

Community Health Needs Assessment Core Health Indicators Report

Clark County
May 2014

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<http://www.prchn.org/ReportsAndPublications.aspx>

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Prevention Research Center for Healthy Neighborhoods
at Case Western Reserve University



To Whom It May Concern:

The Prevention Research Center for Healthy Neighborhoods (PRCHN) is partnering with The Community Commons to offer the Northeast Ohio Maps and Data (NOMAD), an innovative, customized data sharing and geographic mapping system that allows groups to integrate their local place-based data within a national GIS database that contains thousands of health, economic, social, physical, environmental, etc. indicators associated with community health. Enclosed is a **Community Health Needs Assessment (CHNA) Core Health Indicators Report** for your county, which includes a limited number of indicators that are selected to align with national health improvement initiatives focused on tobacco free living, healthy eating and active living, clinical prevention services, and social and emotional wellness. The report covers five topic areas: Demographics, Social & Economic Factors, Physical Environment, Clinical Care, and Health Behaviors.

This report was created on May 21, 2014 with the CHNA community toolkit using the Community Commons website at <http://assessment.communitycommons.org/CHNA/>. The report has been produced by the Community Commons team and is being distributed by the PRCHN.

A Full Health Indicators Report is available that uses the County Health Rankings, The Community Guide, Healthy People 2020 and other widely used data sets to give a broader picture of your county and can be found on the Community Commons website. The Community Commons is free to join and the site acquires and updates data on an on-going basis.

For more information about the Full Indicators Report or to inquire about receiving an electronic copy of this report, please contact Michelle Menegay at mcm54@case.edu | 216-368-2826.

Sincerely,

Elaine Borawski, PhD
Director, Prevention Research Center for Healthy Neighborhoods





COMMUNITY HEALTH NEEDS ASSESSMENT

Advancing Community Health and Well Being

Core Health Indicators Report

DEMOGRAPHICS

Report Area: Clark County, OH

Demographics // Social & Economic Factors // Physical Environment // Clinical Care // Health Behaviors

Change in Total Population

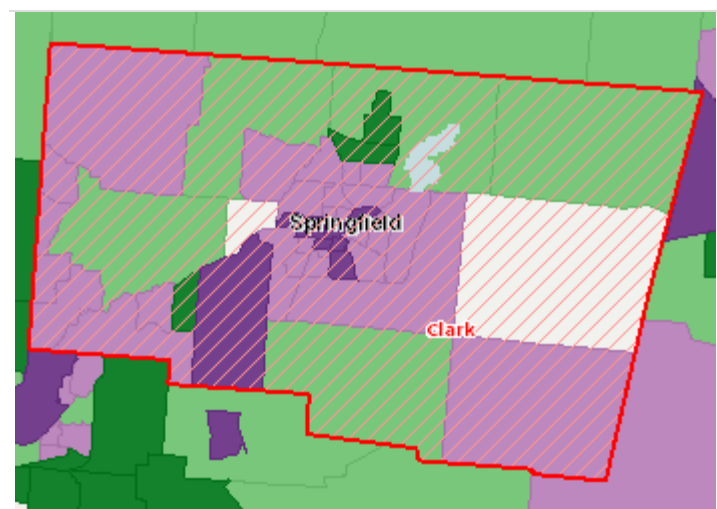
Current population demographics and changes in demographic composition over time play a determining role in the types of health and social services needed by communities.

Change in Total Population

According to the U.S. Census Bureau Decennial Census, between 2000 and 2010 the population in the report area fell by 6404 persons, a change of -4.42%. A significant positive or negative shift in total population over time impacts healthcare providers and the utilization of community resources.

Report Area	Total Population, 2000 Census	Total Population, 2010 Census	Total Population Change, 2000-2010	Percent Population Change, 2000-2010
Clark County, OH	144,737	138,333	-6,404	-4.42%
Ohio	11,353,140	11,536,504	183,364	1.62%
United States	280,421,907	307,745,539	27,323,632	9.74%

Data Source: US Census Bureau, [Decennial Census](#): 2000 - 2010. Source geography: Tract.

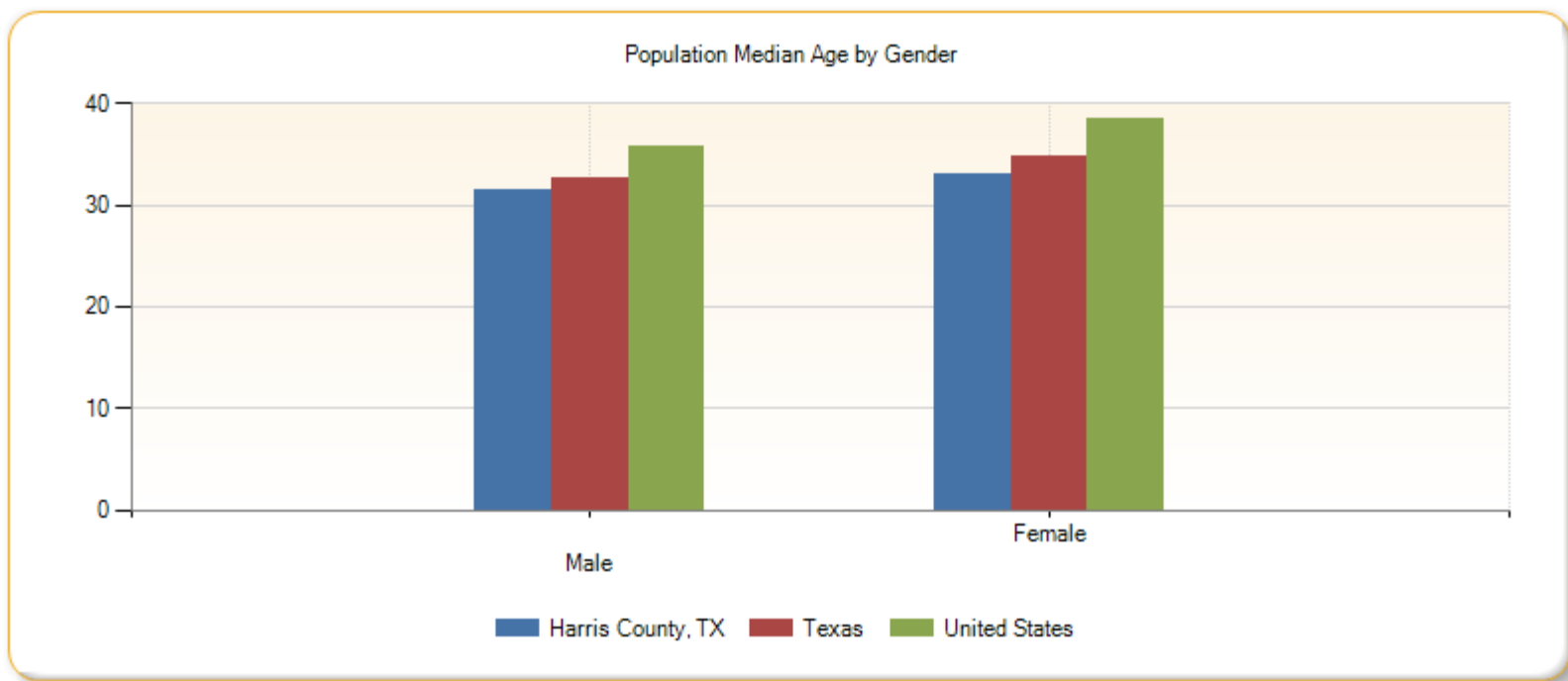


Population Change, Percent by Tract, US Census 2000 - 2010

- Over 10.0% Increase ()
- 1.0 - 10.0% Increase ()
- Less Than 1.0% Change (/ -)
- 1.0 - 10.0% Decrease (-)
- Over 10.0% Decrease (-)
- No Population or No Data
- Report Area

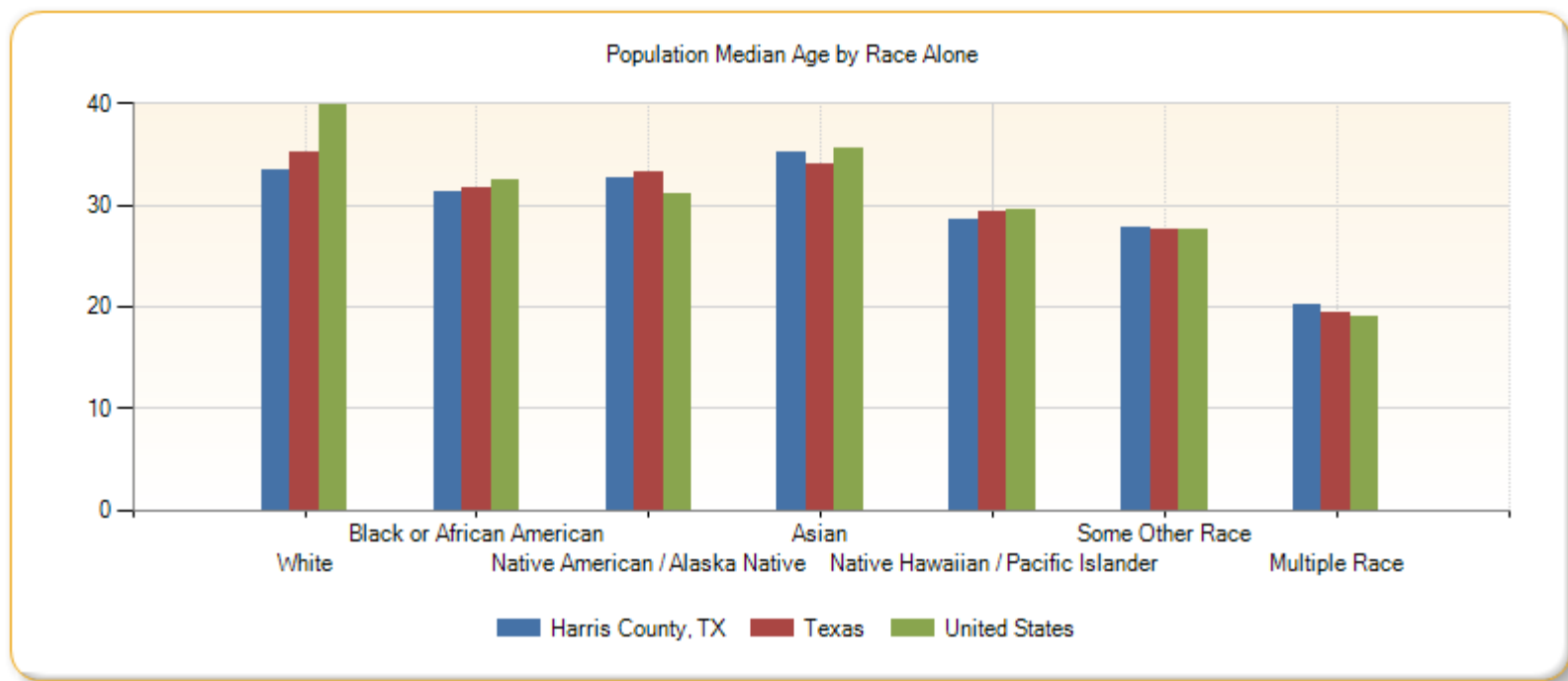
Population Change (2000-2010) by Gender

Report Area	Male Population Change, Total	Male Population Change, Percent	Female Population Change, Total	Female Population Change, Percent
Clark County, OH	-2,577	-3.70%	-3,827	-5.09%
Ohio	119,894	2.18%	63,470	1.09%
United States	12,757,602	9.24%	12,613,855	8.80%



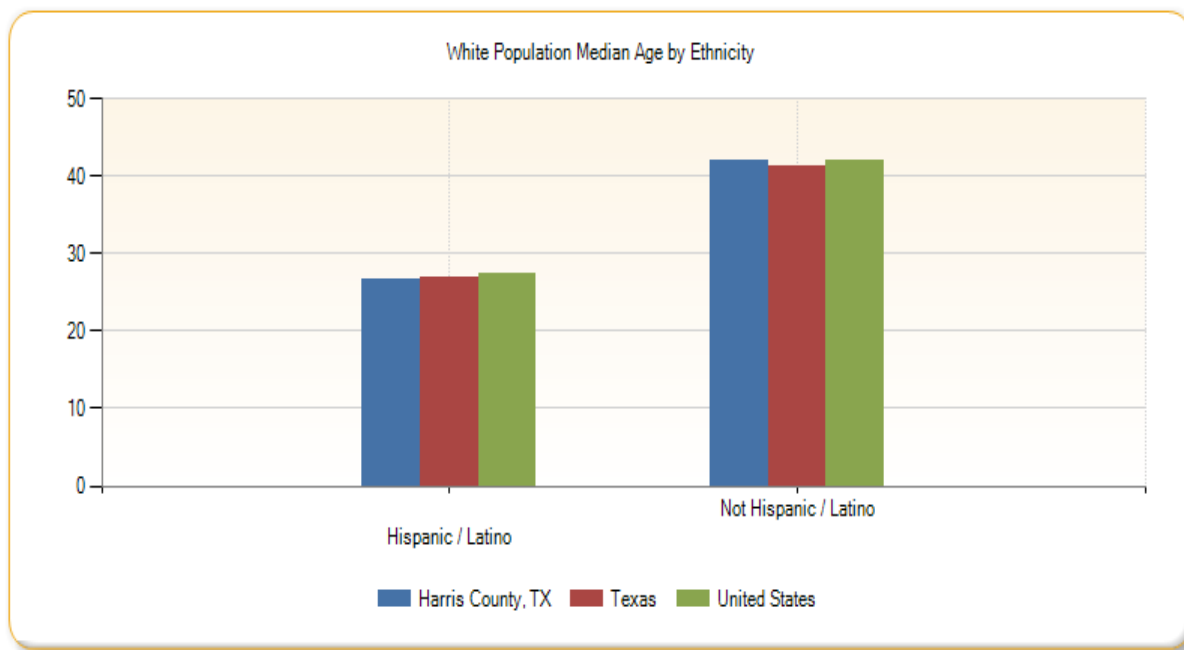
Population Change (2000-2010) by Hispanic Origin

Report Area	Hispanic Population Change, Total	Hispanic Population Change, Percent	Non-Hispanic Population Change, Total	Non-Hispanic Population Change, Percent
Clark County, OH	2,106	123.96%	-8,510	-5.95%
Ohio	137,551	63.35%	45,813	0.41%
United States	15,098,149	42.70%	10,153,011	4.09%



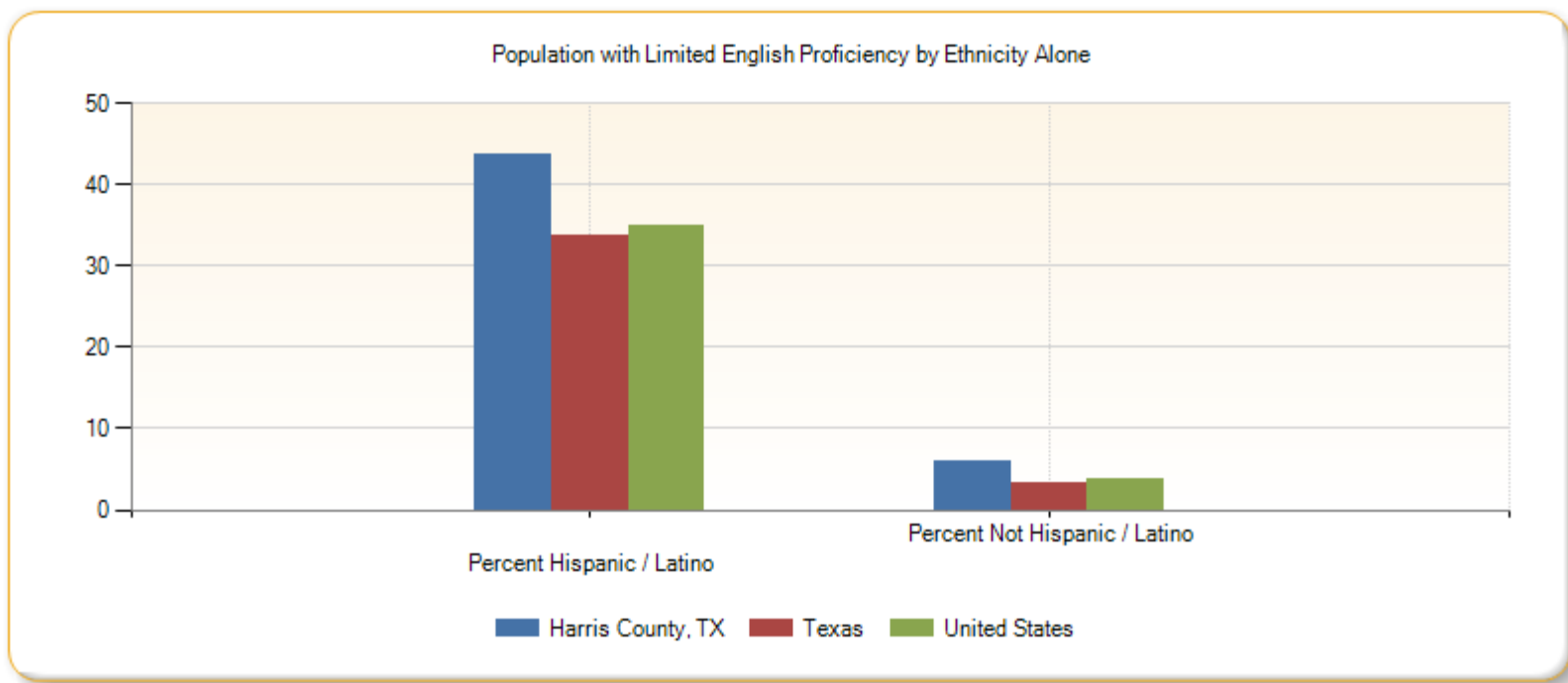
Total Population Change (2000-2010) by Race

Report Area	White	Black	American Indian / Alaska Native	Asian	Native Hawaiian / Pacific Islander	Other Race	Multiple Race
Clark County, OH	-8,101	-821	97	-51	20	1,229	1,223
Ohio	-106,016	106,374	806	59,600	1,317	41,403	79,880
United States	10,372,322	5,142,739	504,122	4,401,714	140,925	3,682,144	2,167,760



Percent Population Change (2000-2010) by Race

Report Area	White	Black	American Indian / Alaska Native	Asian	Native Hawaiian / Pacific Islander	Other Race	Multiple Race
Clark County, OH	-6.35%	-6.34%	-12.69%	12.75%	64.52%	160.23%	53.50%
Ohio	-1.10%	8.17%	3.29%	44.94%	47.91%	46.72%	50.59%
United States	4.89%	15.27%	21.65%	43.27%	47.12%	24.03%	32.16%



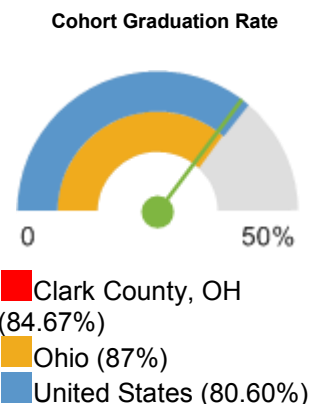
SOCIAL & ECONOMIC FACTORS

Economic and social insecurity often are associated with poor health. Poverty, unemployment, and lack of educational achievement affect access to care and a community's ability to engage in healthy behaviors. Without a network of support and a safe community, families cannot thrive. Ensuring access to social and economic resources provides a foundation for a healthy community.

High School Graduation Rate (EdFacts)

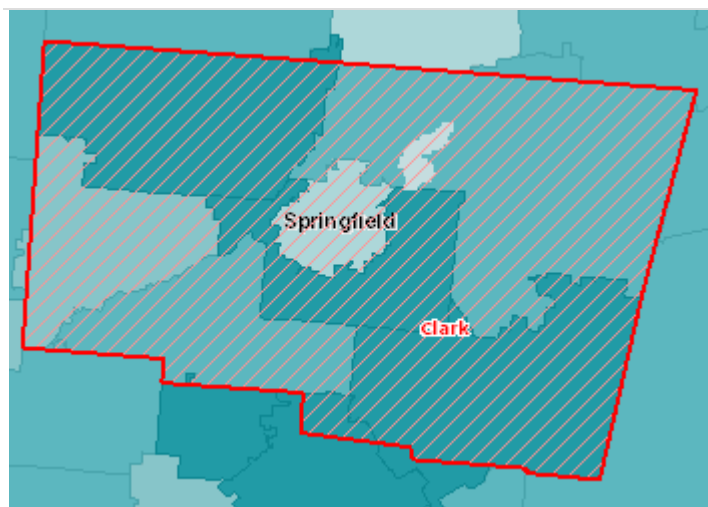
Within the report area 84.67% of students are receiving their high school diploma within four years. This indicator is relevant because research suggests education is one the strongest predictors of health ([Freudenberg & Ruglis, 2007](#)).

Report Area	Total Student Cohort	Estimated Number of Diplomas Issued	Cohort Graduation Rate
Clark County, OH	1,691	1,432	84.67
Ohio	130,779	113,725	87
United States	3,423,351	2,757,948	80.60

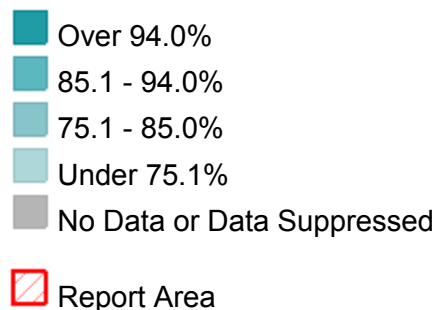


Note: This indicator is compared with the state average. Data breakout by demographic groups are not available.

Data Source: US Department of Education, [EDFacts](#): 2010-11. Accessed using [DATA.GOV](#). Source geography: School District.



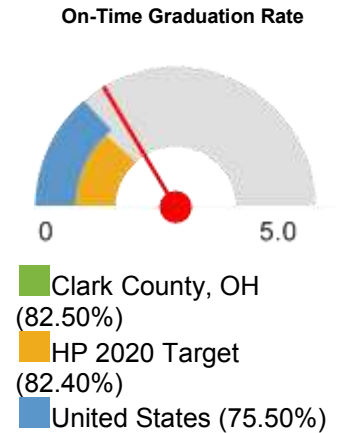
On-Time Graduation, Rate by School District (Secondary), ED Facts 2010-11



High School Graduation Rate (NCES)

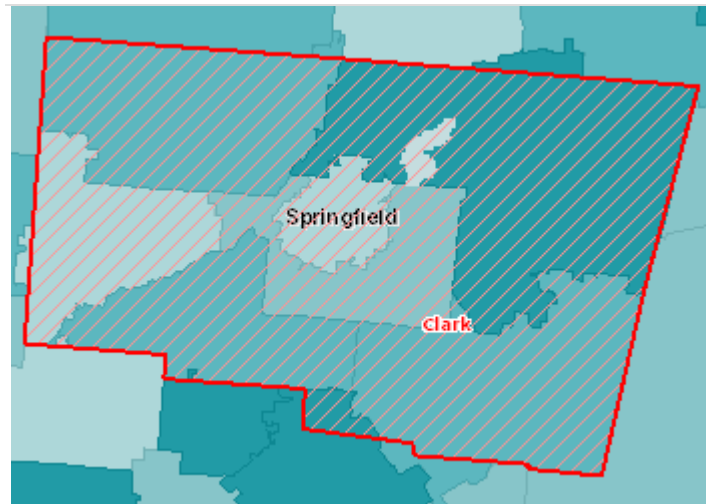
Within the report area 82.50% of students are receiving their high school diploma within four years. This is greater than the Healthy People 2020 target of 82.4%. This indicator is relevant because research suggests education is one the strongest predictors of health ([Freudenberg & Ruglis, 2007](#)).

Report Area	Average Freshman Base Enrollment	Estimated Number of Diplomas Issued	On-Time Graduation Rate
Clark County, OH	2,083	1,719	82.50
Ohio	153,528	122,203	79.60
United States	4,024,345	3,039,015	75.50
HP 2020 Target			>=82.4

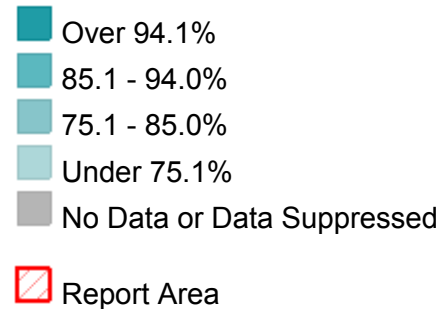


Note: This indicator is compared with the Healthy People 2020 Target. Data breakout by demographic groups are not available.

Data Source: National Center for Education Statistics, [NCES - Common Core of Data](#): 2008-09. Source geography: County.



On-Time Graduation, Rate by School District (Secondary), NCES CCD 2008-09



PHYSICAL ENVIRONMENT

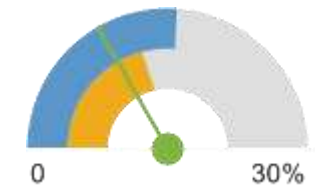
A community's health also is affected by the physical environment. A safe, clean environment that provides access to healthy food and recreational opportunities is important to maintaining and improving community health.

Grocery Store Access

This indicator reports the number of grocery stores per 100,000 population. Grocery stores are defined as supermarkets and smaller grocery stores primarily engaged in retailing a general line of food, such as canned and frozen foods; fresh fruits and vegetables; and fresh and prepared meats, fish, and poultry. Included are delicatessen-type establishments. Convenience stores and large general merchandise stores that also retail food, such as supercenters and warehouse club stores are excluded. This indicator is relevant because it provides a measure of healthy food access and environmental influences on dietary behaviors.

Report Area	Total Population	Number of Establishments	Establishment Rate per 100,000 Population
Clark County, OH	138,333	23	16.63
Ohio	11,536,504	2,071	17.95
United States	308,745,538	64,366	20.85

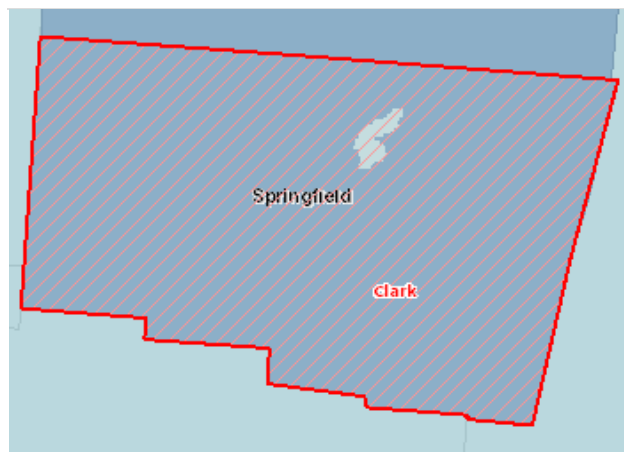
Establishment Rate per 100,000 Population



- Clark County, OH (16.63)
- Ohio (17.95)
- United States (20.85)

Note: This indicator is compared with the state average. Data breakout by demographic groups are not available.

Data Source: US Census Bureau, [County Business Patterns](#); 2011. Additional data analysis by [CARES](#). Source geography: County.



Grocery Stores and Supermarkets, Rate (Per 100,000 Pop.) by County, CBP 2011

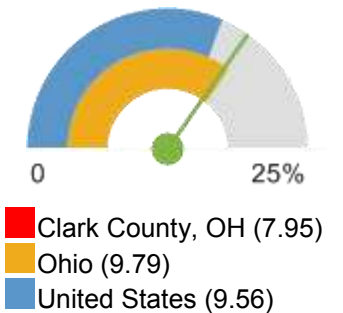
- Over 35.0
- 25.1 - 35.0
- 15.1 - 25.0
- Under 15.1
- No Grocery Stores
- Report Area

Recreation and Fitness Facility Access

This indicator reports the number per 100,000 population of recreation and fitness facilities as defined by North American Industry Classification System (NAICS) Code 713940. This indicator is relevant because access to recreation and fitness facilities encourages physical activity and other healthy behaviors.

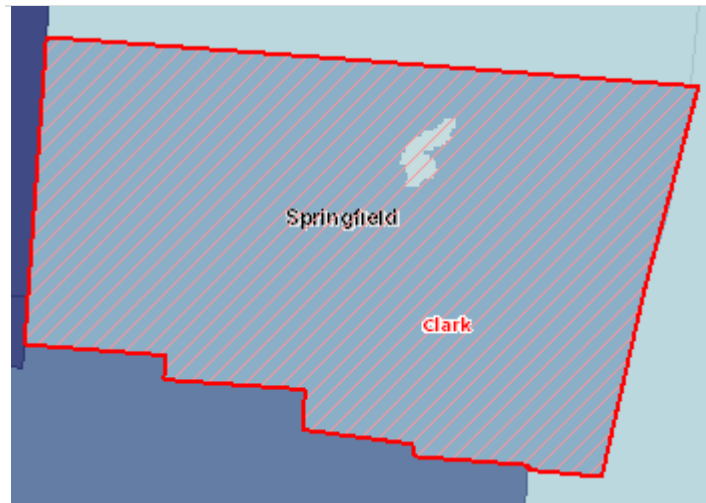
Report Area	Total Population	Number of Establishments	Establishment Rate per 100,000 Population
Clark County, OH	138,333	11	7.95
Ohio	11,536,504	1,129	9.79
United States	308,745,538	29,506	9.56

Establishment Rate per 100,000 Population

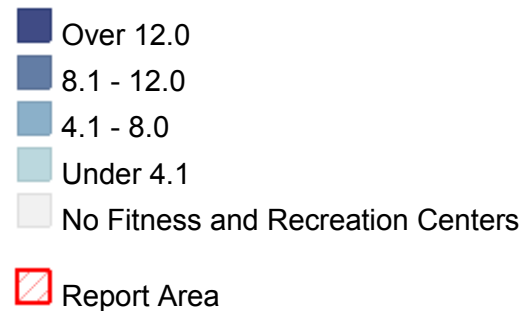


Note: This indicator is compared with the state average. Data breakout by demographic groups are not available.

Data Source: US Census Bureau, [County Business Patterns](#): 2011. Additional data analysis by [CARES](#). Source geography: County.



Recreation and Fitness Facilities, Rate (Per 100,000 Pop.) by County, CBP 2011



CLINICAL CARE

A lack of access to care presents barriers to good health. The supply and accessibility of facilities and physicians, the rate of uninsurance, financial hardship, transportation barriers, cultural competency, and coverage limitations affect access.

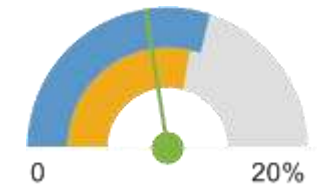
Rates of morbidity, mortality, and emergency hospitalizations can be reduced if community residents access services such as health screenings, routine tests, and vaccinations. Prevention indicators can call attention to a lack of access or knowledge regarding one or more health issues and can inform program interventions.

Diabetes Management (Hemoglobin A1c Test)

This indicator reports the percentage of diabetic Medicare patients who have had a hemoglobin A1c (hA1c) test, a blood test which measures blood sugar levels, administered by a health care professional in the past year. In the report area, 1,095 Medicare enrollees with diabetes have had an annual exam out of 1,328 Medicare enrollees in the report area with diabetes, or 82.53%. This indicator is relevant because engaging in preventive behaviors allows for early detection and treatment of health problems. This indicator can also highlight a lack of access to preventive care, a lack of health knowledge, insufficient provider outreach, and/or social barriers preventing utilization of services.

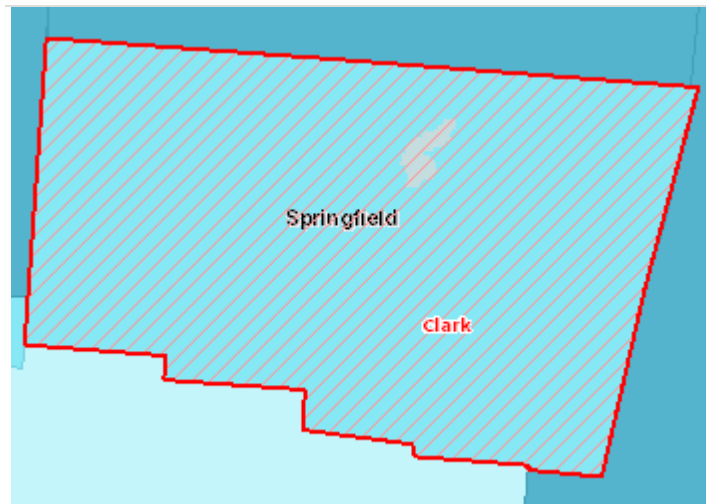
Report Area	Total Medicare Enrollees	Medicare Enrollees with Diabetes	Medicare Enrollees with Diabetes with Annual Exam	Percent Medicare Enrollees with Diabetes with Annual Exam
Clark County, OH	10,518	1,328	1,095	82.53%
Ohio	909,041	120,536	99,961	82.93%
United States	51,875,184	6,218,804	5,212,097	83.81%

Percent Medicare Enrollees with Diabetes with Annual Exam



■ Clark County, OH (82.53%)
■ Ohio (82.93%)
■ United States (83.81%)

Note: This indicator is compared with the state average. Data breakout by demographic groups are not available.
 Data Source: Dartmouth College Institute for Health Policy & Clinical Practice, [Dartmouth Atlas of Health Care](#): 2010. Source geography: County.



Patients with Annual HA1C Test (Diabetes), Percent of Medicare Enrollees with Diabetes by County, DA 2010

■ Over 88.0%
■ 84.1 - 88.0%
■ 80.1 - 84.0%
■ Under 80.1%
■ No Data or Data Suppressed
□ Report Area

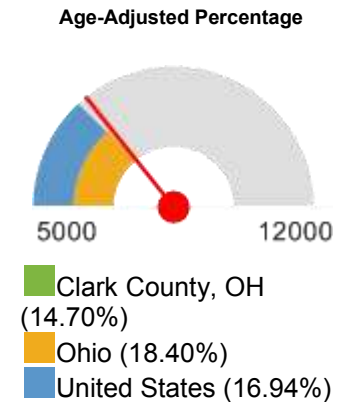
HEALTH BEHAVIORS

Health behaviors such as poor diet, a lack of exercise, and substance abuse contribute to poor health status.

Alcohol Consumption

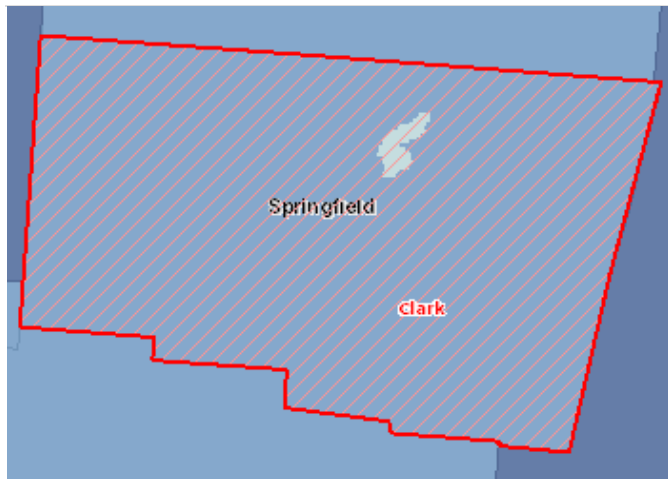
This indicator reports the percentage of adults aged 18 and older who self-report heavy alcohol consumption (defined as more than two drinks per day on average for men and one drink per day on average for women). This indicator is relevant because current behaviors are determinants of future health and this indicator may illustrate a cause of significant health issues, such as cirrhosis, cancers, and untreated mental and behavioral health needs.

Report Area	Total Population Age 18	Estimated Number Drinking Excessively	Crude Percentage	Age-Adjusted Percentage
Clark County, OH	105,731	13,956	13.20%	14.70%
Ohio	8,781,360	1,536,738	17.50%	18.40%
United States	232,556,016	38,248,349	16.45%	16.94%

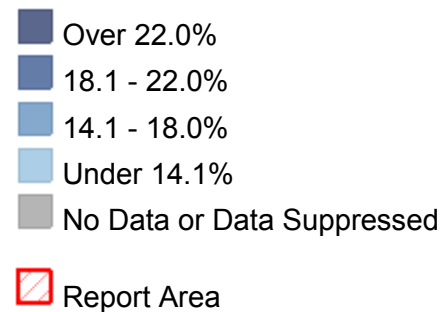


Note: This indicator is compared with the state average. Data breakout by demographic groups are not available.

Data Source: Centers for Disease Control and Prevention, [Behavioral Risk Factor Surveillance System](#); 2006-12. Accessed using the [Health Indicators Warehouse](#). Source geography: County.



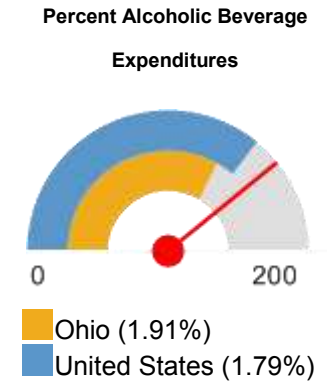
Excessive Drinking, Percent of Adults Age 18 by County, BRFSS 2006-12



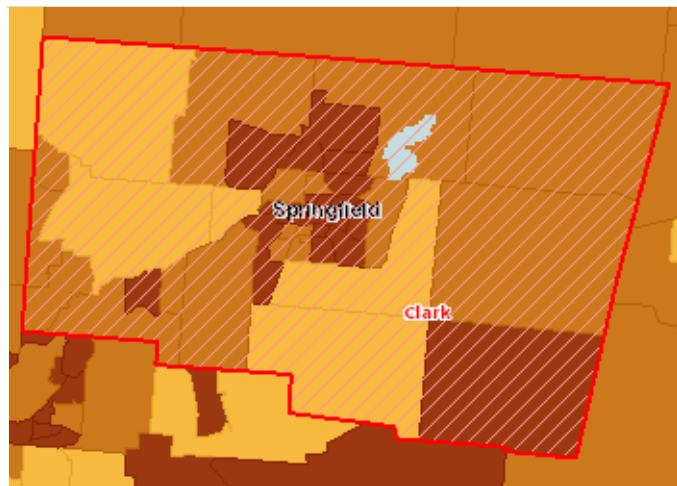
Alcohol Expenditures

This indicator reports estimated expenditures for alcoholic beverages purchased at home, as a percentage of total household expenditures. This indicator is relevant because current behaviors are determinants of future health and this indicator may illustrate a cause of significant health issues, such as cirrhosis, cancers, and untreated mental and behavioral health needs.

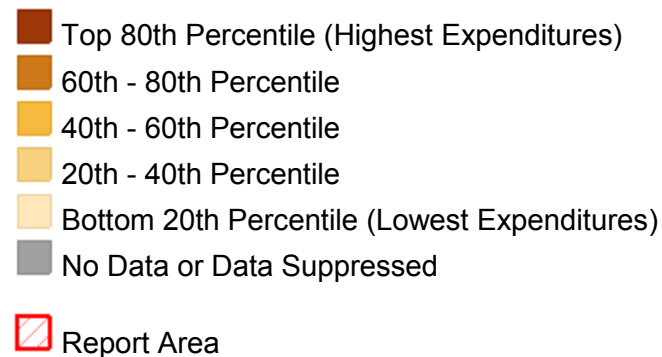
Report Area	Average Total Household Expenditures (USD)	Average Household Alcoholic Beverage Expenditures (USD)	Alcoholic Beverage Expenditures, County Rank (In-State)	Alcoholic Beverage Expenditures, County Percentile	Percent Alcoholic Beverage Expenditures
Clark County, OH	no data	no data	62	70.45%	no data
Ohio	48,018	917	no data	no data	1.91%
United States	50,932	910	no data	no data	1.79%



Note: This indicator is compared with the state average. Data breakout by demographic groups are not available.
Data Source: Nielsen, [Nielsen SiteReports](#): 2011. Source geography: Tract.



Alcoholic Beverage Expenditures, Percent of Total Expenditures, National Rank by Tract, Nielsen 2011

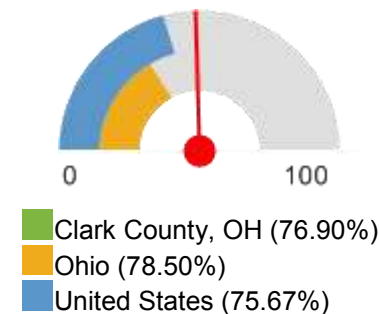


Fruit/Vegetable Consumption

In the report area an estimated 82,230, or 76.90% of adults over the age of 18 are consuming less than 5 servings of fruits and vegetables each day. This indicator is relevant because current behaviors are determinants of future health, and because unhealthy eating habits may cause significant health issues, such as obesity and diabetes.

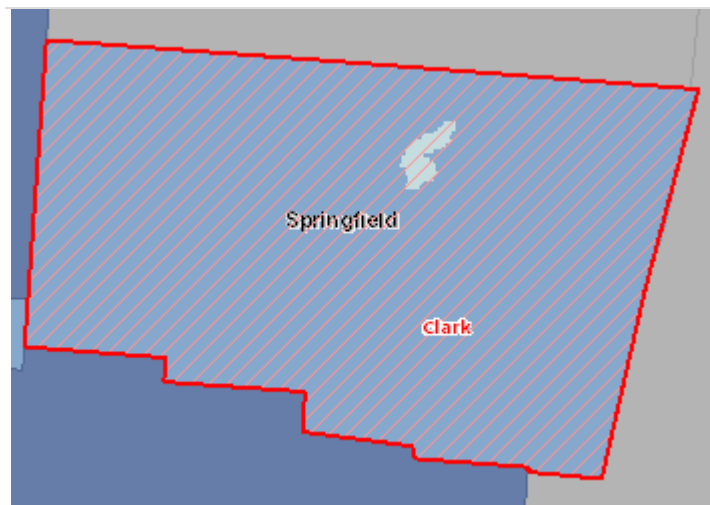
Report Area	Total Population Age 18	Estimated Population with Inadequate Fruit / Vegetable Consumption	Percent Population with Inadequate Fruit / Vegetable Consumption
Clark County, OH	106,931	82,230	76.90%
Ohio	8,750,969	6,869,511	78.50%
United States	227,279,010	171,972,118	75.67%

Percent Population with Inadequate Fruit / Vegetable Consumption

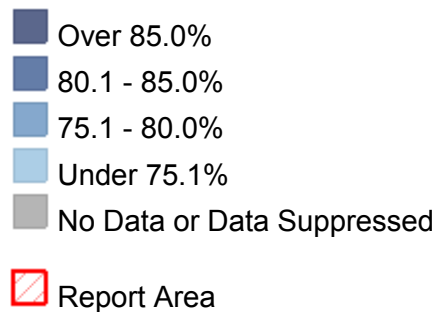


Note: This indicator is compared with the state average. Data breakout by demographic groups are not available.

Data Source: Centers for Disease Control and Prevention, [Behavioral Risk Factor Surveillance System](#); 2005-09. Accessed using the [Health Indicators Warehouse](#). Source geography: County.



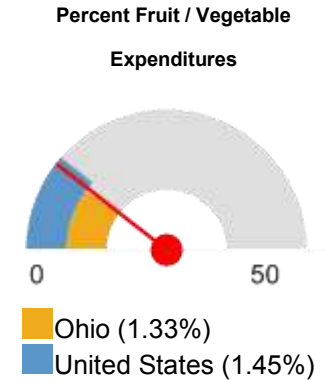
Inadequate Fruit/Vegetable Consumption, Percent of Adults Age 18 by County, BRFSS 2005-09



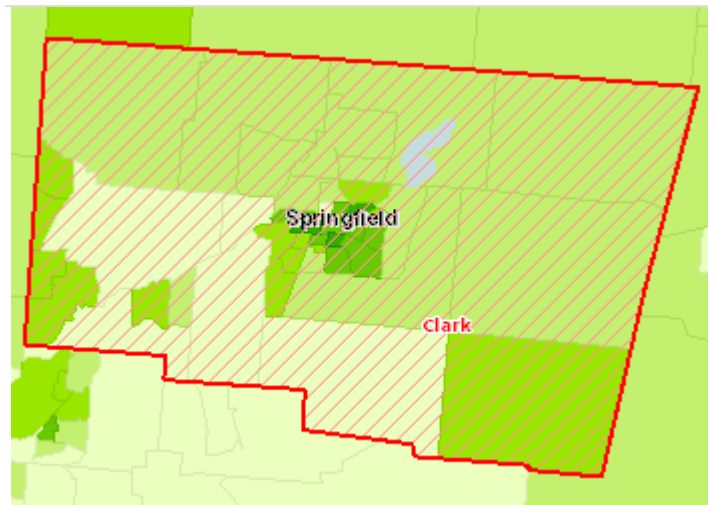
Fruit/Vegetable Expenditures

This indicator reports estimated expenditures for fruits and vegetables purchased for in-home consumption, as a percentage of total household expenditures. This indicator is relevant because current behaviors are determinants of future health, and because unhealthy eating habits may illustrate a cause of significant health issues, such as obesity and diabetes.

Report Area	Average Total Household Expenditures (USD)	Average Household Fruit / Vegetable Expenditures (USD)	Fruit / Vegetable Expenditures, County Rank (In-State)	Fruit / Vegetable Expenditures, County Percentile	Percent Fruit / Vegetable Expenditures
Clark County, OH	no data	no data	51	57.95%	no data
Ohio	48,018	637	no data	no data	1.33%
United States	50,932	737	no data	no data	1.45%



Note: This indicator is compared with the state average. Data breakout by demographic groups are not available.
Data Source: Nielsen, [Nielsen SiteReports](#): 2011. Source geography: Tract.



Fruit and Vegetable Expenditures, Percent of Total Expenditures, National Rank by Tract, Nielsen 2011

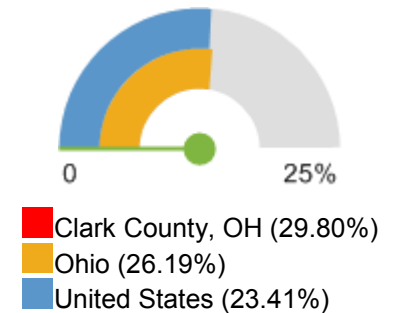
- Top 80th Percentile (Highest Expenditures)
- 60th - 80th Percentile
- 40th - 60th Percentile
- 20th - 40th Percentile
- Bottom 20th Percentile (Lowest Expenditures)
- No Data or Data Suppressed
- Report Area

Physical Inactivity - Adult

Within the report area, 31,618 or 29.80% of adults aged 20 and older self-report no leisure time for activity, based on the question: "During the past month, other than your regular job, did you participate in any physical activities or exercises such as running, calisthenics, golf, gardening, or walking for exercise?". This indicator is relevant because current behaviors are determinants of future health and this indicator may illustrate a cause of significant health issues, such as obesity and poor cardiovascular health.

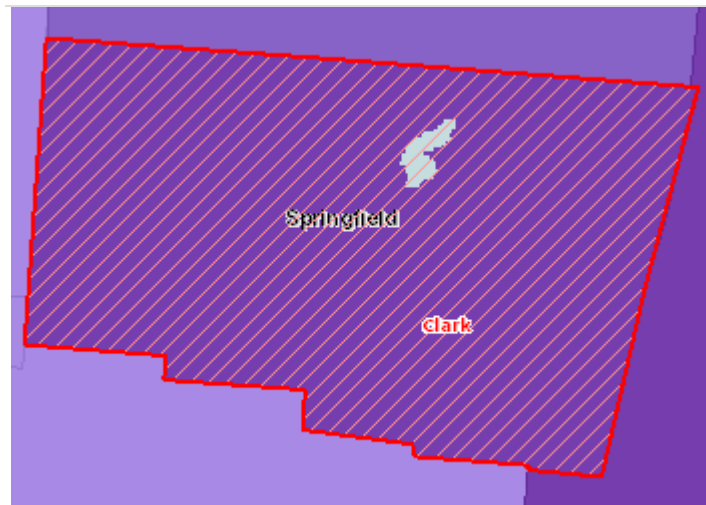
Report Area	Total Population Age 20	Population with no Leisure Time Physical Activity	Percent Population with no Leisure Time Physical Activity
Clark County, OH	101,666	31,618	29.80%
Ohio	8,478,637	2,281,688	26.19%
United States	226,142,005	53,729,295	23.41%

Percent Population with no Leisure Time Physical Activity

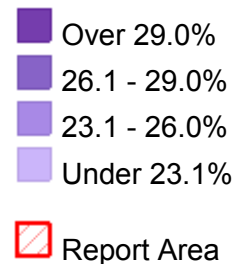


Note: This indicator is compared with the state average.

Data Source: Centers for Disease Control and Prevention, National Center for Chronic Disease Prevention and Health Promotion, [Diabetes Atlas](#): 2010. Source geography: County.

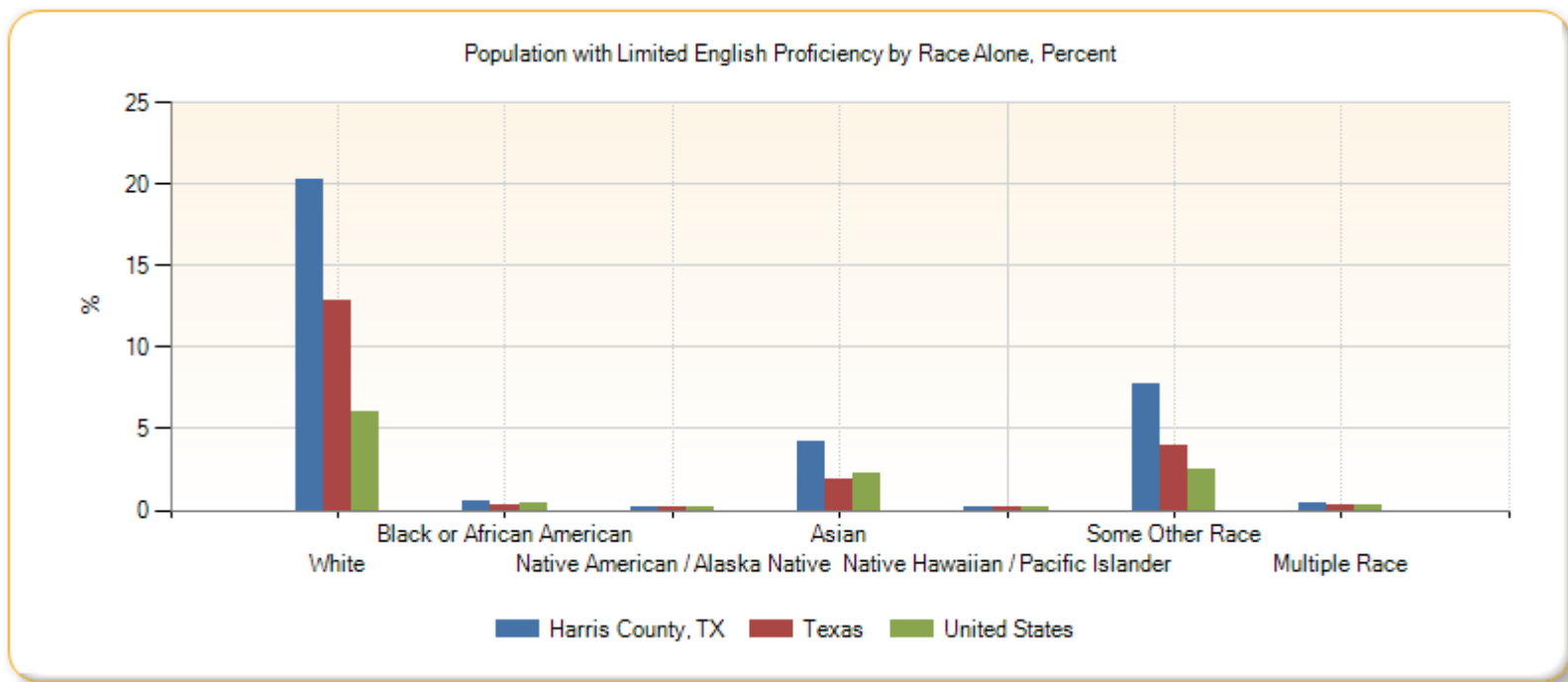


No Leisure-Time Physical Activity, Adults Age 20 , Percent by County, CDC NCCDPHP 2010



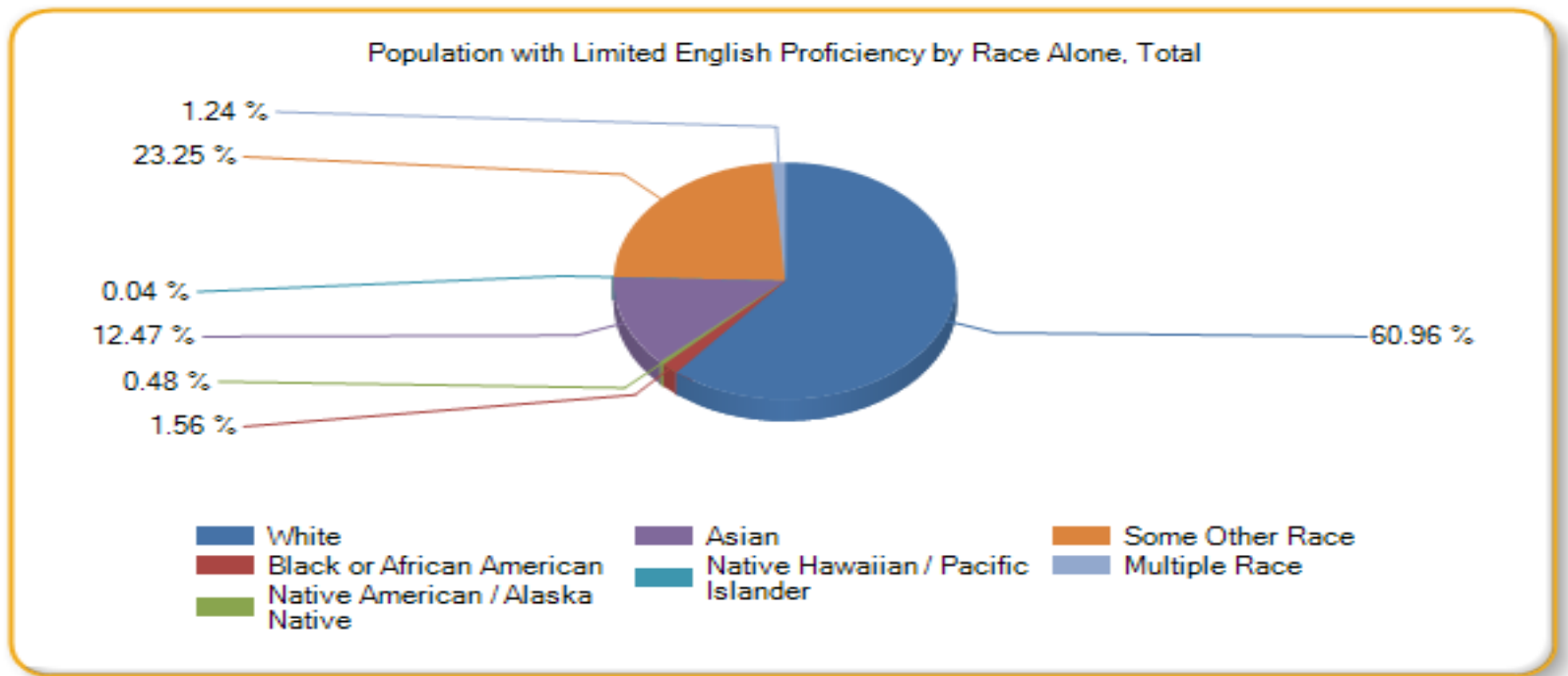
Adults with No Leisure-Time Physical Activity by Gender

Report Area	Total Males with No Leisure-Time Physical Activity	Percent Males with No Leisure-Time Physical Activity	Total Females with No Leisure-Time Physical Activity	Percent Females with No Leisure-Time Physical Activity
Clark County, OH	13,742	27.30%	17,460	31%
Ohio	2,016,451	24.32%	2,531,522	27.67%
United States	47,761,489	21.75%	59,408,212	24.88%



Percent Adults Physically Inactive by Year, 2004 through 2010

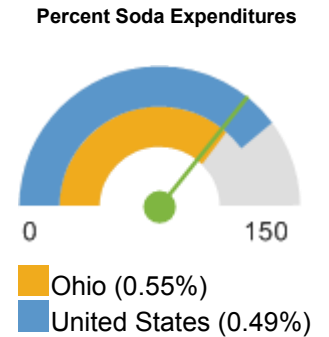
Report Area	2004	2005	2006	2007	2008	2009	2010
Clark County, OH	26.50%	24.60%	24.50%	26.40%	27.40%	29.10%	29.80%
Ohio	25.01%	24.91%	25.08%	25.61%	25.72%	26.19%	26.19%
United States	22.96%	22.82%	22.93%	23.20%	23.51%	23.67%	23.41%



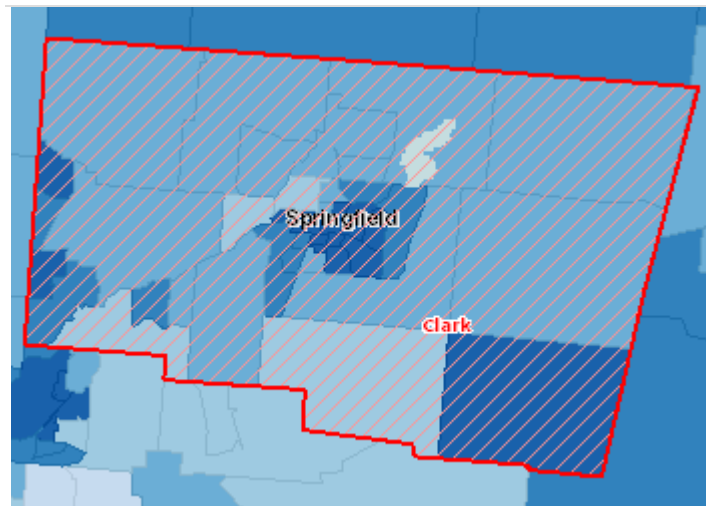
Soda Expenditures

This indicator reports soft drink consumption by census tract by estimating expenditures for carbonated beverages, as a percentage of total household expenditures. This indicator is relevant because current behaviors are determinants of future health and this indicator may illustrate a cause of significant health issues such as diabetes and obesity.

Report Area	Average Total Household Expenditures (USD)	Average Household Soda Expenditures (USD)	Soda Expenditures, County Rank (In-State)	Soda Expenditures, County Percentile	Percent Soda Expenditures
Clark County, OH	no data	no data	29	32.95%	no data
Ohio	48,018	266	no data	no data	0.55%
United States	50,932	252	no data	no data	0.49%



Note: This indicator is compared with the state average. Data breakout by demographic groups are not available.
Data Source: Nielsen, [Nielsen SiteReports](#): 2011. Source geography: Tract.



Soda Expenditures, Percent of Total Expenditures, National Rank by Tract, Nielsen 2011

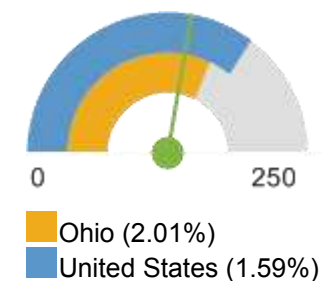
- Top 80th Percentile (Highest Expenditures)
- 60th - 80th Percentile
- 40th - 60th Percentile
- 20th - 40th Percentile
- Bottom 20th Percentile (Lowest Expenditures)
- No Data or Data Suppressed
- Report Area

Tobacco Expenditures

This indicator reports estimated expenditures for cigarettes, as a percentage of total household expenditures. This indicator is relevant because tobacco use is linked to leading causes of death such as cancer and cardiovascular disease.

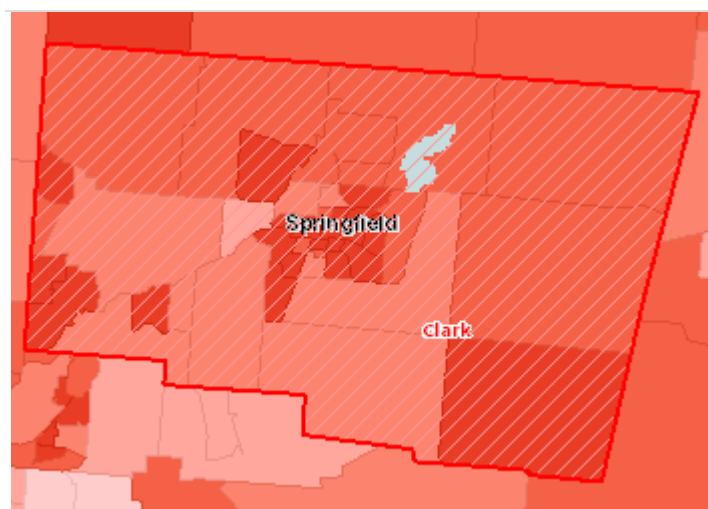
Report Area	Average Total Household Expenditures (USD)	Average Household Cigarette Expenditures (USD)	Cigarette Expenditures, County Rank (In-State)	Cigarette Expenditures, County Percentile	Percent Cigarette Expenditures
Clark County, OH	no data	no data	35	39.77%	no data
Ohio	48,018	966	no data	no data	2.01%
United States	50,932	810	no data	no data	1.59%

Percent Cigarette Expenditures



Note: This indicator is compared with the state average. Data breakout by demographic groups are not available.

Data Source: Nielsen, [Nielsen SiteReports](#): 2011. Source geography: Tract.



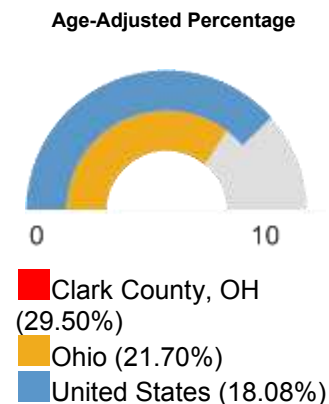
Cigarette Expenditures, Percent of Total Expenditures, National Rank by Tract, Nielsen 2011

- Top 80th Percentile (Highest Expenditures)
- 60th - 80th Percentile
- 40th - 60th Percentile
- 20th - 40th Percentile
- Bottom 20th Percentile (Lowest Expenditures)
- No Data or Data Suppressed
- Report Area

Tobacco Usage - Current Smokers

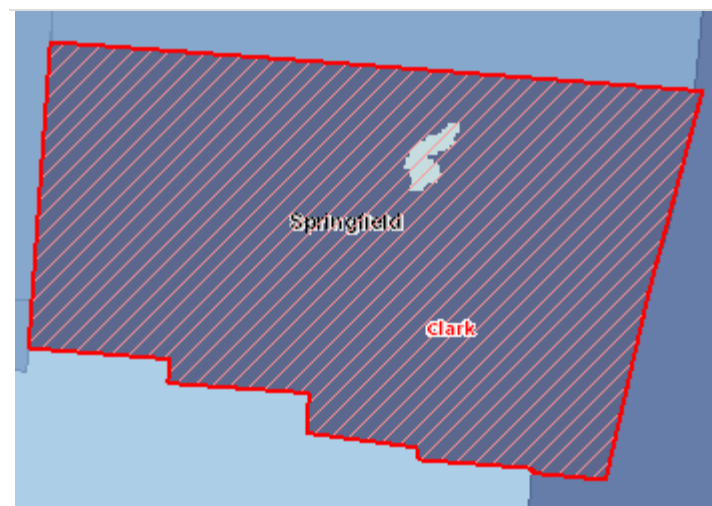
In the report area an estimated 29,393, or 27.80% of adults age 18 or older self-report currently smoking cigarettes some days or every day. This indicator is relevant because tobacco use is linked to leading causes of death such as cancer and cardiovascular disease.

Report Area	Total Population Age 18	Estimated Population Regularly Smoking Cigarettes	Crude Percentage	Age-Adjusted Percentage
Clark County, OH	105,731	29,393	27.80%	29.50%
Ohio	8,781,360	1,861,648	21.20%	21.70%
United States	232,556,016	41,491,223	17.84%	18.08%

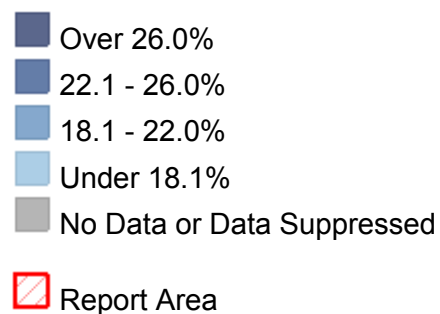


Note: This indicator is compared with the state average. Data breakout by demographic groups are not available.

Data Source: Centers for Disease Control and Prevention, [Behavioral Risk Factor Surveillance System](#): 2006-12. Accessed using the [Health Indicators Warehouse](#). Source geography: County.



Current Smokers, Percent of Adults Age 18 by County, BRFSS 2006-12

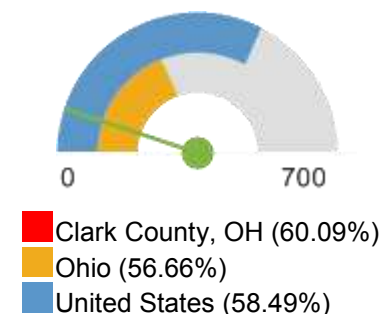


Tobacco Usage - Quit Attempt

An estimated 60.09%, or 63,643 adult smokers in the report area attempted to quit smoking for at least 1 day in the past year. This indicator is relevant because tobacco use is linked to leading causes of death such as cancer and cardiovascular disease and supporting efforts to quit smoking may increase positive health outcomes.

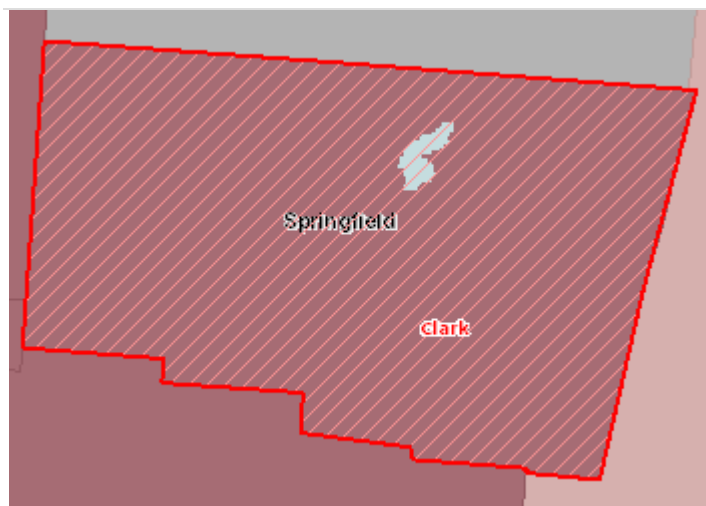
Report Area	Total Population (Age 18)	Total Smokers with Quit Attempt in Past 12 Months	Percent Smokers with Quit Attempt in Past 12 Months
Clark County, OH	105,912	63,643	60.09%
Ohio	8,781,360	4,975,756	56.66%
United States	235,375,690	137,674,809	58.49%

Percent Smokers with Quit Attempt in Past 12 Months

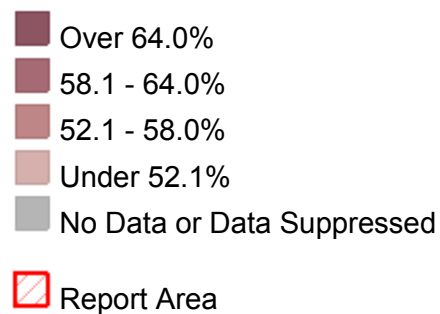


Note: This indicator is compared with the state average.

Data Source: Centers for Disease Control and Prevention, [Behavioral Risk Factor Surveillance System](#); 2006-10. Additional data analysis by [CARES](#). Source geography: County.

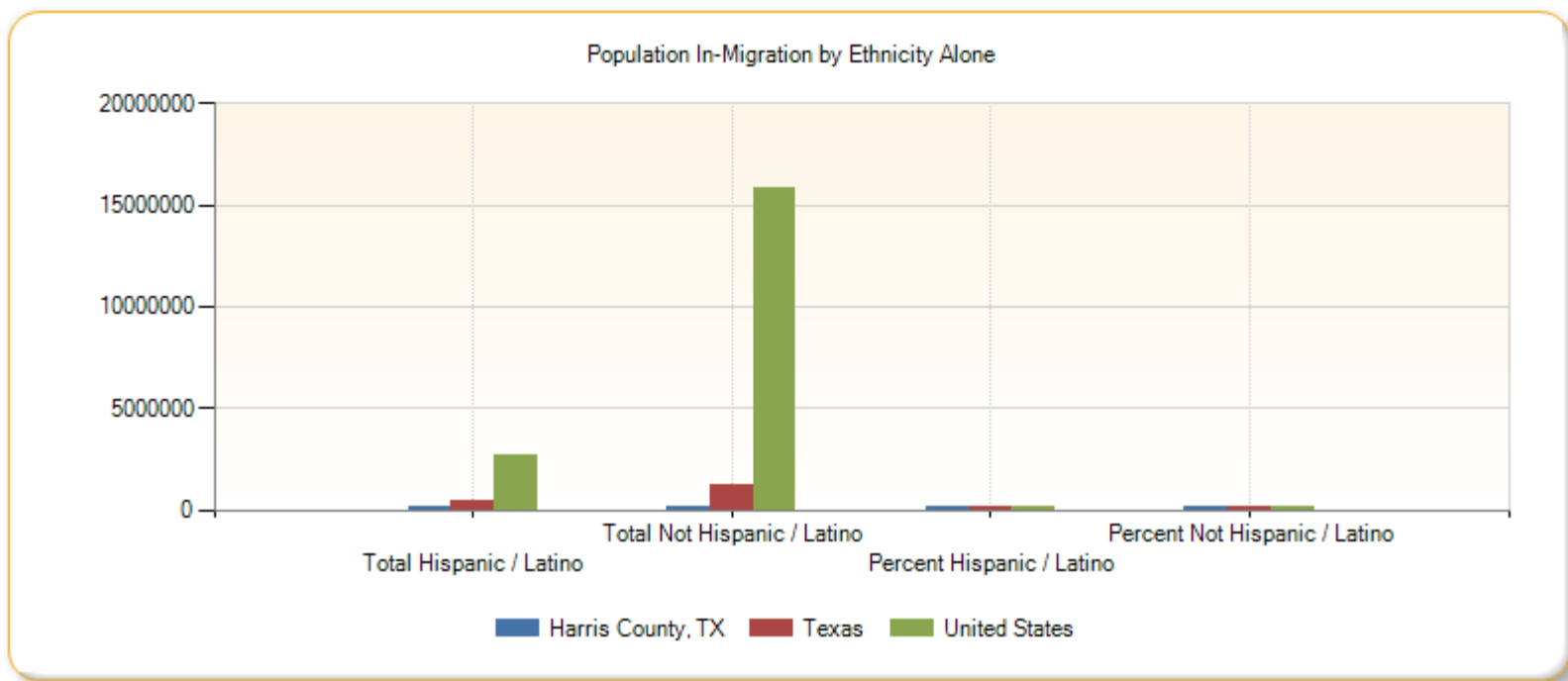


Smokers Who Quit / Attempted to Quit in Past 12 Months, Percent by County, BRFSS 2006-10



Adult Smokers with Quit Attempt in Past 1 Year by Race / Ethnicity, Percent

Report Area	White (Non-Hispanic)	Black (Non-Hispanic)	Other Race (Non-Hispanic)	Hispanic / Latino
Clark County, OH	no data	no data	no data	no data
Ohio	52.54%	66.33%	52.21%	59.17%
United States	53.11%	67.44%	59.64%	62.98%



FOOTNOTES

Change in Total Population

Data Background

The U.S. Census counts every resident in the United States. It is mandated by Article I, Section 2 of the Constitution and takes place every 10 years. The census collects information about the age, sex, race, and ethnicity of every person in the United States. The data collected by the decennial census determine the number of seats each state has in the U.S. House of Representatives and is also used to distribute billions in federal funds to local communities. For more information about this source, refer to the [United States Census 2010](#) website.

Methodology

The data is downloaded in text format from the U.S. Census Bureau's FTP site for the years 2000 and 2010. The text documents are then uploaded into a SQL database. The demographics indicators are mapped using population provided for county area (Sum Level 050). Total populations are derived directly from data provided. The rate of population change is calculated using $\text{Total Population 2010} - \text{Total Population 2000} = \text{Population Change}$.

Notes

Race and Ethnicity

Statistics by race and ethnicity are not provided for this indicator.

High School Graduation Rate (EdFacts)

Data Background

EDFacts is a U. S. Department of Education (ED) initiative to collect, analyze, report on, and promote the use of high-quality, kindergarten through grade 12 (K–12) performance data for use in education planning, policymaking, and management and budget decision-making to improve outcomes for students. EDFacts centralizes data provided by state education agencies, local education agencies, and schools, and provides users with the ability to easily analyze and report on submitted data. ED collects performance data at the school and school-district levels and provides public use files containing data that have been modified to protect against the ability to determine personally identifiable information on students.

Methodology

Graduation rates are acquired for all US school-districts in the United States from US Department of Education (ED) *EdFacts* data tables. States are required to report graduation data to the US Department of Education under Title I, Part A of the Elementary and Secondary Education Act (ESEA). Specifically, states are required to report rates based on a cohort method, which would

provide a more uniform and accurate measure of the high school graduation rate that improved comparability across states. The cohort graduation rate is defined as “the number of students who graduate in four years with a regular high school diploma divided by the number of students who form the adjusted cohort for the graduating class.” From the beginning of 9th grade (or the earliest high school grade), students who are entering that grade for the first time form a cohort that is “adjusted” by adding any students who subsequently transfer into the cohort and subtracting any students who subsequently transfer out, emigrate to another country, or die.

County-level summaries are calculated by CARES using small-area estimation technique based on the proportion of the population aged 15-19 in each school district/county. The population figures for this calculation are based on data from the 2010 US Decennial Census at the census block geographic level.

For more information please consult the original data the original data or download the complete [EdFacts Data Documentation](#).

Notes

Race and Ethnicity

Statistics by race and ethnicity are not provided for this indicator.

Data Limitations

1. Graduation rates for some school districts are provided by EdFacts as ranges; range mid-points were calculated by CARES to facilitate data manipulation.
2. Data is not currently available for three states - Idaho, Kentucky, and Oklahoma - due to incomplete student cohort data for the four years prior to 2011.

High School Graduation Rate (NCES)

Data Background

The National Center for Education Statistics (NCES) is the primary federal entity for collecting, analyzing, and reporting data related to education in the United States and other nations. It fulfills a congressional mandate to collect, collate, analyze, and report full and complete statistics on the condition of education in the United States; conduct and publish reports and specialized analyses of the meaning and significance of such statistics; assist state and local education agencies in improving their statistical systems; and review and report on education activities in foreign countries.

Citation: [Documentation to the NCES Common Core of Data Public Elementary/Secondary School Universe Survey \(2011\)](#).

The National Center for Education Statistics releases a dataset containing detailed information about every public school in the United States in their annual Common Core of Data (CCD) files. The information from which this data is compiled is supplied by state education agency officials. The CCD reports information about both schools and school districts, including name, address,

and phone number; descriptive information about students and staff demographics; and fiscal data, including revenues and current expenditures.

For more information, please visit the [Common Core of Data](#) web page.

Methodology

Graduation rates are acquired for all US counties from the 2012 County Health Rankings (CHR). The 2011 County Health Rankings (CHR) used graduation rates calculated from the National Center for Education Statistics (NCES) using an estimated cohort. This measure is generally known as the Averaged Freshman Graduation Rate (AFGR). Starting in 2012, CHR reports cohort graduation rates collected from State Department of Education websites. These rates are an improvement over the AFGR rates previously reported due to student-level outcomes tracking that accounts better for transfers, early and late completers. For 12 states, CHR continues to use NCES-based AFGRs. These states are: AL, AK, AR, CT, HI, ID, MT, NJ, ND, OK, SD and TN.

Total freshmen cohorts were compiled for all counties from school-level data, provided by NCES for academic years 2005-06 through 2007-08. Using the graduation rates from the 2012 CHR and these class sizes, the number of graduates* was estimated for each county. On-time graduation rate, or average freshman graduation rate, is re-calculated for unique service areas and aggregated county groupings using the following formula:

$$\text{Graduation Rate} = \frac{[\text{Estimated Number of Graduates}]}{[\text{Average Base Freshman Enrollment}]} * 100.$$

*Average freshman graduation rate is a measure of on-time graduation only. It does not include 5th year high school completers, or high-school equivalency completers such as GED recipients. For more information on average freshman graduation rates, please review the information on page 4 of the [NCES Common Core of Data Public-Use Local Education Agency Dropout and Completion Data File](#)

Notes

Race and Ethnicity

Statistics by race and ethnicity are not provided for this indicator from the data source. Detailed race/ethnicity data may be available at a broader geographic level, or from a local source.

Grocery Store Access

Data Background

County Business Patterns (CBP) is an annual series that provides sub-national economic data by industry. Data for establishments are presented by geographic area, 6-digit NAICS industry, legal form of organization (U.S. and state only), and employment size class. Information is available on the number of establishments, employment during the week of March 12, first quarter payroll, and annual payroll. ZIP Code Business Patterns data are available shortly after the release of County Business

Patterns. It provides the number of establishments by employment-size classes by detailed industry in the U.S.

County Business Patterns basic data items are extracted from the Business Register (BR), a database of all known single and multi-establishment employer companies maintained and updated by the U.S. Census Bureau. The BR contains the most complete, current, and consistent data for business establishments. The annual Company Organization Survey provides individual establishment data for multi-establishment companies. Data for single-establishment companies are obtained from various Census Bureau programs, such as the Economic Census, Annual Survey of Manufactures and Current Business Surveys, as well as from administrative record sources.

Citation: [U.S. Census Bureau: County Business Patterns \(2012\)](#).

For more information about this source, including data collection methodology and definitions, refer to the [County Business Patterns](#)

Methodology

Population figures are acquired for this indicator from the U.S. Census Bureau, 2010 Decennial Census, Summary File 1. Industry counts are acquired from the U.S. Census Bureau, County Business Patterns (2010) data file. Industries are stratified based on the North American Industry Classification System (NAICS) a coding system used by Federal statistical agencies in classifying business establishments for the purpose of collecting, analyzing, and publishing statistical data related to the U.S. business economy. Establishment rates for each county are derived using the following formula:

$$\text{Rate} = [\text{Establishment Count}] / [\text{Population}] * 100,000$$

The specific codes used indicators reported from the Census Bureau's County Business Patterns (CBP) are listed below.

- Grocery stores and supermarkets: 445110
Grocery stores are establishments engaged in selling a "general line of food, such as canned and frozen foods; fresh fruits and vegetables; and fresh and prepared meats, fish, and poultry". Examples include supermarkets, commissaries and food stores. Convenience stores are excluded.
- Fast food restaurants: 722211
Any "limited service" establishments where the customer typically orders or selects items and pay before eating. Establishments may include carryout restaurants, delicatessens, drive-ins, pizza delivery shops, sandwich shops, and other fast food restaurants
- Alcoholic beverage retailers: 445310
Establishments engaged in "retailing packaged alcoholic beverages, such as ale, beer, wine, and liquor". Bars and other venues serving alcoholic beverages intended for immediate consumption on the premises are not included.

- Recreational Facilities: 713940
Establishments engaged in operating facilities which offer “exercise and other active physical fitness conditioning or recreational sports activities”. Examples include athletic clubs, gymnasiums, dance centers, tennis clubs, and swimming pools.

A complete list of NAICS codes and definitions is available using the NAICS Association’s [free lookup service](#) .

Notes

Data Limitations

1. Data are reported based on the primary NAICS code of the establishment. By definition, the primary NAICS code should reflect 50% or more of the establishment’s activity. This definition may exclude some establishments from a particular industry classification. For example, a convenience store which also sells liquor may be classified only as a convenience store (445120) and not a beer, wine and liquor store (445310).

Race and Ethnicity

Statistics by race and ethnicity are not provided for this indicator.

Data Limitations

Reported data represent summaries limited by county boundaries. When comparing rates, consider the following:

- 1) Rates assume uniform distribution of both establishments and populations throughout the county and may not detect disparities in access for rural or minority populations.
- 2) Summaries may over-represent or under-represent county rates when populations or establishments are highly concentrated on county border lines.
- 3) Rates do not describe quality of the establishment or utilization frequency.

Recreation and Fitness Facility Access

Data Background

County Business Patterns (CBP) is an annual series that provides sub-national economic data by industry. Data for establishments are presented by geographic area, 6-digit NAICS industry, legal form of organization (U.S. and state only), and employment size class. Information is available on the number of establishments, employment during the week of March 12, first quarter payroll, and annual payroll. ZIP Code Business Patterns data are available shortly after the release of County Business Patterns. It provides the number of establishments by employment-size classes by detailed industry in the U.S.

County Business Patterns basic data items are extracted from the Business Register (BR), a database of all known single and multi-establishment employer companies maintained and updated by the U.S. Census Bureau. The BR contains the most complete, current, and consistent data for business establishments. The annual Company Organization Survey provides individual establishment data for multi-establishment companies. Data for single-establishment companies are obtained from

various Census Bureau programs, such as the Economic Census, Annual Survey of Manufactures and Current Business Surveys, as well as from administrative record sources.

Citation: [U.S. Census Bureau: County Business Patterns \(2012\)](#).

For more information about this source, including data collection methodology and definitions, refer to the [County Business Patterns](#)

Methodology

Population figures are acquired for this indicator from the U.S. Census Bureau, 2010 Decennial Census, Summary File 1. Industry counts are acquired from the U.S. Census Bureau, County Business Patterns (2010) data file. Industries are stratified based on the North American Industry Classification System (NAICS) a coding system used by Federal statistical agencies in classifying business establishments for the purpose of collecting, analyzing, and publishing statistical data related to the U.S. business economy. Establishment rates for each county are derived using the following formula:

$$\text{Rate} = [\text{Establishment Count}] / [\text{Population}] * 100,000$$

The specific codes used indicators reported from the Census Bureau's County Business Patterns (CBP) are listed below.

- Grocery stores and supermarkets: 445110
Grocery stores are establishments engaged in selling a "general line of food, such as canned and frozen foods; fresh fruits and vegetables; and fresh and prepared meats, fish, and poultry". Examples include supermarkets, commissaries and food stores. Convenience stores are excluded.
- Fast food restaurants: 722211
Any "limited service" establishments where the customer typically orders or selects items and pay before eating. Establishments may include carryout restaurants, delicatessens, drive-ins, pizza delivery shops, sandwich shops, and other fast food restaurants
- Alcoholic beverage retailers: 445310
Establishments engaged in "retailing packaged alcoholic beverages, such as ale, beer, wine, and liquor". Bars and other venues serving alcoholic beverages intended for immediate consumption on the premises are not included.
- Recreational Facilities: 713940
Establishments engaged in operating facilities which offer "exercise and other active physical fitness conditioning or recreational sports activities". Examples include athletic clubs, gymnasiums, dance centers, tennis clubs, and swimming pools.

A complete list of NAICS codes and definitions is available using the NAICS Association's [free lookup service](#).

Notes

Data Limitations

1. Data are reported based on the primary NAICS code of the establishment. By definition, the primary NAICS code should reflect 50% or more of the establishment's activity. This definition may exclude some establishments from a particular industry classification. For example, a convenience store which also sells liquor may be classified only as a convenience store (445120) and not a beer, wine and liquor store (445310).

Race and Ethnicity

Statistics by race and ethnicity are not provided for this indicator.

Data Limitations

Reported data represent summaries limited by county boundaries. When comparing rates, consider the following:

- 1) Rates assume uniform distribution of both establishments and populations throughout the county and may not detect disparities in access for rural or minority populations.
- 2) Summaries may over-represent or under-represent county rates when populations or establishments are highly concentrated on county border lines.
- 3) Rates do not describe quality of the establishment or utilization frequency.

Diabetes Management (Hemoglobin A1c Test)

Data Background

The Dartmouth Atlas of Healthcare is an online repository of health data and maps based on information included in the massive Medicare database maintained by the Center for Medicare and Medicaid Services (CMS). The project uses Medicare claims data in conjunction with other demographic data to provide information and analysis about national, regional, and local markets, as well as hospitals and their affiliated physicians. The Dartmouth Atlas of Health Care is produced and maintained by The Dartmouth Institute for Health Policy and Clinical Practice.

For more information about this source, including methodologies and definitions, refer to the [Dartmouth Atlas of Healthcare](#) website.

Methodology

The Dartmouth Institute analyzes data drawn from enrollment and claims files from the Medicare program. Analysis is restricted to the fee-for-service population over age 65; HMO patients are not included. Indicator data tables express the proportion of Medicare Part B patients screened for medical conditions based on the following formula:

$$\text{Percentage} = [\text{Number Screened}] / [\text{Total Patients}] * 100$$

When appropriate, statistical adjustments are carried out to account for differences in age, race and sex.

Access to the complete methodology is available in the Dartmouth Institute's [Report of the Dartmouth Atlas Project](#).

Alcohol Consumption

Data Background

The Behavioral Risk Factor Surveillance System (BRFSS) is

“... a collaborative project of the Centers for Disease Control and Prevention (CDC) and U.S. states and territories. The BRFSS, administered and supported by CDC's Behavioral Risk Factor Surveillance Branch, is an ongoing data collection program designed to measure behavioral risk factors for the adult population (18 years of age or older) living in households.”

Citation: Centers for Disease Control and Prevention, Office of Surveillance, Epidemiology, and Laboratory Services. [Overview: BRFSS 2010](#).

The health characteristics estimated from the BRFSS include data pertaining to health behaviors, chronic conditions, access and utilization of healthcare, and general health. Surveys are administered to populations at the state level and then delivered to the CDC and tabulated into county estimates by the BRFSS analysis team. Annual risk factor prevalence data are released for those geographic areas with 50 or more survey results and 10,000 or more total population (50 States, 170 Cities and Counties) in order to maintain the accuracy and confidentiality of the data. Multi-year estimates are produced by the NCHS to expand the coverage of data to approximately 2500 counties. These estimates are housed in the [Health Indicator Warehouse](#), the official repository of the nation's health data.

For more information on the BRFSS survey methods, or to obtain a copy of the survey questionnaires, please visit [the Behavioral Risk Factor Surveillance System](#) home page.

Methodology

Indicator percentages are acquired for years 2006-2012 from Behavioral Risk Factor Surveillance System (BRFSS) prevalence data, which is housed in the Health Indicator Warehouse. Percentages are generated based on the valid responses to the following question:

"One drink is equivalent to a 12-ounce beer, a 5-ounce glass of wine, or a drink with one shot of liquor. During the past 30 days, on the days when you drank, about how many drinks did you drink on the average?"

Respondents are considered heavy drinkers if they were male and reported having more than 2 drinks per day, or females that reported having more than 1 drink per day. Percentages are age-adjusted and only pertain to the non-institutionalized population aged 18 and up. Population numerators (number of adults) are not provided in the Health Indicator Warehouse data tables and were generated using the following formula:

$$[\text{Heavy Drinkers}] = ([\text{Indicator Percentage}] / 100) * [\text{Total Population}] .$$

Adult population figures used in the data tables are acquired from the American Community Survey (ACS) 2007-2011 five year estimates. Additional detailed information about the BRFSS, including questionnaires, data collection procedures, and [data](#)

[processing methodologies](#) are available on the BRFSS web site. For additional information about the multi-year estimates, please visit the [Health Indicator Warehouse](#).

Notes

Race and Ethnicity

Statistics by race and ethnicity are not provided for this indicator from the data source. Detailed race/ethnicity data may be available at a broader geographic level, or from a local source.

Data Suppression

Suppression is used to avoid misinterpretation when rates are unstable. Data is suppressed when the total number of persons sampled (for each geographic area / population group combination) over the survey period is less than 50, or when the standard error of the estimate exceeds 10% of the calculated value.

Alcohol Expenditures

Data Background

Nielsen is a publically held information company and a primary supplier of consumer spending data around the world, using both statistical analysis and field sampling techniques to produce accurate and timely information. Published annually, SiteReports provide market analysis to Nielsen customers at multiple geographic levels, spanning a wide range of topics including population demographics, household spending, and market potential. The SiteReports Consumer Buying Power (CBP) database is created using statistical models estimated from the Bureau of Labor Statistics' Consumer Expenditure Surveys (CEX). This survey provides information on the buying habits of American consumers, including expenditures, income, and other characteristics of the consumer unit (families and single consumers). The Consumer Expenditure Survey consists of two surveys: the quarterly Interview survey and the weekly Diary Survey. The surveys target the total non-institutionalized population (urban and rural) of the United States. The data is collected from the independent quarterly interview and weekly diary surveys of approximately 7,500 sample households. Each survey has its own independent sample, and each collects data on household income and socioeconomic characteristics. The current Nielsen Consumer Buying Power data uses a rolling five years of data from the Consumer Expenditure Survey, administered from 2005 through 2009. In addition to this data, the Nielsen Consumer Buying Power database also incorporates information from the following sources:

- Nielsen Demographic Update
- Nielsen Cartographics
- U.S. Census Bureau: Census of Retail Trade

For more information, please visit the [Nielsen SiteReports](#) website.

Methodology

Census tract level average and aggregated total household expenditures and category expenditures were acquired from the 2011 Nielsen *Consumer Buying Power (CBP) SiteReports*. Tract-level and county-level expenditure estimates are proprietary Nielsen data restricted from public distribution and subject to terms of use agreements. Indicator data tables contain state and national ranks for counties, and percent expenditure estimates based on aggregated tract-level data. The percent expenditure figures calculated for custom geographic areas can be expressed using the following formula:

$$\text{Percent Expenditures} = [\text{Category Expenditures}] / [\text{Total Area Expenditures}] * 100$$

To generate acceptable county-level output for indicator report pages, percent expenditures for each food-at-home category were sorted and ranked by county. Each county's within-state rank and that rank's percentile are displayed in the indicator data table. This information is not available for custom geographic areas, for states, or for the total United States. County percentiles are calculated using the following formula:

$$\text{Percentile} = [\text{County Within State Rank}] / [\text{Total Number of Counties in State}] * 100$$

To generate acceptable map output in compliance with the Nielsen terms of use agreement, percent expenditures for each tract were sorted and ranked; quintiles were assigned to each tract based on national rank and symbolized within the map. Additional attributes include each tract's within-state rank and quintile. Definitions for food-at-home categories used for consumer spending indicators are based on categories in the BLS Consumer Expenditure Survey (CEX), and are listed below.

- *Soft drinks: Soft drink expenditures included in this category are any non-alcoholic carbonated beverages purchased for consumption at home. Soft drinks purchased at restaurants and other dining establishments are not included.*
- *Alcoholic beverages: Alcohol expenditures included in this category are any beer, wine, and liquor purchased for consumption at home. Alcohol purchased at restaurants and bars is not included.*
- *Fruit and vegetables: Fruit and vegetables expenditures included in this category are all fresh, frozen and canned fruits and vegetables purchased for consumption at home.*
- *Tobacco: Tobacco expenditures included in this category are cigarettes only; cigars and other tobacco products are not included.*

Further details about the analysis used by Nielsen group can be found in the [Consumer Buying Power Methodology](#).

Notes

Race and Ethnicity

Statistics by race and ethnicity are not provided for this indicator.

Fruit/Vegetable Consumption

Data Background

The Behavioral Risk Factor Surveillance System (BRFSS) is

“... a collaborative project of the Centers for Disease Control and Prevention (CDC) and U.S. states and territories. The BRFSS, administered and supported by CDC’s Behavioral Risk Factor Surveillance Branch, is an ongoing data collection program designed to measure behavioral risk factors for the adult population (18 years of age or older) living in households.”

Citation: Centers for Disease Control and Prevention, Office of Surveillance, Epidemiology, and Laboratory Services. [Overview: BRFSS 2010](#).

The health characteristics estimated from the BRFSS include data pertaining to health behaviors, chronic conditions, access and utilization of healthcare, and general health. Surveys are administered to populations at the state level and then delivered to the CDC and tabulated into county estimates by the BRFSS analysis team. Annual risk factor prevalence data are released for those geographic areas with 50 or more survey results and 10,000 or more total population (50 States, 170 Cities and Counties) in order to maintain the accuracy and confidentiality of the data. Multi-year estimates are produced by the NCHS to expand the coverage of data to approximately 2500 counties. These estimates are housed in the [Health Indicator Warehouse](#), the official repository of the nation’s health data.

For more information on the BRFSS survey methods, or to obtain a copy of the survey questionnaires, please visit [the Behavioral Risk Factor Surveillance System](#) home page.

Methodology

Indicator percentages are acquired for years 2005-2009 from Behavioral Risk Factor Surveillance System (BRFSS) prevalence data, which is housed in the Health Indicator Warehouse. Data are based on the percentage of respondents who report regularly consuming five or more servings of fruits or vegetables each week. Fried potatoes and chips are excluded. Percentages are age-adjusted and only pertain to the non-institutionalized population aged 18 and up. Population numerators (number of adults consuming 5 servings) are not provided in the Health Indicator Warehouse data tables and were generated using the following formula:

$$\text{[Population Consuming 5 Servings]} = (\text{[Indicator Percentage]} / 100) * \text{[Total Population]}.$$

Adult population figures used in the data tables are acquired from the American Community Survey (ACS) 2005-2009 five year estimates. Additional detailed information about the BRFSS, including questionnaires, data collection procedures, and [data processing methodologies](#) are available on the BRFSS web site. For additional information about the multi-year estimates, please visit the [Health Indicator Warehouse](#).

Notes

Race and Ethnicity

Statistics by race and ethnicity are not provided for this indicator from the data source. Detailed race/ethnicity data may be available at a broader geographic level, or from a local source.

Data Suppression

Suppression is used to avoid misinterpretation when rates are unstable. Data is suppressed when the total number of persons sampled (for each geographic area / population group combination) over the survey period is less than 50, or when the standard error of the estimate exceeds 10% of the calculated value.

Fruit/Vegetable Expenditures

Data Background

Nielsen is a publically held information company and a primary supplier of consumer spending data around the world, using both statistical analysis and field sampling techniques to produce accurate and timely information. Published annually, SiteReports provide market analysis to Nielsen customers at multiple geographic levels, spanning a wide range of topics including population demographics, household spending, and market potential. The SiteReports Consumer Buying Power (CBP) database is created using statistical models estimated from the Bureau of Labor Statistics' Consumer Expenditure Surveys (CEX). This survey provides information on the buying habits of American consumers, including expenditures, income, and other characteristics of the consumer unit (families and single consumers). The Consumer Expenditure Survey consists of two surveys: the quarterly Interview survey and the weekly Diary Survey. The surveys target the total non-institutionalized population (urban and rural) of the United States. The data is collected from the independent quarterly interview and weekly diary surveys of approximately 7,500 sample households. Each survey has its own independent sample, and each collects data on household income and socioeconomic characteristics. The current Nielsen Consumer Buying Power data uses a rolling five years of data from the Consumer Expenditure Survey, administered from 2005 through 2009. In addition to this data, the Nielsen Consumer Buying Power database also incorporates information from the following sources:

- Nielsen Demographic Update
- Nielsen Cartographics
- U.S. Census Bureau: Census of Retail Trade

For more information, please visit the [Nielsen SiteReports](#) website.

Methodology

Census tract level average and aggregated total household expenditures and category expenditures were acquired from the 2011 Nielsen *Consumer Buying Power (CBP)* SiteReports. Tract-level and county-level expenditure estimates are proprietary Nielsen data restricted from public distribution and subject to terms of use agreements. Indicator data tables contain state and national

ranks for counties, and percent expenditure estimates based on aggregated tract-level data. The percent expenditure figures calculated for custom geographic areas can be expressed using the following formula:

$$\text{Percent Expenditures} = [\text{Category Expenditures}] / [\text{Total Area Expenditures}] * 100$$

To generate acceptable county-level output for indicator report pages, percent expenditures for each food-at-home category were sorted and ranked by county. Each county's within-state rank and that rank's percentile are displayed in the indicator data table. This information is not available for custom geographic areas, for states, or for the total United States. County percentiles are calculated using the following formula:

$$\text{Percentile} = [\text{County Within State Rank}] / [\text{Total Number of Counties in State}] * 100$$

To generate acceptable map output in compliance with the Nielsen terms of use agreement, percent expenditures for each tract were sorted and ranked; quintiles were assigned to each tract based on national rank and symbolized within the map. Additional attributes include each tract's within-state rank and quintile. Definitions for food-at-home categories used for consumer spending indicators are based on categories in the BLS Consumer Expenditure Survey (CEX), and are listed below.

- *Soft drinks: Soft drink expenditures included in this category are any non-alcoholic carbonated beverages purchased for consumption at home. Soft drinks purchased at restaurants and other dining establishments are not included.*
- *Alcoholic beverages: Alcohol expenditures included in this category are any beer, wine, and liquor purchased for consumption at home. Alcohol purchased at restaurants and bars is not included.*
- *Fruit and vegetables: Fruit and vegetables expenditures included in this category are all fresh, frozen and canned fruits and vegetables purchased for consumption at home.*
- *Tobacco: Tobacco expenditures included in this category are cigarettes only; cigars and other tobacco products are not included.*

Further details about the analysis used by Nielsen group can be found in the [Consumer Buying Power Methodology](#).

Notes

Race and Ethnicity

Statistics by race and ethnicity are not provided for this indicator.

Physical Inactivity - Adult

Data Background

The Centers for Disease Control and Prevention's National Center for Chronic Disease Prevention and Health Promotion monitors the health of the Nation and produces publically available data to promote general health. The division maintains the Diabetes Data and Trends data system, which includes the National Diabetes Fact Sheet and the National Diabetes Surveillance System. These programs provide resources documenting the public health burden of diabetes and its complications in the United

States. The surveillance system also includes county-level estimates of diagnosed diabetes and selected risk factors for all U.S. counties to help target and optimize the resources for diabetes control and prevention.

Citation: [Centers for Disease Control and Prevention, Diabetes Data & Trends: Frequently Asked Questions \(FAQ\). \(2012\).](#)

Methodology

Data for total population and estimated obese population data are acquired from the County Level Estimates of Diagnosed Diabetes, a service of the Centers for Disease Control and Prevention's National Diabetes Surveillance Program. Diabetes and other risk factor prevalence is estimated using the following formula:

$$\text{Percent Prevalence} = [\text{Risk Factor Population}] / [\text{Total Population}] * 100.$$

All data are estimates modeled by the CDC using the methods described below:

The National Diabetes Surveillance system produces data estimating the prevalence of diagnosed diabetes and population obesity by county using data from [CDC's Behavioral Risk Factor Surveillance System](#) (BRFSS) and data from the [U.S. Census Bureau's Population Estimates Program](#). The BRFSS is an ongoing, monthly, state-based telephone survey of the adult population. The survey provides state-specific information on behavioral risk factors and preventive health practices. Respondents were considered to have diabetes if they responded "yes" to the question, "Has a doctor ever told you that you have diabetes?" Women who indicated that they only had diabetes during pregnancy were not considered to have diabetes. Respondents were considered obese if their body mass index was 30 or greater. Body mass index (weight [kg]/height [m]²) was derived from self-report of height and weight. Respondents were considered to be physically inactive if they answered "no" to the question, "During the past month, other than your regular job, did you participate in any physical activities or exercises such as running, calisthenics, golf, gardening, or walking for exercise?"

Three years of data were used to improve the precision of the year-specific county-level estimates of diagnosed diabetes and selected risk factors. For example, 2003, 2004, and 2005 were used for the 2004 estimate and 2004, 2005, and 2006 were used for the 2005 estimate. Estimates were restricted to adults 20 years of age or older to be consistent with population estimates from the U.S. Census Bureau. The U.S. Census Bureau provides year-specific county population estimates by demographic characteristics—age, sex, race, and Hispanic origin. .

The county-level estimates were based on indirect model-dependent estimates. The model-dependent approach employs a statistical model that "borrows strength" in making an estimate for one county from BRFSS data collected in other counties. Bayesian multilevel modeling techniques were used to obtain these estimates. Separate models were developed for each of the four census regions: West, Midwest, Northeast and South. Multilevel Poisson regression models with random effects of demographic variables (age 20–44, 45–64, 65 ; race; sex) at the county-level were developed. State was included as a county-level covariate.

Citation: [Centers for Disease Control and Prevention, Diabetes Data & Trends: Frequently Asked Questions \(FAQ\). \(2012\).](#)

Rates were age adjusted by the CDC for the following three age groups: 20-44, 45-64, 65. Additional information, including the complete methodology and data definitions, can be found at the CDC's [Diabetes Data and Trends](#) website.

Notes

Race and Ethnicity

Statistics by race and ethnicity are not provided for this indicator from the data source. Detailed race/ethnicity data may be available at a broader geographic level, or from a local source.

Soda Expenditures

Data Background

Nielsen is a publically held information company and a primary supplier of consumer spending data around the world, using both statistical analysis and field sampling techniques to produce accurate and timely information. Published annually, SiteReports provide market analysis to Nielsen customers at multiple geographic levels, spanning a wide range of topics including population demographics, household spending, and market potential. The SiteReports Consumer Buying Power (CBP) database is created using statistical models estimated from the Bureau of Labor Statistics' Consumer Expenditure Surveys (CEX). This survey provides information on the buying habits of American consumers, including expenditures, income, and other characteristics of the consumer unit (families and single consumers). The Consumer Expenditure Survey consists of two surveys: the quarterly Interview survey and the weekly Diary Survey. The surveys target the total non-institutionalized population (urban and rural) of the United States. The data is collected from the independent quarterly interview and weekly diary surveys of approximately 7,500 sample households. Each survey has its own independent sample, and each collects data on household income and socioeconomic characteristics. The current Nielsen Consumer Buying Power data uses a rolling five years of data from the Consumer Expenditure Survey, administered from 2005 through 2009. In addition to this data, the Nielsen Consumer Buying Power database also incorporates information from the following sources:

- Nielsen Demographic Update
- Nielsen Cartographics
- U.S. Census Bureau: Census of Retail Trade

For more information, please visit the [Nielsen SiteReports](#) website.

Methodology

Census tract level average and aggregated total household expenditures and category expenditures were acquired from the 2011 Nielsen *Consumer Buying Power (CBP)* SiteReports. Tract-level and county-level expenditure estimates are proprietary Nielsen data restricted from public distribution and subject to terms of use agreements. Indicator data tables contain state and national ranks for counties, and percent expenditure estimates based on aggregated tract-level data. The percent expenditure figures calculated for custom geographic areas can be expressed using the following formula:

$$\text{Percent Expenditures} = [\text{Category Expenditures}] / [\text{Total Area Expenditures}] * 100$$

To generate acceptable county-level output for indicator report pages, percent expenditures for each food-at-home category were

sorted and ranked by county. Each county's within-state rank and that rank's percentile are displayed in the indicator data table. This information is not available for custom geographic areas, for states, or for the total United States. County percentiles are calculated using the following formula:

$$\text{Percentile} = [\text{County Within State Rank}] / [\text{Total Number of Counties in State}] * 100$$

To generate acceptable map output in compliance with the Nielsen terms of use agreement, percent expenditures for each tract were sorted and ranked; quintiles were assigned to each tract based on national rank and symbolized within the map. Additional attributes include each tract's within-state rank and quintile. Definitions for food-at-home categories used for consumer spending indicators are based on categories in the BLS Consumer Expenditure Survey (CEX), and are listed below.

- *Soft drinks: Soft drink expenditures included in this category are any non-alcoholic carbonated beverages purchased for consumption at home. Soft drinks purchased at restaurants and other dining establishments are not included.*
- *Alcoholic beverages: Alcohol expenditures included in this category are any beer, wine, and liquor purchased for consumption at home. Alcohol purchased at restaurants and bars is not included.*
- *Fruit and vegetables: Fruit and vegetables expenditures included in this category are all fresh, frozen and canned fruits and vegetables purchased for consumption at home.*
- *Tobacco: Tobacco expenditures included in this category are cigarettes only; cigars and other tobacco products are not included.*

Further details about the analysis used by Nielsen group can be found in the [Consumer Buying Power Methodology](#).

Notes

Race and Ethnicity

Statistics by race and ethnicity are not provided for this indicator.

Tobacco Expenditures

Data Background

Nielsen is a publically held information company and a primary supplier of consumer spending data around the world, using both statistical analysis and field sampling techniques to produce accurate and timely information. Published annually, SiteReports provide market analysis to Nielsen customers at multiple geographic levels, spanning a wide range of topics including population demographics, household spending, and market potential. The SiteReports Consumer Buying Power (CBP) database is created using statistical models estimated from the Bureau of Labor Statistics' Consumer Expenditure Surveys (CEX). This survey provides information on the buying habits of American consumers, including expenditures, income, and other characteristics of the consumer unit (families and single consumers). The Consumer Expenditure Survey consists of two surveys: the quarterly Interview survey and the weekly Diary Survey. The surveys target the total non-institutionalized population (urban and rural) of the United States. The data is collected from the independent quarterly interview and weekly diary surveys of approximately 7,500

sample households. Each survey has its own independent sample, and each collects data on household income and socioeconomic characteristics. The current Nielsen Consumer Buying Power data uses a rolling five years of data from the Consumer Expenditure Survey, administered from 2005 through 2009. In addition to this data, the Nielsen Consumer Buying Power database also incorporates information from the following sources:

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For more information, please visit the [Nielsen SiteReports](#) website.

Methodology

Census tract level average and aggregated total household expenditures and category expenditures were acquired from the 2011 Nielsen *Consumer Buying Power (CBP)* SiteReports. Tract-level and county-level expenditure estimates are proprietary Nielsen data restricted from public distribution and subject to terms of use agreements. Indicator data tables contain state and national ranks for counties, and percent expenditure estimates based on aggregated tract-level data. The percent expenditure figures calculated for custom geographic areas can be expressed using the following formula:

$$\text{Percent Expenditures} = [\text{Category Expenditures}] / [\text{Total Area Expenditures}] * 100$$

To generate acceptable county-level output for indicator report pages, percent expenditures for each food-at-home category were sorted and ranked by county. Each county's within-state rank and that rank's percentile are displayed in the indicator data table. This information is not available for custom geographic areas, for states, or for the total United States. County percentiles are calculated using the following formula:

$$\text{Percentile} = [\text{County Within State Rank}] / [\text{Total Number of Counties in State}] * 100$$

To generate acceptable map output in compliance with the Nielsen terms of use agreement, percent expenditures for each tract were sorted and ranked; quintiles were assigned to each tract based on national rank and symbolized within the map. Additional attributes include each tract's within-state rank and quintile. Definitions for food-at-home categories used for consumer spending indicators are based on categories in the BLS Consumer Expenditure Survey (CEX), and are listed below.

- *Soft drinks: Soft drink expenditures included in this category are any non-alcoholic carbonated beverages purchased for consumption at home. Soft drinks purchased at restaurants and other dining establishments are not included.*
- *Alcoholic beverages: Alcohol expenditures included in this category are any beer, wine, and liquor purchased for consumption at home. Alcohol purchased at restaurants and bars is not included.*
- *Fruit and vegetables: Fruit and vegetables expenditures included in this category are all fresh, frozen and canned fruits and vegetables purchased for consumption at home.*

- Tobacco: *Tobacco expenditures included in this category are cigarettes only; cigars and other tobacco products are not included.*

Further details about the analysis used by Nielsen group can be found in the [Consumer Buying Power Methodology](#).

Notes

Race and Ethnicity

Statistics by race and ethnicity are not provided for this indicator.

Tobacco Usage - Current Smokers

Data Background

The Behavioral Risk Factor Surveillance System (BRFSS) is

“... a collaborative project of the Centers for Disease Control and Prevention (CDC) and U.S. states and territories. The BRFSS, administered and supported by CDC's Behavioral Risk Factor Surveillance Branch, is an ongoing data collection program designed to measure behavioral risk factors for the adult population (18 years of age or older) living in households.”

Citation: Centers for Disease Control and Prevention, Office of Surveillance, Epidemiology, and Laboratory Services. [Overview: BRFSS 2010](#).

The health characteristics estimated from the BRFSS include data pertaining to health behaviors, chronic conditions, access and utilization of healthcare, and general health. Surveys are administered to populations at the state level and then delivered to the CDC and tabulated into county estimates by the BRFSS analysis team. Annual risk factor prevalence data are released for those geographic areas with 50 or more survey results and 10,000 or more total population (50 States, 170 Cities and Counties) in order to maintain the accuracy and confidentiality of the data. Multi-year estimates are produced by the NCHS to expand the coverage of data to approximately 2500 counties. These estimates are housed in the [Health Indicator Warehouse](#), the official repository of the nation's health data.

For more information on the BRFSS survey methods, or to obtain a copy of the survey questionnaires, please visit [the Behavioral Risk Factor Surveillance System](#) home page.

Methodology

Indicator percentages are acquired for years 2006-2012 from Behavioral Risk Factor Surveillance System (BRFSS) prevalence data, which is housed in the Health Indicator Warehouse. Data are based on the percentage of respondents answering the following question:

"Do you now smoke cigarettes every day, some days, or not at all?"

Respondents are considered smokers if they reported smoking every day or some days. Percentages are age-adjusted and only pertain to the non-institutionalized population aged 18 and up. Population numerators (number of adult smokers) are not provided in the Health Indicator Warehouse data tables and were generated using the following formula:

$$[\text{Adults Smokers}] = ([\text{Indicator Percentage}] / 100) * [\text{Total Population}].$$

Adult population figures used in the data tables are acquired from the American Community Survey (ACS) 2007-2011 five year estimates. Additional detailed information about the BRFSS, including questionnaires, data collection procedures, and [data processing methodologies](#), are available on the BRFSS web site. For additional information about the multi-year estimates, please visit the [Health Indicator Warehouse](#).

Notes

Race and Ethnicity

Statistics by race and ethnicity are not provided for this indicator from the data source. Detailed race/ethnicity data may be available at a broader geographic level, or from a local source.

Data Suppression

Suppression is used to avoid misinterpretation when rates are unstable. Data is suppressed when the total number of persons sampled (for each geographic area / population group combination) over the survey period is less than 50, or when the standard error of the estimate exceeds 10% of the calculated value.

Tobacco Usage - Quit Attempt

Data Background

The Behavioral Risk Factor Surveillance System (BRFSS) is

“... a collaborative project of the Centers for Disease Control and Prevention (CDC) and U.S. states and territories. The BRFSS, administered and supported by CDC's Behavioral Risk Factor Surveillance Branch, is an ongoing data collection program designed to measure behavioral risk factors for the adult population (18 years of age or older) living in households.”

Citation: Centers for Disease Control and Prevention, Office of Surveillance, Epidemiology, and Laboratory Services. [Overview: BRFSS 2010](#).

The health characteristics estimated from the BRFSS include data pertaining to health behaviors, chronic conditions, access and utilization of healthcare, and general health. Surveys are administered to populations at the state level and then delivered to the CDC. BRFSS annual survey data are publically available and maintained on the CDC's BRFSS [Annual Survey Data](#) web page.

For more information on the BRFSS survey methods, or to obtain a copy of the survey questionnaires, please visit [the Behavioral Risk Factor Surveillance System](#) home page.

Methodology

Indicator percentages are acquired from analysis of annual survey data from the Behavioral Risk Factor Surveillance System (BRFSS) for years 2006-2010. Percentages are generated based on valid responses to the following questions:

“Do you have one person you think of as your personal doctor or health care provider? (If “No” ask “Is there more than one or is there no person who you think of as your personal doctor or health care provider?.)”

This indicator represents the percentage of those persons who answered “no” to both parts of the question, indicating that they do not see any regular doctor. Data only pertain to the non-institutionalized population aged 18 and up and are weighted to reflect the total county population, including non-respondents, using the methods described in the BRFSS Comparability of Data documentation. Population numerators (estimated number of adults exercising each risk behavior) are not provided in the annual survey data and were generated for the data tables using the following formula:

$$\text{Adults Without Any Regular Doctor} = ([\text{Indicator Percentage}] / 100) * [\text{Total Adult Population}]$$

The population figures used for these estimates are acquired from the American Community Survey (ACS) 2006-2010 five year estimates.

Additional detailed information about the BRFSS, including questionnaires, data collection procedures, and [data processing methodologies](#) are available on the Behavioral Risk Factor Surveillance System home page.

Notes

Data Suppression


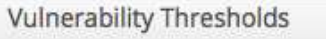
Suppression is used to avoid misinterpretation when rates are unstable. Data is suppressed when the total number of persons sampled (for each geographic area / population group combination) over the survey period is less than 20. Data are unreliable when the total number of persons sampled over the survey period is less than 50. Confidence intervals are available when exploring the data through the map viewer.

Race and Ethnicity

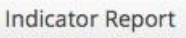

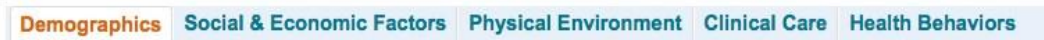

Race and ethnicity (Hispanic origin) are collected as two separate categories in the Behavioral Risk Factor Surveillance System (BRFSS) interview surveys based on methods established by the U.S. Office of Management and Budget (OMB) in 1997. Before the raw survey data files are released, self-identified race and ethnicity variables are recoded by National Center for Health Statistics (NCHS) analysts into the following categories: White, Non-Hispanic; Black, Non-Hispanic; Multiple Race, Non-Hispanic; Other Race, Non-Hispanic; and Hispanic or Latino. Due to sample size constraints, race and ethnicity statistics are only reported at the state and national levels.

Reporting with the Community Health Needs Assessment Toolkit

Explore Your Community:



1. From the homepage, **click** on  then **select** **Vulnerable Population Footprint**.
2. In the location box, **type** Cuyahoga County, Ohio.
3. Explore the most vulnerable communities by **zooming in** and **clicking** on different areas to see their specific data.
4. **Click** on the  toolbar at the bottom of the right hand menu.
5. **Adjust** the indicator thresholds to widen or narrow your footprint.

Make an Indicator Report:




1. **Click** on the  toolbar.
2. **Select** “**Core health indicators report**” using the current map area, then select .
3. Explore the Core Health Needs Assessment (CHNA) report by **clicking** through the data categories in the top toolbar.

4. **Download** the data from any of the tables on an indicator page into an excel spreadsheet by selecting  at the top of each table.
5. Dials show how your report area compares to national and state averages and benchmarks set by Healthy People 2020 when possible.
 - a. **Red** dials indicate that your report area needs improvement in this particular indicator
 - b. **Green** dials indicate that your report area is doing well in this particular indicator
6. **Click** on “**View larger map**” under the embedded map thumbnails to open up a larger map you can edit, save and share. **Overlay** local data over the Vulnerable Populations Footprint outlined in **red**
 - a. **Close** this tab and return to your CHNA report.

Reporting with the Community Health Needs Assessment Toolkit

Expand Your Report:

1. Click on  at the top or bottom of the page
2. Under **Report Options**, under “Physical Environment” **add** “Low Income Population with Limited Food Access”, “SNAP-Authorized Food Stores”, and “WIC-Authorized Food Stores”.
3. Click  to explore community need around the additional indicators

Save or Share Your Report:

1. Under **Report Options**, **select**  from the top toolbar.
2. Give your report a **title**, and **choose** a format (PDF or Microsoft Word) and page range
3. To export your report, **select** .
4. **Save** your report to your group space clicking  and selecting your Northeast Ohio Community Commons Group Project.
 - a. **Enter** a title, description and keywords

