UPMC Hanover & UPMC Memorial's 2019 COMMUNITY HEALTH NEEDS ASSESSMENT AND COMMUNITY HEALTH IMPROVEMENT PLAN

> UPMC LIFE CHANGING MEDICINE

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INTRODUCTION

UPMC HANOVER & UPMC MEMORIAL ARE WORKING TO ADDRESS THE HEALTH CHALLENGES AND STRUGGLES FACED BY THE FAMILIES LIVING IN SOUTH CENTRAL PENNSYLVANIA COMMUNITIES.





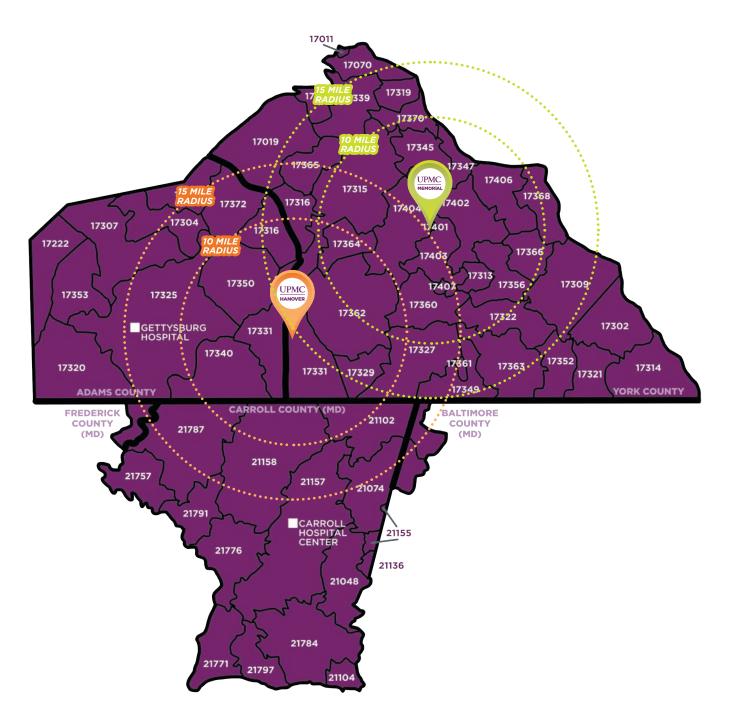
Our communities struggle with healthy eating, lack of physical activity, tobacco/ other nicotine products, behavioral health and maternal-child health issues. These challenges contribute to chronic illnesses, which translate to increased costs for individuals and our health systems. As we look to determine what steps we can take to make changes, we recognize that it takes more than one organization to make a difference. We are actively collaborating with many organizations across Adams and York Counties. Our improvement plan will provide a breakdown of who we are, what we have learned from the 2018 Community Health Needs Assessment, the initiatives we are putting in place to address the outcomes of the assessment and our partners.

WHO WE ARE:

UPMC Hanover & UPMC Memorial are part of a non-profit healthcare system that is dedicated to maintaining and improving the health and quality of life for all of the people we serve in our region.

OUR POPULATION:

The map below identifies the communities served by the UPMC Hanover & UPMC Memorial. Our region includes Adams and York Counties and Northern Maryland. Beyond our hospitals, the system offers access to health services, including but not limited to Express Care, Lab, Imaging, Rehab, Occupational Health, Specialty Services, and Primary Care Services throughout our region.



PRIMARY MEDICAL SERVICE AREA TOTAL POPULATION

PRIMAR	Y SERVICE AREA	CENSUS 2010	CENSUS 2017
17301	Abbottstown	4,053	4,218
17311	Codorus	252	220
17315	Dover	25,756	25,612
17316	East Berlin	8,266	8,059
17318	Emigsville	344	460
17329	Glenville	2,494	2,514
17331	Hanover	50,292	51,225
17340	Littlestown	10,896	10,872
17345	Manchester	7,679	7,709
17344	McSherrystown	3,656	3,543
17350	New Oxford	12,886	12,898
17354	Porters Sideling	DNA*	DNA*
17360	Seven Valleys	5,927	6,646
17362	Spring Grove/Menges Mills	13,595	13,498
17371	York New Salem	257	298
17401	York	17,687	18,135
17402	York	36,360	37,126
17403	York	39,042	39,459
17404	York	35,517	34,731
17405	York	DNA*	DNA*
17406	York	22,156	24,505
17408	York	22,507	23,332
Primary	Subtotal	319,424	325,060

2017 Populations were found using factfinder.census.gov DNA* = Data Not Available

SECONDARY MEDICAL SERVICE AREA TOTAL POPULATION

SECONI	DARY SERVICE AREA	CENSUS 2010	CENSUS 2017
17312	Craley	DNA*	DNA*
17313	Dallastown	10,899	10,460
17317	East Prospect	755	755
17325	Gettysburg	27,619	28,405
17327	Glen Rock	7,565	7,792
17342	Loganville	DNA*	DNA*
17356	Red Lion	21,610	22,093
17364	Thomasville	3,907	3,780
17366	Windsor	5,499	5,399
17368	Wrightsville	7,322	7,129
21074	Hampstead, MD	15,084	14,964
21088	Lineboro, MD	DNA*	DNA*
21102	Machester/Millers, MD	11,751	10,657
21157	Westminster, MD	36,920	37,191
21158	Westminster, MD	20,234	20,584
21787	Taneytown, MD	10,693	10,224
Seconda	ary Subtotal	179,858	179,433

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SERVICE AREA TOTAL	499,282	504,493
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2017 Populations were found using factfinder.census.gov DNA* = Data Not Available

2018 COMMUNITY HEALTH NEEDS ASSESSMENT



METHODOLOGY

UPMC Hanover & UPMC Memorial collaborated with other organizations to conduct the Adams & York County Community Health Needs Assessment 2018 (see Resource A). A Community Health Needs Assessment (CHNA) is defined by the centers for Disease Control and Prevention (CDC) (2018) as identifying key health needs and issues through systematic, comprehensive data collection and analysis.

Within the development of the 2018 assessment, several resources were used and given consideration to identify significant issues within the community. The primary and secondary data sources used for the CHNA are as follows: the Robert Wood Johnson Foundation County Health Rankings, the 2015 CHNA survey, and the Pennsylvania Department of Health's EPI QMS data retrieval system. The Regional CHNA Committee hired staff from the Floyd Institute for Public Policy at Franklin and Marshall College to assist with conducting

the surveying and data collection. The survey results were weighted by gender, education, race, and age. The CHNA survey information is based on a behavioral risk factor survey of 467 adult residents of Adams County and 793 adult residents of York County. The survey interviewing took place from December 4, 2017 through February 25, 2018. The survey sample was designed to be representative of the adult, non-institutionalized population of the two counties.

DATA ANALYSIS



As the committee began to review the data, consideration was given to the top three leading health indicators. Poverty was significantly associated with differential outcomes related to access, conditions, and prevention behaviors. Age was also significantly associated with differential outcomes related to all indicator groups. The next page displays the relationships that exist between each survey indicator and demographic information, such as poverty status, race and ethnicity, gender, and age. The color coding identifies whether or not 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.

HEALTH INDICATORS BY SELECTED DEMOGRAPHIC GROUPS, ADAMS AND YORK COUNTIES, 2018

RESULTS OF SIGNIFICANCE TESTING FOR SELECTED VARIABLES

	<i>DEMOGRAPHIC GROUPS</i> POVERTY RACE/ETH GENDER AGE
Access Indicators	POVERTI RACE/ETTI GENDER AGE
Has health care coverage	
Has a personal physician	
Did not receive health care in past year because of cost	
Has dental insurance	
Economic hardships	
Has a high deductible health plan	
Does not know how to find a mental health provider	
Agrees mental health care services are unaffordable	
Needs help reading materials from doctor/hospital	
Lack of transportation barrier to receiving health care	
Behavioral Indicators	
Participated in physical activities or exercise in past month	
Exercised 30 minutes on five days in past week	
Strength training in past month	
Smoking behavior (regular smoker) Body Mass Index Category (overweight and obese)	
Binge drinking behavior	
Consumed three servings of vegetables daily	
Regular electronic cigarette (e-cigarette/vape) user	
Currently taking opioid/narcotic prescriptions for pain	
Conditions	
Respondent is diabetic	
Told has heart disease, heart attack, or stroke	
Ever had COPD, emphysema, or chronic bronchitis	
Has high cholesterol	
Has high blood pressure Has asthma	
Has ever had cancer	
Has an anxiety disorder	
Has a depressive disorder	
PHQ-8 current depression indicator-currently depressed	
Suffers from chronic pain	
Prevention Behaviors and Context	
At least one day physical health was not good in past month	
At least one day mental health was not good in past month	
Poor health limited participation in normal activities in past month	
Visited doctor for routine checkup in year	
Visited dentist in past year	
Has ever had blood cholesterol checked Gets needed social and emotional support	
One or more days with depressive symptoms in past two weeks	
Stressed about paying rent or mortgage	
	p > 05
No significant difference Significantly different, weak association	p. > .05
Significantly different, weak association	p. < .05, sresid < 3 p. < .05, sresid > 3
Significantly different, strong association	p. < .05, sresid > 4

Note: 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.

This information is taken from the official 2018 CHNA document (http://www.healthyyork.org/media/1102/2018-community-health-needs-assessment.pdf)

DATA ANALYSIS

THE 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.



These include obesity and related behaviors, such as diet and exercise, tobacco and other nicotine product use, behavioral health issues, and maternal-child health issues. The amount of death, disability, and other complications each of these health concerns affect many individuals and families within York and Adams Counties.

Further review of 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. Behavioral risk indicators show that few residents are exercising regularly, which has a major impact on the overweight and obesity rates among our residents. In these two counties, one in three are overweight or obese. Data also shows

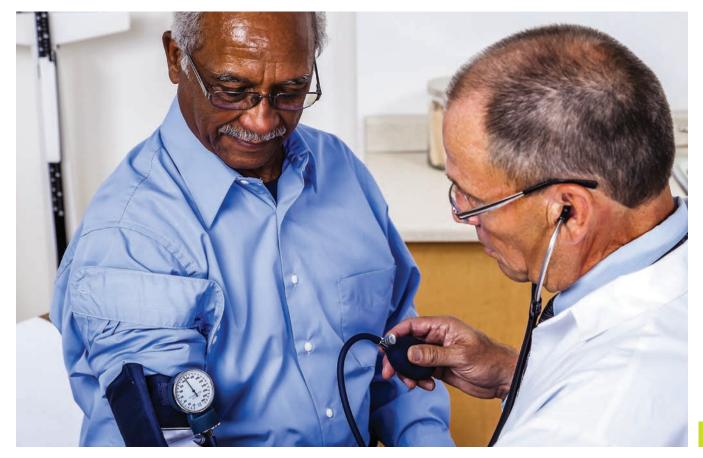
DATA ANALYSIS

that York and Adams County residents are not eating the minimum recommendation for vegetable consumption per day (3-5 servings). Rates of health conditions such as diabetes, heart conditions, breathing complications, and cancer remain steady, but are not comparatively high. Adults with high blood pressure and cholesterol continue to be an issue.

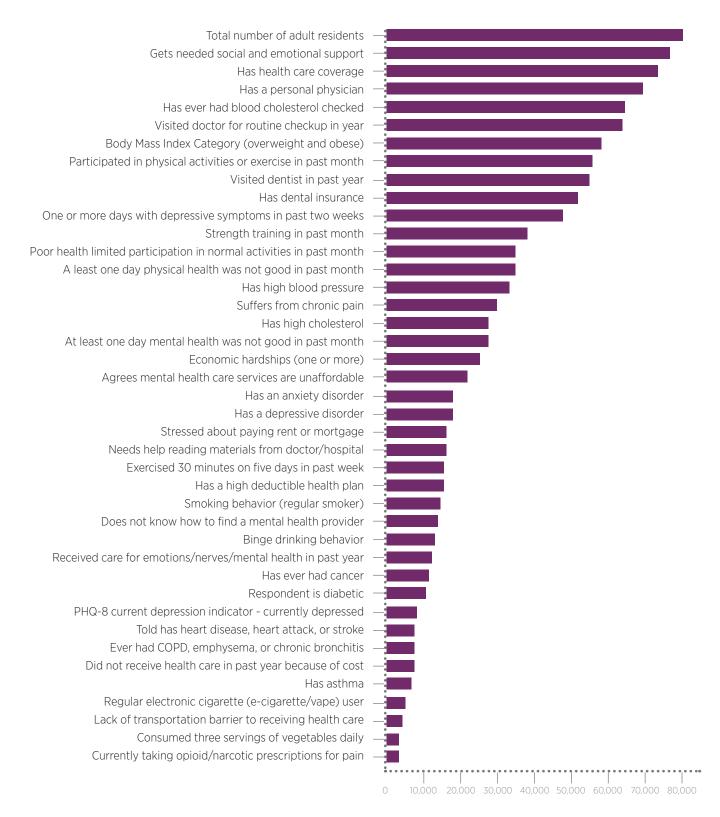
One in five residents have been diagnosed with either an anxiety or depressive disorder. Mental health diagnoses continue to rise. Two in five adults say their normal activities have been limited by their health, and that proportion seems to be increasing as well. According to the 2018 York County Coroner's report, there were 92 deaths by suicide, which has been continuing to climb over the past 5+ years. Adams County had 15 suicides in 2018. Approximately 19% (York) and 18% (Adams) currently smoke, 6% use e-cigarette/vaping products, and 5% (York) and 4% (Adams) currently chew or use other smokeless tobacco products.

In York County, 8% of live births were to low birth weight babies (<5.5 lbs) and in Adams County, that number was 7.8%. York County shows high teen (15-19 year olds) birthrates at 24 per 1,000 births and in Adams County, that number is 21 per 1,000 births. STD/ STI rates are also quite high within these counties. Chlamydia rates in York County are 348 per 1,000 and in Adams County, the rate is 203 per 1,000.

The next two pages represent the total number of residents who reported their conditions in Adams and York Counties.



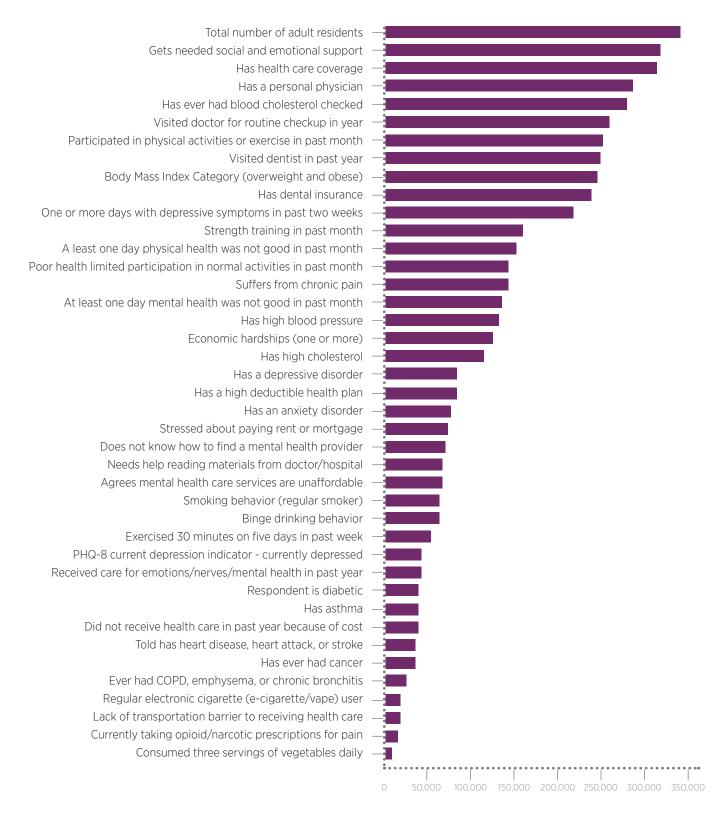
TOTAL ADULT RESIDENTS REPORTING CONDITION, ADAMS COUNTY 2018.



Note: The purple bars provide estimates of the adult population in 2018 that reported each behavior, condition, or experience. In Adams County, more than 58,000 adult residents are overweight or obese; more than 47,000 had one or more days with depressive symptoms; nearly 35,000 are limited in their daily activities by poor health; and about 30,000 suffer from chronic pain. More than 14,000 adults in Adams County smoke and almost 13,000 binge drink. The estimated error for these estimates is ± 4,196 adults (Total number of adult residents in Adams County is 80,695).

This information is taken from the official 2018 CHNA document (http://www.healthyyork.org/media/1102/2018-community-health-needs-assessment.pdf).

TOTAL ADULT RESIDENTS REPORTING CONDITION, YORK COUNTY 2018.



Note: The purple bars provide estimates of the adult population in 2018 that reported each behavior, condition, or experience. In Adams County, more than 58,000 adult residents are overweight or obese; more than 47,000 had one or more days with depressive symptoms; nearly 35,000 are limited in their daily activities by poor health; and about 30,000 suffer from chronic pain. More than 14,000 adults in Adams County smoke and almost 13,000 binge drink. The estimated error for these estimates is ± 4,196 adults (Total number of adult residents in Adams County is 80,695).

This information is taken from the official 2018 CHNA document (http://www.healthyyork.org/media/1102/2018-community-health-needs-assessment.pdf).

DETERMINING HEALTH PRIORITIES

The focus areas for the next three years are physical health, behavioral health, and maternalchild health. UPMC Hanover and UPMC Memorial have made a commitment to address the aforementioned issues over the next few years.

> Community Health Priority #1 Physical Health

> Community Health Priority #2 Behavioral Health

> Community Health Priority #3 Maternal-Child Health

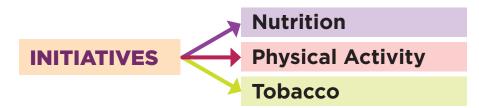


COMMUNITY HEALTH PRIORITY #1

PHYSICAL HEALTH

GOALS:

- 1. PROMOTE HEALTH AND REDUCE CHRONIC DISEASE RISK, THROUGH THE CONSUMPTION OF HEALTHFUL DIETS AND ACHIEVEMENT AND MAINTENANCE OF HEALTHY BODY WEIGHTS
- 2. DECREASE ILLNESS, DISABILITY AND DEATH RELATED TO TOBACCO USE/ VAPING AND SECONDHAND SMOKE EXPOSURE



OBJECTIVE 1: INCREASE KNOWLEDGE AND ACCESS TO FRESH PRODUCE IN THE REGION BY 2022

2018 DATA:

- Adams County 4% adults consume at least three servings of vegetables daily.
- York County 3% adults consume at least three servings of vegetables daily.

OBJECTIVE 2: IMPROVE HEALTH, FITNESS, AND QUALITY OF LIFE BY 2% THROUGH INCREASED PHYSICAL ACTIVITY

2018 DATA:

- Adams County 19% of adults exercised the recommended 30 minutes/day at least 5 days/week
- York County 16% of adults exercised the recommended 30 minutes/day at least 5 days/week

OBJECTIVE 3: REDUCE THE NUMBER OF TOBACCO/VAPING USERS BY 5% IN OUR REGION BY 2022

2018 DATA:

- Adams County 28% of adults currently smoke, use e-cigarettes/vaping products, and/or chewing tobacco/smokeless tobacco products
- York County 30% of adults currently smoke, use e-cigarettes/vaping products, and/or chewing tobacco/smokeless tobacco products
- National Youth Data 24% of high school students currently use e-cigarettes, but 41% have tried it at least once

INITIATIVES	PROGRAMS & STRATEGIES	METRICS
NUTRITION	 Provide educational learning opportunities to a variety of age groups/populations Offer free BMI screenings Hold produce stands to increase access to fresh produce Cooking demos Community outreach \$5 produce vouchers 	 Collect pre- & post-tests and # attended Collect BMI data from participants & when able to, track BMI changes over time Track # of participants and total fruits & veggies purchased Track # of participants at cooking demos Track # of participants at outreach events Track # distributed & # redeemed
PHYSICAL ACTIVITY	 Provide educational learning opportunities to a variety of age groups/populations Offer free BMI screenings Community outreach 	 Collect pre- & post-tests and # attended Collect BMI data from participants & when able to, track BMI changes over time Track # of participants at outreach events
TOBACCO	 Provide educational learning opportunities to a variety of age groups/populations Freedom From Smoking Classes 1-on-1 tobacco cessation counseling Community outreach 	 Collect pre- & post-tests and # attended Track relevant participant data & quit success rates Track relevant participant data & quit success rates Track # of participants at outreach events

This image is from UPMC Hanover's Market Days Produce Stands.





COMMUNITY HEALTH PRIORITY #2 BEHAVIORAL HEALTH

GOALS:

- 1. IMPROVE MENTAL HEALTH THROUGH PREVENTION AND BY ENSURING ACCESS TO APPROPRIATE, QUALITY MENTAL HEALTH SERVICES
- 2. REDUCE THE HIGH NUMBER OF SUICIDE RATES



OBJECTIVE 1: DECREASE THE NUMBER OF MENTAL HEALTH DAYS PEOPLE EXPERIENCE IN OUR REGION BY 2022

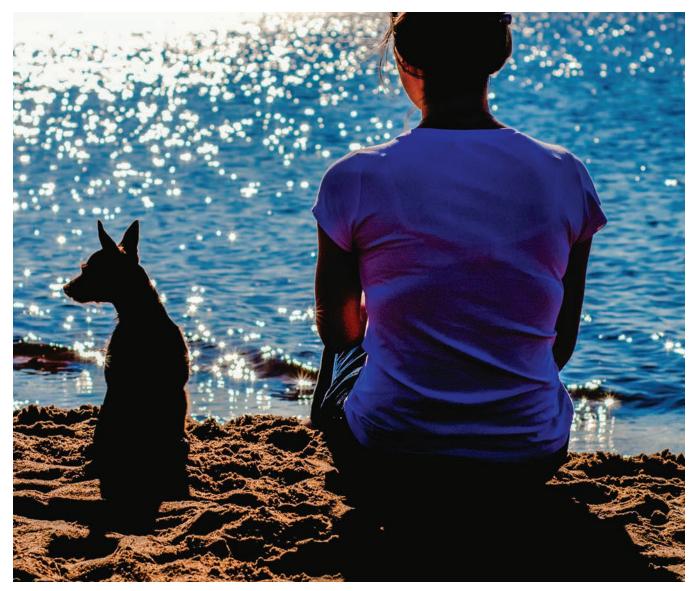
2018 DATA:

- Adams County 59% of adults experienced depressive symptoms
- York County 64% of adults experienced depressive symptoms

OBJECTIVE 2: DECREASE THE SUICIDE RATE BY 5% IN OUR REGION BY 2022

2018 DATA:

- Adams County 15 people (all ages) died by suicide in 2018
- York County 92 people (all ages) died by suicide in 2018



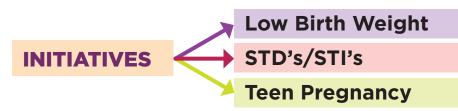
INITIATIVES	PROGRAMS & STRATEGIES	METRICS
DEPRESSION	 Provide educational learning opportunities to a variety of age groups/populations Hold Mental Health First Aid Trainings for professionals & community at-large Community outreach Support groups 	 Collect pre- & post-tests and # attended Track total # trained, collect pre- & post-tests, & track positive outcomes Track total # of participants at outreach events Track # of attendees & collect surveys
SUICIDE PREVENTION	 Provide educational learning opportunities to a variety of age groups/populations QPR Trainings for professionals & community at- large Community outreach Support groups 	 Collect pre- & post-tests and # attended Track total # trained, collect pre- & post-tests, & track positive outcomes Track total # of participants at outreach events Track # of attendees & collect surveys

COMMUNITY HEALTH PRIORITY #3

MATERNAL-CHILD HEALTH

GOALS:

- 1. IMPROVE THE HEALTH AND WELL-BEING OF WOMEN AND THEIR UNBORN CHILDREN
- 2. PROMOTE HEALTHY SEXUAL BEHAVIORS AND INCREASE ACCESS OF QUALITY SERVICES TO PREVENT STD'S/STI'S AND THEIR COMPLICATIONS
- 3. REDUCE THE NUMBER OF TEEN PREGNANCIES AND INCREASE ACCESS TO PRENATAL CARE



OBJECTIVE 1: REDUCE THE # OF LOW BIRTH WEIGHT BABIES BORN IN OUR REGION BY 5% BY 2022

2018 DATA:

- Adams County 7.8% of live births were low birth weight
- York County 8% of live births were low birth weight

OBJECTIVE 2: REDUCE THE RATE OF TEENS WITH STD'S/STI'S IN OUR REGION BY 5% BY 2022

2018 DATA:

- Adams County 203 cases per 1,000 of chlamydia
- York County 348 cases per 1,000 of chlamydia

OBJECTIVE 3: DECREASE THE # OF TEEN PREGNANCIES BY 10% IN OUR BY 2022

2018 DATA:

- Adams County 21 per 1,000 births were to teen moms
- York County 24 per 1,000 births were to teen moms



INITIATIVES	PROGRAMS & STRATEGIES	METRICS
LOW BIRTH WEIGHT	 Promote & support local prenatal & postnatal care/ support services to pregnant women & teens Distribute produce vouchers for pregnant moms and new parents 	 Track total # of people who received info and # of referrals Track # of produce vouchers distributed
STD'S/STI'S	1. Provide or fund local, established educational programs for STDs/STIs	1. Collect data from funded programs and collect pre- & post-tests and # attended
TEEN PREGNANCY	1. Provide or fund local, established programs for teen pregnancy prevention programs	1. Collect data from funded programs and collect pre- & post-tests and # attended

THE 2018 REGIONAL CHNA COMMITTEE

Kevin Alvarnaz WellSpan Health

Jenny Black Family First Health

Kelly Blechertas York County Human Services

Cathy Bollinger York County Community Foundation

> **Amy Dailey** Gettysburg College

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> **Eve Gardner** Healthy York Network

Kathy Gaskin Healthy Adams County Sukhdeep Gill, PhD Penn State York

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> Tamara Ramer UPMC Hanover

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Scottie Thompson Center for Opinion Research Franklin & Marshall College

THE 2019 UPMC HANOVER & UPMC MEMORIAL CHNA SUBCOMMITTEE

Adam Bennett Tobacco Cessation Coordinator

Lisa Docimo Interim ED Nurse Manager

Mary Flinner Director of Social Services

Amy Hursh Maternity Center Clinical Manager

> **Claudia Kroeze** RN Diabetes Educator

Pamela Miller Tobacco Cessation Coordinator

Tina Nixon VP of Mission Effectiveness

> Kathleen Numer Dietitian

Stacy Pearl Community Health Educator

Kimberly Plitsch Labor & Delivery Nurse Manager **Tamara Ramer** Community Health Educator

> **Melissa Story** ED Nurse Manager

Roberta Tripp Case Management Nurse Manager

Nadine Wolf Supervisor of Nutrition Services

> Martha Yost RN Diabetes Educator

REFERENCES

Healthy York County Coalition. (2019) Community health needs assessment. Retrieved from http://www.healthyyork.org/community-health-needs-assessment/current-assessment

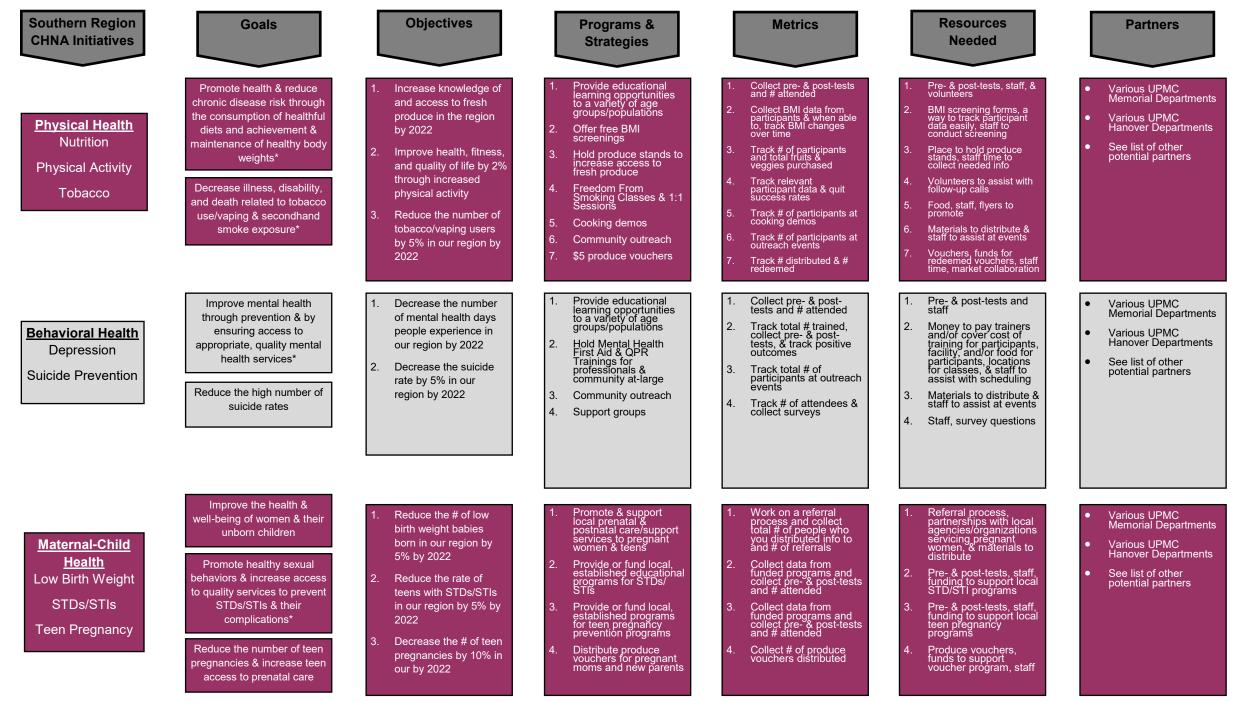
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2019-2022 COMMUNITY HEALTH IMPROVEMENT PLAN OVERVIEW

UPMC | MEMORIAL

UPMC | HANOVER



*Utilized or adapted from Healthy People 2020 Goals & Objectives.

UPMC Hanover & UPMC Memorial 2015-2018 CHNA Evaluation of Impact

UPMC HANOVER

UPMC Hanover's top priority areas from the 2015 CHNA were as follows:

- 1. Adult Overweight/Obesity
 - a. Fruits and Vegetables
 - b. Physical Activity
- 2. Adult Mental Health
 - a. Depression

UPMC Hanover focused on getting more involved in community events, coalitions/task forces, developing programs, conducting speaking engagements, and creating partnerships with local agencies, organizations, and businesses in the Greater Hanover Area and throughout York & Adams Counties, to address the needs of the 2015 CHNA findings. Our target populations were the community at-large, our patients, and our employees.

Coalitions/Task Forces/Boards: York & Adams Counties

- Adams County:
 - o Hanover-Adams Senior Resource Group (covers Hanover & Adams County)
 - o Healthy Adams County: Suicide Prevention Subcommittee
 - o Healthy Adams County's Quarterly Networking Meetings
- York County:
 - o Behavioral Health Task Force
 - o Diabetes Coalition of York County
 - Falls Free Coalition of York County co-chair role
 - Feeling Blue Committee
 - o Greater Hanover Healthcare Committee chair role
 - o Regional Community Health Needs Assessment (CHNA) Committee
 - Senior Information Networking Group (SING)
 - o Senior Outreach Services (SOS) Coalition of York County
 - o Suicide Prevention of York Board of Directors secretary role
 - o Windy Hill Senior Center Board of Directors

Programs

- Overweight/Obesity (Nutrition/Physical Activity)
 - \$5 Produce Vouchers
 - Given at Market Days Produce Stands, health fairs/outreach events in the Hanover area, at Hanover Medical Group doctor's offices, etc. Community Health Initiatives covers the cost of the produce vouchers to be used at the produce stand at the Markets at Hanover. The Markets at Hanover invoices UPMC Hanover 2-4 times per year for the vouchers that were turned in.

- 2016 Data: 192 claimed vouchers
- 2017 Data: 171 claimed vouchers
- 2018 Data: 322 claimed vouchers
- o Keep It Fresh
 - Monthly healthy recipes that include a fruit, vegetable, and exercise of the month, as well as facts about the fruit & vegetable. These were posted on our website, distributed to our staff via employee newsletters, went into our Healthy Perspectives magazine that was distributed to the Greater Hanover Area by mail, and to distribute at community events.
- o Free Fruit Friday
 - Employees and hospital visitors coming into the cafeteria may choose a free piece of fruit on the 2nd and 4th Fridays of the month.
 - 2016 Data: 1,773 pieces of fruit distributed
 - 2017 Data: 670 pieces of fruit distributed
 - 2018 Data: 652 pieces of fruit distributed
- o Market Days Produce Stand
 - In partnership with the Markets at Hanover, these stands are held on the 1st Friday of the month from May through September at Hillside Medical Center (took place 2017-2018). Prior to that, the produce stands were held inside Hanover's main lobby for visitors, patients, hospital volunteers, and employees the 1st and 3rd Thursdays from August-October (held in 2015-2016). \$5 produce vouchers and other nutrition-related information were distributed during these events.
 - 2015 Data: 124 people came through 5 total produce stand days
 - 2016 Data: 130 people came through 6 total produce stand days
 - 2017 Data: 214 people came through 4 total produce stand days
 - 2018 Data: 169 people came through 5 total produce stand days
- Grocery Store Tours
 - Health Educator was trained to provide Grocery Store Tours, in partnership with Giant Food Stores in August 2018. These tours teach participants how to get through the grocery store the healthiest way possible.
 - 2018 Data: 2 tours conducted with a total of 27 participants
- o Free Health Screenings
 - BMI
 - Free BMI screenings are offered at businesses and at community events.
 - 2017 Data: 183 people screened, 5 different locations
 - o 2018 Data: 111 people screened, 3 different locations
 - Blood Pressure
 - Free blood pressure screenings held at health fairs, senior centers, older adult residential communities, businesses, YMCA, UPMC Hanover Main Lobby, etc. For any adult interested in having their blood pressure checked. Some locations are ongoing monthly or quarterly and some are at a specific one-time event.
 - o 2015 Data: 585 people screened, 5 different locations

- o 2016 Data: 910 people screened, 12 different locations
- o 2017 Data: 594 people screened, 20 different locations
- o 2018 Data: 321 people screened, 12 different locations
- Fall Risk Assessments
 - Free screening for older adults to understand how at risk they are for falling and if at high risk, provide them with materials for our Matter of Balance classes. Held at senior centers.
 - o 2016 Data: 11 people screened, 1 location
 - o 2018 Data: 59 people screened, 2 locations
- Sports Physicals
 - Free sports physicals are conducted by our Medical Fitness Center staff at schools in York and Adams Counties.
 - o 2015 Data: 1,228 students screened, 5 different schools
 - o 2016 Data: 1,336 students screened, 4 different schools
 - o 2017 Data: 913 students screened, 2 different schools
 - o 2018 Data: 722 students screened, 1 school
- o Matter of Balance
 - Program for older adults that helps reduce their fear of falling, learn how to make environmental changes in and around their homes, become more assertive, learn ways to change their fall-risk behaviors, and practice exercises that will help increase their strength, improve balance, and increase flexibility. Classes are 2 hours in length and held once/week for 8 total sessions.
 - 2016 Data: 130 people participated, 9 total classes
 - 2017 Data: 20 people participated, 2 total classes
 - 2018 Data: 28 people participated, 2 total classes

Health Fairs/Outreach Events

- Represent UPMC Hanover at various community, business, and school events throughout the calendar year, each time bringing materials on nutrition, physical activity, and mental health.
 - o 2015 Data: 30 events and 11,629 people served
 - o 2016 Data: 21 events and 6,401 people served
 - o 2017 Data: 27 events and 9,871 people served
 - o 2018 Data: 39 events and 7,976 people served

Community Presentations

- UPMC Hanover staff conducts presentations on topics relating to the priority areas for community members, groups, businesses, professional groups, schools, etc. We also offer presentations for the same groups in partnership with other agencies/organizations who specialize on the specific CHNA focus areas (nutrition, physical activity, and mental health).
 - o 2015 Data: 768 people served, 38 presentations conducted
 - o 2016 Data: 863 people served, 34 presentations conducted
 - o 2017 Data: 801 people served, 24 presentations conducted
 - o 2018 Data: 604 people served, 22 presentations conducted

MEMORIAL

UPMC Memorial followed UPMC Hanover's top priority areas from the 2015 CHNA:

- 1. Adult Overweight/Obesity
 - a. Fruits and Vegetables
 - b. Physical Activity
- 2. Adult Mental Health
 - a. Depression

UPMC Memorial focused on getting more involved in community events, coalitions/task forces, developing programs, conducting speaking engagements, and creating partnerships with local agencies, organizations, and businesses in York County, after not being involved in community-related efforts from their former for-profit status. In 2018, they began working on programming to address the needs from the 2015 CHNA findings. UPMC Memorial focused mainly on the community at-large.

Coalitions/Task Forces

- York County
 - o Connecting the Links to Nutrition Networking Group
 - o Healthy York County Coalition's Prevention & Wellness Committee
 - Regional Community Health Needs Assessment (CHNA) Committee
 - o York County Food Alliance's Healthy Food Access Working Group

Programs

- Overweight/Obesity (Nutrition/Physical Activity)
 - o Grocery Store Tours
 - Health Educator was trained to provide Grocery Store Tours, in partnership with Giant Food Stores in August 2018. These tours teach participants how to get through the grocery store the healthiest way possible.
 - 2018 Data: 1 tour conducted and 6 total participants
 - o Kids in the Kitchen
 - Offer nutrition classes to 3rd and 4th grade classes in York County School Districts. Kids will learn the importance of eating healthy foods, choosing a variety of different foods, and using MyPlate as a guide for a balance diet. They will have hands on opportunity making a healthy snack and trying new foods.
 - 2018 Data: 2,175 students reached, 86 classroom programs
 - o A Walk in the Park Program
 - Community walks are held once/week from April-October 2018 at Cousler Park in York. UPMC Memorial staff from Marketing, Development, or Community Health & Wellness were always present at each walk and then other UPMC Memorial, UPMC Hanover, or UPMC Pinnacle staff were invited to "walk and talk" with the participants. Discussions involved information about their positions within their respective hospital location and/or on specific topics such

as heart health, fall prevention, diabetes, nutrition, suicide prevention, new surgery techniques, medicine, etc. Walks were not held if it was raining.

- 2018 Data: 282 people served, 19 total walks held
- o Cooking Demos
 - Partnered with Central Market York to hold a cooking demo in their Performance Kitchen December 2018 (UPMC Memorial's Dietitian & Health Educator). UPMC Memorial is an annual sponsor of this venue.
 - 2018 Data: 1 cooking demo held with 30 people in attendance

Health Fairs/Outreach Events

- Represent UPMC Memorial at various community, business, and school events throughout the calendar year, each time bringing materials on nutrition, physical activity, and mental health.
 - o 2018 Data: 13 events and 1,515 people served

Community Presentations

- UPMC Memorial staff conducts presentations on topics relating to the priority areas (nutrition, physical activity, and mental health) for community members, groups, businesses, professional groups, schools, etc.
 - o 2018 Data: 88 people served, 9 presentations conducted

RESOURCE A

Adams and York County Community Health Needs Assessment 2018

Overview of the Adams and York Communities











Adams and York County Community Health Needs Assessment 2018

Overview of the York and Adams Communities

May 2018

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. Family First Health, UPMC Hanover, UPMC Memorial, and WellSpan Health are the healthcare systems that worked together with Franklin and Marshall College Center for Opinion Research to create this assessment and develop the findings. Other contributors include City of York - Bureau of Health, Gettysburg College, Healthy York Network, Penn State York, South Central Community Action Programs (SCCAP), Inc., TrueNorth Wellness Services, United Way of York County, York College, York County Community Foundation, and York County Human Services. 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, healthrelated 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 links to all data tables. Appendix E provides a summary of secondary demographic, employment, housing and income data for both counties. Appendix F contains county health rankings data from the Robert Wood Johnson Foundation County Health rankings.

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 countylevel 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 461 adult residents of Adams County and 799 adult residents of York County. The survey interviewing took place from December 4, 2017 through February 25, 2018. 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 EDDIE 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. These conditions are consequential because they effect many residents and because they are related to increased death and disability.

Access indicators are generally favorable, with most residents of both counties reporting they have health care coverage, a personal physician and dental insurance. Still, about one third of residents in each county had some economic hardships and around one in ten skipped medical treatment due to cost. Consequentially, one in four residents of both counties report having a high deductible health plan, which is associated with reduced health care use, and many also believe that mental health services are unaffordable. More positively, the proportion of residents in both counties who need help reading medical information is declining.

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 three in four are overweight or obese. The continuing decline in physical activity and increases in binge drinking behavior since 2014 are a concern, although the reduction in the proportion of regular smokers is a positive behavioral trend should it continue.

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. Mental health diagnoses continue to rise. Two in five adults say their normal activities have been limited by their health, and that proportion seems to be increasing as well. About two in five residents of both counties experience chronic pain, which is one of the top five causes of disability in the United States.

The health indicators measured by the Behavioral Risk Factor survey remained mostly stable over the past six years, but there are several notable, troublesome trends. Participation in physical activities seems to be declining, while obesity, binge drinking rates, and mental health issues seem to be increasing.

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Economic hardships and skipping care because of costs has remained stable despite low unemployment and favorable economic growth.

There are notable health disparities within Adams and York counties. Poverty is significantly associated with differential outcomes related to access, conditions, and prevention behaviors. Age is significantly associated with differential outcomes related to all indicator groups. Importantly, these patterns are persistent, in that there are few changes in which groups experience disparities compared to 2011 or 2014. Public health researchers now frequently attribute these persistent patterns in health disparities to a set of social determinants. Analysis of secondary data shows that both counties have identifiable social problems that contribute to the persistent health disparities evident in the BRFSS data. Adams and York counties have large numbers of renters struggling with housing affordability; high rates of poverty, particularly for minorities; large income disparities between whites and non-whites; low rates of post-secondary educational attainment; and for York County, low rates of college attendance among 18-24 year olds. Both counties also have aging populations. Finally, both counties' physical environments are rated among the poorest in the state. Adams County's physical environment score places it 60 out of the state's 67 counties. York County's physical environment is rated at 65 of 67 counties.

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 many residents in both counties (Table 1).

Access indicators are generally favorable, with most residents of both counties reporting they have health care coverage, a personal physician and dental insurance (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. Consequentially, one in four residents of both counties report having a high deductible health plan, which is associated with reduced health care use, and many also believe that mental health services are unaffordable. More positively, the proportion of residents in both counties who need help reading medical information is declining.

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 three in four are overweight or obese. The continuing decline in physical activity and increases in binge drinking behavior since 2014 are a concern, although the reduction in the proportion of regular smokers is a positive behavioral trend should it continue.

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. Mental health diagnoses continue to rise. Two in five adults say their normal activities have been limited by their health, and that proportion seems to be increasing as well. About two in five residents of both counties experience chronic pain, which is one of the top five causes of disability in the United States.

The health indicators measured by the Behavioral Risk Factor survey remained mostly stable over the past six years, but there are several notable, troublesome trends. Participation in physical activities seems to be declining, while obesity, binge drinking rates, and mental health issues seem to be increasing. Economic hardships and skipping care because of costs has remained stable despite low unemployment and favorable economic growth.

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Table 1. Summary of Health Indicators, BFRSS

York				Adams			
Access Indicators	2011	2014	2017		2011	2014	2017
Has health care coverage	91%	92%	92%		88%	92%	91%
Has a personal physician	88%	88%	84%		92%	91%	86%
Did not receive health care in past year because of cost	12%	13%	12%		10%	10%	9%
Has dental insurance	67%	69%	70%		65%	62%	64%
Economic hardships (one or more)	39%	36%	37%		37%	32%	31%
Has a high deductible health plan			25%				19%
Does not know how to find a mental health provider			21%				17%
Agrees mental health care services are unaffordable			29%				27%
Needs help reading materials from doctor/hospital	25%	20%	20%		26%	23%	20%
Lack of transportation barrier to receiving health care		7%	6%			5%	5%
Behavioral Risk Indicators							
Participated in physical activities or exercise in past month	80%	76%	74%		77%	79%	69%
Exercised 30 minutes on five days in past week	21%	17%	16%		16%	18%	19%
Strength training in past month	40%	44%	47%		42%	46%	47%
Smoking behavior (regular smoker)	22%	24%	19%		21%	21%	18%
Body Mass Index Category (overweight and obese)	66%	68%	72%		74%	68%	72%
Binge drinking behavior	15%	16%	19%		13%	16%	16%
Consumed three servings of vegetables daily	3%	4%	3%		4%	4%	4%
Regular electronic cigarette (e-cigarette/vape) user			6%				6%
Currently taking opioid/narcotic prescriptions for pain			5%				4%
Conditions							
Respondent is diabetic	9%	11%	12%		12%	12%	13%
Told has heart disease, heart attack, or stroke	9%	10%	12 %		13%	11%	9%
Ever had COPD, emphysema, or chronic bronchitis	8%	8%	8%		7%	7%	9%
Has high cholesterol	33%	37%	34%		38%	34%	34%
Has high blood pressure	34%	38%	39%		40%	38%	41%
Has asthma	11%	11%	12%		11%	8%	8%
Has ever had cancer	9%	10%	12 %		13%	12%	14%
Has an anxiety disorder	18%	21%	23%		16%	12 %	22%
Has a depressive disorder	20%	21%	25%		20%	20%	22%
PHQ-8 current depression indicator-currently depressed	9%	9%	13%		8%	20 <i>%</i> 6%	10%
Suffers from chronic pain	9 <i>7</i> 0 		42%		0 /0		37%
Received care for emotions/nerves/mental health in past year			42%				15%
Prevention Behaviors and Context				-			
At least one day physical health was not good in past month	Z00/	700/	150/	-	10%	7/0/	170/
	39%	39% 7.0%	45%		40% 70%	34%	43% 7.4%
At least one day mental health was not good in past month	45%	38%	40%		39%	38%	34%
Poor health limited participation in normal activities in past month	36%	40%	42%		38%	43%	43%
Visited doctor for routine checkup in year	69%	74%	76%		74%	75%	79%
Visited dentist in past year	76%	74%	73%		77%	72%	68%
Has ever had blood cholesterol checked	82%	80%	82%		83%	79%	80%
Gets needed social and emotional support	92%	93%	93%		94%	91%	95%
One or more days with depressive symptoms in past two weeks	61%	59%	64%		58%	55%	59%
Stressed about paying rent or mortgage	27%	24%	22%		30%	21%	20%

*Estimated Sample Errors (Unweighted): Total n = 1260, 3.2%; Adams n = 467, 5.2%; York n = 793, 4.0%

4 Center for RESEARCH

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 58,000 adult residents are overweight or obese; more than 47,000 had one or more days with depressive symptoms in the two weeks preceding the survey; nearly 35,000 are limited in their daily activities by poor health; and about 30,000 suffer from chronic pain (Figure 1). More than 14,000 adults in Adams County smoke and almost 13,000 binge drink.

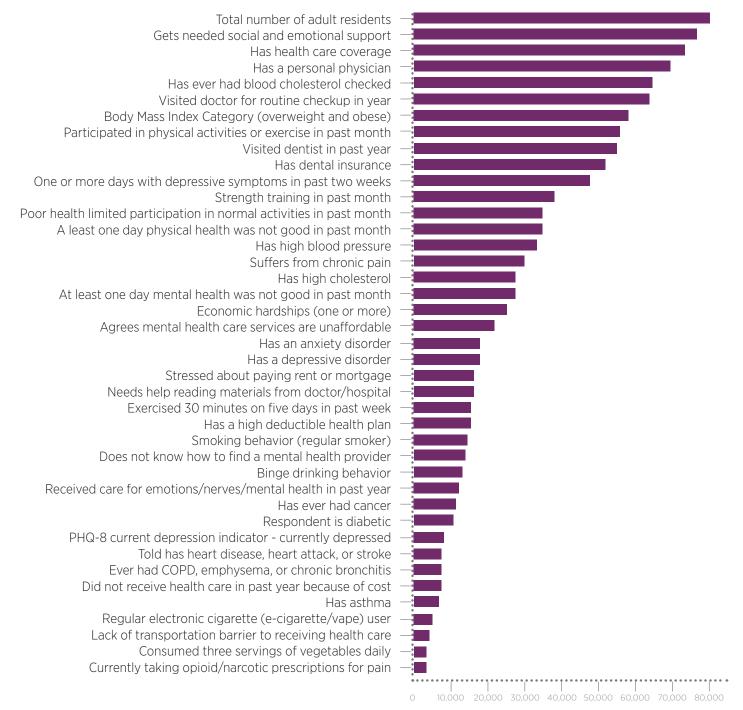


Figure 1. Total Adult Residents Reporting Condition, Adams County 2018. The purple bars provide estimates of the adult population in 2018 that reported each behavior, condition, or experience. In Adams County, more than 58,000 adult residents are overweight or obese; more than 47,000 had one or more days with depressive symptoms; nearly 35,000 are limited in their daily activities by poor health; and about 30,000 suffer from chronic pain. More than 14,000 adults in Adams County smoke and almost 13,000 binge drink. The estimated error for these estimates is ± 4,196 adults (Total number of adult residents in Adams County is 80,695).

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in their daily activities by poor health; and about the same number suffer from chronic pain (Figure 2). More than 64,000 adults in Adams County smoke

are overweight or obese; more than 218,000 had one or more days with depressive symptoms in the two weeks preceding the survey; 143,000 are limited and binge drink. Total number of adult residents -Gets needed social and emotional support Has health care coverage Has a personal physician Has ever had blood cholesterol checked -Visited doctor for routine checkup in year Participated in physical activities or exercise in past month Visited dentist in past year Body Mass Index Category (overweight and obese) Has dental insurance One or more days with depressive symptoms in past two weeks Strength training in past month A least one day physical health was not good in past month Poor health limited participation in normal activities in past month Suffers from chronic pain At least one day mental health was not good in past month Has high blood pressure Economic hardships (one or more) -Has high cholesterol Has a depressive disorder Has a high deductible health plan Has an anxiety disorder Stressed about paying rent or mortgage Does not know how to find a mental health provider Needs help reading materials from doctor/hospital -Agrees mental health care services are unaffordable Smoking behavior (regular smoker) Binge drinking behavior Exercised 30 minutes on five days in past week PHQ-8 current depression indicator - currently depressed Received care for emotions/nerves/mental health in past year Respondent is diabetic Has asthma

Did not receive health care in past year because of cost Told has heart disease, heart attack, or stroke -Has ever had cancer

In York County, more than 245,000 adult residents

Ever had COPD, emphysema, or chronic bronchitis Regular electronic cigarette (e-cigarette/vape) user -Lack of transportation barrier to receiving health care -Currently taking opioid/narcotic prescriptions for pain – Consumed three servings of vegetables daily -

Figure 2. Total Adult Residents Reporting Condition, York County 2018. The purple bars provide estimates of the adult population in 2018 that reported each behavior, condition, or experience. In York County, more than 245,000 adult residents are overweight or obese; more than 218,000 had one or more days with depressive symptoms in the two weeks preceding the survey; 143,000 are limited in their daily activities by poor health; and about the same number suffer from chronic pain (Figure 2). More than 64,000 adults in Adams County smoke and binge drink. The estimated error for these estimates is ± 13,659 adults (Total number of adult residents in York County is 341,468).

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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 noncommunicable diseases: heart disease, COPD, lung cancer, and major depressive disorders. The rates of these major causes of death and disability for Adams and York counties, Pennsylvania, and the US are shown in Table 2.

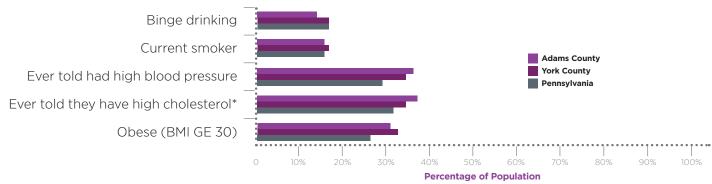
Table 2. Leading Causes of Death, Age-Adjusted Rates per 100,000

	Adams ^a	York ^a	Pennsylvania ^a	U.S. ^b
Heart disease	150.2	154.7	177.8	168.5
Cancer	144.5	170.5	167.2	158.5
Accidents	58.0	55.2	52.0	41.6
Stroke	36.4	40.6	38.8	37.6
Chronic lower respiratory diseases	32.5	33.5	38.1	43.2
Diabetes mellitus	30.7	23.8	22.1	21.3
Kidney Disease	9.4	14.2	16.9	13.4
Influenza and pneumonia	12.6	14.4	15.9	15.2
Septicemia	10.2	11.6	13.5	11.0

a. 2016 Age-adjusted rate; Source: https://www.phaim1.health.pa.gov/EDD/WebForms/DeathCntySt.aspx

b. 2015 Age-adjusted rate; Source: https://www.cdc.gov/nchs/pressroom/states/pennsylvania/pennsylvania.htm

The disability-adjusted life years (DALYs) estimates might encourage a focus on these conditions, but focusing on these conditions would do little to reduce lives lost and disability within a community. Instead, a public health focus on reducing DALYs 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.ⁱⁱ Residents of Adams and York counties have better comparative rates of smoking and binge drinking compared to adults in the state, but they also have higher rates of hypertension, hypercholesterolemia, and obesity. The differences between the state and the two counties on these behavioral indicators may be attributed to Adams and York counties having a relatively older population than the state, which is discussed in a later section of this report. Neither county meets the Healthy People 2020 targets for smoking (12%) or obesity (30.5%), although both outperform the target for binge drinking (24.2%).ⁱⁱⁱ



*Percent of those who have had blood cholesterol checked

Data Sources: Pennsylvania-BRFSS, https://www.phaim1.health.pa.gov/EDD/WebForms/BRFSSstate.aspx York and Adams Counties: Behavioral Risk Factor Survey, Center for Opinion Research, December 2017-March 2018

Figure 3. Behavioral Health Risks, Adams and York Counties 2018 Compared to PA Estimates. This figure compares the prevalence of health risks in Adams and York Counties to Pennsylvania. Although both counties have rates similar to the state, the rates for smoking and obesity do not meet health goals set by the Centers for Disease Control.

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, these patterns are persistent, in that there are few changes in which groups experience disparities compared to 2011 or 2014. Figure 4 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.

Public health researchers now frequently attribute these persistent patterns in health disparities to a set of social determinants. Social determinants thinking suggests that health is determined by access to social and economic opportunities that arise from the places where we learn, live, and work. According to the Centers for Disease Control (CDC), "The conditions in which we live explain in part why some Americans are healthier than others and why Americans more generally are not as healthy as they could be."iv As such, the CDC has established a set of indicators that can track progress towards a goal of creating social and physical environments that promote good health for all people.

The analysis of secondary data that appears in in Appendix E provides data on a number of important indicators useful for judging social determinants indicators for each county. Both counties have identifiable social problems that contribute to the persistent health disparities evident in the BRFSS data. Adams and York counties have large numbers of renters struggling with housing affordability (Table A2); high rates of poverty, particularly for minorities (Table C3); large income disparities between whites and non-whites (Table C2); low rates of post-secondary educational attainment (Table E1); and for York County, low rates of college attendance among 18-24 year olds (Table E2). Both counties also have aging populations (Table A2).

The analysis of Robert Wood Johnson County Health Rankings data that follows in the next section of this report also provides data about place, specifically the physical environment. Adams County's physical environment score, which includes indicators of air and water quality, places it 60 out of the state's 67 counties. York County's physical environment is rated at 65 of 67 counties.

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Results of Significance Testing for Selected Variables

Access Indicators	POVERTY RACE/ETH GENDER AGE
Has health care coverage	
Has a personal physician	
Did not receive health care in past year because of cost	
Has dental insurance	
Economic hardships	
Has a high deductible health plan	
Does not know how to find a mental health provider	
Agrees mental health care services are unaffordable	
Needs help reading materials from doctor/hospital	
Lack of transportation barrier to receiving health care	
Behavioral Indicators	
Participated in physical activities or exercise in past month Exercised 30 minutes on five days in past week	
Strength training in past month	
Smoking behavior (regular smoker)	
Body Mass Index Category (overweight and obese)	
Binge drinking behavior	
Consumed three servings of vegetables daily	
Regular electronic cigarette (e-cigarette/vape) user	
Currently taking opioid/narcotic prescriptions for pain	
Conditions	
Respondent is diabetic	
Told has heart disease, heart attack, or stroke	
Ever had COPD, emphysema, or chronic bronchitis Has high cholesterol	
Has high blood pressure	
Has asthma	
Has ever had cancer	
Has an anxiety disorder	
Has a depressive disorder	
PHQ-8 current depression indicator-currently depressed	
Suffers from chronic pain	
Prevention Behaviors and Context	
At least one day physical health was not good in past month At least one day mental health was not good in past month	
Poor health limited participation in normal activities in past month	
Visited doctor for routine checkup in year	
Visited doctor for fourne checkup in year Visited dentist in past year	
Has ever had blood cholesterol checked	
Gets needed social and emotional support	
One or more days with depressive symptoms in past two weeks	
Stressed about paying rent or mortgage	
No significant difference	p. > .05
Significantly different, weak association	p. < .05, sresid < 3
Significantly different, moderate association	p. < .05, sresid > 3
Significantly different, strong association	p. < .05, sresid > 4

Figure 4. Health Indicators by Selected Demographic Groups, Adams and York Counties, 2018. 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.

9

Relative Health Rankings

Adams County ranks 10 out of 67 counties in health outcomes and 11 out of 67 counties in health factors, according to county health rankings datav. Compared to other counties in the state, Adams shows low rates of dentists, mental health providers, access to exercise facilities, and college attainment (Appendix F). 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. Adams County's physical environment scores have declined significantly over time relative to other counties in the state, while there has been some improvement on quality of life and health behavior scores (Figure 5).

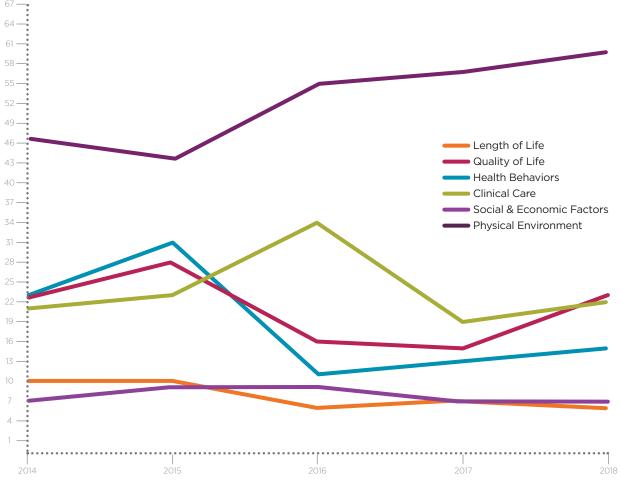
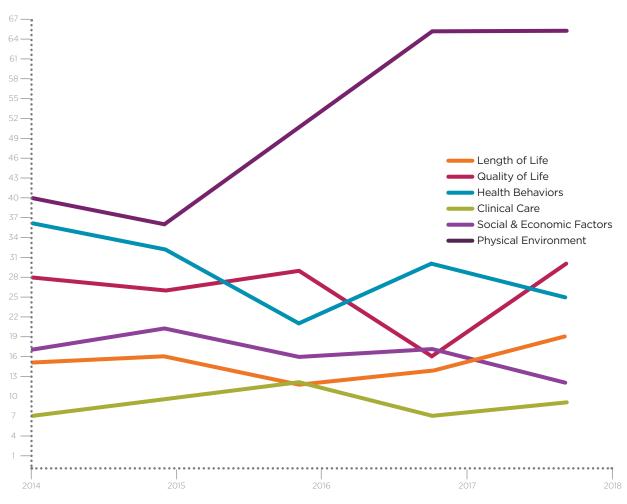




Figure 5. Relative Health Rankings, Adams County, 2018. This figure displays the trends in the relative ranking of Adams County since 2014 on the health outcomes and factors measured by the County Health Rankings. Adams County's physical environment scores have declined significantly over time relative to other counties in the state, while there has been some improvement on quality of life and health behavior scores. Figure created by the Center for Opinion Research using Robert Wood Johnson Foundation County Health Rankings data.

York County ranks 19 out of 67 counties in health outcomes and 13 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 (Appendix F). 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. York County's physical environment scores have declined significantly over time relative to other counties in the state, while there has been some improvement on health behavior scores (Figure 6).



RWJ County Health Rankings Trend Date - York County, Pennsylvania

Figure 6. Relative Health Rankings, York County, 2018. This figure displays the trends in the relative ranking of York County since 2014 on the health outcomes and factors measured by the County Health Rankings. York County's physical environment scores have declined significantly over time relative to other counties in the state, while there has been some improvement on health behavior scores. Figure created by the Center for Opinion Research using 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 F). Quality of life indicators, which includes mental and physical health indicators, are the second lowest performing set of factors for both counties. The third area of concern relates to health behaviors, which are risk factors for chronic diseases. 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	6	23	15	22	7	60
York	19	30	25	9	12	65
Top Performing PA	Counties					
Union	3	4	22	4	8	4
Centre	1	5	9	13	4	21
Montgomery	4	3	2	2	1	44

Endnotes

- ⁱ The survey found that 51% of those with a BMI in the overweight category wrongly believe their weight is "about average." Most of those in the normal (86%) and obese (83%) BMI groups correctly classified their weight.
- ⁱⁱ Institute for Health Metrics and Evaluation. GBD Profile: United States. Retrieved from http://www. healthmetricsandevaluation.org on April 28, 2015.
- ^{III} Healthy People 2020 targets were retrieved from https://www.healthypeople.gov/2020 on April 18, 2018.
- ^{iv} A complete description of the Social Determinants of Health model and objectives can be found on the Healthy People 2020 website.
- ^v Robert Wood Johnson Foundation. (2018). 2018 County Health Rankings Pennsylvania Data v1_0.xls [Data file]. Retrieved from http://www.countyhealthrankings.org/app/pennsylvania/2018/overview.

Appendix A

Description of Data Sources





A1

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 461 adult residents of Adams County and 799 adult residents of York County. The survey interviewing took place from December 4, 2017 through February 25, 2018. 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 +/- 5.2 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	48.8	48.5	48.8
Female	51.2	51.4	51.2
HS or <	51.8	38.1	51.8
some college	24.5	27.2	24.5
College or >	23.7	34.7	23.7
White	91.5	93.1	91.5
Other	8.5	6.9	8.5
18 - 34	26.3	19.2	26.3
35 - 54	35.0	30.8	35.0
55 or older	38.8	50.0	38.7
Health Indicators			
Smoker	17%	16%	19%
Obese	35%	36%	36%
Binge Drink	11%	16%	18%
Diabetes	13%	14%	13%
Asthma (current	14%	10%	11%
No provider	10%	12%	16%
Phys health not good 1+ day in past month	32%	44%	45%
Mental health not good 1+ day in past month	35%	36%	38%
No Insurance 18 - 64	10%	9%	10%

Note: age, county, gender, race estimates are from U.S. Census Bureau, 2012-2016 American Community Survey 5-Year Estimates; health indicators are for York County only and come from the state's EDDIE system for years 2014 - 2016. http://www.statistics.health.pa.gov/StatisticalResources/EDDIE/Pages/EDDIE.aspx

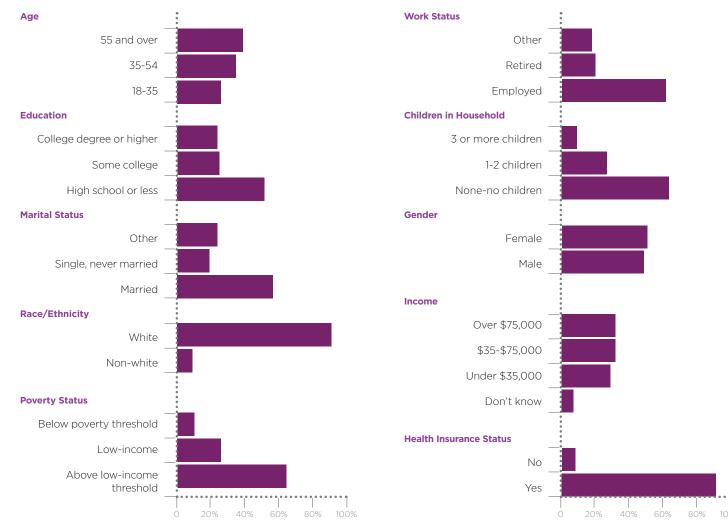
The primary source of comparative health information is provided by the Robert Wood Johnson Foundation County Health Rankings. These rankings provide county-level information on health factors and health outcomes. Table A-2 provides a list of the measures used by the County Health Rankings.

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

Demographic Characteristics

The survey is representative of the adult population of York and Adams Counties. This table shows the demographic characteristics of the survey sample.

The survey estimates are similar to the counties' known distributions of these demographic characteristics.



Notes

Appendix B

Marginal Frequency Report: Behavioral Risk Factor Survey





Health Status

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

		Adams			York	
	2011	2014	2017	2011	2014	2017
Excellent,	15%	17%	14%	16%	17%	15%
Very good,	35%	36%	40%	41%	35%	36%
Good,	34%	31%	30%	28%	31%	34%
Fair, or	13%	12%	9 %	11%	13%	13%
Poor	3%	4%	6%	3%	4%	3%

Healthy 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	2017	2011	2014	2017
None	60%	66%	57 %	61%	61%	55%
1 or more days	40%	34%	43%	39%	39%	45 %

S2_1cp. Do you suffer from any type of chronic pain, that is, pain that occurs constantly or flares up frequently?

	Adams 2017	York 2017
Yes	37%	42%
No	63%	58%

S2_1med. Are you currently taking any opioid or narcotic prescription medications for your pain?

	Adams 2017	York 2017
	n=171	n=336
Yes	12%	13%
No	88%	86%
Don't know	O%	1%

S2_1medAlt. Have you and your doctor ever discussed other alternatives to opioids or narcotics for managing your pain?

Adams York 2017 2017 n=21 n=44	
Yes 76% 71%	
No 24% 29%	

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					
	2011	2014	2017	2011	2014	2017
None	61%	62%	66%	55%	62%	60%
1 or more days	39%	38%	34 %	45%	38%	40%

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	2017	2011	2014	2017	
	n=466	n=418	n=257	n=628	n=583	n=494	
None	62%	57%	57 %	63%	60%	58%	
1 or more days	38%	43%	43 %	37%	40%	42%	

Health Care Access

IN1. Do you have any kind of health care coverage, including health insurance from an employer or private, prepaid plans such as HMOs, state or federal health exchange, or government plans such as Medicare, Medicaid or CHIP?* (*New wording as of 2017)

	Adams				York	
	2011	2014	2017	2011	2014	2017
Yes	88%	92%	91%	91%	92%	92 %
No	12%	7%	9%	9%	8%	8%

HCins. Which is it...

	Adams 2017 n=419	York 2017 n=736
Health insurance from employer	53%	53%
Medicare	11%	13%
Private health insurance	9%	8%
Medicare and insurance you purchased yourself	10%	8%
A state or federal health exchange	5%	7%
Medicaid	6%	5%
Employer and Medicare	2%	1%
A prepaid plan such as an HMO	1%	O%
Other	3%	4%
Do not know	1%	1%

IN1c. Do you have a high deductible health plan?

	Adams 2017 n=419	York 2017 n=736
Yes	21%	27%
No	68%	60%
Don't know	12%	13%

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

	Adams					
	2011	2014	2017	2011	2014	2017
Yes, only one	88%	87%	76 %	84%	83%	76 %
MORE than one	4%	4%	10%	4%	6%	8%
No person as personal doctor	8%	8%	14%	12%	11%	16%
Don't know	0%	1%	0%	0%	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	2017	2011	2014	2017
Yes	10%	10%	9%	12%	13%	12%
No	90%	90%	91%	88%	87%	88%
Don't know	0%	0%	1%	0%	0%	0%

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	York
	2014 2017	2014 2017
Yes	5% 5%	7% 6%
No	95% 95%	93% 94%

Q76. Have any language, cultural barriers, or your immigration status kept you from seeking medical care in the past year?

	Adams	York
	2017	2017
Yes	O%	O%
No	99%	100%

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	2017	2011	2014	2017
Within past year	74%	75%	79 %	69%	74%	76 %
Within past 2 years	9%	10%	7%	11%	13%	9%
Within past 5 years	8%	6%	7%	7%	7%	7%
5 or more years ago	6%	7%	5%	10%	3%	6%
Never	1%	0%	1%	1%	0%	0%
Don't know	2%	2%	1%	2%	1%	2%

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

	Adams					
	2011	2014	2017	2011	2014	2017
Always,	4%	3%	2%	3%	3%	3%
Often,	2%	2%	4%	2%	2%	2%
Sometimes,	8%	6%	6%	8%	6%	4%
Occasionally, or	12%	12%	8%	12%	9%	11%
Never?	74%	77%	80%	75%	79%	79 %
NEVER visited provider	0%	0%	1%	1%	0%	0%

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

	Adams 2011 2014 2017			2011	York 2014	2017
	n=800		n=455		n=1025	
Extremely confident,	56%	63%	67%	57%	59%	63%
Quite a bit,	34%	27%	25%	31%	30%	26 %
Somewhat,	8%	7%	5%	8%	8%	8%
A little bit, or	2%	2%	2%	3%	1%	2%
Not at all confident?	1%	1%	1%	1%	1%	0%
Do Not Know	1%	0%	1%	1%	0%	1%

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					
	2011	2014	2017	2011	2014	2017
Yes	77%	80%	69%	80%	76%	74%
No	23%	20%	31%	20%	24%	26 %
Don't know	0%	1%	0%	0%	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	2017	2011	2014	2017
	n=605	n=601	n=311	n=790	n=763	n=581
Mean	62.7	60.3	51.2	61.8	56.5	48.0
S.D.	83.8	75.3	59.5	79.4	62.8	55.2

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

		Adams			York		
	2011	2014	2017	2011	2014	2017	
	n=609	n=600	n=313	n=798	n=774	n=579	
Mean	4.1	4.2	4.6	4.2	4.7	4.8	
S.D.	4.4	5.6	4.9	4.2	6.8	5.8	

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	2017	2011	2014	2017	
Mean	1.6	1.8	1.9	1.8	2.2	2.0	
S.D.	3.3	3.6	3.2	4.0	6.5	4.3	

Transportation

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

	Ada	ams	Yo	ork
	2014	2017	2014	2017
Every day	6%	6%	5%	4%
Most days	1%	1%	1%	2%
Some days	4%	4%	2%	3%
Never	70%	66%	70%	73%
Not currently employed	19%	23%	21%	19%

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

	Ad	ams	V	ork
	2014	2017	2014	2017
	n=533	n=306	n=720	n=576
	11-555	11-300	11-720	11-370
Distance	66%	66%	63%	60%
Work from home	4%	6%	4%	4%
Not currently employed, retired	4%	4%	3%	6%
Physically unable, disabled	4%	5%	3%	5%
Drive for work, job requirements	3%	2%	3%	3%
Have a vehicle	2%	3%	3%	2%
Time	2%	1%	2%	2%
Weather	2%	2%	1%	2%
Walkability, bikability of route:				
highways, etc.	1%	1%	2%	3%
Safety	1%	1%	3%	0%
Lack of energy, laziness	1%	1%	2%	1%
Choose not to	0%	2%	1%	1%
Have materials that need to be				
transported to/for work	1%	0%	1%	1%
Do not have a bike, Do not like				
riding a bike	2%	0%	1%	1%
Age	1%	1%	0%	0%
Childcare arrangements	0%	0%	1%	0%
Have a company car	0%	0%	0%	1%
No reason	6%	6%	5%	6%
Other	1%	1%	1%	1%
Do not know	1%	1%	0%	1%
	170	170	070	170

Diabetes

S12_19. How do you describe yourself?* (*New wording as of 2017)

	2011	Adams 2014	2017	2011	York 2014	2017
Male	50%	49%	46%	48%	48%	49%
Female	50%	51%	54%	52%	52%	51%
Transgender			0%			0%
Do not identify as female, male, or transgender			0%			0%

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

	Adams				York			
	2011	2014	2017	2	011	2014	2017	
Yes	13%	13%	14%	10	О%	11%	14%	
No	85%	85%	84%	8	8%	88%	84%	
Pre-diabetes or borderline diabetes	2%	2%	2%	2	2%	1 %	3%	

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

	Adams			York			
	2011	2014	2017	2011	2014	2017	
	n=45	n=53	n=32	n=53	n=60	n=59	
Yes	20%	19%	10%	23%	7%	12%	
No	80%	81%	90%	77%	93%	88%	

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 n=95	2014 n=93	2017	2011 n=91	2014 n=109	2017 n=99			
	n-95	n-95	n=62	n-91	n-109	n-99			
None	5%	12%	6 %	7%	12%	10%			
1-3	44%	38%	50%	47%	30%	58%			
4-6	41%	35%	40%	32%	46%	28%			
7-10	4%	0%	0%	3%	4%	1%			
11 or more	2%	10%	2%	8%	7%	4%			
Do Not Know	3%	4%	2%	3%	1%	0%			

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	2017	2011	2014	2017		
Within the past year	78%	72%	68%	76%	74%	73%		
More than one year	22%	28%	32%	24%	26%	28%		

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

	2011 n=182	Adams 2014 n=214	2017 n=145	2011 n=245	York 2014 n=262	2017 n=220
Cost, cannot afford it	23%	19%	17%	17%	17%	21 %
No insurance	17%	16%	21%	22%	17%	19%
Dentures, false teeth, all teeth removed	17%	16%	15%	17%	20%	16%
No need to go, teeth are fine	15%	17%	15%	12%	12%	12%
Does not like the dentist, bad past						
experience	7%	9%	8%	9%	10%	11%
No time, cannot get time off of work	5%	8%	6%	9%	6%	7%
Forgot to go, forgot to reschedule	2%	3%	2%	6%	2%	2%
No dentist, unsure who to use for						
dental care	5%	3%	0%	2%	3%	3%
No reason	1%	1%	2%	2%	1%	1%
Health reasons (heart attack, etc.)	1%	0%	2%	1%	1%	1%
Other	5%	6%	6%	4%	6%	3%
Do not know	5%	3%	6%	2%	4%	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	2017	2011	2014	2017			
None	53%	54%	52%	57%	55%	57%			
1 to 5	23%	24%	21%	19%	23%	20%			
6 or more but not all	17%	13%	16%	15%	14%	14%			
All	6%	7%	8%	7%	7%	8%			
Don't know	2%	2%	2%	2%	1%	2%			

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

			York				
	2011	2014	2017	2011	2014	2017	
	n=747	n=712	n=421	n=942	n=953	n=735	
Within the past year	76%	73%	68%	76%	75%	73%	
Within the past 2 years	8%	8%	13%	10%	8%	11%	
Within the past 5 years	6%	7%	10%	7%	8%	6%	
5 or more years ago	9%	11%	10%	6%	8%	10%	
Never	0%	1%	0%	0%	1%	0%	
Don't know	1%	0%	0%	1%	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

		Adams			York			
	2011	2014	2017	2011	2014	2017		
Yes	65%	62%	64%	66%	69%	70%		
No	35%	37%	34%	32%	29%	28%		
Don't know	1%	1%	2%	1%	2%	2%		

Cardiovascular Disease Prevalence

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

	2011	Yes 2014	2017	2011	No 2014	2017	2011	DK 2014	2017
Adams	604	50/	40/	0.40/	0.40/	05%	0.04	10/	-
A heart attack, also called a myocardial infarction? Angina or coronary heart disease?	6% 6%	5% 7%	4% 5%	94% 93%	94% 92%	95% 94%	0% 1%	1% 1%	1% 1%
A stroke? Chronic obstructive pulmonary disease, emphysema,	4%	4%	4%	95%	96%	97%	0%	0%	0%
chronic bronchitis?	7%	7%	9 %	93%	92%	9 1%	0%	1%	0%
York									
A heart attack, also called a myocardial infarction?	5%	5%	6%	95%	94%	94 %	0%	1%	0%
Angina or coronary heart disease?	5%	5%	4%	95%	94%	95%	0%	1%	1%
A stroke? Chronic obstructive pulmonary disease, emphysema,	2%	4%	4%	97%	95%	95%	0%	0%	1%
chronic bronchitis?	8%	8%	8%	92%	91%	91%	0%	1%	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	2017	2011	2014	2017
Yes	79%	79%	80%	79%	80%	82 %
No	16%	19%	17%	17%	17%	14%
Don't know	5%	2%	3%	4%	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	2017	2011	2014	2017
	n=660	n=626	n=367	n=823	n=854	n=653
Yes	43%	42%	42 %	39%	45%	39%
No	55%	57%	57%	60%	54%	58%
Don't know	2%	1%	2%	2%	1%	2%

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

	Adams			York		
	2011	2014	2017	2011	2014	2017
Yes	40%	38%	41%	33%	38%	39 %
No	60%	62%	59%	66%	61%	59%
Don't know	0%	0%	0%	0%	0%	1%

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	2017	2011	2014	2017	
	n=318	n=291	n=189	n=336	n=394	n=315	
Yes	80%	81%	79 %	78%	82%	76 %	
No	20%	19%	21 %	22%	18%	24%	

Asthma

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

		Adams			York	
	2011	2014	2017	2011	2014	2017
Yes	17%	14%	13%	17%	16%	19%
No	84%	86%	86%	83%	84%	81%
S9_2. Do you still have asthma?						
		Adams			York	
	2011	2014	2017	2011	2014	2017
	n=131	n=106	n=61	n=169	n=160	n=151
Yes	65%	61%	61%	66%	72%	66%
No	28%	36%	31 %	33%	24%	32%
Don't know	7%	3%	8%	2%	4%	3%

Tobacco Use

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

	Adams			York		
	2011	2014	2017	2011	2014	2017
Yes	49%	46%	45%	46%	51%	46 %
No	50%	53%	55%	54%	49%	54%
Don't know/Not sure	0%	1%	0%	0%	0%	0%

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

	Adams			York		
	2011	2014	2017	2011	2014	2017
	n=395	n=355	n=208	n=468	n=519	n=364
Every day	31%	35%	31%	40%	35%	29 %
Some days	12%	10%	9%	8%	11%	13%
Not at all	57%	56%	60%	52%	53%	58%

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	2017	2011	2014	2017
	n=171	n=157	n=83	n=225	=242	n=151
Yes	57%	51%	64%	49%	57%	57 %
No	42%	47%	35%	51%	43%	42 %
Don't know	2%	2%	1%	0%	0%	1%

ECIG1. Electronic cigarettes, or e-cigarettes as they are often called, are battery-operated devices that simulate smoking a cigarette, but do not involve the burning of tobacco. The heated vapor produced by an e-cigarette often contains nicotine. Have you ever used an electronic cigarette, even just one time in your entire life?

	Adams 2017	York 2017
Yes	21%	22%
No	79%	78%

ECIG2. Do you now use electronic cigarettes every day, some days, rarely, or not at all?

	Adams 2017 n=95	York 2017 n=179
Every day	12%	11%
Some days	17%	17%
Not at all	72%	73%

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	2017	2011	2014	2017
Every day	2%	5%	2%	2%	1%	2%
Some days	3%	4%	2%	3%	3%	3%
Not at all	95%	91%	96 %	95%	96%	96%

Demographics

reAGE. What is your AGE?

	Adams			York		
	2011	2014	2017	2011	2014	2017
Under 35	26%	27%	22%	29%	25%	29 %
35-54	39%	34%	35%	37%	40%	35%
Over 55	35%	39%	43%	34%	35%	36%

Hisp. Are you Hispanic or Latino, or NOT?

		Adams			York		
	2011	2014	2017	2011	2014	2017	
Yes	4%	4%	3%	2%	3%	4%	
No	96%	96%	97 %	98%	97%	96%	

reRACE. Racial group

		Adams			York		
	2011	2014	2017	2011	2014	2017	
White	92%	95%	95%	92%	89%	89%	
Nonwhite	8%	5%	5%	8%	11%	11%	

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

	Adams				York		
	2011	2014	2017	2011	2014	2017	
Married,	64%	54%	61 %	55%	53%	55%	
Divorced,	10%	12%	11%	12%	14%	14%	
Widowed,	8%	8%	8%	7%	8%	6%	
Separated,	2%	3%	2%	3%	3%	2%	
Never married	13%	17%	17%	17%	15%	21%	
A member of an unmarried couple	4%	6%	2%	6%	7%	3%	

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

	Adams					
	2011	2014	2017	2011	2014	2017
None	61%	64%	67 %	61%	66%	62 %
1-2	32%	28%	24%	30%	27%	29 %
3-4	7%	7%	7%	7%	5%	8%
5 or more	1%	1%	2%	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	York
	2014 2017	2014 2017
Yes	19% 14%	17% 14%
No	81% 86%	83% 85%

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

	Adams	York
	2014 2017	2014 2017
	n=144 n=64	n=179 n=113
Yes	56% 72%	62% 66%
No	43% 29%	38% 34%
Don't know	1% 0%	0% 1%

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

	Adams			York		
	2011	2014	2017	2011	2014	2017
HS or less	59%	56%	56%	52%	52%	50%
Some college	20%	21%	23%	27%	27%	25%
College degree	21%	22%	21%	21%	22%	25%

S12_9. Are you currently...

	Adams				York	
	2011	2014	2017	2011	2014	2017
Employed for wages,	55%	53%	49 %	54%	55%	56%
Self-employed,	7%	7%	11%	7%	6%	6%
Out of work for more than 1 year,	2%	1%	1%	3%	2%	1%
Out of work for less than 1 year,	2%	1%	2%	3%	2%	2%
A Homemaker,	5%	4%	5%	7%	4%	4%
A Student,	5%	5%	5%	5%	5%	3%
Retired, or	19%	22%	22%	17%	19%	19%
Unable to work?	6%	6%	5%	5%	8%	9%

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

	Adams				York	
2	2011	2014	2017	2011	2014	2017
Under \$10,000	2%	4%	4%	3%	3%	4%
\$10-\$15,000	5%	5%	3%	5%	6%	5%
\$15-20,000	5%	5%	4%	6%	4%	4%
\$20-25,000	6%	8%	7%	5%	7%	6 %
\$25 - 35,000 1	15%	12%	11%	13%	9%	11%
\$35 - 50,000 1	15%	15%	14%	17%	15%	15%
\$50 - 75,000 2	20%	16%	20%	19%	19%	16%
Over \$75,000 2	24%	26%	31%	26%	25%	32%
Don't Know	9%	9%	7%	7%	11%	8%

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

Adams					
2011	2014	2017	2011	2014	2017
1%	3%	1%	2%	2%	2%
25%	29%	27%	33%	29%	26%
36%	37%	37%	34%	37%	34%
38%	32%	35%	32%	32%	37 %
	1% 25% 36%	201120141%3%25%29%36%37%	2011201420171%3%1%25%29%27%36%37%37%	20112014201720111%3%1%2%25%29%27%33%36%37%37%34%	201120142017201120141%3%1%2%2%25%29%27%33%29%36%37%37%34%37%

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

	Adams			0.011	0017	
	2011	2014	2017	2011	2014	2017
Overweight,	50%	44%	51%	41%	44%	48 %
Underweight, or	2%	4%	3%	6%	4%	3%
About average?	48%	51%	45%	53%	52%	48 %
Don't know	0%	1%	0%	0%	0%	1%

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	2017	2011	2014	2017
Yes	52%	53%	50%	49%	53%	57%
No	48%	47%	49 %	51%	47%	44 %
Don't know	0%	0%	1%	0%	0%	0%

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?

			York			
	2011	2014	2017	2011	2014	2017
	n=413	n=409	n=231	n=497	n=545	n=452
No drinks in past 30 days	1%	2%	1%	1%	1%	1%
Per WEEK response	43%	44%	38%	48%	45%	49 %
Per MONTH response	54%	52%	61%	50%	53%	49 %
Don't know	2%	2%	1%	1%	2%	2%

S13_2b. Days per week response

	Adams				York		
	2011	2014	2017	2011	2014	2017	
	n=179	n=183	n=87	n=238	n=243	n=219	
1	34%	36%	39 %	30%	38%	31%	
2-3	43%	38%	28 %	43%	40%	47 %	
4-5	8%	14%	14%	11%	9%	13%	
6 or more	14%	12%	19%	16%	12%	10%	
Don't know	1%	0%	0%	0%	0%	0%	

S13_2c. Days per month response

	Adams				York		
	2011	2014	2017	2011	2014	2017	
	n=225	n=216	n=140	n=248	n=291	n=219	
1-3	65%	59%	56 %	62%	66%	66%	
4-6	17%	26%	20%	17%	21%	16%	
7-9	4%	2%	5%	6%	2%	5%	
10-15	6%	4%	8%	9%	5%	3%	
16-20	2%	3%	3%	0%	1%	3%	
21-25	0%	1%	1%	2%	1%	1%	
26 or more days	5%	6%	7%	4%	4%	5%	
Don't know	0%	0%	0%	1%	0%	1%	

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.

			York			
	2011 n=411	2014 n=403	2017 n=229	2011 n=490	2014 n=539	2017 n=447
1-3	82%	79%	81%	80%	80%	81%
4-6	11%	14%	15%	18%	15%	14%
7-9	2%	1%	1%	1%	2%	1%
10-15	3%	4%	1%	1%	1%	1%
16 or more drinks	1%	0%	1%	0%	0%	1%
Don't know	1%	2%	1%	0%	0%	2%

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?

		York				
	2011	2014	2017	2011	2014	2017
No binge drinking	87%	84%	84%	85%	84%	81%
Binge drinker	13%	16%	16%	15%	16%	19%

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

	2011 n=412	Adams 2014 n=403	2017 n=229	2011 n=491	York 2014 n=540	2017 n=446
1-3	67%	67%	66%	62%	65%	62 %
4-6	21%	16%	18%	25%	23%	24%
7-9	5%	6%	6 %	4%	5%	4%
10-15	6%	6%	8%	5%	4%	5%
16 or more drinks	0%	1%	0%	2%	1%	1%
Don't know	2%	2%	2%	3%	1%	3%

Substance Abuse

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

	Adams			York				
	Ye	es	No		Yes		N	0
:	2014	2017	2014	2017	2014	2017	2014	2017
Use illegal drugs one or more times?	5%	4%	95%	96 %	5%	7%	95%	94%
Have a child under 18 who used drugs or								
had a drinking problem?	0%	1%	100%	99 %	1%	1%	99%	99%
Use painkillers not prescribed for you								
(such as: OxyContin, Vicodin)?	1%	1%	98%	99 %	2%	2%	98%	98%
Use stimulants not prescribed for you								
(such as: Adderall, Ritalin)?	1%	1%	99%	99 %	0%	1%	100%	98%
Use tranquilizers not prescribed for you								
(such as: Xanax, Valium, Ativan, Klonopin)?	1%	0%	99%	100%	0%	0%	100%	100%
Take someone else's medicines for any reason?	2%	2%	98%	99 %	2%	3%	98%	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?

		York				
	2011	2014	2017	2011	2014	2017
Yes	45%	49%	46 %	39%	51%	47 %
No	55%	51%	54%	60%	49%	52%

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

	2011 n=444	Adams 2014 n=396	2017 n=247	2011 n=610	York 2014 n=524	2017 n=418
Not effective, does not believe in it	5%	14%	19%	7%	10%	21 %
No reason, does not want to, just did not	22%	17%	20%	20%	17%	18%
Side effects, causes the flu, makes you sick	14%	13%	17%	15%	17%	15%
No need, not necessary, not high risk	11%	11%	13%	11%	8%	8%
Healthy, never or rarely gets the flu or sick	14%	11%	8%	12%	10%	6%
Too busy, no time	5%	9%	5%	6%	11%	11%
Afraid, does not like needles, shots,						
or doctors	4%	6%	4%	4%	6%	6%
Allergic	2%	2%	2%	1%	3%	1%
Cost, no insurance	3%	2%	3%	2%	3%	3%
Planning on getting it, has or is						
making appointment	9%	5%	1%	9%	7%	2%
Lack of availability, doctor does not have it	1%	2%	0%	1%	2%	1%
Other	7%	4%	5%	5%	2%	6%
Do not know	4%	3%	3%	7%	5%	3%

*The next two sections (Falls, Aging) asked only of respondents aged 45 years or older - Adams: 2011 n=473; 2014 n=467; 2017 n=288; York: 2011 n=575; 2014 n=615; 2017 n=460

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	2017	2011	2014	2017	
None	85%	85%	84%	87%	83%	78 %	
1-2	14%	11%	13%	10%	14%	18%	
3-4	1%	3%	1%	2%	1%	2%	
5 or more times	1%	0%	2%	1%	0%	2%	

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.

			York			
	2011 n=73	2014 n=70	2017 n=46	2011 n=71	2014 n=101	2017 n=102
None (or 1 fall & no injury)	74%	76%	66%	70%	69%	65%
1	22%	17%	24 %	23%	23%	30%
2	3%	5%	3%	6%	5%	2%
3 or more times	1%	3%	5%	1%	2%	3%
Don't know	0%	0%	3%	0%	1%	0%

Aging

A1. Using a scale from one to ten where one is very negative and ten is very positive, how would you rate your attitude toward older adults?

	Adams 2017	York 2017
Mean	9.3	9.1
S.D.	1.4	1.4

A2. Using a scale from one to ten where one is very negative and ten is very positive, how would you rate your attitude toward your own aging process?

	Adams	York
	2017	2017
Mean	7.8	7.7
S.D.	2.3	2.2

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

	Adams	York
	2017	2017
Yes	6%	11%
No	93%	89%
Don't know	1%	O%

End of Life

IntEL1. Have you...

	Adams		York			
2017	Yes	No	DK	Yes	No	DK
Ever been responsible for making a health care decision for a family member or friend when they were unconscious or unable to speak for themselves						
because of a medical condition?	32%	68%	0%	30%	70%	0%
Talked with your family about what kind of care you want if you cannot						
speak for yourself?	61%	39%	0%	60%	39%	1%
Talked with your doctor about what kind of care you want if you cannot						
speak for yourself?	31%	69%	0%	28%	71%	1%
Written down on paper who will speak for you if you cannot make your						
own health care decisions?	49%	51%	0%	47%	52%	1%
Written down on paper how you want to be treated at the end of your life if you cannot make your own health care decisions?	43%	56%	1%	40%	60%	0%

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	2017	2011	2014	2017	
Yes	13%	12%	14%	10%	10%	11%	
No	87%	88%	86%	90%	90%	89%	

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

	Adams			York			
	2011 n=100	2014 n=86	2017 n=65	2011 n=95	2014 n=101	2017 n=89	
1 type 2 types 3 or more types Don't know	95% 5% 0% 0%	93% 5% 2% 0%	76% 17% 6% 1%	86% 10% 0% 0%	81% 15% 2% 3%	90% 8% 1% 2%	

S20_8cod. What type of cancer was it?

	2011 n=100	Adams 2014 n=86	2017 n=64	2011 n=93	York 2014 n=101	2017 n=87
Skin (Not melanoma)						
includes Basal cell cancer	23%	24%	18%	15%	22%	20%
Breast	16%	24%	16%	14%	22%	12%
Prostate	12%	5%	12%	13%	12%	9 %
Cervical (cervix)	10%	12%	2%	16%	6%	6 %
Melanoma	6%	7%	6 %	7%	3%	12%
Thyroid	3%	5%	7%	2%	9%	4%
Colon (intestine) includes large intestine	7%	3%	7%	6%	3%	3%
Endometrial (Uterus)	1%	4%	7%	4%	1%	6 %
Lung	1%	3%	6%	5%	3%	5%
Bladder	3%	2%	1%	2%	2%	1%
Leukemia (blood)	1%	0%	4%	0%	5%	0%
Testicular	5%	0%	0%	0%	2%	3%
Renal (Kidney)	1%	4%	1%	3%	0%	0%
Lymphoma (non-Hodgkin's)	1%	2%	0%	4%	0%	1%
Lymphoma (Hodgkin's disease)	0%	1%	0%	0%	1%	5%
Ovarian (Ovary)	0%	1%	2%	1%	1%	1%
Liver	0%	1%	4%	2%	0%	0%
Bone	1%	0%	2%	0%	0%	2%

S20_8cod. What type of cancer was it? (continued)

	2011 n=100	Adams 2014 n=86	2017 n=64	2011 n=93	York 2014 n=101	2017 n=87
Oral (mouth or gums)	2%	0%	0%	2%	0%	0%
Rectal (rectum)	0%	0%	2%	1%	1%	0%
Esophageal (esophagus)	1%	0%	0%	0%	2%	0%
Pancreatic (pancreas)	0%	1%	1%	0%	0%	1%
Stomach	0%	0%	0%	0%	0%	1%
Brain	1%	0%	0%	0%	0%	0%
Pharyngeal (throat)	0%	0%	0%	1%	0%	0%
Other	0%	0%	3%	4%	4%	6%
Do not know	5%	1%	0%	0%	1%	2%

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	2017	2011	2014	2017
	n=631	n=594	n=347	n=826	n=814	n=631
Yes	36%	42%	47 %	41%	45%	50%
No	62%	54%	50%	59%	53%	47 %
Do not know	2%	3%	3%	1%	3%	4%

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

	Adams	York
	2014 2017	2014 2017
	n=252 n=163	n=364 n=315
Yes	21% 22%	26% 26%
No	79% 77%	74% 73%
Do not know	0% 1%	1% 1%

S21_1b. Have you ever been tested for Hepatitis C?

	Adams	York
	2014 2017	2014 2017
Yes	33% 41%	32% 40%
No	57% 48%	58% 49%
Do not know	10% 11%	11% 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	2017	2011	2014	2017
Always,	52%	47%	46 %	46%	49%	42 %
Usually,	29%	32%	35%	34%	29%	36%
Sometimes,	12%	10%	12%	12%	15%	14%
Rarely, or	3%	2%	2%	5%	3%	4%
Never	3%	7%	3%	3%	3%	3%
Do not know	1%	1%	1%	1%	1%	2%

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

	Adams		York			
	2011	2014	2017	2011	2014	2017
Very satisfied,	42%	49%	44%	42%	46%	38%
Satisfied,	53%	46%	49 %	51%	47%	53%
Dissatisfied, or	4%	3%	5%	6%	4%	6%
Very dissatisfied	1%	0%	1%	1%	2%	2%
Don't know	0%	0%	1%	0%	0%	1%

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	2017	2011	2014	2017	
None	42%	45%	41 %	39%	41%	36%	
One or more	58%	55%	59%	61%	59%	64%	

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	2017	2011	2014	2017
Yes	16%	16%	22%	18%	21%	23%
No	84%	83%	78 %	82%	79%	77%
Don't know	0%	0%	0%	0%	0%	1%

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	2017	2011	2014	2017
Yes	20%	20%	22%	21%	21%	25%
No	80%	80%	78 %	80%	8%	75 %

M17_TorC. During the past 12 months, have you received any treatment or counseling for any problem you were having with your emotions, nerves or mental health? Please do not include treatment for alcohol or drug use.

	Adams	York
	2017	2017
	n=144	n=268
Yes	49%	40%
No	51%	61%

M18. Has your family doctor or regular health care provider ever asked you about your mental health?

	Adams 2017 n=317	York 2017 n=531
Yes	45%	50%
No	53%	47%
Don't know	2%	2%

IntMH1. Do you agree or disagree with the following statements about mental health care...

Adams 2017	Strongly agree	Somewhat agree	Somewhat disagree	Strongly disagree	Don't know
I believe that my mental health and physical health are equally important to my well-being Our health care system treats mental and physical health as equally	92%	7%	0%	1%	1%
important	28%	20%	17%	24%	11%
I don't really know how to find a mental health provider	8%	9%	21%	58%	5%
Mental health care services are too expensive for me to afford	15%	12%	19%	33%	21%
York 2017	Strongly agree	Somewhat agree	Somewhat disagree	Strongly disagree	Don't know
I believe that my mental health and physical health are equally important to my well-being					
I believe that my mental health and physical health are equally	agree	agree	disagree	disagree	know
I believe that my mental health and physical health are equally important to my well-being Our health care system treats mental and physical health as equally	agree 92%	agree 7%	disagree 0%	disagree 0%	know 0%

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					
	2011	2014	2017	2011	2014	2017
Own	78%	68%	69 %	71%	68%	65%
Rent	16%	22%	19%	23%	24%	27 %
Other	6%	9%	12%	6%	8%	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	2017 n=405	2011 n=944	2014 n=946	2017 n=726
Always,	7%	5%	6%	5%	6%	6%
Usually,	3%	4%	2%	5%	3%	4%
Sometimes,	17%	11%	11%	15%	14%	11%
Rarely, OR	14%	16%	13%	15%	13%	15%
Never	54%	60%	64%	55%	59%	60%
Not applicable	6%	4%	4%	5%	5%	4%

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? *New question added in 2017 included in hardship calculation

Economic hardships:

	Adams 2017	York 2017
None	68%	62%
One	17%	15%
Two or more	15%	23%



M19_9h2cod1. Where did you live?

	Adams					
	2011	2014	2017	2011	2014	2017
Family home	47%	76%	65%	76%	73%	45%
Friends home	24%	14%	8%	12%	24%	16%
Shelter	0%	0%	12%	0%	0%	12%
Other	29%	9%	27 %	5%	14%	27 %

*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 2017	None	1-2 times	3-4 times	5-7 times	More than once per day	Never eat drink item/DK
Drink fruit juices such as orange, grapefruit, or tomato?	35%	22%	13%	24%	3%	3%
Eat fruit, not counting juice?	11%	18%	17%	45%	9%	1%
Eat green salad?	19%	32%	30%	17%	2%	1%
Eat potatoes not incl. French fries, fried potatoes, or potato chips?	21%	43%	26%	8%	1%	1%
Eat carrots?	27%	42%	18%	12%	0%	2%
Adams 2014	None	1-2 times	3-4 times	5-7 times	More than once per day	Never eat drink item/DK
Drink fruit juices such as orange, grapefruit, or tomato?	37%	22%	15%	23%	1%	1%
Eat fruit, not counting juice?	12%	18%	22%	40%	8%	0%
Eat green salad?	21%	31%	26%	21%	1%	1%
Eat potatoes not incl. French fries, fried potatoes, or potato chips?	22%	40%	27%	10%	0%	1%
Eat carrots?	35%	39%	16%	8%	1%	1%
Adams 2011	None	1-2 times	3-4 times	5-7 times	More than once per day	Never eat drink item/DK
Drink fruit juices such as orange, grapefruit, or tomato?	35%	18%	17%	25%	3%	2%
Eat fruit, not counting juice?	12%	16%	24%	37%	10%	1%
Eat green salad?	20%	34%	26%	18%	1%	1%
Eat potatoes not incl. French fries, fried potatoes, or potato chips?	16%	52%	24%	7%	1%	1%
Eat carrots?	34%	41%	16%	7%	1%	1%
York 2017	None	1-2 times	3-4 times	5-7 times	More than once per day	Never eat drink item/DK
Drink fruit juices such as orange, grapefruit, or tomato?	42%	18%	14%	23%	2%	2%
Eat fruit, not counting juice?	14%	17%	23%	40%	6%	1%
Eat green salad?	5%	29%	28%	16%	1%	1%
Eat potatoes not incl. French fries, fried potatoes, or potato chips?	27%	47%	19%	6%	0%	1%
Eat carrots?	39%	36%	16%	8%	0%	1%
York 2014	None	1-2 times	3-4 times	5-7 times	More than once	Never eat drink
					per day	item/DK
Drink fruit juices such as orange, grapefruit, or tomato?	37%	23%	15%	23%	2%	1%
Eat fruit, not counting juice?	13%	20%	22%	36%	7%	1%
Eat green salad?	22%	33%	27%	15%	1%	1%
Eat potatoes not incl. French fries, fried potatoes, or potato chips?	22%	49%	22%	6%	1%	1%
Eat carrots?	36%	39%	16%	8%	1%	1%

York 2011	None	1-2 times	3-4 times	5-7 times	More than once per day	Never eat drink item/DK
Drink fruit juices such as orange, grapefruit, or tomato?	33%	21%	14%	28%	2%	1%
Eat fruit, not counting juice?	15%	15%	22%	40%	7%	1%
Eat green salad?	24%	34%	24%	17%	1%	1%
Eat potatoes not incl. French fries, fried potatoes, or potato chips?	21%	51%	24%	4%	0%	0%
Eat carrots?	40%	39%	12%	8%	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	2017	2011	2014	2017	
None	4%	4%	4%	6%	6%	8%	
1-2	10%	11%	8%	12%	10%	9 %	
3-4	22%	22%	20%	23%	21%	21%	
5-7	38%	36%	35%	33%	40%	38%	
8 or more servings	26%	25%	33%	25%	20%	22%	
Do not know	1%	1%	1%	2%	2%	3%	

Fast Food

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

	Adams	York
	2014 2017	2014 2017
None	6% 7%	6% 8%
1-2 days	6% 7%	7% 7%
3-4 days	20% 18%	19% 18%
5-6 days	27% 27%	31% 28%
Every day	40% 41%	36% 38%

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

Adams		one 2017		days 2017		days 2017		days 2017	D 2014	к 2017
A senior center or food pantry? A Wal-Mart, Target, or other big box store? A convenience store, or corner store? A farmer's market? A grocery store such as Giant, Weis, Food Lion? A fast food or chain restaurant?	96% 60% 72% 85% 18% 43%		4% 36% 22% 14% 63% 45%	3% 38% 20% 11% 64%	0% 3% 3% 1% 14% 9%	0% 1% 3% 0% 2% 2%	0% 1% 2% 0% 4% 3%	0% 1% 2% 0% 2% 2%	0% 0% 1% 0% 0%	0% 0% 0% 0% 0%
York	No	2017	1-2	days 2017	3-5	days 2017	6-7	days 2017		K
A senior center or food pantry? A Wal-Mart, Target, or other big box store? A convenience store, or corner store? A farmer's market? A grocery store such as Giant, Weis, Food Lion? A fast food or chain restaurant?	96% 56% 69% 78% 15% 41%		3% 35% 22% 21% 64% 46%	3% 40% 22% 17% 62% 40%	0% 7% 6% 1% 16% 11%	1% 5% 8% 1% 16% 13%	1% 1% 2% 0% 4% 2%	0% 1% 3% 0% 5% 3%	0% 1% 0% 0% 0%	1% 0% 0% 0% 1%

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

		Adams			York		
	2011	2014	2017	2011	2014	2017	
1	21%	23%	19%	23%	24%	25%	
2	55%	54%	54%	58%	50%	54%	
3-4	22%	21%	25%	17%	24%	20%	
5 or more	1%	3%	2%	1%	1%	2%	

Notes

Appendix C

Definitions of Selected Terms





C1

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 Center for Opinion Research (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.

Depressive symptoms: Depression calculations were made using the PHQ-8 scale.⁶

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

Limited Access to Care: Any respondent who responded "yes" to any of three questions was classified as having limited access to care. The questions were: 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? Were you unable to get needed MEDICAL CARE because you couldn't afford it during the last 12 months? Did you lack health insurance coverage during the last 12 months?

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 2017 US Department of Health and Human Services (HSS) Poverty Guidelines. The category "In Poverty" was created based on these guidelines. Respondents were marked as "Lowincome" 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.

Substance Use: Respondents classified in the substance use category reported binge drinking, use of non-prescribed painkillers, stimulants, or tranquilizers, or use of marijuana 20 or more times in the past 20 days.

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.

Endnotes

¹EpiQMS 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.
- ⁴ Economic Indicators. Definitions, UNICEF, http:// www.unicef.org/infobycountry/stats_popup7.html.
- ⁵2017 Poverty guidelines: https://www.federalregister. gov/documents/2017/01/31/2017-02076/annualupdate-of-the-hhs-poverty-guidelines and 2015 Poverty guidelines: https://aspe.hhs.gov/2015poverty-guidelines
- ⁶ 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.

Notes

Appendix D

Links to Data Tables





1. Overall County Crosstabs

- Access Measures by Residency of Respondent
- 1b. Behavior Measures by Residency of Respondent
- 1c. Health Conditions by Residency of Respondent
- 1d. Prevention Indicators by Residency of Respondent

2. Age Crosstabs

- 2a. Access Measures by Age of Respondent
- 2b. Behavior Measures by Age of Respondent
- 2c. Health Conditions by Age of Respondent
- 2d. Prevention Indicators by Age of Respondent

3. Poverty Crosstabs

- 3a. Access Measures by Poverty Status of Household
- 3b. Behavior Measures by Poverty Status of Household
- 3c. Health Conditions by Poverty Status of Household
- 3d. Prevention Indicators by Poverty Status of Household

4. Race Crosstabs

- 4a. Access Measures by Race and Ethnicity of Respondent
- 4b. Behavior Measures by Race and Ethnicity of Respondent
- 4c. Health Conditions by Race and Ethnicity of Respondent
- 4d. Prevention Indicators by Race and Ethnicity of Respondent

5. Sex Crosstabs

- 5a. Access Measures by Sex of Respondent
- 5b. Behavior Measures by Sex of Respondent
- 5c. Health Conditions by Sex of Respondent
- 5d. Prevention Indicators by Sex of Respondent

Appendix E

Secondary Data Summary



Adams and York County Community Health Needs Assessment 2018 | May 2018

OPINION RESEARCH

E1

Overview - Adams County

All data in the tables below are extracted from Census Bureau American Community Survey (ACS) 1-year and 5-year estimates, except where noted. Since all ACS data is survey based, all of the estimates provided in this report are subject to sampling error. This report uses ACS 5-year survey estimates whenever possible because the data has larger sample sizes, which produces more precise estimates due to smaller sampling error. When population subgroups are particularly small, readers are reminded that large year-to-year changes in the estimates may be a result of sampling variability. All monetary values in the tables are expressed in 2016 inflation-adjusted dollars, using the CPI index for all urban consumers.

Demographic Statistics

A. Population Statistics

Total Population

The population of Adams County is growing at a very slow rate, one that is close to that of Pennsylvania. Both areas' population growth rates are significantly below that of the nation as a whole (Table A1).

Population Shares by Age

Adams County has an older population than both the state and the nation, and this trend appears to be intensifying. In recent years, the share of children in Adams County has dropped faster than it has in Pennsylvania and the United States, and Adams' share of persons 65 years and older has increased more than in these comparison areas (Table A2).

Share of Population by Race and Ethnicity

White persons comprise over 95% of the population of Adams County. The share of the population that is Latino has grown by about 1% since 2010 (Table A3).

B. Household Statistics

Households by Occupancy

Like Pennsylvania, the share of vacant housing units in Adams County is increasing, a trend that contrasts with that of the nation as a whole. A higher share of households in Adams County own their homes (78%) when compared to the state (69%) and the nation (64%). The rate of homeownership in Adams County has increased in recent years, unlike in these comparison areas (Table B1).

Housing Characteristics

While relatively few Adams County households are renting their home, 50% of those that do rent face a housing affordability problem. For homeowners in Adams County (and the state and the nation), the housing affordability picture has improved in recent years. Housing values in Adams County and Pennsylvania have declined between these two reference periods, in contrast to the small increase in median value that took place in the U.S. as a whole (Table B2).

Households by Type

The share of non-family households has increased in Adams County, driven by an increase in older residents who live alone. This trend fits the age distribution patterns shown above, and is taking place in Adams County at a faster pace than in Pennsylvania and the United States as a whole (Table B3).

C. Income Statistics

Household and Family Income

Adams county households have experienced modest income growth in recent years. The income distribution in Adams County has a larger share of middle-income households, and relatively fewer households with very low or high incomes (Table C1).

Median Household Income by Race and Ethnicity

There are notable disparities in income by race and ethnicity, in Adams County as well as statewide and nationally (Table C2).

Poverty

Overall, poverty rates in Adams County are lower than Pennsylvania and the United States. However, the poverty rate increased for most groups in Adams County between these two reference periods, with the exception of those 65 and older. The rate of poverty for married couple families with children changed from being below that of the state in 2009-13, to being higher than the statewide rate in 2012-16 (Table C3).

Households with Supplemental Benefits in the Past 12 Months

Adams County experienced an increase in poverty between the 2009-13 and 2012-16 periods, and more households in the county received the assistance of supplemental security income and food stamps/ SNAP benefits (Table C4).

D. Employment Statistics

Employment Status of the Population 16 Years and Older

Adams County's unemployment rate has steadily declined since the recessionary peak reached in 2010, and its rate has consistently been below those of the United States and Pennsylvania (Table D1).

Means of Transportation to Work

Most workers in Adams County drive alone to their places of employment. The average commute for Adams County workers has remained essentially unchanged in recent years (Table D2).

Employment by Occupation

Jobs in Adams County have been shifting away from construction occupations (-1.5%) and into a variety of service occupations, such as management/ business (+0.7%) and health care (+1.0%). Farming occupations have increased their share of employment in Adams County as well, by +0.6% (Table D3).

Employment by Class of Worker

Employment in Adams County has shifted away from the public sector (-1.7% of workers) and the self-employed (-0.6% of workers) and into the private sector (+2.3%). Similar employment trends have taken place in the United States and Pennsylvania (Table D4).

Employment by Industry Sector

Adams County has seen jobs shift out of the construction and manufacturing sectors in the prior decade. Local government and retail jobs also have a smaller share of employment in Adams County in 2016, compared to 2006. Expanding industry sectors in Adams County include Health Care (+1.7%) Administrative and Waste Disposal (+1.3%), Professional, Science, and Technical Services (+1.0%), and Entertainment, Food Service, and Accommodation (+1.0%) (Table D5).

E. Education Statistics

Educational Attainment of the 25+ Population

In general, adults in Adams County have lower levels of educational attainment than those in Pennsylvania and the United States. However, educational attainment in Adams County is improving, and this improvement is happening at similar rates to these comparison areas (Table E1).

School Enrollment

Rates of school enrollment in Adams County have improved for children of all ages (3-17). Rates of college enrollment have dropped for those ages 18-24 in Adams County, although women of this age group continue to be enrolled in college at a rate similar to that of Pennsylvania, and higher than the U.S. rate (Table E2).

G. Health Care Access Statistics

Health Insurance Coverage

The number, and share, of Adams County residents with health coverage has increased in recent years, especially for those ages 18-44. The uninsured rate for Adams County has decreased from 9.4% in 2009-13 to 7.4% in 2012-16 (Table G1).

Table A1: Total Population

	l	United States			Pennsylvania			Adams County		
	2010	2016	% change	2010	2016	% change	2010	2016	% change	
Total Population	309,348,193	323,127,513	4.5%	12,712,343	12,784,227	0.6%	101,475	102,180	0.7%	
Population by Gender			change			change			change	
Male share of population	49.2%	49.2%	0.1%	48.7%	49.0%	0.2%	49.2%	49.3%	0.1%	
Female share of population	50.8%	50.8%	-0.1%	51.3%	51.0%	-0.2%	50.8%	50.7%	-0.1%	

The population of Adams County is growing at a very slow rate, one that is close to that of Pennsylvania. Both areas' population growth rates are significantly below that of the nation as a whole. (Click here to return to text)

Data Source: Census Population Estimates Program

Table A2: Population Shares by Age

	Ui	nited Sta	tes	Pe	ennsylvai	nia	Adams County		
	2010	2016	change	2010	2016	change	2010	2016	change
Ages 0-4	6.5%	6.2%	-0.4%	5.7%	5.6%	-0.2%	5.5%	5.0%	-0.5%
Ages 5-9	6.6%	6.3%	-0.2%	5.9%	5.7%	-0.2%	6.0%	5.6%	-0.4%
Ages 10-14	6.7%	6.4%	-0.3%	6.2%	5.9%	-0.3%	6.4%	5.9%	-0.5%
Ages 15-19	7.1%	6.5%	-0.6%	7.1%	6.4%	-0.7%	7.4%	6.7%	-0.6%
Ages 20-24	7.0%	6.9%	-0.1%	6.9%	6.6%	-0.3%	6.5%	6.6%	0.1%
Ages 25-34	13.3%	13.8%	0.5%	12.0%	13.1%	1.2%	10.3%	10.7%	0.4%
Ages 35-44	13.2%	12.5%	-0.7%	12.6%	11.6%	-1.1%	13.1%	10.7%	-2.3%
Ages 45-54	14.5%	13.2%	-1.3%	15.2%	13.6%	-1.7%	15.6%	14.5%	-1.1%
Ages 55-64	11.9%	12.8%	0.9%	12.9%	14.1%	1.2%	13.4%	14.8%	1.4%
Ages 65-74	7.1%	8.9%	1.8%	7.7%	9.7%	1.9%	8.4%	11.2%	2.7%
Ages 75-84	4.2%	4.4%	0.2%	5.3%	5.1%	-0.2%	5.1%	5.6%	0.5%
Ages 85+	1.8%	2.0%	0.2%	2.4%	2.6%	0.2%	2.2%	2.6%	0.4%
Population Under 18	24.0%	22.8%	-1.2%	21.9%	20.9%	-1.0%	22.1%	20.3%	-1.8%
Population 65+	13.1%	15.2%	2.2%	15.4%	17.4%	2.0%	15.8%	19.4%	3.6%
Median Age	37.2	37.9	0.7	40.2	40.7	0.5	41.4	44.0	2.6

Adams County has an older population than both the state and the nation, and this trend appears to be intensifying. In recent years, the share of children in Adams County has dropped faster than it has in Pennsylvania and the United States, and Adams' share of persons 65 years and older has increased more than in these comparison areas. (Click here to return to text)

Data Source: Census Population Estimates Program

Table A3: Share of Population by Race and Ethnicity

	Ur	United States			Pennsylvania			Adams County		
	2010	2016	change 2010-16	2010	2016	change 2010-16	2010	2016	change 2010-16	
White	80.3%	79.2%	-1.1%	85.3%	84.1%	-1.2%	97.2%	96.7%	-0.4%	
Black/African American	14.0%	14.5%	0.5%	12.3%	13.0%	0.7%	2.2%	2.7%	0.5%	
American Indian/Alaska Native	2.0%	2.1%	0.1%	0.8%	0.9%	0.1%	0.7%	0.8%	0.1%	
Asian	5.8%	6.6%	0.9%	3.2%	4.0%	0.7%	1.0%	1.2%	0.1%	
Native Hawaiian and Pacific Islander	0.4%	0.5%	0.0%	0.1%	0.1%	0.0%	0.0%	0.1%	0.0%	
Hispanic or Latino (of any race)	16.4%	17.8%	1.4%	5.7%	7.0%	1.3%	6.1%	7.0%	0.9%	

White persons comprise over 95% of the population of Adams County. The share of the population that is Latino has grown by about 1% since 2010. (Click here to return to text)

Data Source: Census Population Estimates Program *Note: because persons can be of multiple race and ethnicity categories, the numbers above do not add up to 100%. These data by race are based on persons reporting that they are a particular race alone or in combination with other race categories.

Table B1: Households by Occupancy

	United States			F	Pennsylvani	a	Adams County		
	2009-13	2012-16	change	2009-13	2012-16	change	2009-13	2012-16	change
Total housing units	132,057,804	134,054,899	1,997,095	5,565,653	5,592,175	26,522	40,927	41,344	417
Percent occupied	87.5%	87.8%	0.3%	89.1%	88.7%	-0.4%	93.2%	92.6%	-0.6%
Percent vacant	12.5%	12.2%	-0.3%	10.9%	11.3%	0.4%	6.8%	7.4%	0.6%
Total occupied housing units	115,610,216	117,716,237	2,106,021	4,958,427	4,961,929	3,502	38,141	38,269	128
Percent owner-occupied	64.9%	63.6%	-1.3%	69.8%	69.0%	-0.8%	76.7%	77.8%	1.1%
Percent renter-occupied	35.1%	36.4%	1.3%	30.2%	31.0%	0.8%	23.3%	22.2%	-1.1%

Like Pennsylvania, the share of vacant housing units in Adams County is increasing, a trend that contrasts with that of the nation as a whole. A higher share of households in Adams County own their homes (78%) when compared to the state (69%) and the nation (64%). The rate of homeownership in Adams County has increased in recent years, unlike in these comparison areas. (Click here to return to text)

Table B2: Housing Characteristics

	L	Inited State	es	Р	ennsylvani	ia	Ac	lams Coun	ty
	2009-13	2012-16	change	2009-13	2012-16	change	2009-13	2012-16	change
Owner-Occupied Housing									
Owner-occupied units	75,075,700	74,881,068	-194,632	3,462,512	3,425,706	-36,806	29,258	29,759	501
Housing units with a mortgage	66.4%	64.1%	-2.2%	62.4%	61.0%	-1.4%	66.0%	63.9%	-2.1%
Housing units without a mortgage	33.6%	35.9%	2.2%	37.6%	39.0%	1.4%	34.0%	36.1%	2.1%
Median Value (2016 dollars)	\$182,000	\$184,700	\$2,700	\$169,700	\$167,700	-\$2,000	\$204,200	\$194,800	-\$9,400
Households spending 30% or more of income on owner costs	28.7%	24.9%	-3.9%	26.0%	23.4%	-2.6%	28.6%	23.4%	-5.2%
Renter-Occupied Housing									
Occupied units paying rent	40,534,516	42,835,169	2,300,653	1,495,915	1,536,223	40,308	8,883	8,510	-373
Median monthly rent (2016 dollars)	\$931	\$949	\$18	\$838	\$859	\$21	\$845	\$847	\$2
Households spending 30% or more of income on rent	52.3%	51.1%	-1.2%	50.2%	49.6%	-0.6%	49.4%	50.3%	0.9%

While relatively few Adams County households are renting their home, 50% of those that do rent face a housing affordability problem. For homeowners in Adams County (and the state and the nation), the housing affordability picture has improved in recent years. Housing values in Adams County and Pennsylvania have declined between these two reference periods, in contrast to the small increase in median value that took place in the U.S. as a whole. (Click here to return to text)

Table B3: Households by Type

	United States			P	ennsylvani	ia	Adams County		
	2009-13	2012-16	change	2009-13	2012-16	change	2009-13	2012-16	change
Total households	115,610,216	117,716,237	2,106,021	4,958,427	4,961,929	3,502	38,141	38,269	128
Average household size	2.63	2.64	0.01	2.48	2.49	0.01	2.55	2.55	0.00
Average family size	3.22	3.24	0.02	3.09	3.10	0.01	2.98	2.99	0.01
Shares of all households that are:									
Family households	66.4%	65.9%	-0.5%	64.8%	64.4%	-0.4%	72.1%	71.4%	-0.7%
Male householder, no wife	4.7%	4.8%	0.1%	4.3%	4.4%	0.2%	4.4%	3.8%	-0.6%
Female householder, no husband	13.0%	12.9%	-0.1%	11.9%	11.9%	0.0%	9.3%	9.9%	0.5%
Married-couple families	48.7%	48.2%	-0.5%	48.6%	48.0%	-0.6%	58.3%	57.7%	-0.6%
Nonfamily households	33.6%	34.1%	0.5%	35.2%	35.6%	0.4%	27.9%	28.6%	0.7%
Householder living alone	27.5%	27.7%	0.2%	29.5%	29.6%	0.1%	23.0%	24.0%	1.0%
65 years and over, living alone	9.8%	10.4%	0.6%	11.8%	12.2%	0.4%	10.2%	11.3%	1.1%

The share of non-family households has increased in Adams County, driven by an increase in older residents who live alone. This trend fits the age distribution patterns shown above, and is taking place in Adams County at a faster pace than in Pennsylvania and the United States as a whole. (Click here to return to text)

Table C1: Household and Family Income (Inflation-Adjusted 2016 Dollars)

	U	United States			ennsylvan	ia	Adams County		
	2009-13	2012-16	% change	2009-13	2012-16	% change	2009-13	2012-16	% change
Household Income Quintile Aver	ages								
Lowest quintile	\$12,248	\$12,243	0.0%	\$12,524	\$12,545	0.2%	\$17,233	\$17,473	1.4%
Second quintile	\$32,346	\$32,709	1.1%	\$32,163	\$32,682	1.6%	\$38,678	\$38,691	0.0%
Third quintile	\$54,994	\$55,754	1.4%	\$54,372	\$55,298	1.7%	\$61,346	\$61,856	0.8%
Fourth quintile	\$86,976	\$88,586	1.9%	\$84,805	\$86,722	2.3%	\$87,848	\$88,712	1.0%
Highest quintile	\$191,992	\$200,035	4.2%	\$182,333	\$188,930	3.6%	\$162,731	\$164,783	1.3%
Household Income									
Median household income	\$54,651	\$55,322	1.2%	\$54,138	\$54,895	1.4%	\$61,292	\$61,927	1.0%
Mean household income	\$75,711	\$77,866	2.8%	\$73,239	\$75,235	2.7%	\$73,567	\$74,303	1.0%
Family Income									
Median family income	\$66,678	\$67,871	1.8%	\$68,663	\$69,960	1.9%	\$71,656	\$72,526	1.2%
Mean family income	\$88,178	\$90,960	3.2%	\$88,176	\$90,446	2.6%	\$84,073	\$84,750	0.8%

Adams county households have experienced modest income growth in recent years. The income distribution in Adams County has a larger share of middle-income households, and relatively fewer households with very low or high incomes. (Click here to return to text)

Table C2: Median Household Income by Race and Ethnicity

	United States 2012-16	Pennsylvania 2012-16	Adams County 2012-16
Total	\$55,322	\$54,895	\$61,927
Black	\$36,651	\$33,645	\$45,284*
Latino	\$44,254	\$35,607	\$35,140*
White Non-Latino	\$61,018	\$59,238	\$63,282

There are notable disparities in income by race and ethnicity, in Adams County as well as statewide and nationally. (Click here to return to text)

*Note: Estimates of Black and Latino median household income above are based on relatively small sample sizes and are subject to sampling error.

Table C3: Poverty

	United States			P	ennsylvani	ia	Adams County		
	2009-13	2012-16	change	2009-13	2012-16	change	2009-13	2012-16	change
All families	11.3%	11.0%	-0.3%	9.2%	9.1%	0.0%	5.8%	6.3%	0.5%
With related children under 18 years	17.8%	17.4%	-0.4%	15.5%	15.6%	0.0%	10.7%	12.2%	1.5%
With related children under 5 years	22.7%	21.8%	-0.9%	20.3%	19.7%	-0.6%	15.3%	17.1%	1.8%
Married couple families	5.6%	5.5%	-0.1%	3.8%	3.9%	0.1%	3.0%	3.2%	0.2%
With related children under 18 years	8.3%	7.9%	-0.3%	5.5%	5.5%	0.1%	5.2%	5.7%	0.4%
With related children under 5 years	10.9%	10.3%	-0.6%	7.2%	7.2%	0.0%	7.0%	7.9%	0.9%
Female-headed households, no husband present	30.6%	29.9%	-0.8%	28.9%	28.0%	-0.9%	21.1%	24.0%	2.9%
With related children under 18 years	40.0%	39.7%	-0.3%	39.5%	39.0%	-0.5%	30.8%	35.0%	4.2%*
With related children under 5 years	52.7%	51.7%	-1.0%	52.4%	50.6%	-1.8%	51.5%	50.5%	-1.1%*
All People	15.4%	15.1%	-0.3%	13.3%	13.3%	0.0%	8.7%	9.4%	0.7%
Individual poverty by age									
Under 18 years	21.6%	21.2%	-0.4%	18.8%	19.1%	0.3%	14.4%	15.5%	1.1%
18-64 years	14.3%	14.2%	-0.1%	12.6%	12.7%	0.1%	7.5%	8.4%	0.9%
65 years and over	9.4%	9.3%	-0.1%	8.3%	8.1%	-0.2%	5.7%	5.5%	-0.2%
Individual poverty by race									
Black	27.1%	26.2%	-0.9%	28.6%	28.2%	-0.4%	17.7%	21.5%	3.8%*
Latino	24.7%	23.4%	-1.3%	32.3%	31.5%	-0.8%	33.8%	36.0%	2.2%*
White non-Latino	10.6%	10.6%	0.0%	9.6%	9.6%	0.0%	6.6%	7.2%	0.6%

Overall, poverty rates in Adams County are lower than Pennsylvania and the United States. However, the poverty rate increased for most groups in Adams County between these two reference periods, with the exception of those 65 and older. The rate of poverty for married couple families with children changed from being below that of the state in 2009-13, to being higher than the statewide rate in 2012-16. (Click here to return to text)

*Note: Some poverty rate estimates above are based on relatively small sample sizes, which is important to consider when interpreting change over time.

	ι	United State	s	P	ennsylvani	ia	Ac	lams Cour	ty		
	2009-13	2012-16	change	2009-13	2012-16	change	2009-13	2012-16	change		
Households below poverty level	14.2%	14.1%	-0.1%	12.8%	12.7%	-0.1%	7.6%	7.9%	0.3%		
Households with supplemental security income	5,716,592	6,355,071	638,479	270,849	291,771	20,922	1,202	1,317	115		
Mean supp. security income (annual, 2016 dollars)	\$9,429	\$9,523	\$94	\$9,748	\$9,838	\$90	\$9,687	\$10,234	\$547		
Households with cash public assistance income	3,255,213	3,147,577	-107,636	174,576	168,007	-6,569	664	669	5		
Mean public assist. income (annual, 2016 Dollars)	\$3,923	\$3,336	-\$587	\$3,059	\$2,648	-\$411	\$2,473	\$2,015	-\$458		
Number of households with food stamp benefits	14,339,330	15,360,951	1,021,621	585,892	644,209	58,317	2,563	2,982	419		
Share of households with food stamp benefits	12.4%	13.0%	0.6%	11.8%	13.0%	1.2%	6.7%	7.8%	1.1%		
Share of households receiving foo stamp benefits that are below the poverty level		50.3%	-2.0%	52.9%	49.6%	-3.3%	42.6%	44.9%	2.3%		
Share of households receiving foo stamp benefits with one or more people 60 years and older	d 26.0%	29.2%	3.2%	27.5%	31.6%	4.1%	26.7%	31.1%	4.4%		
Share of households receiving foo stamp benefits with children unde 18 years		53.0%	-2.5%	49.6%	46.8%	-2.8%	59.1%	51.9%	-7.2%		

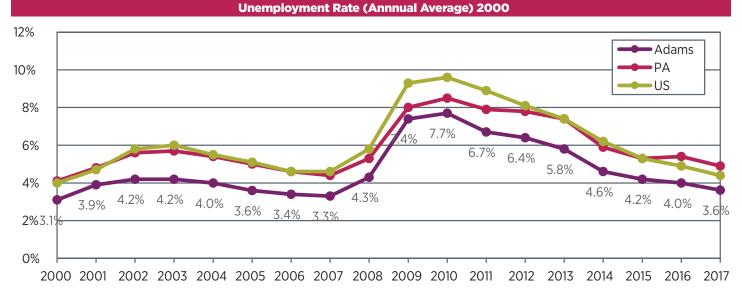
 Table C4: Households with Supplemental Benefits in the Past 12 Months

Adams County experienced an increase in poverty between the 2009-13 and 2012-16 periods, and more households in the county received the assistance of supplemental security income and food stamps/SNAP benefits. (Click here to return to text)

Table D1: Employment Status of the Population 16 years and older

	United States			Ρ	ennsylvan	ia	Adams County		
	2014	2016	change	2014	2016	change	2014	2016	change
Population in labor force	160,532,722	162,892,043	2,359,321	6,507,479	6,477,105	-30,374	52,101	53,083	982
% of population in labor force	63.3%	63.1%	-0.2%	62.5%	62.1%	-0.4%	62.3%	62.8%	0.6%
Civilian labor force	62.9%	62.8%	-0.2%	62.5%	62.1%	-0.4%	62.3%	62.7%	0.5%
Armed forces	0.4%	0.4%	0.0%	0.0%	0.1%	0.0%	0.0%	0.1%	0.1%
% of population not in labor force	36.7%	36.9%	0.2%	37.5%	37.9%	0.4%	37.7%	37.2%	-0.6%
Unemployment Rate (Bureau of Labor Statistics, Annual Average)	6.2%	4.9%	-1.3%	5.9%	5.4%	-0.5%	4.6%	4.0%	-0.6%

Figure D1: Unemployment Rate 2000 - 2017



Adams County's unemployment rate has steadily declined since the recessionary peak reached in 2010, and its rate has consistently been below those of the United States and Pennsylvania. (Click here to return to text)

Data Source for unemployment rates: Bureau of Labor Statistics

Table D2: Means of Transportation to Work

	United States			P	ennsylvan	ia	Adams County		
	2009-13	2012-16	change	2009-13	2012-16	change	2009-13	2012-16	change
Drove alone	76.3%	76.4%	0.1%	76.7%	76.5%	-0.2%	81.8%	83.0%	1.2%
Carpooled	9.8%	9.3%	-0.4%	8.9%	8.5%	-0.3%	8.7%	8.4%	-0.4%
Public transportation	5.0%	5.1%	0.1%	5.4%	5.6%	0.2%	0.4%	0.4%	0.0%
Walked	2.8%	2.8%	0.0%	3.9%	3.8%	0.0%	4.2%	3.7%	-0.6%
Other means	1.8%	1.8%	0.1%	1.3%	1.4%	0.1%	1.3%	0.9%	-0.4%
Worked at home	4.3%	4.6%	0.2%	3.8%	4.2%	0.4%	3.6%	3.7%	0.1%
Mean travel time to work (minutes)	25.5	26.1	0.6	25.9	26.5	0.6	27.7	27.5	-0.2

Most workers in Adams County drive alone to their places of employment. The average commute for Adams County workers has remained essentially unchanged in recent years. (Click here to return to text)

Table D3: Employment by Occupation

	L	Jnited State	es	Ρ	ennsylvan	ia	Ac	lams Cour	ty	
	2009-13	2012-16	change	2009-13	2012-16	change	2009-13	2012-16	change	
Management, business, and financial occupations	14.3%	14.9%	0.6%	13.4%	14.3%	0.9%	11.5%	12.2%	0.7%	
Computer, engineering, and science occupations	5.2%	5.5%	0.3%	5.0%	5.3%	0.3%	3.9%	3.6%	-0.3%	
Community and social service occupations	1.6%	1.7%	0.1%	2.0%	2.0%	0.0%	1.7%	1.5%	-0.2%	
Legal occupations	1.2%	1.1%	0.0%	1.1%	1.1%	0.0%	0.7%	0.4%	-0.3%	
Education, training, and library occupations	5.9%	6.1%	0.1%	5.9%	5.9%	0.0%	5.1%	5.6%	0.5%	
Arts, design, entertainment, sports, and media occupations	1.9%	2.0%	0.1%	1.6%	1.6%	0.1%	1.0%	1.2%	0.2%	
Healthcare practitioners and technical occupations	5.2%	5.8%	0.6%	6.2%	6.9%	0.7%	4.6%	5.3%	0.7%	
Healthcare support occupations	2.3%	2.4%	0.1%	2.6%	2.8%	0.1%	2.3%	2.7%	0.3%	
Protective service occupations	2.2%	2.2%	0.0%	1.9%	2.0%	0.1%	1.8%	2.0%	0.2%	
Food preparation and serving related occupations	5.4%	5.8%	0.4%	5.5%	5.8%	0.3%	5.5%	5.8%	0.2%	
Building and grounds cleaning and maintenance occupations	3.9%	3.9%	0.1%	3.5%	3.5%	0.0%	4.0%	3.8%	-0.2%	
Personal care and service occupation	ns 3.3%	3.7%	0.4%	3.0%	3.6%	0.6%	2.9%	2.7%	-0.1%	
Sales and office occupations	25.4%	23.8%	-1.5%	25.4%	23.6%	-1.7%	22.7%	22.7%	0.0%	
Farming, fishing, and forestry occupations	0.7%	0.7%	0.0%	0.4%	0.5%	0.0%	1.2%	1.8%	0.6%	
Construction and extraction occupations	5.7%	5.0%	-0.7%	5.0%	4.5%	-0.5%	6.7%	5.2%	-1.5%	
Installation, maintenance, and repair occupations	3.4%	3.2%	-0.2%	3.4%	3.2%	-0.2%	4.3%	3.7%	-0.6%	
Production occupations	6.3%	5.9%	-0.4%	6.9%	6.3%	-0.5%	9.3%	9.1%	-0.2%	
Transportation occupations	3.6%	3.6%	0.1%	3.7%	3.7%	0.0%	4.6%	4.1%	-0.5%	
Material moving occupations	2.5%	2.6%	0.1%	3.3%	3.3%	0.0%	6.0%	6.5%	0.5%	

Jobs in Adams County have been shifting away from construction occupations (-1.5%) and into a variety of service occupations, such as management/business (+0.7%) and health care (+1.0%). Farming occupations have increased their share of employment in Adams County as well, by +0.6%. (Click here to return to text)

Table D4: Employment by Class of Worker

	U	United States			ennsylvan	ia	Ac	Adams County		
	2009-13	2012-16	change	2009-13	2012-16	change	2009-13	2012-16	change	
Private wage and salary	78.5%	79.8%	1.3%	82.4%	84.2%	1.8%	80.6%	82.9%	2.3%	
Government	14.8%	14.0%	-0.8%	11.7%	10.6%	-1.1%	12.7%	11.0%	-1.7%	
Self-employed	6.5%	6.0%	-0.5%	5.7%	5.1%	-0.6%	6.5%	5.9%	-0.6%	
Unpaid family workers	0.2%	0.2%	0.0%	0.2%	0.1%	0.0%	0.2%	0.1%	0.0%	

Employment in Adams County has shifted away from the public sector (-1.7% of workers) and the self-employed (-0.6% of workers) and into the private sector (+2.3%). Similar employment trends have taken place in the United States and Pennsylvania. (Click here to return to text)



Table D5: Employment by Industry Sector

	United States				Penns	ylvani	a	Adams County				
	2006	2011	2016	2006- 2016 change	2006	2011	2016	2006- 2016 change	2006	2011		2006- 2016 change
Farming, Forestry, Fishing	1.9%	2.0%	1.8%	-0.1%	1.2%	1.3%	1.3%	0.1%	5.1%	5.2%	5.5%	0.4%
Mining, Utilities	0.9%	1.0%	1.0%	0.2%	0.7%	1.0%	1.0%	0.3%	0.4%	0.6%	0.7%	0.3%
Construction	6.5%	5.0%	5.2%	-1.3%	5.7%	4.9%	4.9%	-0.8%	7.8%	6.4%	6.1%	-1.7%
Manufacturing	8.3%	7.0%	6.8%	-1.6%	9.7%	8.2%	7.8%	-1.9%	17.3%	14.5%	14.9%	-2.4%
Transportation, Wholesale, Warehousing	7.0%	6.7%	7.3%	0.3%	7.2%	7.1%	7.5%	0.3%	5.4%	5.8%	5.2%	-0.3%
Retail	10.7%	10.2%	10.0%	-0.7%	11.2%	10.6%	10.3%	-0.9%	12.2%	11.3%	11.0%	-1.2%
Administrative and Waste Disposal	6.1%	6.1%	6.1%	0.0%	5.0%	5.1%	5.2%	0.2%	2.2%	2.5%	3.5%	1.3%
Information	2.0%	1.8%	1.7%	-0.3%	1.7%	1.5%	1.3%	-0.4%	1.3%	1.3%	0.8%	-0.5%
Professional, Science, and Tech Services	6.4%	6.8%	7.1%	0.6%	6.3%	6.4%	6.9%	0.6%	3.0%	3.5%	4.0%	1.0%
Finance, Real Estate, Management	10.1%	11.2%	11.0%	0.9%	9.6%	11.0%	11.0%	1.4%	5.4%	6.0%	6.1%	0.7%
Health Care	9.9%	11.0%	11.3%	1.5%	12.9%	13.9%	14.2%	1.3%	9.1%*	10.5%*	10.9%*	1.7%*
Entertainment, Food Service, Hotels	8.8%	9.2%	9.7%	0.8%	8.1%	8.4%	8.8%	0.7%	10.8%	11.7%	11.8%	1.0%
Education (private), Personal Services, Civic Orgs.	7.7%	8.1%	8.3%	0.6%	9.3%	9.4%	9.7%	0.4%	10.0%*	10.5%*	10.8%*	0.8%*
Federal and State government	5.7%	5.8%	5.2%	-0.5%	4.7%	4.6%	4.3%	-0.4%	2.6%	2.7%	2.4%	-0.2%
Local government	8.0%	8.0%	7.3%	-0.6%	6.7%	6.6%	5.9%	-0.8%	7.2%	7.5%	6.3%	-0.9%

Jobs in Adams County have been shifting away from construction occupations (-1.5%) and into a variety of service occupations, such as management/business (+0.7%) and health care (+1.0%). Farming occupations have increased their share of employment in Adams County as well, by +0.6%. (Click here to return to text)

Table E1: Educational Attainment of the 25+ Population

	United States			P	ennsylvani	ia	Adams County			
	2009-13	2012-16	change	2009-13	2012-16	change	2009-13	2012-16	change	
Less than high school diploma	14.0%	13.0%	-1.0%	11.3%	10.5%	-0.9%	14.0%	12.2%	-1.8%	
High school graduate (incl. equivalency)	28.1%	27.5%	-0.6%	37.0%	36.0%	-1.1%	42.0%	41.9%	-0.1%	
Some college, no degree	21.2%	21.0%	-0.3%	16.5%	16.2%	-0.3%	16.1%	15.9%	-0.2%	
Associate's degree	7.8%	8.2%	0.4%	7.6%	8.0%	0.5%	7.5%	8.2%	0.6%	
Bachelor's degree	18.0%	18.8%	0.8%	16.9%	17.8%	1.0%	11.9%	12.8%	0.9%	
Graduate or professional degree	10.8%	11.5%	0.7%	10.7%	11.5%	0.8%	8.5%	9.1%	0.6%	
Percent high school graduate or highe	r 86.0%	87.0%	1.0%	88.7%	89.5%	0.9%	86.0%	87.8%	1.8%	
Percent bachelor's degree or higher	28.8%	30.3%	1.5%	27.5%	29.3%	1.8%	20.4%	21.9%	1.5%	

In general, adults in Adams County have lower levels of educational attainment than those in Pennsylvania and the United States. However, educational attainment in Adams County is improving, and this improvement is happening at similar rates to these comparison areas. (Click here to return to text)

Table E2: School Enrollment

	United States			Ρ	ennsylvani	ia	Adams County			
	2009-13	2012-16	change	2009-13	2012-16	change	2009-13	2012-16	change	
Total School Enrollees										
Nursery school, preschool	5,011,192	4,959,823	-51,369	197,902	185,764	-12,138	1,191	1,262	71	
Kindergarten	4,208,394	4,181,764	-26,630	147,963	143,093	-4,870	944	889	-55	
Elementary school (grades 1-8)	32,796,856	32,831,750	34,894	1,219,439	1,200,055	-19,384	9,824	9,755	-69	
High school (grades 9-12)	17,153,559	16,985,786	-167,773	663,526	635,645	-27,881	5,826	5,312	-514	
College, undergraduate	19,333,036	19,060,114	-272,922	744,717	700,536	-44,181	6,094	5,885	-209	
Graduate or professional school	4,121,769	4,129,133	7,364	175,489	166,850	-8,639	744	830	86	
Share of Persons Enrolled in Schoo	l by Age									
3 and 4 years	47.7%	47.5%	-0.2%	49.2%	46.9%	-2.3%	36.6%	39.4%	2.8%	
5 to 9 years	95.6%	95.6%	0.0%	94.6%	94.2%	-0.4%	94.8%	95.2%	0.4%	
10 to 14 years	98.4%	98.3%	-0.1%	98.2%	98.1%	-0.1%	99.6%	99.7%	0.1%	
15 to 17 years	96.6%	96.8%	0.2%	96.6%	96.3%	-0.3%	96.5%	97.2%	0.7%	
18 and 19 years	74.9%	75.6%	0.7%	79.2%	78.9%	-0.3%	82.8%	76.9%	-5.9%	
20 to 24 years	42.5%	42.0%	-0.5%	44.1%	42.7%	-1.4%	40.4%	40.5%	0.1%	
25 to 34 years	13.6%	12.8%	-0.8%	12.1%	11.0%	-1.1%	9.0%	9.2%	0.2%	
5 years and over	2.8%	2.7%	-0.1%	2.2%	2.0%	-0.2%	2.2%	2.3%	0.1%	
Share Enrolled in College by Gende	er									
Share of men ages 18-24 enrolled in college	38.7%	38.7%	0.0%	41.8%	40.8%	-1.0%	40.6%	39.6%	-1.0%	
Share of women ages 18-24 enrolled in college	47.5%	47.1%	-0.4%	50.9%	49.1%	-1.8%	52.0%	49.0%	-3.0%	

Rates of school enrollment in Adams County have improved for children of all ages (3-17). Rates of college enrollment have dropped for those ages 18-24 in Adams County, although women of this age group continue to be enrolled in college at a rate similar to that of Pennsylvania, and higher than the U.S. rate. (Click here to return to text)

II. HEALTH STATISTICS

Table G1. Health Insurance Coverage

		-							
	ι	Inited State	es	Ρ	ennsylvan	ia	Ac	lams Cour	ity
	2009-13	2012-16	change	2009-13	2012-16	change	2009-13	2012-16	change
Health Insurance Coverage									
Population with health insurance coverage	260,878,830	276,875,891	15,997,061	11,296,309	11,579,382	283,073	90,718	93,036	2,318
% of population with coverage	85.1%	88.3%	3.2%	90.2%	92.0%	1.8%	90.6%	92.6%	2.0%
% with private health insurance	66.0%	66.7%	0.7%	73.0%	73.0%	0.0%	78.7%	78.9%	0.2%
% with public coverage	30.2%	33.0%	2.8%	31.4%	33.5%	2.1%	27.2%	29.8%	2.6%
% of population without health insurance	14.9%	11.7%	-3.2%	9.8%	8.0%	-1.8%	9.4%	7.4%	-2.0%
Percent Uninsured by Race and Etl	hnicity								
Black	17.5%	13.7%	-3.8%	14.5%	11.5%	-3.0%	16.4%	6.3%	-10.1%*
Latino	29.6%	23.4%	-6.2%	20.6%	17.4%	-3.2%	30.8%	19.3%	-11.5%*
White Non-Latino	10.4%	8.1%	-2.3%	8.2%	6.6%	-1.6%	7.7%	6.5%	-1.2%
Percent Uninsured by Age Group									
Under 6 years old	6.1%	4.8%	-1.3%	5.3%	5.0%	-0.3%	7.6%	5.8%	-1.8%
Ages 6-17	8.4%	6.4%	-2.0%	5.3%	4.7%	-0.6%	5.3%	4.5%	-0.8%
Ages 18-24	26.4%	16.4%	-10.0%	17.8%	11.0%	-6.8%	16.2%	10.3%	-5.9%
Ages 25-44	24.0%	19.5%	-4.5%	16.6%	13.8%	-2.8%	18.0%	12.9%	-5.1%
Ages 45-64	15.1%	12.3%	-2.8%	9.7%	8.0%	-1.7%	7.9%	7.6%	-0.3%
Ages 65 and older	1.0%	0.9%	-0.1%	0.5%	0.5%	0.0%	0.5%	0.3%	-0.2%

The number, and share, of Adams County residents with health coverage has increased in recent years, especially for those ages 18-44. The uninsured rate for Adams County has decreased from 9.4% in 2009-13 to 7.4% in 2012-16. (Click here to return to text)

*Note: Estimates of Black and Latino uninsured rates above are based on relatively small sample sizes, which is important to consider when interpreting change over time.



Overview - York County

All data in the tables below are extracted from Census Bureau American Community Survey (ACS) 1-year and 5-year estimates, except where noted. Since all ACS data is survey based, all of the estimates provided in this report are subject to sampling error. This report uses ACS 5-year survey estimates whenever possible because the data has larger sample sizes, which produces more precise estimates due to smaller sampling error. When population subgroups are particularly small, readers are reminded that large year-to-year changes in the estimates may be a result of sampling variability. All monetary values in the tables are expressed in 2016 inflation-adjusted dollars, using the CPI index for all urban consumers.

Demographic Statistics

A. Population Statistics

Total Population

The county of York has grown at a significantly faster rate (1.9%) than Pennsylvania (0.6%), but at less than half the rate of the United States as a whole, which has a 2010-2016 population growth rate of 4.5% (Table A1).

Population Shares by Age

The populations of York and each comparison area are aging. York's population is shifting into older age cohorts at a faster rate, with the share of its population that is 65 and older increasing by 2.5% (compared to 2.0% for Pennsylvania and 2.2% for the United States) between 2010 and 2016. Additionally, the share of York's population that is under 18 is decreasing faster than that of the state (Table A2).

Share of Population by Race and Ethnicity

White persons make up the largest racial group in York County (91%). The White share of the population of York is decreasing slowly, displaying a trend similar to the state and the nation. The Latino population of York is growing; in 2016 Latinos constituted 7.2% of the county's population, which is an increase from 5.7% in 2010. (Table A3).

B. Household Statistics

Households by Occupancy

York has a much lower housing vacancy rate than the U.S. and Pennsylvania. York's rate of homeownership has decreased slightly in the last few years, showing a similar trend to Pennsylvania and the United States (Table B1).

Housing Characteristics

Housing affordability, defined as the share of persons who are spending more than 30% of income on housing costs, is improving for York homeowners but becoming more difficult for renters. The median home value in York has dropped by more than it has in Pennsylvania; the trends in both of these areas are in contrast to the small increase in median home value that the nation as a whole has experienced (Table B2).

Households by Type

The share of York County non-family households has increased slightly, and York has also experienced a drop in the share of married-couple households (from 54.9% to 53.4%). However, married-couple families remain the largest household type in York County (Table B3).

C. Income Statistics

Household and Family Income

Household incomes in York County have been declining for lower and middle-class households; only the highest quintile (the wealthiest 20% of households) has experienced income gains between these two reference periods. Unlike York, the state and nation did see modest income gains for middleincome households (Table C1).

Median Household Income by Race and Ethnicity

Large disparities in income exist between race and ethnicity groups in York, and in comparison areas. Overall, when inflation is taken into account, York County's median household income has declined slightly between these two reference periods (Table C2).

Poverty

In the 5-year periods compared above, poverty rates are increasing in York, at the same time as poverty is decreasing in the United States as a whole, and remaining steady for Pennsylvania. It is notable that groups with low poverty rates, such as married couple families, White individuals, and the elderly, are experiencing small increases in their poverty rates. This is in contrast to groups with high poverty rates, such as single female-headed households, children, and some minority groups, which are experiencing decreases in poverty (Table C3).

Households with Supplemental Benefits in the Past 12 Months

Consistent with the increase in its rate of poverty, York County also has higher counts of households receiving supplemental benefits such as cash public assistance or food stamps/SNAP in the 2012-16 period, compared to 2009-13 (Table C4).

D. Employment Statistics

Employment Status of the Population 16 Years and Older

York has experienced both a declining unemployment rate, and a declining rate of labor force participation over the 2014 to 2016 period. Its trends are similar to those in Pennsylvania as a whole. Pennsylvania hasn't kept pace with the nation's improvement in its unemployment rate from 2014 to 2017, but York County has done slightly better than the state in terms of unemployment since the recession's peak in 2010 (Table D1).

Means of Transportation to Work

The share of workers who work from home has increased in all areas between 2014 and 2016. York has a high, and increasing, share of workers who drive alone to their places of employment. However, the average commute in York is shorter in 2016, when compared to 2014 (Table D2).

Employment by Occupation

These data show how the types of jobs that workers hold in York have changed in the prior 6 years. York has seen jobs moving into healthcare practitioner (+0.8%), food service (+0.6%), and transportation (+0.7%) occupations. Jobs have shifted away from sales and office occupations (-1.3%), and from production occupations (-0.8%). Each of these trends are similar to those in Pennsylvania and the United States, with the exception of York's increase in transportation jobs, which did not occur in the comparison areas (Table D3).

Employment by Class of Worker

In York, the share of self-employed workers has fallen in the prior 6-years, with jobs shifting into the private and government sectors. The share of government jobs in has grown recently in York, in contrast to the decreases in Pennsylvania and the nation as a whole (Table D4).

Employment by Industry Sector

Over the prior decade, York has experienced a rapid shift in jobs away from manufacturing (-3.4%) and growth in the sectors of Health Care (+1.9%) and Finance, Real Estate, and Management (+1.6%) (Table D5).

E. Education Statistics

Educational Attainment of the 25+ Population

The educational attainment profile of York is improving, but not as fast as those of Pennsylvania or the United States (Table E1).

School Enrollment

In York, school enrollment for preschool aged (3-4 years) and college aged (18-24 years) has increased. Both of these positive trends are in contrast to those of Pennsylvania as a whole. Notably, York's increase in college attendance appears to be driven by women, as the share of men ages 18-24 that are enrolled in college has barely changed over the prior three years. School enrollment for older adults (ages 25+) has decreased in York, as it has in Pennsylvania and the United States (Table E2).

G. Health Care Access Statistics

Health Insurance Coverage

Health coverage has increased in York, as it has in Pennsylvania and the United States. In York, this trend is driven by an increase in public coverage rather than private health insurance. The rates of uninsured individuals have dropped steeply for persons ages 18-24, and more slowly for the 25-64 population (Table G1).

Table A1: Total Population

	l	United States			Pennsylvania	a	York County		
	2010	2016	% change	2010	2016	% change	2010	2016	% change
Total Population	309,348,193	323,127,513	4.5%	12,712,343	12,784,227	0.6%	435,540	443,744	1.9%
Population by Gender			change			change			change
Male share of population	49.2%	49.2%	0.1%	48.7%	49.0%	0.2%	49.3%	49.4%	0.1%
Female share of population	50.8%	50.8%	-0.1%	51.3%	51.0%	-0.2%	50.7%	50.6%	-0.1%

The county of York has grown at a significantly faster rate (1.9%) than Pennsylvania (0.6%), but at less than half the rate of the United States as a whole, which has a 2010-2016 population growth rate of 4.5%. (Click here to return to text)

Data Source: Census Population Estimates Program

Table A2: Population Shares by Age

	Ui	United States		Pe	ennsylva	nia	York County		
	2010	2016	change	2010	2016	change	2010	2016	change
Ages 0-4	6.5%	6.2%	-0.4%	5.7%	5.6%	-0.2%	6.1%	5.7%	-0.4%
Ages 5-9	6.6%	6.3%	-0.2%	5.9%	5.7%	-0.2%	6.5%	6.2%	-0.3%
Ages 10-14	6.7%	6.4%	-0.3%	6.2%	5.9%	-0.3%	6.6%	6.5%	-0.1%
Ages 15-19	7.1%	6.5%	-0.6%	7.1%	6.4%	-0.7%	6.8%	6.3%	-0.5%
Ages 20-24	7.0%	6.9%	-0.1%	6.9%	6.6%	-0.3%	5.7%	5.9%	0.1%
Ages 25-34	13.3%	13.8%	0.5%	12.0%	13.1%	1.2%	11.6%	12.3%	0.7%
Ages 35-44	13.2%	12.5%	-0.7%	12.6%	11.6%	-1.1%	13.8%	12.0%	-1.7%
Ages 45-54	14.5%	13.2%	-1.3%	15.2%	13.6%	-1.7%	15.9%	14.5%	-1.4%
Ages 55-64	11.9%	12.8%	0.9%	12.9%	14.1%	1.2%	12.9%	14.2%	1.2%
Ages 65-74	7.1%	8.9%	1.8%	7.7%	9.7%	1.9%	7.6%	9.6%	2.1%
Ages 75-84	4.2%	4.4%	0.2%	5.3%	5.1%	-0.2%	4.6%	4.8%	0.2%
Ages 85+	1.8%	2.0%	0.2%	2.4%	2.6%	0.2%	1.9%	2.2%	0.3%
Population Under 18	24.0%	22.8%	-1.2%	21.9%	20.9%	-1.0%	23.4%	22.2%	-1.2%
Population 65+	13.1%	15.2%	2.2%	15.4%	17.4%	2.0%	14.1%	16.6%	2.5%
Median Age	37.2	37.9	0.7	40.2	40.7	0.5	40.2	41.1	0.9

The populations of York and each comparison area are aging. York's population is shifting into older age cohorts at a faster rate, with the share of its population that is 65 and older increasing by 2.5% (compared to 2.0% for Pennsylvania and 2.2% for the United States) between 2010 and 2016. Additionally, the share of York's population that is under 18 is decreasing faster than that of the state. (Click here to return to text)

Data Source: Census Population Estimates Program

Table A3: Share of Population by Race and Ethnicity

	Ur	United States			Pennsylvania			York County		
	2010	2016	change 2010-16	2010	2016	change 2010-16	2010	2016	change 2010-16	
White	80.3%	79.2%	-1.1%	85.3%	84.1%	-1.2%	92.2%	91.3%	-0.8%	
Black/African American	14.0%	14.5%	0.5%	12.3%	13.0%	0.7%	7.2%	8.1%	0.8%	
American Indian/Alaska Native	2.0%	2.1%	0.1%	0.8%	0.9%	0.1%	0.7%	0.8%	0.1%	
Asian	5.8%	6.6%	0.9%	3.2%	4.0%	0.7%	1.7%	1.9%	0.2%	
Native Hawaiian and Pacific Islander	0.4%	0.5%	0.0%	0.1%	0.1%	0.0%	0.1%	0.1%	0.0%	
Hispanic or Latino (of any race)	16.4%	17.8%	1.4%	5.7%	7.0%	1.3%	5.7%	7.2%	1.5%	

White persons make up the largest racial group in York County (91%). The White share of the population of York is decreasing slowly, displaying a trend similar to the state and the nation. The Latino population of York is growing; in 2016 Latinos constituted 7.2% of the county's population, which is an increase from 5.7% in 2010. (Click here to return to text)

Data Source: Census Population Estimates Program *Note: because persons can be of multiple race and ethnicity categories, the numbers above do not add up to 100%. These data by race are based on persons reporting that they are a particular race alone or in combination with other race categories.

Table B1: Households by Occupancy

		United States			ennsylvani	a	York County			
	2009-13	2012-16	change	2009-13	2012-16	change	2009-13	2012-16	change	
Total housing units	132,057,804	134,054,899	1,997,095	5,565,653	5,592,175	26,522	179,021	180,618	1,597	
Percent occupied	87.5%	87.8%	0.3%	89.1%	88.7%	-0.4%	93.6%	93.0%	-0.6%	
Percent vacant	12.5%	12.2%	-0.3%	10.9%	11.3%	0.4%	6.4%	7.0%	0.6%	
Total occupied housing units	115,610,216	117,716,237	2,106,021	4,958,427	4,961,929	3,502	167,592	168,008	416	
Percent owner-occupied	64.9%	63.6%	-1.3%	69.8%	69.0%	-0.8%	75.1%	74.5%	-0.7%	
Percent renter-occupied	35.1%	36.4%	1.3%	30.2%	31.0%	0.8%	24.9%	25.5%	0.7%	

York has a much lower housing vacancy rate than the U.S. and Pennsylvania. York's rate of homeownership has decreased slightly in the last few years, showing a similar trend to Pennsylvania and the United States. (Click here to return to text)

Table B2: Housing Characteristics

	United States			Ρ	ennsylvani	ia	York County			
	2009-13	2012-16	change	2009-13	2012-16	change	2009-13	2012-16	change	
Owner-Occupied Housing										
Owner-occupied units	75,075,700	74,881,068	-194,632	3,462,512	3,425,706	-36,806	125,926	125,132	-794	
Housing units with a mortgage	66.4%	64.1%	-2.2%	62.4%	61.0%	-1.4%	68.5%	66.4%	-2.0%	
Housing units without a mortgage	33.6%	35.9%	2.2%	37.6%	39.0%	1.4%	31.5%	33.6%	2.0%	
Median Value (2016 dollars)	\$182,000	\$184,700	\$2,700	\$169,700	\$167,700	-\$2,000	\$179,500	\$168,300	-\$11,200	
Households spending 30% or more of income on owner costs	28.7%	24.9%	-3.9%	26.0%	23.4%	-2.6%	27.8%	24.7%	-3.2%	
Renter-Occupied Housing										
Occupied units paying rent	40,534,516	42,835,169	2,300,653	1,495,915	1,536,223	40,308	41,666	42,876	1,210	
Median monthly rent (2016 dollars)	\$931	\$949	\$18	\$838	\$859	\$21	\$845	\$871	\$26	
Households spending 30% or more of income on rent	52.3%	51.1%	-1.2%	50.2%	49.6%	-0.6%	48.7%	50.6%	1.9%	

Housing affordability, defined as the share of persons who are spending more than 30% of income on housing costs, is improving for York homeowners but becoming more difficult for renters. The median home value in York has dropped by more than it has in Pennsylvania; the trends in both of these areas are in contrast to the small increase in median home value that the nation as a whole has experienced. (Click here to return to text)

Table B3: Households by Type

	United States			P	ennsylvani	ia	York County			
	2009-13	2012-16	change	2009-13	2012-16	change	2009-13	2012-16	change	
Total households	115,610,216	117,716,237	2,106,021	4,958,427	4,961,929	3,502	167,592	168,008	416	
Average household size	2.63	2.64	0.01	2.48	2.49	0.01	2.55	2.57	0.02	
Average family size	3.22	3.24	0.02	3.09	3.10	0.01	3.02	3.06	0.04	
Shares of all households that are:										
Family households	66.4%	65.9%	-0.5%	64.8%	64.4%	-0.4%	70.3%	69.4%	-0.9%	
Male householder, no wife	4.7%	4.8%	0.1%	4.3%	4.4%	0.2%	4.4%	4.9%	0.5%	
Female householder, no husband	13.0%	12.9%	-0.1%	11.9%	11.9%	0.0%	10.9%	11.1%	0.1%	
Married-couple families	48.7%	48.2%	-0.5%	48.6%	48.0%	-0.6%	54.9%	53.4%	-1.5%	
Nonfamily households	33.6%	34.1%	0.5%	35.2%	35.6%	0.4%	29.7%	30.6%	0.9%	
Householder living alone	27.5%	27.7%	0.2%	29.5%	29.6%	0.1%	24.5%	24.6%	0.1%	
65 years and over, living alone	9.8%	10.4%	0.6%	11.8%	12.2%	0.4%	10.2%	10.4%	0.2%	

The share of York County non-family households has increased slightly, and York has also experienced a drop in the share of married-couple households (from 54.9% to 53.4%). However, married-couple families remain the largest household type in York County. (Click here to return to text)

Table C1: Household and Family Income (Inflation-Adjusted 2016 Dollars)

	U	United States			ennsylvan	ia	York County			
	2009-13	2012-16	% change	2009-13	2012-16	% change	2009-13	2012-16	% change	
Household Income Quintile Aver	rages									
Lowest quintile	\$12,248	\$12,243	0.0%	\$12,524	\$12,545	0.2%	\$16,071	\$15,815	-1.6%	
Second quintile	\$32,346	\$32,709	1.1%	\$32,163	\$32,682	1.6%	\$38,115	\$37,659	-1.2%	
Third quintile	\$54,994	\$55,754	1.4%	\$54,372	\$55,298	1.7%	\$60,729	\$59,721	-1.7%	
Fourth quintile	\$86,976	\$88,586	1.9%	\$84,805	\$86,722	2.3%	\$88,952	\$88,000	-1.1%	
Highest quintile	\$191,992	\$200,035	4.2%	\$182,333	\$188,930	3.6%	\$165,903	\$168,313	1.5%	
Household Income										
Median household income	\$54,651	\$55,322	1.2%	\$54,138	\$54,895	1.4%	\$60,523	\$59,853	-1.1%	
Mean household income	\$75,711	\$77,866	2.8%	\$73,239	\$75,235	2.7%	\$73,954	\$73,902	-0.1%	
Family Income										
Median family income	\$66,678	\$67,871	1.8%	\$68,663	\$69,960	1.9%	\$72,119	\$70,732	-1.9%	
Mean family income	\$88,178	\$90,960	3.2%	\$88,176	\$90,446	2.6%	\$85,116	\$84,865	-0.3%	

Household incomes in York County have been declining for lower and middle-class households; only the highest quintile (the wealthiest 20% of households) has experienced income gains between these two reference periods. Unlike York, the state and nation did see modest income gains for middle-income households. (Click here to return to text)

Table C2: Median Household Income by Race and Ethnicity

	U	United States			ennsylvan	ia	York County		
	2009-13	2012-16	% change	2009-13	2012-16	% change	2009-13	2012-16	% change
Total	\$54,651	\$55,322	\$671	\$54,138	\$54,895	\$757	\$60,523	\$59,853	-\$670
Black	\$36,487	\$36,651	\$164	\$33,407	\$33,645	\$238	\$40,742	\$42,842	\$2,100*
Latino	\$43,314	\$44,254	\$940	\$34,991	\$35,607	\$616	\$34,937	\$32,226	-\$2,711*
White Non-Latino	\$59,854	\$61,018	\$1,164	\$57,731	\$59,238	\$1,507	\$62,552	\$62,285	-\$267

Large disparities in income exist between race and ethnicity groups in York, and in comparison areas. Overall, when inflation is taken into account, York County's median household income has declined slightly between these two reference periods. (Click here to return to text)

*Note: Estimates of Black and Latino median household income above are based on relatively small sample sizes, which is important to consider when interpreting change over time.

Table C3: Poverty

	United States			P	ennsylvani	ia	York County			
	2009-13	2012-16	change	2009-13	2012-16	change	2009-13	2012-16	change	
All families	11.3%	11.0%	-0.3%	9.2%	9.1%	0.0%	7.2%	7.5%	0.3%	
With related children under 18 years	17.8%	17.4%	-0.4%	15.5%	15.6%	0.0%	12.2%	12.6%	0.3%	
With related children under 5 years	22.7%	21.8%	-0.9%	20.3%	19.7%	-0.6%	17.0%	14.2%	-2.8%	
Married couple families	5.6%	5.5%	-0.1%	3.8%	3.9%	0.1%	2.5%	2.9%	0.4%	
With related children under 18 years	8.3%	7.9%	-0.3%	5.5%	5.5%	0.1%	3.2%	3.2%	0.0%	
With related children under 5 years	10.9%	10.3%	-0.6%	7.2%	7.2%	0.0%	3.6%	3.9%	0.4%	
Female-headed households, no husband present	30.6% 2	9.9%	-0.8%	28.9%	28.0%	-0.9%	28.2%	27.8%	-0.4%	
With related children under 18 years	40.0%	39.7%	-0.3%	39.5%	39.0%	-0.5%	37.1%	36.7%	-0.4%	
With related children under 5 years	52.7%	51.7%	-1.0%	52.4%	50.6%	-1.8%	54.1%	44.9%	-9.2%*	
All People	15.4%	15.1%	-0.3%	13.3%	13.3%	0.0%	10.1%	10.5%	0.4%	
Individual poverty by age										
Under 18 years	21.6%	21.2%	-0.4%	18.8%	19.1%	0.3%	14.8%	16.0%	1.2%	
18-64 years	14.3%	14.2%	-0.1%	12.6%	12.7%	0.1%	9.3%	9.4%	0.1%	
65 years and over	9.4%	9.3%	-0.1%	8.3%	8.1%	-0.2%	5.9%	6.8%	0.9%	
Individual poverty by race										
Black	27.1%	26.2%	-0.9%	28.6%	28.2%	-0.4%	27.9%	25.2%	-2.7%*	
Latino	24.7%	23.4%	-1.3%	32.3%	31.5%	-0.8%	35.7%	32.1%	-3.6%*	
White non-Latino	10.6%	10.6%	0.0%	9.6%	9.6%	0.0%	7.2%	7.6%	0.4%	

In the 5-year periods compared above, poverty rates are increasing in York, at the same time as poverty is decreasing in the United States as a whole, and remaining steady for Pennsylvania. It is notable that groups with low poverty rates, such as married couple families, White individuals, and the elderly, are experiencing small increases in their poverty rates. This is in contrast to groups with high poverty rates, such as single female-headed households, children, and some minority groups, which are experiencing decreases in poverty. (Click here to return to text)

*Note: Some poverty rate estimates above are based on relatively small sample sizes, which is important to consider when interpreting change over time.

Table C4: Households with Supplemental Benefits in the Past 12 Months

	United States		:S	P	ennsylvani	ia	York County		
	2009-13	2012-16	change	2009-13	2012-16	change	2009-13	2012-16	change
Households below poverty level	14.2%	14.1%	-0.1%	12.8%	12.7%	-0.1%	9.4%	9.6%	0.2%
Households with supplemental security income	5,716,592	6,355,071	638,479	270,849	291,771	20,922	7,338	8,148	810
Mean supp. security income (annual, 2016 dollars)	\$9,429	\$9,523	\$94	\$9,748	\$9,838	\$90	\$9,987	\$9,957	-\$30
Households with cash public assistance income	3,255,213	3,147,577	-107,636	174,576	168,007	-6,569	4,375	4,453	78
Mean public assist. income (annual, 2016 Dollars)	\$3,923	\$3,336	-\$587	\$3,059	\$2,648	-\$411	\$2,900	\$2,699	-\$201
Number of households with food stamp benefits	14,339,330	15,360,951	1,021,621	585,892	644,209	58,317	15,377	18,091	2,714
Share of households with food stamp benefits	12.4%	13.0%	0.6%	11.8%	13.0%	1.2%	9.2%	10.8%	1.6%
Share of households receiving food stamp benefits that are below the poverty level	d 52.3%	50.3%	-2.0%	52.9%	49.6%	-3.3%	50.6%	46.3%	-4.3%
Share of households receiving food stamp benefits with one or more people 60 years and older	d 26.0%	29.2%	3.2%	27.5%	31.6%	4.1%	23.8%	27.8%	4.0%
Share of households receiving food stamp benefits with children under 18 years		53.0%	-2.5%	49.6%	46.8%	-2.8%	56.0%	53.3%	-2.7%

Consistent with the increase in its rate of poverty, York County also has higher counts of households receiving supplemental benefits such as cash public assistance or food stamps/SNAP in the 2012-16 period, compared to 2009-13. (Click here to return to text)

Table D1: Employment Status of the Population 16 years and older

	United States			P	ennsylvan	ia	York County		
	2014	2016	change	2014	2016	change	2014	2016	change
Population in labor force	160,532,722	162,892,043	2,359,321	6,507,479	6,477,105	-30,374	234,603	230,806	-3,797
% of population in labor force	63.3%	63.1%	-0.2%	62.5%	62.1%	-0.4%	66.2%	64.7%	-1.6%
Civilian labor force	62.9%	62.8%	-0.2%	62.5%	62.1%	-0.4%	66.1%	64.6%	-1.5%
Armed forces	0.4%	0.4%	0.0%	0.0%	0.1%	0.0%	0.1%	0.1%	0.0%
% of population not in labor force	36.7%	36.9%	0.2%	37.5%	37.9%	0.4%	33.8%	35.3%	1.6%
Unemployment Rate (Bureau of Labor Statistics, Annual Average)	6.2%	4.9%	-1.3%	5.9%	5.4%	-0.5%	5.4%	4.7%	-0.7%
	2.270			2.370	2.170	2.070	2.170	, / 0	2.7.70

Figure D1: Unemployment Rate 2000 - 2017

Unemployment Rate (Annnual Average) 2000-2017



York has experienced both a declining unemployment rate, and a declining rate of labor force participation over the 2014 to 2016 period. Its trends are similar to those in Pennsylvania as a whole. Pennsylvania hasn't kept pace with the nation's improvement in its unemployment rate from 2014 to 2017, but York County has done slightly better than the state in terms of unemployment since the recession's peak in 2010. (Click here to return to text)

Data Source for unemployment rates: Bureau of Labor Statistics

Table D2: Means of Transportation to Work

	United States			Ρ	ennsylvar	nia	York County			
	2014	2016	change	2014	2016	change	2014	2016	change	
Drove alone	76.5%	76.3%	-0.1%	76.4%	76.1%	-0.3%	85.1%	86.1%	1.0%	
Carpooled	9.2%	9.0%	-0.2%	8.5%	8.4%	-0.2%	8.3%	7.3%	-1.0%	
Public transportation	5.2%	5.1%	-0.1%	5.7%	5.6%	-0.2%	0.8%	0.8%	-0.1%	
Walked	2.7%	2.7%	0.0%	3.9%	3.6%	-0.2%	1.4%	1.6%	0.2%	
Other means	1.9%	1.8%	-0.1%	1.4%	1.5%	0.1%	1.2%	0.6%	-0.6%	
Worked at home	4.5%	5.0%	0.6%	4.1%	4.8%	0.7%	3.2%	3.6%	0.5%	
Mean travel time to work (minutes)	26.0	26.6	0.6	26.4	26.9	0.5	27.6	27.2	-0.4	

The share of workers who work from home has increased in all areas between 2014 and 2016. York has a high, and increasing, share of workers who drive alone to their places of employment. However, the average commute in York is shorter in 2016, when compared to 2014. (Click here to return to text)

Table D3: Employment by Occupation

	L	United State	es	P	ennsylvan	ia	Y	ork Count	у
	2006-10	2012-16	change	2006-10	2012-16	change	2006-10	2012-16	change
Management, business, and financial occupations	14.3%	14.9%	0.6%	13.4%	14.3%	0.9%	12.9%	13.2%	0.2%
Computer, engineering, and science occupations	5.2%	5.5%	0.3%	5.0%	5.3%	0.3%	4.9%	4.9%	0.0%
Community and social service occupations	1.6%	1.7%	0.1%	2.0%	2.0%	0.0%	1.7%	1.8%	0.1%
Legal occupations	1.2%	1.1%	0.0%	1.1%	1.1%	0.0%	0.7%	0.7%	0.0%
Education, training, and library occupations	5.9%	6.1%	0.1%	5.9%	5.9%	0.0%	5.0%	4.9%	-0.2%
Arts, design, entertainment, sports, and media occupations	1.9%	2.0%	0.1%	1.6%	1.6%	0.1%	1.4%	1.4%	0.0%
Healthcare practitioners and technical occupations	5.2%	5.8%	0.6%	6.2%	6.9%	0.7%	5.1%	5.9%	0.8%
Healthcare support occupations	2.3%	2.4%	0.1%	2.6%	2.8%	0.1%	2.4%	2.4%	0.0%
Protective service occupations	2.2%	2.2%	0.0%	1.9%	2.0%	0.1%	1.8%	2.1%	0.4%
Food preparation and serving related occupations	5.4%	5.8%	0.4%	5.5%	5.8%	0.3%	5.2%	5.7%	0.6%
Building and grounds cleaning and maintenance occupations	3.9%	3.9%	0.1%	3.5%	3.5%	0.0%	3.0%	3.3%	0.3%
Personal care and service occupation	ns 3.3%	3.7%	0.4%	3.0%	3.6%	0.6%	2.8%	2.9%	0.1%
Sales and office occupations	25.4%	23.8%	-1.5%	25.4%	23.6%	-1.7%	24.8%	23.5%	-1.3%
Farming, fishing, and forestry occupations	0.7%	0.7%	0.0%	0.4%	0.5%	0.0%	0.4%	0.3%	-0.1%
Construction and extraction occupations	5.7%	5.0%	-0.7%	5.0%	4.5%	-0.5%	5.8%	4.7%	-1.1%
Installation, maintenance, and repair occupations	3.4%	3.2%	-0.2%	3.4%	3.2%	-0.2%	4.4%	4.4%	0.0%
Production occupations	6.3%	5.9%	-0.4%	6.9%	6.3%	-0.5%	9.9%	9.1%	-0.8%
Transportation occupations	3.6%	3.6%	0.1%	3.7%	3.7%	0.0%	3.5%	4.2%	0.7%
Material moving occupations	2.5%	2.6%	0.1%	3.3%	3.3%	0.0%	4.4%	4.6%	0.2%

These data show how the types of jobs that workers hold in York have changed in the prior 6 years. York has seen jobs moving into healthcare practitioner (+0.8%), food service (+0.6%), and transportation (+0.7%) occupations. Jobs have shifted away from sales and office occupations (-1.3%), and from production occupations (-0.8%). Each of these trends are similar to those in Pennsylvania and the United States, with the exception of York's increase in transportation jobs, which did not occur in the comparison areas. (Click here to return to text)

Table D4: Employment by Class of Worker

	U	United States			ennsylvan	ia	York County			
	2006-10	2012-16	change	2006-10	2012-16	change	2006-10	2012-16	change	
Private wage and salary	78.5%	79.8%	1.3%	82.4%	84.2%	1.8%	83.7%	84.1%	0.4%	
Government	14.8%	14.0%	-0.8%	11.7%	10.6%	-1.1%	10.7%	11.1%	0.3%	
Self-employed	6.5%	6.0%	-0.5%	5.7%	5.1%	-0.6%	5.4%	4.7%	-0.8%	
Unpaid family workers	0.2%	0.2%	0.0%	0.2%	0.1%	0.0%	0.1%	0.2%	0.0%	

In York, the share of self-employed workers has fallen in the prior 6-years, with jobs shifting into the private and government sectors. The share of government jobs in has grown recently in York, in contrast to the decreases in Pennsylvania and the nation as a whole. (Click here to return to text)

Table D5: Employment by Industry Sector

	United States				Penns	ylvani	a	York County				
	2006	2011	2016	2006- 2016 change	2006	2011	2016	2006- 2016 change	2006	2011		2006- 2016 change
Farming, Forestry, Fishing	1.9%	2.0%	1.8%	-0.1%	1.2%	1.3%	1.3%	0.1%	1.4%	1.4%	1.5%	0.1%
Mining, Utilities	0.9%	1.0%	1.0%	0.2%	0.7%	1.0%	1.0%	0.3%	0.8%	0.7%	0.8%	0.0%
Construction	6.5%	5.0%	5.2%	-1.3%	5.7%	4.9%	4.9%	-0.8%	7.7%	6.8%	7.0%	-0.7%
Manufacturing	8.3%	7.0%	6.8%	-1.6%	9.7%	8.2%	7.8%	-1.9%	17.0%	14.6%	13.5%	-3.4%
Transportation, Wholesale, Warehousing	7.0%	6.7%	7.3%	0.3%	7.2%	7.1%	7.5%	0.3%	7.6%	7.4%	7.9%	0.3%
Retail	10.7%	10.2%	10.0%	-0.7%	11.2%	10.6%	10.3%	-0.9%	12.9%	12.3%	11.7%	-1.3%
Administrative and Waste Disposal	6.1%	6.1%	6.1%	0.0%	5.0%	5.1%	5.2%	0.2%	5.0%	5.5%	5.8%	0.8%
Information	2.0%	1.8%	1.7%	-0.3%	1.7%	1.5%	1.3%	-0.4%	1.1%	1.1%	0.9%	-0.2%
Professional, Science, and Tech Services	6.4%	6.8%	7.1%	0.6%	6.3%	6.4%	6.9%	0.6%	4.3%	4.4%	4.4%	0.2%
Finance, Real Estate, Management	10.1%	11.2%	11.0%	0.9%	9.6%	11.0%	11.0%	1.4%	7.4%	8.7%	9.0%	1.6%
Health Care	9.9%	11.0%	11.3%	1.5%	12.9%	13.9%	14.2%	1.3%	9.9%	11.3%	11.8%	1.9%
Entertainment, Food Service, Hotels	8.8%	9.2%	9.7%	0.8%	8.1%	8.4%	8.8%	0.7%	7.8%	7.8%	8.3%	0.5%
Education (private), Personal Services, Civic Orgs.	7.7%	8.1%	8.3%	0.6%	9.3%	9.4%	9.7%	0.4%	7.6%	7.9%	8.3%	0.7%
Federal and State government	5.7%	5.8%	5.2%	-0.5%	4.7%	4.6%	4.3%	-0.4%	3.2%	3.3%	2.9%	-0.3%
Local government	8.0%	8.0%	7.3%	-0.6%	6.7%	6.6%	5.9%	-0.8%	6.4%	6.8%	6.2%	-0.1%

Over the prior decade, York has experienced a rapid shift in jobs away from manufacturing (-3.4%) and growth in the sectors of Health Care (+1.9%) and Finance, Real Estate, and Management (+1.6%). (Click here to return to text)

Data Source: Bureau of Economic Analysis *Note: The BEA suppresses values for certain sectors in some years, and in some cases we have had to estimate these values, by looking at the distribution of employment between the suppressed sectors for other years. Estimates are controlled to fit within the total number of jobs in the BEA dataset. The Adams County Health Care and Education employment shares were estimated in this way.

Table E1: Educational Attainment of the 25+ Population

	United States			P	ennsylvani	ia	York County			
	2009-13	2012-16	change	2009-13	2012-16	change	2009-13	2012-16	change	
Less than high school diploma	14.0%	13.0%	-1.0%	11.3%	10.5%	-0.9%	11.9%	11.5%	-0.4%	
High school graduate (incl. equivalency)	28.1%	27.5%	-0.6%	37.0%	36.0%	-1.1%	41.6%	40.6%	-1.0%	
Some college, no degree	21.2%	21.0%	-0.3%	16.5%	16.2%	-0.3%	16.6%	16.5%	-0.1%	
Associate's degree	7.8%	8.2%	0.4%	7.6%	8.0%	0.5%	7.9%	8.3%	0.4%	
Bachelor's degree	18.0%	18.8%	0.8%	16.9%	17.8%	1.0%	14.5%	15.1%	0.6%	
Graduate or professional degree	10.8%	11.5%	0.7%	10.7%	11.5%	0.8%	7.6%	8.0%	0.5%	
Percent high school graduate or highe	r 86.0%	87.0%	1.0%	88.7%	89.5%	0.9%	88.1%	88.5%	0.4%	
Percent bachelor's degree or higher	28.8%	30.3%	1.5%	27.5%	29.3%	1.8%	22.0%	23.1%	1.1%	

The educational attainment profile of York is improving, but not as fast as those of Pennsylvania or the United States. (Click here to return to text)

Table E2: School Enrollment

	United States			Р	ennsylvani	a	York County		
	2009-13	2012-16	change	2009-13	2012-16	change	2009-13	2012-16	change
Total School Enrollees									
Nursery school, preschool	5,011,192	4,959,823	-51,369	197,902	185,764	-12,138	6,829	6,241	-588
Kindergarten	4,208,394	4,181,764	-26,630	147,963	143,093	-4,870	5,844	5,524	-320
Elementary school (grades 1-8)	32,796,856	32,831,750	34,894	1,219,439	1,200,055	-19,384	44,749	45,074	325
High school (grades 9-12)	17,153,559	16,985,786	-167,773	663,526	635,645	-27,881	23,916	23,192	-724
College, undergraduate	19,333,036	19,060,114	-272,922	744,717	700,536	-44,181	18,526	18,266	-260
Graduate or professional school	4,121,769	4,129,133	7,364	175,489	166,850	-8,639	4,023	4,082	59
Share of Persons Enrolled in Schoo	l by Age								
3 and 4 years	47.7%	47.5%	-0.2%	49.2%	46.9%	-2.3%	46.6%	47.3%	0.7%
5 to 9 years	95.6%	95.6%	0.0%	94.6%	94.2%	-0.4%	94.4%	93.6%	-0.8%
10 to 14 years	98.4%	98.3%	-0.1%	98.2%	98.1%	-0.1%	98.9%	98.8%	-0.1%
15 to 17 years	96.6%	96.8%	0.2%	96.6%	96.3%	-0.3%	98.0%	98.2%	0.2%
18 and 19 years	74.9%	75.6%	0.7%	79.2%	78.9%	-0.3%	69.3%	72.5%	3.2%
20 to 24 years	42.5%	42.0%	-0.5%	44.1%	42.7%	-1.4%	31.1%	31.9%	0.8%
25 to 34 years	13.6%	12.8%	-0.8%	12.1%	11.0%	-1.1%	10.0%	9.3%	-0.7%
35 years and over	2.8%	2.7%	-0.1%	2.2%	2.0%	-0.2%	2.3%	2.0%	-0.3%
Share Enrolled in College by Gende	er								
Share of men ages 18-24 enrolled in college	38.7%	38.7%	0.0%	41.8%	40.8%	-1.0%	28.1%	27.9%	-0.2%
Share of women ages 18-24 enrolled in college	47.5%	47.1%	-0.4%	50.9%	49.1%	-1.8%	37.1%	39.1%	2.0%

In York, school enrollment for preschool aged (3-4 years) and college aged (18-24 years) has increased. Both of these positive trends are in contrast to those of Pennsylvania as a whole. Notably, York's increase in college attendance appears to be driven by women, as the share of men ages 18-24 that are enrolled in college has barely changed over the prior three years. School enrollment for older adults (ages 25+) has decreased in York, as it has in Pennsylvania and the United States. (Click here to return to text)

II. HEALTH STATISTICS

Table G1. Health Insurance Coverage

		0							
	L	Jnited State	es	P	ennsylvan	ia	York County		
	2009-13	2012-16	change	2009-13	2012-16	change	2009-13	2012-16	change
Health Insurance Coverage									
Population with health insurance coverage	260,878,830	276,875,891	15,997,061	11,296,309	11,579,382	283,073	392,485	404,247	11,762
% of population with coverage	85.1%	88.3%	3.2%	90.2%	92.0%	1.8%	90.9%	92.8%	1.9%
% with private health insurance	66.0%	66.7%	0.7%	73.0%	73.0%	0.0%	75.9%	75.5%	-0.4%
% with public coverage	30.2%	33.0%	2.8%	31.4%	33.5%	2.1%	28.2%	31.2%	3.0%
% of population without health insurance	14.9%	11.7%	-3.2%	9.8%	8.0%	-1.8%	9.1%	7.2%	-1.9%
Percent Uninsured by Race and Et	hnicity								
Black	17.5%	13.7%	-3.8%	14.5%	11.5%	-3.0%	15.4%	10.9%	-4.5%
Latino	29.6%	23.4%	-6.2%	20.6%	17.4%	-3.2%	19.9%	18.1%	-1.8%
White Non-Latino	10.4%	8.1%	-2.3%	8.2%	6.6%	-1.6%	7.9%	6.2%	-1.7%
Percent Uninsured by Age Group									
Under 6 years old	6.1%	4.8%	-1.3%	5.3%	5.0%	-0.3%	3.9%	3.6%	-0.3%
Ages 6-17	8.4%	6.4%	-2.0%	5.3%	4.7%	-0.6%	3.9%	3.4%	-0.5%
Ages 18-24	26.4%	16.4%	-10.0%	17.8%	11.0%	-6.8%	22.2%	10.4%	-11.8%
Ages 25-44	24.0%	19.5%	-4.5%	16.6%	13.8%	-2.8%	15.0%	13.0%	-2.0%
Ages 45-64	15.1%	12.3%	-2.8%	9.7%	8.0%	-1.7%	8.6%	7.3%	-1.3%
Ages 65 and older	1.0%	0.9%	-0.1%	0.5%	0.5%	0.0%	0.3%	0.2%	-0.1%

Health coverage has increased in York, as it has in Pennsylvania and the United States. In York, this trend is driven by an increase in public coverage rather than private health insurance. The rates of uninsured individuals have dropped steeply for persons ages 18-24, and more slowly for the 25-64 population. (Click here to return to text)



Notes

Appendix F

Robert Wood Johnson County Health Rankings Data Summary





F1

Table F-1. Robert Wood Johnson County Health Rankings Comparison Table

performers, the United States overall, Pennsylvania overall, Pennsylvania top performers, and county-level rankings data for York, Adams, Lancaster, and Lebanon Counties. Adams County outperforms York County in overall rankings, with the exception of their clinical care rank. All four counties perform in the bottom of the The table below shows the 2018 Robert Wood Johnson County Health Rankings comparison data for 2018. The table columns compare nation-wide top state in physical environment rank.

		Health Outcomes								
Focus Area	Measure	Description	Top performers	US overall	PA overall	PA top performers	York Cnty	Adams Cnty	Lancaster Cnty	Lebanon Cnty
Health Outcomes Rank							19	10	œ	15
Length of Life Rank							19	9	10	20
Length of Life (50%)	Premature death	Years of potential life lost before age 75 per 100,000 population (age-adj)	5300	6700	0069	3900	6496	5431	5747	6584
Quality of Life Rank							30	23	15	18
	Poor or fair health Poor physical health days	% of adults reporting fair or poor health (age-adj) Average # physically unhealthy days reported	12	16	15	11	13	13	13	13
Quality of Life		in past 30 days (age-adj)	3.0	3.7	3.9	3.0	3.4	3.5	3.5	3.3
(%)DC)		Average # Intertually unification ages reported in past 30 days (age-ad)		3.8	4.3	3.5	4.0	3.9	3.9	3.8
	Low birthweight	% of live births with low birthweight (< 2500 grams)) 6.0	8.0	8.2	/.0	8.0	/.8	/.0	/.9
		Health Behaviors								
Health Behaviors Rank							25	15	10	œ
Tobacco Use (10%)	Adult smoking	% of adults who are current smokers	14	17	18	12	15	15	14	15
	Adult obesity	% of adults that report a BMI of 30 or more	26	28	30	27	34	31	28	28
	Food environment index	Index of factors that contribute to a healthy food environment (0=worst, 10=best)	8.6	L.T	8.2	8.8	8.4	8.9	8.5	8.8
	Physical inactivity	% of adults aged 20+ reporting no								
Diet and Exercise		leisure-time physical activity	20	23	24	21	22	24	22	23
(10%)	Access to exercise opportunities	% of population w/adequate access to locations for physical activity	91	83	68	84	59	42	53	64
Alcohol and Drug	Excessive drinking	% of adults reporting binge or heavy drinking	13	18	21	21	19	21	21	20
Use (5%)	Alcohol-impaired driving deaths	% of driving deaths with alcohol involvement	13	29	30	32	33	35	31	17
Sexual Activity (5%)	Sexually transmitted infections	# of newly diagnosed chlamydia cases per 100,000	145	479	418	200	348	203	275	271
	Teen births	Teen birth rate per 1,000 female population, ages 15-19	5-19 15	27	21	6	24	21	19	27
		Clinical Care								
Clinical Care Rank							6	22	24	18
	Uninsured	% of population under age 65 without health insurance	nce 6	11	ω	ß	7	8	11	б
Access to Care	Primary care physicians	Ratio of population to primary care physicians	1030:1	1320:1	1232:1	221:1 221:1	1433:1	2006:1	1355:1	1651:1 222.4.1
(10%)	Dentists Mental health providers	Ratio of population to dentists Datio of nonulation to mental health providers	1280:1 330:1	1480:1 470:1	1481:1 550-1	965:1 235:1	1929:1 967:1	3096:1 1/179-1	1807:1 851-1	2204:1 127-1
	ואפוונמו וובמונוו או האומבו א	צמנוס סן אסאממנוסוו נס ווובוונמו וובמונוו איסעימביא	1.000	4/ 0.1	1.500	1.002	201.1	1400.1	0.1.1	4-0/.1

F2

		Clinical Care								
Focus Area	Measure	Description	Top performers	US overall	PA overall	PA top performers	York Cnty	Adams I Cnty	Lancaster Cnty	Lebanon Cnty
	Preventable hospital stays	# hospital stays for ambulatory-care sensitive cond. per 1,000 Medicare enrollees	35	49	52	26	42	44	34	39
Qualtiy of Care (10%)	Diabetic monitoring	% diabetic Medicare enrollees age 65-75 receive HbA1c monitor	91	85	86	87	06	88	06	89
	Mammography screening	% of female Medicare enrollees ages 67-69 that receive mammography screening	71	63	65	69	68	64	69	67
		Social and Economic Environment	ment							
Social & Economic Factors Rank	ors Rank						12	7	ი	11
Education (10%)	High school graduation Some college	% of ninth-grade cohort that graduates in four years % of adults ages 25-44 years with some		83	85	94	88	92	06	86
		post-secondary education	72	65	64	78	57	54	55	54
Employment (10%)	Unemployment	% of population ages 16 and older unemployed but seeking	м	Ŋ	IJ	4	Ŋ	4	4	5
	Children in poverty	% of children under age 16 in poverty	12	20	18	ω	14	14	16	15
Income (10%)	Income inequality	Ratio of household income at the 80th to 20th percentile	3.7	5.0	4.8	4.4	4.0	3.8	3.9	3.8
Family and	Children in single-parent h	Children in single-parent hh % of children that live in a household headed by single	gle 20	34	34	21	34	28	24	33
Social Support (5%)	Social associations	Number of membership associations per 10,000 population	22	6	12	11	13	10	14	16
Community Safety	Violent crime	# of reported violent crime offenses per 100,000 population	62	380	333	163	227	105	168	183
(5%)	Injury deaths	Number of deaths due to injury per 100,000 population	55	65	76	61	74	62	61	61
		Physical Environment								
Physical Environment Rank	ank						65	60	64	57
Air and Water Qualtiy (5%)	Air pollution - particulate matter	Ave. daily density of fine particulate matter in mcgs per cubic meter (PM2.5)	6.7	8.7	10.4	8.4	12.2	11.6	12.8	12.5
	Drinking water violations	Indicator of presence of health-related drinking water	er N/A	N/A	N/A	No	Yes	Yes	Yes	Yes
Housing and	Severe housing problems	% households w/at least 1 of 4 housing problems: overcrowding, high housing costs, lack of kitchen or plumbing facilities	Ø	19	15	7	14	13	16	13
Transit (5%)	Driving alone to work	% of the workforce that drives alone to work	72	76	76	78	85	83	79	81
	Long commute - driving alone	Among workers who commute in their car alone, % that commute > 30 minutes	15	35	36	20	37	38.2	28.9	31.9
Source: Robert Wood Jo	Source: Robert Wood Johnson Foundation (2018). 2018 County	018 County Health Rankings California and Nevaded Data. Retrieved from www.countyhealthrankings.org	d Data. Retri	eved from	WWW.CO	ountyhealt	hrankings.	.org		

Figure F-1. Health Factors Ranking Trend

The figure above shows the movement of counties on their health factors ranking from 2010 to 2018. Counties with sharp declines in ranking are outlined in red, and counties with sharp increases in ranking are outlined in green. York and Adams Counties are outlined in purple.

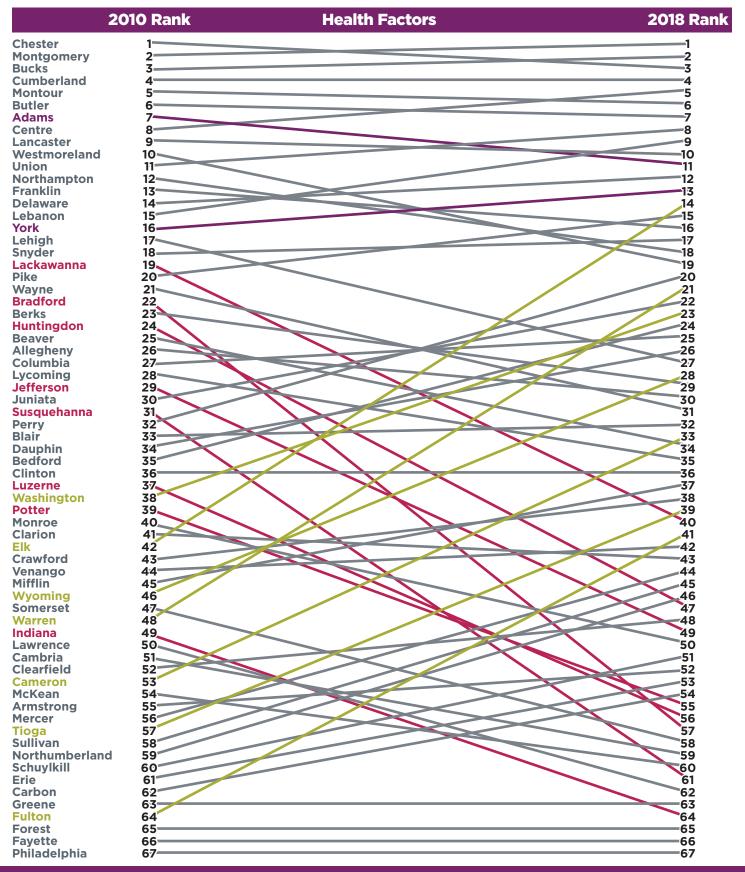


Figure F-2. Health Outcomes Ranking Trend

The figure above shows the movement of counties on their health outcomes ranking from 2010 to 2018. Counties with sharp declines in ranking are outlined in red, and counties with sharp increases in ranking are outlined in green. York and Adams Counties are outlined in purple.

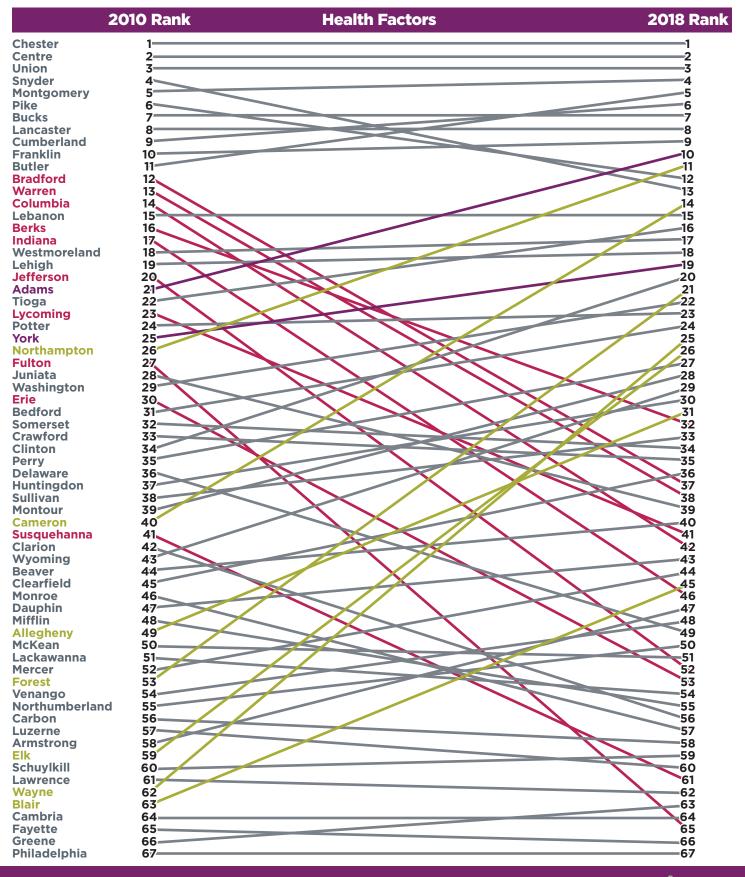


Figure F-3. Relative Health Rankings, Adams County, 2018

This figure displays the relative ranking of Adams County in 2018 and trend data (average rank) from 2010-2018 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.

Indicator Access to exercise opportunities Adult obesity Adult smoking Alcohol-impaired driving deaths Children in poverty Children in single parent households Daily fine particulate matter Dentists **Diabetic screening** Drinking water violations Driving alone to work Excessive drinking Fair or poor health Food environment index High school grad rate (by cohort) Inadequate social support Income inequality Injury deaths Long commute-driving alone Low birthweight Mammography screening Mental health care providers Overall health factors Overall health outcomes Physical inactivity Poor mental health days Poor physical health days Premature death Preventable hospital stays Primary care physicians Severe housing problems Sexually transmitted infections Social associations Some college Teen birth rate Unemployment Uninsured Violent crime rate

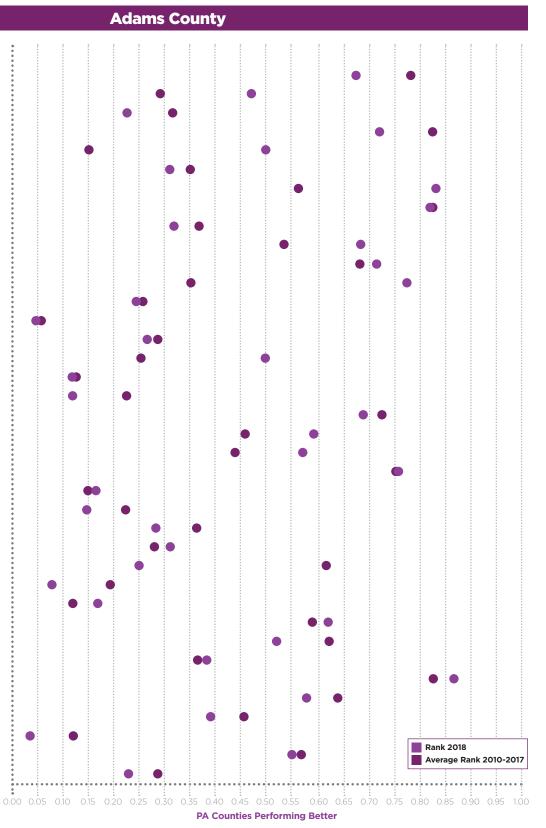
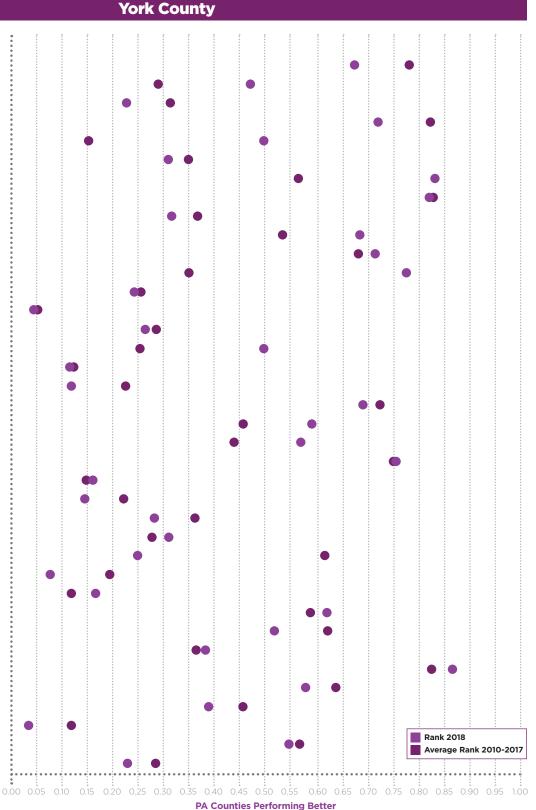


Figure F-4. Relative Health Rankings, York County, 2018

This figure displays the relative ranking of York County in 2018 and trend data (average rank) from 2010-2018 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.





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