

**Progress on 2017-2019 State Health Improvement Plan outcomes:
Northwest regional forum, Oct. 30, 2018**

	Improving - Change was in the right direction (toward target) and was ten percent or more from baseline to most-recent year
	Little or no detectable change - Change was less than ten percent from baseline to most-recent year (toward or away from target)
	Getting worse - Change was in the wrong direction (away from target) and was ten percent or more from baseline to most-recent year

Figure 1 Overall health outcome objectives

		Ohio		Northwest region (2017)
Desired outcome	Indicator (source)	Baseline (2015)	Current Year (2017)	
Improve overall health status	Percent of adults with fair or poor health (BRFSS)	16.5%	18.9%	17.1%
Reduce premature death*	Years of potential life lost before age 75, per 100,000 population (age-adjusted) (Vital Statistics)	7,876.1	8,774.5	8,230.8

Figure 2 Overall health outcomes for priority populations

		Ohio	
Desired outcome	Indicator (source)	Baseline (2015)	Current Year (2017)
Improve overall health status	Priority population: Percent of low-income (<\$15,000 annual household income) adults with fair or poor health (BRFSS)	38.6%	45.1%
Reduce premature death*	Priority population: Years of potential life lost before age 75 for African Americans, per 100,000 population (age-adjusted) (Vital Statistics)	10,850.5	12,599

Figure 3 Mental health and addiction outcome objectives

		Ohio		
Desired outcome	Indicator (source)	Baseline (2013-2014)	Current Year (2015-2016)	Northwest region (2017)
Reduce depression	Percent of persons ages 12-17 who experienced a major depressive episode within the past year (NSDUH)	10.33%	13.98%	N/A
	Percent of persons ages 18+ who experienced a major depressive episode within the past year (NSDUH)	7.33%	7.85%	N/A
Reduce drug dependence or abuse [^]	Percent of persons age 12+ with past-year illicit drug dependence or abuse (NSDUH)	2.76%	2.61%	N/A
Desired outcome	Indicator (source)	Baseline (2015)	Current Year (2017)	Northwest region (2017)
Reduce suicide deaths*	Number of deaths due to suicide per 100,000 population (Vital Statistics)	13.9	14.8	16.0
Reduce unintentional drug overdose deaths*	Number of deaths due to unintentional drug overdoses per 100,000 population (Vital Statistics)	27.7	44.1	32.4

[^] Change in NSDUH methodology: "illicit drug use and dependence" changed to "illicit drug use disorder"

Figure 4 Mental health and addiction outcome objectives for priority populations

		Ohio	
Indicator (source)	Population group	Baseline (2015)	Current Year (2017)**
Number of deaths due to suicide per 100,000 population (Vital Statistics)*	Males aged 10-24	15.9	18.5
	Males aged 25-44	28.5	33.6
	White (non-Hispanic) males aged 45-64	34.0	32.1
	White (non-Hispanic) males aged 65+	32.2	33.0
Number of deaths due to unintentional drug overdoses per 100,000 population (Vital Statistics)*	White (non-Hispanic) males aged 25-44	87.1	136.7
	White (non-Hispanic) males aged 45-64	43.5	72.4
	White (non-Hispanic) females aged 25-54	39.7	59.9
	Black (non-Hispanic) males aged 25-54	50.9	99.0
	Black (non-Hispanic) males aged 55-64	74.7	137.8

Figure 5 Chronic disease outcome objectives

		Ohio		
Desired outcome	Indicator (source)	Baseline (2015)	Current Year (2017)*	Northwest region (2017)
Reduce heart disease	Percent of adults ever diagnosed with coronary heart disease (BRFSS)	4.2%	4.7%	5.6%
	Percent of adults ever diagnosed with heart attack (BRFSS)	4.9%	5.5%	6.4%
	Percent of adults ever diagnosed with hypertension (BRFSS)	34.3%	34.7%	36.4%
Reduce diabetes	Percent of adults who have been told by a health professional that they have diabetes (BRFSS)	11%	11.3%	11.6%
	Percent of adults who have been told by a health professional that they have prediabetes (BRFSS)	7.5%	8.8%+	7.9%
Desired outcome	Indicator (source)	Baseline (2012)	Current Year (2016)	Northwest region (2016)
Reduce child asthma morbidity	Emergency department visits for pediatric asthma, per 10,000 children, ages 0-17 (excludes patients with cystic fibrosis or abnormalities of the respiratory system, and transfers from other institutions) (Ohio Hospital Association Clinical-Financial Data Set)	86.9	72.3++	N/A

+ Progress level not determined. The interim target for prediabetes in the 2017-2019 SHIP anticipated an initial increase in diagnoses for the 2019 target followed by a reduction for the 2022 target. The prevalence of prediabetes is measured by asking BRFSS respondents if they have been told by a health professional that they have prediabetes. Many people with prediabetes are not aware that they have it so there are currently efforts to increase awareness, which may increase reported prevalence.

++ Methodology change. Progress level not determined. The transition from ICD-9 to ICD-10 impacted reporting for emergency department visits for pediatric asthma and age range changed from 2015 to 2017

Figure 6 Chronic disease outcome objectives for priority populations*

		Ohio	
Indicator (source)	Population group	Baseline (2015)	Current Year (2017)
Percent of adults ever diagnosed with hypertension (BRFSS)	Black (non-Hispanic)	40.3%	40.0%
	People with a disability	53.1%	Not Available
	Low educational attainment (< high school diploma)	40.7%	48.9%
	Low-income (< \$15,000 annual household income)	35.7%	46.6%
	Older adults (> 65 years)	62.2%	60.0%
	Appalachian counties	39.7%	Not Available
Percent of adults who have been told by a health professional that they have diabetes (BRFSS)	Black (non-Hispanic)	14.1%	14.2%
	People with a disability	21.8%	Not Available
	Low educational attainment (< high school diploma)	13.6%	15.8%
	Low-income (< \$15,000 annual household income)	13.7%	19.4%
	Older adults (> 65 years)	23.4%	22.8%
	Appalachian counties	12.3%	Not Available
Indicator (source)	Population group	Baseline (2012)	Current Year (2016)
Emergency department visits for pediatric asthma, per 10,000 children, ages 0-17 (Ohio Hospital Association Clinical-Financial Data Set)	African American	245.6	175.9+
	Appalachian counties	78.2	Not Available

+ Methodology change. Progress level not determined. The transition from ICD-9 to ICD-10 impacted reporting for emergency department visits for pediatric asthma and age range changed from 2015 to 2017

Note: These priority population objectives focus on hypertension and diabetes because those conditions are more prevalent than coronary heart disease, heart attack and diagnosed prediabetes.

Data limitation: The hypertension and diabetes baseline data are estimates based on survey results (BRFSS). Confidence intervals vary by population group, meaning that there are limitations for estimating prevalence for smaller sub-groups. It is important to note that the 2022 targets are within the confidence intervals for the 2015 baseline for groups displayed in this figure.

Figure 7 **Maternal and infant health outcome objectives**

Desired outcome	Indicator (source)	Ohio		Northwest region (2017)
		Baseline (2015)	Current Year (2017)	
Reduce preterm births**	Total preterm: Percent of live births that are preterm: <37 weeks (ODH Bureau of Vital Statistics)	10.3%	10.4%	10.8%
	Very preterm: Percent of live births that are very preterm: <32 weeks (Vital Statistics)	1.7%	1.8%	1.6%
Reduce low birth-weight births**	Percent of births in which the newborn weighed <2,500 grams (Vital Statistics)	8.5%	8.7%	8.6%
Reduce infant mortality**	Rate of infant deaths per 1,000 live births (Vital Statistics)	7.2	7.2	6.7
	Rate of neonatal infant deaths per 1,000 live births (Vital Statistics)	4.8	5	4.2
	Rate of post-neonatal infant deaths per 1,000 live births (Vital Statistics)	2.4	2.2	2.5

Figure 8 **Maternal and infant health outcome objectives for priority populations**

Indicator (source)	Population group	Ohio	
		Baseline (2015)	Current Year (2017)
Percent of live births that are preterm: <37 weeks (Vital Statistics)**	Black (non-Hispanic)	14.1%	14.5%
	Low educational attainment (no high school diploma)	11.5%	11.7%
	Less than 18 years old	10.7%	10.7%
Percent of births in which the newborn weighed <2,500 grams (Vital Statistics)**	Black (non-Hispanic)	13.9%	14.3%
	Low educational attainment (no high school diploma)	10.8%	11.3%
	Less than 18 years old	10.2%	10.8%
Rate of infant deaths per 1,000 live births (Vital Statistics)**	Black (non-Hispanic)	15.2	15.8

* There may be slight differences between data presented in this document and previously published reports (including 2017-2019 SHIP baseline values) due to updates to population estimates obtained from the U.S. Census Bureau.

** There may be slight differences between data presented in this document and previously published reports (including 2017-2019 SHIP baseline values). Previously published reports used the best available data and methods at the time of publication.

Note: Priority populations listed here are the groups with the worst outcomes based on available data at baseline. For some metrics, priority population data was not available.

Sources: Data compiled by Ohio Department of Health (Vital Statistics) and Accenture (NSDUH, BRFSS, OHA Financial-Clinical Data Set)

For a list of counties by region see the [State Health Assessment regional forums page at healthpolicyohio.org](http://healthpolicyohio.org).