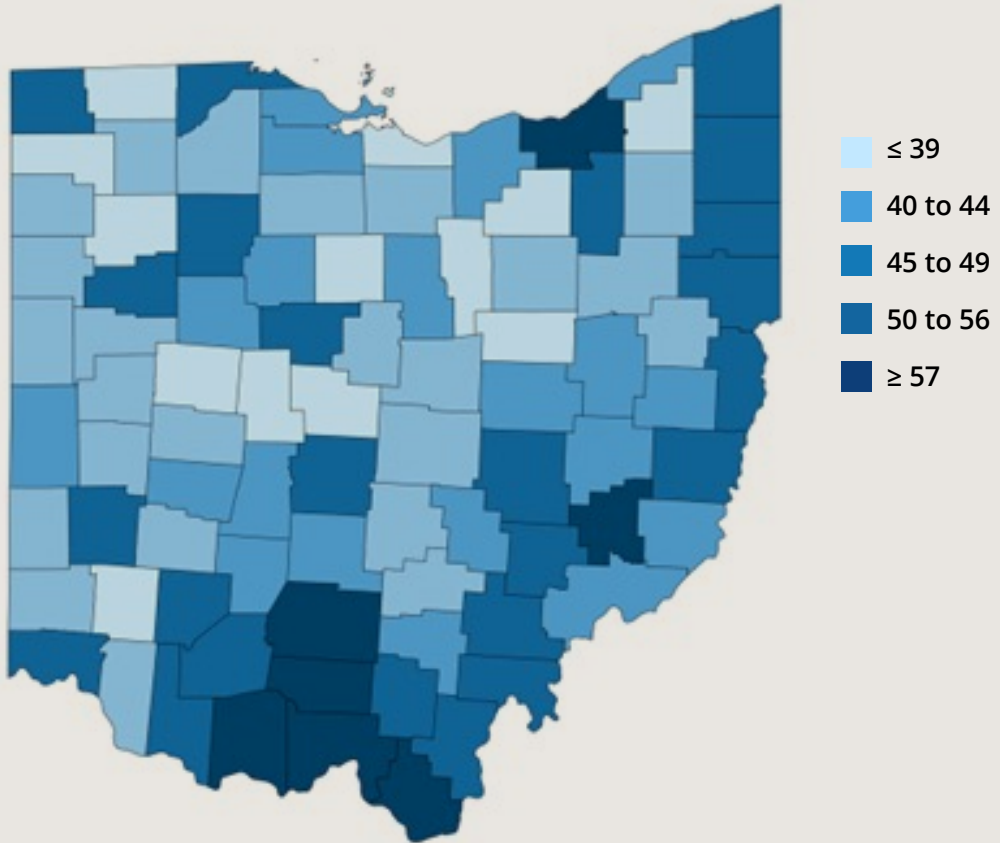
Although the overall number of older adults will begin to level out and then decrease in 2030 and beyond, it is projected that those aged 85 and older will continue to grow through 2050 and beyond. The corresponding increase in seniors desiring to live independently will require additional support services.



The U.S. Census Bureau defines a “nonfamily household” as one where a person is living alone, or with people they are not related to.

### Risk of Social Isolation by County

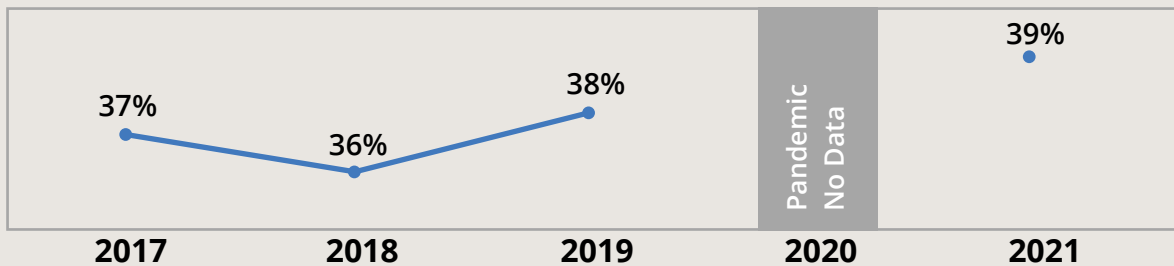
Index of social isolation risk factors: poverty, living alone, divorced, separated or widowed, never married, disability, and independent living difficulty among adults ages 65 and older, relative to all U.S. counties; normalized values are 1 to 100, with a higher value indicating greater risk.



Source: U.S. Census Bureau, American Community Survey 2016-2020

### Title (bold): Adults Age 65+ Living Alone

The percentage of adults aged 65 and older living alone has increased slightly in the past five years.



## Social Vulnerability

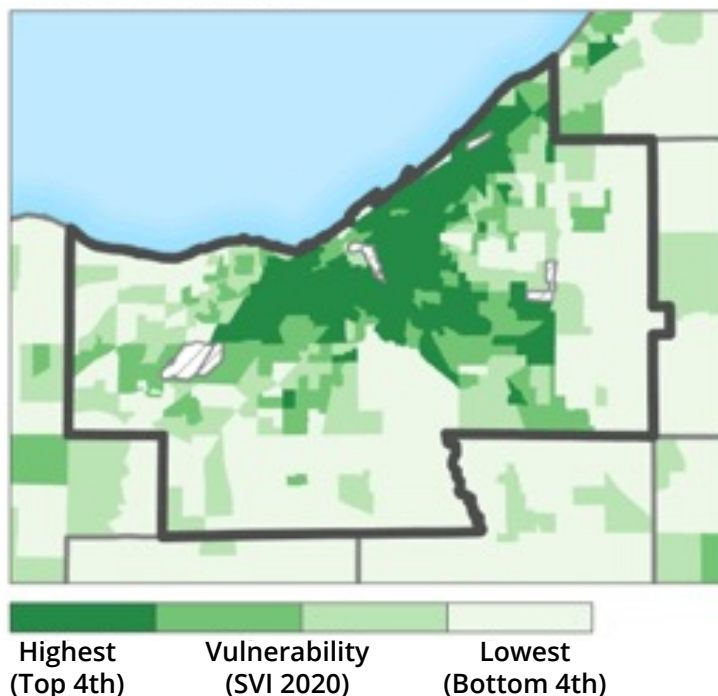
**Social vulnerability** refers to the potential negative consequences of external stressors on human health in communities. Such stressors may include natural or human-caused disasters, or disease outbreaks. The Centers for Disease Control and Prevention's Agency for Toxic Substances and Disease Registry has developed a social vulnerability index to assist local officials in identifying communities that may require support prior to, during or after disasters. This index is used to assess the stability of a community. Reducing social vulnerability can lower both human suffering and economic loss.

In 2020, Cuyahoga County had a social vulnerability index score of 0.9195, indicating a high level of vulnerability, with 1 being the highest possible score. Within the county, there is variation in index ratings among communities. The communities with the highest ratings include most of the City of Cleveland, many of the inner ring suburbs and a few outer ring suburbs, such as Parma, Bedford and Berea. The index comprises sixteen metrics grouped into four categories: socioeconomic status; household characteristics; racial and ethnic minority status; and housing type and transportation. The socioeconomic status portion of the vulnerability index includes data from the American Community Survey 5-Year 2020 estimates.

Individuals living in areas with high socioeconomic vulnerability may have limited access to personal and community resources to manage financial challenges. The socioeconomic status index includes variables such as residents with incomes below 150% of the federal poverty level, unemployment, housing cost burden, lack of high school diploma and no health insurance. Cleveland and its surrounding areas experience high rates of socioeconomic vulnerability. As one moves further away from the city, vulnerability tends to decrease, with the far east, west and southern suburbs showing the lowest levels of vulnerability.

The household characteristic index includes population groups that may have difficulty navigating systems during a crisis, such as residents aged 65 and older, aged 17 and younger, those with disabilities, single-parent households and those with limited English proficiency. High vulnerability in this index is observed throughout the county, with slightly higher concentration in Cleveland. However, pockets of medium

### Socioeconomic Status

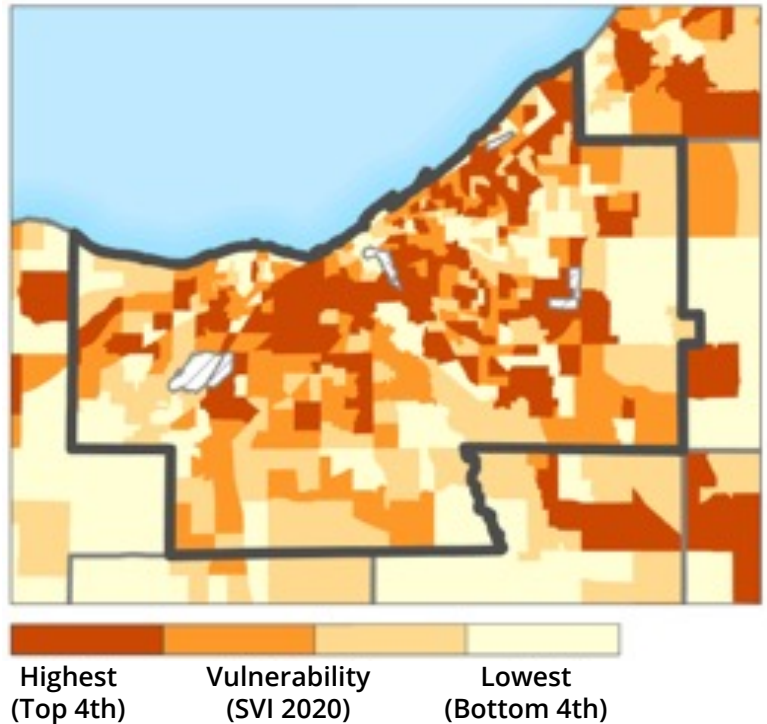


and low vulnerability can be found in both the city and inner ring suburbs, and the southern outer areas of the county have lower vulnerability. Services and resources for these groups should be located throughout the county, with a slightly higher concentration in Cleveland.

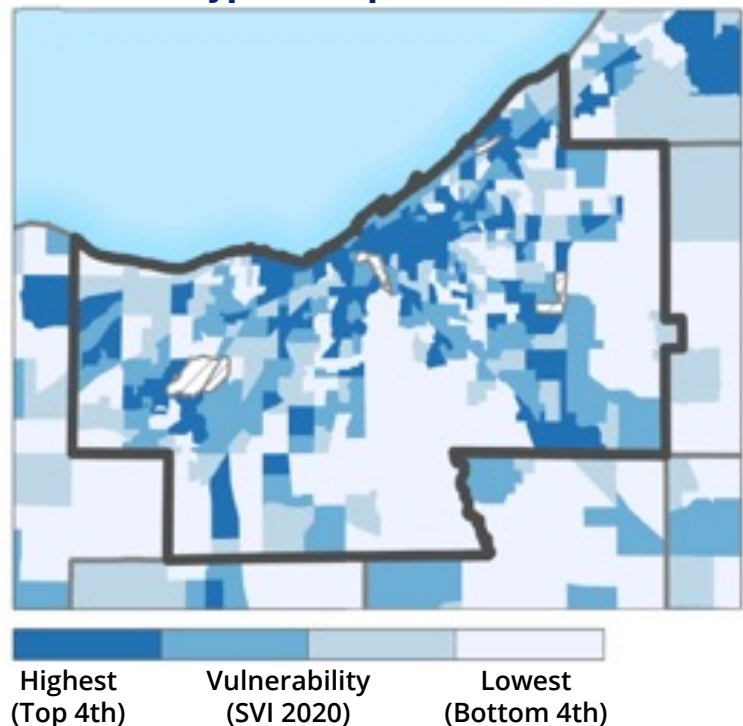
The housing type and transportation index consider the presence of multi-unit structures, mobile homes, crowding, lack of vehicles and group living arrangements. Residents included in this index face challenges in efficiently navigating their communities and experience both the stressors and benefits of close-quarters living. A significant portion of the county's south-central region has low vulnerability in this index. Conversely, high vulnerability is evident within the central region of Cleveland, with pockets of high-medium vulnerability in the eastern and western areas of the county. To address this, mediation and specialized transportation services should prioritize the high and high-medium vulnerability areas of the county.

The Racial and Ethnic Minority Index is a map of residents who are Hispanic or Latino (of any race), and those who are not Hispanic Latino and identify as Black and African American, American Indian and Alaska Native, Asian, Hawaiian and Other Pacific Islander, Two

## Household Characteristics



## Household Type/Transportation

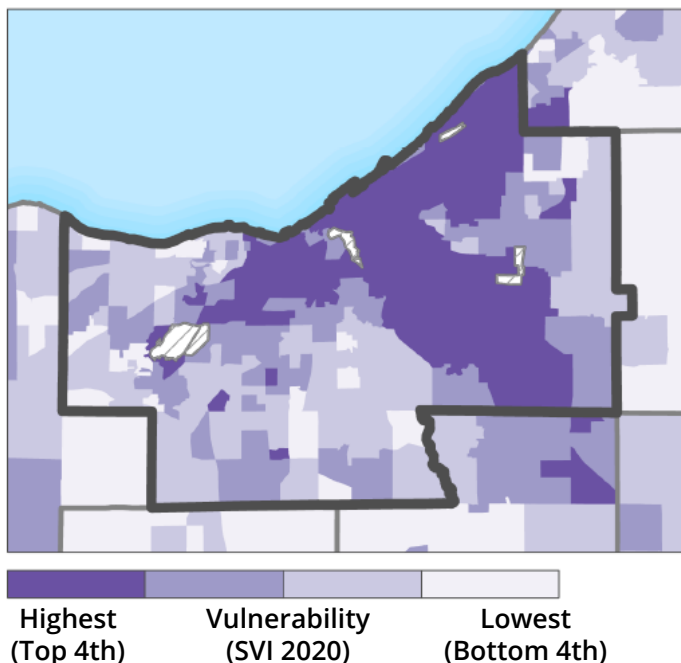




or More Races and Other Races. Historic disinvestment in BIPOC communities has left them more vulnerable to external stressors and crisis situations.

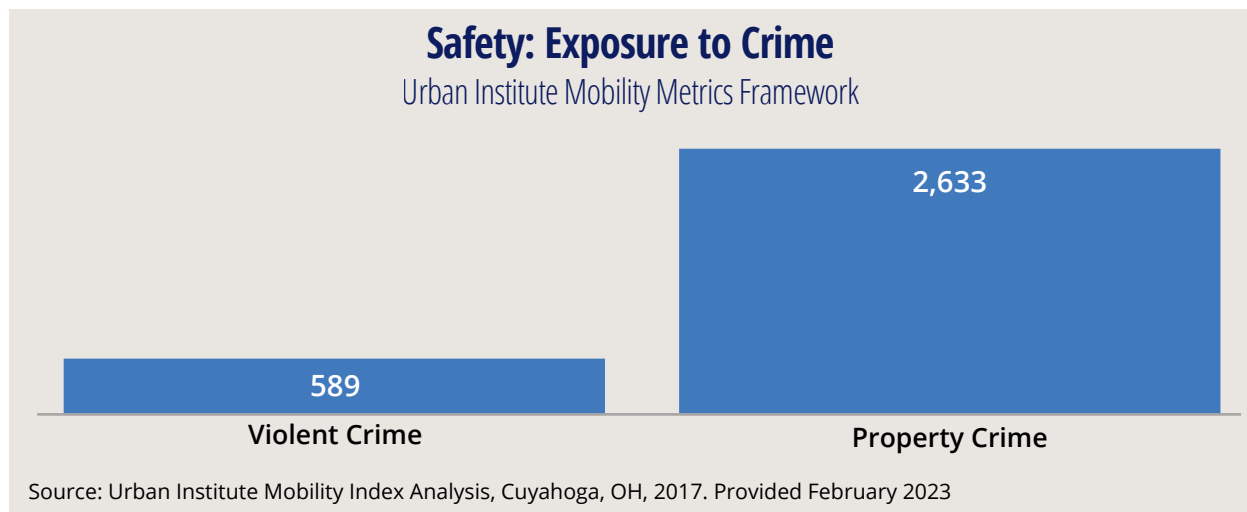
In Cuyahoga County, the most vulnerable areas in this index are in Cleveland, the eastern suburbs and the south-eastern suburbs. Investment into these communities, including economic development as well as health and social services, can improve the conditions and provide residents with resources necessary to weather a crisis.

## Racial and Ethnic Minority Status



## Exposure to Crime

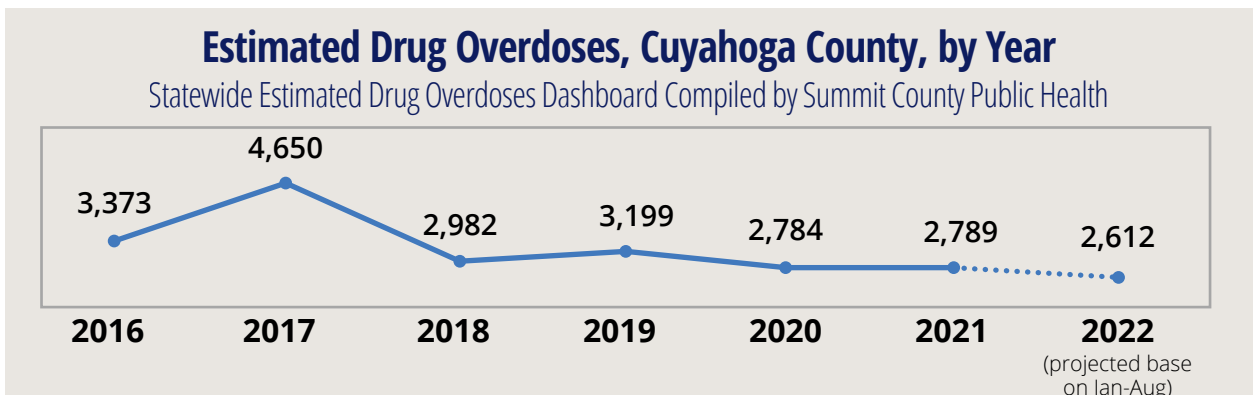
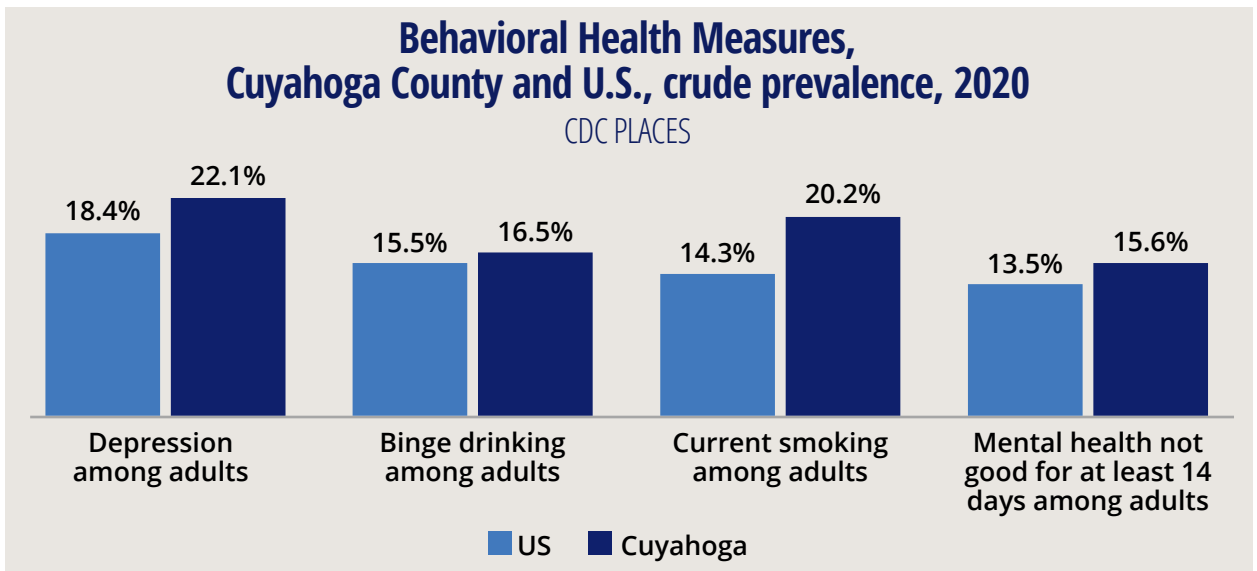
Safety from crime, especially violent crime, is associated with positive psychological and educational outcomes, which might have long-term consequences on economic mobility later in life. Research shows that individuals who believe that crime is a severe problem in their neighborhoods experience more stress and depression than individuals who think their neighborhoods are safer. Being a victim of crime can affect physical and mental health as well as material well-being. Thus, safety from crime can have wide-ranging effects on mobility. There were 589 violent crimes and 2,633 property crimes reported per 100,000 people in Cuyahoga County. The violent crime category includes murder or non-negligent manslaughter, forcible rape, robbery and aggravated assault, while the property crime category includes burglary, larceny-theft, motor vehicle theft and arson.



## Behavioral Health

**Behavioral health encompasses mental illness and substance use disorders.** In Cuyahoga County, the Alcohol, Drug Addiction and Mental Health Services (ADAMHS) Board is responsible for planning, funding and monitoring public mental health and addiction treatment and recovery services for residents. According to CDC PLACES data, Cuyahoga County fares worse than the national average across all behavioral health measures. Of particular concern is the fact that over one in five adults are current smokers, and almost a quarter have diagnosed depression. Binge drinking is also prevalent, with 16.5% of adults reporting consuming five or more drinks (men) or four or more drinks (women) on a single occasion in the past month.

The ADAMHS Board's strategic plan for 2020 reveals that over 62,000 adults experienced mental illness in the previous year but did not receive treatment. Among the 12,455 youth who reported experiencing a major depressive episode, only around half received treatment. The number of estimated drug overdoses in Cuyahoga County is based on emergency department visits where drugs were identified as the cause of traumatic injury and only includes cases where case notes mention "OD" or "overdose." This figure does not account for suicide attempts or injuries resulting from non-drug-related incidents.



From 2016 through 2022, several zip codes in Cleveland experienced at least 1,000 drug overdoses, with three on the west side (44109 — Clark-Fulton/Old Brooklyn, 44102 — Edgewater/Detroit Shoreway and 44111 - Kamm's Corners/Jefferson) and one on the east side (44105 — Slavic Village/Union Miles). Two other zip codes outside Cleveland, 44107 (Lakewood) and 44130 (Middleburg Heights), also had high numbers of drug overdoses. The majority of overdose patients were male (62.6%) with an average age of 38.0 years.

Between 2018 and 2021, Cuyahoga County lost 3,583 residents to "Deaths of Despair," including suicide, accidental poisoning (including drug overdose) and chronic liver disease and cirrhosis. These deaths accounted for 5.9% of all deaths in the county during the four-year period, or more than 1 in 20 deaths.

