



Chart Book #9

Summit 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

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Chart Book #9

Summit County Profile Minority Health 2004

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May 2006

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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 categories of white, non-Hispanic and black, non-Hispanic were utilized. Whenever possible, all of the racial/ethnic groups are utilized in analysis; however, due to small numbers of respondents in Summit County, Hispanics; Asian, non-Hispanics; and Native American, non-Hispanics were excluded from this report as separate groups. 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 Summit County. Ohio data are provided for reference purposes only. No statistical comparisons were made between Summit 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 medical care, mental health or educational services than is usual for most children of the same age; (3) the use of 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.

Summit County Profile Minority Health, 2004

Key Findings

Black adults in Summit County were more likely to be uninsured than white adults. More than 20 percent of black adults lacked health insurance, compared to 11.6 percent of white adults.

Black adults and children in Summit County were more likely than white adults and children to have Medicaid health care coverage. More than 23 percent of black adults and 49 percent of black children had health care coverage through Medicaid, compared to just over 7 percent of white adults and nearly 16 percent of white children.

When insurance coverage was available, white adults in Summit County were more likely than black adults to lack coverage for vision and dental care. Approximately 40 percent of white adults in Summit County lacked coverage for dental care, compared to about 19 percent of black adults. Forty-three percent of white adults lacked coverage for vision care, compared to 19.7 percent of black adults.

Poor/fair health status was more likely to be reported by black adults in Summit County than white adults. More than 23 percent of black adults reported poor/fair health, compared to just over 16 percent of white adults.

White children in Summit County were more likely than black children to have their health status reported as excellent. Fifty-eight percent of white children had their health status reported as excellent, compared to 48.3 percent of black children.

Assistance with day-to-day activities was more likely to be needed by black adults in Summit County than white adults. Nearly 11 percent of black adults reported they needed assistance with day-to-day activities, compared to 6.5 percent of white adults.

Black children in Summit County were more likely than white children to have been told by a health care professional they had asthma. More than 17 percent of black children had been told they had asthma, compared to 9.4 percent of white children.

The emergency room was more likely to be utilized as a usual source of care by black adults in Summit County, compared to white adults. More than 9 percent of black adults used the emergency room as their usual source of health care, compared to 2.4 percent of white adults.

Access to a health care specialist was more likely to be reported as a big problem for black adults in Summit County, compared to white adults. More than 16 percent of black adults who needed to see a specialist reported that access was a big problem, compared to 6.7 percent of white adults.

Black adults in Summit County were more likely than white adults to report an unmet dental need. Nearly 21 percent of black adults reported an unmet dental need, compared to 11.7 percent of white adults.

Black adults in Summit County were more likely than white adults to go without a dental visit for more than three years or to have never had a dental visit as an adult. Nearly 25 percent of black adults were without a dental visit for more than three years (or never had a dental visit); this compares to 16.7 percent of white adults.

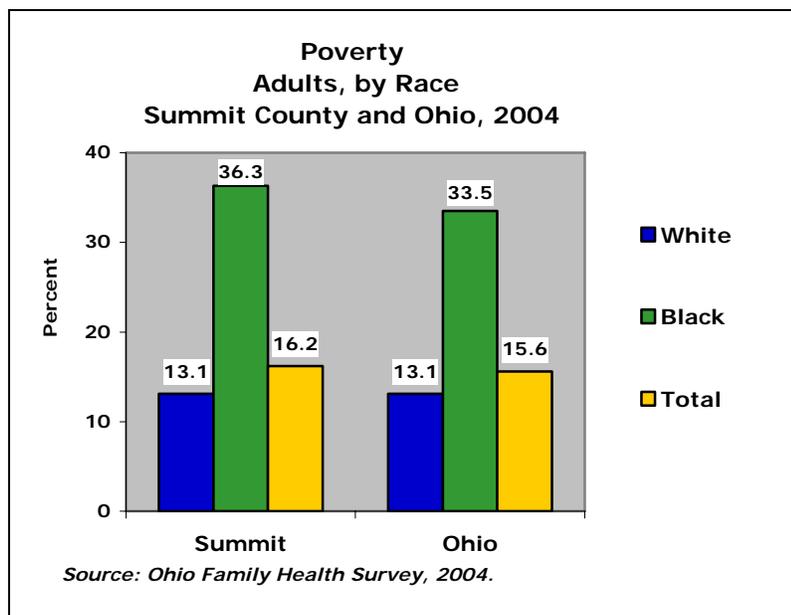
Black children in Summit County were more likely than white children to have a one-to-three-year time period elapse since their last dental visit. Nearly 13 percent of black children were without a dental visit for the one-to-three-year time period after their previous dental visit; this compares to 5.3 percent of white children.

Black adults in Summit County were more likely than white adults to have at least one overnight hospital stay. Eighteen percent of black adults had at least one overnight hospital stay; this compares to 12 percent of white adults.

Black adults in Summit County were more likely than white adults to have at least one emergency room visit. Nearly 33 percent of black adults had at least one emergency room visit; this compares to 20.5 percent of white adults.

I. Demographics

Figure 1.



- Blacks in Summit County were more likely to be living in poverty than whites.
- More than one out of three black adults lived in poverty, compared to just over one out of 10 white adults.

Table 1.

Income	Summit County			Ohio		
	White	Black	County Total	White	Black	Ohio Total
	Percent			Percent		
Poverty	13.1	36.3	16.2	13.1	33.5	15.6
Near Poverty	9.4	14.3	10.2	9.7	12.0	10.1
Low Income	11.1	12.3	11.2	10.8	10.8	10.8
Middle/High Income	66.4	37.1	62.4	66.4	43.7	63.5
Total*	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.

- Black adults (50.6 percent) were more likely than white adults (22.5 percent) to be living in poverty or near poverty conditions.
- White adults were more likely than black adults to have middle to high incomes. Two-thirds of white adults had middle to high incomes, while less than half of black adults had such incomes.

Table 2.

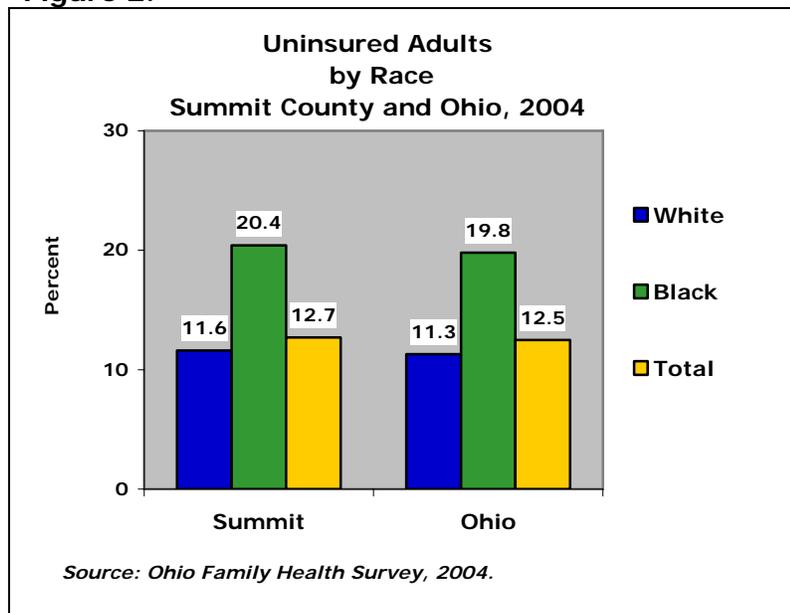
Educational Attainment, Adults, by Race Summit County and Ohio, 2004						
Educational Attainment	Summit County			Ohio		
	White	Black	County Total	White	Black	Ohio Total
	Percent			Percent		
Less than High School	8.0	13.4	8.9	10.4	16.9	11.4
High School Graduate	43.2	44.4	43.1	46.1	44.5	45.5
Some College	18.5	26.6	19.3	17.1	21.6	17.4
Associates Degree	8.4	5.9	7.9	7.5	7.0	7.5
College Degree (4 Year)	12.7	5.2	11.9	11.8	6.3	11.3
Advanced College Degree	9.2	4.5	8.9	7.1	3.6	7.0
Total*	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.

- Black adults (13.4 percent) were more likely than white adults (8.0 percent) to leave high school prior to graduation.
- Black adults (26.6 percent) were more likely than white adults (18.5 percent) to leave college prior to graduation.
- White adults (30.3 percent) were more likely than black adults (15.6 percent) to graduate with any type of college degree.

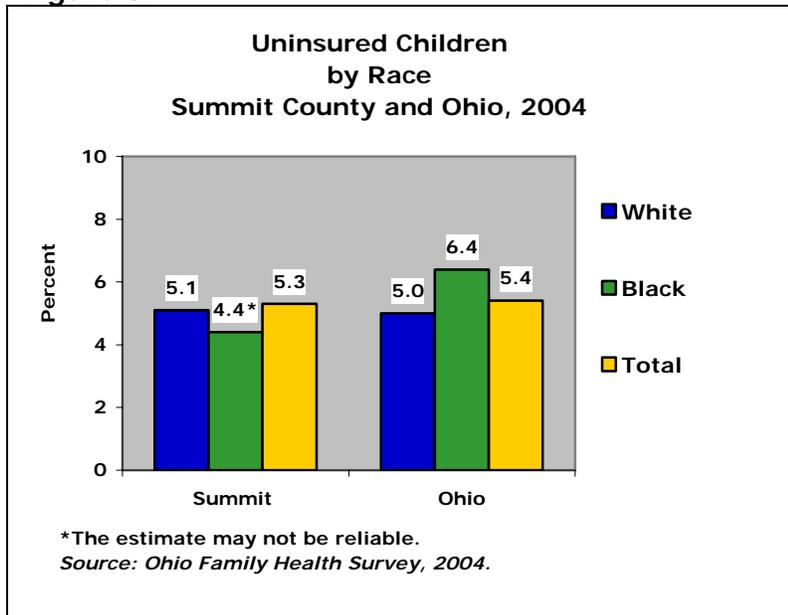
II. Health Insurance

Figure 2.



- Black adults (20.4 percent) were more likely to be uninsured than white adults (11.6 percent).

Figure 3.



- There were no significant racial differences in the percent of uninsured children.
- Less than 6 percent of children in Summit County were without health insurance.

Table 3.

Insurance Type	Summit County			Ohio		
	White	Black	County Total	White	Black	Ohio Total
	Percent			Percent		
Job-based	67.4	48.2	64.7	64.5	48.9	62.5
Medicaid	7.1	23.5	9.4	8.0	20.9	9.5
Medicare/Other	14.0	7.8	13.2	16.2	10.4	15.5
Uninsured	11.6	20.4	12.7	11.3	19.8	12.5
Total*	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 adults (67.4 percent) were more likely to have job-based health care coverage than black adults (48.2 percent).
- Black adults (23.5 percent) were more likely to have Medicaid coverage for health care than white adults (7.1 percent).
- Black adults (20.4 percent) were more likely to be uninsured than white adults (11.6 percent).

Table 4.

Insurance Type, Children, by Race Summit County and Ohio, 2004						
Insurance Type	Summit County			Ohio		
	White	Black	County Total	White	Black	Ohio Total
	Percent			Percent		
Job-based	73.5	36.8	65.4	70.6	35.6	63.8
Medicaid	15.7	49.3	22.2	18.5	52.1	24.0
Other Insurance	5.7	9.5**	7.1	5.9	5.9	6.9
Uninsured	5.1	4.4**	5.3	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.						
<i>Source: Ohio Family Health Survey, 2004.</i>						

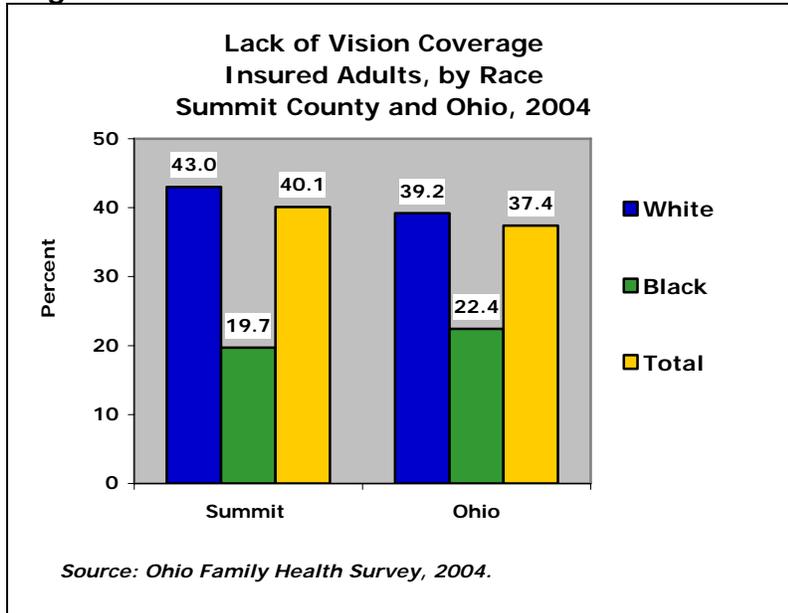
- White children (73.5 percent) were more likely to have job-based health care coverage than black children (36.8 percent).
- Black children (49.3 percent) were more likely to have Medicaid coverage for health care than white children (15.7 percent).

Table 5.

Mental Health Coverage of Insured Adults, by Race Summit County and Ohio, 2004						
Mental Health Coverage	Summit County			Ohio		
	White	Black	County Total	White	Black	Ohio Total
	Percent			Percent		
Covered	67.5	70.2	67.2	64.4	69.0	64.6
Not Covered	10.8	11.1	11.0	12.3	12.0	12.4
Unknown	21.7	18.7	21.8	23.3	19.0	23.0
Total*	100.0	100.0	100.0	100.0	100.0	100.0
*Total may not equal 100 percent due to rounding.						
<i>Source: Ohio Family Health Survey, 2004.</i>						

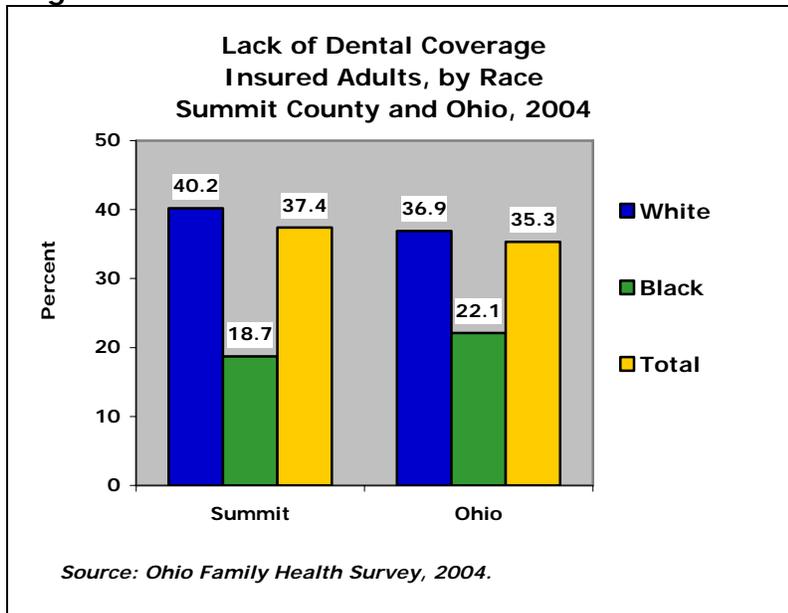
- Among adults with health insurance coverage, there were no significant differences in the percent of adults with mental health coverage.
- More than two-thirds of adults with insurance indicated they had coverage for mental health care.

Figure 4.



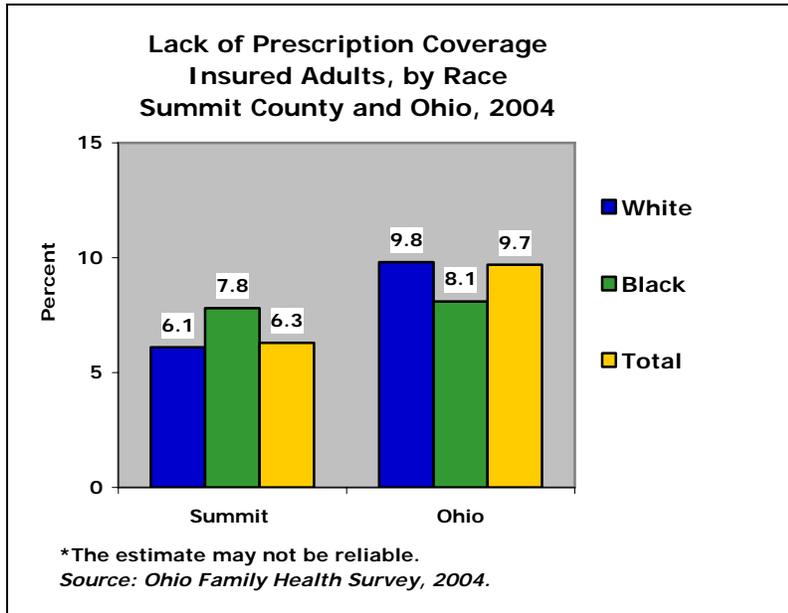
- White adults (43 percent) with health insurance coverage were more likely than black adults (19.7 percent) to lack vision coverage.

Figure 5.



- White adults (40.2 percent) with health insurance coverage were more likely than black adults (18.7 percent) to lack dental coverage.

Figure 6.



- Among adults with health insurance coverage, there were no significant differences in the percent of those with prescription drug coverage.
- Less than 7 percent of adults in Summit County with insurance indicated they lacked coverage for prescription drugs.

Table 6.

Doctor Rating	Summit County			Ohio		
	White	Black	County Total	White	Black	Ohio Total
	Percent			Percent		
Below Average	3.7	4.1	3.8	4.8	6.0	5.0
Average	8.9	13.4	9.3	10.3	13.3	10.7
Good	28.7	29.6	29.3	28.0	26.8	28.1
Very Good/Excellent	58.7	52.9	57.6	56.9	53.9	56.2
Total*	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 by race in the rating of choice of doctors.
- More than half of white and black adults with health insurance rated their choice of doctors very good to excellent.

Table 7.

Rating of Access to Emergency Room Care, Insured Adults, by Race Summit County and Ohio, 2004						
Emergency Medical Care Rating	Summit County			Ohio		
	White	Black	County Total	White	Black	Ohio Total
	Percent			Percent		
Below Average	2.5	5.5**	3.0	3.4	7.5	3.9
Average	6.3	8.7	6.6	6.8	9.3	7.1
Good	22.8	21.8	22.8	22.4	25.4	22.8
Very Good/Excellent	62.8	58.7	62.0	62.1	53.6	60.8
Unknown	5.6	5.3**	5.6	5.4	4.3	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.						
<i>Source: Ohio Family Health Survey, 2004.</i>						

- Among adults with health insurance coverage, there were no significant differences by race in the rating of access to emergency room care.
- More than half of white and black adults with health insurance coverage rated their access to emergency room care very good to excellent.

Table 8.

Rating of Amount Paid for Medical Services, Insured Adults, by Race Summit County and Ohio, 2004						
Payment Rating	Summit County			Ohio		
	White	Black	County Total	White	Black	Ohio Total
	Percent			Percent		
Below Average	14.3	13.6	14.0	13.4	17.0	13.8
Average	20.7	21.8	21.2	20.8	16.4	20.4
Good	32.4	20.2	30.9	32.1	25.0	31.3
Very Good/Excellent	32.5	44.5	33.9	33.7	41.7	34.4
Total*	100.0	100.0	100.0	100.0	100.0	100.0
*Total may not equal 100 percent due to rounding.						
<i>Source: Ohio Family Health Survey, 2004.</i>						

- Insured white adults (32.4 percent) were more likely than insured black adults (20.2 percent) to rate the amount paid for medical services good.
- Insured black adults (44.5 percent) were more likely than insured white adults (32.5 percent) to rate the amount paid for medical services very good to excellent.

Table 9.

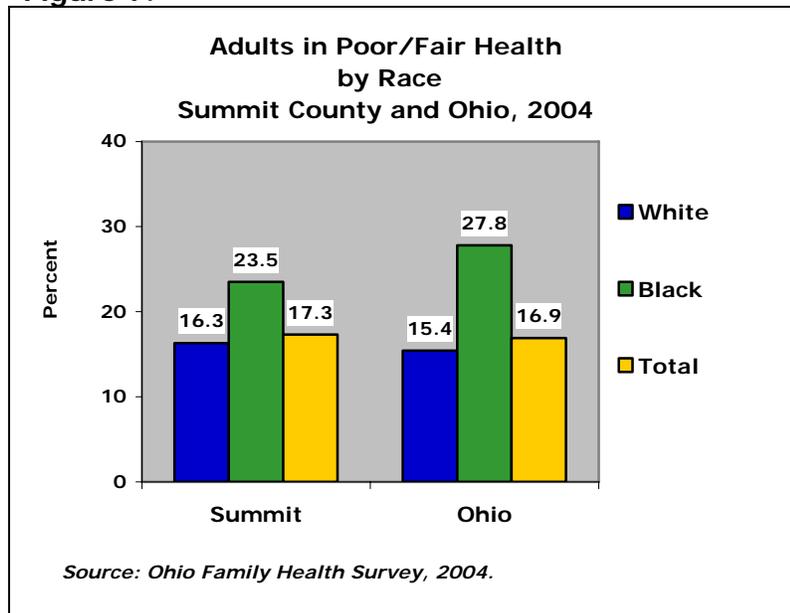
Rating of Benefits Covered, Insured Adults, by Race Summit County and Ohio, 2004						
Benefits Rating	Summit County			Ohio		
	White	Black	County Total	White	Black	Ohio Total
	Percent			Percent		
Below Average	8.7	8.6	8.6	7.5	10.4	7.9
Average	14.6	17.7	15.0	15.6	14.9	15.6
Good	39.9	28.5	38.9	38.2	32.4	37.7
Very Good/Excellent	36.8	45.2	37.5	38.6	42.3	38.8
Total*	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.

- Insured white adults (39.9 percent) were more likely than insured black adults (28.5 percent) to rate benefits covered under their health plan good.
- Insured black adults (45.2 percent) were more likely than insured white adults (36.8 percent) to rate benefits covered under their health plan very good to excellent.

III. Health Status

Figure 7.



- Black adults (23.5 percent) were more likely than white adults (16.3 percent) to report they were in poor/fair health.

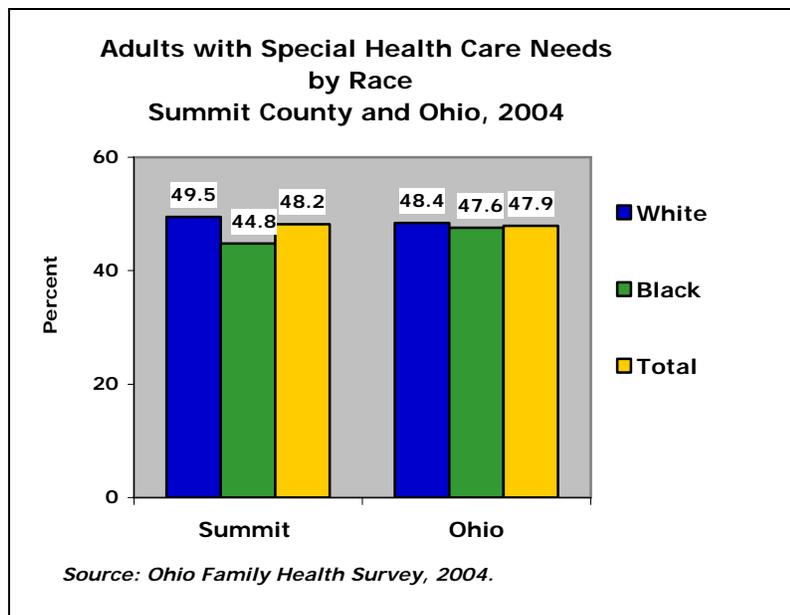
Table 10.

Health Status, Children, by Race Summit County and Ohio, 2004						
Health Status	Summit County			Ohio		
	White	Black	County Total	White	Black	Ohio Total
	Percent			Percent		
Excellent	58.0	48.3	55.7	59.7	46.5	57.5
Very Good	28.7	23.7	28.4	27.2	28.0	27.3
Good	10.7	22.1	12.5	10.4	18.0	11.7
Fair/Poor	2.7	6.0**	3.4	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.

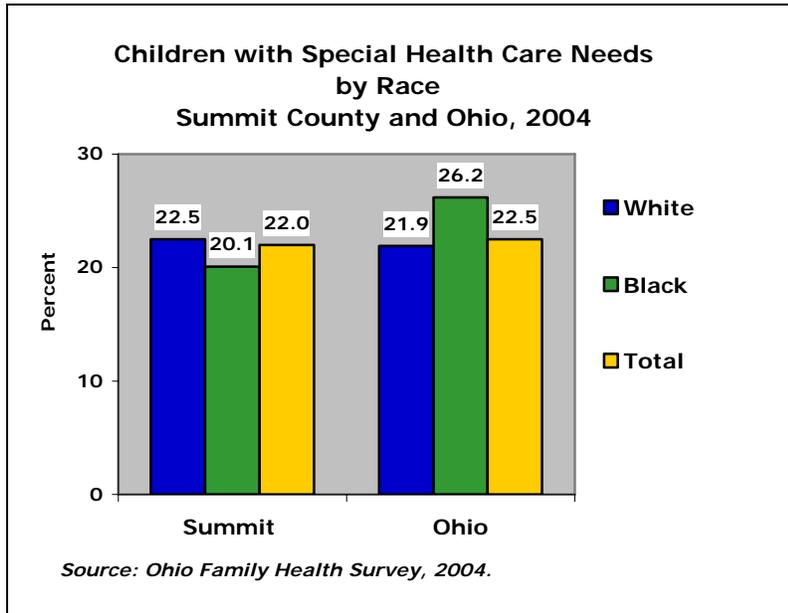
- White children (58.0 percent) were more likely than black children (48.3 percent) to have their health status reported as excellent.
- Black children (22.1 percent) were more likely than white children (10.7 percent) to have their health status reported as good.

Figure 8.



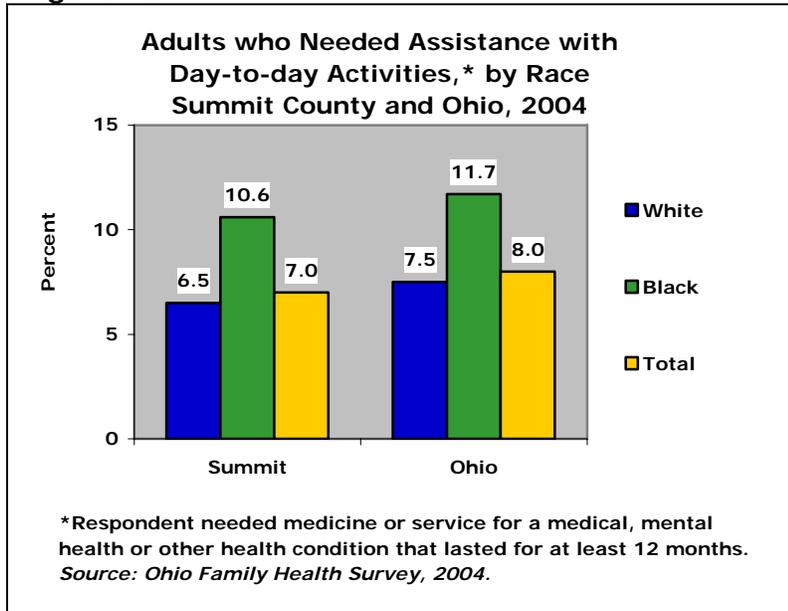
- Nearly half of all adults reported they had special health care needs.
- There were no significant differences by race for those adults reporting they had special health care needs.

Figure 9.



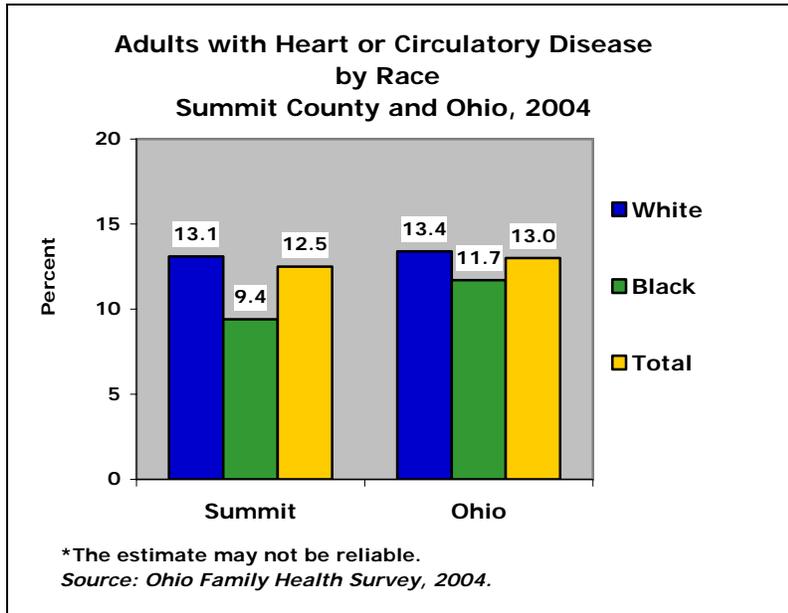
- More than one out of five children had special health care needs.
- There were no significant differences by race for children with special health care needs.

Figure 10.



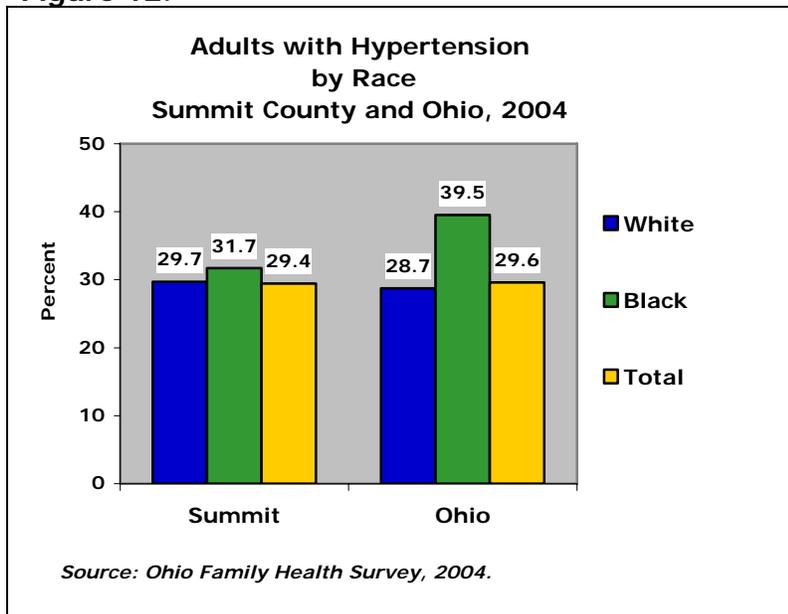
- Black adults (10.6 percent) were more likely than white adults (6.5 percent) to report they needed assistance with their day-to-day activities.

Figure 11.



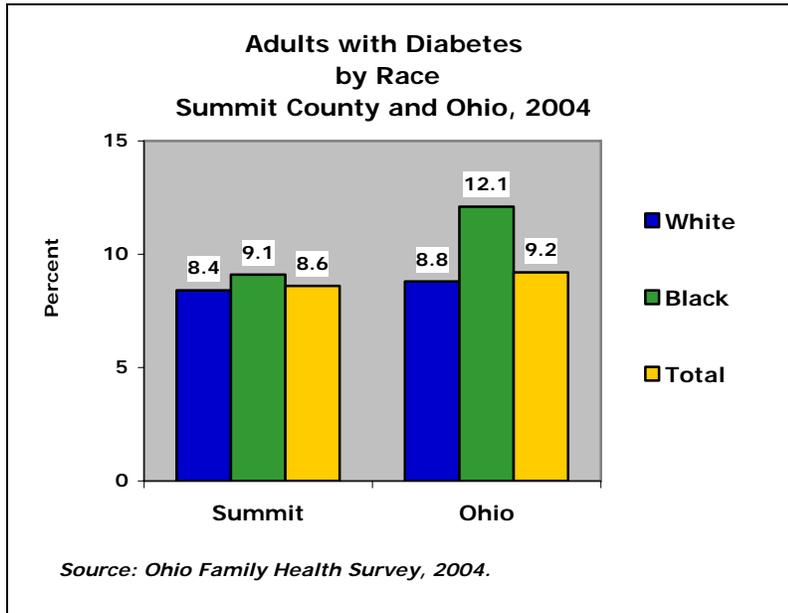
- More than one out of 10 adults reported they had been informed they had heart or circulatory disease.
- There were no significant differences by race in those adults reporting they had been informed they had heart or circulatory disease.

Figure 12.



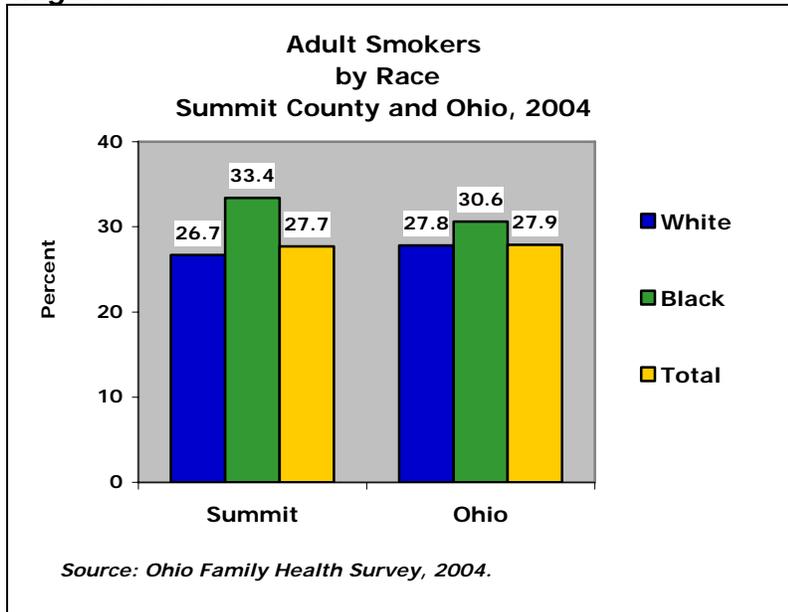
- Three out of 10 adults had been told by a health care professional they had hypertension.
- There were no significant differences by race in those adults reporting they had been informed they had hypertension.

Figure 13.



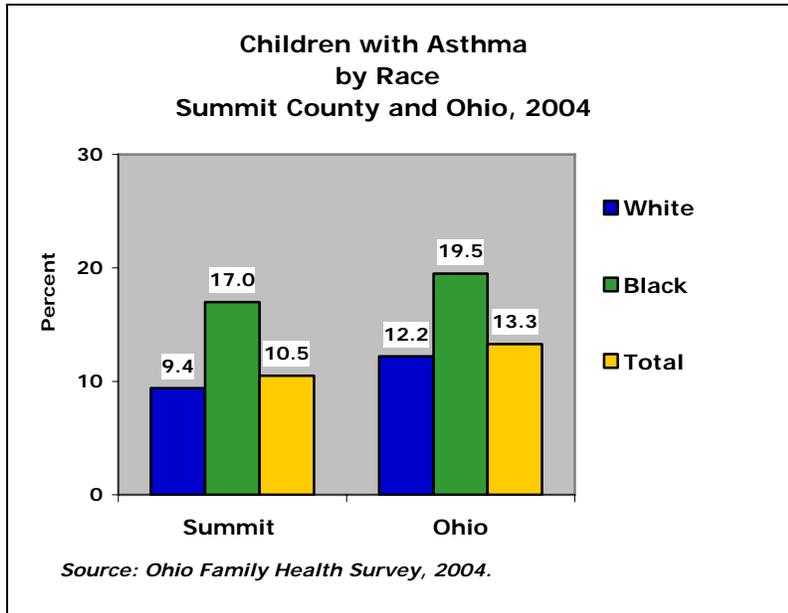
- Nearly one out of 10 adults had been told by a health care professional they had diabetes.
- There were no significant differences by race in those adults reporting they had been informed they had diabetes.

Figure 14.



- More than one out of four adults reported they were current smokers.
- There were no significant differences by race in those adults reporting they were current smokers.

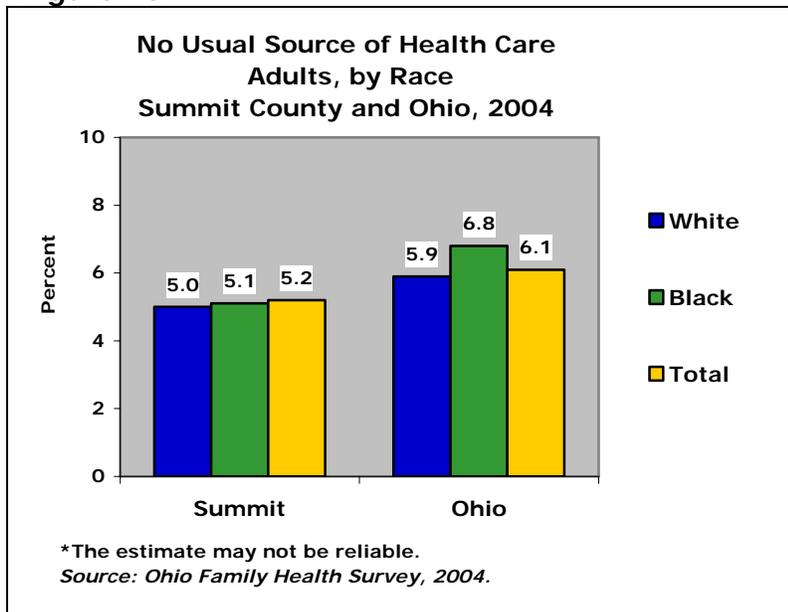
Figure 15.



- Black children (17.0 percent) were more likely than white children (9.4 percent) to have been told by a health care professional they had asthma.

IV. Access to Care

Figure 16.



- A similar percentage of white (5.0 percent) and black adults (5.1 percent) lacked a usual source of health care.

Table 11.

Usual Source of Health Care, Adults, by Race Summit County and Ohio, 2004						
Usual Source of Health Care	Summit County			Ohio		
	White	Black	County Total	White	Black	Ohio Total
	Percent			Percent		
Doctor's Office or HMO	85.2	58.9	81.7	79.0	52.4	75.7
Clinic or Health Center	8.8	22.6	10.7	12.6	26.4	14.4
Hospital Emergency Room	2.4	9.3	3.2	3.9	9.7	4.6
Hospital Outpatient Dept.	2.2	7.1	2.8	3.2	10.0	4.0
Other Sources	1.5	2.1**	1.7	1.3	1.4	1.3
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.

- White adults (85.2 percent) were more likely than black adults (58.9 percent) to utilize a doctor's office or HMO as their usual source of health care.
- Black adults (22.6 percent) were more likely than white adults (8.8 percent) to utilize a clinic or health center as their usual source of health care.
- Black adults (9.3 percent) were more likely than white adults (2.4 percent) to utilize a hospital emergency room as their usual source of health care.
- Black adults (7.1 percent) were more likely than white adults (2.2 percent) to utilize a hospital outpatient department as their usual source of health care.

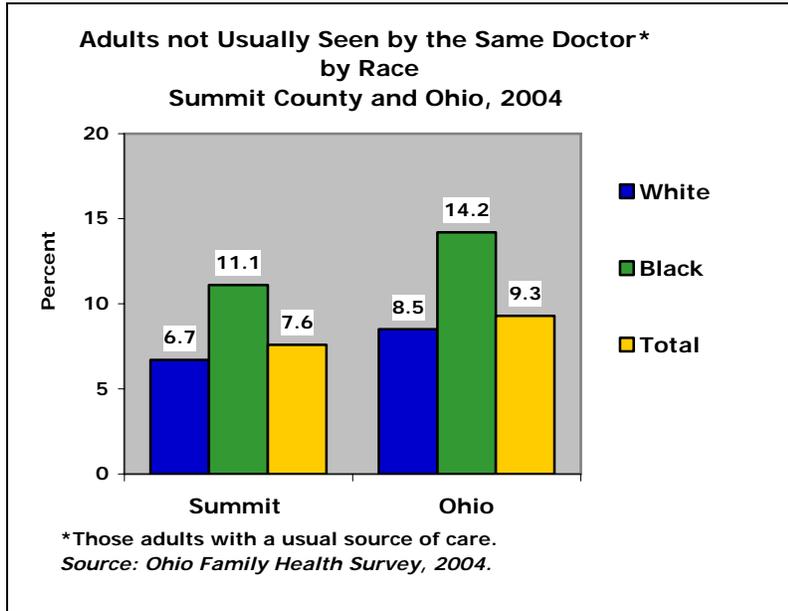
Table 12.

Usual Source of Health Care, Children, by Race Summit County and Ohio, 2004						
Usual Source of Health Care	Summit County			Ohio		
	White	Black	County Total	White	Black	Ohio Total
	Percent			Percent		
Doctor's Office or HMO	92.7	72.4	88.6	86.1	56.1	81.0
Clinic or Health Center	4.6	18.4	7.6	10.5	33.5	14.4
Hospital Emergency Room	0.9**	2.4**	1.2**	1.1	2.5	1.4
Hospital Outpatient Dept.	0.6**	4.5**	1.3	1.6	7.0	2.5
Other Sources	1.1**	2.3**	1.3**	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.

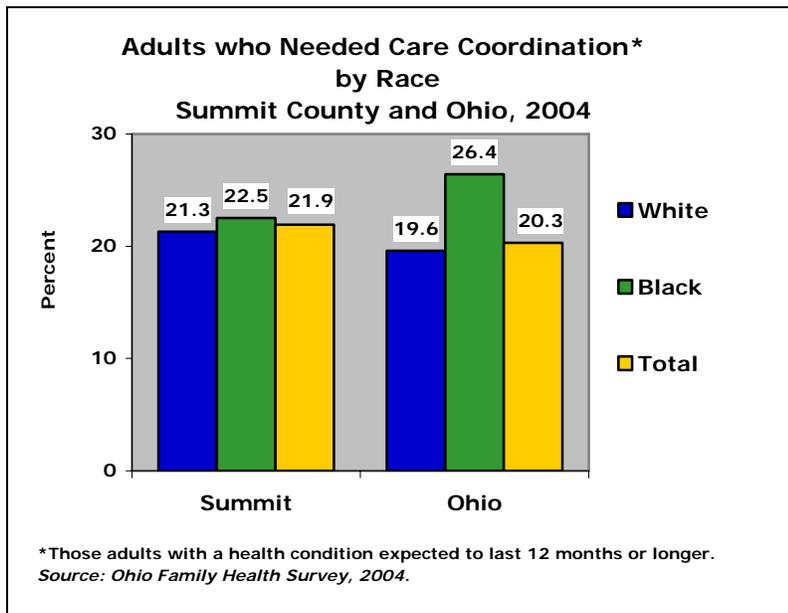
- White children (92.7 percent) were more likely than black children (72.4 percent) to utilize a doctor's office as their usual source of health care.
- Black children (18.4 percent) were more likely than white children (4.6 percent) to utilize a clinic or health center as their usual source of health care (see table 12).

Figure 17.



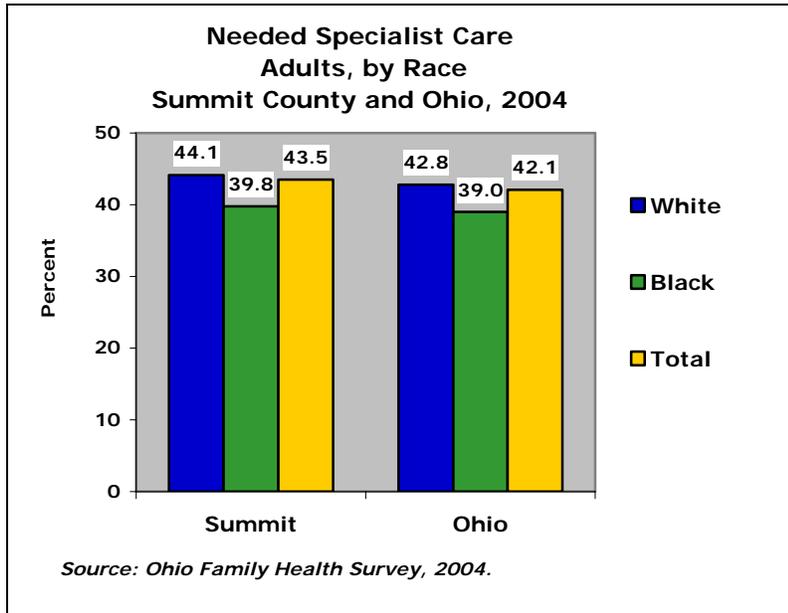
- A similar percentage of white (6.7 percent) and black adults (11.1 percent) were not usually seen by the same doctor when seeking health care.

Figure 18.



- A similar number of white (21.3 percent) and black adults (22.5 percent), with a health condition expected to last 12 months or longer, reported they needed health care coordination.

Figure 19.



- A similar percentage of white (44.1 percent) and black adults (39.8 percent) needed health care from a specialist.

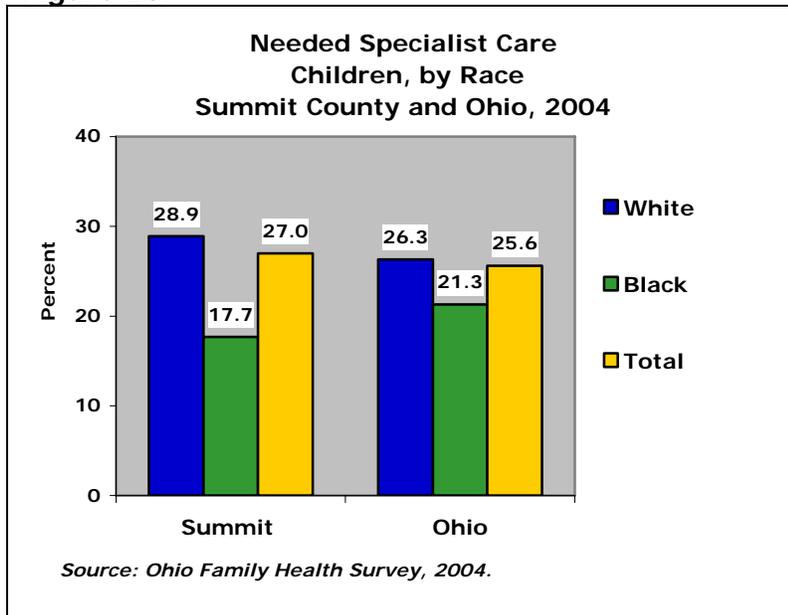
Table 13.

Problems Seeing a Specialist	Summit County			Ohio		
	White	Black	County Total	White	Black	Ohio Total
	Percent			Percent		
Big Problem	6.7	16.5	7.9	7.8	13.2	8.4
Small Problem	8.7	7.1	8.6	9.6	9.5	9.7
Not a Problem	84.6	76.4	83.5	82.6	77.2	81.8
Total**	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.

- Black adults (16.5 percent) were more likely than white adults (6.7 percent) to report that access to a specialist was a big problem.
- More than three out of four white and black adults reported that access to a specialist was not a problem.

Figure 20.



- White children (28.9 percent) were more likely to need specialist care compared to black children (17.7 percent).

Table 14.

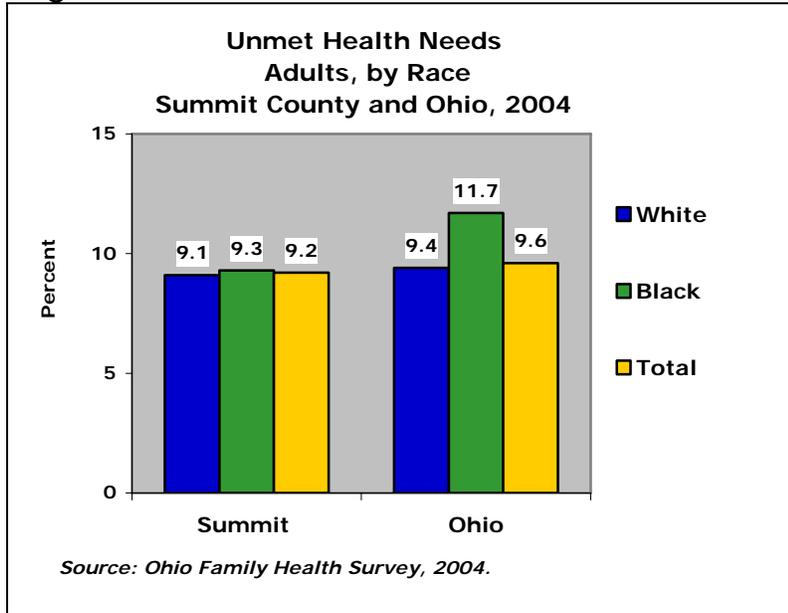
Ability to Receive Care in the Past 3 Years	Summit County			Ohio		
	White	Black	County Total	White	Black	Ohio Total
	Percent			Percent		
Easier	7.3	12.6	7.9	8.0	12.7	11.8
Harder	25.6	27.6	25.7	21.9	26.0	31.4
Same	67.1	59.8	66.3	70.1	61.4	56.9
Total*	100.0	100.0	100.0	100.0	100.0	100.0

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

- Black adults (12.6 percent) were more likely than white adults (7.3 percent) to report their ability to receive health care had become easier during the past three years.
- Just over one out of four white and black adults reported their ability to receive health care had become harder in the past three years.

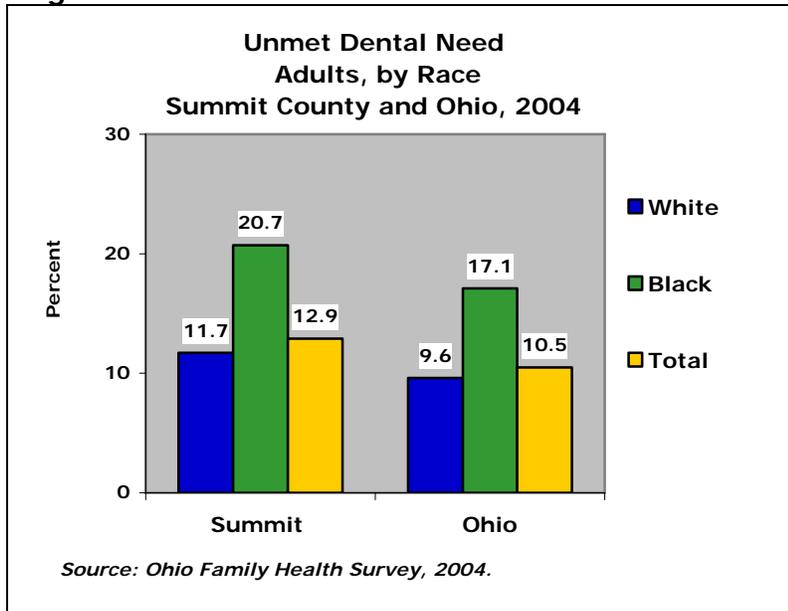
V. Unmet Health Care Needs

Figure 21.



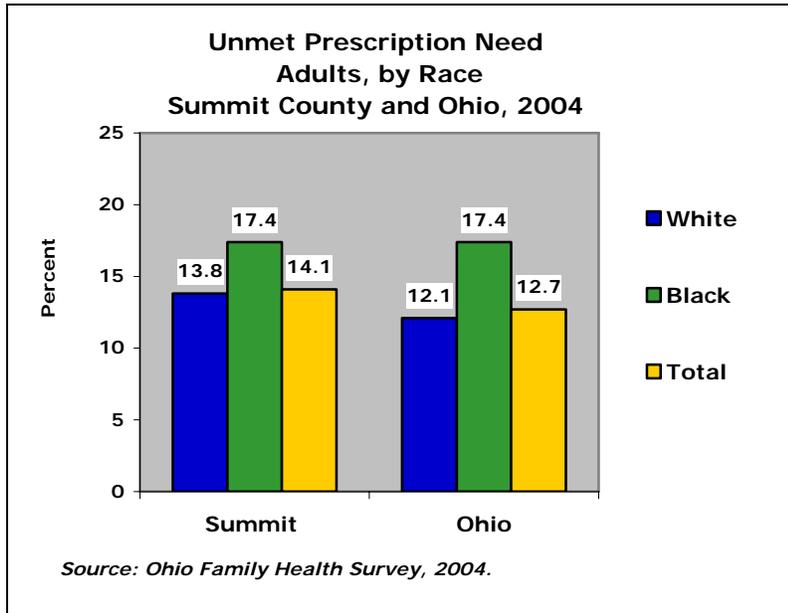
- A similar percentage of white (9.1 percent) and black adults (9.3 percent) reported they had an unmet health need.

Figure 22.



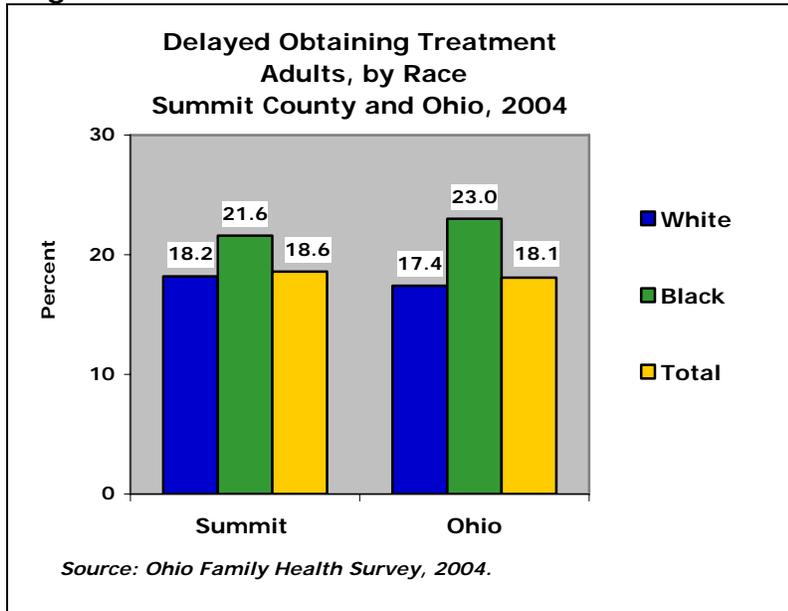
- Black adults (20.7 percent) were more likely than white adults (11.7 percent) to report an unmet dental need.

Figure 23.



- A similar percentage of white (13.8 percent) and black adults (17.4 percent) reported they had an unmet need for prescription drugs.

Figure 24.



- A similar percentage of white (18.2 percent) and black adults (21.6 percent) reported they had delayed obtaining medical treatment.

VI. Health Care Utilization

Table 15.

Most Recent Health Care Visit, Adults, by Race Summit County and Ohio, 2004						
Most Recent Health Care Visit	Summit County			Ohio		
	White	Black	County Total	White	Black	Ohio Total
	Percent			Percent		
6 Months or Less	72.0	75.4	72.4	71.2	73.6	71.1
6 Months - 1 Year	12.4	9.1	12.0	12.7	10.9	12.5
1 - 2 Years	7.4	8.0	7.3	8.0	7.5	8.0
More than 2 Years	8.2	7.5	8.4	8.1	7.9	8.3
Total*	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.						

- Approximately three out of four black and white adults had a health care visit within the past six months.
- A similar number of black adults (7.5 percent) and white adults (8.2 percent) had more than two years pass since their most recent health care visit.

Table 16.

Most Recent Health Care Visit, Children, by Race Summit County and Ohio, 2004						
Most Recent Doctor Visit	Summit County			Ohio		
	White	Black	County Total	White	Black	Ohio Total
	Percent			Percent		
6 Months or Less	79.6	73.7	78.1	75.5	70.6	74.9
6 Months - 1 Year	14.0	18.2	14.9	16.5	21.7	17.2
1 - 2 Years	4.9	6.8**	5.5	5.6	6.0	5.7
More than 2 Years	1.5**	1.3**	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.						

- A similar number of black (73.7 percent) and white children (79.6 percent) had a health care visit within the past six months.

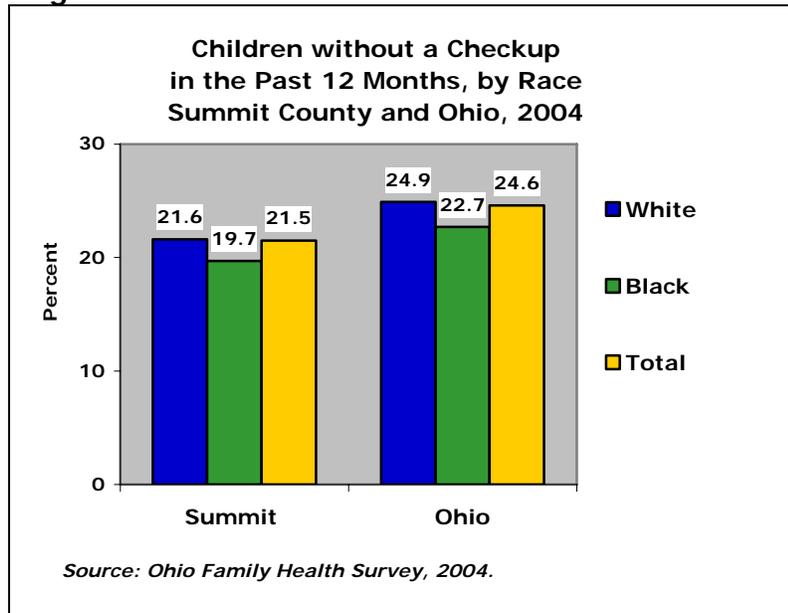
Table 17.

Most Recent Checkup, Adults, by Race Summit County and Ohio, 2004						
Most Recent Checkup	Summit County			Ohio		
	White	Black	County Total	White	Black	Ohio Total
	Percent			Percent		
Within the Past Year	71.9	75.6	72.1	70.0	76.3	70.5
1 - 2 Years	11.6	9.6	11.4	12.5	11.0	12.4
2 - 5 Years	8.2	6.2	8.1	8.8	8.1	8.8
More than 5 Years (or never)	8.2	8.6**	8.5	8.7	4.7	8.4
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.

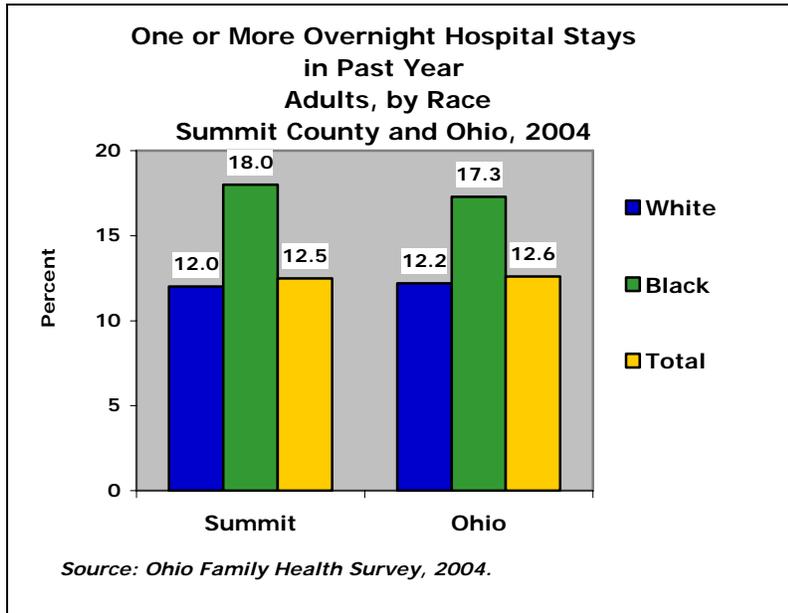
- More than seven out of 10 black and white adults had been seen for a checkup within the past year.

Figure 25.



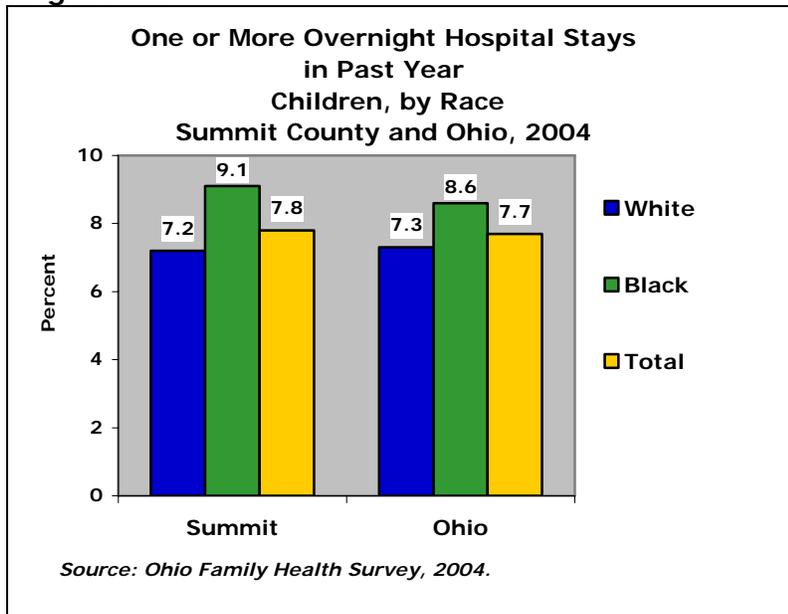
- Just over 20 percent of children did not have a checkup during the past 12 months.
- There were no significant differences by race in the percent of children who were not seen for a checkup during the past 12 months.

Figure 26.



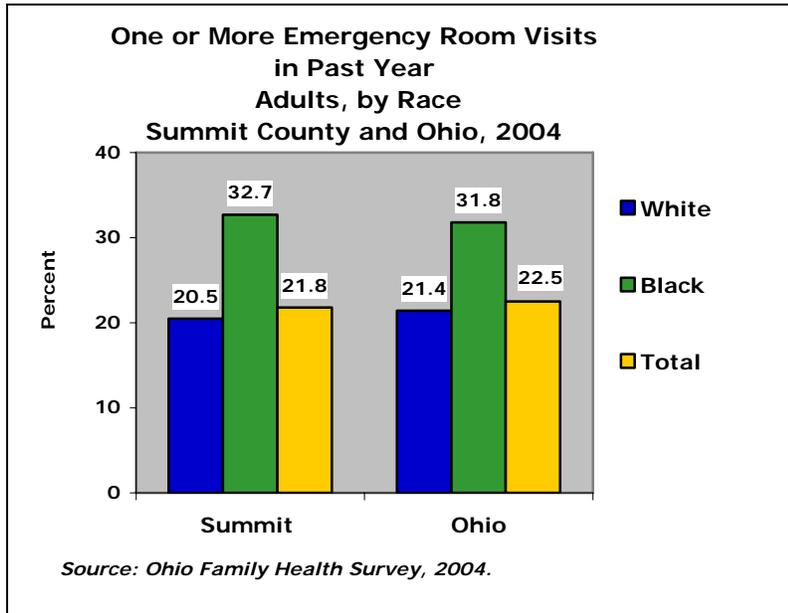
- Black adults (18.0 percent) were more likely than white adults (12.0 percent) to have one or more overnight hospital stays in the past year.

Figure 27.



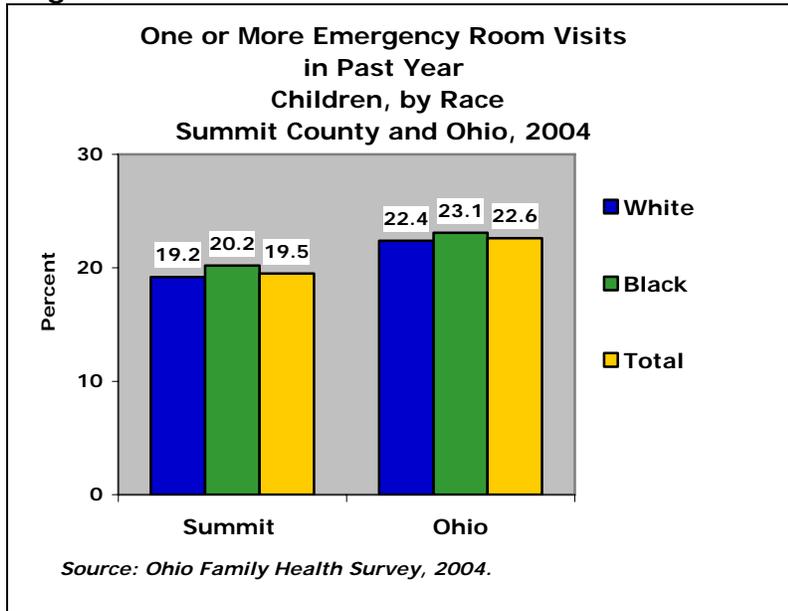
- Between 7 and 9 percent of white and black children were hospitalized in the past year.
- There were no significant differences by race in the percent of children who were hospitalized in the past 12 months.

Figure 28.



- Nearly one out of three black adults had an emergency room visit in the past year, compared to one out of five white adults.
- Black adults were more likely than white adults to have an emergency room visit.

Figure 29.



- A similar number of black (20.2 percent) and white children (19.2 percent) had an emergency room visit in the past year.

Table 18.

Length of Time since Last Dental Visit, Adults, by Race Summit County and Ohio, 2004						
Length of Time since Last Dental Visit	Summit County			Ohio		
	White	Black	County Total	White	Black	Ohio Total
	Percent			Percent		
6 Months or Less	53.1	33.9	50.6	51.4	36.5	49.6
6 Months - 1 Year	14.6	20.7	15.3	14.0	17.8	14.5
1 - 3 Years	15.6	20.6	16.2	16.0	22.4	16.7
More than 3 Years (or never)	16.7	24.9	17.9	18.6	23.3	19.2
Total*	100.0	100.0	100.0	100.0	100.0	100.0
*Total may not equal 100 percent due to rounding.						
<i>Source: Ohio Family Health Survey, 2004.</i>						

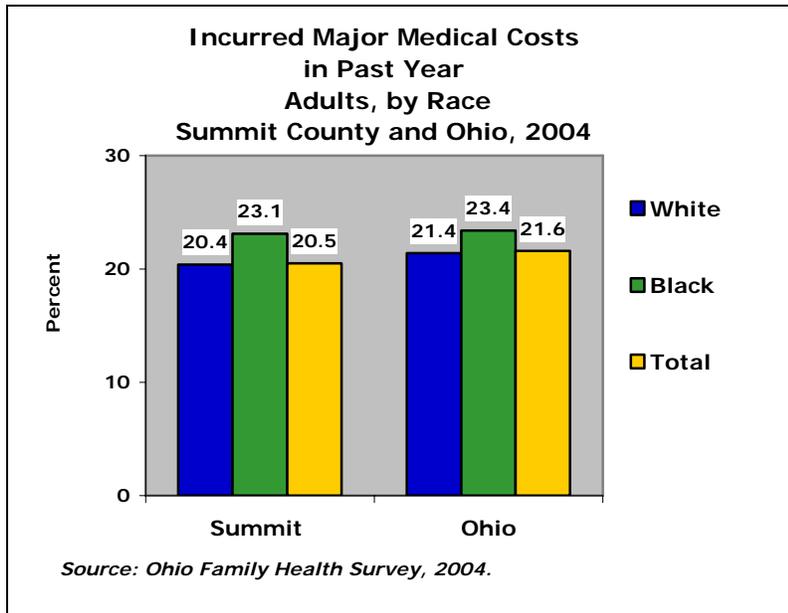
- Black adults (24.9 percent) were more likely than white adults (16.7 percent) to go without a dental visit for more than three years or to have never had a dental visit as an adult.
- White adults (53.1 percent) were more likely than black adults (33.9 percent) to have a dental visit within the previous six months.

Table 19.

Length of Time since Last Dental Visit, Children, by Race Summit County and Ohio, 2004						
Length of Time since Last Dental Visit	Summit County			Ohio		
	White	Black	County Total	White	Black	Ohio Total
	Percent			Percent		
6 Months or Less	62.7	54.1	60.7	63.9	51.1	61.8
6 Months - 1 Year	12.6	16.5	13.3	12.4	20.3	13.6
1 - 3 Years	5.3	12.7	7.0	6.3	12.1	7.3
More than 3 Years	2.1**	3.0**	2.2	1.5	1.5	1.5
Never	17.3	13.7	16.7	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.						
<i>Source: Ohio Family Health Survey, 2004.</i>						

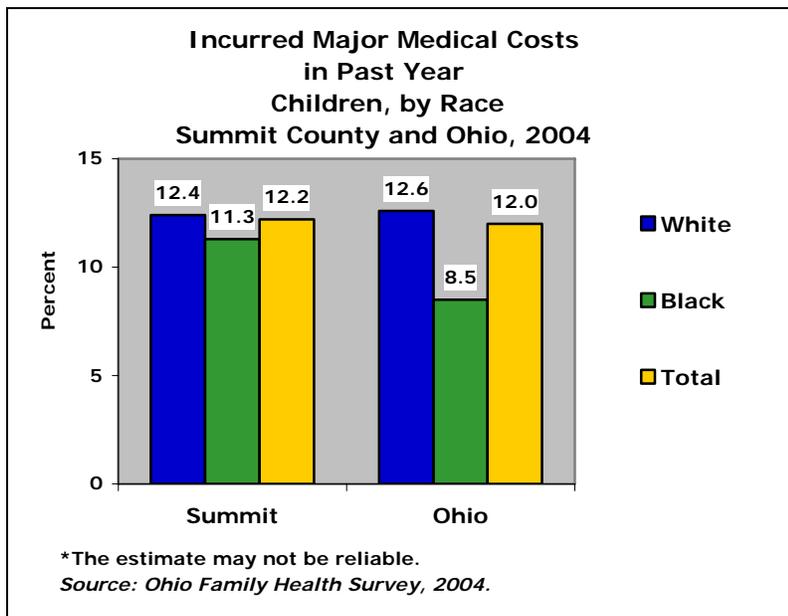
- Black children (12.7 percent) were more likely than white children (5.3 percent) to have a one-to-three-year time period elapse since their last dental visit.

Figure 30.



- One out of five adults incurred major medical costs during the past year.
- There were no significant differences by race in the percent of adults who incurred major medical costs during the past year.

Figure 31.



- Major medical costs were incurred by more than one out of 10 children during the past year.
- There were no significant differences by race in the percent of children who incurred major medical costs during the past year.

VII. Quality of Care

Table 20.

Quality of Hospital Care, Adults, by Race Summit County and Ohio, 2004						
Quality of Hospital Care	Summit County			Ohio		
	White	Black	County Total	White	Black	Ohio Total
	Percent			Percent		
Below Average	5.0**	8.5**	5.5	6.5	6.5	6.5
Average	5.6	4.1**	5.3	8.8	13.3	9.5
Good	27.5	37.4	29.3	27.4	26.5	27.1
Very Good/Excellent	61.9	49.9	60.0	57.4	53.8	56.9
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.						

- Three out of five adults who were hospitalized rated the quality of their care as very good to excellent.
- There were no racial differences in the rating of quality of hospital care.

Table 21.

Quality of Emergency Room Care, Adults, by Race Summit County and Ohio, 2004						
Quality of Emergency Room Care	Summit County			Ohio		
	White	Black	County Total	White	Black	Ohio Total
	Percent			Percent		
Below Average	12.2	11.5	12.1	11.9	13.1	12.3
Average	14.9	13.8	15.2	16.0	18.2	16.4
Good	29.6	26.5	29.4	30.9	29.0	30.5
Very Good/Excellent	43.3	48.2	43.3	41.1	39.8	40.8
Total*	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.						

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

Table 22.

Quality of Dental Care, Adults, by Race Summit County and Ohio, 2004						
Quality of Dental Care	Summit County			Ohio		
	White	Black	County Total	White	Black	Ohio Total
	Percent			Percent		
Below Average	2.5	12.8**	3.6	2.5	5.5	2.8
Average	4.9	13.4	6.0	5.2	11.8	6.0
Good	21.7	25.4	22.4	22.8	28.7	23.6
Very Good/Excellent	70.9	48.4	68.0	69.5	54.0	67.7
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.						
<i>Source: Ohio Family Health Survey, 2004.</i>						

- Black adults (12.8 percent) were more likely than white adults (2.5 percent) to report their quality of dental care below average.
- Black adults (13.4 percent) were more likely than white adults (4.9 percent) to report their quality of dental care average.
- White adults (70.9 percent) were more likely than black adults (48.4 percent) to rate their quality of dental care very good to excellent.

Table 23.

Rating of Overall Quality of Care, Adults, by Race Summit County and Ohio, 2004						
Quality of Hospital Care	Summit County			Ohio		
	White	Black	County Total	White	Black	Ohio Total
	Percent			Percent		
Below Average	1.3	4.5**	1.9	2.2	3.8	2.5
Average	7.2	10.0	7.5	7.4	11.7	8.0
Good	36.2	39.6	37.0	35.8	38.6	36.2
Very Good/Excellent	55.3	45.9	53.6	54.6	45.8	53.4
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.						
<i>Source: Ohio Family Health Survey, 2004.</i>						

- White adults (55.3 percent) were more likely than black adults (45.9 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 Summit County, black adults were uninsured at a higher rate than white adults. When black adults and children in Summit County have health insurance coverage, they are more likely to be insured through Medicaid than white adults and children. In addition, black adults were more likely than white 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 adults in Summit County, when compared to white adults. Black adults were more likely than white adults in Summit County to need assistance with day-to-day activities due to their health problems. Black children in Summit 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 adults in Summit County. Black adults reported greater unmet needs for dental care compared to white adults. Black adults were more likely than white adults to indicate they had a big problem seeing a health care specialist when necessary. 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 black and white groups in Summit County in the area of health care utilization. Black adults were more likely than white adults to have at least one hospitalization and one emergency room visit during the previous 12 months. Black adults were more likely to delay having a dental visit in the recommended time frame.

Improving the health and well-being of minority populations in Summit 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 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.



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