Adams and York County Community Health Needs Assessment 2015

Overview of the Adams and York Communities

Prepared for and Sponsored by Healthy Adams County and the Healthy York County Coalition

June 2015

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ABSTRACT: This document provides an overview of findings from a community health needs assessment (CHNA) conducted on behalf of Healthy Adams County and the Healthy York County Coalition. The assessment uses information from primary and secondary sources to identify health issues of consequence to the community. Estimates are presented for selected demographic and health indicators, including access to healthcare, health-related behavioral risks, and prevention behaviors and context. This CHNA identifies community health needs based on the prevalence of health risks and health disparities. It focuses specifically on health risks that are among the leading causes of death and disability with some emphasis on how these risk factors are unevenly distributed across demographic groups. This approach shows the most significant health risks in Adams and York counties relate to obesity, including obesity-related behaviors such as diet and exercise, and mental health in terms of both the number of people affected and the amount of death and disability each creates.

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Overview and Methods

This document provides an overview of findings from a community health needs assessment conducted on behalf of the Healthy York County Coalition and Healthy Adams County. The assessment uses information from primary and secondary sources to identify health issues of consequence to the community. Estimates are presented for selected demographic and health indicators, including access to healthcare, health-related behavioral risks, and prevention behaviors and context. Appendix A contains a description of the data sources used for the assessment. Appendix B contains the questions respondents were asked for the Healthy York/Healthy Adams Behavioral Risk Factor Survey. Appendix C provides definitions of selected terms. Appendix D contains all data tables. Appendix E shows the results of multivariate analyses predicting obesity and current depression. Appendix F contains maps that display the locations of health facilities, parks, fast food restaurants, and grocery stores in terms of census indicators related to social determinants of health.

Data Sources

The information presented in this summary comes from one of three sources. The primary source of comparative health information is provided by the Robert Wood Johnson Foundation County Health Rankings. These rankings provide county-level information on health factors and health outcomes. The performance of individual counties are compared to other Pennsylvania counties to provide a relative performance ranking.

The primary source of local, current information comes from a Community Health Needs Assessment (CHNA) survey. The CHNA survey information is based on a behavioral risk factor survey of 769 adult residents of Adams County and 1,028 adult residents of York County. The survey interviewing took place from October 27 through December 12, 2014. The survey sample was designed to be representative of the adult, non-institutionalized population of the two counties.

The third source of data comes from the Pennsylvania Department of Health, which is accessed via the EPI QMS data retrieval system.

Community Priorities

This CHNA identifies community health needs based on the prevalence of health risks and health disparities. It focuses specifically on health risks that contribute to non-communicable disease that are among the leading causes of death and disability with some emphasis on how these risk factors are unevenly distributed across demographic groups. This approach shows the most significant health risks in Adams and York counties relate to obesity, including obesity-related behaviors such as diet and exercise, and mental health in terms of both the number of people affected and the amount of death and disability each creates.

Reviewing the overall data shows that access indicators for both counties are generally favorable, with most residents of both counties reporting they have health care coverage, a personal physician and dental insurance, and most also reporting they have visited a doctor or dentist in the past year. Still, about one third of residents in each county had some economic hardships and around one in ten skipped medical treatment due to cost in the past year. Behavioral risk indicators show that few residents exercise regularly or eat three servings of vegetables every day. They also show that more than one in five residents is a current smoker and that around two in three are overweight or obese. Rates of health conditions such as diabetes, heart conditions, breathing conditions and cancer are not comparatively high, but a plurality of residents has high blood pressure and high cholesterol and one in five has been diagnosed with either an anxiety or depressive disorder. Finally, one in two residents exhibited some depressive symptoms, one in five says their normal

activities have been limited by their health, and one in seven has limited health literacy.

In Adams County, more than 40,000 adults did not consume three vegetables each day, had not exercised 30 minutes or more on five days in the week preceding the survey, were overweight or obese, and experienced one or more depressive symptoms in the two weeks preceding the survey.

In York County, more than 175,000 adults did not consume three vegetables each day, had not exercised 30 minutes or more on five days in the week preceding the survey, were overweight or obese, and experienced one or more depressive symptoms in the two weeks preceding the survey.

The health indicators measured by the Behavioral Risk Factor survey remained mostly stable over the past three years. Compared to 2011, York showed a decline in poor mental health days and an increase in doctor visits, while Adams showed fewer poor physical health days, fewer dental visits, fewer overweight, and less stress about paying for rent or mortgages. Other indicators in both counties were statistically stable.

There are notable health disparities within York and Adams Counties, with age and poverty frequently showing differences between groups. Older residents are more likely to have better access to healthcare and have better rates on most prevention-related indicators. However, they are also more likely to have specific health conditions. Younger residents are more likely to have better rates for behavioral indicators, notably for overweight and obesity as well as physical activity. Poverty is also significantly associated with differential outcomes related to access, health conditions and prevention-related behaviors. Low-income or poor residents are more likely to have poor access to healthcare as well as circulatory conditions, diabetes, mental health problems and money concerns.

A deeper look into the predictors of obesity and depression finds there are differences between demographic groups' likelihood of experiencing a state of poor physical and mental health, particularly related to poverty status. Yet, although some groups are significantly more likely to experience these conditions, it is also true that these conditions are found in all demographic and geographic communities.

Finally, although not direct measures of health, specific contextual factors that influence health and well-being appear as significant issues for both counties. Both counties receive their poorest relative county rankings for their physical environments, which includes poor air quality and problems related to housing and transportation.

Behavioral Risk Factor Survey

The Behavioral Health Risk Factor survey allows us to review a variety of health indicators specific to each county. These indicators fall into the broad categories of health care access, behavioral risk, health conditions, and prevention behaviors and context. Altogether, these indicators show that poor diet, lack of physical activity, obesity, and mental health concerns affect a majority of residents in both counties.

Access indicators are generally favorable, with most residents of both counties reporting they have health care coverage, a personal physician and dental insurance, and most also reporting they have visited a doctor or dentist in the past year (see Table 1). Still, about one third of residents in each county had some economic hardships and around one in ten skipped medical treatment due to cost. Behavioral risk indicators show that few residents exercise regularly or eat three servings of vegetables every day. They also show that more than one in five residents is a current smoker and that around two in three are overweight or obese.[i] Rates of health conditions such as diabetes, heart conditions, breathing conditions and cancer are not comparatively high, but a plurality of residents has high blood pressure and cholesterol and one in five has been diagnosed with either an

anxiety or depressive disorder. Finally, one in two adults exhibited some depressive symptoms, one in five says their normal activities have been limited by their health, and one in seven has limited health literacy.

The health indicators measured by the Behavioral Risk Factor survey remained mostly stable over the past three years. Compared to 2011, York showed a decline in poor mental health days and an increase in doctor visits, while Adams showed fewer poor physical health days, fewer dental visits, fewer overweight, and less stress about paying for rent or mortgages. Other indicators in both counties were statistically stable.

Table 1. Summary of Health Indicators, BRFSS

	York		Adams	
Access Indicators	2011	2014	2011	2014
Has health care coverage	91%	**92%**	88%	**92%**
Has a personal physician	88%	**88%**	92%	**91%**
Did not receive health care in past year because of cost	12%	**13%**	10%	**10%**
Has dental insurance	67%	**69%**	65%	**62%**
Economic hardships (one or more)	39%	**36%**	37%	**32%**
Behavioral Risk Indicators				
Participated in physical activities or exercise in past month	80%	**76%**	77%	**79%**
Exercised 30 minutes on five days in past week	21%	**17%**	16%	**18%**
Strength training in past month	40%	**44%**	42%	**46%**
Smoking behavior (regular smoker)	22%	**24%**	21%	**21%**
Body Mass Index Category (overweight and obese)	66%	**68%**	74%	**68%**
Binge drinking behavior	15%	**16%**	13%	**16%**
Consumed three servings of vegetables daily	3%	**4%**	4%	**4%**
Conditions				
Respondent is diabetic	9%	**11%**	12%	**12%**
Told has heart disease, heart attack, or stroke	9%	**10%**	13%	**11%**
Ever had COPD, emphysema, or chronic bronchitis	8%	**8%**	7%	**7%**
Has high cholesterol	39%	**45%**	44%	**42%**
Has high blood pressure	34%	**38%**	40%	**38%**
Has asthma	11%	**11%**	11%	**8%**
Has ever had cancer	9%	**10%**	13%	**12%**
Has an anxiety disorder	18%	**21%**	16%	**16%**
Has a depressive disorder	20%	**21%**	20%	**20%**
PHQ-8 current depression indicator-currently depressed	9%	**9%**	8%	**6%**
Prevention Behaviors and Context				
At least one day physical health was not good in past month	39%	**39%**	40%	**34%**
At least one day mental health was not good in past month	45%	**38%**	39%	**38%**
Poor health limited participation in normal activities in past month	36%	**40%**	38%	**43%**
Visited doctor for routine checkup in year	69%	**74%**	74%	**75%**
Limited health literacy	17%	**15%**	15%	**16%**
Visited dentist in past year	76%	**74%**	77%	**72%**
Has ever had blood cholesterol checked	82%	**80%**	83%	**79%**
Gets needed social and emotional support	92%	**93%**	94%	**91%**
One or more days with depressive symptoms in past two weeks	61%	**59%**	58%	**55%**
Stressed about paying rent or mortgage	27%	**24%**	30%	**21%**

Residents Affected

The estimates produced by the Behavioral Risk Factor survey provide a tool for translating the proportion of citizens with a specific characteristic into an estimate of the number of adult residents with that characteristic. In aggregate terms, diet, exercise, obesity, and mental health issues affect large numbers of county residents. In Adams County, more than 40,000 adults did not consume three vegetables each day, had not exercised 30 minutes or more on five days in the week preceding the survey, were overweight or obese, and experienced one or more depressive symptoms in the two weeks preceding the survey (Figure 1).

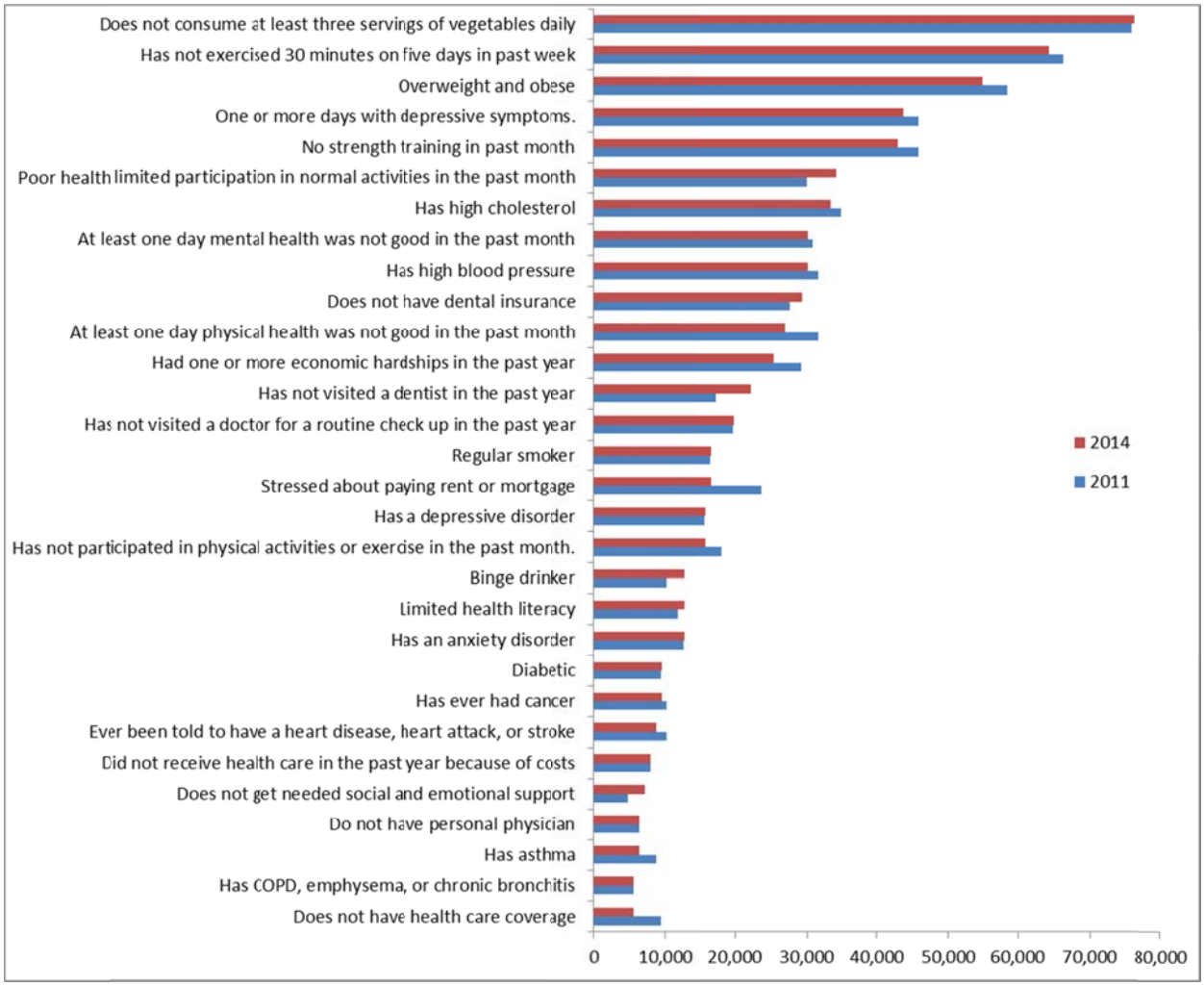

Figure 1. Total Adult Residents Reporting Condition, Adams County 2015. *The red bars provide estimates of the adult population in 2014 that reported each behavior, condition, or experience. The blue bars provide the estimates reported for 2011. In Adams County, more than 40,000 adults did not consume three vegetables each day, had not exercised 30 minutes or more on five days in the week preceding the survey, were overweight or obese, and experienced one or more depressive symptoms in the two weeks preceding the survey. The estimated error for these estimates is ± 3,653 adults. (Total number of adult residents in Adams County: 2014=79,421; 2011=78,969)*

In York County, more than 175,000 adults did not consume three vegetables each day, had not exercised 30 minutes or more on five days in the week preceding the survey, were overweight or obese, and experienced one or more depressive symptoms in the two weeks preceding the survey (Figure 2).

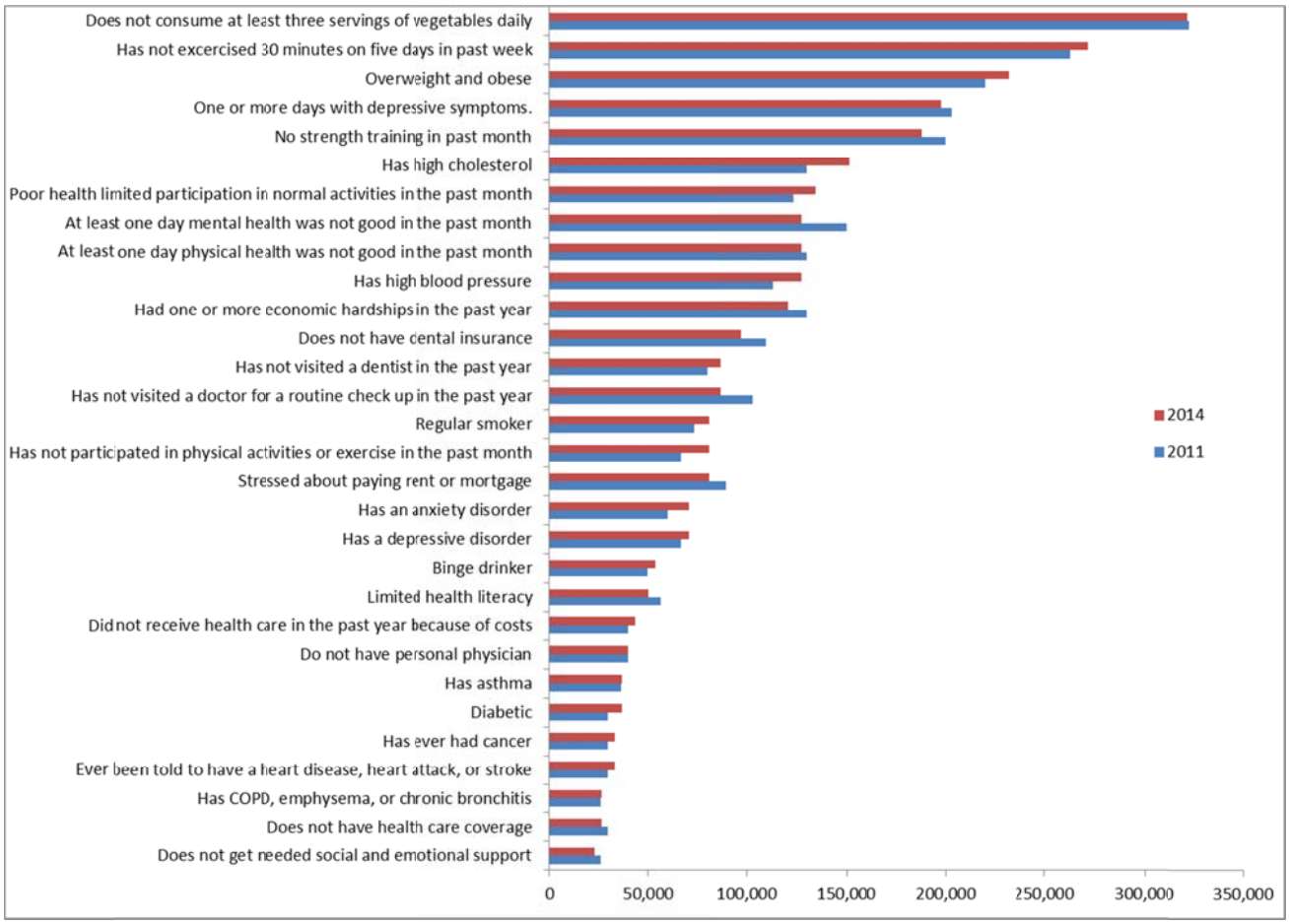

Figure 2. Total Adult Residents Reporting Condition, York County 2015. *The red bars provide estimates of the adult population in 2014 that reported each behavior, condition, or experience. The blue bars provide the estimates reported for 2011. In York County, more than 175,000 adults did not consume three vegetables each day, had not exercised 30 minutes or more on five days in the week preceding the survey, were overweight or obese, and experienced one or more depressive symptoms in the two weeks preceding the survey. The estimated error for these estimates is ± 13,420 adults. (Total number of adult residents in York County: 2014=335,504; 2011=332,958)*

Health Risks and Disability-Adjusted Life Years

Long-term health risk and disability can be quantified by calculating disability-adjusted life years. Disability-adjusted life years (DALYs) calculations provide an estimate of the burden of disease by assessing premature mortality and disability, thus providing an overall view of the most important contributors to health loss. In the United States, the leading causes of DALYs were all non-communicable diseases: heart disease, COPD, lung cancer, and major depressive disorders.[ii] The rates of these major causes of death and disability for Adams and York counties and Pennsylvania are shown in Table 2.

Table 2. Rates of Major Causes of Death and Disability

	Adams	York	Pennsylvania
Heart Disease	8%	6%	7%
COPD	6%	7%	7%
Lung Cancer	< 1%	< 1%	< 1%
Depressive Disorder	23%	20%	18%

Source: 2011 – 2013 BRFSS and 2012 lung cancer incidence both accessed from EPI-QMS

The disability-adjusted life years estimates might encourage a focus on these conditions, but such efforts would emphasize treatment and not causes; focusing on these conditions alone would do little to reduce lives lost and disability within a community. Instead, a public health focus on reducing DALY's encourages the prevention of disease instead of its treatment. Even though the specific conditions affect a small segment of the population, the risk factors that account for the most disease burden in the United States are dietary risks, smoking, and high BMI. Each contributes to cancer, cardiovascular and circulatory disorders, chronic respiratory diseases, and diabetes.[iii]

Chronic, non-communicable diseases pose a tremendous health burden throughout the world and within York and Adams Counties.[iv] The estimates for both counties for smoking, drinking, diabetes, hypertension, high cholesterol, physical activity, nutrition and weight are similar to other Pennsylvania counties, but even though these health conditions and behaviors are not out of line with other counties in the state, many residents are exposed to significant long-term risk because of them (Figure 3).

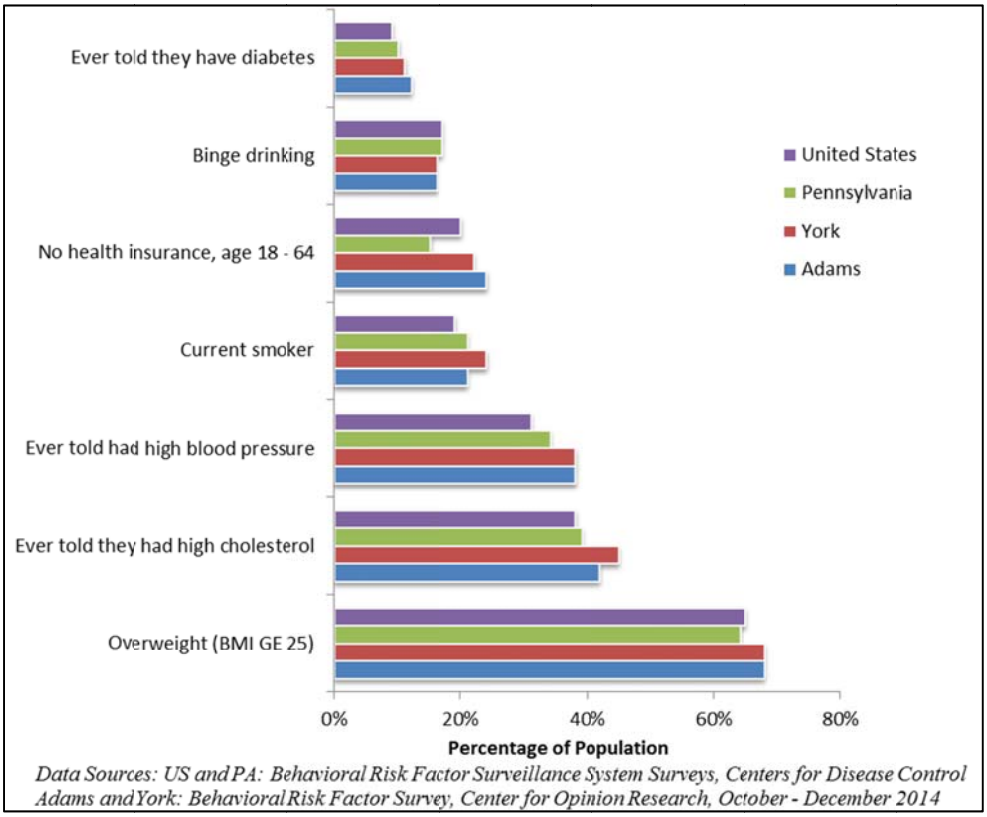

Figure 3. Behavioral Health Risks, Adams and York Counties 2015 Compared to US and PA Estimates. *This figure compares the prevalence of health risks in Adams and York Counties compared to the United States and Pennsylvania. Although both counties have rates similar to the state and nation, the rates for smoking, health insurance access, and obesity do not meet health targets set by the Centers for Disease Control.*

Correlates of Obesity and Depression

Local indicator data highlights both obesity and mental well-being as important indicators of community health. Is it possible to learn something from those experiencing these conditions that can help inform community health planning? What substantive information does the survey provide about individuals that suffer from these problems that can guide our thinking about future strategies for addressing these problems?

Nearly one in three residents of Adams and York counties are obese (32% in both counties). The likelihood of being obese differs a great deal depending on the number of health conditions someone has, other things being equal. Being diabetic, having a circulatory or heart disorder, and having asthma each more than doubles the likelihood that a respondent is obese, accounting for demographic characteristics. Limited health literacy also doubles the odds that a respondent is obese, while regular exercise decreases the likelihood of being obese. Unfortunately, the model itself does a relatively poor job of predicting who is obese from the observed data (see Appendix E for a more detailed explanation of this analysis).

Nearly one in four (26%) Adams and York residents had at least some depressive symptoms in the two weeks prior to the survey.[v] If we collapse the scoring to indicate "current depression" we find that about 7% of adults were suffering from depression at the time of the survey (6% of Adams residents and 9% of York residents). In 2011, similar number of residents (8% of Adams and 9% of York residents) reported current depression. The likelihood of being currently depressed changes with variables such as poverty status, race, health literacy, economic hardships, and social support.

Figure 4 displays the relationships between poverty status, race, and health literacy on depression, accounting for other variables. This figure shows there are sizable differences in the likelihood of showing depressive symptoms and that people with low health literacy and those living in poverty are particularly at-risk. But again, mirroring the analysis of obesity data, the model predicting depression does a relatively poor job of predicting who is depressed from the observed data (see Appendix E for more details about this analysis).

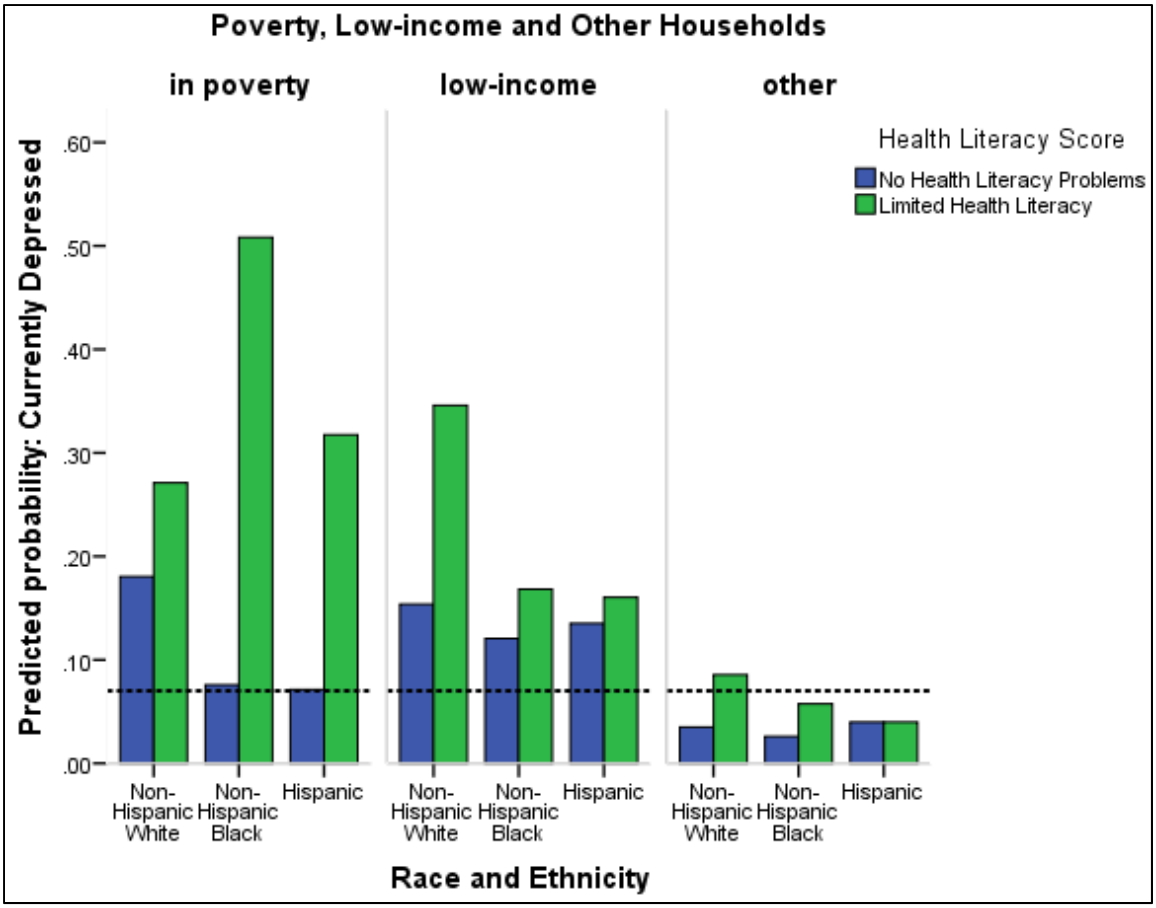

Figure 4. Logistic Regression Results for Current Depression, Adams and York County, Pennsylvania, 2015. *This figure shows the mean predicted probability of being currently depressed as measured by the PHQ-8 by poverty status, health literacy, race and ethnicity.*

This analysis of depression and obesity reveals at least two important findings worth noting. First, there are differences between demographic groups on their likelihood of experiencing a state of poor physical and mental health, particularly related to poverty status (more on health disparities is considered in the next section of the report).

Second, although some groups are significantly more likely to experience these conditions, it is also true that these conditions are found in all demographic and geographic communities, a contention supported by the large amount of unexplained variation in these models.

Health Disparities

The CHNA identifies the presence of numerous health disparities, i.e., gaps in access, conditions, or behaviors that are larger for some demographic groups than for others. The area's health disparities, generally speaking, show clear patterns. First, poverty is significantly associated with differential outcomes related to access, conditions, and prevention behaviors. Second, age is significantly associated with differential outcomes related to all indicator groups. Third, there are few changes in which groups experience disparities compared to 2011.

Figure 5 displays the relationships that exist between each survey indicator and demographic information such as poverty status, race and ethnicity, gender, and age (Appendix D provides cross tabulations that show the estimate of each indicator within each subgroup). The color coding identifies whether there is a significant relationship between each indicator and each demographic subgroup and how strong those differences are; the darkest coloring indicates the strongest associations.[vi]

Figure 5. Health Indicators by Selected Demographic Groups, Adams and York Counties, 2015.
This figure displays the relationships between each survey indicator and poverty status, race and ethnicity, gender, and age. The color coding identifies whether there is a significant relationship between each indicator and each demographic subgroup and how strong those differences are; the darkest coloring indicates the strongest associations. Highlighted cells reveal changes in the strength of the association between each variable and each indicator since 2011.

Health disparity analysis identifies those demographic characteristics that are more often associated with poor health behaviors and conditions. Because these demographic disparities are often geographically concentrated, public health researchers have begun to focus on the characteristics of place and geography through social determinants analysis as a way to more effectively target public health interventions. Social determinants analysis attempts to geographically describe the physical environments where people live and work that can contribute to health outcomes and risks.[vii] Social determinants research highlighting the importance of poverty, residential segregation, stigma and discrimination, incarceration, and educational attainment on health outcomes provides a deeper understanding of the complex social and structural determinants of health and pinpoints additional opportunities for enhancing prevention and control efforts.[viii]

This CHNA for the first time includes social determinants analysis for each block group in Adams and York Counties. The scoring for the social determinants mapping is based on five factors: poverty, educational attainment, occupied housing units, employment, and race and ethnicity. Higher scores indicate that a block group has stronger social characteristics.[ix] Neither Adams nor York has any block groups that score an A. Adams has one block group that rates a D and none that rates an F; York County has 21 block groups that score a D and 26 that score an F (or 15% of the 322 block groups in the county). Figures 6 and 7 display the results of this social determinants analysis for Adams and York Counties. These maps show that many areas within both counties have social and economic characteristics that increase the risk of poor health. Appendix F provides additional maps that show the locations of health infrastructure in each county.

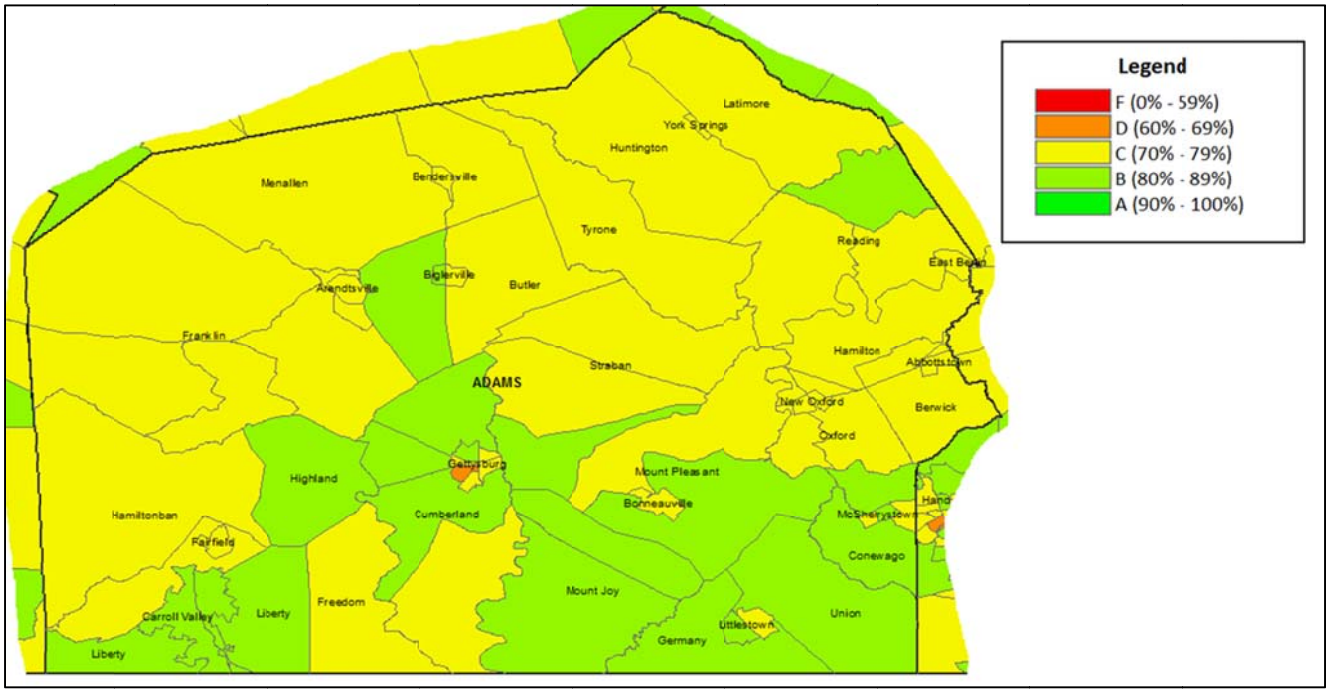

Figure 6. Social Determinants Analysis of Health for Adams County. *This figure displays the social determinants scores for each census tract in Adams County. Higher scores indicate that a census tract has stronger social characteristics. Adams has no block groups that score an A. Adams has one block group that rates a D and none that rates an F. Calculations by the Center for Opinion Research based on American Community Survey data.*

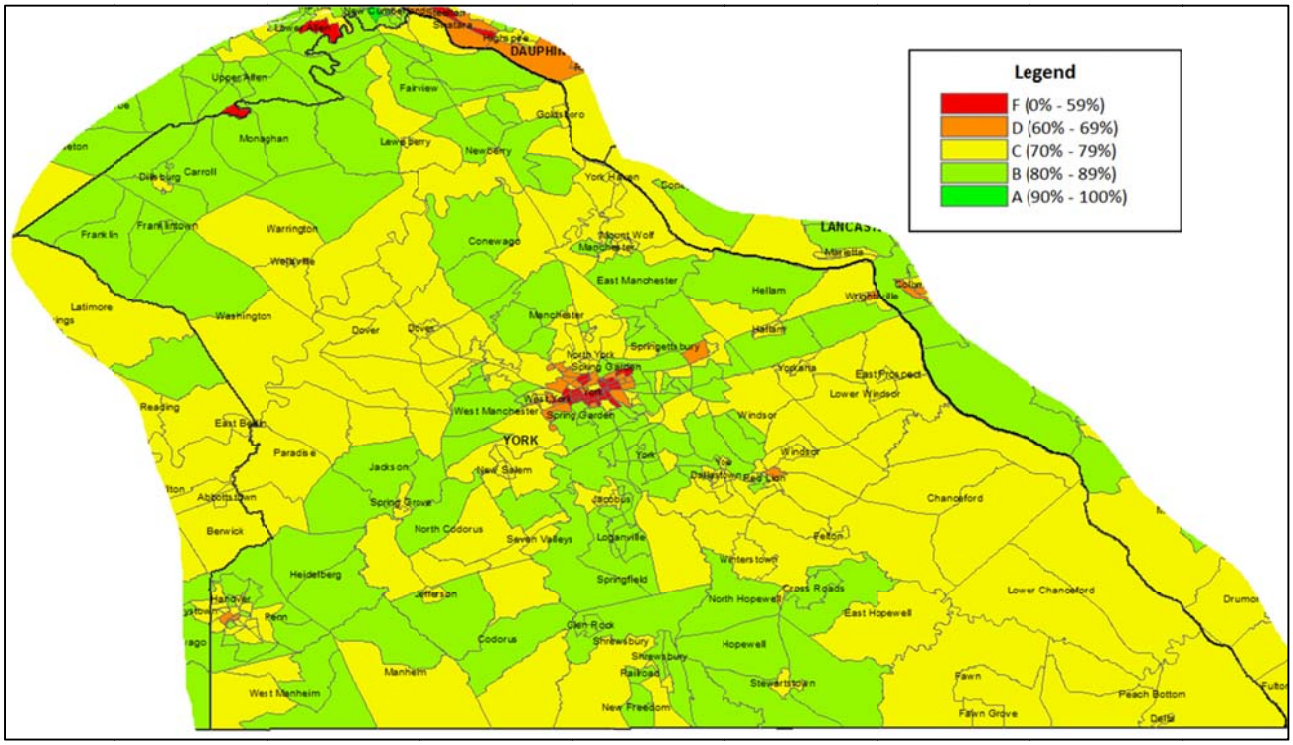

Figure 7. Social Determinants Analysis of Health for York County. *This figure displays the social determinants scores for each census tract in York County. Higher scores indicate that a census tract has stronger social characteristics. York County has no block groups that score an A. York County has 21 block groups that score a D and 26 that score an F. Calculations by the Center for Opinion Research based on American Community Survey data.*

Relative Health Rankings

Adams County ranks 17 out of 67 counties in health outcomes and 15 out of 67 counties in health factors, according to county health rankings data.[x] Compared to other counties in the state, Adams shows low rates of dentists, mental health providers, access to exercise facilities, and college attainment (Figure 8). Adams also has relatively high rates of motor vehicle deaths, poor physical health days, and severe housing issues. Adams does relatively well on having low rates of children in poverty, excessive drinking, premature death, preventable hospital stays, and unemployment.

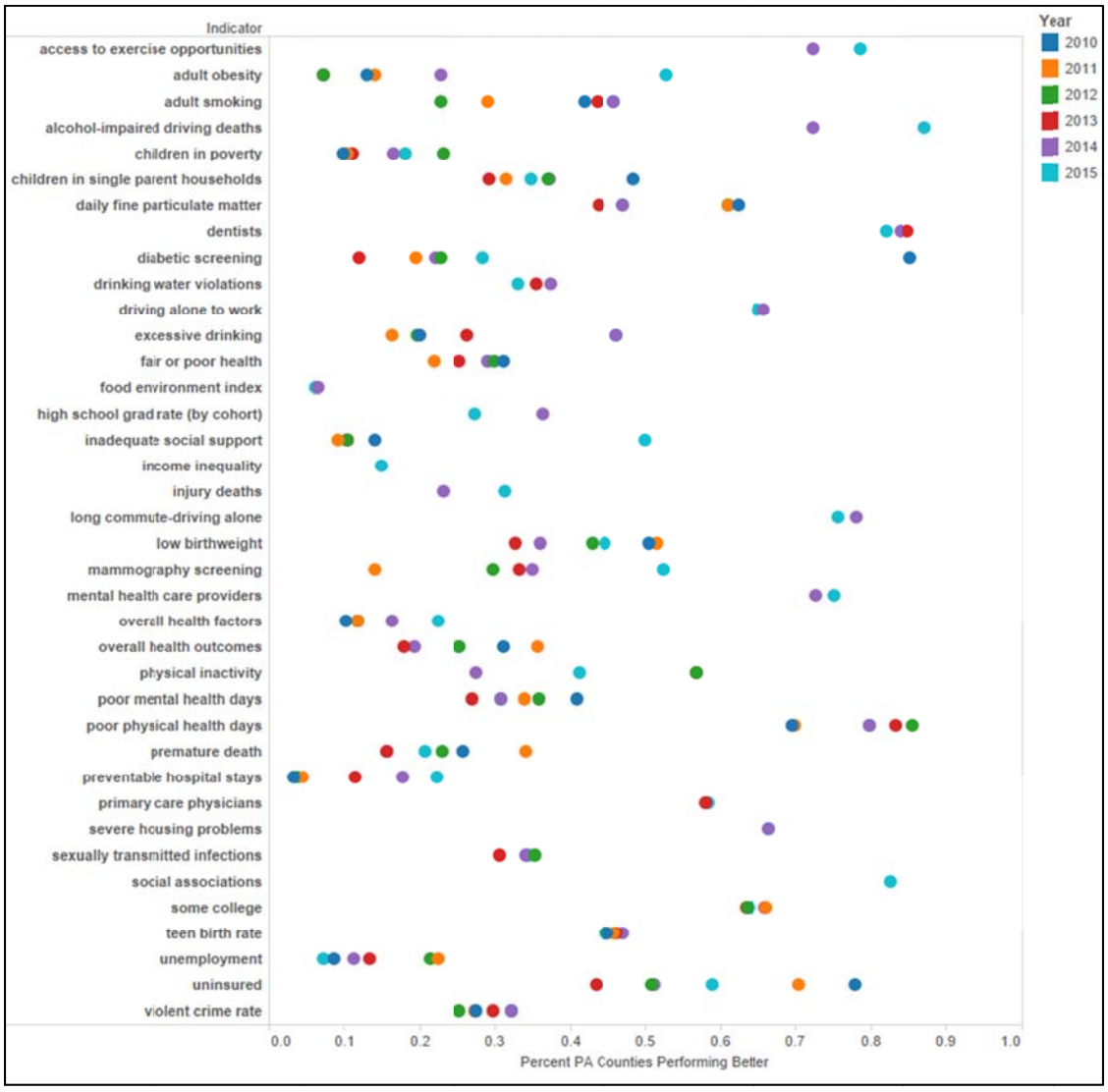

Figure 8. Relative Health Rankings, Adams County, 2015. *This figure displays the relative ranking of Adams County to other Pennsylvania counties on individual health indicators. Lower scores closer to the left hand axis indicate stronger relative performance, in that fewer counties perform better on that indicator. Different colors represent different years. Not all indicators have data for all years. Calculations by the Center for Opinion Research based on Robert Wood Johnson Foundation County Health Rankings data.*

York County ranks 19 out of 67 counties in health outcomes and 17 out of 67 counties in health factors. Compared to other counties in the state, York shows high rates of obesity, low birth weight babies, teen births, and low rates of mental health providers (Figure 9). York also has relatively high rates of sexually transmitted infections and violent crime. York County does relatively well on having low rates of children in poverty and preventable hospital stays.

Figure 9. Relative Health Rankings, York County, 2015. *This figure displays the relative ranking of York County to other Pennsylvania counties on individual health indicators. Lower scores closer to the left hand axis indicate stronger relative performance, in that fewer counties perform better on that indicator. Different colors represent different years. Not all indicators have data for all years. Calculations by the Center for Opinion Research based on Robert Wood Johnson Foundation County Health Rankings data.*

The relative performance of Adams and York counties on the grouped indicators reveals the indicator groups that need the greatest improvement (Table 3). Both counties receive their poorest relative rankings for the physical environment, which includes poor air quality and problems related to housing and transportation (see Appendix A, Table A-2). Health behaviors that are risk factors for chronic diseases are the second lowest performing set of factors for both counties. The third area of concern relates to quality of life, which includes mental and physical health indicators. Table 3 displays the health outcomes and factors for Adams and York counties as well as the same ranks for the top performing counties in Pennsylvania.

Table 3. Relative County Ranks on County Health Rankings Outcomes and Factors

	Length of Life	Quality of Life	Health Behaviors	Clinical Care	Social & Economic Factors	Physical Environment
County						
Adams	10	28	31	23	9	44
York	16	26	32	9	20	36
			Top Performing PA Counties			
Centre	2	7	1	12	4	23
Montgomery	4	10	4	2	1	62
Union	1	2	24	3	17	6

Endnotes

[i] The survey found that 60% of those with a BMI in the overweight category wrongly believe their weight is "normal." Most of those in the normal (86%) and obese (85%) BMI groups correctly classified their weight.
[ii] Low back pain appears in the top five leading causes of DALYs in the US, but is not included in this section because the CHNA did not include any questions specifically about low back pain.
[iii] Institute for Health Metrics and Evaluation. *GBD Profile: United States.* Retrieved from http://www.healthmetricsandevaluation.org on April 28, 2015.
[iv] Draft Political Declaration of the High-level Meeting on the prevention and control of non-communicable diseases, United Nations, 7 September 2011.
[v] Depression calculations were made using the PHQ-8 scale. Kroenke, K., T. Strine, R. Spitzer, J. Williams, J. Berry, A. Mokdad. (2008). The PHQ-8 as a measure of current depression in the general population. J. Affect. Disorders, doi:10.1016/j.jad.2008.06.026.
[vi] These patterns represent bivariate relationships within the data and do not account for simultaneous effects of multiple variables as the previous analysis of obesity and depression do.
[vii] http://www.healthypeople.gov/2020/topics-objectives/topic/social-determinants-health
[viii] Dean, H., Williams, K., Fenton, K. (2013). From Theory to Action: Applying Social Determinants of Health to Public Health Practice. Public Health Reports, Supplement 3 (128): 1 – 4.
[ix] The social determinants used for this initial effort includes data related to social position and material circumstances. Other social determinants such as social cohesion, psychosocial factors, health systems, policy, and norms and values are not considered here.
[x] Robert Wood Johnson Foundation. (2015). *2015 County Health Rankings Pennsylvania Data – v1_0.xls [Data file]*. Retrieved from http://www.countyhealthrankings.org/app/pennsylvania/2015/overview.

Description of Data Sources

The primary source of local, current data about Adams and York Counties comes from a Community Health Needs Assessment (CHNA) survey. The CHNA survey information is based on a behavioral risk factor survey of 769 adult residents of Adams County and 1,028 adult residents of York County. The survey interviewing took place from October 27 through December 12, 2014. The survey sample was designed to be representative of the adult, non-institutionalized population of the two counties. Survey results were weighted (gender, education, race and age) using an iterative weighting algorithm to reflect the known distribution of those characteristics as reported by the American Community Survey for Adams and York Counties (see Table A-1).

The sample error is +/- 4.6 percentage points for Adams County and is +/- 4.0 percentage points for York County when the design effects from weighting are considered. In addition to sampling error, this poll is also subject to other sources of non-sampling error. Generally speaking, two sources of error concern researchers most. Non-response bias is created when selected participants either choose not to participate in the survey or are unavailable for interviewing. Response errors are the product of the question and answer process. Surveys that rely on self-reported behaviors and attitudes are susceptible to biases related to the way respondents process and respond to survey questions.

Table A-1. Unweighted and Weighted Sample Estimates, Weighting Variables and Selected Health Indicators

Group	Parameter	Unweighted Estimate	Weighted Estimate
Weighting Variables			
Male	48.7	39.4	48.7
Female	51.3	60.6	51.3
HS or less	53.9	41.0	53.9
some college	24.3	26.5	24.3
College or more	21.7	32.5	21.8
White	91.4	95.1	91.4
Other	8.6	4.9	8.6
18 – 34	26.0	12.8	26.0
35 – 54	37.5	29.3	37.6
55 or older	36.5	57.9	36.5
Health Indicators			
Smoker	19%	17.5	22.2
Obese	33%	32.2	32.0
Binge Drink		12.0	16.1
Diabetes	10%	13.2	11.2
Asthma (current)	15%	9.9	10.0
Annual Doc		80.9	74.7
Physical health not good 1+ day in past month	36%	36.3	36.8
Poverty		6.8	9.0
Cell Only		18.5	25.0

Note: age, gender, race estimates are from US Census Bureau, 2009-2013 5-Yr ACS; health indicators are for York County only and come from the state's EPI-QMS system for years 2011 - 2013.

The primary source of comparative health information is provided by the Robert Wood Johnson Foundation County Health Rankings. These rankings provide county-level information on health factors and health outcomes. Table A-2 provides a list of the measures used by the County Health Rankings.

The third source of data comes from the Bureau of Health Statistics and Research, Pennsylvania Department of Health, and is accessed through its Epidemiological Query and Mapping System (EpiQMS). The trend data that appears in Appendix D is based on the data available through this web portal and includes the Commonwealth of Pennsylvania's behavioral risk factor surveillance system (BRFSS) survey and other health statistics. The BRFSS data displayed in the Pennsylvania EpiQMS system that was used to compile the trend data, starting in 2002, includes data gathered by Pennsylvania collecting samples of behavioral risk information for Local Health Partnerships at the county level. Due to the inclusion of these sample data, analysis of Pennsylvania BRFSS data presented by others may differ in sample sizes and have slightly different percent estimates and confidence bounds. Other health statistics gathered from the site were analyzed by Center for Opinion Research staff. The Department of Health specifically disclaims responsibility for any analyses, interpretations, or conclusions. In some circumstances, data for Adams County is missing due to a low number of events in a given year. The relatively small size of Adams County can produce estimates in some instances that are statistically unreliable and small changes in the number of events can produce apparently large changes in reported rates.

Table A-2.

Health Outcomes										
Focus Area	**Measure**	**Description**	**US Overall**	**PA Overall**	**PA Top Performers**	**Adams County**	**York County**	**Lancaster County**	**Lebanon County**	**Berks County**
Health Outcomes Rank						**17**	**19**	**8**	**11**	**20**
Length of life (50%)	Premature death	Years of potential life lost before age 75 per 100,000 population (age-adjusted)	6811	6926	3765	5779	6036	5700	5764	6297
Quality of life (50%)	Poor or fair health	Percentage of adults reporting fair or poor health (age-adjusted)	12	14	8	13	13	11	12	12
	Poor physical health days	Average # of physically unhealthy days reported in past 30 days (age-adjusted)	3.7	3.5	2.5	4.2	3.3	2.9	3.2	3.3
	Poor mental health days	Average # of mentally unhealthy days reported in past 30 days (age-adjusted)	3.5	3.6	2.5	3.2	3.4	3.2	3.1	3.5
	Low birthweight	Percentage of live births with low birthweight (< 2500 grams)	8.1	8.3	4.9	7.5	8.0	6.8	7.5	7.7

Health Behaviors										
Focus Area	**Measure**		**US Overall**	**PA Overall**	**PA Top Performers**	**Adams County**	**York County**	**Lancaster County**	**Lebanon County**	**Berks County**
Health Behaviors Rank						**31**	**32**	**9**	**16**	**25**
Tobacco use (10%)	Adult smoking	Percentage of adults who are current smokers	18	20	12	21	20	16	18	18
Diet and exercise (10%)	Adult obesity	Percentage of adults that report a BMI of 30 or more	28	29	23	31	32	29	32	30
	Food environment index	Index of factors that contribute to a healthy food environment [0 (worst)-10 (best)]	7.6	7.7	8.6	8.6	8.1	8.1	8.4	8.2
	Physical inactivity	Percentage of adults aged 20 and over reporting no leisure-time physical activity	30	24	17	25	22	21	23	25
	Access to exercise opportunities	Percentage of population with adequate access to locations for physical activity	77	85	100	61	78	75	86	89
Alcohol and drug use (5%)	Excessive drinking	Percentage of adults reporting binge or heavy drinking	15	17	8	17	16	15	13	16
	Alcohol-impaired driving deaths	Percentage of driving deaths with alcohol involvement	32	34	15	44	40	35	27	39
Sexual activity (5%)	Sexually transmitted infections	Number of newly diagnosed chlamydia cases per 100,000 population	458	431	77	192	352	224	250	404
	Teen births	Teen birth rate per 1,000 female population, ages 15-19	31	28	6	26	33	26	34	35

Clinical Care										
Focus Area	**Measure**		**US Overall**	**PA Overall**	**PA Top Performers**	**Adams County**	**York County**	**Lancaster County**	**Lebanon County**	**Berks County**
Clinical Care Rank						**23**	**9**	**17**	**13**	**20**
Access to care (10%)	Uninsured	Percentage of population under age 65 without health insurance	18	12	8	12	11	15	12	13
	Primary care physicians	Ratio of population to primary care physicians	1,355:1	1249:1	224:1	1750:1	1390:1	1341:1	1691:1	1543:1
	Dentists	Ratio of population to dentists	1,663:1	1600:1	1085:1	3173:1	2051:1	2029:1	2258:1	1969:1
	Mental health providers	Ratio of population to mental health providers	753:1	623:1	261:1	1493:1	1155:1	934:1	470:1	913:1
Quality of care (10%	Preventable hospital stays	# of hospital stays for ambulatory-care sensitive conditions per 1,000 Medicare enrollees	65	63	23	55	48	46	47	56
	Diabetic monitoring	% of diabetic Medicare enrollees ages 65-75 that receive HbA1c monitoring	84	86	93	88	90	90	89	89
	Mammography screening	% of female Medicare enrollees ages 67-69 that receive mammography screening	63.0	63.4	77.5	63.7	66.7	67.5	66.2	64.2

Social and Economic Environment										
Focus Area	**Measure**		**US Overall**	**PA Overall**	**PA Top Performers**	**Adams County**	**York County**	**Lancaster County**	**Lebanon County**	**Berks County**
Social & Economic Factors Rank						**9**	**20**	**8**	**10**	**49**
Education (10%)	High school graduation	Percentage of ninth-grade cohort that graduates in four years	80	85	95	91	88	89	86	84
	Some college	Percentage of adults ages 25-44 years with some post-secondary education	63	62	77.3	51	56	53	51	54
Employment (10%)	Unemployment	Percentage of population ages 16 and older unemployed but seeking work	8	7	5.5	6	7	6	6	7
Income (10%)	Children in poverty	Percentage of children under age 18 in poverty	23	19	8	15	17	15	16	21
	Income inequality	Ratio of household income at the 80th percentile to income at the 20th percentile		4.7	3.4	3.8	3.9	3.9	3.8	4.3
Family and social support (5%)	Children in single-parent households	Percentage of children that live in a household headed by single parent	21	33	18	28	31	22	30	35
	Social associations	Number of membership associations per 10,000 population	33.0	12.3	30.4	11.3	12.6	13.9	15.5	12.4
Community safety (5%)	Violent crime	Number of reported violent crime offenses per 100,000 population	387	357	83	147	254	177	193	323
	Injury deaths	Number of deaths due to injury per 100,000 population	59	66	39	63	61	54	54	63

Physical Environment (10%)										
Focus Area	**Measure**		**US Overall**	**PA Overall**	**PA Top Performers**	**Adams County**	**York County**	**Lancaster County**	**Lebanon County**	**Berks County**
Physical Environment Rank						**44**	**36**	**22**	**20**	**34**
Air and water quality (5%)	Air pollution - particulate matter	Average daily density of fine particulate matter in micrograms per cubic meter (PM2.5)	11.1	12.9	11.5	12.8	12.6	12.4	12.5	12.1
	Drinking water violations	Percentage of population potentially exposed to water exceeding a violation limit during the past year	8	8	0	2	1	4	1	8
Housing and transit (5%)	Severe housing problems	Percentage of households with at least 1 of 4 housing problems: overcrowding, high housing costs, or lack of kitchen or plumbing facilities	19	15	6	14	13	15	13	15
	Driving alone to work	Percentage of the workforce that drives alone to work	76	77	50	82	85	79	82	80
	Long commute - driving alone	Among workers who commute in their car alone, the percentage that commute more than 30 minutes	34	34	16	38	35	26	32	30

Source: Robert Wood Johnson Foundation, (2015). 2015 County Health Rankings Pennsylvania Data. Retrieved from http://www.countyhealthrankings.org/app/pennsylvania/2015/overview.

Marginal Frequency Report: Behavioral Risk Factor Survey

Health Status

S1_1. Would you say that in general your health is...

	Adams		York	
	2011	2014	2011	2014
Excellent,	15%	**17%**	16%	**17%**
Very good,	35%	**36%**	41%	**35%**
Good,	34%	**31%**	28%	**31%**
Fair, or	13%	**12%**	11%	**13%**
Poor	3%	**4%**	3%	**4%**

Health Days – Health Related Quality of Life

S2_1. Now thinking about your physical health, which includes physical illness and injury, for how many days during the past 30 days was your physical health NOT good?

	Adams		York	
	2011	2014	2011	2014
None	60%	**66%**	61%	**61%**
1 or more days	40%	**34%**	39%	**39%**

S2_2. Now thinking about your mental health, which includes stress, depression, and problems with emotions, for how many days during the past 30 days was your mental health NOT good?

	Adams		York	
	2011	2014	2011	2014
None	61%	**62%**	55%	**62%**
1 or more days	39%	**38%**	45%	**38%**

S2_3. During the past 30 days, for about how many days did poor physical or mental health keep you from doing your usual activities, such as self-care, work, or recreation?

	Adams		York	
	2011	2014	2011	2014
	n=466	n=418	n=628	n=583
None	62%	**57%**	63%	**60%**
1 or more days	38%	**43%**	37%	**40%**

Health Care Access

S3_1. Do you have any kind of health care coverage, including health insurance, prepaid plans such as HMOs, or government plans such as Medicare?

	Adams		York	
	2011	2014	2011	2014
Yes	88%	**92%**	91%	**92%**
No	12%	**7%**	9%	**8%**

S3_1a. [If do not have any health insurance] Do you plan to sign up for health insurance through the health insurance exchange, or through your employer?

	Adams	York
	2014	2014
	n=55	n=80
Yes	45%	48%
No	50%	39%
Don't know	5%	13%

S3_1b. Why not?

	Adams 2014 n=28	York 2014 n=48
Cost: More affordable to pay out of pocket, pay as you go	6%	5%
Cost: Too expensive, costs too much	34%	51%
Eligibility: Not eligible	4%	5%
Not offered by current employer	3%	17%
Opportunity for other health coverage in the future	0%	8%
Stay healthy, do not get sick	10%	12%
No where	5%	11%
Other	42%	11%
Do not know	6%	0%

S3_2a. Do you have one person you think of as your personal doctor or health care provider?

	Adams		York	
	2011	2014	2011	2014
Yes, only one	88%	**87%**	84%	**83%**
MORE than one	4%	**4%**	4%	**6%**
No person as personal doctor	8%	**8%**	12%	**11%**
Don't know	0%	**1%**	0%	**0%**

S3_3. Was there a time in the past 12 months when you needed to see a doctor but could not because of cost?

	Adams		York	
	2011	2014	2011	2014
Yes	10%	**10%**	12%	**13%**
No	90%	**90%**	88%	**87%**

T3. Has a lack of transportation kept you from getting to a doctor's office or to any other health care appointment during the past year?

	Adams 2014	York 2014
Yes	5%	7%
No	95%	93%

S3_4. About how long has it been since you last visited a doctor for a routine checkup? A routine checkup is a general physical exam, not an exam for a specific injury, illness, or condition.

	Adams		York	
	2011	2014	2011	2014
Within past year	74%	**75%**	69%	**74%**
Within past 2 years	9%	**10%**	11%	**13%**
Within past 5 years	8%	**6%**	7%	**7%**
5 or more years ago	6%	**7%**	10%	**3%**
Never	1%	**0%**	1%	**0%**
Don't know	2%	**2%**	2%	**1%**

S3_5. How often do you have someone help you read materials you receive from your doctor or hospital...

	Adams		York	
	2011	2014	2011	2014
Always,	4%	**3%**	3%	**3%**
Often,	2%	**2%**	2%	**2%**
Sometimes,	8%	**6%**	8%	**6%**
Occasionally, or	12%	**12%**	12%	**9%**
Never?	74%	**77%**	75%	**79%**
NEVER visited provider	0%	**0%**	1%	**0%**

S3_6. How confident are you filling out medical forms by yourself...

	Adams		York	
	2011 n=799	2014 n=766	2011 n=1007	2014 n=1019
Extremely confident,	45%	**52%**	50%	**51%**
Quite a bit,	28%	**25%**	25%	**27%**
Somewhat,	18%	**14%**	15%	**14%**
A little bit, or	4%	**4%**	5%	**5%**
Not at all confident?	4%	**4%**	4%	**3%**
Do Not Know	1%	**0%**	1%	**1%**

S3_7. How confident do you feel when leaving the doctor's office that you understand what the doctor has told you...

	Adams		York	
	2011 n=800	2014 n=767	2011 n=1005	2014 n=1025
Extremely confident,	56%	**63%**	57%	**59%**
Quite a bit,	34%	**27%**	31%	**30%**
Somewhat,	8%	**7%**	8%	**8%**
A little bit, or	2%	**2%**	3%	**1%**
Not at all confident?	1%	**1%**	1%	**1%**
Do Not Know	1%	**0%**	1%	**0%**

S3_8. How confident do you feel when leaving the doctor's office that you can follow the doctor's instructions...

	Adams		York	
	2011 n=800	2014 n=767	2011 n=1004	2014 n=1022
Extremely confident,	66%	**65%**	63%	**65%**
Quite a bit,	27%	**25%**	27%	**25%**
Somewhat,	5%	**8%**	9%	**7%**
A little bit, or	1%	**1%**	1%	**2%**
Not at all confident?	0%	**1%**	1%	**0%**

S3_9. How often do you have problems learning about your medical condition because of difficulty understanding written information...

	Adams		York	
	2011 n=800	2014 n=767	2011 n=1006	2014 n=1024
Always,	2%	**3%**	2%	**2%**
Often,	2%	**2%**	2%	**2%**
Sometimes,	12%	**11%**	13%	**11%**
Occasionally, or	17%	**11%**	16%	**12%**
Never?	66%	**72%**	67%	**72%**
Not applicable	2%	**1%**	1%	**0%**

Exercise

S5_1. During the past month, other than your regular job, did you participate in any physical activities or exercises such as running, calisthenics, golf, gardening, or walking for exercise?

	Adams		York	
	2011	2014	2011	2014
Yes	77%	**80%**	80%	**76%**
No	23%	**20%**	20%	**24%**
Don't know	0%	**1%**	0%	**0%**

S5_2. When you took part in this physical activity for how many MINUTES did you usually keep at it?

	Adams		York	
	2011	2014	2011	2014
	n=605	n=601	n=790	n=763
Mean	62.7	**60.3**	61.8	**56.5**
S.D.	83.8	**75.3**	79.4	**62.8**

S5_3. During the PAST MONTH, how many TIMES PER WEEK did you take part in these physical activities?

	Adams		York	
	2011	2014	2011	2014
	n=609	n=600	n=798	n=774
Mean	4.1	**4.2**	4.2	**4.7**
S.D.	4.4	**5.6**	4.2	**6.8**

S5_4. During the PAST MONTH, how many times PER WEEK did you do physical activities to STRENGTHEN your muscles? Do NOT count aerobic activities like walking, running, or bicycling. Count activities using your own body weight, like yoga, sit-ups or push-ups and those using weight machines, free weights, or elastic bands.

	Adams		York	
	2011	2014	2011	2014
Mean	1.6	**1.8**	1.8	**2.2**
S.D.	3.3	**3.6**	4.0	**6.5**

T1. How often do you walk or bicycle to work?

	Adams 2014	York 2014
Every day	6%	5%
Most days	1%	1%
Some days	4%	2%
Never	70%	70%
Not currently employed	19%	21%

T2. What is the main barrier that keeps you from walking or biking to work?

	Adams 2014 n=533	York 2014 n=720
Distance	66%	63%
Work from home	4%	4%
Not currently employed, retired	4%	3%
Physically unable, disabled	4%	3%
Drive for work, job requirements	3%	3%
Have a vehicle	2%	3%
Time	2%	2%
Weather	2%	1%
Do not have a bike, Do not like riding a bike	2%	1%
Lack of energy, laziness	1%	2%
Have materials that need to be transported to/for work	1%	1%
Walkability, bikability of route: highways, etc.	1%	2%
Safety	1%	3%
Age	1%	0%
Childcare arrangements	0%	1%
Choose not to	0%	1%
No reason	6%	5%
Other	1%	1%
Do not know	1%	0%

Diabetes

S12_19. Are you MALE or FEMALE?

	Adams		York	
	2011	2014	2011	2014
Male	50%	**49%**	48%	**48%**
Female	50%	**51%**	52%	**52%**

S6_1a. Have you ever been told by a doctor that you have diabetes?

	Adams		York	
	2011	2014	2011	2014
Yes	13%	**13%**	10%	**11%**
No	85%	**85%**	88%	**88%**
Pre-diabetes or borderline diabetes	2%	**2%**	2%	**1%**

S6_1b. If "Yes" and respondent is female, ask: Was this only when you were pregnant?

	Adams		York	
	2011	2014	2011	2014
	n=45	n=53	n=53	n=60
Yes	20%	**19%**	23%	**7%**
No	80%	**81%**	77%	**93%**

S6_2. About how many times in the PAST 12 MONTHS have you seen a doctor, nurse, or other health professional for your diabetes?

	Adams		York	
	2011	2014	2011	2014
	n=95	n=93	n=91	n=109
None	5%	**12%**	7%	**12%**
1-3	44%	**38%**	47%	**30%**
4-6	41%	**35%**	32%	**46%**
7-10	4%	**0%**	3%	**4%**
11 or more	2%	**10%**	8%	**7%**
Do Not Know	3%	**4%**	3%	**1%**

Oral Health

S7_1. How long has it been since you last visited a dentist or a dental clinic for any reason? Include visits to dental specialists, such as orthodontists.

	Adams		York	
	2011	2014	2011	2014
Within the past year	78%	**72%**	76%	**74%**
More than one year	22%	**28%**	24%	**26%**

S7_2cod. What is the MAIN reason you have NOT visited the dentist in the last year?

	Adams		York	
	2011	2014	2011	2014
	n=182	n=214	n=245	n=262
Cost, cannot afford it	23%	**19%**	17%	**17%**
No need to go, teeth are fine	15%	**17%**	12%	**12%**
Dentures, false teeth, all teeth removed	17%	**16%**	17%	**20%**
No insurance	17%	**16%**	22%	**17%**
Does not like the dentist, bad past experience	7%	**9%**	9%	**10%**
No time, cannot get time off of work	5%	**8%**	9%	**6%**
Forgot to go, forgot to reschedule	2%	**3%**	6%	**2%**
No dentist, unsure who to use for dental care	5%	**3%**	2%	**3%**
Health reasons (heart attack, etc.)	1%	**0%**	1%	**1%**
No reason	1%	**1%**	2%	**1%**
Other	5%	**6%**	4%	**6%**
Do not know	5%	**3%**	2%	**4%**

S7_3. How many of your permanent teeth have been removed because of tooth decay or gum disease? Include teeth lost to infection, but do NOT include teeth lost for other reasons, such as injury or orthodontics. NOTE: If wisdom teeth are removed because of tooth decay or gum disease, they should be included in the count for lost teeth.

	Adams		York	
	2011	2014	2011	2014
None	53%	**54%**	57%	**55%**
1 to 5	23%	**24%**	19%	**23%**
6 or more but not all	17%	**13%**	15%	**14%**
All	6%	**7%**	7%	**7%**
Don't know	2%	**2%**	2%	**1%**

S7_4. How long has it been since you had your teeth cleaned by a dentist or dental hygienist?

	Adams		York	
	2011 n=747	2014 n=712	2011 n=942	2014 n=953
Within the past year	76%	**73%**	76%	**75%**
Within the past 2 years	8%	**8%**	10%	**8%**
Within the past 5 years	6%	**7%**	7%	**8%**
5 or more years ago	9%	**11%**	6%	**8%**
Never	0%	**1%**	0%	**1%**
Don't know	1%	**0%**	1%	**1%**

S7_5. Do you have any kind of insurance coverage that pays for some or all of your routine dental care?

	Adams		York	
	2011	2014	2011	2014
Yes	65%	**62%**	66%	**69%**
No	35%	**37%**	32%	**29%**
Don't know	1%	**1%**	1%	**2%**

Cardiovascular Disease Prevalence

S8_1. Has a doctor, nurse, or other health professional EVER told you that you had...

Adams	Yes		No		DK	
	2011	2014	2011	2014	2011	2014
A heart attack, also called a myocardial infarction?	6%	**5%**	94%	**94%**	0%	**1%**
Angina or coronary heart disease?	6%	**7%**	93%	**92%**	1%	**1%**
A stroke?	4%	**4%**	95%	**96%**	0%	**0%**
Chronic obstructive pulmonary disease, emphysema, or chronic bronchitis?	7%	**7%**	93%	**92%**	0%	**1%**

York	Yes		No		DK	
	2011	2014	2011	2014	2011	2014
A heart attack, also called a myocardial infarction?	5%	**5%**	95%	**94%**	0%	**1%**
Angina or coronary heart disease?	5%	**5%**	95%	**94%**	0%	**1%**
A stroke?	2%	**4%**	97%	**95%**	0%	**0%**
Chronic obstructive pulmonary disease, emphysema, or chronic bronchitis?	8%	**8%**	92%	**91%**	0%	**1%**

S8_5. Blood cholesterol is a fatty substance found in the blood. Have you EVER had your blood CHOLESTEROL checked?

	Adams		York	
	2011	2014	2011	2014
Yes	79%	**79%**	79%	**80%**
No	16%	**19%**	17%	**17%**
Don't know	5%	**2%**	4%	**4%**

S8_6. Has a doctor, nurse, or other health professional EVER told you that your blood CHOLESTEROL is high?

	Adams		York	
	2011	2014	2011	2014
	n=660	n=626	n=823	n=854
Yes	43%	**42%**	39%	**45%**
No	55%	**57%**	60%	**54%**
Don't know	2%	**1%**	2%	**1%**

S8_7. Has a doctor, nurse, or other health professional EVER told you that you had HIGH blood PRESSURE?

	Adams		York	
	2011	2014	2011	2014
Yes	40%	**38%**	33%	**38%**
No	60%	**62%**	66%	**61%**

S8_12. Has a doctor or other health professional EVER advised you to TAKE MEDICATION to help lower or control your high blood pressure?

	Adams		York	
	2011	2014	2011	2014
	n=318	n=291	n=336	n=394
Yes	80%	**81%**	78%	**82%**
No	20%	**19%**	22%	**18%**

Asthma

S9_1. Has a doctor, nurse, or other health professional EVER told you that you had... ASTHMA?

	Adams		York	
	2011	2014	2011	2014
Yes	17%	**14%**	17%	**16%**
No	84%	**86%**	83%	**84%**

S9_2. Do you still have asthma?

	Adams		York	
	2011	2014	2011	2014
	n=131	n=106	n=169	n=160
Yes	65%	**61%**	66%	**72%**
No	28%	**36%**	33%	**24%**
Don't know	7%	**3%**	2%	**4%**

Tobacco Use

S11_1. Have you smoked at least 100 cigarettes in your entire life?

	Adams		York	
	2011	2014	2011	2014
Yes	49%	**46%**	46%	**51%**
No	50%	**53%**	54%	**49%**
Don't know/Not sure	0%	**1%**	0%	**0%**

S11_2. Do you now smoke cigarettes every day, some days, or not at all?

	Adams		York	
	2011	2014	2011	2014
	n=395	n=355	n=468	n=519
Every day	31%	**35%**	40%	**35%**
Some days	12%	**10%**	8%	**11%**
Not at all	57%	**56%**	52%	**53%**

S11_3. During the past 12 months, have you stopped smoking for one day or longer because you were trying to quit smoking?

	Adams		York	
	2011	2014	2011	2014
	n=171	n=157	n=225	n=242
Yes	57%	**51%**	49%	**57%**
No	42%	**47%**	51%	**43%**
Don't know	2%	**2%**	0%	**0%**

S11_5. Do you currently use chewing tobacco, snuff, or snus every day, some days, or not at all? NOTE: Snus (Swedish for snuff) is a moist smokeless tobacco, usually sold in small pouches that are placed under the lip against the gum.

	Adams		York	
	2011	2014	2011	2014
Every day	2%	**5%**	2%	**1%**
Some days	3%	**4%**	3%	**3%**
Not at all	95%	**91%**	95%	**96%**

Demographics

reAGE. What is your AGE?

	Adams		York	
	2011	2014	2011	2014
Under 35	26%	**27%**	29%	**25%**
35-54	39%	**34%**	37%	**40%**
Over 55	35%	**39%**	34%	**35%**

Hisp. Are you Hispanic or Latino, or NOT?

	Adams		York	
	2011	2014	2011	2014
Yes	4%	**4%**	2%	**3%**
No	96%	**96%**	98%	**97%**

reRACE. Racial group

	Adams		York	
	2011	2014	2011	2014
White	92%	**95%**	92%	**89%**
Nonwhite	8%	**5%**	8%	**11%**

S12_6. What is your CURRENT marital status, are you married, divorced, widowed, or separated?

	Adams		York	
	2011	2014	2011	2014
Married,	64%	**54%**	55%	**53%**
Divorced,	10%	**12%**	12%	**14%**
Widowed,	8%	**8%**	7%	**8%**
Separated,	2%	**3%**	3%	**3%**
Never married	13%	**17%**	17%	**15%**
A member of an unmarried couple	4%	**6%**	6%	**7%**

NumC. How many children LESS than 18 years of age live in your household?

	Adams		York	
	2011	2014	2011	2014
None	61%	**64%**	61%	**66%**
1-2	32%	**28%**	30%	**27%**
3-4	7%	**7%**	7%	**5%**
5 or more	1%	**1%**	1%	**1%**

Care Givers

CG1. Some people play the role of caregiver as part of their daily lives, which means they are responsible for meeting the physical and psychological needs of others. Do you act as a caregiver for another ADULT, such as a spouse, sibling, aunt, uncle, parent, or grandparent?

	Adams 2014	York 2014
Yes	19%	17%
No	81%	83%

CG1a. Do you care for someone regularly, on a daily basis?

	Adams 2014 n=144	York 2014 n=179
Yes	56%	62%
No	43%	38%
Don't know	1%	0%

reEDUC. What is the HIGHEST grade or year of school you completed?

	Adams		York	
	2011	2014	2011	2014
HS or less	59%	**56%**	52%	**52%**
Some college	20%	**21%**	27%	**27%**
College degree	21%	**22%**	21%	**22%**

S12_9. Are you currently...

	Adams		York	
	2011	2014	2011	2014
Employed for wages,	55%	**53%**	54%	**55%**
Self-employed,	7%	**7%**	7%	**6%**
Out of work for more than 1 year,	2%	**1%**	3%	**2%**
Out of work for less than 1 year,	2%	**1%**	3%	**2%**
A Homemaker,	5%	**4%**	7%	**4%**
A Student,	5%	**5%**	5%	**5%**
Retired, or	19%	**22%**	17%	**19%**
Unable to work?	6%	**6%**	5%	**8%**

INCOME. Is your annual household income from all sources above or below $25,000?

	Adams		York	
	2011	2014	2011	2014
Under $10,000	2%	**4%**	3%	**3%**
$10-$15,000	5%	**5%**	5%	**6%**
$15-20,000	5%	**5%**	6%	**4%**
$20-25,000	6%	**8%**	5%	**7%**
$25 - 35,000	15%	**12%**	13%	**9%**
$35 - 50,000	15%	**15%**	17%	**15%**
$50 - 75,000	20%	**16%**	19%	**19%**
Over $75,000	24%	**26%**	26%	**25%**
Don't Know	9%	**9%**	7%	**11%**

BMIcat. Body Mass Index Score (**Note: BMI Score calculated using respondent height and weight*)

	Adams		York	
	2011	2014	2011	2014
Underweight	1%	**3%**	2%	**2%**
Normal	25%	**29%**	33%	**29%**
Overweight	36%	**37%**	34%	**37%**
Obese	38%	**32%**	32%	**32%**

S12_15. Do you now consider yourself to be...

	Adams		York	
	2011	2014	2011	2014
Overweight,	50%	**44%**	41%	**44%**
Underweight, or	2%	**4%**	6%	**4%**
About average?	48%	**51%**	53%	**52%**
Don't know	0%	**1%**	0%	**0%**

Alcohol Consumption

S13_1. During the past 30 days, have you had at least one drink of any alcoholic beverage such as beer, wine, a malt beverage or liquor?

	Adams		York	
	2011	2014	2011	2014
Yes	52%	**53%**	49%	**53%**
No	48%	**47%**	51%	**47%**

S13_2a. During the past 30 days, how many DAYS per WEEK OR per MONTH did you have at least one drink of any alcoholic beverage?

	Adams		York	
	2011 n=413	2014 n=409	2011 n=497	2014 n=545
No drinks in past 30 days	1%	**2%**	1%	**1%**
Per WEEK response	43%	**44%**	48%	**45%**
Per MONTH response	54%	**52%**	50%	**53%**
Don't know	2%	**2%**	1%	**2%**

S13_2b. Days per week response

	Adams		York	
	2011 n=179	2014 n=183	2011 n=238	2014 n=243
1	34%	**36%**	30%	**38%**
2-3	43%	**38%**	43%	**40%**
4-5	8%	**14%**	11%	**9%**
6 or more	14%	**12%**	16%	**12%**
Don't know	1%	**0%**	0%	**0%**

S13_2c. Days per month response

	Adams		York	
	2011 n=225	2014 n=216	2011 n=248	2014 n=291
1-3	65%	**59%**	62%	**66%**
4-6	17%	**26%**	17%	**21%**
7-9	4%	**2%**	6%	**2%**
10-15	6%	**4%**	9%	**5%**
16-20	2%	**3%**	0%	**1%**
21-25	0%	**1%**	2%	**1%**
26 or more days	5%	**6%**	4%	**4%**
Don't know	0%	**0%**	1%	**0%**

S13_3. One drink is equivalent to a 12-ounce beer, a 5-ounce glass of wine, or a drink with one shot of liquor. During the past 30 days, on the days when you drank, about how many drinks did you drink on the average? NOTE: A 40 ounce beer would count as 3 drinks, or a cocktail drink with 2 shots would count as 2 drinks.

	Adams		York	
	2011 n=411	2014 n=403	2011 n=490	2014 n=539
1-3	82%	**79%**	80%	**80%**
4-6	11%	**14%**	18%	**15%**
7-9	2%	**1%**	1%	**2%**
10-15	3%	**4%**	1%	**1%**
16 or more drinks	1%	**0%**	0%	**0%**
Don't know	1%	**2%**	0%	**0%**

S13_4. Considering all types of alcoholic beverages, how many times during the past 30 days did you have FIVE (men) / FOUR (women) or more drinks on an occasion?

	Adams		York	
	2011	2014	2011	2014
No binge drinking	87%	**84%**	85%	**84%**
Binge drinker	13%	**16%**	15%	**16%**

S13_5. During the past 30 days, what is the largest number of drinks you had on any occasion?

	Adams		York	
	2011 n=412	2014 n=403	2011 n=491	2014 n=540
1-3	67%	**67%**	62%	**65%**
4-6	21%	**16%**	25%	**23%**
7-9	5%	**6%**	4%	**5%**
10-15	6%	**6%**	5%	**4%**
16 or more drinks	0%	**1%**	2%	**1%**
Don't know	2%	**2%**	3%	**1%**

Substance Abuse

IntSA1. Did any of the following happen to you during the past 12 months? During the past 12 months, did you…

2014	Adams		York	
	Yes	No	Yes	No
Use illegal drugs one or more times?	5%	95%	5%	95%
Have a child under 18 who used drugs or had a drinking problem?	0%	100%	1%	99%
Use painkillers NOT prescribed for you (such as: OxyContin, Vicodin)?	1%	98%	2%	98%
Use stimulants NOT prescribed for you (such as: Adderall, Ritalin)?	1%	99%	0%	100%
Use tranquilizers NOT prescribed for you (such as: Xanax, Valium, Ativan, Klonopin)?	1%	99%	0%	100%
Take someone else's medicines for any reason?	2%	98%	2%	98%

Immunization

S14_1. Now I will ask you questions about seasonal flu. A flu shot is an influenza vaccine injected into your arm. During the past 12 months, have you had a seasonal flu shot?

	Adams		York	
	2011	2014	2011	2014
Yes	45%	**49%**	39%	**51%**
No	55%	**51%**	60%	**49%**

S14_6cod. What is the MAIN reason you have NOT received a flu vaccination for this current flu season?

	Adams		York	
	2011 n=444	2014 n=396	2011 n=610	2014 n=524
No reason, does not want to, just did not	22%	**17%**	20%	**17%**
Not effective, does not believe in it	5%	**14%**	7%	**10%**
Side effects, causes the flu, makes you sick	14%	**13%**	15%	**17%**
Healthy, never or rarely gets the flu or sick	14%	**11%**	12%	**10%**
No need, not necessary, not high risk	11%	**11%**	11%	**8%**
Too busy, no time	5%	**9%**	6%	**11%**
Afraid, does not like needles, shots, or doctors	4%	**6%**	4%	**6%**
Planning on getting it, has or is making appointment	9%	**5%**	9%	**7%**
Allergic	2%	**2%**	1%	**3%**
Cost, no insurance	3%	**2%**	2%	**3%**
Lack of availability, doctor does not have it	1%	**2%**	1%	**2%**
Other	7%	**4%**	5%	**2%**
Do not know	4%	**3%**	7%	**5%**

**Next two sections (Falls, Aging) asked only of respondents aged 45 years or older*
Adams: 2011 n=47; 2014 n=467
York: 2011 n=575; 2014 n=615

Falls

S15_1. The next questions ask about recent falls. By a fall, we mean when a person unintentionally comes to rest on the ground or another lower level. In the past 3 months, how many times have you fallen?

	Adams		York	
	2011	2014	2011	2014
None	85%	**85%**	87%	**83%**
1-2	14%	**11%**	10%	**14%**
3-4	1%	**3%**	2%	**1%**
5 or more times	1%	**0%**	1%	**0%**

S15_2a. How many of these falls caused an injury? By an injury, we mean the fall caused you to limit your regular activities for at least a day or to go see a doctor.

	Adams		York	
	2011 n=73	2014 n=70	2011 n=71	2014 n=101
None (or 1 fall & no injury)	74%	**76%**	70%	**69%**
1	22%	**17%**	23%	**23%**
2	3%	**5%**	6%	**5%**
3 or more times	1%	**3%**	1%	**2%**
Don't know	0%	**0%**	0%	**1%**

Aging

IntA1. Do you have difficulty with any of the following? Please respond with: No difficulty, some difficulty, a lot of difficulty, or unable to do this. First, do you have difficulty…

Adams	No difficulty	Some difficulty	A lot of difficulty	Unable to do this
With self-care, such as washing all over or dressing?	97%	2%	0%	0%
Raising a 2 liter bottle of water or soda from waist to eye level?	96%	3%	0%	0%
Using your hands and fingers, such as picking up small objects, for example, a button or pencil, or opening or closing containers or bottles?	86%	11%	3%	0%
Walking or climbing steps?	77%	17%	5%	1%
Doing errands alone such as visiting a doctor's office or shopping?	93%	6%	1%	1%

York	No difficulty	Some difficulty	A lot of difficulty	Unable to do this
With self-care, such as washing all over or dressing?	97%	2%	1%	0%
Raising a 2 liter bottle of water or soda from waist to eye level?	94%	4%	1%	0%
Using your hands and fingers, such as picking up small objects, for example, a button or pencil, or opening or closing containers or bottles?	83%	14%	3%	0%
Walking or climbing steps?	75%	18%	6%	1%
Doing errands alone such as visiting a doctor's office or shopping?	89%	6%	2%	2%

A2. Do you have someone who helps you take care of the daily activities that are difficult for you?

	Adams 2014 n=138	York 2014 n=204
Yes	42%	37%
No	58%	63%

A3 During the past 12 months, do you think you were treated poorly or discriminated against because of your age?

	Adams 2014	York 2014
Yes	6%	6%
No	94%	94%
Don't know	1%	1%

End of Life

EL1. Have you, personally, had experience with palliative care, end-of-life care, or hospice care either for yourself or a family member?

	Adams 2014	York 2014
Yes	34%	34%
No	66%	66%

IntEL2 Do you have any of the following legal documents that are used in end-of-life situations? Do you have…

2014	Adams			York		
	Yes	No	DK	Yes	No	DK
A living will?	37%	62%	1%	33%	66%	0%
An advanced directive related to health care treatment?	25%	69%	7%	21%	73%	6%
A power of attorney?	35%	64%	2%	32%	68%	1%
A health care proxy?	18%	71%	11%	16%	75%	9%

Cancer Screening

S20_6. Have you EVER been told by a doctor, nurse, or other health professional that you had CANCER?

	Adams		York	
	2011	2014	2011	2014
Yes	13%	**12%**	10%	**10%**
No	87%	**88%**	90%	**90%**

S20_7. How many different types of cancer have you had?

	Adams		York	
	2011 n=100	2014 n=86	2011 n=95	2014 n=101
1 type	95%	**93%**	86%	**81%**
2 types	5%	**5%**	10%	**15%**
3 or more types	0%	**2%**	0%	**2%**
Don't know	0%	**0%**	0%	**3%**

S20_8cod. What type of cancer was it?

	Adams		York	
	2011 n=100	2014 n=86	2011 n=95	2014 n=101
Breast	16%	**24%**	14%	**22%**
Heart	20%	**22%**	14%	**20%**
Cervical (cervix)	10%	**12%**	17%	**6%**
Oral (mouth or gums)	7%	**7%**	8%	**3%**
Rectal (rectum)	12%	**5%**	13%	**12%**
Thyroid	3%	**5%**	2%	**9%**
Esophageal (esophagus)	0%	**4%**	0%	**0%**
Skin (Not melanoma) includes Basal cell cancer	3%	**3%**	2%	**2%**
Colon (intestine) includes large intestine	7%	**3%**	6%	**3%**
Lymphoma (Non-Hodgkins)	1%	**3%**	4%	**2%**
Bladder	3%	**2%**	1%	**2%**
Melanoma	0%	**1%**	0%	**1%**
Kidney	0%	**2%**	0%	**0%**
Lymphoma (Hodgkins disease)	0%	**1%**	0%	**0%**
Neuroblastoma	1%	**2%**	3%	**0%**
Pharyngeal (throat)	0%	**1%**	0%	**1%**
Prostate	0%	**1%**	0%	**0%**
Bone	1%	**0%**	0%	**0%**
Brain	1%	**0%**	0%	**0%**
Head and neck	1%	**0%**	0%	**2%**
Lung	1%	**0%**	0%	**5%**
Pancreatic (pancreas)	1%	**0%**	1%	**0%**
Renal (kidney)	1%	**0%**	2%	**0%**

Testicular	5%	**0%**	0%	**2%**
Uterine	1%	**0%**	3%	**1%**
Other	0%	**0%**	0%	**4%**
Do not know	5%	**1%**	0%	**1%**

HIV/AIDS

S21_1. Except for tests you may have had as part of blood donations, have you ever been tested for HIV?

	Adams		York	
	2011	2014	2011	2014
	n=631	n=594	n=826	n=814
Yes	36%	**42%**	41%	**45%**
No	62%	**54%**	59%	**53%**
Do not know	2%	**3%**	1%	**3%**

S21_1a. Did your HIV testing take place during the past 12 months?

	Adams	York
	2014	2014
	n=252	n=364
Yes	21%	26%
No	79%	74%
Do not know	0%	1%

S21_1b. Have you ever been tested for Hepatitis C?

	Adams	York
	2014	2014
Yes	33%	32%
No	57%	58%
Do not know	10%	11%

Emotional Support and Life Satisfaction

S22_1. The next two questions are about emotional support and your satisfaction with life. How often do you get the social and emotional support you need...

	Adams		York	
	2011	2014	2011	2014
Always,	52%	**47%**	46%	**49%**
Usually,	29%	**32%**	34%	**29%**
Sometimes,	12%	**10%**	12%	**15%**
Rarely, or	3%	**2%**	5%	**3%**
Never	3%	**7%**	3%	**3%**
Do not know	1%	**1%**	1%	**1%**

S22_2. In general, how satisfied are you with your life...

	Adams		York	
	2011	2014	2011	2014
Very satisfied,	42%	**49%**	42%	**46%**
Satisfied,	53%	**46%**	51%	**47%**
Dissatisfied, or	4%	**3%**	6%	**4%**
Very dissatisfied	1%	**0%**	1%	**2%**

Anxiety and Depression

IntM17. Now, I am going to ask you some questions about your mood. When answering these questions, please think about how many days each of the following has occurred in the past 2 weeks. Over the last 2 weeks, how many days have you…

Days with depressive symptoms:

	Adams		York	
	2011	2014	2011	2014
None	42%	**45%**	39%	**41%**
One or more	58%	**55%**	61%	**59%**

M17_9. Has a doctor or other healthcare provider EVER told you that you have an ANXIETY disorder (including acute stress disorder, anxiety, generalized anxiety disorder, obsessive-compulsive disorder, panic disorder, phobia, posttraumatic stress disorder, or social anxiety disorder)?

	Adams		York	
	2011	2014	2011	2014
Yes	16%	**16%**	18%	**21%**
No	84%	**83%**	82%	**79%**

M17_10. Has a doctor or other healthcare provider EVER told you that you have a DEPRESSIVE disorder (including depression, major depression, dysthymia, or minor depression)?

	Adams		York	
	2011	2014	2011	2014
Yes	20%	**20%**	21%	**21%**
No	80%	**80%**	80%	**78%**

Social Context

M19_1. Now, I am going to ask you about several factors that can affect a person's health. Do you own or rent your home?

	Adams		York	
	2011	2014	2011	2014
Own	78%	**68%**	71%	**68%**
Rent	16%	**22%**	23%	**24%**
Other	6%	**9%**	6%	**8%**

M19_2. How often in the past 12 months would you say you were worried or stressed about having enough money to pay your (rent/mortgage)? Would you say you were worried or stressed…

	Adams		York	
	2011 n=744	2014 n=696	2011 n=944	2014 n=946
Always,	7%	**5%**	5%	**6%**
Usually,	3%	**4%**	5%	**3%**
Sometimes,	17%	**11%**	15%	**14%**
Rarely, OR	14%	**16%**	15%	**13%**
Never	54%	**60%**	55%	**59%**
Not applicable	6%	**4%**	5%	**5%**

IntM19_9. Now I'm going to ask you about various events that happen to people. I'm interested in those that happened to you at any point during the last 12 months, that is since [fill one year ago's date]. Did any of the following hardships happen to you in the last 12 months?

Economic hardships:

	Adams		York	
	2011	2014	2011	2014
None	63%	**68%**	61%	**64%**
One	18%	**15%**	16%	**17%**
Two or more	19%	**17%**	23%	**19%**

M19_9h2cod1. Where did you live?

	Adams		York	
	2011	2014	2011	2014
Family home	47%	**76%**	76%	**73%**
Friends home	24%	**14%**	12%	**24%**
Other	29%	**9%**	5%	**14%**

**Totals may exceed 100% because multiple responses were accepted*

Fruits and Vegetables

IntQ18. These next questions are about the foods you usually eat or drink. During the PAST WEEK, how often did you eat or drink each one, for example, twice a WEEK, three times a WEEK, and so forth. We are only interested in the foods YOU ate. Please include all foods you ate both at home and away from home. During the PAST WEEK, how often did you...

Adams	None		1-2 times		3-4 times		5-7 times		More than once per day		Never eat/ drink item/DK	
	2011	2014	2011	2014	2011	2014	2011	2014	2011	2014	2011	2014
Drink fruit juices such as orange, grapefruit, or tomato?	35%	37%	18%	22%	17%	15%	25%	23%	3%	1%	2%	1%
Eat fruit, not counting juice?	12%	12%	16%	18%	24%	22%	37%	40%	10%	8%	1%	0%
Eat green salad?	20%	21%	34%	31%	26%	26%	18%	21%	1%	1%	1%	1%
Eat potatoes not including French fries, fried potatoes, or potato chips?	16%	22%	52%	40%	24%	27%	7%	10%	1%	0%	1%	1%
Eat carrots?	34%	35%	41%	39%	16%	16%	7%	8%	1%	1%	1%	1%

York	None		1-2 times		3-4 times		5-7 times		More than once per day		Never eat/ drink item/DK	
	2011	2014	2011	2014	2011	2014	2011	2014	2011	2014	2011	2014
Drink fruit juices such as orange, grapefruit, or tomato?	33%	37%	21%	23%	14%	15%	28%	23%	2%	2%	1%	1%
Eat fruit, not counting juice?	15%	13%	15%	20%	22%	22%	40%	36%	7%	7%	1%	1%
Eat green salad?	24%	22%	34%	33%	24%	27%	17%	15%	1%	1%	1%	1%
Eat potatoes not including French fries, fried potatoes, or potato chips?	21%	22%	51%	49%	24%	22%	4%	6%	0%	1%	0%	1%
Eat carrots?	40%	36%	39%	39%	12%	16%	8%	8%	1%	1%	1%	1%

Q18_6. Not counting carrots, potatoes, or salad, how many SERVINGS of VEGETABLES did you eat during the PAST WEEK? (Example: A serving of vegetables at both lunch and dinner would be two servings.)

	Adams		York	
	2011	2014	2011	2014
None	4%	**4%**	6%	**6%**
1-2	10%	**11%**	12%	**10%**
3-4	22%	**22%**	23%	**21%**
5-7	38%	**36%**	33%	**40%**
8 or more servings	26%	**25%**	25%	**20%**
Do not know	1%	**1%**	2%	**2%**

Fast Food

FF1. How many days in the past week did you prepare your evening meal at home?

	Adams	York
	2014	2014
None	6%	6%
1-2 days	6%	7%
3-4 days	20%	19%
5-6 days	27%	31%
Every day	40%	36%

IntFF2. How many days in the past week did you purchase or receive food from the following sources:

Adams	None	1-2 days	3-5 days	6-7 days	DK
A senior center or food pantry?	96%	4%	0%	0%	0%
A Wal-Mart, Target, or other big box store?	60%	36%	3%	1%	0%
A convenience store, or corner store?	72%	22%	3%	2%	1%
A farmer's market?	85%	14%	1%	0%	0%
A grocery store such as Giant, Weis, Food Lion?	18%	63%	14%	4%	0%
A fast food or chain restaurant?	43%	45%	9%	3%	0%

York	None	1-2 days	3-5 days	6-7 days	DK
A senior center or food pantry?	96%	3%	0%	1%	0%
A Wal-Mart, Target, or other big box store?	56%	35%	7%	1%	1%
A convenience store, or corner store?	69%	22%	6%	2%	0%
A farmer's market?	78%	21%	1%	0%	0%
A grocery store such as Giant, Weis, Food Lion?	15%	64%	16%	4%	0%
A fast food or chain restaurant?	41%	46%	11%	2%	0%

NumA. Including yourself, how many adults 18 years of age or OLDER CURRENTLY live in this household?

	Adams		York	
	2011	2014	2011	2014
1	21%	**23%**	23%	**24%**
2	55%	**54%**	58%	**50%**
3-4	22%	**21%**	17%	**24%**
5 or more	1%	**3%**	1%	**1%**

Definitions of Selected Terms

Age-adjusted Rate: Age-adjustment is the process by which differences in the age composition of two or more populations are removed, to allow comparisons between these populations in the frequency with which an age-related health event occurs.[1]

ALA Grades: The American Lung Association grades counties in which the EPA has placed the necessary monitoring equipment and creates weighted annual averages for both high ozone days and high particle pollution days.

Binge Drinker: Males having five or more drinks on one occasion or females having four or more drinks on one occasion.[1]

Body Mass Index (BMI): Number calculated from a person's weight and height. BMI provides a reliable indicator of body fatness for most people and is used to screen for weight categories that may lead to health problems.[2]

Confidence Intervals: Interval determining the variability of a rate, ratio or percent.[1]

Current smoker: During COR interviewing, respondents who said they had smoked more than 100 cigarettes in their life were asked about the frequency of their current smoking habits. If the respondent confirmed to smoking occasionally or every day, they were labeled as smokers.

Days with depressive symptoms: During COR interviewing, respondents were asked a series of questions relating to their mood over the past month. These questions each received values that were then compiled to create a composite score for days with depressive symptoms.

Economic hardships: During COR interviewing, respondents were asked a series of questions relating to economic hardships experienced within the past year, such as falling behind on rent payments or being unable to pay for food, utilities, gasoline or medical care. These questions each received values that were then compiled to create a composite score for economic hardships experienced in the past year.

Gets needed social and emotional support: During COR interviewing, respondents were asked how often they received the social and emotional support they need. If respondents answered "Always", "Usually" or "Sometimes", they were marked as getting needed social and emotional support. If they answered "Rarely" or "Never", they were marked as not getting needed support.

Healthy literacy: During COR interviewing, respondents were asked a series of questions relating to their own confidence in understanding medical information, which was used to create a composite score that determined the threshold of health literacy.

Healthy People 2020: Healthy People provides science-based, 10-year national objectives for improving the health of all Americans.[3]

Definitions have been directly obtained from the following sources:

[1] "EpiQMS Help." Epidemiologic Query and Mapping System, Pennsylvania Department of Health, http://app2.health.state.pa.us/epiqms/EpiQMSHelp/DGEpiQMSHELP.htm.
[2] "Body Mass Index." Healthy Weight, Assessing Your Weight, Centers for Disease Control and Prevention, http://www.cdc.gov/healthyweight/assessing/bmi/.
[3] Healthy People 2020, http://www.healthypeople.gov.

Low birth Weight: Birth weight of less than 2,500 grams.[4]

Obese: Has a BMI over 30.[1]

Overweight: Has a BMI between 25 and 30.[1]

Physical activity: During COR interviewing, respondents were marked as engaging in physical activity if the respondent said to have exercised at least 30 minutes on five days of the past week.

Poverty Status of Household: During COR interviewing, respondents were asked to indicate their income level, as well as the number of people in their household. Three categories of poverty status (in poverty, low-income and other) were created based on the 2011 US Department of Health and Human Services (HSS) Poverty Guidelines. The category "In Poverty" was created based on these guidelines. Respondents were marked as "Low-income" if their income level fell within 100% and 200% of the HSS guidelines.[5]

Rate: A rate is a measure of the frequency of an event per population unit. The use of rates, rather than raw numbers, is important for comparison among populations, since the number of events depends, in part, on the size of the population.[1]

Statistical significance: The difference between two independent rates is statistically significant if the confidence intervals for two independent rates do not overlap.[1]

Stressed about paying for food: During COR interviewing, respondents were asked how often in the past 12 months they were stressed about having enough money to buy nutritious meals. If they answered "Always", "Usually" or "Sometimes", as opposed to "Rarely" or "Never", they were marked as being stressed about paying for food.

Stressed about paying for rent or mortgage: During COR interviewing, respondents were asked how often in the past 12 months they were stressed about having enough money to pay their rent or mortgage. If they answered "Always", "Usually" or "Sometimes", as opposed to "Rarely" or "Never", they were marked as being stressed about paying rent or mortgage.

Unemployed persons : Persons aged 16 years and older who had no employment during the reference week, were available for work, except for temporary illness, and had made specific efforts to find employment sometime during the 4-week period ending with the reference week. Persons who were waiting to be recalled to a job from which they had been laid off need not have been looking for work to be classified as unemployed.[4]

Unemployment rate: The unemployment rate represents the number unemployed as a percent of the labor force.[4]

Vegetable Consumption: During COR interviewing, respondents were asked how many servings of vegetables they had eaten during the past week, to determine whether they consumed three or more servings of vegetables per day on average during that week.

[4] "Economic Indicators." Definitions, UNICEF, http://www.unicef.org/infobycountry/stats_popup7.html.
[5] "2011 HHS Poverty guidelines." United States Department of Health and Human Services. http://aspe.hhs.gov/poverty/11poverty.shtml.

Data Table Links

The tables listed in this appendix provide readers direct access to data. To access the data, click on a link and you will be directed to a web page that allows you to download the data in an excel table. An internet enabled device is required.

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Center For Opinion Research Behavioral Risk Factor Survey 2014

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Logistic Regression Analyses

The logistic regression model for obesity was statistically significant, $\chi^2(24) = 130.165$, $p < .001$. The model explained 12% (Nagelkerke R^2) of the variance in dental visits and correctly classified 71% of cases. The largest effects were found for marital status, exercise, having diabetes, heart disease, asthma, health literacy, and educational attainment (Table E-1). Model sensitivity (the percent of cases that are obese that were accurately predicted) was 20% and model specificity (the percent of cases that were not obese that were accurately predicted) was 93%.

Table E-1. Logistic Regression analysis for adults who are obese

	Variables in the Equation		
	B	Std. Error	Sig.
Poverty, low-income, and other households			0.055
In poverty	-0.47	0.273	0.086
Low-income	0.179	0.158	0.259
Race and Ethnicity			0.079
Non-Hispanic White	0.734	0.386	0.057
Non-Hispanic Black	0.531	0.482	0.271
Non-Hispanic Other	-0.031	0.564	0.956
Male	-0.233	0.12	0.053
Age Range			0.674
Under 35 years old	-0.154	0.174	0.375
35-54 years old	-0.057	0.144	0.691
Educational Attainment			0.078
High school or less	0.355	0.16	0.027
Some college	0.299	0.175	0.088
Health Literacy	0.404	0.169	0.017
York City resident	0.352	0.252	0.163
Married	0.554	0.134	0.000
Economic Hardships			0.268
One economic hardship	-0.253	0.167	0.130
Two or more economic hardships	-0.282	0.206	0.172
Gets needed social and emotional support	0.273	0.231	0.238
Exercised 30 minutes on five days in past week	-0.34	0.162	0.036
Respondent is diabetic	0.817	0.145	0.000
Told has heart disease, heart attack, or stroke	0.472	0.194	0.015
Has asthma	0.465	0.196	0.017
PHQ-8 Depression Scale Symptom Category			0.198
No symptoms	0.176	0.555	0.752
Mild symptoms	0.407	0.563	0.469
Moderate symptoms	0.662	0.586	0.259
Moderately severe symptoms	0.034	0.637	0.957
Constant	-2.454	0.75	0.001

*Nagelkerke R Square = 0.115
*Percentage correct = 70.5
*-2 Log likelihood = 1755.046

The logistic regression model for depression was statistically significant, $\chi^2(20) = 202.573$, $p < .001$. The model explained 29% (Nagelkerke R^2) of the variance in depression and correctly classified 92% of cases. The largest effects were found for poverty status, race, health literacy, being a city resident, having economic hardships, social support status, exercise, and asthma (Table E-2). Model sensitivity was 13% and model specificity was 99%.

Table E-2. Logistic Regression analysis for adults who are depressed

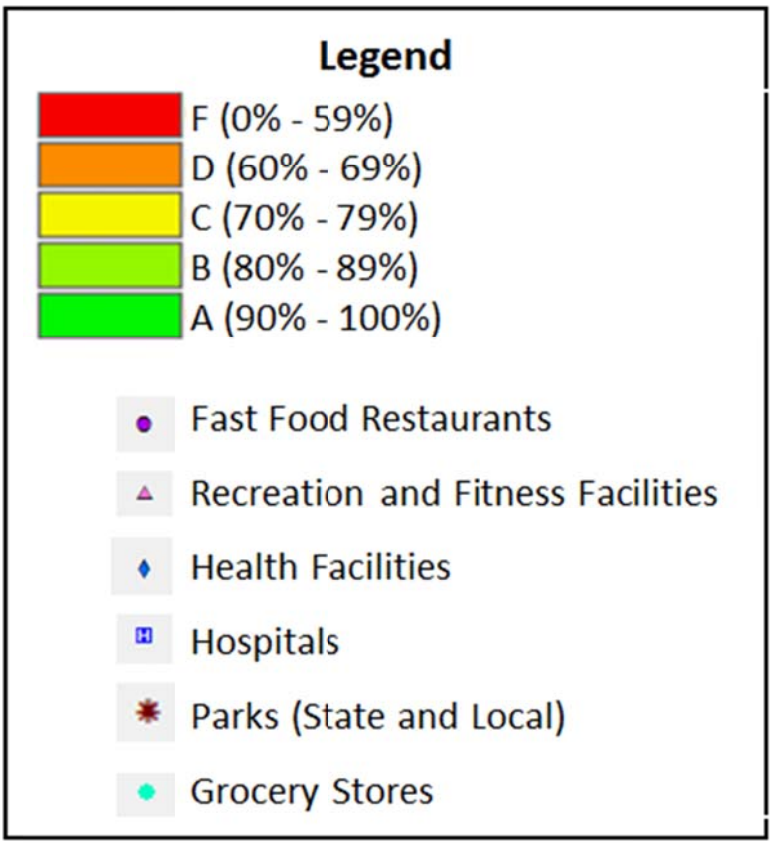
	Variables in the Equation		
	B	Std. Error	Sig.
Poverty, low-income, and other households			0.029
In poverty	0.29	0.376	0.440
Low-income	0.681	0.261	0.009
Race and Ethnicity			0.041
Non-Hispanic White	0.167	0.568	0.768
Non-Hispanic Black	-0.851	0.74	0.250
Non-Hispanic Other	-1.978	1.117	0.077
Male	-0.173	0.228	0.447
Age Range			0.160
Under 35 years old	0.365	0.318	0.251
35-54 years old	0.541	0.283	0.056
Educational Attainment			0.157
High school or less	0.69	0.369	0.061
Some college	0.668	0.39	0.086
Health Literacy	0.546	0.258	0.034
York City resident	0.939	0.356	0.008
Married	-0.318	0.242	0.189
Economic Hardships			0.000
One economic hardship	-1.416	0.261	0.000
Two or more economic hardships	-0.515	0.298	0.084
Gets needed social and emotional support	-1.281	0.286	0.000
Exercised 30 minutes on five days in past week	-0.795	0.361	0.027
Respondent is diabetic	0.423	0.243	0.082
Told has heart disease, heart attack, or stroke	0.42	0.31	0.176
Has asthma	1.027	0.284	0.000
Constant	-1.949	0.826	0.018

*Nagelkerke R Square = 0.292
*Percentage correct = 92.0
*-2 Log likelihood = 644.822

Social Determinants Mapping

Social determinants analysis attempts to geographically describe the physical environments where people live and work that can contribute to health outcomes and risks. Social determinants research highlighting the importance of poverty, residential segregation, stigma and discrimination, incarceration, and educational attainment on health outcomes provides a deeper understanding of the complex social and structural determinants of health and pinpoints additional opportunities for enhancing prevention and control efforts.

This CHNA for the first time includes social determinants analysis for each block group in Adams and York Counties. The scoring for the social determinants mapping is based on five factors: poverty, educational attainment, occupied housing units, employment, and race and ethnicity. Higher scores indicate that a block group has stronger social characteristics. Neither Adams nor York has any block groups that score an A. Adams has one block group that rates a D and none that rates an F; York County has 21 block groups that score a D and 26 that score an F (or 15% of the 322 block groups in the county). These maps show that many areas within both counties have social and economic characteristics that increase the risk of poor health. Appendix F provides additional maps that show the locations of health infrastructure in each county.



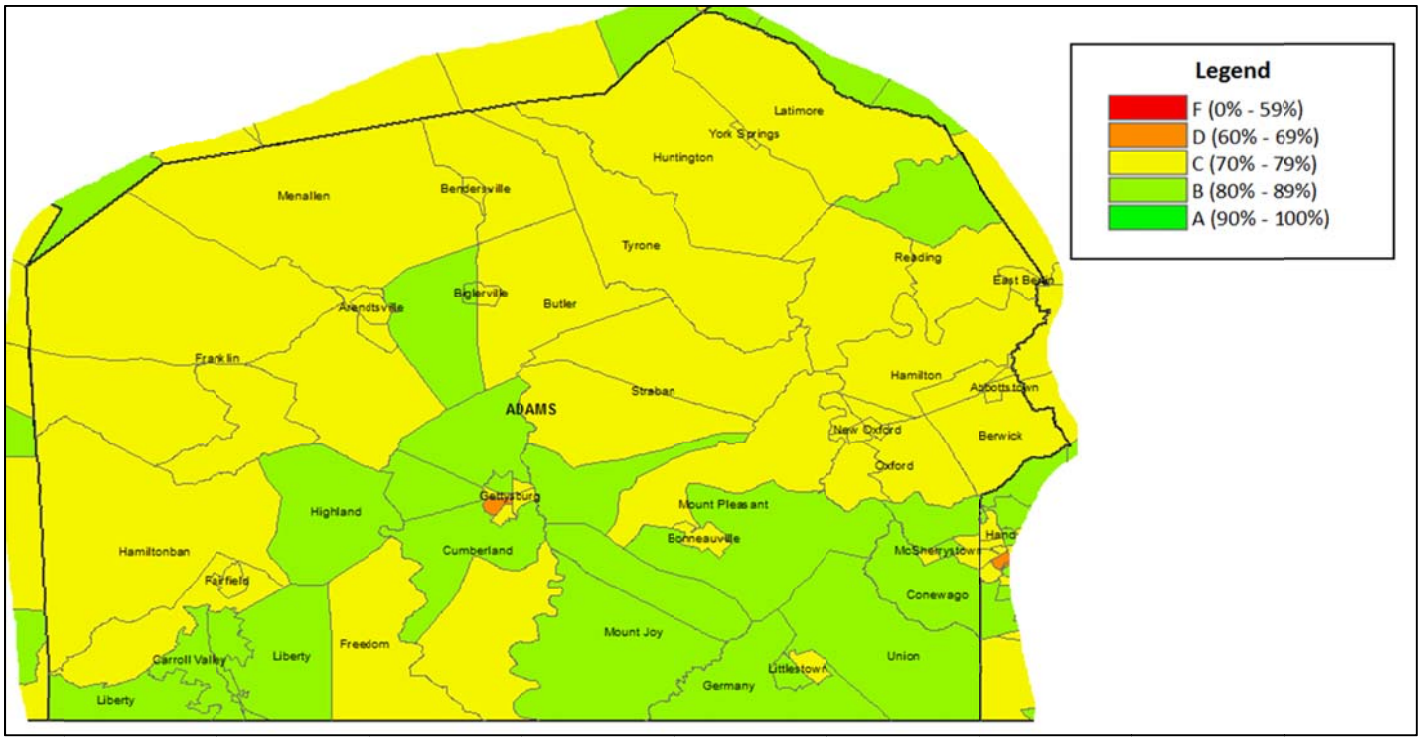


Figure 1. Social Determinants Analysis of Health for Adams County. *This figure displays the social determinants scores for each census tract in Adams County. Higher scores indicate that a census tract has stronger social characteristics. Adams has no block groups that score an A. Adams has one block group that rates a D and none that rates an F. Calculations by the Center for Opinion Research based on American Community Survey data.*

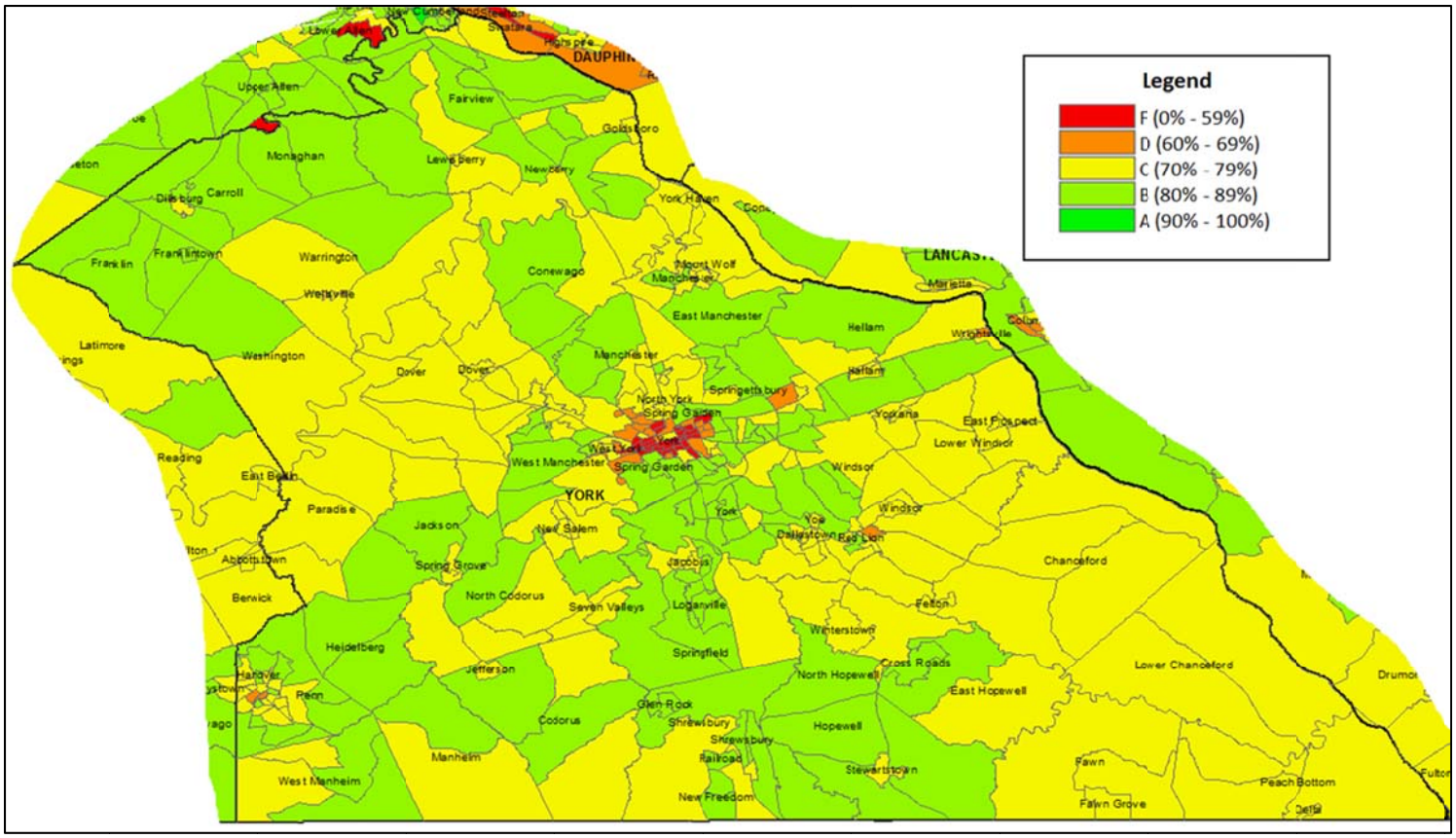


Figure 2. Social Determinants Analysis of Health for York County. *This figure displays the social determinants scores for each census tract in York County. Higher scores indicate that a census tract has stronger social characteristics. York County has no block groups that score an A. York County has 21 block groups that score a D and 26 that score an F. Calculations by the Center for Opinion Research based on American Community Survey data.*

Fast Food Restaurants

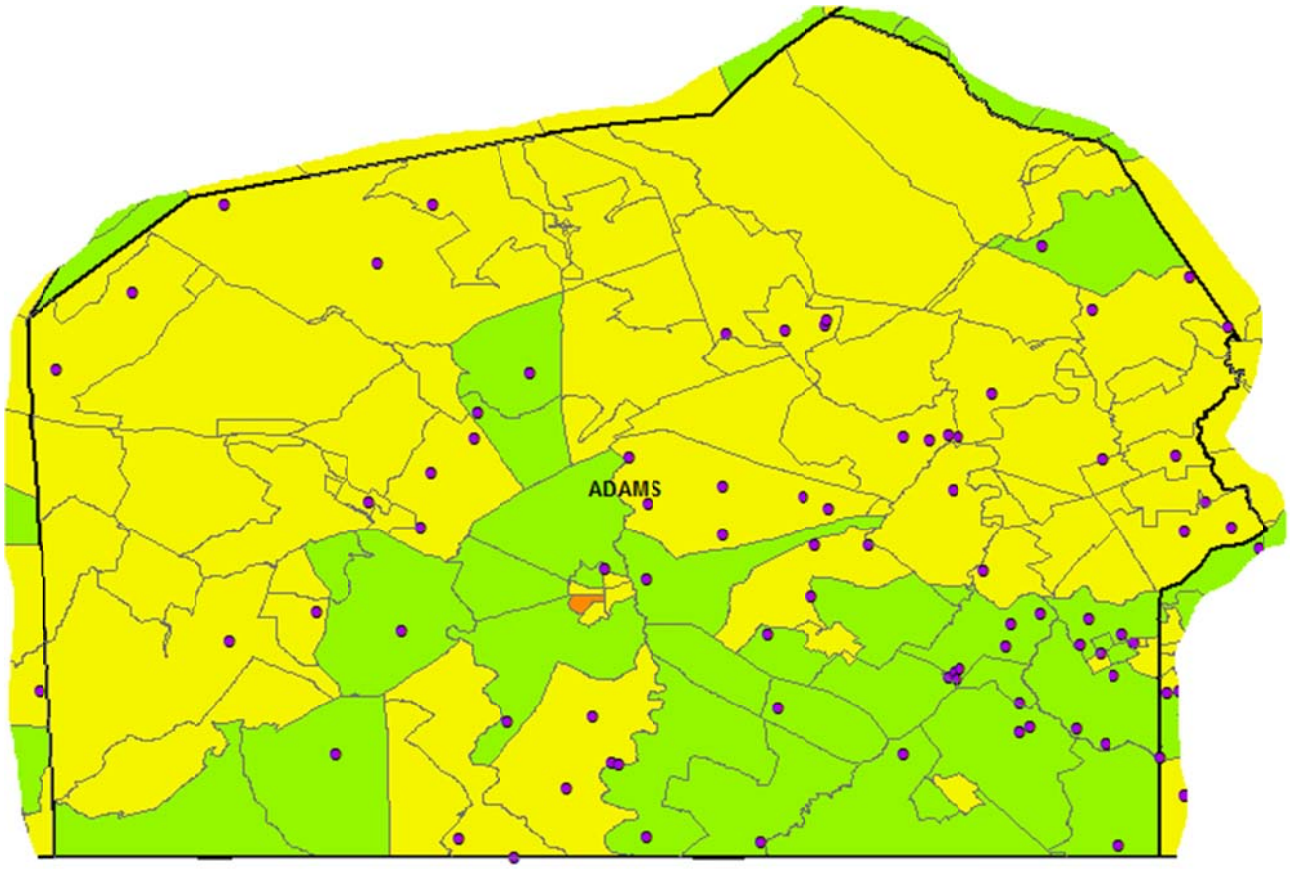


Figure 3. Fast food restaurants in Adams County, PA.

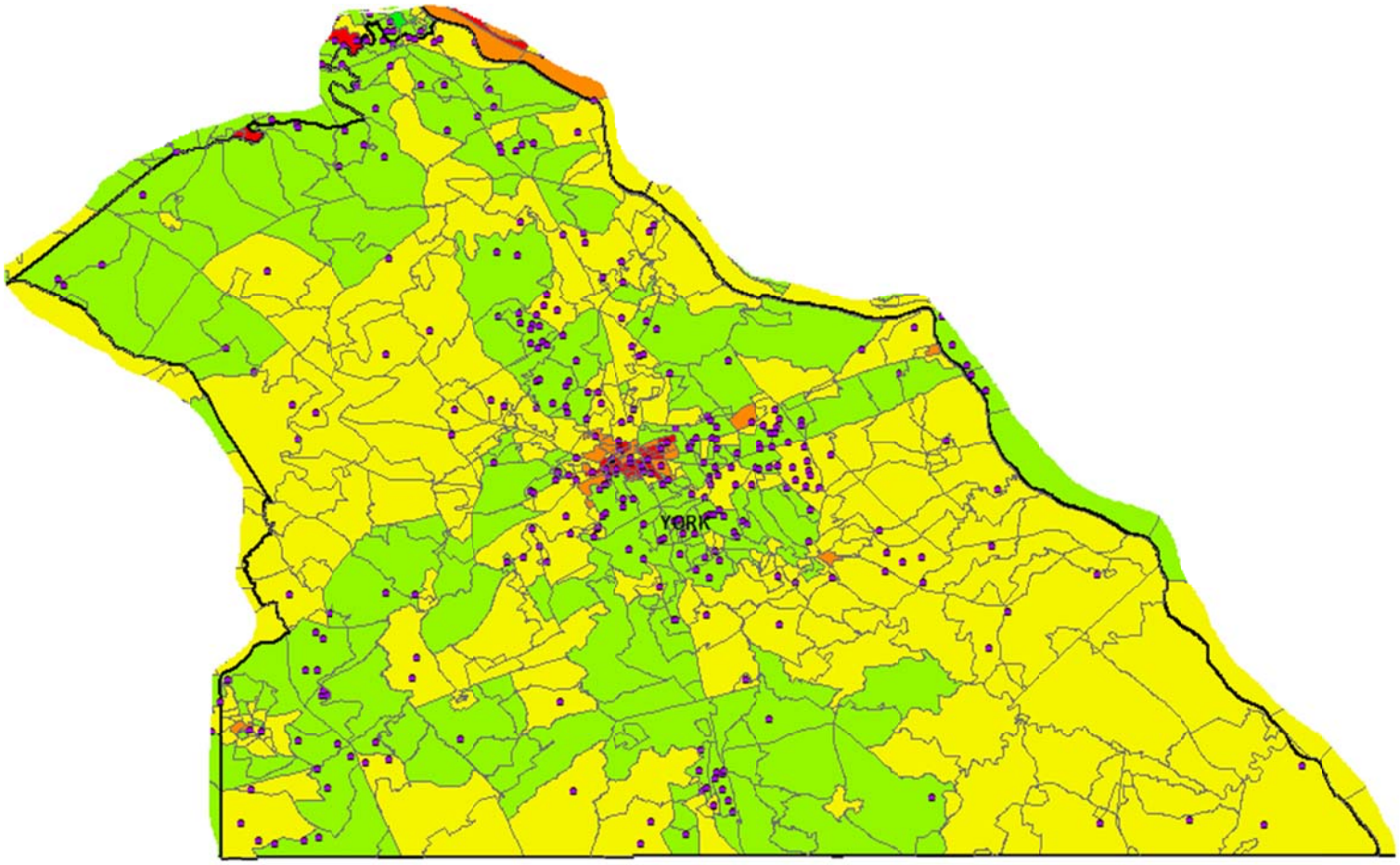


Figure 4. Fast food restaurants in York County, PA.

Recreation and Fitness Facilities

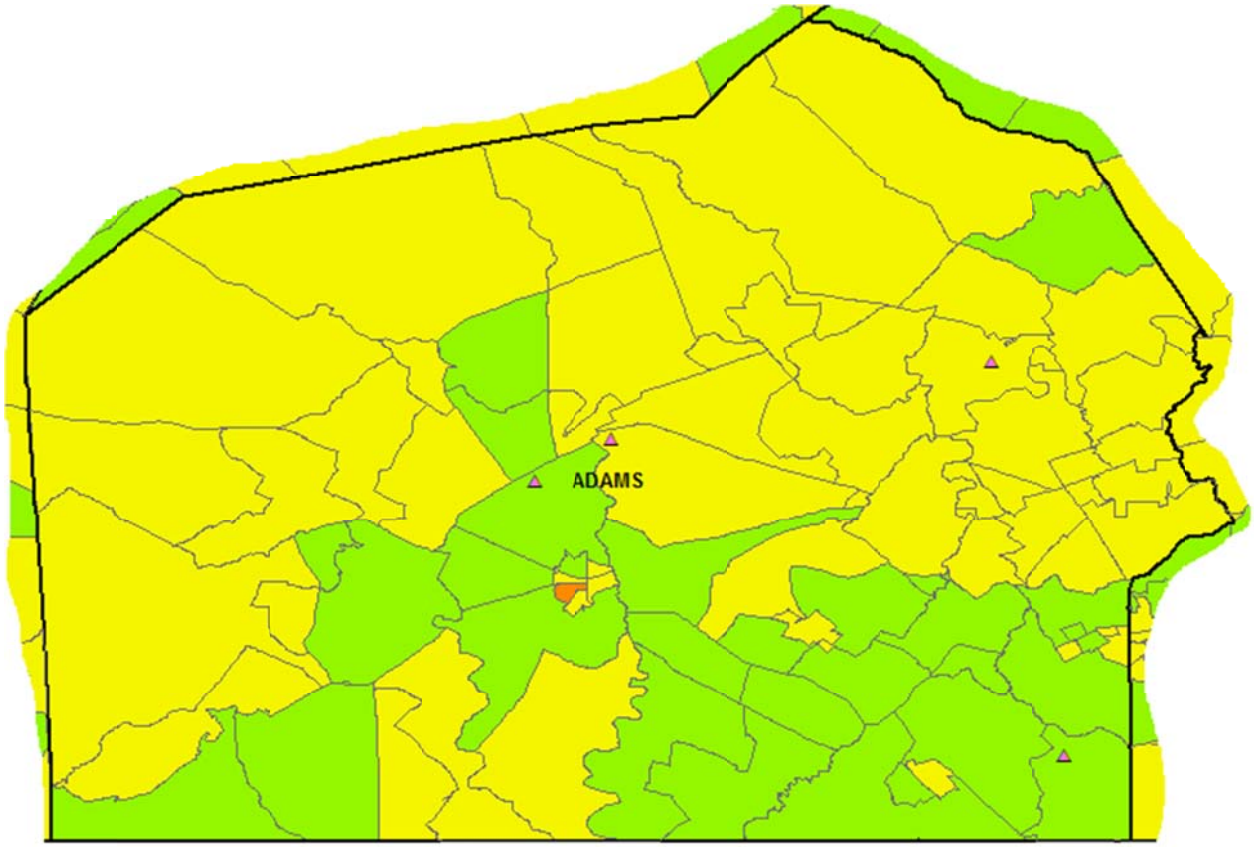


Figure 5. Recreation and Fitness Facilities in Adams County, PA.

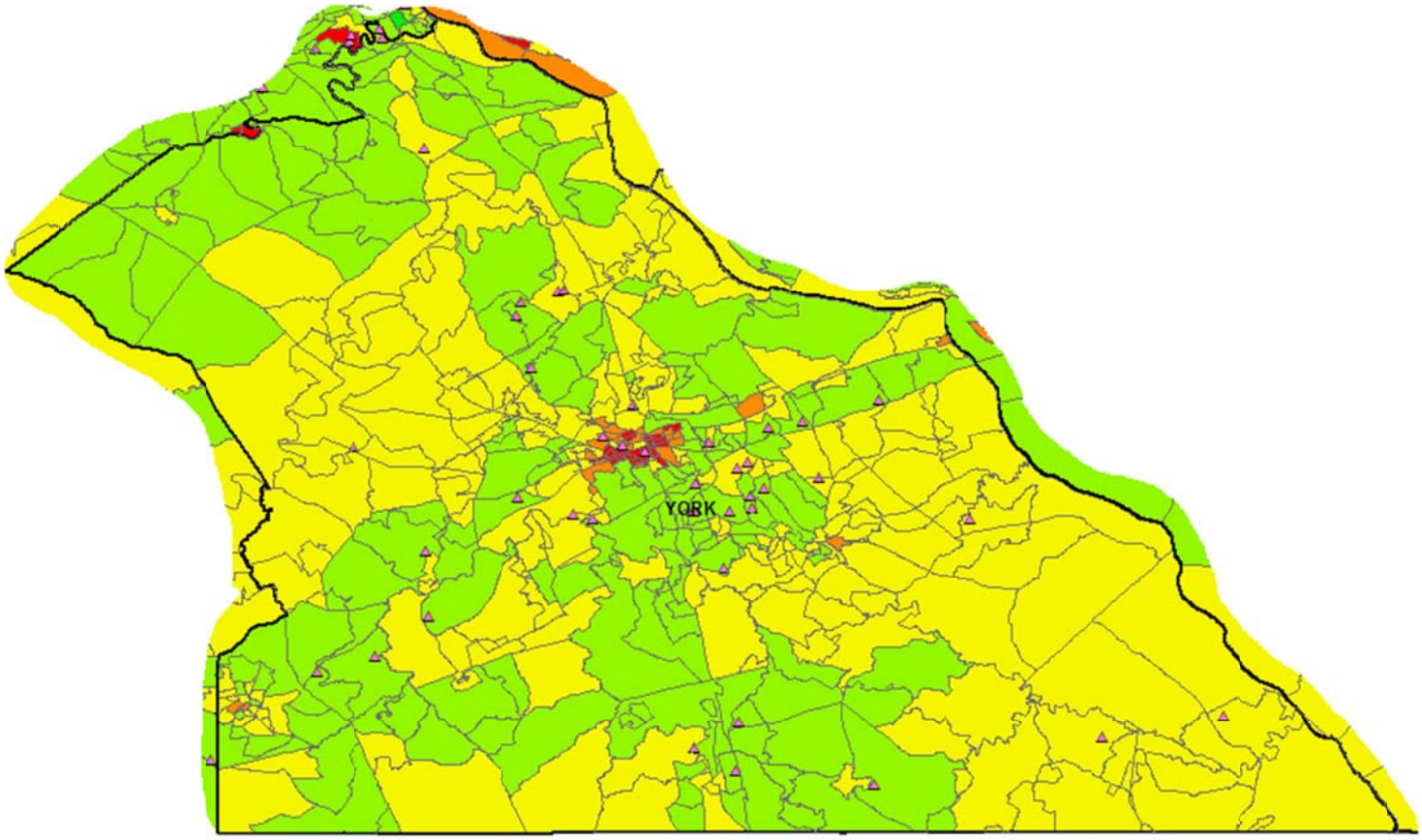


Figure 6. Recreation and Fitness Facilities in York County, PA.

Health Facilities

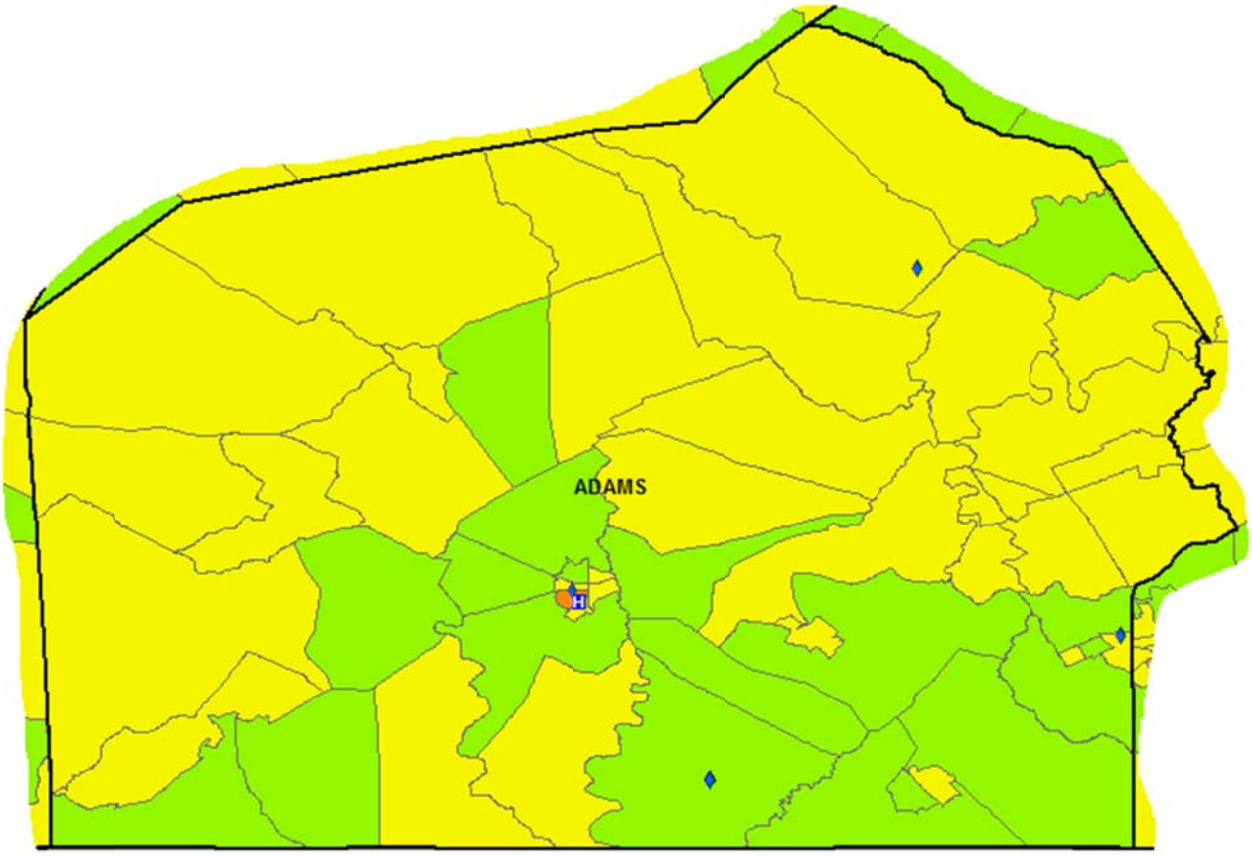


Figure 7. Health Facilities in Adams County, PA.

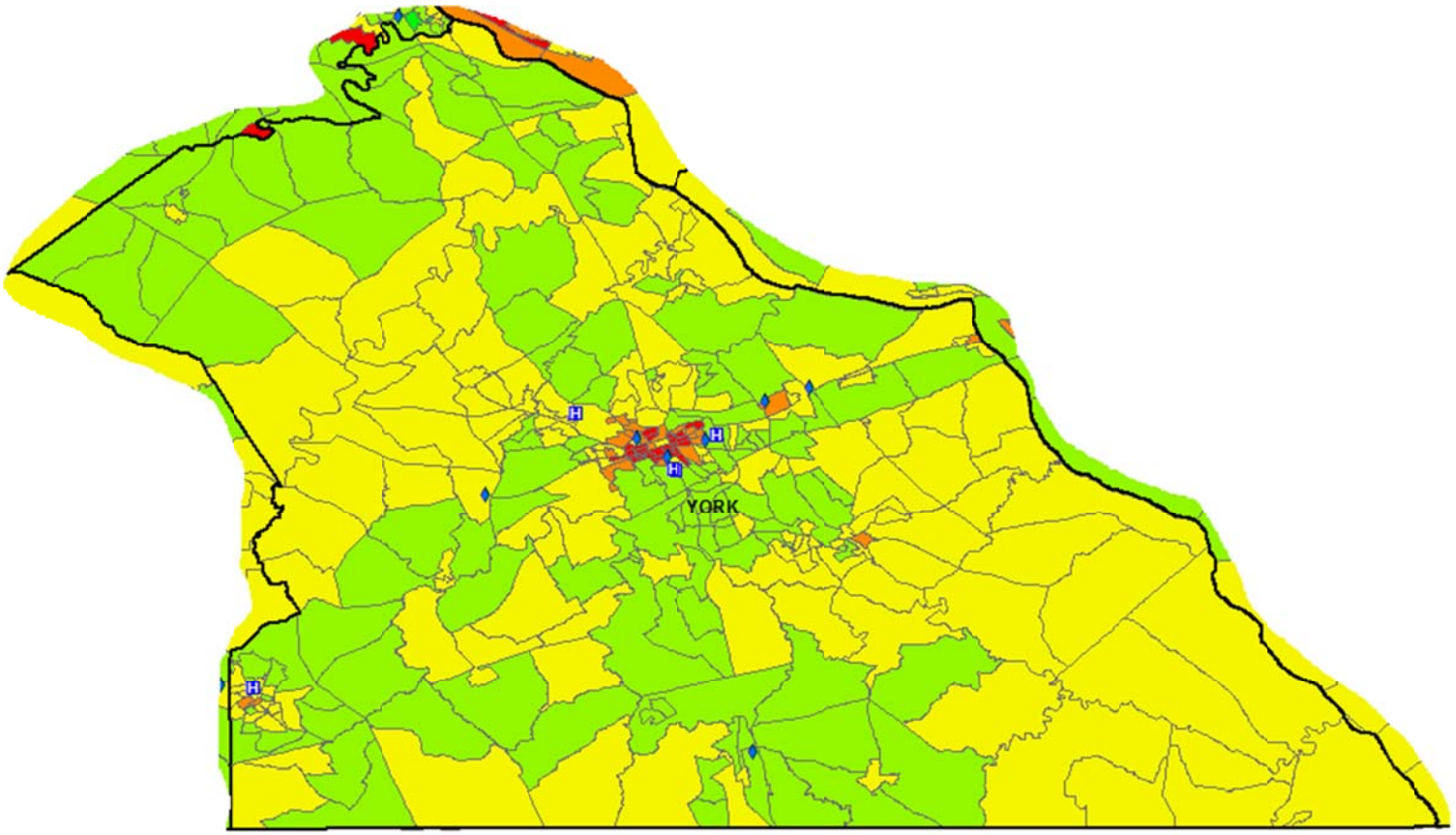


Figure 8. Health Facilities in York County, PA.

Grocery Stores

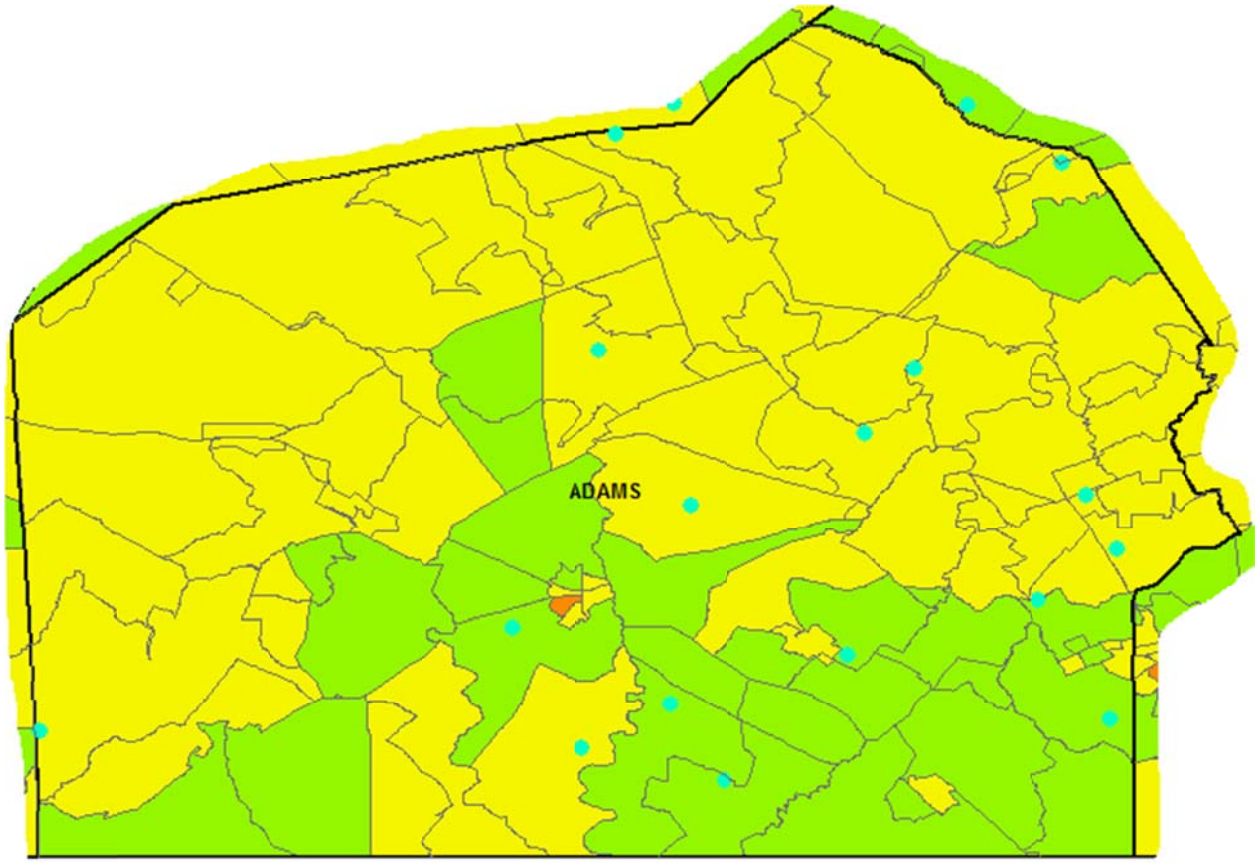


Figure 9. Grocery Stores in Adams County, PA.

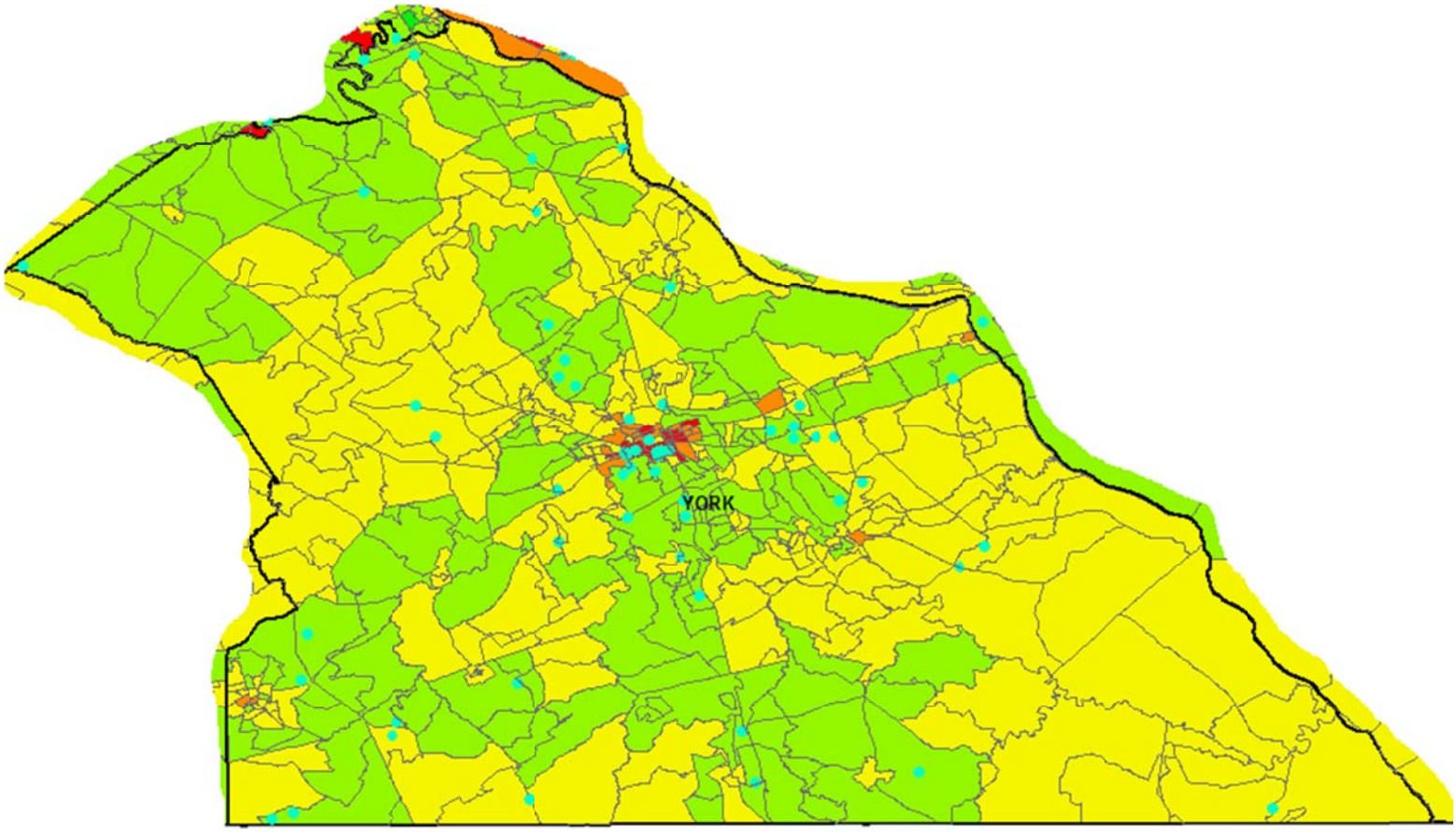


Figure 10. Grocery Stores in York County, PA.

Parks (State and Local)

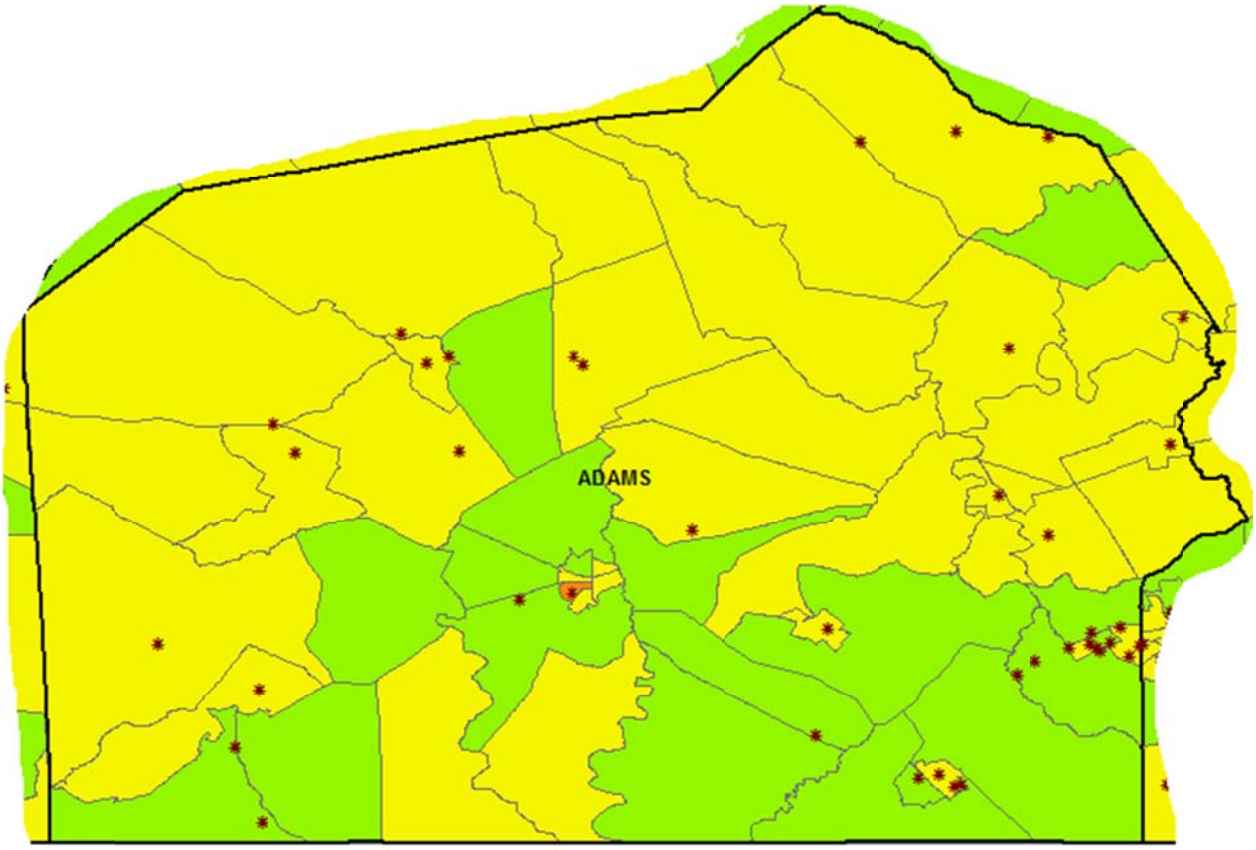


Figure 11. State and Local Parks in Adams County, PA.

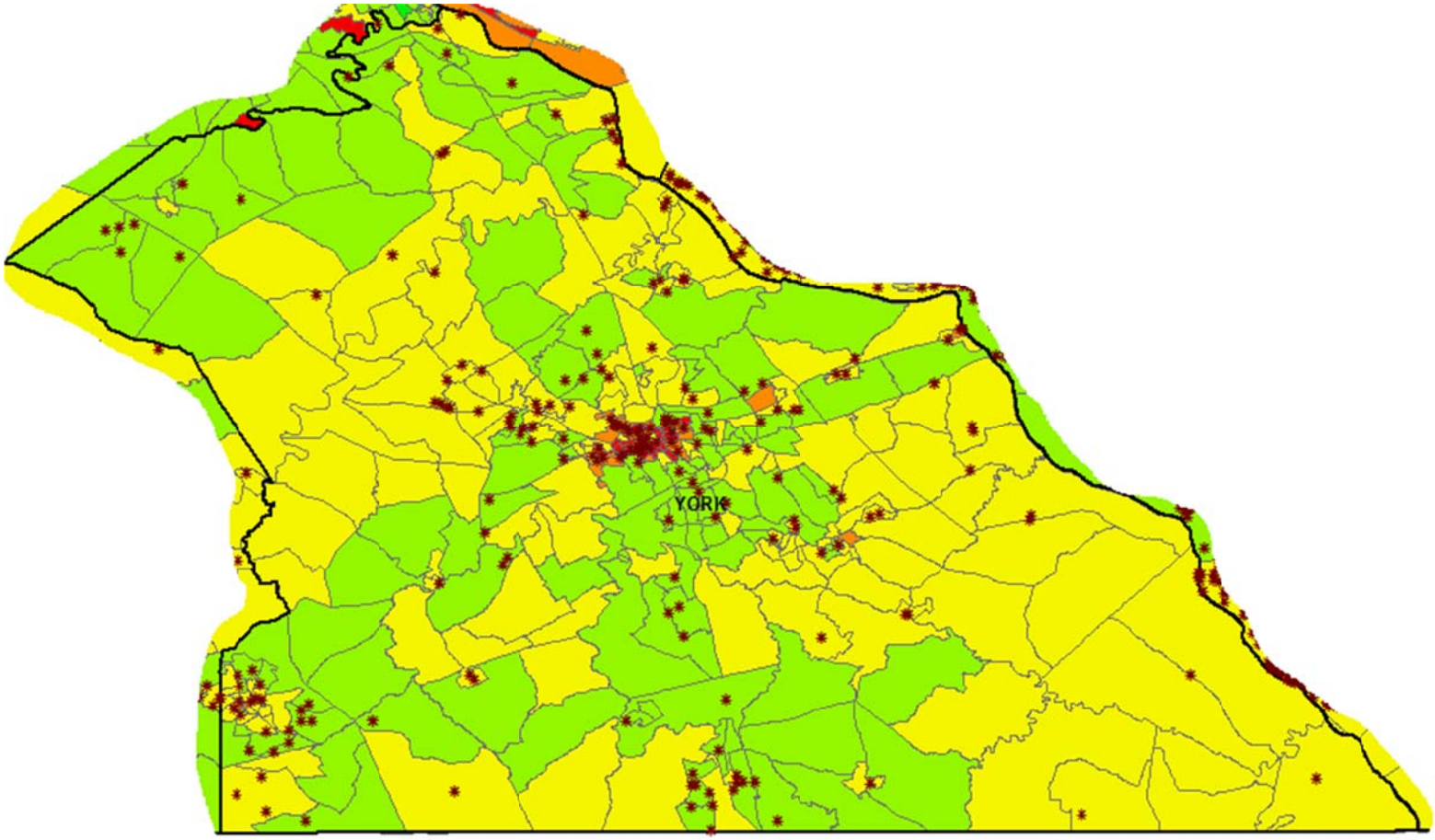


Figure 12. State and Local Parks in York County, PA.