



THE HEALTH OF **AFRICAN AMERICANS** IN OUR COMMUNITY

Results from the 2017
Community Health Status Survey

INTERACT
FOR **HEALTH**

A Catalyst for Health and Wellness

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Page 13 photo source: UConn Rudd Center for Food Policy & Obesity.

Page 31 photo source: Cincinnati USA Convention & Visitors Bureau.

Thanks to United Way of Greater Cincinnati for its continued support of the Community Health Status Survey and this report about African American health.

A WORD FROM DR. OWENS

For more than a decade the Community Health Status Survey (CHSS) has provided a snapshot of health in Greater Cincinnati and Northern Kentucky. Data from the survey can show how our region stacks up against the rest of the country and how our health is changing over time. The results give organizations and agencies, policymakers and residents the local data they need as they work to improve the overall health of the region.

When we look closely at the data by various factors such as age, income and education we see differences in people's health. In this report we examine the data by race. Doing so provides details about the health of African Americans in our region and helps us look at the survey data through a health equity lens.

To have a healthy society, all people must be able to participate, prosper and reach their full potential. We know that disparities continue to affect the health of the almost 300,000 African Americans who live in the 22 counties around Cincinnati in Southwestern Ohio, Northern Kentucky and Southeastern Indiana.

We also know that achieving health can be more difficult for African Americans. Certain diseases such as breast cancer are more severe among African Americans. The experiences of African Americans in the past have led many to harbor suspicions about health care systems. Social issues that affect health such as housing, income and transportation tend to have a greater impact on African Americans.

The data in this report will show in detail areas in which the health of African Americans in our region has improved, where health status has stayed the same and where racial disparities are becoming more pronounced. For example:

- Half of African American adults (50%) drink seven or more sodas or sugary beverages each week. (See page 19.)
- When asked if it is easy to buy healthy food in their neighborhoods, 29% of African Americans disagree. (See page 20.)
- Almost 4 in 10 African American adults (38%) have experienced food insecurity in the past year. (See page 22.)
- About the same percentage of African American and White adults smoke. However African American adults are more likely to allow people to smoke in their home. (See page 24.)



**O'dell M. Owens,
MD, MPH**

President & CEO

**INTERACT
FOR HEALTH**
A Catalyst for Health and Wellness

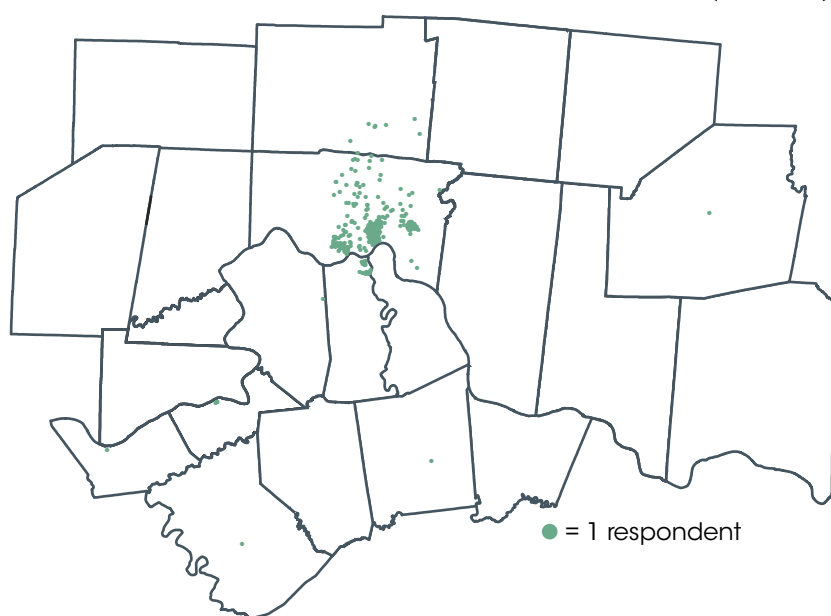


Feelings about our community can also affect health:

- Only 31% of African American adults rated their community excellent or very good as a healthy place to live. (See page 30.)
- African Americans were much less likely than White adults to agree that:
 - People can depend on each other in my community.
 - Living in my community gives me a secure feeling.
 - People in my community know they can get help from the community if they are in trouble. (See page 28.)
- Fewer than 4 in 10 African Americans adults (37%) rated the conditions of

the homes in their neighborhood as excellent or very good. Only 46% said the condition of their own home was excellent or very good. (See page 32.)

African American respondents to the 2017 Community Health Status Survey (N=896)



We have an obligation to come together to understand and address these disparities. Based on national conversations around health disparities by the Centers for Disease Control and Prevention (CDC) and others, some possible approaches may include:

- Promoting research to help us better understand why certain diseases affect African Americans more than others.
- Implementing health policies, systems and environmental changes in underserved communities.
- Helping health care providers understand cultural differences and the needs of diverse patient populations.
- Connecting diverse groups who are already working in our communities.
- Addressing social determinants of health such as housing, transportation and education that directly impact health.

Real progress will require creative and innovative solutions that stretch beyond the health care system. The impact of these efforts will ripple far beyond the target populations. To achieve improved health and lasting change for all people, we must start by improving health equity.

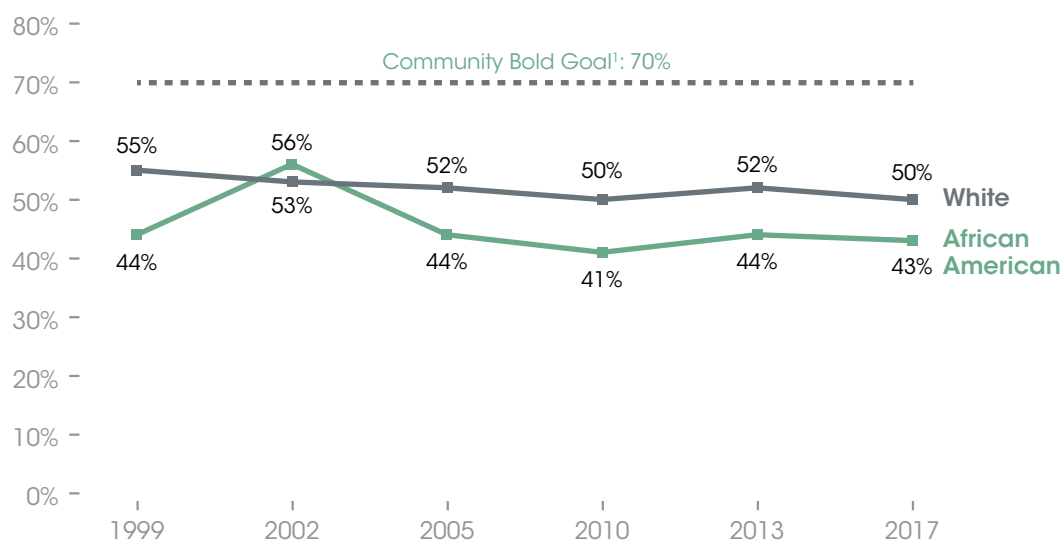


GENERAL HEALTH

4 in 10 African American adults report excellent or very good health

Adults' overall self-rated health status is an important indicator of well-being. Research has made a strong and powerful link between people's response to this question and their predicted length and quality of life. CHSS asked, "In general, would you say your health is excellent, very good, good, fair or poor?"

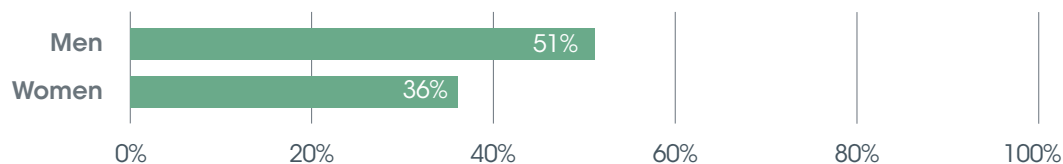
Percentage of adults who report excellent or very good health



FEWER African American adults than White adults report excellent or very good health. Percentages have not changed since 2005.

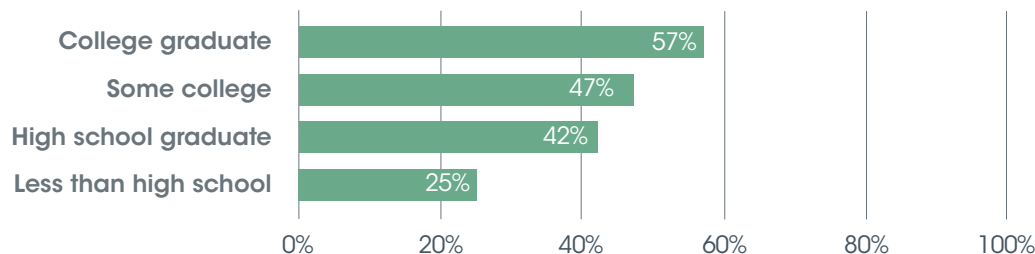
CLOSER LOOK

African American adults who report excellent or very good health, by sex



African American men are **more likely** than African American women to report excellent or very good health.

African American adults who report excellent or very good health, by education





African Americans with more education are **MORE LIKELY** than those with less education to report excellent or very good health.

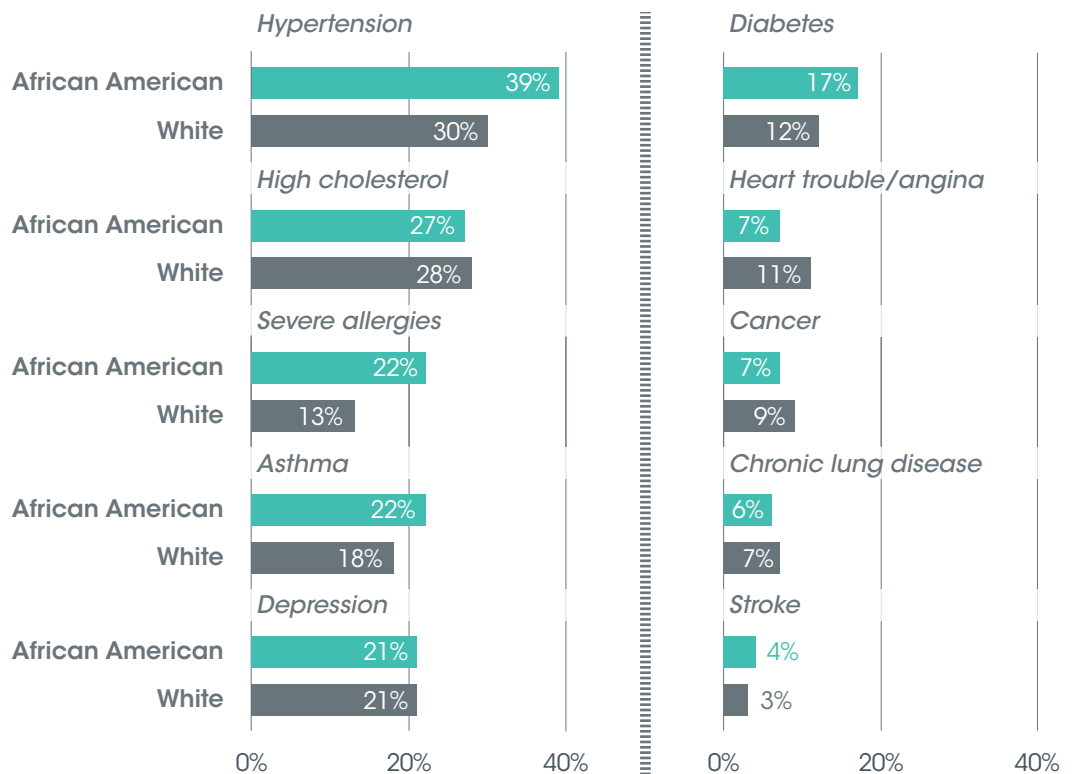
CHRONIC CONDITIONS

Some conditions such as high blood pressure more common among African Americans

Chronic illness can create a physical, emotional and financial burden for people. If not monitored and managed well, these conditions can have a devastating impact on long-term health and survival. *CHSS asked, "Has a doctor or other health care provider ever told you that you have ..."*

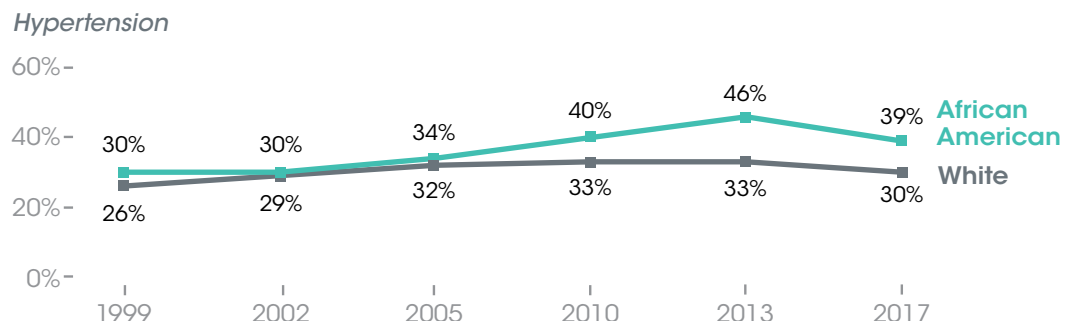
In 2017, African American adults were **MORE LIKELY** than White adults to report having been diagnosed with high blood pressure, severe allergies, diabetes and asthma, and **LESS LIKELY** to have been diagnosed with heart trouble or angina.

Percentage of Greater Cincinnati adults reporting chronic conditions



TRENDS

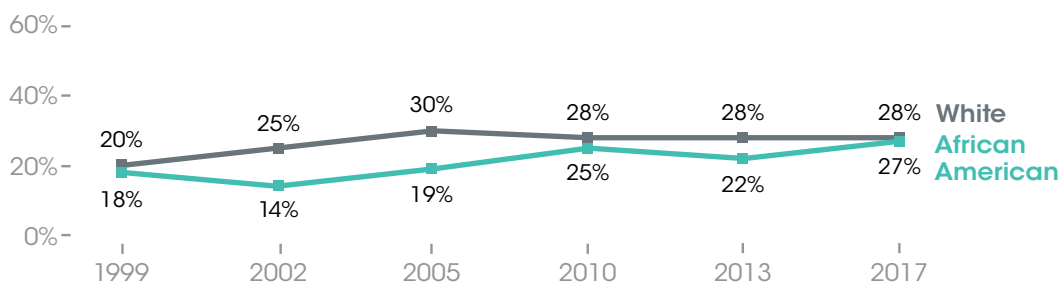
Percentage of Greater Cincinnati adults who have been told they have ...



4 in 10 African American adults have been told they have hypertension; **DOWN** since 2013.

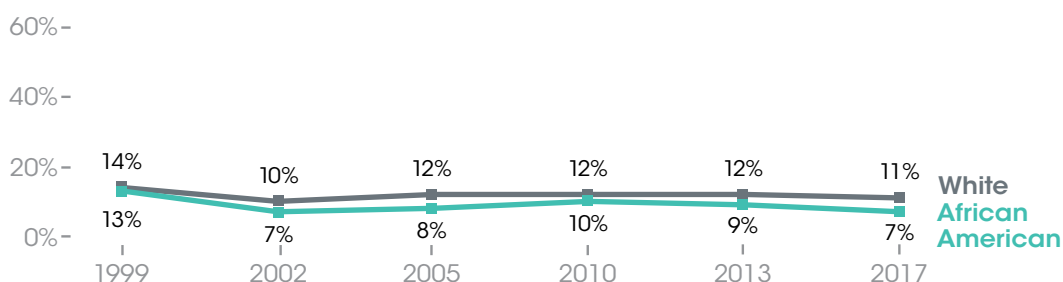
Percentage of Greater Cincinnati adults who have been told they have ...

High cholesterol/triglycerides



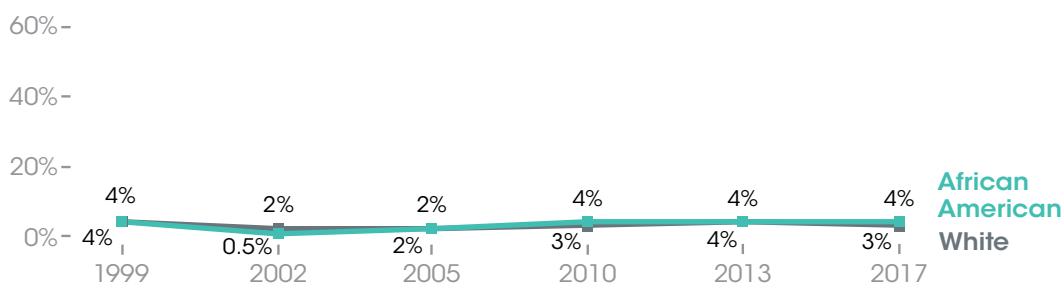
↑ 3 in 10 African American adults have been told they have high cholesterol; **UP** since 2013.

Heart trouble/angina



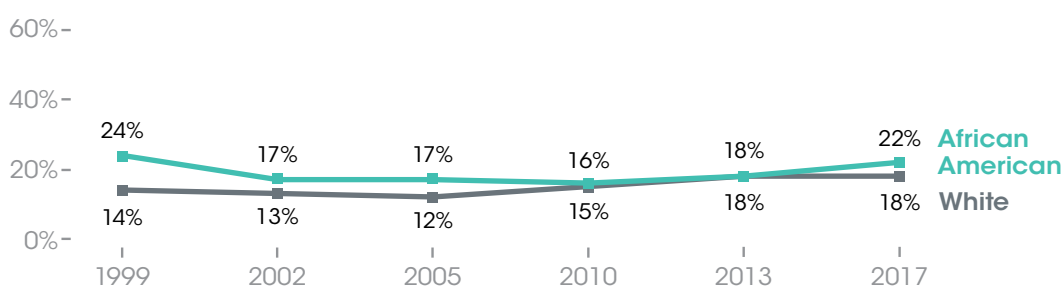
Fewer than 1 in 10 African American adults been told they have heart trouble.

Stroke



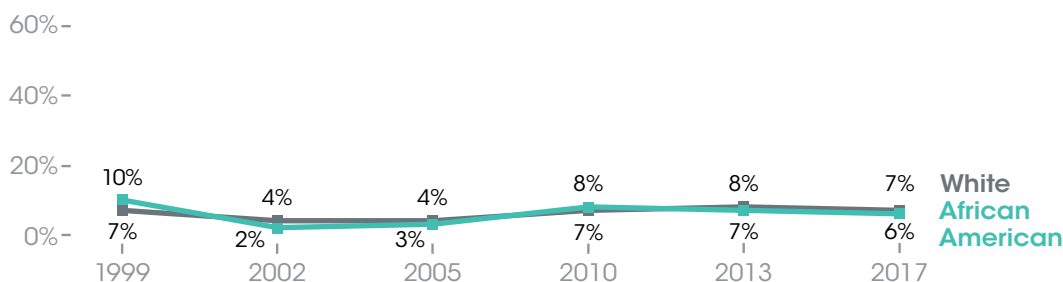
4 percent of African American adults have been told they've had a stroke.

Asthma



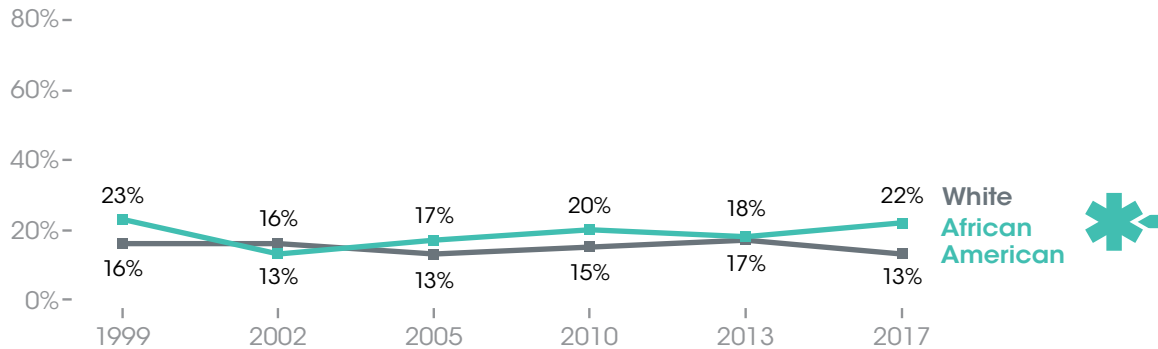
↑ 2 in 10 African American adults have been told they have asthma, **UP** since 2013.

Chronic lung disease



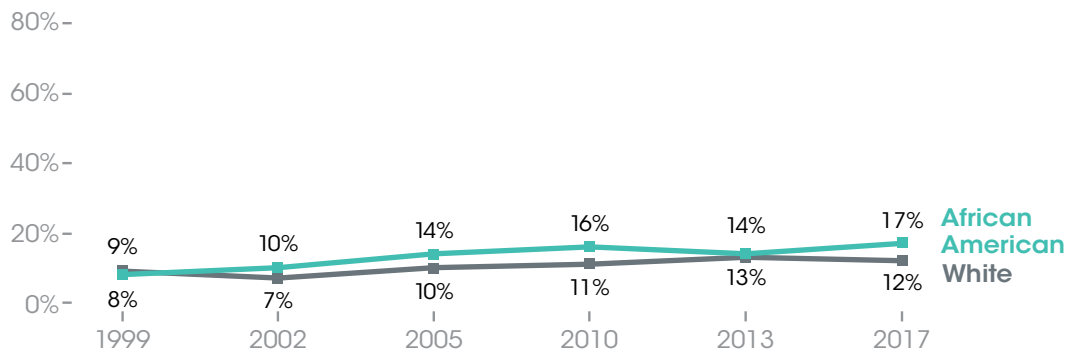
Fewer than 1 in 10 African American adults have been told they have chronic lung disease.

Percentage of Greater Cincinnati adults who have been told they have ...
Severe allergies



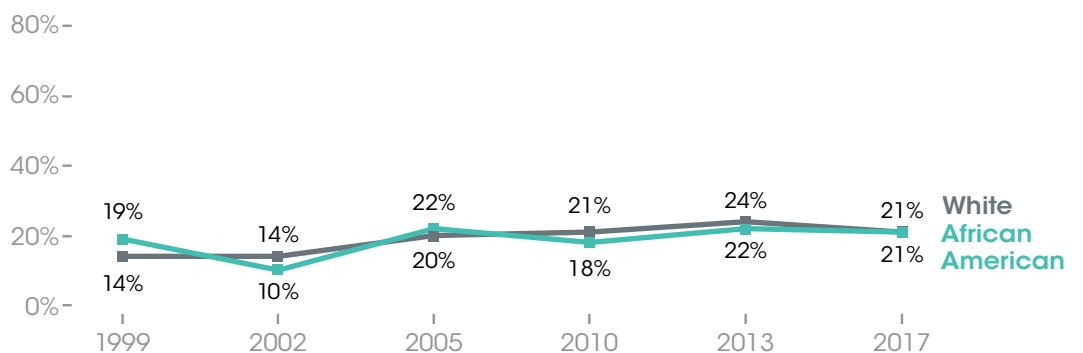
Nearly 2 in 10 African American adults have been told they have diabetes, **STEADY** since 2013.

Diabetes



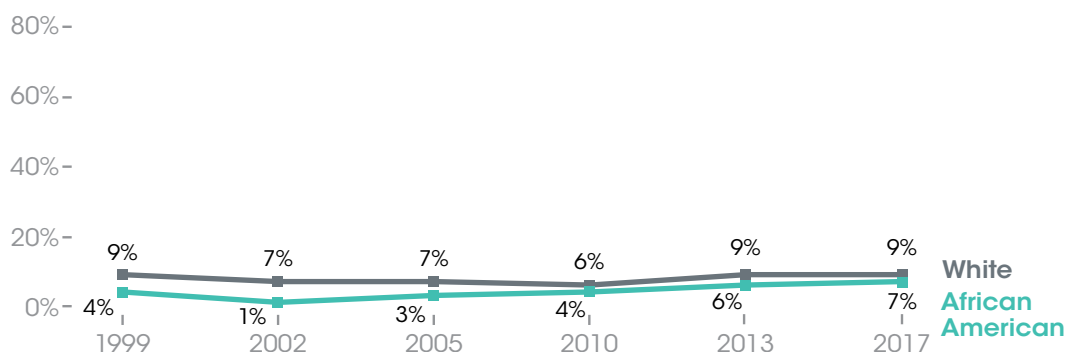
2 in 10 African American adults have been told they have depression, **STEADY** since 2013.

Depression



Fewer than 1 in 10 African American adults have been told they have cancer, **THE SAME** as in 2013.

Cancer





2 in 10 African
American adults
have been
told they have
severe allergies;
UP since 2013.

OBESITY

7 in 10 African American adults in the region are overweight or obese

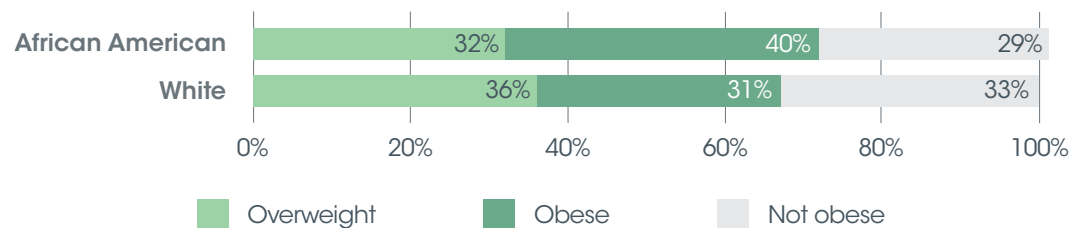
Maintaining a healthy weight can support good health. Being overweight or obese increases a person's risk for diabetes, heart disease, respiratory conditions and some cancers. It can also make it more difficult to engage in some daily activities.

CHSS asked adults their weight and height to determine if they were obese using the Body Mass Index (BMI).²

Based on BMI, a person who is 5 feet 4 inches tall would be considered overweight at 150 pounds and obese at 180 pounds. A person who is 6 feet tall would be considered overweight at 190 pounds and obese at 220 pounds.

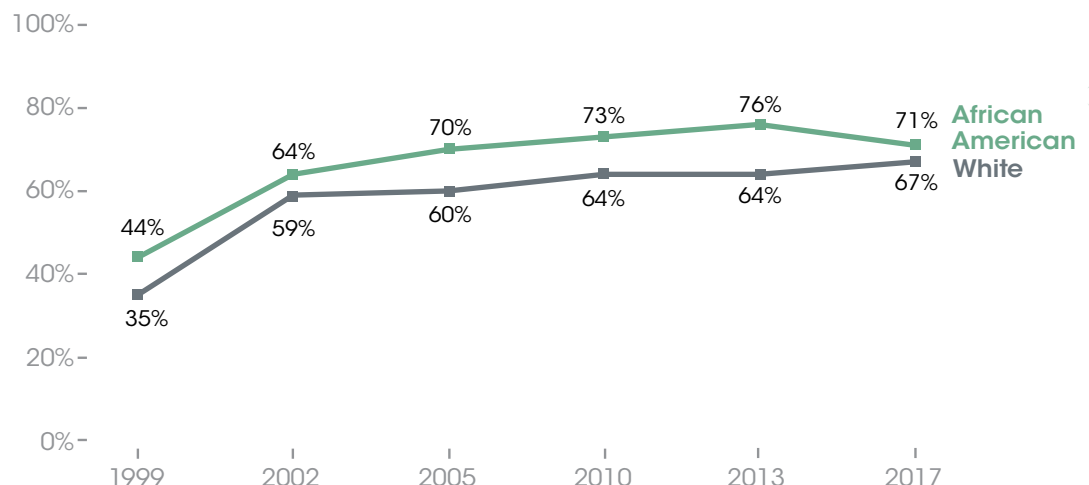
4 in 10 African American adults are obese, **MORE** than White adults.

Greater Cincinnati adults who are obese or overweight, 2017 (Percentages may not add to 100 percent because of rounding.)



TRENDS

Greater Cincinnati adults who are obese or overweight





The percentage of overweight and obese African American adults **DECLINED** since 2013.

PHYSICAL ACTIVITY

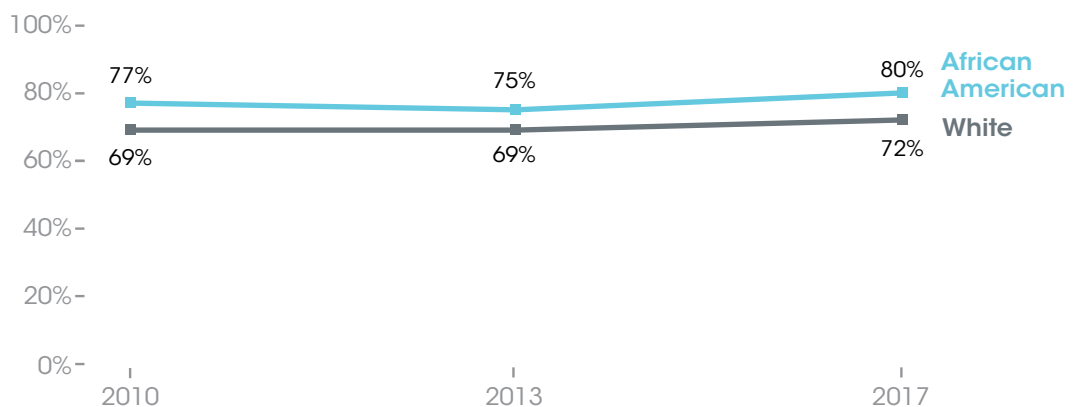
8 in 10 African Americans report safe sidewalks and shoulders in their communities

Being physically active is one of the most important things people can do to improve their health. According to the CDC, regular physical activity can reduce the risk of chronic diseases, improve muscle and bone strength, improve mental health and increase life expectancy.³ One thing that can influence physical activity, including walking, is access to sidewalks. Studies have shown that people are more likely to use sidewalks that are in good condition than sidewalks that are not.⁴

CHSS asked adults whether they agreed or disagreed with the following statement: "There are sidewalks or shoulders on streets in my community that allow for safe walking, jogging or biking."

African American adults are **MORE LIKELY** than White adults to agree they have safe sidewalks; **STEADY** since 2013.

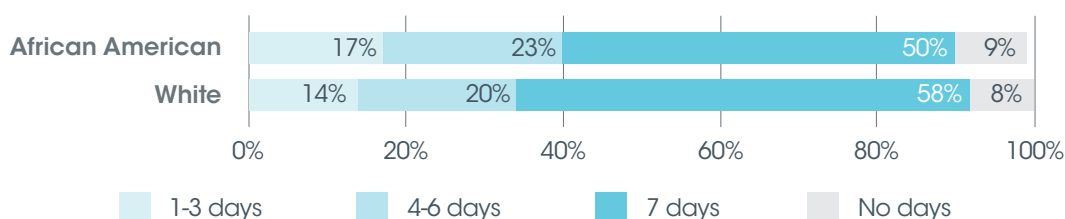
Percentage of Greater Cincinnati adults who report safe sidewalks and shoulders in their neighborhood



Half of African Americans walk each day

One of the easiest ways to increase physical activity is by walking. Walking is especially accessible because it does not require any special skills or facilities. CHSS asked adults in the region how many days each week they walk for at least 10 minutes.

Number of days each month that Greater Cincinnati adults report walking at least 10 minutes a day (Percentages may not add to 100 percent because of rounding.)

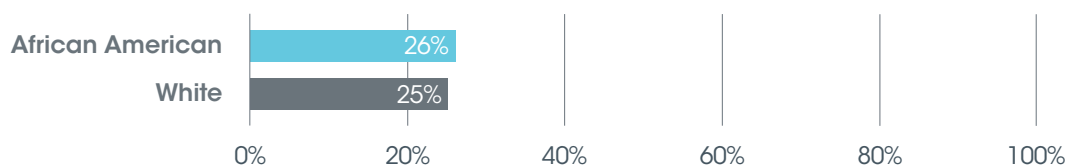


5 in 10 African American adults walk at least 10 minutes each day, **FEWER** than White adults.

1 in 4 adults report sitting eight hours per day

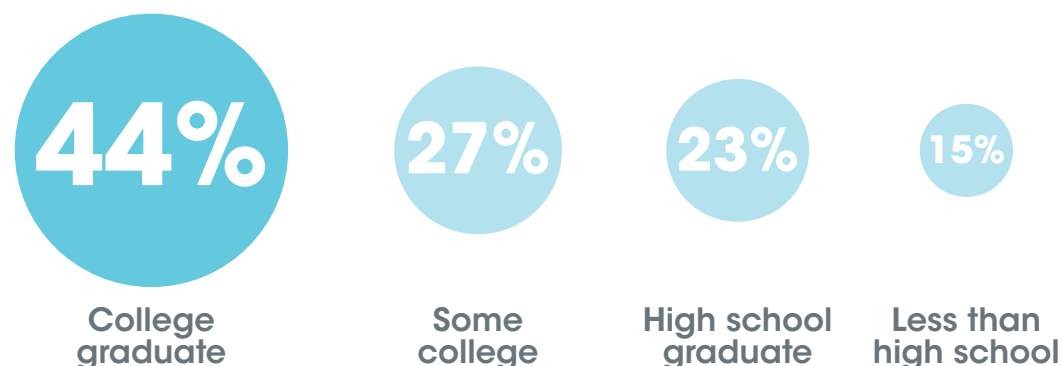
Long periods of time spent sitting, even when paired with moderate physical activity, can lead to poor health.⁵ Studies have shown that sedentary behavior can increase the risk of cardiovascular disease, cancer and type 2 diabetes.⁶

Percentage of Greater Cincinnati adults who report sitting eight or more hours per day



1 in 4 African American adults sits at least eight hours per day, **THE SAME** as White adults.

Percentage of African American adults who report sitting eight or more hours per day, by education

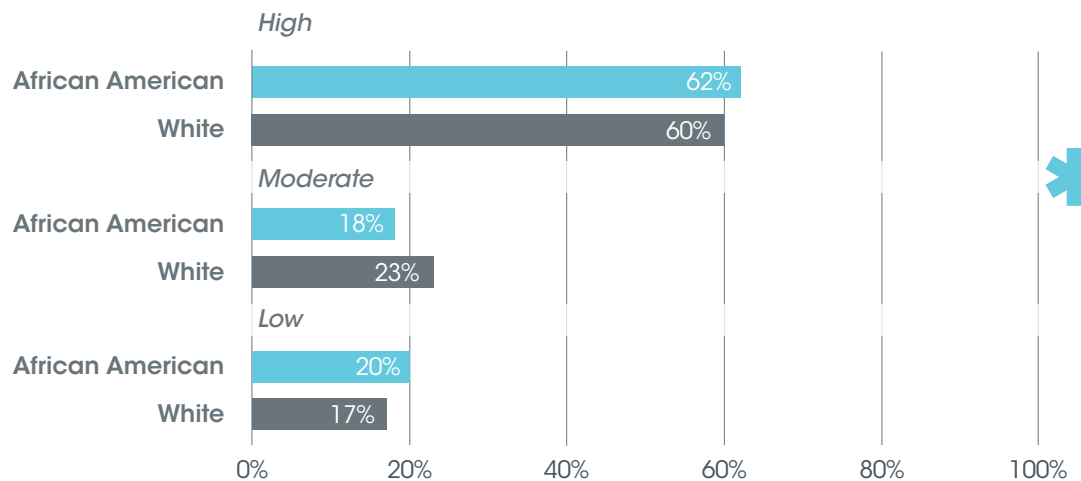


Sitting eight hours is more common among African American adults with more education.

Measuring physical activity at work and leisure

The 2017 CHSS incorporated the International Physical Activity Questionnaire (IPAQ), short form. This form is designed to measure adults' physical activity throughout the entire day. Adults are asked to report their level of activity over the past seven days in four categories: vigorous activity, moderate activity, walking and sitting.

Physical activity level reported by Greater Cincinnati adults



CHSS found that more than 6 in 10 African American adults in our region have high levels of activity (62%). Two in 10 have moderate levels of activity (18%) and 2 in 10 have low levels of activity (20%). Findings were similar for White adults. These results show more self-reported physical activity than is sometimes reported in our region. One possible reason for this is that measurements of physical activity often rely on self-reports of activity outside of working hours only. The IPAQ asks respondents to report about all activity, including at work, at home and at leisure. Using the IPAQ, a person could qualify as "moderately" or "highly" active because of the time they spend on their feet as part of their job, even if they have little or no activity outside the workplace.

This is the first time CHSS has incorporated this tool to measure physical activity. Additional research is required to better understand how we can use self-reported measures to explore physical-activity levels in both work and nonwork environments.

A full-page photograph of a Black man running on a black athletic track. He is wearing a white headband, a white sleeveless athletic shirt, white shorts, white socks, and white sneakers. He is captured in mid-stride, looking forward with a focused expression. The background is a blurred green field and trees, suggesting an outdoor setting. In the top left corner, there is a solid light blue rectangular shape. On the left side, there is a white rectangular box containing text. The page number '17' is in the bottom right corner.

6 in 10 African American adults report high levels of physical activity, **THE SAME** as White adults.

DIET & FOOD ACCESS

1 in 4 African Americans eat recommended daily amount of fruits and vegetables

People's weight and overall health are substantially affected by the food they eat. A healthy diet consists of balanced amounts of protein, carbohydrates and fats, with plenty of fruits and vegetables and limited fat and salt. According to the CDC, people who eat a healthy diet with generous amounts of fruits and vegetables have a reduced risk of stroke, type 2 diabetes and certain cancers.⁷

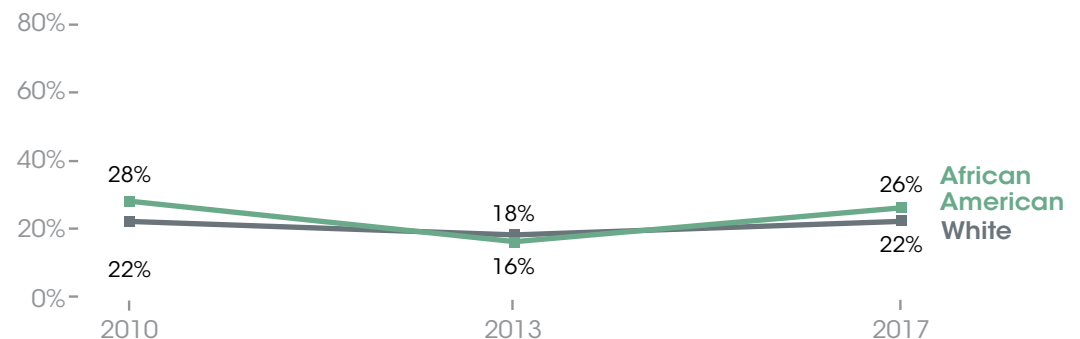
The Dietary Guidelines for Americans 2015-2020,⁸ a joint project of the U.S. Departments of Agriculture (USDA) and Health and Human Services (HHS), recommends that each meal include half a plate of fruits and vegetables. This means adults should eat at least two servings of fruits and three servings of vegetables per day.

CHSS asked adults how many fruits and vegetables they ate every day.

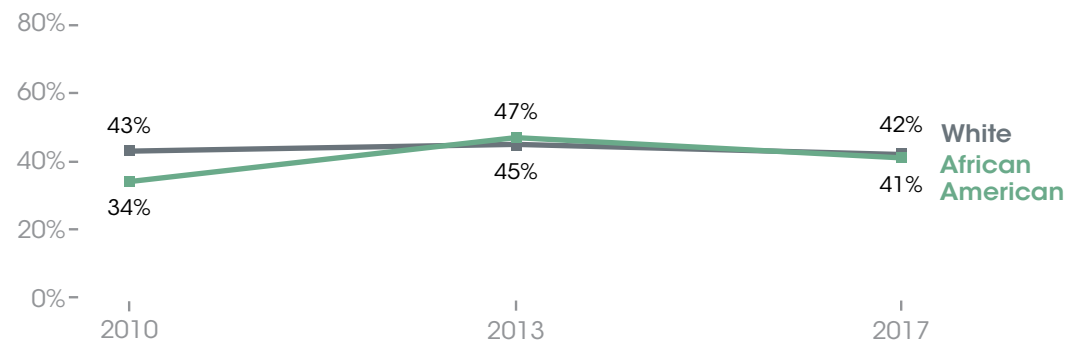
MORE African American adults ate the recommended daily amount of fruits and vegetables in 2017 than in 2013.

Percentage of adults who ...

Eat the recommended daily amount of both fruits and vegetables



Do not eat the recommended amount of either fruits or vegetables



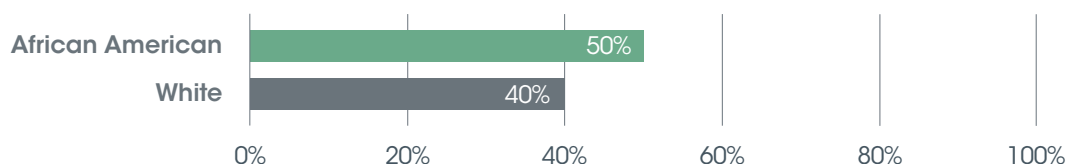
Half of African American adults drink seven or more sugary drinks per week

According to the 2015-2020 Dietary Guidelines for Americans, almost half of all added sugar consumed in the nation comes from beverages.⁹ Sugar adds calories to a person's diet without providing nutrients needed to be healthy. The guidelines recommend limiting added sugars to 10% of daily calories. If people consume more than that, they may not get the nutrients they need from fruits, vegetables, protein and dairy products.

Studies have shown that drinking one or more sugary beverage per day – equivalent to seven or more each week – can increase the risk of obesity,¹⁰ diabetes¹¹ and heart disease.^{12 13} While most people know that soda has added sugar, other drinks such as sweet tea, sports drinks and fruit drinks also contain added sugar.

CHSS asked adults how many sodas and other sugar-sweetened drinks they consume each week.

Percentage of Greater Cincinnati adults who drink seven or more sugary beverages per week



A greater percentage of African American adults than White adults drink seven sugary beverages per week.



African American adults less likely than White adults to have easy access to healthy food

Healthy eating is particularly challenging if there is not a place nearby to buy healthy foods. To eat a healthy diet, it is crucial that people can buy healthy food such as fruits and vegetables, whole grains and low-fat items without having to travel far.

CHSS asked adults whether they agreed or disagreed with this statement: "It is easy to purchase healthy foods in my neighborhood such as whole grain foods, low-fat options and fruits and vegetables."

6 in 10 African American adults agree they can buy healthy foods in their neighborhood, **FEWER** than White adults. These results were **THE SAME** as in 2013.

Percentage of Greater Cincinnati adults who agree it is easy to purchase healthy foods in their neighborhood





FOOD INSECURITY

Almost 4 in 10 African Americans food insecure

Access to nutritious food is important for health. *Food insecurity* occurs when people do not have access to healthy food. This may include both eating less food or reduced quality or variety of food.¹⁴ Adults who experience food insecurity are at greater risk for poor overall health and chronic diseases.

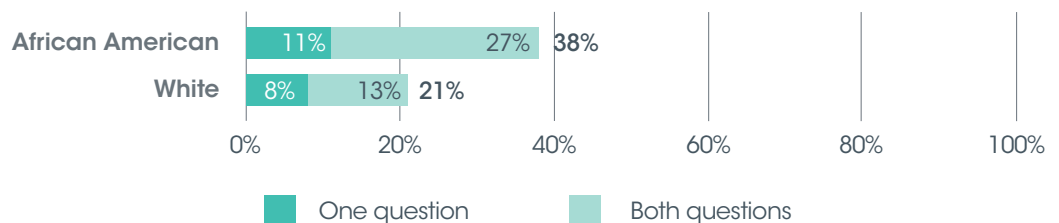
CHSS asked adults whether they agreed or disagreed with two statements:

1. Within the past 12 months we worried whether our food would run out before we got money to buy more.
2. Within the past 12 months the food we bought just didn't last and we didn't have money to get more.

Answering one or both questions indicates that a family is likely to be food insecure.

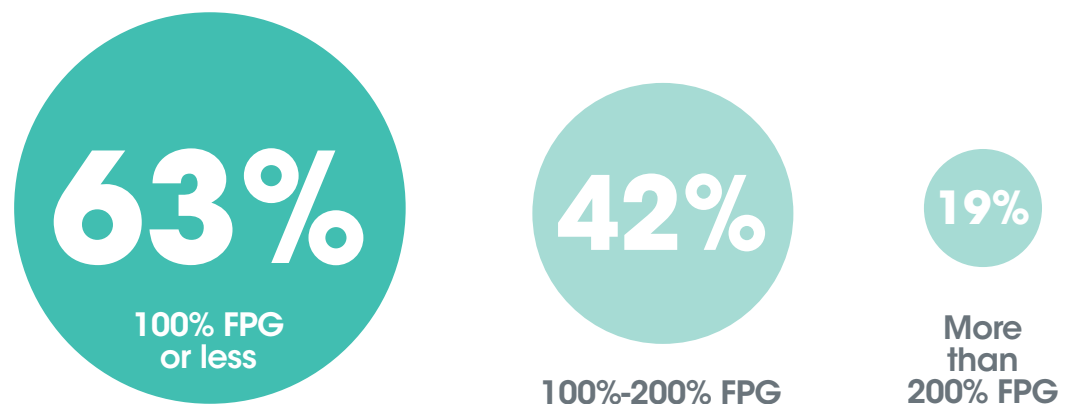
African American adults almost **TWO TIMES** as likely as White adults to experience food insecurity.

Percentage of adults who are food insecure (Graph shows those who agreed with each question.)



CLOSER LOOK

Food insecurity among African Americans, by income†

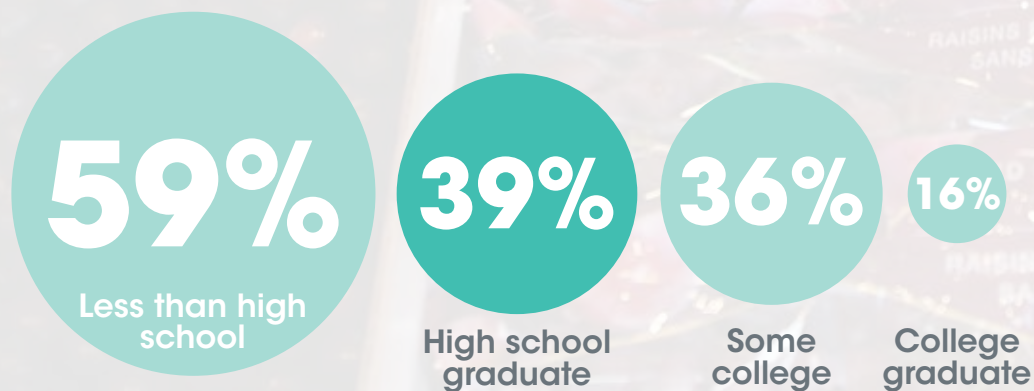


† In 2016, 100% of the Federal Poverty Guidelines (FPG¹⁵) was \$24,250 for a family of four.

* African American adults earning 100% FPG or less are **THREE TIMES** more likely than those earning more than 200% FPG to experience food Insecurity.



Food insecurity among African Americans, by education



African American adults with a high school diploma are **TWO TIMES** more likely than African American college graduates to experience food insecurity.

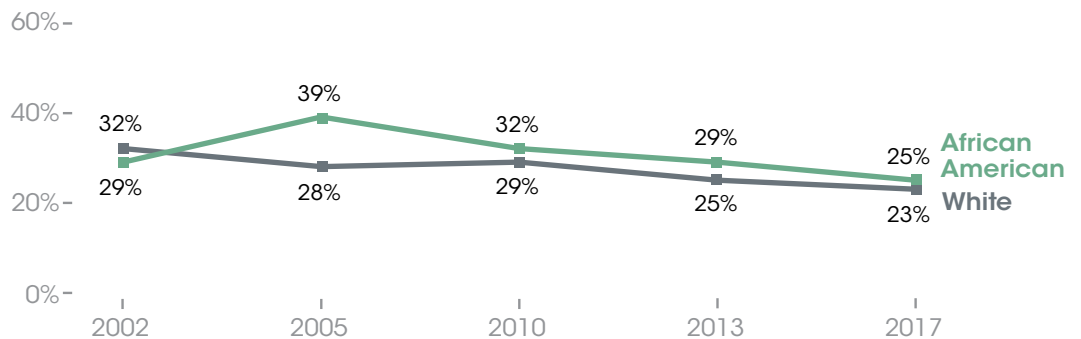
SMOKING

1 in 4 African Americans are current smokers

According to the CDC's Behavioral Risk Factor Surveillance System (BRFSS), 18% of adults in the United States were current smokers in 2015. This percentage is higher than the Healthy People 2020 goal of 12%. Tobacco use has an impact on all aspects of an individual's health.

1 in 4 White and African American adults are current smokers; these percentages are **DOWN** from 2005.

Percentage of Greater Cincinnati adults who are current smokers



CLOSER LOOK

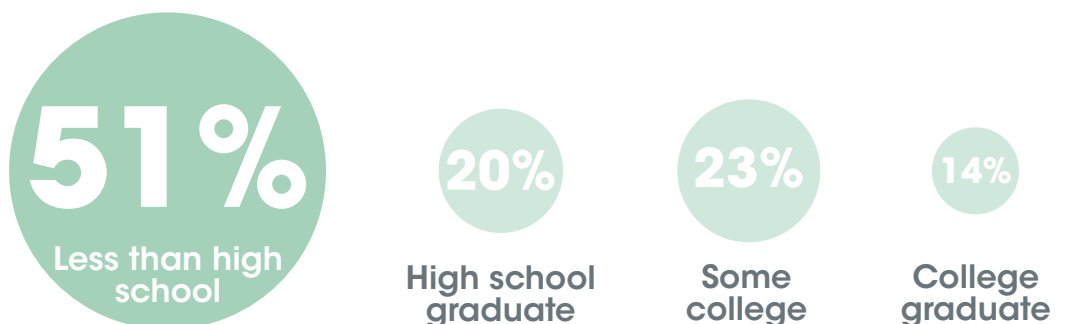
African American current smokers, by income[†]



[†] In 2016, 100% of the Federal Poverty Guidelines (FPG) was \$24,250 for a family of four.

✱ African American adults who earn 100% FPG or less are more than **TWO TIMES** as likely to smoke as those with more income.

African American current smokers, by education

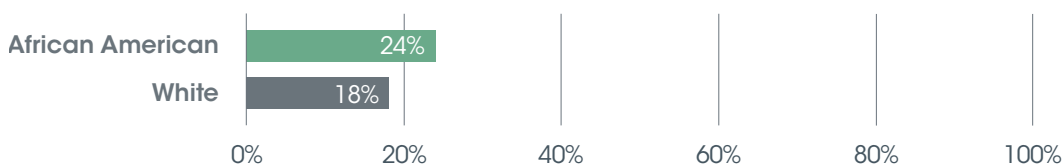


✱ African American adults without a high school diploma are about **THREE TIMES** as likely to smoke as those with a college degree.

African American adults more likely than White adults to allow smoking in home

Secondhand smoke or environmental tobacco smoke (ETS) is a serious danger. According to the CDC, 1 in 4 nonsmokers in the U.S. is exposed to ETS, which is responsible for approximately 41,000 deaths among nonsmoking adults and 400 deaths in infants each year. ETS has been linked to serious negative health outcomes such as stroke, lung cancer, coronary heart disease and sudden infant death syndrome (SIDS).¹⁶

Percentage of Greater Cincinnati adults who allow people to smoke in their home



More than
2 in 10 African
Americans allow
people to smoke
in their home.

African American adults who allow people to smoke in their home, by income[†]

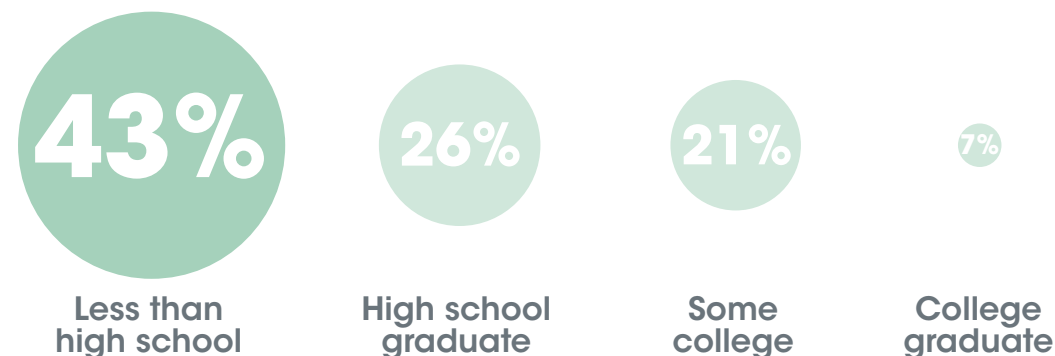


[†] In 2016, 100% of the Federal Poverty Guidelines (FPG) was \$24,250 for a family of four.



African Americans who earn 100% FPG or less are **THREE TIMES** as likely as those who earn more than 200% FPG to allow smoking in their homes.

African American adults who allow people to smoke in their home, by education



African Americans without a high school diploma are **SIX TIMES** as likely as those with a college degree to allow smoking in their home.

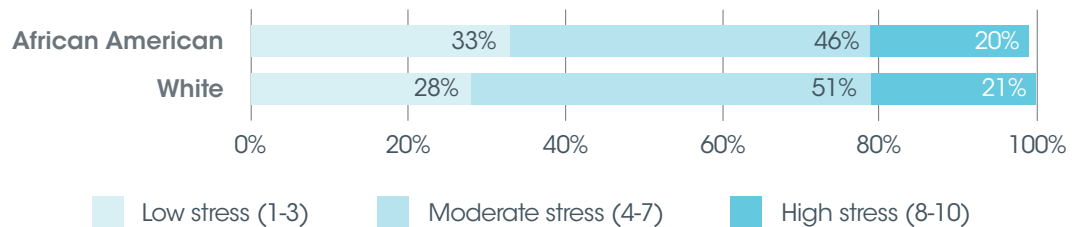
STRESS

2 in 10 African Americans report high stress

Stress is a normal part of life. It may be short-term (acute), such as stress because of a big test. Stress may also be long-term (chronic), such as stress from a long illness. The body reacts to these stimuli by releasing hormones, increasing heart rate and tensing muscles.¹⁷

CHSS asked, "On a scale of 1 to 10, where 1 means you have 'little or no stress' and 10 means you have a 'great deal of stress,' how would you rate your average level of stress during the past month?"

On a scale of 1 to 10 ... how would you rate your average level of stress during the past month? (Percentages may not add to 100 percent because of rounding.)



African American and White adults report **SIMILAR** levels of stress.

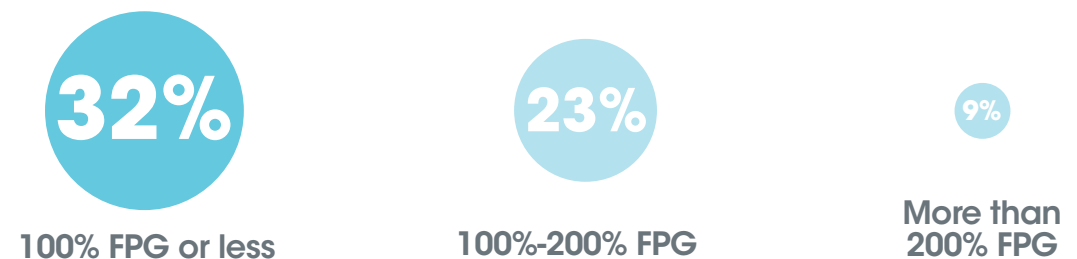
CLOSER LOOK

High stress among African American adults, by age



***** African American adults ages 30 to 45 are **FOUR TIMES** more likely than adults ages 18 to 29 or 65 and older to report high stress.

High stress among African American adults, by income[†]



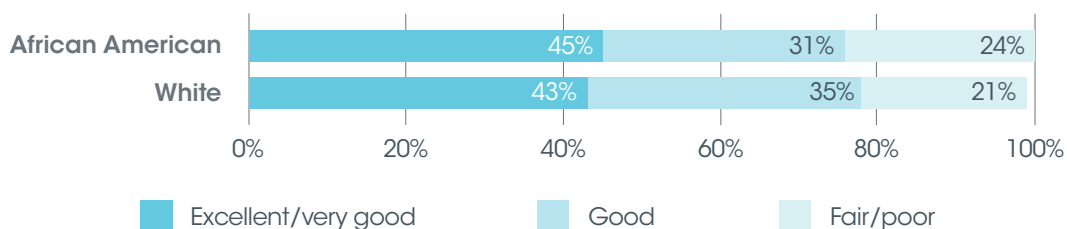
[†] In 2016, 100% of the Federal Poverty Guidelines (FPG) was \$24,250 for a family of four.

***** African American adults earning 100% FPG or less are **THREE TIMES** more likely than those earning more than 200% FPG to report high stress.

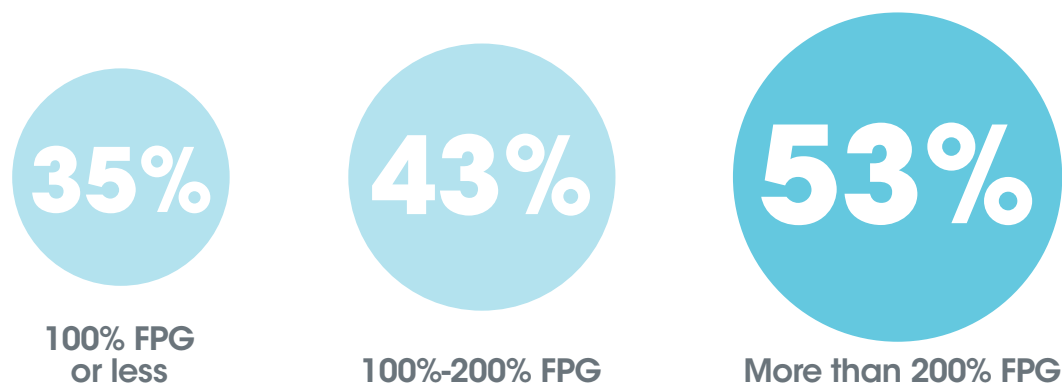
Half of African Americans report doing an excellent or very good job managing stress

According to the National Institute of Mental Health, taking steps to manage stress can reduce its negative health impacts.¹⁸ CHSS asked, “How good a job do you think you do managing your stress?”

How good a job do you think you do managing your stress? (Percentages may not add to 100 percent because of rounding.)

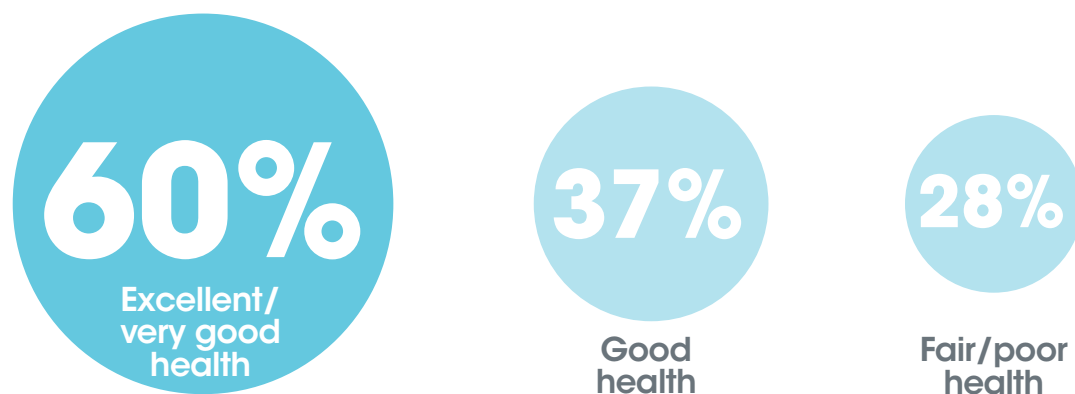


Percentage of African American adults who do an excellent or very good job managing stress, by income[†]



[†] In 2016, 100% of the Federal Poverty Guidelines (FPG) was \$24,250 for a family of four.

Percentage of African American adults who do an excellent or very good job managing stress, by self-reported health



CLOSER LOOK

African Americans who earn more than 200% FPG are **1.5 TIMES** more likely than those who earn 100% FPG or less to report doing a good job managing stress.

Adults in excellent or very good health are more than **TWO TIMES** as likely as those in fair or poor health to report managing stress well.

COMMUNITY SUPPORT

African American adults less likely than White adults to report community support

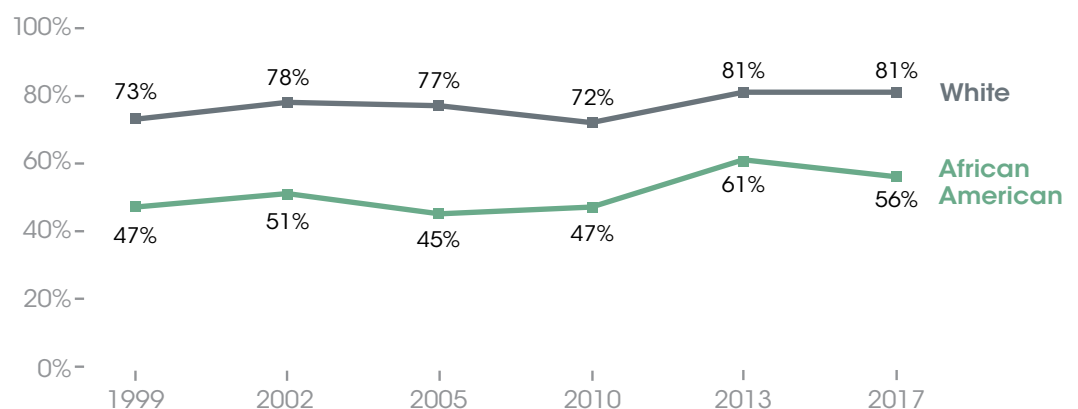
Research has shown strong ties between people's health and the social support they find in their community.¹⁹

CHSS asked people whether they agreed or disagreed with three statements about social support in their community:

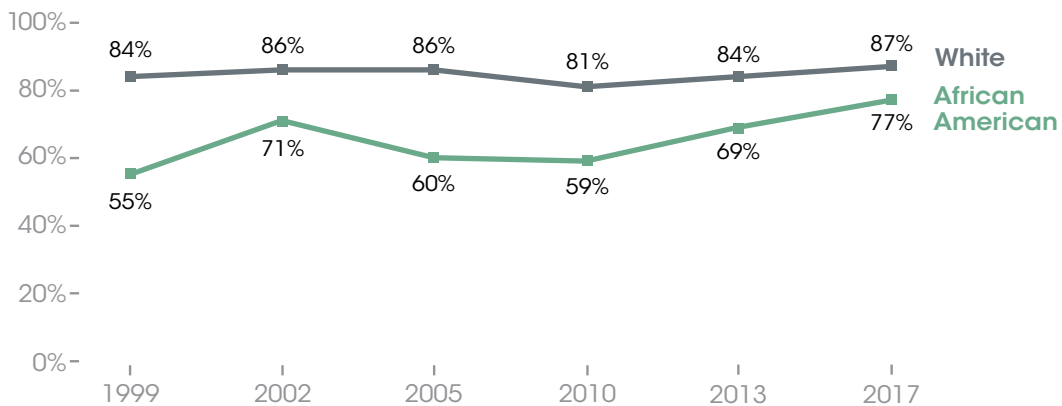
- *People can depend on each other in my community.*
- *Living in my community gives me a secure feeling.*
- *People in my community know they can get help from the community if they are in trouble.*

The percentage of African American adults agreeing with these statements has risen slightly since 2013, with one exception. Nearly 6 in 10 African American adults (56%) said that people can depend on each other in their community, down slightly from 61% in 2013. Nearly 8 in 10 (77%) said that living in their community gives them a secure feeling, up from 69% in 2013. And more than 7 in 10 (72%) agreed that people can get help from their community in times of trouble, up from 69% in 2013. Although these percentages represent positive changes, African Americans continue to agree with these statements at a considerably lower rate than White adults.

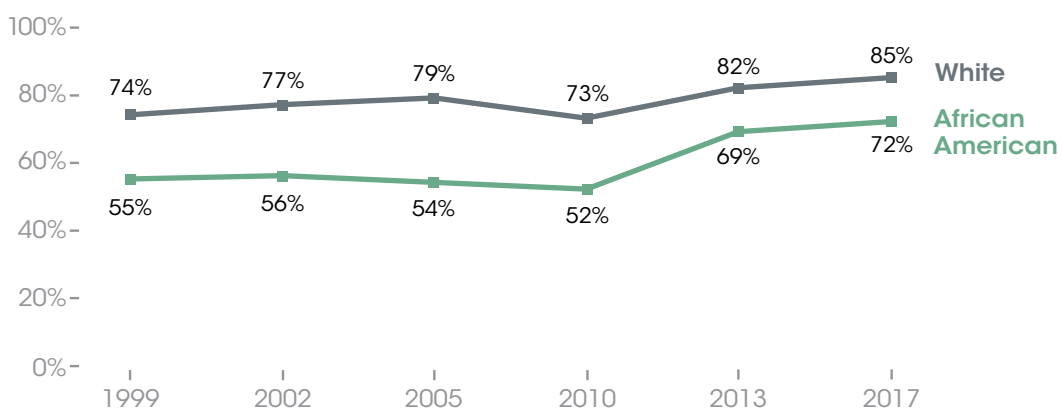
People can depend on each other in my community



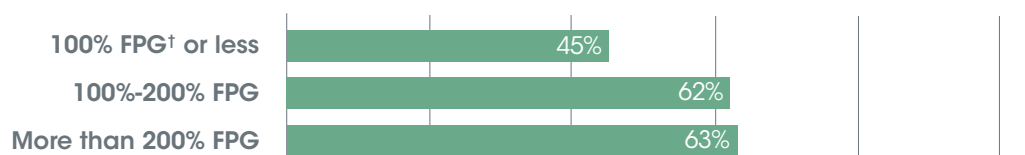
Living in my community gives me a secure feeling



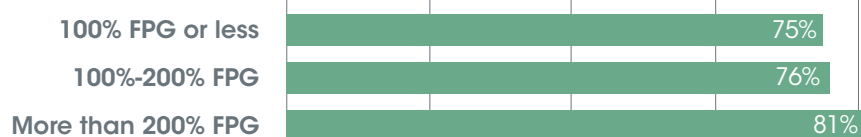
People in my community can get help from the community if they are in trouble



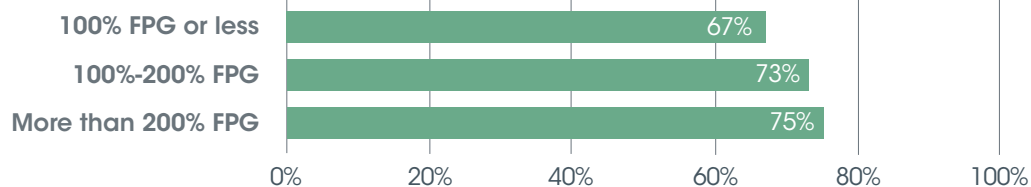
People can depend on each other in my community



Living in my community gives me a secure feeling



People in community know they can get help from the community if they are in trouble



[†] In 2016, 100% of the Federal Poverty Guidelines (FPG) was \$24,250 for a family of four.

CLOSER LOOK

African American adults with higher incomes are **MORE LIKELY** to agree with these statements.

THE COMMUNITY

2 in 10 African Americans adults rate the region highly as a healthy place to live

Choices we make every day affect our health, but so does the community in which we live. The physical and social environment is an important determinant of health. A neighborhood that feels safe can encourage residents to engage in healthy outdoor activities. A neighborhood that feels unsafe can force residents to stay indoors. The CHSS asked adults in the region to evaluate their environment.

CHSS asked, "How would you rate Greater Cincinnati as a healthy place to live?"

How would you rate Greater Cincinnati as a healthy place to live?



CHSS also asked, "How would you rate your neighborhood as a healthy place to live?"

How would you rate your neighborhood as a healthy place to live?



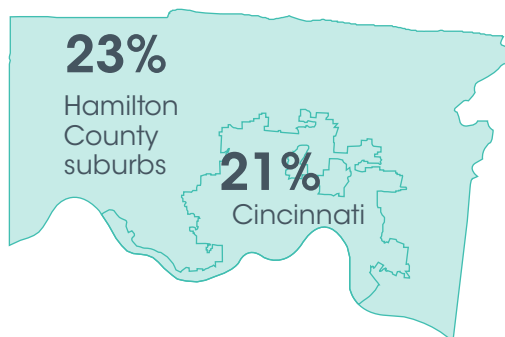
African American adults less likely than White adults to rate the region highly as a healthy place to live. African American results **THE SAME** as 2013 (21%).

3 in 10 African American adults rate their neighborhood highly as a healthy place to live, **UP** from 2013 (26%) but **LOWER** than White adults.

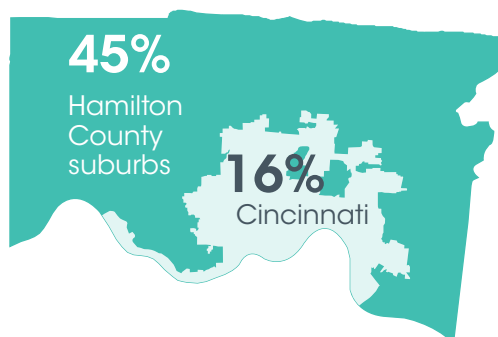


CLOSER LOOK

Percentage of African American adults who rate *Greater Cincinnati* excellent or very good as a healthy place to live



Percentage of African American adults who rate *their own neighborhood* excellent or very good as a healthy place to live



African American adults living in Hamilton County suburbs are nearly **THREE TIMES** as likely as those in Cincinnati to rate their own neighborhood highly as a healthy place to live.

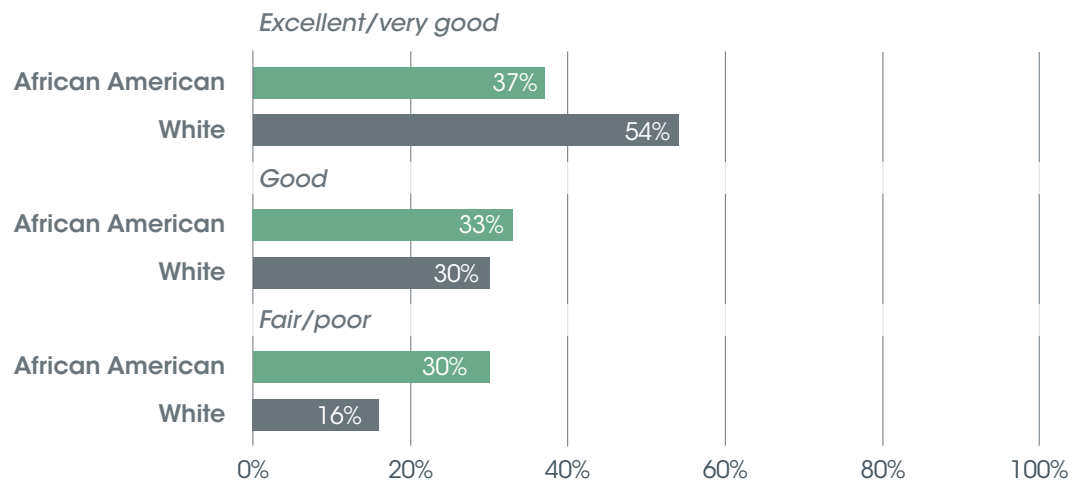
HOUSING

4 in 10 African Americans rate neighborhood homes highly; 5 in 10 rate own home highly

The condition of people's homes and the homes in their neighborhood can have an impact on their health. African American adults were less likely than White adults to rate their homes highly.

CHSS asked, "How would you rate the condition of the houses and apartments in your neighborhood?"

Condition of houses and apartments in neighborhood



African American adults are **LESS LIKELY** than White adults to rate homes in their neighborhood or their own home highly.

CHSS also asked, "How would you rate the condition of the house or apartment where you live?"

Condition of own house or apartment



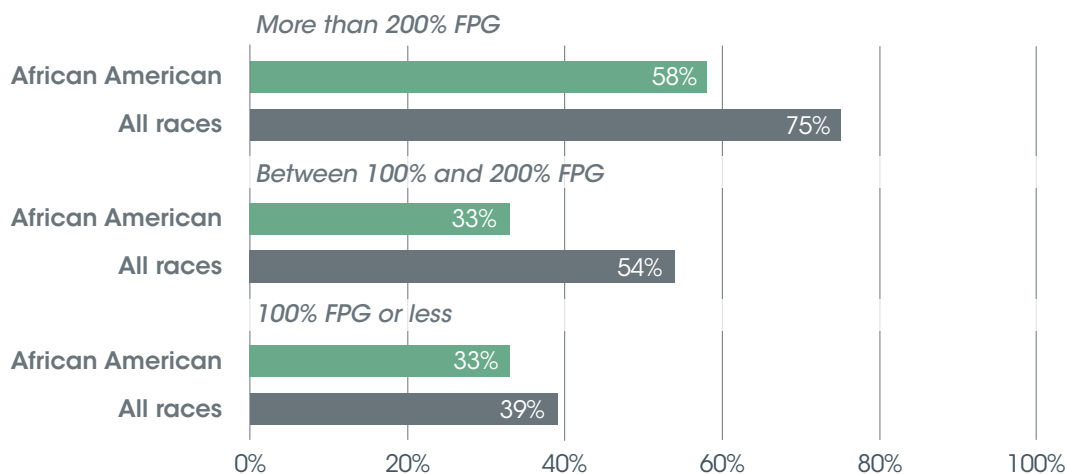


CLOSER LOOK

These data demonstrate a disparity in the housing experiences of African American and White adults in our region. This disparity exists even among subgroups in the population. For example, only 6 in 10 African American adults earning more than 200% of the Federal Poverty Guidelines (FPG) rate their home excellent or very good (58%). That compares with 75% of all adults in the region who earn more than 200% FPG.

It is worth noting that home ownership can have an impact on a resident's ability to affect the condition of their home. In our region, only 32% of African American households are owned by the resident,²⁰ compared with 72% of White households.²¹

Percentage of Greater Cincinnati adults who rate their own house or apartment excellent or very good, by income†



† In 2016, 100% of the Federal Poverty Guidelines (FPG) was \$24,250 for a family of four.

ACCESS & BARRIERS TO CARE

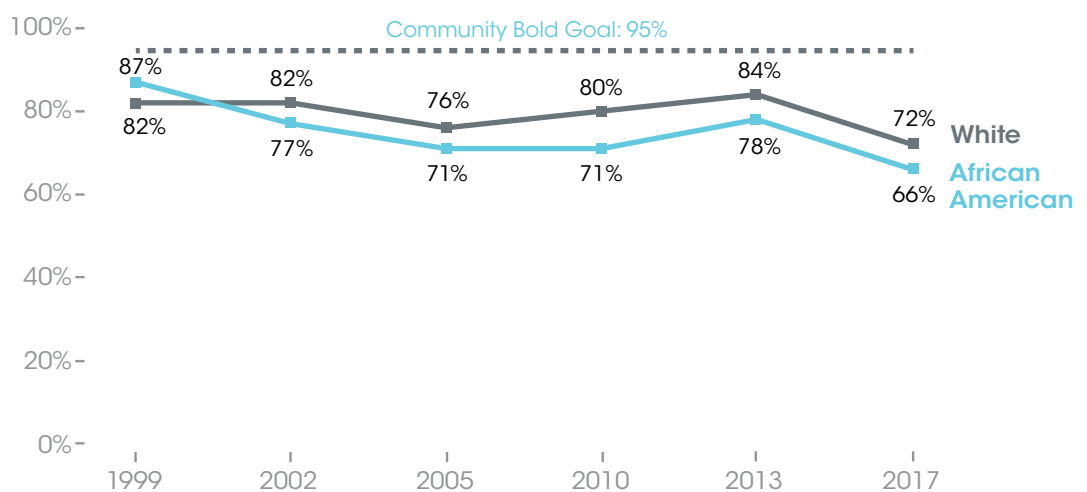
Nearly 7 in 10 African American adults have a usual and appropriate source for care

One essential element for maintaining good health is regular visits with a doctor or other health care provider. Ideally, patients see the same provider or practice over time so they can receive coordinated, comprehensive health care and preventive health guidance.

CHSS asked adults whether they had a usual source for health care, and where. A private doctor's office, community-based health center, clinic at a retail store or hospital outpatient department are considered appropriate sources of care.

Fewer than 7 in 10 African American adults have a usual and appropriate source of care, **FEWER** than White adults.

Greater Cincinnati adults who have a usual and appropriate source of care

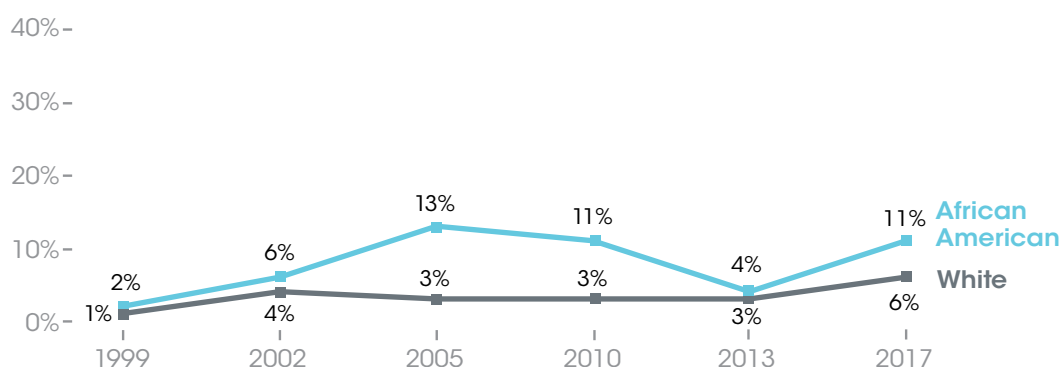


In 2017 adults of all races were less likely than in previous years to report a usual and appropriate source of care. This was the first time CHSS has collected these data since the Affordable Care Act (ACA) was implemented in 2014. Many adults in the region who had previously been uninsured gained insurance through the ACA. Research suggests that newly insured adults may not be as settled into a preventive health care routine.²² This may be one explanation for why the percentage of adults with a usual source of care in our region has decreased.

Percentage of adults with inappropriate sources of care increases since 2013

An urgent care center or emergency room are not appropriate sources of care. Care received in these locations may be fragmented, and may not address the long-term issues that are so important for health. Using these locations for routine care also may overload the system, limiting the availability of care for cases that are truly emergencies.

Greater Cincinnati adults who have an inappropriate source of care

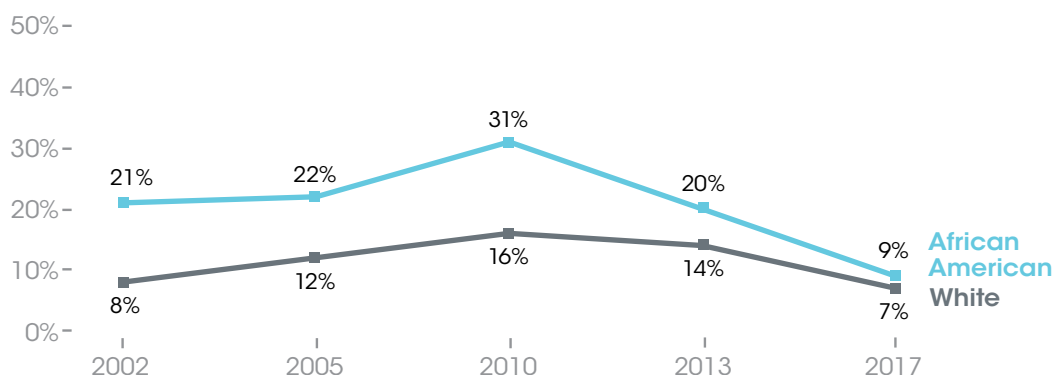


African American adults are almost **TWO TIMES** as likely as White adults to use an inappropriate source of care.

Percentage of uninsured African American adults continues steep decline

Cost can be a barrier to receiving regular health care. Access to appropriate care helps prevent illness, control outbreaks and manage chronic conditions.²³ People without health insurance are less likely than those with health insurance to get the care they need in a timely manner.

Greater Cincinnati adults who are currently uninsured



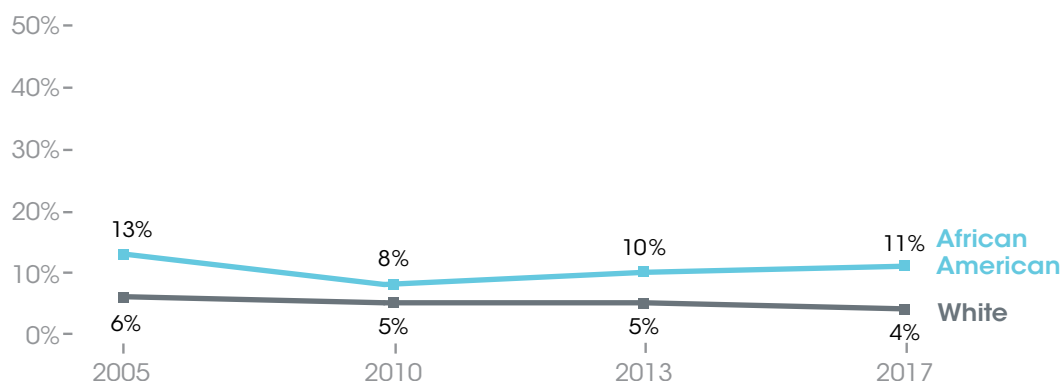
Fewer than 1 in 10 African American adults were uninsured, **THE SAME** as White adults, mirroring the nation.

African American adults are **TWO TIMES** as likely as White adults to have unstable insurance.

2 in 10 insured African American adults lacked insurance within past 12 months

While it is important to be currently insured in order to receive health care, it is also important to have stable health insurance. One measure of stability is whether a person has been covered continuously for the past 12 months.

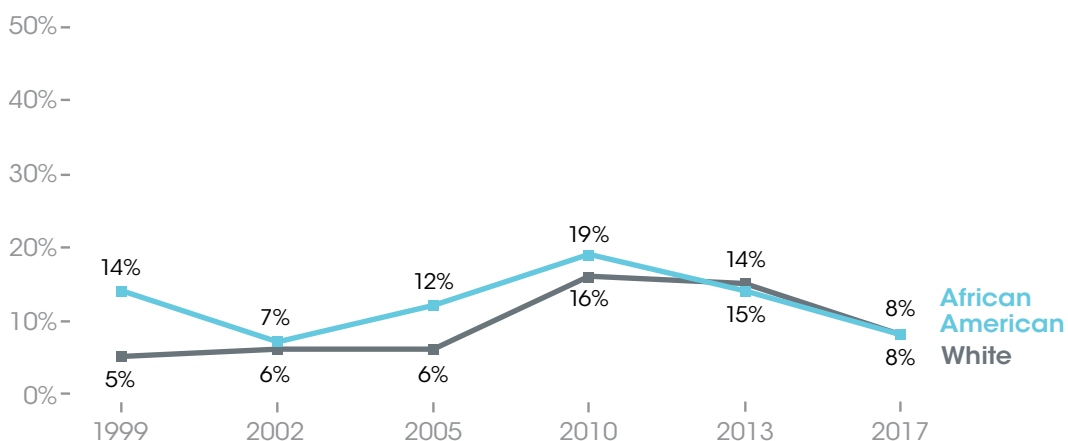
Adults who are currently insured but who were uninsured at some point in the past 12 months



Fewer than 1 in 10 African American adults went without health care due to cost

Even with insurance, health care can be expensive. CHSS asked adults if they had delayed or gone without a doctor's care in the past 12 months because they needed the money to buy food, clothing or to pay for housing.

Percentage of Greater Cincinnati adults who said a member of their household delayed or went without care in the past year because of cost



The percentages of both African American and White adults going without care due to cost have **DECLINED** since 2013.



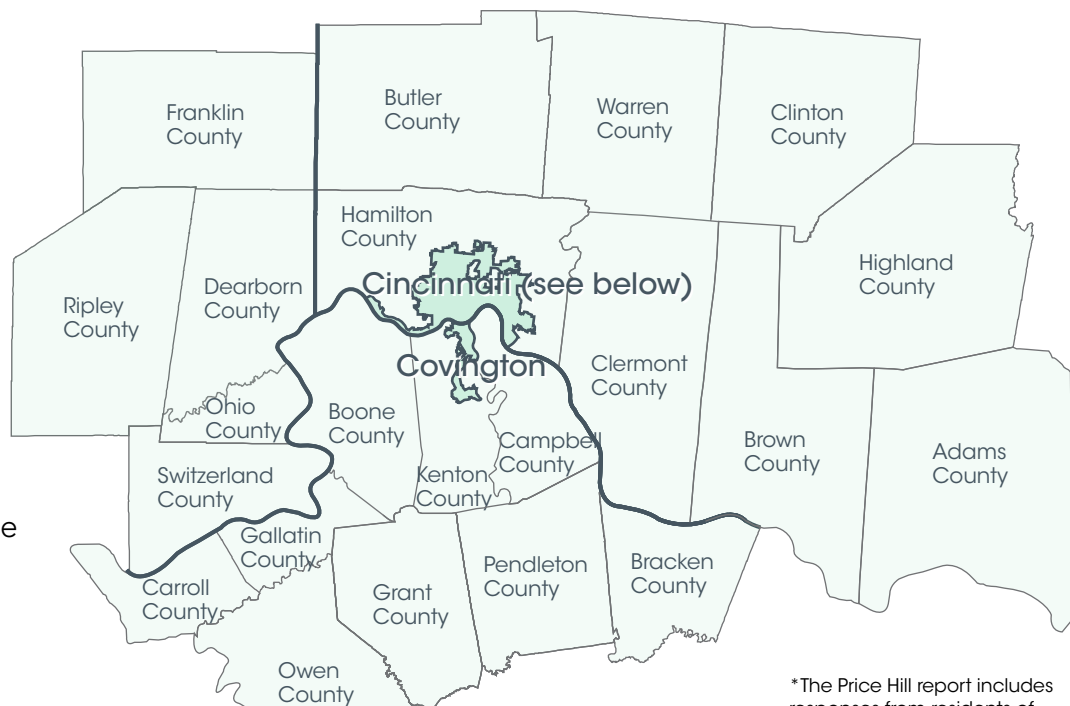
ABOUT THE SURVEY

The **Community Health Status Survey (CHSS)**, a project of Interact for Health, is conducted by the Institute for Policy Research at the University of Cincinnati. A total of 4,929 randomly selected adults residing in the counties at right were interviewed by telephone between Aug. 10, 2016, and March 8, 2017. This included 1,906 landline interviews and 2,355 cell phone interviews. The margin of error for the overall survey is $\pm 1.5\%$.

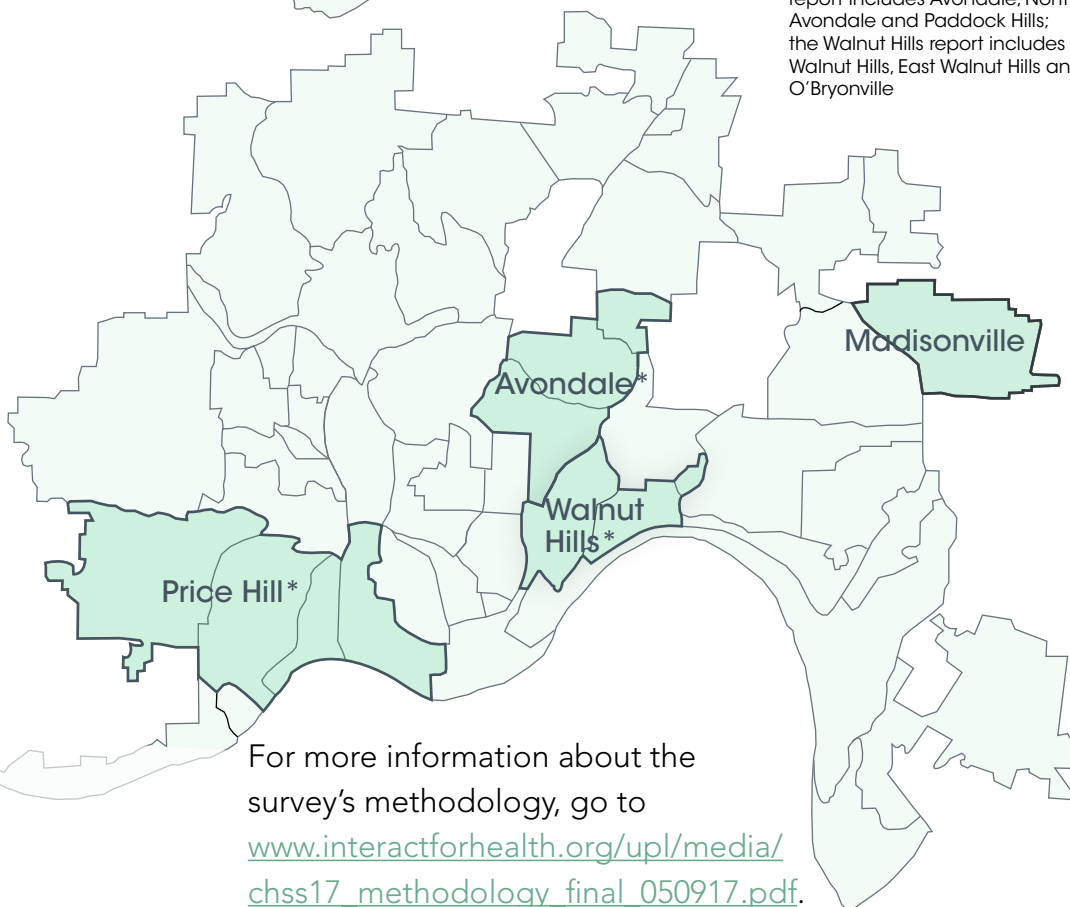
For this report, 896 African American residents were interviewed. The margin of error for the African American sample is $\pm 3.3\%$.

Reports in this series examine the health of African Americans and Latinos, as well as the health of people who live in the Place Matters communities of Avondale, Covington, Madisonville, Price Hill and Walnut Hills.

Survey region of the CHSS (darker regions indicate oversample areas)



*The Price Hill report includes responses from residents of East, West and Lower Price Hill and Queensgate; the Avondale report includes Avondale, North Avondale and Paddock Hills; the Walnut Hills report includes Walnut Hills, East Walnut Hills and O'Bryonville



For more information about the survey's methodology, go to www.interactforhealth.org/upl/media/chss17_methodology_final_050917.pdf.

GENERAL HEALTH

1. In 2011 our community adopted two Bold Goals for health: By 2020 at least 70% of the community will report having excellent or very good health, and at least 95% of the community will have a usual and appropriate source for health care. For more information about the Bold Goals, please visit www.uwgc.org/community-impact/bold-goals-for-our-region.

OBSESITY

2. BMI is calculated by dividing a person's weight in pounds by his height in inches squared and then multiplying that result by 703.

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13. Fung, T.T., Malik, V., Rexrode, K.M., Manson, J.E., Willett, W.C., & Hu, F.B. (2009). Sweetened beverage consumption and risk of coronary heart disease in women. *Am J Clin Nutr*, 89, 1037-1042.

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15. The Federal Poverty Guidelines (FPG) are updated annually by the Department of Health and Human Services and are used to determine financial eligibility for federal programs. In 2016, the FPG for a family of four in the continental United States was an income up to \$24,250. For more information see <https://aspe.hhs.gov/poverty-guidelines>.

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