



Chart Book #6

Franklin County Profile Minority Health 2004

The Ohio Department of Health

<http://www.odh.ohio.gov>

To protect and improve the health of all Ohioans

Bob Taft
Governor

J. Nick Baird, M.D.
Director of Health

Chart Book #6

Franklin County Profile Minority Health 2004

Mary Lynn
Researcher

Bureau of Health Services Information and Operational Support
William Ramsini, Ph.D., Chief

Division of Family and Community Health Services
Karen F. Hughes, Chief

Ohio Department of Health

April 2006

Chart Book #6

Table of Contents

About the Ohio Family Health Survey (OFHS).....	1
Chart Book Notes and Definitions (OFHS).....	2
Key Findings	4
I. Demographics.....	7
II. Health Insurance	8
III. Health Status	14
IV. Access to Care.....	19
V. Unmet Health Care Needs	24
VI. Health Care Utilization	26
VII. Quality of Care	32
VIII. Conclusions.....	34
IX. Limitations of Data.....	35

About The Ohio Family Health Survey (OFHS)

The 2004 Ohio Family Health Survey (OFHS) is the second round of the OFHS, which was originally conducted in 1998 by the Ohio Department of Health (ODH). The 2004 OFHS was conducted by the Ohio Department of Job and Family Services (ODJFS), with participation from ODH and research partners including the Health Policy Institute of Ohio, the Cuyahoga County Department of Job and Family Services, the Center for Community Solutions (formerly Cleveland Federation for Community Planning), the Franklin County Department of Job and Family Services and the Franklin County Health Department.

The 2004 OFHS includes measures of health insurance coverage; health status; tobacco use and caregiving; utilization and quality of health care services and access to care; and unmet health needs. ORC Macro, International, administered the telephone survey beginning in late 2003 through August 2004. The survey is a stratified sample of the community-dwelling population of Ohio. A portion of the sample was targeted to obtain coverage of census tracts with large minority populations and additional minority respondents were sought by obtaining commercially available lists of Hispanic and Asian surnames. The survey was weighted based on the stratified sampling design and the over-sample of minorities, enabling the survey data to generate estimates about the entire Ohio population. Interviews were conducted with one adult in 39,953 Ohio households. Information was also gathered for 15,447 children (ages 0-17) from interviews with adult family members. The number of interviews included 44,214 white, non-Hispanics; 5,396 black, non-Hispanics; 978 Asian, non-Hispanics; 416 Native American, non-Hispanics; 3,710 Hispanics; and 686 other unknown race/ethnicity Ohioans.

For additional information about the second round of the OFHS, see the OFHS Web site at <http://jfs.ohio.gov/ohp/reports/famhlthsurv.stm> or contact ODJFS Communications at 614-466-6650.

Chart Book Notes and Definitions

- It is important to note data presented in this chart book do not control for selected variables. Differences in racial groups may be partially due to differences in other variables such as education, income, age and marital status. Information in this chart book is typically presented as a percent of the population surveyed.
- Differences between population groups are noted when the difference is statistically significant at the .05 level unless otherwise stated. In general, this means the reported difference has a 95 percent or better chance of reflecting an accurate difference between populations. When information presented in this report is not significant, the terms “similar,” “no difference” or “not significant” are utilized to describe the data. When presenting items that are significant, terms such as “more likely” or “less likely” are utilized. Statistical significance does not necessarily imply clinical significance. Very small differences may be statistically significant without being considered important in the overall assessment of racial/ethnic differences.
- For the purposes of this report, the race/ethnicity categories of white, non-Hispanic; black, non-Hispanic; Asian, non-Hispanic; and Hispanic were utilized for adults and white, non-Hispanic; black-non-Hispanic for children. Less than 2 percent of adult respondents identified themselves as a race that was not utilized in this report. Whenever possible, all of the racial/ethnic groups were utilized in the analysis; however, due to small numbers of respondents, Asian, non-Hispanics; and Hispanics were excluded from certain analyses. All racial/ethnic groups are included in the county and state totals.
- Insurance data presented in this report are based on the person’s primary insurance. In cases where the respondent had both employer-based and another type of insurance, employer-based was considered primary. For cases of dual Medicaid/Medicare coverage, Medicaid was considered primary. “Other” insurance may include (but is not limited to) coverage such as student health insurance, directly purchased insurance, military or veterans coverage.
- The federal poverty level (FPL) varies by family size; for 2003, the year most respondents were asked about their income, the FPL for a family of four was \$18,400. “Poverty” refers to income 100 percent or less of the FPL; “near poverty” refers to income between 101 and 150 percent of the FPL; “low income” refers to income between 151 and 200 percent of the FPL; and “middle/high income” refers to income greater than 201 percent of the FPL.
- References to coverage or health care experiences during the past year refer to the 12-month period prior to the date the respondent was surveyed.
- For the purposes of this report, “estimate may not be reliable” refers to high sampling variability, where the ratio of the standard error to the estimate is greater than 30 percent. This is generally due to a small number of respondents.
- Proportions of unknown or missing responses are presented only when these are at least 5 percent.

- For the purposes of this report, discussion refers to Franklin County. Ohio data are provided for reference purposes only. No statistical comparisons were made between Franklin County and Ohio data.
- Adult respondents with special health care needs are reported to have had at least one of the following five consequences of a health condition that lasted or is expected to last at least one year: (1) the use of or need for prescription medication, other than vitamins or birth control; (2) the use of or need for medical care, mental health or other health services on a regular basis; (3) the use of or need for treatment or counseling for a mental health, substance abuse or an emotional problem; (4) difficulty or the need for assistance in doing day-to-day activities; and (5) the use of or need for special therapy such as physical, occupational or speech therapy.
- Child respondents with special health care needs are reported to have had at least one of the following five consequences of a health condition that lasted or is expected to last at least one year: (1) the use of or need for prescription medication; (2) the use of or need for more medical care, mental health or educational services than is usual for most children of the same age; (3) the use or need for treatment or counseling for an emotional, developmental or behavioral problem; (4) and limitation in the child's ability to do the things most children of the same age do; and (5) the use of or need for special therapy such as physical, occupational or speech therapy.

Franklin County Profile Minority Health, 2004

Key Findings

Among Franklin County's largest racial and ethnic minorities, black and Hispanic adults were more likely to be uninsured than any other racial/ethnic group. More than 51 percent of Hispanic and 18 percent of black adults lacked health insurance, compared to 11.7 percent of white adults.

Black adults and children in Franklin County were more likely than white adults and children to have Medicaid health care coverage. Approximately 20 percent of black adults and 48 percent of black children had health care coverage through Medicaid, compared to 7 percent of white adults and just over 18 percent of white children.

When insurance coverage was available, white adults in Franklin County were more likely than black adults to lack coverage for vision and dental care. Approximately 33 percent of white adults in Franklin County lacked coverage for vision care, compared to about 22 percent of black adults. About 30 percent of white adults lacked coverage for dental care, compared to 18.6 percent of black adults.

Poor/fair health status was more likely to be reported by black and Hispanic adults in Franklin County than white adults. More than 24 percent of black and 23.9 percent of Hispanic adults reported poor/fair health, compared to 13.7 percent of white adults.

White and black adults in Franklin County were more likely than Hispanic and Asian adults to report they had special health care needs. More than 47 percent of white and 45.3 percent of black adults reported they had special health care needs, compared to 27.2 percent of Hispanic and 12.3 percent of Asian adults.

Assistance with day-to-day activities was more likely to be needed by black adults than white adults in Franklin County. Eleven percent of black adults reported they needed assistance with day-to-day activities, compared to 7.2 percent of white adults.

White and black adults in Franklin County were more likely to report they had heart or circulatory disease than Hispanic adults. Nearly 12 percent of white adults and 10.8 percent of black adults had been told they had heart or circulatory disease, compared to 4.4 percent of Hispanic adults.

Black adults in Franklin County were more likely to report they had hypertension than any other racial/ethnic group. More than 36 percent of black adults had been told they had hypertension, compared to 26.2 percent of white and 11.1 percent of Hispanic adults.

Black and white adults in Franklin County were more likely than Hispanic adults to have been told by a health care professional they had diabetes. Nearly 14 percent of black and just over 9 percent of white adults had been informed they had diabetes, compared to just over 5 percent of Hispanic adults.

Black and white adults in Franklin County were more likely than Asian and Hispanic adults to report they were current smokers. More than 27 percent of black and nearly 26 percent of white adults reported they were current smokers, compared to 16.4 percent of Hispanic and 11.4 percent of Asian adults.

Black children in Franklin County were more likely than white children to have been told by a health care professional they had asthma. More than 19 percent of black children had been told they had asthma, compared to 12.6 percent of white children.

The emergency room was more likely to be utilized as a usual source of care by black adults compared to white adults in Franklin County. More than 11 percent of black adults used the emergency room as their usual source of health care, compared to 3.5 percent of white adults.

White and black adults in Franklin County were more likely than Hispanic and Asian adults to report a need for specialist care. Nearly 47 percent of white and 38.8 percent of black adults needed specialist care; this compared to 28.2 percent of Hispanic and 26.7 percent of Asian adults.

Black and Hispanic adults in Franklin County were more likely than white and Asian adults to report an unmet dental need. More than 18 percent of black and 20 percent of Hispanic adults reported an unmet dental need; this compared to 10.4 percent of white and 10.8 percent of Asian adults.

Black adults in Franklin County were more likely than white and Hispanic adults to report an unmet prescription drug need. More than 20 percent of black adults reported an unmet prescription drug need; this compared to 12.9 percent of white and 10.7 percent of Hispanic adults.

Asian adults in Franklin County were less likely than any other racial/ethnic group to delay obtaining medical treatment. Less than 9 percent of Asian adults reported they delayed obtaining medical treatment; this compared to 22.6 percent of black, 20.6 percent of Hispanic and 17.1 percent of white adults.

Asian adults in Franklin County were more likely than white adults to have more than two years pass without a health care visit. Nearly 14 percent of Asian adults reported they not had a health care visit in the past two years; this compared to 7.1 percent of white adults.

Hispanic adults in Franklin County were more likely than white and black adults to have gone more than five years (or never) without a checkup. Nearly 18 percent of Hispanic adults reported they not had a checkup in the past five years (or had never had a checkup as an adult); this compared to 8.7 percent of white and 6.1 percent of black adults.

Hispanic adults in Franklin County were more likely than white and Asian adults to go without a dental visit for more than three years. Nearly 25 percent of Hispanic adults were without a dental visit for more than three years; this compares to 14.5 percent of white and 11.9 percent of Asian adults.

Black children in Franklin County were more likely than white children to have a one-to-three-year time period elapse since their last dental visit. Sixteen percent of black children were without a dental visit for the one-to-three-year time period after their previous dental visit; this compares to 4.6 percent of white children.

Black adults in Franklin County were more likely than white and Hispanic adults to have an overnight hospital stay. Nearly 16 percent of black adults had at least one overnight hospital stay; this compares to 11.5 percent of white and 8.4 percent of Hispanic adults.

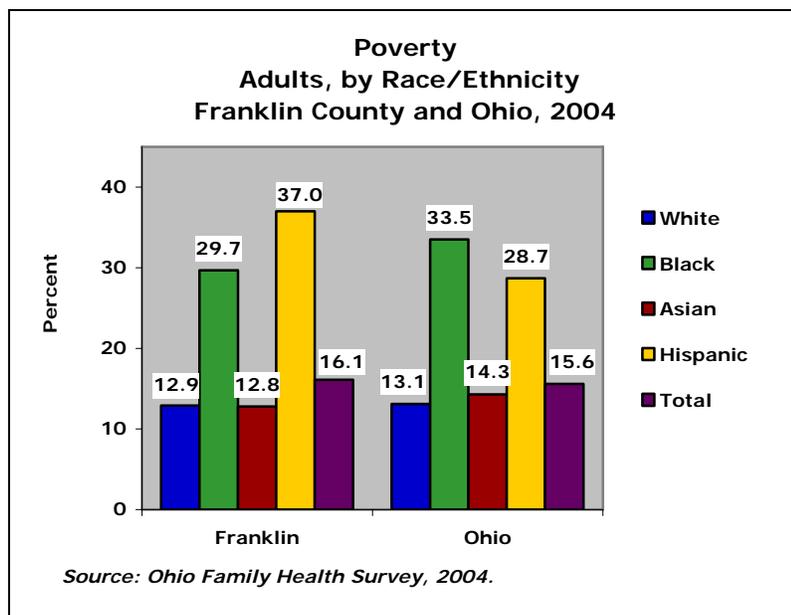
Black adults in Franklin County were more likely than any other racial/ethnic group to have an emergency room visit. More than 32 percent of black adults had at least one emergency room visit; this compares to 18.7 percent of white, 15.3 percent of Hispanic and 9.9 percent of Asian adults.

Black children in Franklin County were more likely than white children to have an emergency room visit. More than 27 percent of black children had at least one emergency room visit; this compares to 19.3 percent of white children.

White and black adults in Franklin County were more likely than Asian adults to incur major medical costs in the past year. More than 24 percent of white and 21.8 percent of black adults had incurred major medical costs during the past year; this compares to 14.6 percent of Asian adults.

I. Demographics

Figure 1.



- Hispanic adults in Franklin County were more likely than any other group to be living in poverty.
- Black adults were more likely than white and Asian adults to be living in poverty.
- More than one out of three Hispanic and nearly one out of three black adults lived in poverty, compared to just over one out of 10 white and Asian adults.

Table 1.

Income	Franklin County					Ohio				
	White	Black	Asian	Hispanic	County Total	White	Black	Asian	Hispanic	Ohio Total
	Percent					Percent				
Poverty	12.9	29.7	12.8	37.0	16.1	13.1	33.5	14.3	28.7	15.6
Near Poverty	7.9	12.4	3.5**	15.7	8.9	9.7	12.0	6.4	14.0	10.1
Low Income	8.4	13.7	11.8	9.3	9.5	10.8	10.8	8.2	11.2	10.8
Middle/High Income	70.9	44.2	71.9	38.0	65.5	66.4	43.7	71.2	46.1	63.5
Total*	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0

*Total may not equal 100 percent due to rounding.
 **The estimate may not be reliable.
 Source: Ohio Family Health Survey, 2004.

- Hispanic (52.7 percent) and black adults (42.1 percent) were more likely than white (20.8 percent) and Asian adults (16.3 percent) to be living in poverty or near poverty conditions.
- White and Asian adults were more likely than black or Hispanic adults to have middle to high incomes. More than two-thirds of white and Asian adults had middle to high incomes, while less than half of black and Hispanic adults had such incomes.

Table 2.

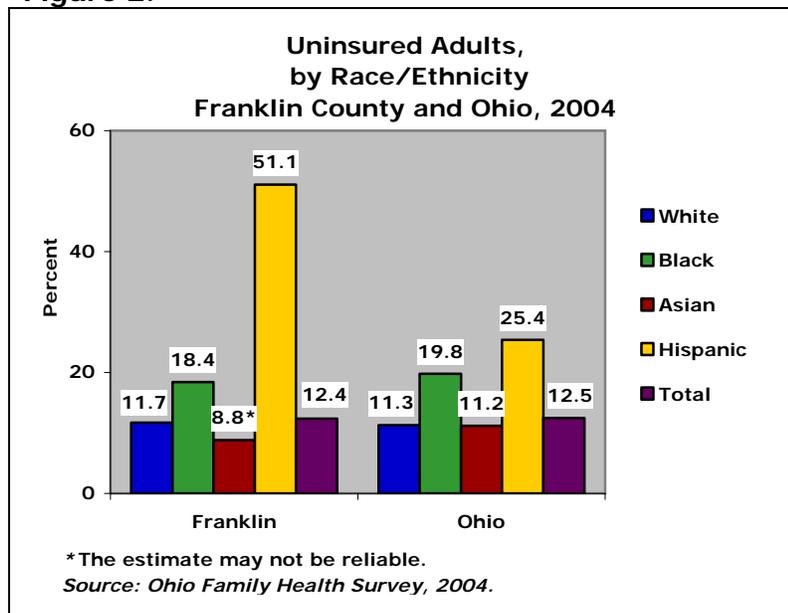
Educational Attainment, Adults, by Race/Ethnicity Franklin County and Ohio, 2004										
Educational Attainment	Franklin County					Ohio				
	White	Black	Asian	Hispanic	County Total	White	Black	Asian	Hispanic	Ohio Total
	Percent					Percent				
Less than High School	9.5	14.2	4.9**	36.8	10.7	10.4	16.9	5.6	26.7	11.4
High School Graduate	35.2	42.7	15.0	28.8	35.7	46.1	44.5	17.8	39.7	45.5
Some College	17.0	22.0	13.2	11.9	18.0	17.1	21.6	9.5	14.0	17.4
Associates' Degree	7.0	8.5	5.9**	4.7	7.1	7.5	7.0	7.1	6.9	7.5
College Degree (4 Year)	19.3	9.6	26.1	10.6	17.6	11.8	6.3	23.3	8.0	11.3
Advanced College Degree	12.0	3.0	34.9	7.2	10.9	7.1	3.6	36.8	4.7	7.0
Total*	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0

*Total may not equal 100 percent due to rounding.
 **The estimate may not be reliable.
 Source: Ohio Family Health Survey, 2004.

- Hispanic adults (36.8 percent) were more likely than any other group to leave high school prior to graduation. Black adults (14.2 percent) were more likely than white adults (9.5 percent) to leave high school prior to graduation.
- White (19.3 percent) and Asian adults (26.1 percent) were more likely than Hispanic (10.6 percent) and black adults (9.6 percent) to graduate with a four-year college degree.

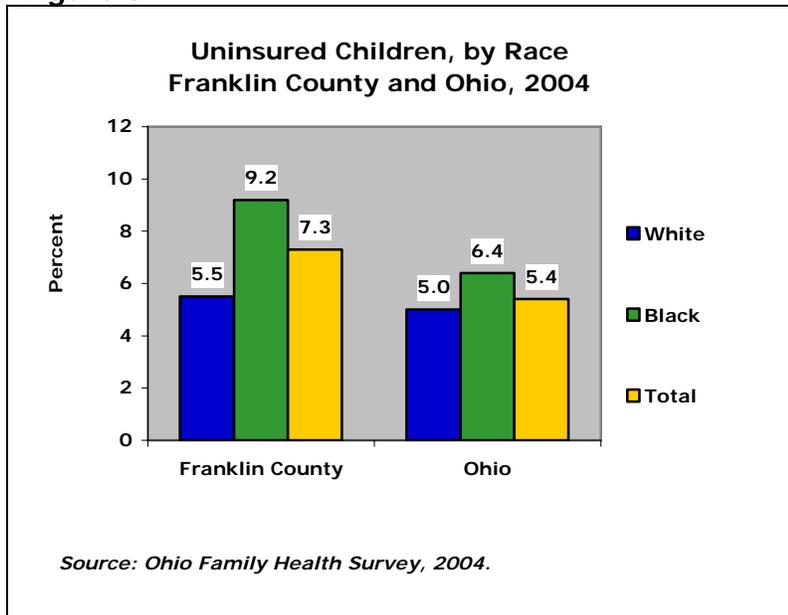
II. Health Insurance

Figure 2.



- Hispanic adults were more likely than any other group to lack health insurance. More than half of Hispanic adults lacked health insurance.
- Black adults (18.4 percent) were more likely to be uninsured than white adults (11.7 percent).

Figure 3.



- There were no significant racial/ethnic differences in the percent of uninsured children.
- Less than 8 percent of children in Franklin County were without health insurance.

Table 3.

Insurance Type	Franklin County					Ohio				
	White	Black	Asian	Hispanic	County Total	White	Black	Asian	Hispanic	Ohio Total
	Percent					Percent				
Job-based	65.6	52.4	70.2	35.9	62.6	64.5	48.9	67.3	53.8	62.5
Medicaid	7.0	19.7	3.7**	7.3	9.1	8.0	20.9	4.1	11.8	9.5
Medicare/Other	15.7	9.6	17.3	5.8	14.3	16.2	10.4	17.4	9.1	15.5
Uninsured	11.7	18.4	8.8**	51.1	14.0	11.3	19.8	11.2	25.4	12.5
Total*	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0

*Total may not equal 100 percent due to rounding.
 **The estimate may not be reliable.
 Source: Ohio Family Health Survey, 2004.

- White (65.6 percent) and Asian adults (70.2 percent) were more likely to have job-based health care coverage than black (52.4 percent) or Hispanic adults (35.9 percent).
- Black adults (52.4 percent) were more likely than Hispanic adults (35.9 percent) to have job-based health care coverage.
- Black adults (19.7 percent) were more likely to have Medicaid coverage for health care than any other group.
- Hispanic adults (51.1 percent) were more likely to be uninsured than any other group, while black adults (18.4 percent) were more likely than white adults (11.7 percent) to be uninsured.

Table 4.

Insurance Type, Children, by Race Franklin County and Ohio, 2004						
Insurance Type	Franklin County			Ohio		
	White	Black	County Total	White	Black	Ohio Total
	Percent			Percent		
Job-based	69.7	37.9	60.4	70.6	35.6	63.8
Medicaid	18.4	47.6	25.8	18.5	52.1	24.0
Other Insurance	6.3	5.4**	6.5	5.9	5.9	6.9
Uninsured	5.5	9.2	7.3	5.0	6.4	5.4
Total*	100.0	100.0	100.0	100.0	100.0	100.0

*Total may not equal 100 percent due to rounding.
 **The estimate may not be reliable.
 Source: Ohio Family Health Survey, 2004.

- White children (69.7 percent) were more likely to have job-based health care coverage than black children (37.9 percent).
- Black children (47.6 percent) were more likely to have Medicaid coverage for health care than white children (18.4 percent).

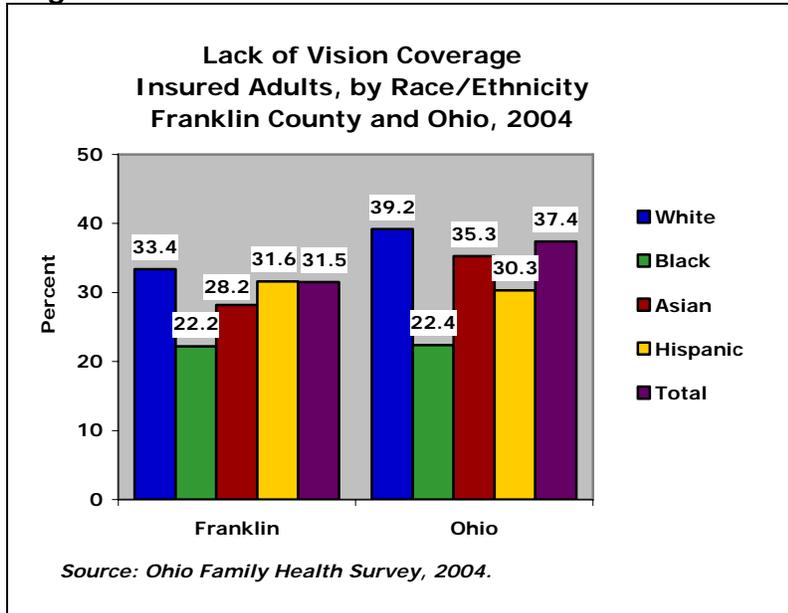
Table 5.

Mental Health Coverage of Insured Adults, by Race/Ethnicity Franklin County and Ohio, 2004										
Mental Health Coverage	Franklin County					Ohio				
	White	Black	Asian	Hispanic	County Total	White	Black	Asian	Hispanic	Ohio Total
	Percent					Percent				
Covered	70.4	67.9	47.7	67.4	69.1	64.4	69.0	52.5	64.0	64.6
Not Covered	9.7	13.2	13.6	11.8	10.5	12.3	12.0	14.8	12.7	12.4
Unknown	20.0	19.0	38.7	20.8	20.4	23.3	19.0	32.7	23.2	23.0
Total*	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0

*Total may not equal 100 percent due to rounding.
 Source: Ohio Family Health Survey, 2004.

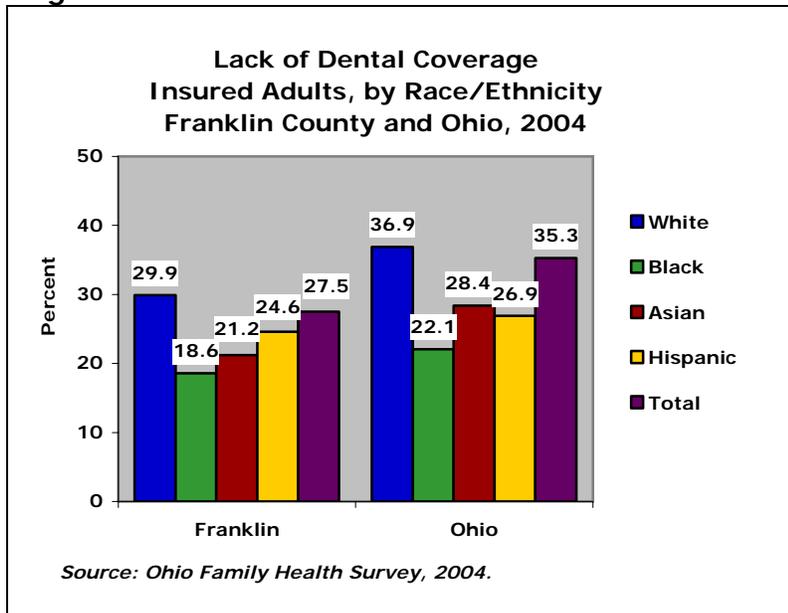
- Among adults with health insurance coverage, there were no significant differences in the percent who lacked mental health coverage.

Figure 4.



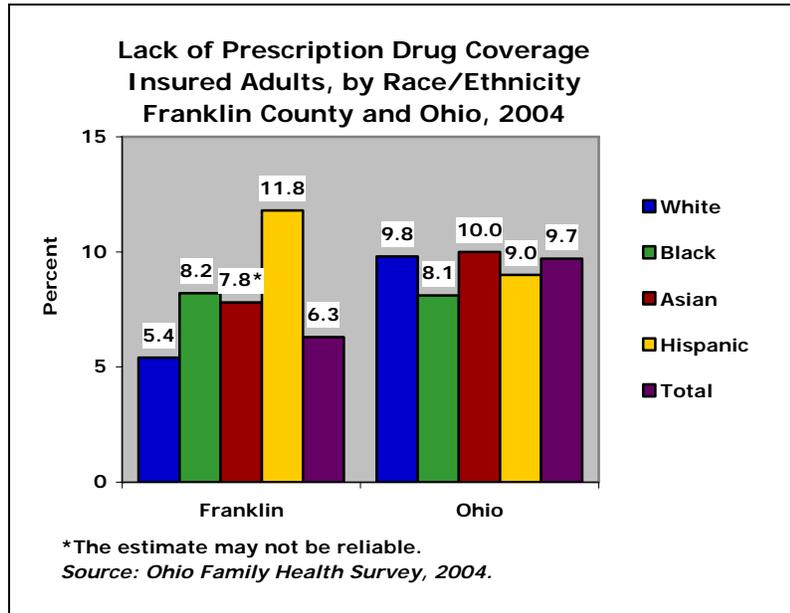
- White adults (33.4 percent) with health insurance coverage were more likely than black adults (22.2 percent) to lack vision coverage.

Figure 5.



- White adults (29.9 percent) with health insurance coverage were more likely than black (18.6 percent) and Asian adults (21.2 percent) to lack dental coverage.

Figure 6.



- Among adults with health insurance coverage, there were no significant differences in the percent who lacked prescription drug coverage.

Table 6.

Doctor Rating	Franklin County					Ohio				
	White	Black	Asian	Hispanic	County Total	White	Black	Asian	Hispanic	Ohio Total
	Percent					Percent				
Below Average	4.5	8.0	7.3**	3.7**	5.2	4.7	5.9	6.5	5.3	4.9
Average	8.5	15.6	11.4	14.9	9.8	10.1	13.0	13.6	11.4	10.4
Good	29.1	25.4	51.2	31.5	29.0	27.4	26.2	41.3	29.0	27.4
Very Good/Excellent	55.5	49.6	24.2	43.1	53.5	55.5	52.7	32.6	50.0	54.8
Unknown	2.4	1.5**	5.8**	6.9**	2.5	2.4	2.3	6.0	4.2	2.5
Total*	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0

*Total may not equal 100 percent due to rounding.
**The estimate may not be reliable.
Source: Ohio Family Health Survey, 2004.

- Insured black adults (8.0 percent) were more likely to rate their choice of doctors below average compared to insured white adults (4.5 percent).
- Insured white adults (55.5 percent) were more likely than insured Hispanic (43.1 percent) and Asian adults (24.2 percent) to rate their choice of doctors very good to excellent.
- Insured black adults (49.6 percent) were more likely than insured Asian adults (24.2 percent) to rate their choice of doctors very good to excellent.

Table 7.

Rating of Access to Emergency Room Care for those Insured, Adults, by Race/Ethnicity Franklin County and Ohio, 2004										
Emergency Medical Care Rating	Franklin County					Ohio				
	White	Black	Asian	Hispanic	County Total	White	Black	Asian	Hispanic	Ohio Total
	Percent					Percent				
Below Average	3.0	10.8	2.7**	5.4**	4.3	3.4	7.5	3.9	3.7	3.9
Average	6.0	12.6	10.3	7.3**	7.3	6.8	9.3	11.8	9.1	7.1
Good	23.1	23.1	38.0	24.2	23.5	22.4	25.4	32.4	24.3	22.8
Very Good/Excellent	62.4	47.2	34.3	54.8	59.0	62.1	53.6	38.4	56.4	60.8
Unknown	5.5	6.3	14.7	8.4**	5.9	5.4	4.3	13.4	6.5	5.4
Total*	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0
*Total may not equal 100 percent due to rounding.										
**The estimate may not be reliable.										
Source: Ohio Family Health Survey, 2004.										

- Insured black adults (10.8 percent) were more likely than insured white adults (3.0 percent) to rate access to emergency room care below average.
- Insured white adults (62.4 percent) were more likely than insured black (47.2 percent) and Asian adults (34.3 percent) to rate access to emergency room care very good to excellent.

Table 8.

Rating of Amount Paid for Medical Services for those Insured, Adults, by Race/Ethnicity Franklin County and Ohio, 2004										
Payment Rating	Franklin County					Ohio				
	White	Black	Asian	Hispanic	County Total	White	Black	Asian	Hispanic	Ohio Total
	Percent					Percent				
Below Average	12.4	19.0	11.5	13.6	13.4	12.9	16.3	13.0	13.7	13.2
Average	20.1	15.1	25.3	19.7	19.6	19.9	15.7	26.7	17.3	19.6
Good	33.3	25.6	39.2	30.2	32.0	30.8	23.9	34.9	28.2	30.0
Very Good/Excellent	30.6	36.8	20.6	30.4	31.4	32.3	40.0	19.2	36.1	33.0
Unknown	3.5	3.6	3.5**	6.1**	3.5	4.1	4.1	6.2	4.7	4.2
Total*	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0
*Total may not equal 100 percent due to rounding.										
**The estimate may not be reliable.										
Source: Ohio Family Health Survey, 2004.										

- Insured black adults (19.0 percent) were more likely than insured white adults (12.4 percent) to rate the amount paid for medical services below average.
- Insured Asian adults (20.6 percent) were less likely than insured white (30.6 percent) and black adults (36.8 percent) to rate the amount paid for medical services very good to excellent.

Table 9.

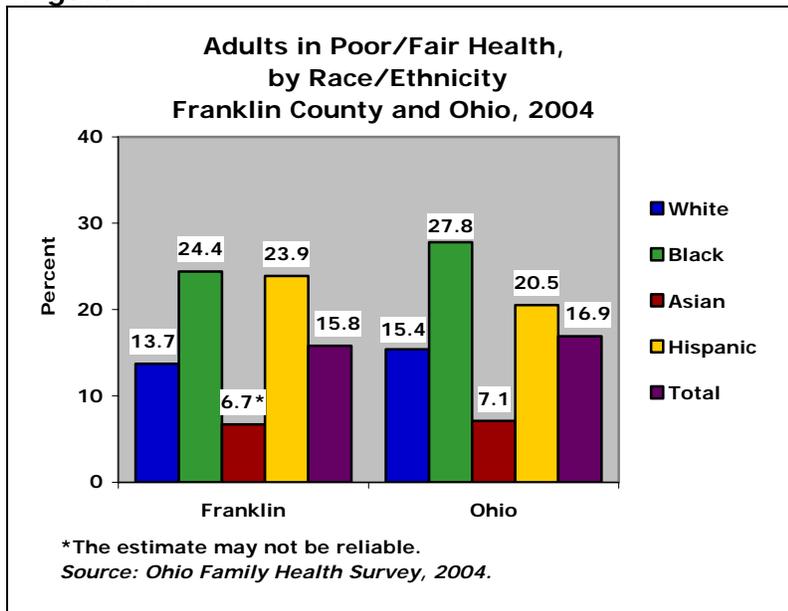
Rating of Benefits Covered for those Insured, Adults, by Race/Ethnicity Franklin County and Ohio, 2004										
Benefits Rating	Franklin County					Ohio				
	White	Black	Asian	Hispanic	County Total	White	Black	Asian	Hispanic	Ohio Total
	Percent					Percent				
Below Average	6.7	12.6	4.5**	10.9	7.7	7.5	10.4	8.4	8.5	7.9
Average	14.8	17.4	25.8	18.9	15.8	15.6	14.9	23.3	15.5	15.6
Good	40.1	31.4	51.0	27.2	38.9	38.2	32.4	48.5	35.8	37.7
Very Good/Excellent	38.3	38.5	18.8	43.0	37.6	38.6	42.3	19.7	40.2	38.8
Total*	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0

*Total may not equal 100 percent due to rounding.
 **The estimate may not be reliable.
 Source: Ohio Family Health Survey, 2004.

- Insured black adults (12.6 percent) were more likely than insured white adults (6.7 percent) to rate benefits covered under their health plan below average.
- Insured Asian adults (18.8 percent) were less likely than insured white (38.3 percent), black (38.5 percent) and Hispanic adults (43.0 percent) to rate benefits covered under their health plan very good to excellent.

III. Health Status

Figure 7.



- Black (24.4 percent) and Hispanic adults (23.9 percent) were more likely than white adults (13.7 percent) to report they were in poor/fair health.

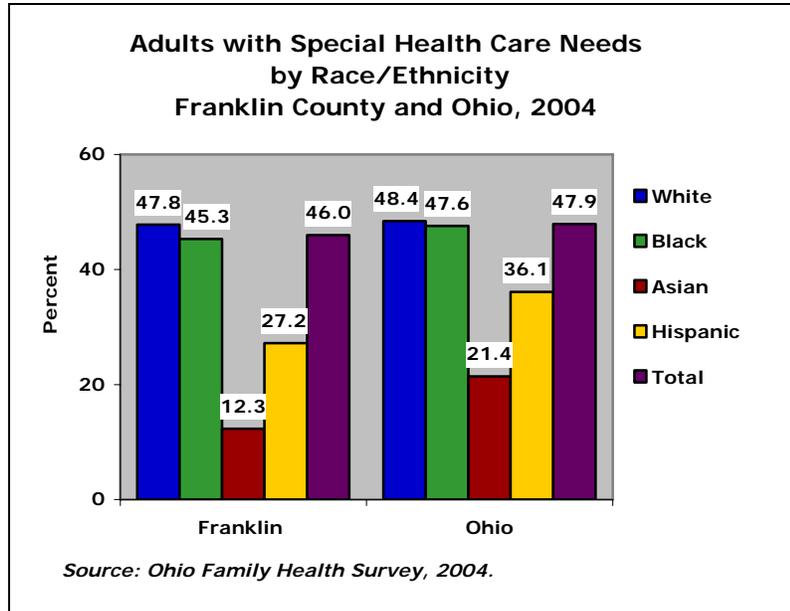
Table 10.

Health Status, Children, by Race Franklin County and Ohio, 2004						
Health Status	Franklin County			Ohio		
	White	Black	County Total	White	Black	Ohio Total
	Percent			Percent		
Excellent	59.9	43.8	56.0	59.7	46.5	57.5
Very Good	28.0	32.2	28.3	27.2	28.0	27.3
Good	9.7	19.2	12.6	10.4	18.0	11.7
Fair/Poor	2.4	4.8**	3.2	2.6	7.4	3.4
Total*	100.0	100.0	100.0	100.0	100.0	100.0

*Total may not equal 100 percent due to rounding.
 **The estimate may not be reliable.
 Source: Ohio Family Health Survey, 2004.

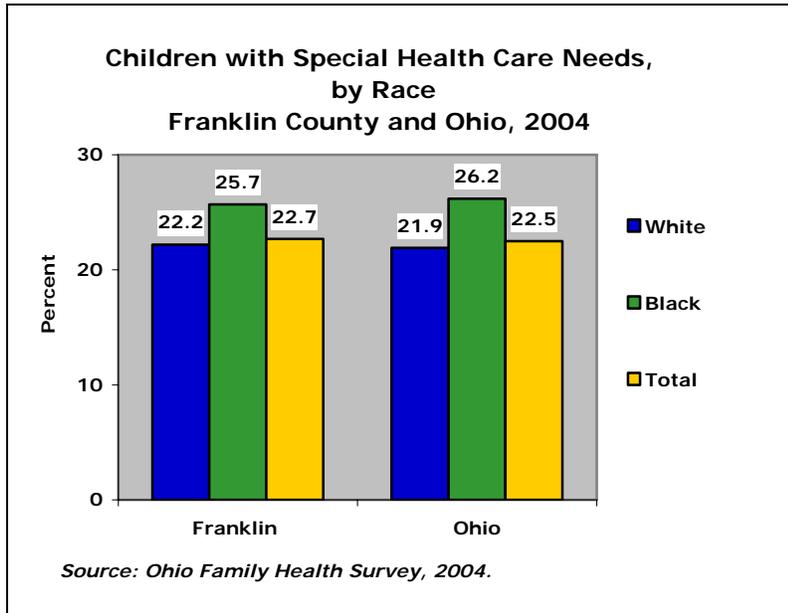
- White children (59.9 percent) were more likely than black children (43.8 percent) to have their health status reported as excellent.

Figure 8.



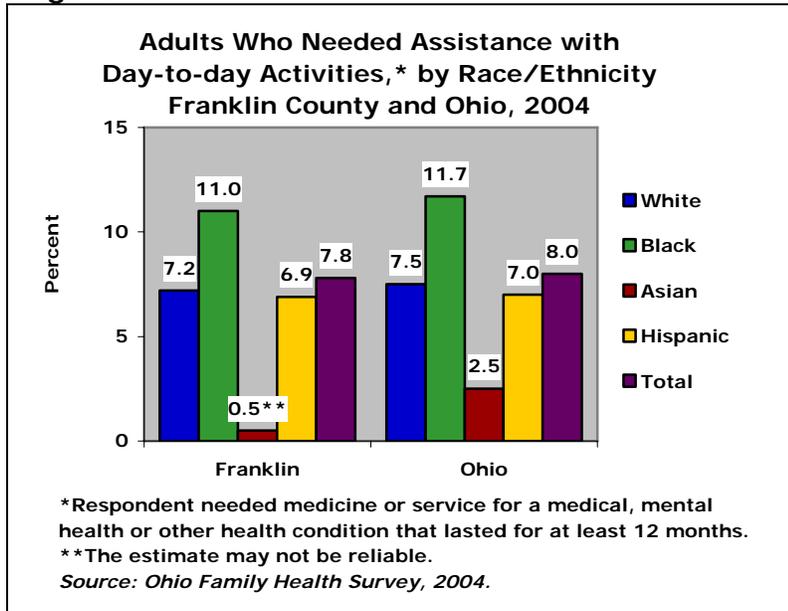
- White (47.8 percent) and black adults (45.3 percent) were more likely than Hispanic (27.2 percent) and Asian adults (12.3 percent) to report they had special health care needs.
- Hispanic adults (27.2 percent) were more likely than Asian adults (12.3 percent) to report they had special health care needs.

Figure 9.



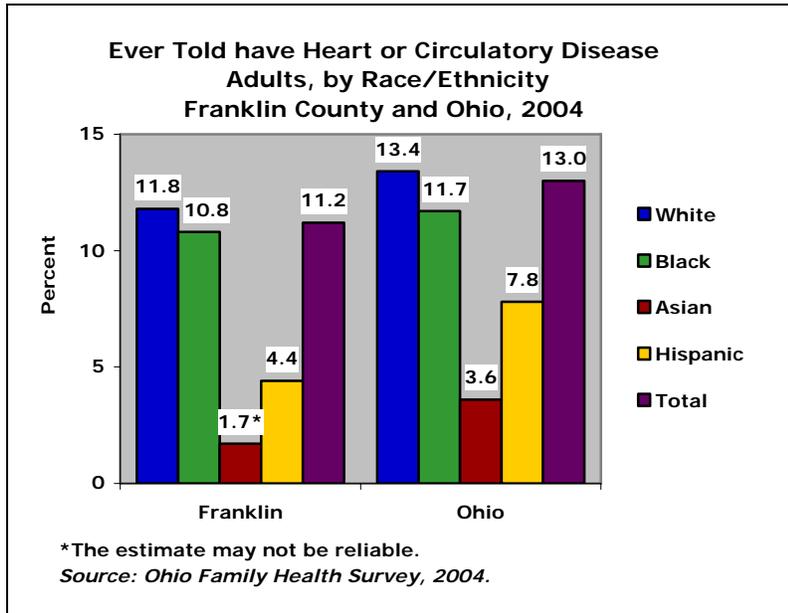
- Approximately one out of four children had special health care needs.
- There were no significant differences by race/ethnicity for children with special health care needs.

Figure 10.



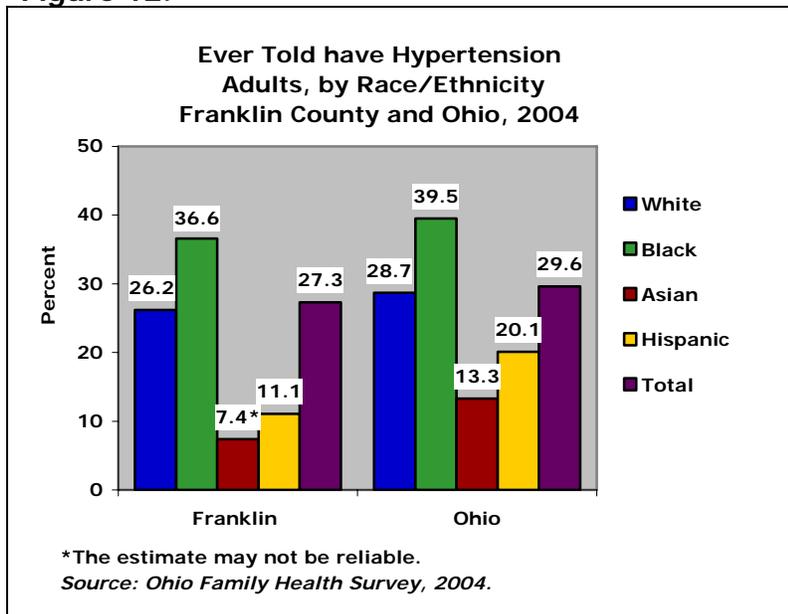
- Black adults (11.0 percent) were more likely than white adults (7.2 percent) to report they needed assistance with their day-to-day activities.

Figure 11.



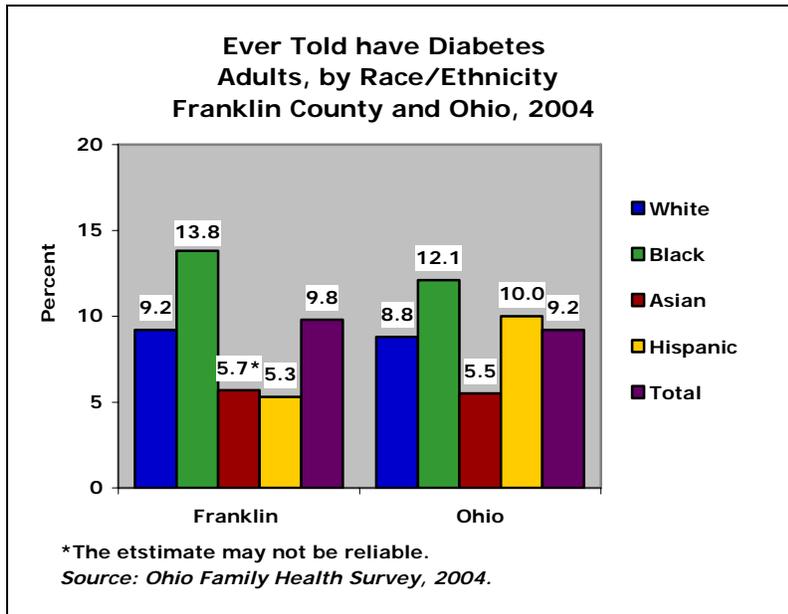
- Approximately one out of 10 adults reported they had been informed they had heart or circulatory disease.
- White (11.8 percent) and black adults (10.8 percent) were more likely than Hispanic adults (4.4 percent) to have been told they had heart or circulatory disease.

Figure 12.



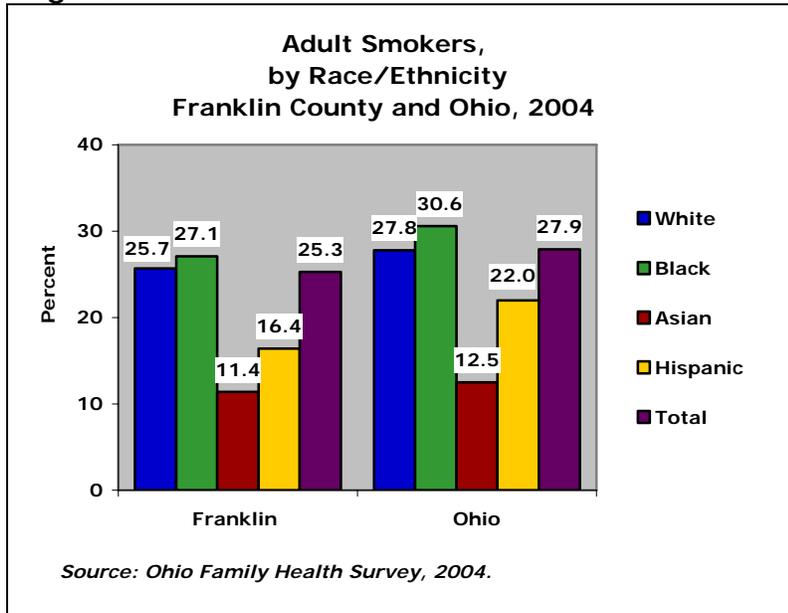
- More than one out of three black adults had been told by a health care professional they had hypertension.
- Black adults (36.6 percent) were more likely than white (26.2 percent) and Hispanic adults (11.1 percent) to have been told they have hypertension.
- White adults (26.2 percent) were more likely than Hispanic adults (11.1 percent) to have been told they have hypertension.

Figure 13.



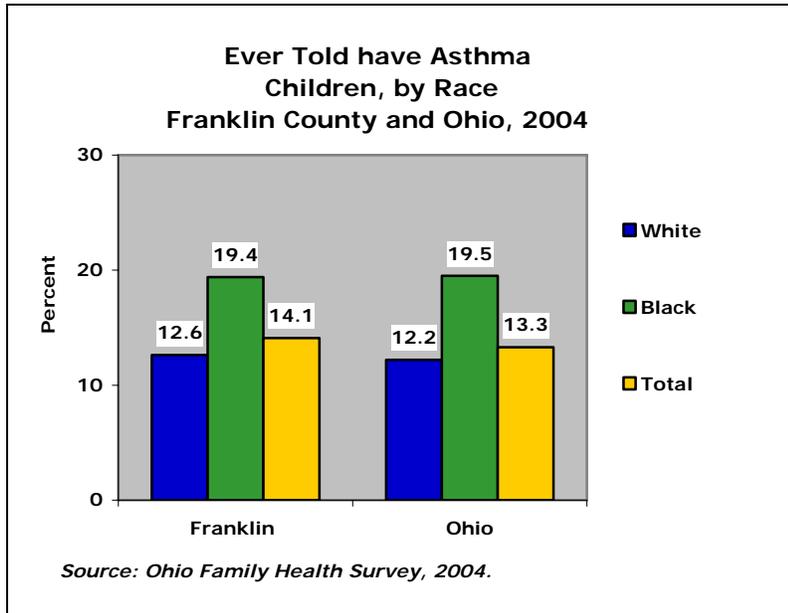
- Black (13.8 percent) and white adults (9.2 percent) were more likely than Hispanic adults (5.3 percent) to have been informed by a health care professional they had diabetes.

Figure 14.



- White (25.7 percent) and black adults (27.1 percent) were more likely to smoke than Hispanic (16.4 percent) and Asian adults (11.4 percent).

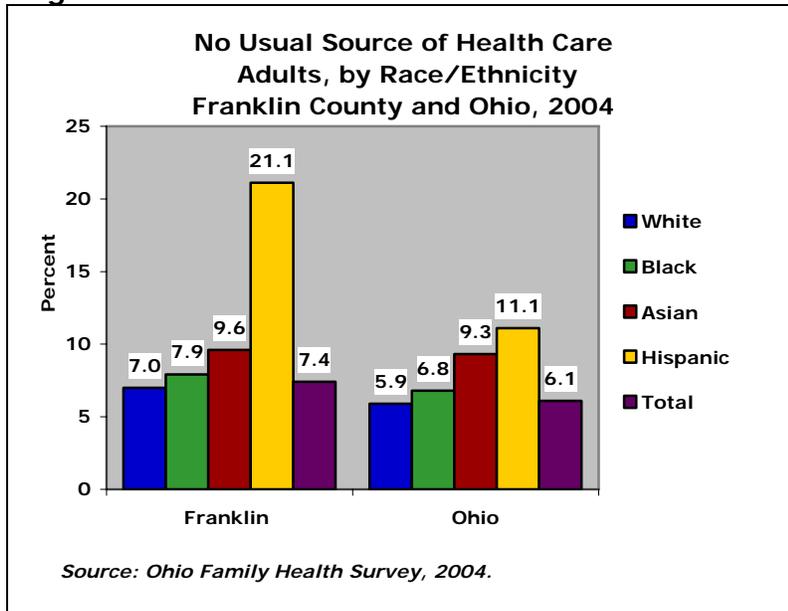
Figure 15.



- Black children (19.4 percent) were more likely than white children (12.6 percent) to have been told by a health care professional they had asthma.

IV. Access to Care

Figure 16.



- More than one out of five Hispanic adults lacked a usual source of health care.
- Hispanic adults (21.1 percent) were more likely than white (7.0 percent), black (7.9 percent) and Asian adults (9.6 percent) to be without a usual source of health care.

Table 11.

Usual Source of Health Care, Adults, by Race/Ethnicity Franklin County and Ohio, 2004										
Usual Source of Health Care	Franklin County					Ohio				
	White	Black	Asian	Hispanic	County Total	White	Black	Asian	Hispanic	Ohio Total
	Percent					Percent				
Doctors' Office or HMO	80.5	55.0	68.6	40.6	74.7	79.0	52.4	68.5	57.3	75.7
Clinic or Health Center	12.9	27.8	26.7	44.0	16.4	12.6	26.4	23.6	26.3	14.4
Hospital Emergency Room	3.5	11.5	1.4**	6**	5.1	3.9	9.7	1.3**	7.4	4.6
Hospital Outpatient Dept.	1.9	5.2	2.2**	8.0	2.8	3.2	10.0	4.1	7.4	4.0
Other Sources	1.1	0.6**	1.1**	1.4**	1.1	1.3	1.4	2.4	1.6	1.3
Total*	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0

*Total may not equal 100 percent due to rounding.
 **The estimate may not be reliable.
 Source: Ohio Family Health Survey, 2004.

- White adults (80.5 percent) were more likely than any other group to utilize a doctor's office or HMO as their usual source of health care, followed by Asian (68.6 percent), black (55.0 percent) and Hispanic adults (40.6 percent).
- Hispanic adults (44.0 percent) were more likely than any other group to utilize a clinic or health center as their usual source of health care, followed by black (27.8 percent), Asian (26.7 percent) and white adults (12.9 percent).
- Black adults (11.5 percent) were more likely than white adults (3.5 percent) to utilize a hospital emergency room as their usual source of health care.
- Black (5.2 percent) and Hispanic adults (8.0 percent) were more likely than white adults (1.9 percent) to utilize a hospital outpatient department as their usual source of health care.

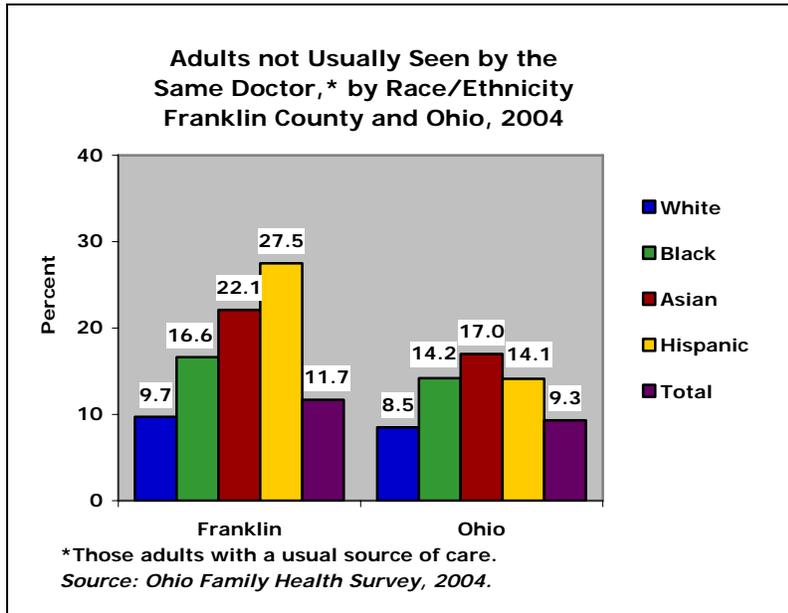
Table 12.

Usual Source of Health Care, Children, by Race Franklin County and Ohio, 2004						
Usual Source of Health Care	Franklin County			Ohio		
	White	Black	County Total	White	Black	Ohio Total
	Percent			Percent		
Doctors' Office or HMO	88.6	60.2	80.3	86.1	56.1	81.0
Clinic or Health Center	9.5	29.6	15.5	10.5	33.5	14.4
Hospital Outpatient Dept.	1.4**	8.0	3.2	1.6	7.0	2.5
Hospital Emergency Room	0.3**	1.3**	0.6**	1.1	2.5	1.4
Other Sources	0.2**	0.9**	0.4**	0.7	1.0**	0.8
Total*	100.0	100.0	100.0	100.0	100.0	100.0

*Total may not equal 100 percent due to rounding.
 **The estimate may not be reliable.
 Source: Ohio Family Health Survey, 2004.

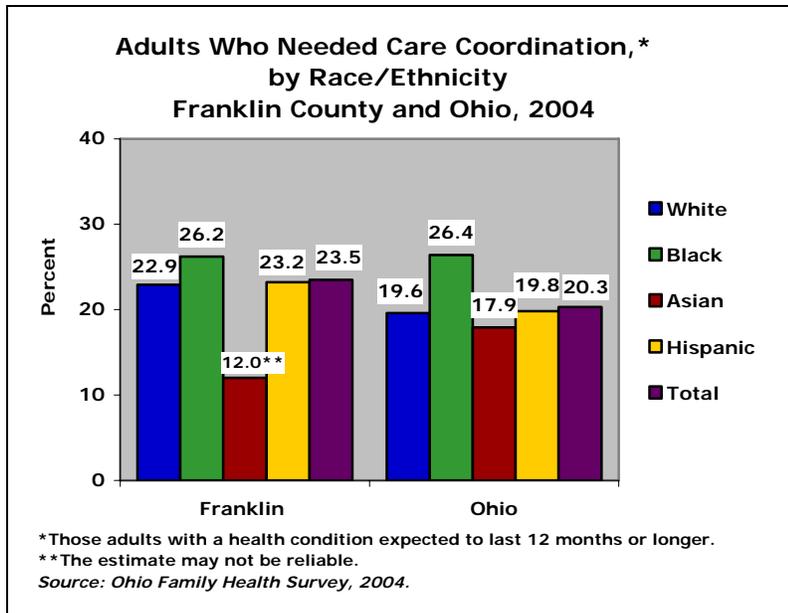
- White children (88.6 percent) were more likely than black children (60.2 percent) to utilize a doctor's office as their usual source of health care.
- Black children (29.6 percent) were more likely than white children (9.5 percent) to utilize a clinic or health center as their usual source of health care.

Figure 17.



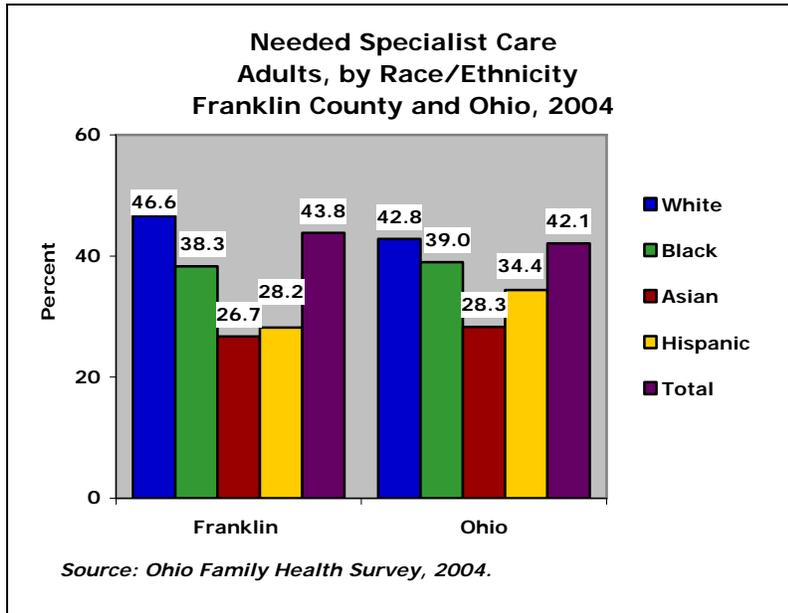
- Hispanic adults (27.5 percent) were more likely than black (16.6 percent) and white adults (9.7 percent) to lack a usual doctor.
- Asian (22.1 percent) and black adults (16.6 percent) were more likely than white adults (9.7 percent) to lack a usual doctor.

Figure 18.



- A similar number of white (22.9 percent), black (26.2 percent) and Hispanic adults (23.2 percent) with a health condition expected to last 12 months or longer reported they needed health care coordination.

Figure 19.



- White adults (46.6 percent) reported a greater need for specialist care than black (38.3 percent), Asian (26.7 percent) and Hispanic adults (28.2 percent).
- Black adults (38.3 percent) reported a greater need for specialist care than Asian (26.7 percent) and Hispanic adults (28.2 percent).

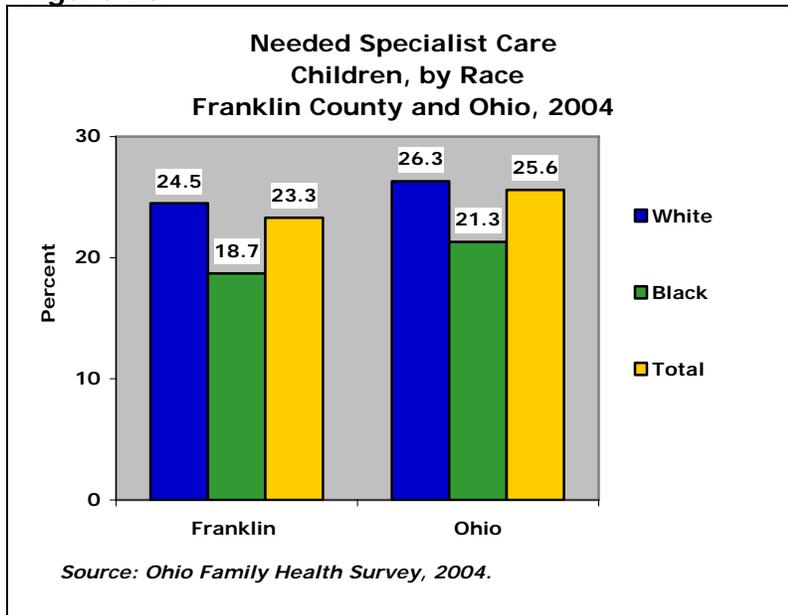
Table 13.

Problems Seeing a Specialist	Franklin County					Ohio				
	White	Black	Asian	Hispanic	County Total	White	Black	Asian	Hispanic	Ohio Total
	Percent					Percent				
Big Problem	9.5	10.9	5.8**	14.7**	10.0	7.8	13.2	6.0	8.8	8.4
Small Problem	10.0	9.5	25.4**	13.8**	10.1	9.6	9.5	16.3	12.7	9.7
Not a Problem	80.5	79.6	68.8	71.5	79.9	82.6	77.2	77.7	78.5	81.8
Total**	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0

*Those persons who responded that they needed to see a specialist.
 **Total may not equal 100 percent due to rounding.
 Source: Ohio Family Health Survey, 2004.

- There were no significant differences by race or ethnicity in the percentage of persons who reported they had problems seeing a health care specialist.

Figure 20.



- Approximately one out of four children needed to seek health care from a specialist.
- There were no significant differences by race in the percentage of children who needed health care from a specialist.

Table 14.

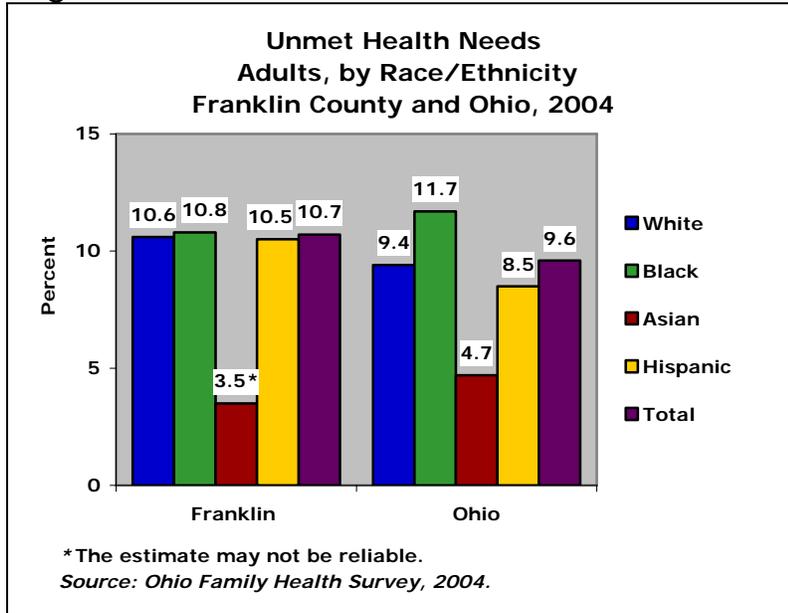
Ability to Receive Care in the Past 3 Years	Franklin County					Ohio				
	White	Black	Asian	Hispanic	County Total	White	Black	Asian	Hispanic	Ohio Total
	Percent					Percent				
Easier	8.6	12.0	17.1	17.5	9.5	7.9	12.3	10.5	13.4	8.5
Harder	19.9	27.0	15.5	25.6	21.5	21.6	25.3	19.5	22.9	22.1
Same	69.9	58.6	63.3	48.7	67.0	69.1	59.9	64.5	60.9	67.8
Unknown	1.5	2.3**	4.1**	8.1	1.9	1.4	2.4	5.5	2.8	1.6
Total*	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0

*Total may not equal 100 percent due to rounding.
 Source: Ohio Family Health Survey, 2004.

- Asian (17.1 percent) and Hispanic adults (17.5 percent) were more likely than white adults (8.6 percent) to report their ability to receive health care had become easier during the past three years.
- Black (27.0 percent) adults were more likely than white (19.9 percent) and Asian adults (15.5 percent) to report their ability to receive health care had become harder during the past three years.
- White adults (69.9 percent) were more likely than black (58.6 percent) and Hispanic adults (48.7 percent) to report their ability to receive health care remained about the same during the past three years.

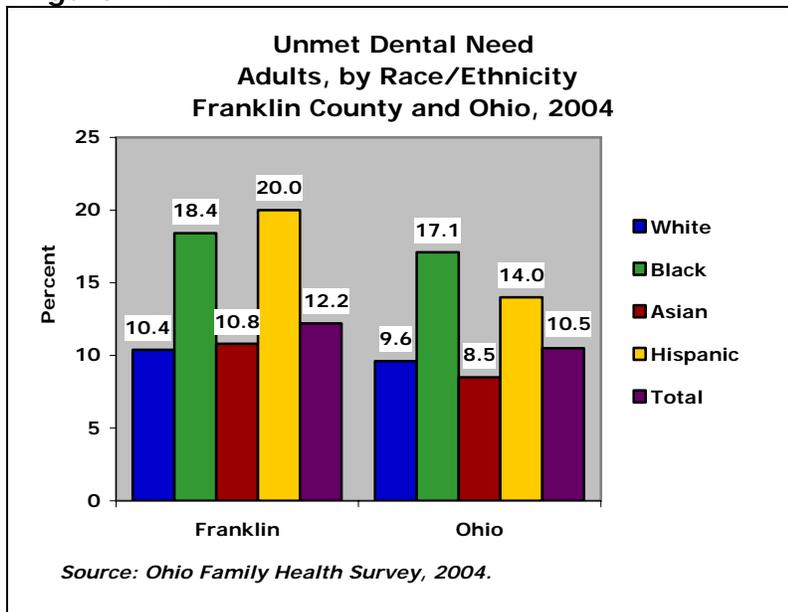
V. Unmet Health Care Needs

Figure 21.



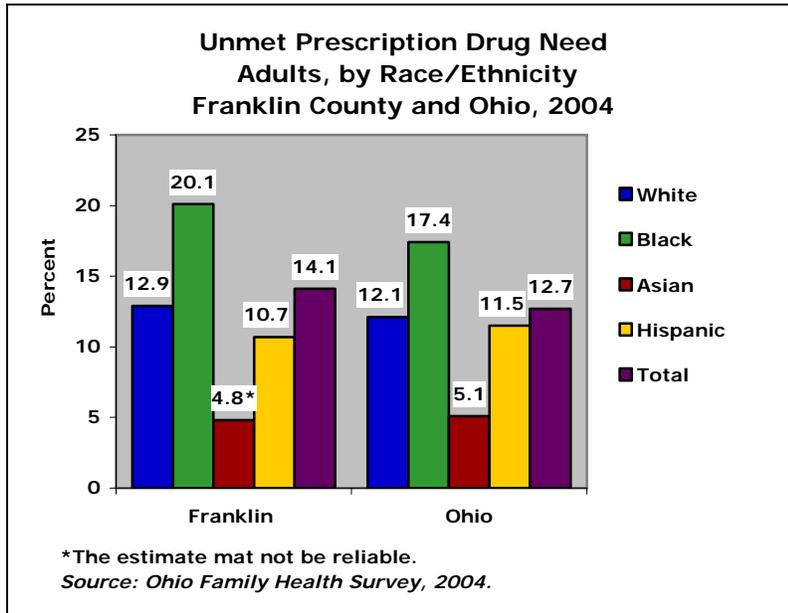
- Approximately one out of 10 white, black and Hispanic adults reported they had an unmet health need.
- There were no significant differences by race or ethnicity in adults reporting an unmet health need.

Figure 22.



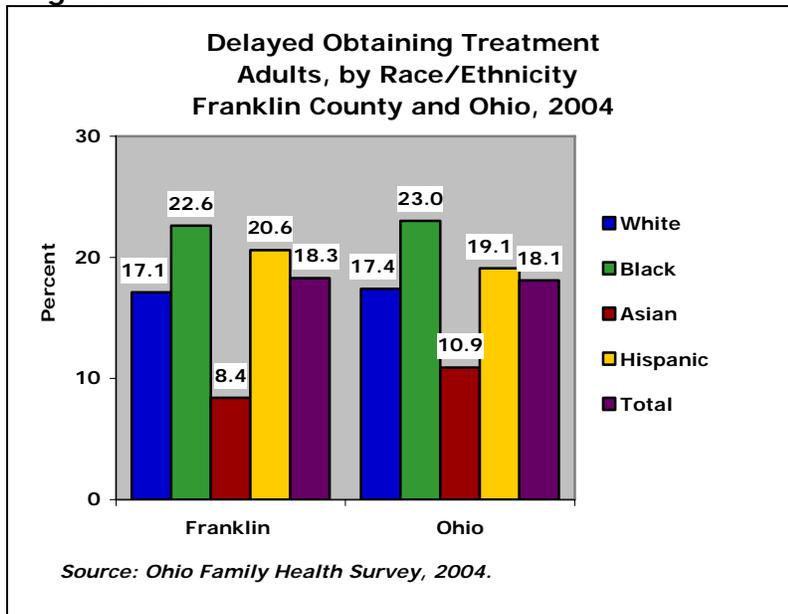
- Black (18.4 percent) and Hispanic adults (20.0 percent) were more likely than white (10.4 percent) and Asian adults (10.8 percent) to report an unmet dental need.

Figure 23.



- Black adults (20.1 percent) were more likely than white (12.9 percent) and Hispanic adults (10.7 percent) to have an unmet prescription drug need.

Figure 24.



- Asian adults (8.4 percent) were less likely than white (17.1 percent), black (22.6 percent) and Hispanic adults (20.6 percent) to report they delayed obtaining medical treatment.
- Black adults (22.6 percent) were more likely than white adults (17.1 percent) to report they delayed obtaining medical treatment.

VI. Health Care Utilization

Table 15.

Most Recent Health Care Visit, Adults, by Race/Ethnicity Franklin County and Ohio, 2004										
Most Recent Doctor Visit	Franklin County					Ohio				
	White	Black	Asian	Hispanic	County Total	White	Black	Asian	Hispanic	Ohio Total
	Percent					Percent				
6 Months or Less	71.5	72.2	58.8	47.0	70.4	71.2	73.6	59.6	59.7	71.1
6 Months - 1 Year	12.9	9.6	13.2	12.1	12.3	12.7	10.9	15.1	14.2	12.5
1 - 2 Years	8.4	8.9	14.2	11.2	8.8	8.0	7.5	9.3	11.1	8.0
More than 2 Years	7.1	9.4	13.8	29.6	8.4	8.1	7.9	16.0	15.1	8.3
Total*	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0

*Total may not equal 100 percent due to rounding.
 Source: Ohio Family Health Survey, 2004.

- White (71.5 percent) and black adults (72.2 percent) were more likely than Asian (58.8 percent) and Hispanic adults (47.0 percent) to have had a health care visit within the past six months.
- Asian adults (58.8 percent) were more likely than Hispanic adults (47.0 percent) to have had a health care visit within the past six months.
- Hispanic adults (29.6 percent) were more likely than any other group to have gone more than two years without having a health care visit.
- Asian adults (13.8 percent) were more likely than white adults (7.1 percent) to have gone more than two years without having a health care visit.

Table 16.

Most Recent Health Care Visit, Children, by Race Franklin County and Ohio, 2004						
Most Recent Doctor Visit	Franklin County			Ohio		
	White	Black	County Total	White	Black	Ohio Total
	Percent			Percent		
6 Months or Less	77.1	71.7	75.5	75.5	70.6	74.9
6 Months - 1 Year	18.7	20.6	19.1	16.5	21.7	17.2
1 - 2 Years	3.6	5.7	3.9	5.6	6.0	5.7
More than 2 Years	0.6**	2.1**	1.5	2.4	1.8	2.3
Total*	100.0	100.0	100.0	100.0	100.0	100.0

*Total may not equal 100 percent due to rounding.
 **The estimate may not be reliable.
 Source: Ohio Family Health Survey, 2004.

- There were no significant race differences in children for their most recent health care visit.

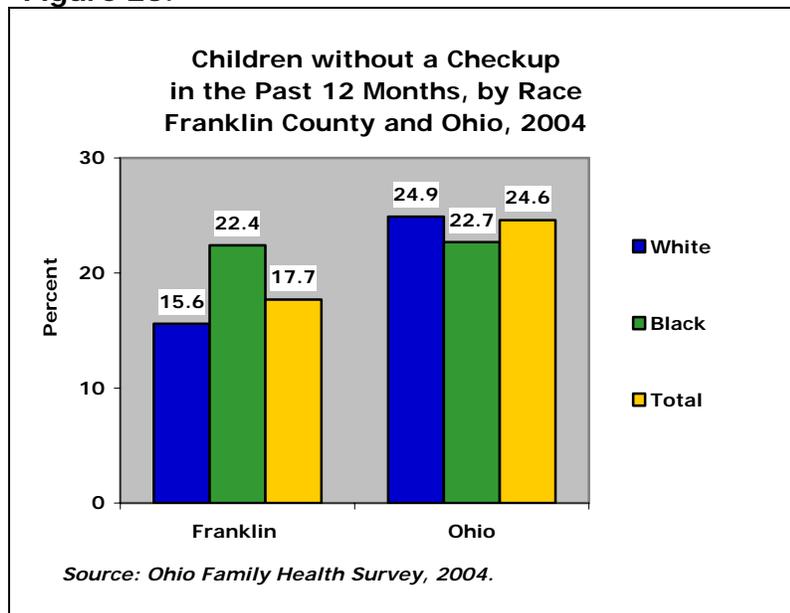
Table 17.

Most Recent Checkup, Adults, by Race/Ethnicity Franklin County and Ohio, 2004										
Most Recent Checkup	Franklin County					Ohio				
	White	Black	Asian	Hispanic	County Total	White	Black	Asian	Hispanic	Ohio Total
	Percent					Percent				
Within the Past Year	69.2	72.8	64.2	51.1	69.0	70.0	76.3	65.5	63.4	70.5
1 - 2 Years	13.4	10.2	17.7	15.4	13.0	12.5	11.0	14.2	14.3	12.4
2 - 5 Years	8.7	10.8	7.7**	15.9	9.4	8.8	8.1	11.3	12.3	8.8
More than 5 Years (or never)	8.7	6.1	10.4	17.6	8.6	8.7	4.7	9.0	10.0	8.4
Total*	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0

*Total may not equal 100 percent due to rounding.
 **The estimate may not be reliable.
 Source: Ohio Family Health Survey, 2004.

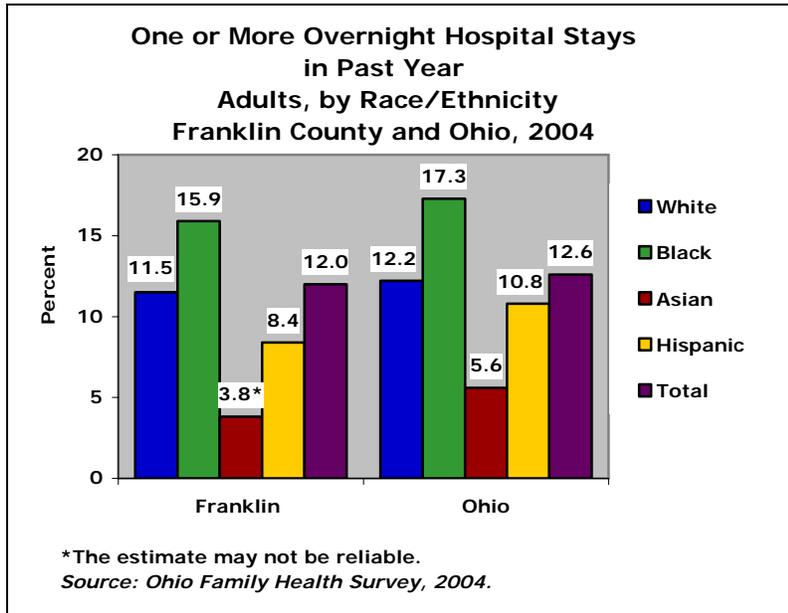
- White (69.2 percent) and black adults (72.8 percent) were more likely than Hispanic adults (51.1 percent) to have been seen for a checkup within the past year.
- Hispanic adults (15.9 percent) were more likely than white adults (8.7 percent) to have gone without a checkup in the past two to five years.
- Hispanic adults (17.6 percent) were more likely than white (8.7 percent) and black adults (6.1 percent) to have gone without a checkup for more than five years (or never).

Figure 25.



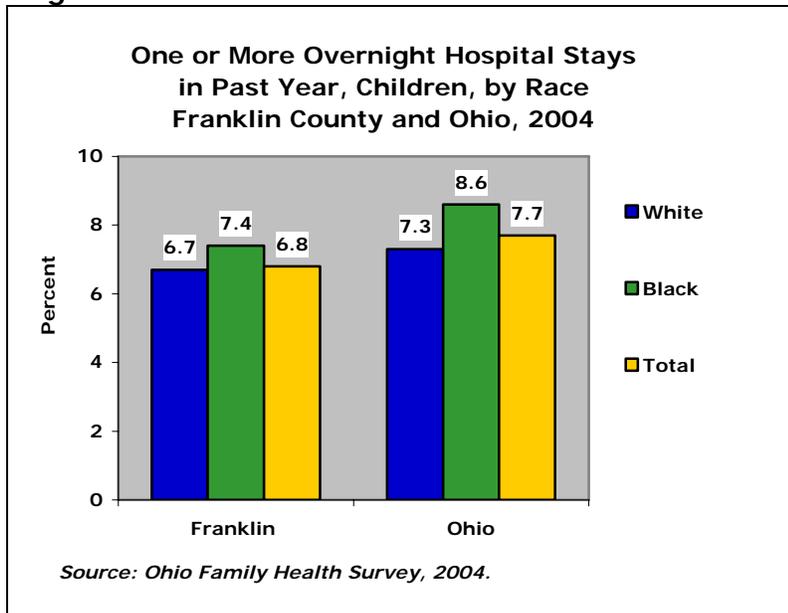
- Between 15 and 23 percent of white and black children did not have a checkup during the past 12 months.
- There were no significant differences by race in the percent of children who were not seen for a checkup during the past 12 months.

Figure 26.



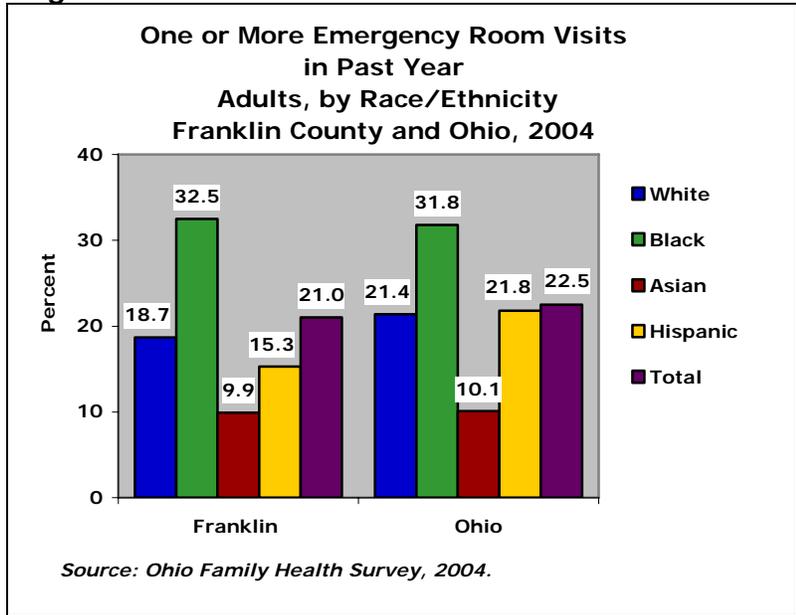
- Black adults (15.9 percent) were more likely than white (11.5 percent) and Hispanic adults (8.4 percent) to have one or more overnight hospital stays in the past year.

Figure 27.



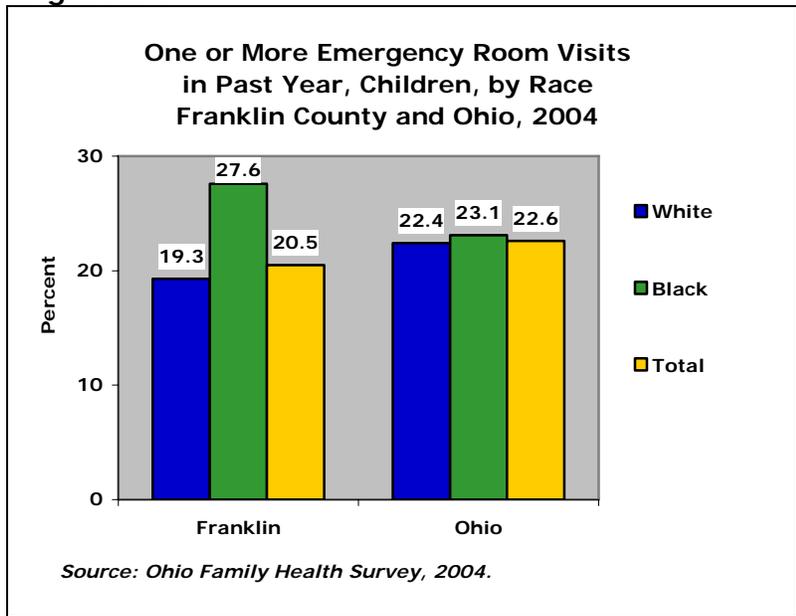
- Between 6 and 8 percent of white and black children were hospitalized in the past year.
- There were no significant differences by race in the percent of children who were hospitalized in the past 12 months.

Figure 28.



- Black adults (32.5 percent) were more likely than white (18.7 percent), Hispanic (15.3 percent) and Asian adults (9.9 percent) to have at least one emergency room visit in the past year.
- White adults (18.7 percent) were more likely than Asian adults (9.9 percent) to have at least one emergency room visit in the past year.

Figure 29.



- Approximately one out of five children had at least one emergency room visit in the past year.
- Black children (27.6 percent) were more likely than white children (19.3 percent) to have at least one emergency room visit during the past year.

Table 18.

Length of Time since Last Dental Visit, Adults, by Race/Ethnicity Franklin County and Ohio, 2004										
Length of Time since Last Dental Visit	Franklin County					Ohio				
	White	Black	Asian	Hispanic	County Total	White	Black	Asian	Hispanic	Ohio Total
	Percent					Percent				
6 Months or Less	56.5	36.8	56.3	36.4	52.5	51.4	36.5	53.8	41.6	49.6
6 Months - 1 Year	11.8	16.8	11.2	11.8	12.8	14.0	17.8	15.3	15.7	14.5
1 - 3 Years	16.5	23.0	12.3	17.6	17.6	16.0	22.4	14.4	19.1	16.7
More than 3 Years	14.5	18.9	11.9	24.5	15.4	17.7	21.0	9.1	17.9	18.1
Never	0.7**	4.6	8.3**	9.7	1.7	0.8	2.4	7.4	5.6	1.1
Total*	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0
*Total may not equal 100 percent due to rounding.										
**The estimate may not be reliable.										
Source: Ohio Family Health Survey, 2004.										

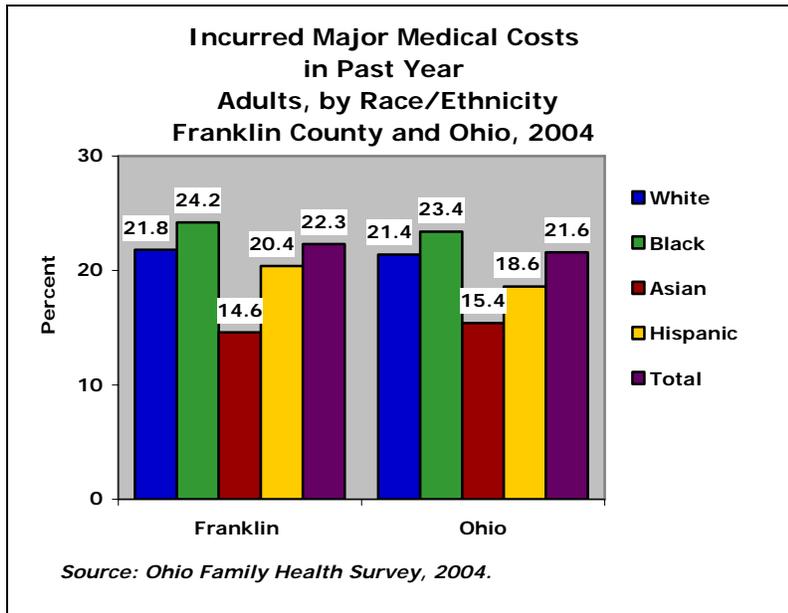
- Hispanic adults (9.7 percent) were more likely than black adults (4.6 percent) to have never had a dental visit.
- Hispanic adults (24.5 percent) were more likely than white (14.5 percent) and Asian adults (11.9 percent) to have more than three years pass since their last dental visit.
- White (56.5 percent) and Asian adults (56.3 percent) were more likely than black (36.8 percent) and Hispanic adults (36.4 percent) to have a dental visit within the previous six months.

Table 19.

Length of Time since Last Dental Visit, Children, by Race Franklin County and Ohio, 2004						
Length of Time since Last Dental Visit	Franklin County			Ohio		
	White	Black	County Total	White	Black	Ohio Total
	Percent			Percent		
6 Months or Less	68.5	51.4	63.7	63.9	51.1	61.8
6 Months - 1 Year	9.5	16.6	11.7	12.4	20.3	13.6
1 - 3 Years	4.6	16.0	7.6	6.3	12.1	7.3
More than 3 Years	1.4**	1.5**	1.4	1.5	1.5	1.5
Never	15.9	14.5	15.6	15.8	15.0	15.8
Total*	100.0	100.0	100.0	100.0	100.0	100.0
*Total may not equal 100 percent due to rounding.						
**The estimate may not be reliable.						
Source: Ohio Family Health Survey, 2004.						

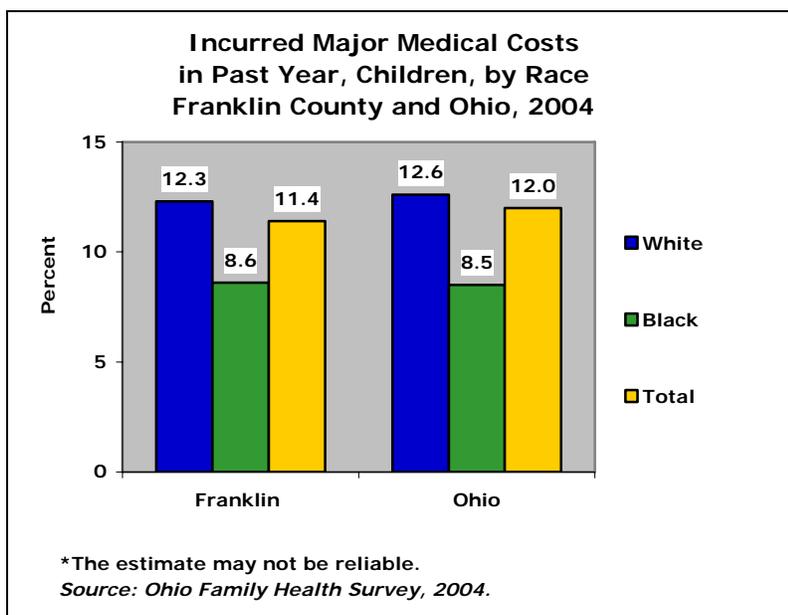
- White children (68.5 percent) were more likely than black children (51.4 percent) to have been to the dentist in the previous six months (see Table 19).
- Black children (16.0 percent) were more likely than white children (4.6 percent) to have a one-to-three-year time period pass since their last dental visit.

Figure 30.



- Between 14 and 25 percent of white, black, Asian and Hispanic adults incurred major medical costs during the past year.
- White (21.8 percent) and black adults (24.2 percent) were more likely than Asian adults (14.6 percent) to have incurred major medical costs during the past year.

Figure 31.



- About one in 10 children incurred major medical costs during the past year.
- There were no significant differences by race in medical costs incurred by children during the past year.

VII. Quality of Care

Table 20.

Quality of Hospital Care, Adults, by Race/Ethnicity Franklin County and Ohio, 2004										
Quality of Hospital Care	Franklin County					Ohio				
	White	Black	Asian	Hispanic	County Total	White	Black	Asian	Hispanic	Ohio Total
	Percent					Percent				
Below Average	8.2	5.5**	0.0	7.3**	7.3	6.5	6.5	5.3**	7.4	6.5
Average	9.8	9.4**	0.0	5.1**	9.6	8.8	13.3	8.1**	10.8	9.5
Good	25.6	34.7	30.4**	36.9	27.1	27.4	26.5	35.4	23.2	27.1
Very Good/Excellent	56.4	50.3	69.6	50.7	56.1	57.4	53.8	51.2	58.6	56.9
Total*	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0

*Total may not equal 100 percent due to rounding.
 **The estimate may not be reliable.
 Source: Ohio Family Health Survey, 2004.

- More than half of adults hospitalized rated the quality of their hospital care as very good to excellent.
- There were no racial/ethnic differences in the rating of quality of hospital care.

Table 21.

Quality of Emergency Room Care, Adults, by Race/Ethnicity Franklin County and Ohio, 2004										
Quality of Emergency Room Care	Franklin County					Ohio				
	White	Black	Asian	Hispanic	County Total	White	Black	Asian	Hispanic	Ohio Total
	Percent					Percent				
Below Average	13.5	17.6	31.6**	14.5**	14.6	11.9	13.1	16.3**	14.4	12.3
Average	17.0	16.2	20.7**	20.0**	17.0	16.0	18.2	22.4	17.0	16.4
Good	30.5	20.7	26.0**	26.9	28.3	30.9	29.0	34.3	28.1	30.5
Very Good/Excellent	39.0	45.5	21.8**	38.6	40.1	41.1	39.8	26.9	40.6	40.8
Total*	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0

*Total may not equal 100 percent due to rounding.
 Source: Ohio Family Health Survey, 2004.

- Two out of five respondents with an emergency room visit reported their quality of care as very good to excellent.
- There were no racial/ethnic differences in the rating of the quality of emergency room care.

Table 22.

Quality of Dental Care, Adults, by Race/Ethnicity Franklin County and Ohio, 2004										
Quality of Dental Care	Franklin County					Ohio				
	White	Black	Asian	Hispanic	County Total	White	Black	Asian	Hispanic	Ohio Total
	Percent					Percent				
Below Average	3.1	4.2	4.2**	2.6**	3.2	2.5	5.5	6.0	4.2	2.8
Average	4.3	9.7	5.4**	6.3**	5.2	5.2	11.8	13.7	7.6	6.0
Good	20.5	30.2	45.6	31.2	22.6	22.8	28.7	39.2	27.5	23.6
Very Good/Excellent	72.0	55.9	44.9	59.9	68.9	69.5	54.0	41.1	60.6	67.7
Total*	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0

*Total may not equal 100 percent due to rounding.
 **The estimate may not be reliable.
 Source: Ohio Family Health Survey, 2004.

- Black adults (9.7 percent) were more likely than white adults (4.3 percent) to report their quality of dental care average.
- Asian adults (45.6 percent) were more likely than white (20.5 percent) and black adults (30.2 percent) to report their quality of dental care good. Black (30.2 percent) and Hispanic adults (31.2 percent) were more likely than white adults (20.5 percent) to rate their quality of dental care good.
- White adults (72.0 percent) were more likely to rate their quality of dental care very good to excellent than black (55.9 percent), Asian (44.9 percent) or Hispanic adults (59.9 percent).

Table 23.

Rating of Overall Quality of Care, Adults, by Race/Ethnicity Franklin County and Ohio, 2004										
Quality of Hospital Care	Franklin County					Ohio				
	White	Black	Asian	Hispanic	County Total	White	Black	Asian	Hispanic	Ohio Total
	Percent					Percent				
Below Average	2.4	2.2**	3.5**	0.8**	2.5	2.2	3.8	3.7**	2.3	2.5
Average	7.2	12.3	8.5**	11.9	8.1	7.4	11.7	10.0	9.3	8.0
Good	36.5	40.2	61.3	35.0	37.7	35.8	38.6	56.7	35.1	36.2
Very Good/Excellent	54.0	45.3	26.7	52.3	51.6	54.6	45.8	29.6	53.3	53.4
Total*	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0

*Total may not equal 100 percent due to rounding.
 **The estimate may not be reliable.
 Source: Ohio Family Health Survey, 2004.

- Black adults (12.3 percent) were more likely than white adults (7.2 percent) to rate the overall quality of their health care average (see table 23).
- Asian adults (61.3 percent) were more likely than white (36.5 percent), black (40.2 percent) and Hispanic adults (35.0 percent) to rate the overall quality of their health care good.
- White adults (54.0 percent) were more likely than black (45.3 percent) and Asian adults (26.7 percent) to rate the overall quality of their health care very good to excellent. Hispanic adults (52.3 percent) were more likely than black (45.3 percent) and Asian adults (26.7 percent) to rate the overall quality of their health care very good to excellent.

VIII. Conclusions

Health insurance coverage is central to reducing barriers and promoting access to health care services. In Franklin County, black and Hispanic adults were uninsured at a higher rate than white adults. When black adults and children in Franklin County had health insurance coverage, they were more likely to be insured through Medicaid than white adults and children. In addition, black and Hispanic adults were more likely than white and Asian adults to be living in poverty and to have left high school prior to graduation, creating additional financial barriers to care.

Poor to fair health status was more common among black and Hispanic adults in Franklin County, when compared to white adults. Black and white adults were more likely than Hispanic adults to have been diagnosed with diabetes, have heart or circulatory disease and were more likely to have special health care needs. Black adults were more likely than other racial and ethnic groups in Franklin County to have been diagnosed with hypertension and also need assistance with day-to-day activities due to their health problems. Black children in Franklin County were more likely than white children to have been diagnosed with asthma.

Unmet health needs and access to care pose additional obstacles for black and Hispanic adults in Franklin County. Black adults were more likely than white adults to report an unmet need for prescription medication. Both Hispanic and black adults reported greater unmet needs for dental care, compared to white and Asian adults. Black adults were more likely than white adults to utilize the emergency room as their usual source of health care.

Different patterns also emerge among racial and ethnic groups in Franklin County in the area of health care utilization. Black adults were more likely than any other group to have at least one hospitalization and one emergency room visit during the previous 12 months. Black children in Franklin County were more likely than white children to have at least one emergency room visit in the previous 12 months and to have had a one-to-three-year time period elapse since their last dental visit. Hispanic adults were more likely than any other racial or ethnic group to go without a dental visit for more than three years. Asian adults in Franklin County were more likely than white adults to have more than two years pass without a health care visit, while Hispanic adults were more likely than white and black adults to have gone more than five years without a checkup.

Improving the health and well-being of minority populations in Franklin County will require closing the gaps that currently create barriers to care. Poverty, education and lack of health insurance all contribute to disparities in health care. Other areas such as transportation, health risk behaviors, language, cultural beliefs and living conditions, to name a few, all need to be examined in the continued effort to improve access to quality health care for minorities.

IX. Limitations of Data

Like any survey, the Ohio Family Health Survey (OFHS) has limitations. Despite the large sample size, sampling error will exist because the characteristics of individuals selected for interviews may differ from the true distribution of those characteristics in the total population. The potential sampling error can be estimated statistically and described with confidence intervals.

Other limitations are more difficult to measure or control. With any survey, individuals choose whether to participate in the survey as a whole and differ in their accuracy or willingness to provide information on an individual question. These choices may create unknown biases in the responses.

Telephone surveys are an established way to obtain interviews from large numbers of respondents at relatively low cost. However, that survey technique assumes phone coverage is universal in the population being selected. In recent years, decreases in land-line phone coverage have occurred as many persons have switched to mobile telephones. This may exclude some people from the sampling universe and could lead the survey to under-represent low-income groups and minorities. Because research has shown that some individuals with interruptions in phone coverage have characteristics similar to persons without phones, additional survey weights have been assigned to some respondents who reported interruptions in telephone service so they could represent those without phones. However, the respondents with interrupted service may differ from persons without telephones in ways that are not captured by the survey.

The users of the OFHS data should be mindful that measurement error, selective participation and other sources of potential bias cannot be completely controlled in any survey.



For additional information about this report, contact
Mary B. Lynn at: Mary.Lynn@odh.ohio.gov, 614-728-6148
or:

Ohio Department of Health
Division of Family and Community Health Services
Bureau of Health Services Information and Operational Support
246 N. High St.
Columbus, OH 43215
Phone: 614-466-1208
Fax: 614-564-2419
or:
BHSIOS@odh.ohio.gov