

2007 ERIE COUNTY HEALTH ASSESSMENT

Erie County, PA

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INTRODUCTION

As part of its mission, the Erie County Department of Health is committed to reducing preventable illness and controlling the spread of communicable disease within Erie County. Programs and policies that address specific health problems are implemented within the community to meet these objectives. A prerequisite to program development is knowledge of population demographics and health status. The 2007 Erie County Health Assessment provides current quantifiable measurements of health status indicators and sociodemographic characteristics specific to Erie County residents. It is a tool to be used for monitoring the health of the community, for program planning, and for program evaluation.

The 2007 Erie County Health Assessment reviews the following six major topics: Demographics, Maternal, Infant, and Child Health, Mortality, Communicable Disease, Adult Behavioral Health Risks, and Youth Behavioral Health Risks. Annual as well as three- and five-year average annual values are presented to gauge current health indicators and to chart trends over time. Pennsylvania (PA) data and Healthy People 2010 (HP 2010) goals are included for comparison. Data for subpopulations within Erie County were examined to identify potential health disparities, but no distinction was made between urban, suburban, and rural populations.

The primary sources of data and information for this assessment are the Erie County Mortality Report (2006), the Erie County Maternal and Infant Health Study (2006), the Erie County Behavioral Risk Factor Surveillance Survey (BRFSS, 2004), the Erie County Pennsylvania Youth Survey (PAYS, 2005), former Erie County Health Status Indicator Project reports, the Erie County Communicable Disease database, and the Erie County Tumor Registry database. Secondary sources include the Pennsylvania Department of Health, the Pennsylvania State Data Center, the Centers for Disease Control and Prevention, the National Center for Health Statistics, and the United States Census Bureau. These agencies specifically disclaim responsibility for any of the analyses, interpretations, or conclusions that appear in this report. Additional helpful sources are listed in the References and Data Sources section.

Support in preparing this publication was provided by Tenderr Lee Little, Division of Public Health Preparedness.

REFERENCES AND DATA SOURCES

Erie County Department of Health at <http://www.ecdh.org>

Census 2000 and the American Community Survey 2004, United State Census Bureau at <http://www.census.gov>

Centers for Disease Control and Prevention at <http://www.cdc.gov>

CDC Wonder at <http://wonder.cdc.gov/>

Erie County Department of Planning, Erie County Demographic Study, 2003 at <http://www.eriecountyplanning.org/>

Greater Erie Community Action Coalition, Head Start Community Assessment for Erie, PA, 2006 at <http://www.gecac.org/index.htm>

Healthy People 2010 Database at <http://www.cdc.gov/nchs/hphome.htm>

National Cancer Institute at <http://www.cancer.gov/statistics/>

National Center for Health Statistics at <http://www.cdc.gov/nchs/Default.htm>

Pennsylvania Department of Education at <http://www.pde.state.pa.us/>

Pennsylvania Department of Health at <http://www.health.state.pa.us>

Pennsylvania Department of Health, Bureau of Health Statistics and Research at <http://www.dsf.health.state.pa.us>

Pennsylvania State Data Center, Pennsylvania County Data Book, Erie County, 2005 at <http://www.pasdc.hbg.psu.edu/>

SUCSESSES AND CHALLENGES

- Socioeconomic, racial, ethnic, and gender disparities are a clear and overarching challenge to improved community health among Erie County residents.
- Since 1990, Erie County has experienced growth in the African-American and Hispanic populations. (pp.6-7)
- The number of residents living below poverty level has increased. Target groups within this population are children and single mother families with children under the age of 18. (p.7)
- Despite a recent decline in infant and neonatal mortality, death rates remain high. (p.9)
- First trimester prenatal care has increased, but obvious racial and ethnic differences persist. (p.9)
- Over 40% of live births are to single mothers. (p.10)
- Teen pregnancy rates are lower compared to PA and the Healthy People 2010 goal. (p.10)
- 98% of the Erie County Department of Health's two-year old children clients are fully-immunized. (p.11)
- Heart disease and stroke death rates have steadily declined, but rates remain high. (pp.12-14)
- Cancer and lung cancer death rates are high. (pp.12-13)
- Cases of tuberculosis and syphilis are low, while the number of new AIDS cases declined. (pp.16-17)
- Gonorrhea and chlamydia infections are a significant public health problem. (pp.16-17)
- Lack of health insurance has increased among adults. (p.19)
- Cholesterol screening has surpassed the Healthy People 2010 goal. (p.20)
- Smoking among youths, adults, and pregnant mothers is a major health concern. (pp.10,21,25)
- Since 2001, smoking among 18 to 29 year olds has decreased, and the overall number of nonsmokers has increased. (p.21)
- Mammograms and Pap testing have met or exceeded Healthy People 2010 goals. (p.22)
- Over 60% of adults are overweight, and nearly 30% are obese. (p.24)
- Alcohol is the leading drug used by public school students. (p.25)

DEMOGRAPHIC OVERVIEW

General Description

Erie County is located in northwestern Pennsylvania on the south shore of Lake Erie. New York state is its eastern boundary, Ohio is its western boundary, and Crawford County, PA lies to the south. The County has a total land area of 812.6 square miles. Approximately 37.0% is forestland, 26.8% is cropland, and 7.7% is pastureland.

Two cities, 22 townships, and 14 boroughs make up the municipal structure of Erie County. The five largest municipalities within the county include Erie City, Millcreek Township, Harborcreek, North East (borough and township), and Fairview (borough and township).

Erie County's 2004 population, as reported by the PA State Data Center, was 282,355. 80.4% of the area's population was urban, with residence chiefly in and around Erie City and Corry City. The City of Erie's estimated 2004 population of 103,925 accounts for approximately 37% of the total County population.

In 2004, 90.7% of Erie County's population was Caucasian (white), down from 93.6% in 2000; 6.6% was African-American (black), up from 6.1% in 2000; and 2.4% was Hispanic, up from 2.2% in 2000.

The major ethnic groups of Erie County are Anglo-Saxon, German, Italian, Polish, Slovak, Russian, African-American, and Hispanic.

Economic Activity

Based on percent of employees, the leading industry sectors in Erie County are manufacturing, health care and social assistance, retail trade, local government, and accommodation and food services.

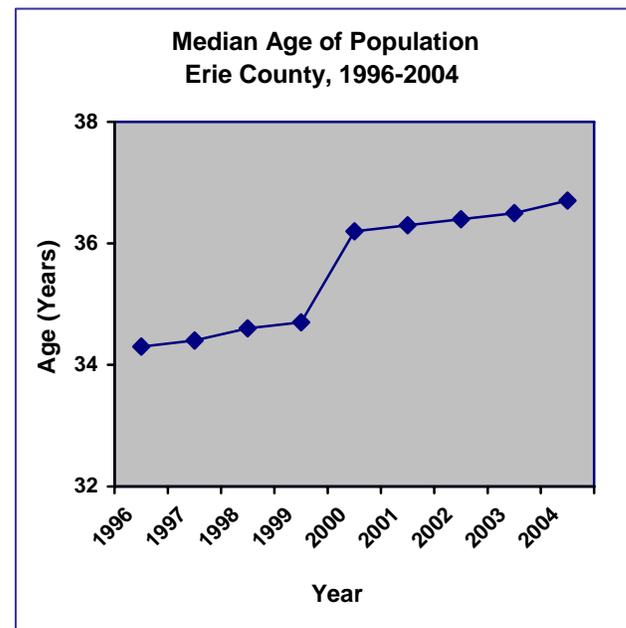
In 2004, 94.6% of all eligible individuals in Erie County were employed. The 2005 unemployment rate for Erie County was 5.4%.

In 2000, 87.1% of all eligible minority individuals were employed, 87.0% of the available African-American labor force was employed, and 85.7% of the available Hispanic work force was employed.

In 2004, per capita personal income in Erie County was \$26,764, per capita income was \$19,534, the median household income was \$39,627, the median family income was \$50,527, the median male income was \$38,789, and the median female income was \$27,322.

Population

There were 282,355 people residing in Erie County in 2004 (51.2% female, 48.8% male). With respect to age, 24% were under 18, 10% were 18-24, 26% were 25-44, 26% were 45-64, and 14% were 65 and over. The percentage of individuals age 65 and over has remained steady over the last ten years.



Despite the relative stability of the Erie County population, migration from Erie City to surrounding areas within the county continues. Erie City has lost 4.6% of its population since 1990 and 12.9% since 1980. Much of this was migration to other areas within the county.

From 2000-2004, the average number of births was 3,358 per year with an average birth rate of 12.0 births per 1,000 total population. During this same period, the average number of deaths was 2,685 per year with an average death rate of 8.6 deaths per 1,000 total population.

From 2000-2004, the number of whites in Erie County decreased by 1.8% (7.3% decrease since 1990), the African-American population increased 8.2% (33.2% increase since 1990), while the Hispanic population increased 9.1% (91.1% increase since 1990).

Families and Households

In 2004, there were 107,449 households in Erie County with an average of 2.5 persons per household. 50% of these households were married-couple families, 16% were other family households, 26% were people living alone, and 8% were other non-family households.

In 2004, 66% (70,839) of Erie County households were family households with an average family size of 3. Of these 70,839 family households, 75.8% (53,724) were married-couple families, 19.8% (14,058) were single female families, 4% (2,807) were single male families, and 46.7% (33,127) had related children under the age of 18. Of the 14,058 single female families, 71.9% (10,114) had related children under the age of 18 years.

In 2004, 4,638 grandparents lived with their grandchildren (under 18 years of age) in their own households and 1,267 (27.3%) of these grandparents were responsible for their grandchildren.

Poverty

In 2004, 15.3% of the Erie County population lived below the poverty level.

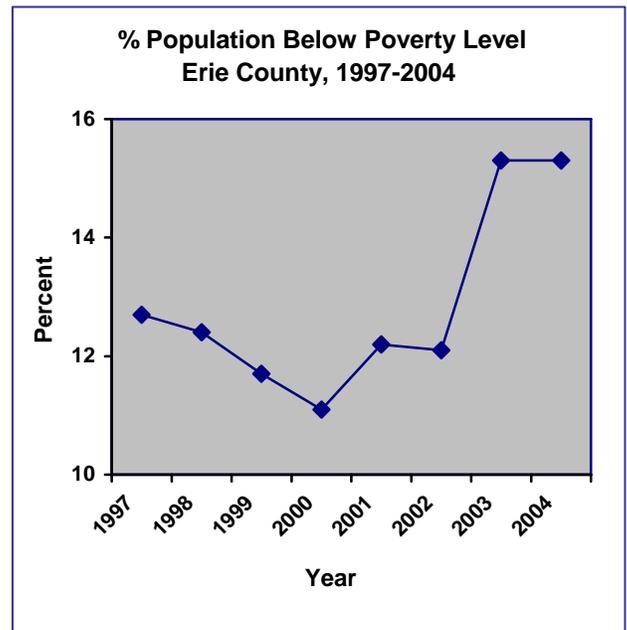
In 2004, 47.3% (4,787) of all single female families with related children under the age of 18 years lived below the poverty level.

In 2004, 11.5% (8,117) of all family households were below poverty level. Of these family households, 61.7% (5,006) were single female

families and 59.0% (4,787) were single female families with related children under the age of 18.

In 2004, 28.8% of Erie County children under the age of 6 lived below the poverty level, 18.8% of children under the age of 18 lived below the poverty level, and 8.2% of adults age 65 and over lived below the poverty level.

For all Erie County residents in 2004, 2.9% received cash benefits through the Public Assistance program, 4.1% received Supplemental Security Income, and 8.4% received Food Stamp benefits.



Housing

In Erie County, 31.6% of all assessed properties are within Erie City limits and approximately 25% of all Erie City assessed property is tax-exempt with a total value of \$889.4 million. In Millcreek Township, about 7% or \$300 million worth of property is tax exempt. The total assessed property value for Erie County is \$2,612,794,000.

In Erie County, the average cost of a home in 2004 was \$59,359 while the median cost was \$93,088. The average cost of a home in Erie City was \$40,683. Erie County excluding Erie City averages \$68,073.

For occupied housing units, 71.2% were owner-occupied and 28.8% were renter-occupied with a median rent of \$549.

The Erie Housing Authority has 2,157 family units of housing in Erie City, 15 family units in North East, and 69 family units in Corry. There are also 683 Section 8 units available in Erie City, 154 in Corry, and 547 throughout the remainder of the county. There are 13 complexes serving the elderly with 1,666 units available, 15 shelter providers with 258 available beds, 11 transitional housing providers with 210 available beds, and 117 handicapped housing units.

Medical Facilities

There are 4 general acute care hospitals, 1 rehabilitation hospital, 1 federal hospital, 1 regional cancer center, 1 children's hospital, 1 specialty care hospital, 21 nursing homes, and 23 licensed personal care homes. Selected hospitals offer free standing imaging centers, same day surgery centers, women's centers, and health clinics. Uninsured and underinsured individuals are serviced through Community Health Network which staffs medical and dental clinics.

Education

There are 13 public school districts in Erie County (with an average dropout rate of 3.1% for 2003-2004), 3 charter schools, 34 unlicensed private elementary schools, 13 licensed private academic schools, 7 private secondary schools, 4 colleges and universities, 1 medical school, 1 pharmacy school, 8 adult education service providers (7 within Erie City), 1 distance learning provider, 1 county technical school, 1 regional technical school, 4 trade programs, 4 specialized associate degree programs, 12 early intervention centers (including the Barber National Institute), 94 childcare centers, 5 licensed group day care homes, and 700 unregulated childcare providers.

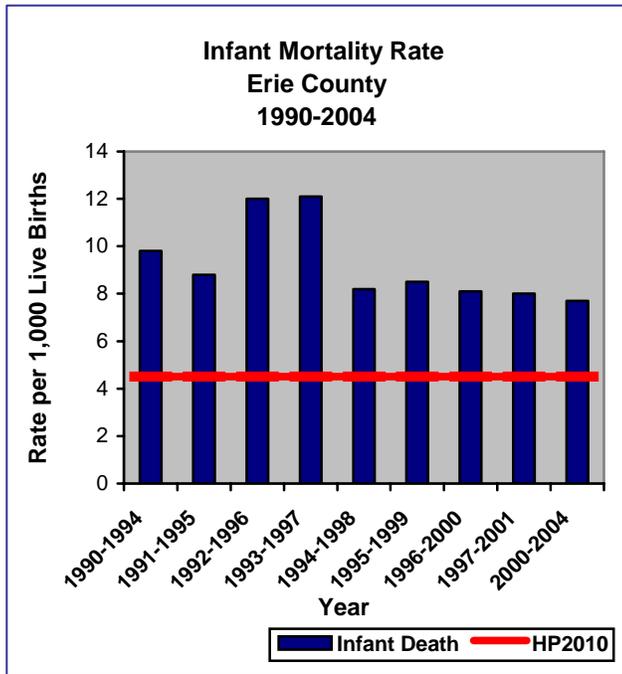
For adults over age 25, 6.7% have graduate or professional degrees, 19.6% have a bachelor's degree or higher, 84.6% are high school graduates, 10.9% have between one and three years of high school, and 4.5% have less than a ninth grade education. Based on Census 2000, 6.6% of the white population had less than a ninth grade education compared to 12.4% for the black population and 20.3% for the Hispanic population.

MATERNAL, INFANT, AND CHILD HEALTH

Infant Mortality

HP2010 Goal: 4.5 deaths per 1,000 live births

Infant mortality is defined as the death of an infant before his or her first birthday. Erie County's infant mortality rate has declined from 8.0 infant deaths per 1,000 live births in 1997-2001 to 7.7 in 2000-2004, a decrease of 3.8%. For comparison, the PA rate for 2000-2004 was 7.2 per 1,000. The infant death rate among Erie County African-American infants has also declined from 25.2 deaths per 1,000 African-American live births in 1997-2001 to 21.9 per 1,000 in 2000-2004, representing a decrease of 13.1%.



Neonatal Mortality

HP2010 Goal: 2.9 deaths per 1,000 live births

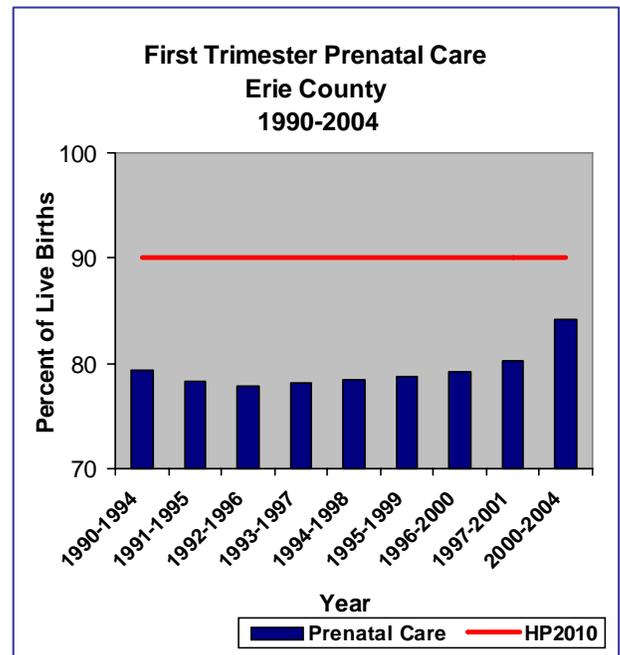
Neonatal mortality is defined as the death rate for infants up to 28 days old. Neonatal mortality in Erie County declined from 5.7 deaths per 1,000 live births in 1997-2001 to a rate of 5.3 in 2000-2004. This mirrors the PA rate of 5.1 for 2000-2004. The neonatal death rate for 2000-2004 among Erie County African-American infants was 14.4 per 1,000 live African-American births. This represents a 12.7% decrease from the 1997-2001 rate of 16.5 per 1,000. However, this is still higher than the PA rate of 10.5 for 2000-2004.

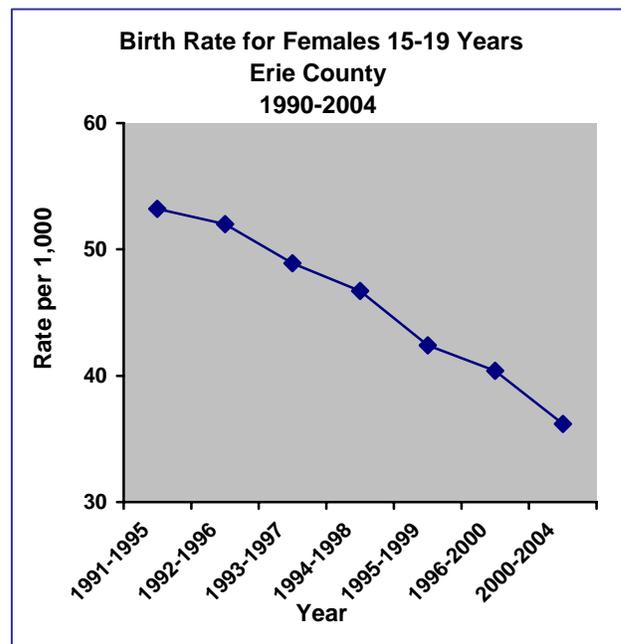
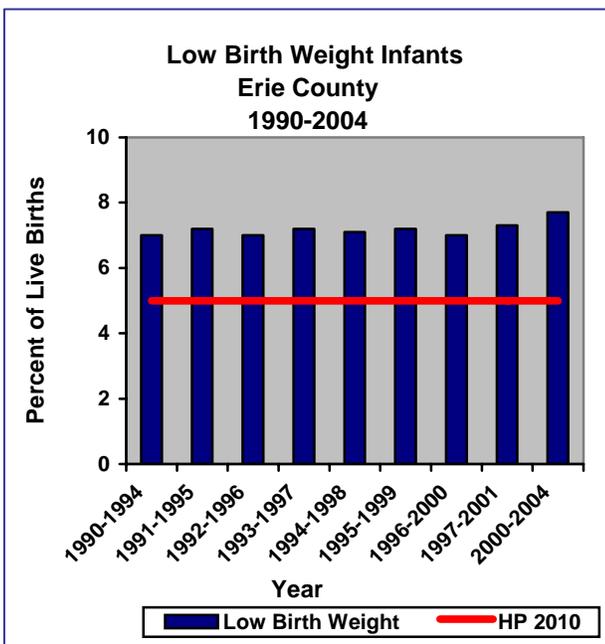
For the year 2004, there were no neonatal deaths among the Hispanic population in Erie County. The PA rate for 2004 is 6.1 per 1,000 live Hispanic births.

First Trimester Prenatal Care

HP2010 Goal: 90% of live births

The percentage of Erie County mothers who received prenatal care in the first trimester of pregnancy was 84.2% for 2000-2004. This represents an increase from the 80.3% seen in 1997-2001. Accompanying this trend, there has been an increase in African-American mothers seeking prenatal care in the first trimester, up from 60.6% in 1997-2001 to 67.1% in 2000-2004 (for PA, 69.4%) However, this figure is considerably lower than the 86.6% of white mothers who received care in 2000-2004. During the same time period, 76.0% of Hispanic mothers received care (for PA, 71.1%).





Low Birth Weight Babies

HP2010 Goal: 5% of live births

Low birth weight babies are those born weighing less than 2,500 grams, or less than 5 pounds and 9 ounces. In Erie County, the percentage of low birth weight infants has remained relatively unchanged, from 7.3% in 1997-2001 to 7.7% in 2000-2004 (for PA 8.1%). In 2000-2004, low birth weight infants among African-Americans was 12.3% (for PA, 13.9%) compared to 7.1% for whites. From 2002-2004, 10.4% of live births to Hispanic mothers were of low birth weight (for PA, 9.4%).

Births to Females 15-19 Years of Age

In 2002-2004, 11.6% of all live births in Erie County were to females 15-19 years of age (for PA, 8.8% in 2004). Accompanying percentages include 10.1% for white mothers (for PA, 6.4%), 22.5% for African-American mothers (for PA, 19.4%), and 23.4% for Hispanic mothers (for PA, 18.4%). Percent of live births to females 15-19 continues to be an area of concern.

Birth Rate to Females 15-19 Years of Age

The birth rate to females 15-19 is the number of live births to women 15-19 years of age divided by the total number of women 15-19. In Erie County, the average annual live birth rate (per 1,000 women) has decreased from 54.0 (1990-1994) to 40.4 (1996-2000) to 36.2 (2000-2004). Since 2000, the annual rate has decreased from 36.3 to 32.5 in 2004.

Births to Single Females

In 2000-2004, 41.4% of all live births in Erie County were to single females compared to 39.1% in 1997-2001 (for PA, 34.2% in 2002-2004). Accompanying percentages include 36.4% for white mothers (for PA, 26.3%), 82.7% for African-American mothers (for PA, 75.8%), and 61.6% for Hispanic mothers (for PA, 60.6%). Percentage of births to single African-American and Hispanic mothers were significantly higher compared to whites.

Teenage Pregnancy

HP2010 Goal: 43.0 per 1,000 females age 15-17

From 1997-2001, the pregnancy rate was 27.7 per 1,000 females age 15-17 in Erie County (for PA, 29.3). In 2004, the pregnancy rates were 18.9 in Erie County and 23.0 in PA. For reference, the 2004 pregnancy rate for females age 18-19 is 59.1 in Erie County (for PA, 67.4) and for females age 15-19, the rate is 37.0 (for PA, 41.2). The teenage pregnancy rate (age 15-17) in Erie County is considerably lower than the HP2010 goal.

Tobacco Use by Pregnant Women

HP2010 Goal: 1% of pregnant women

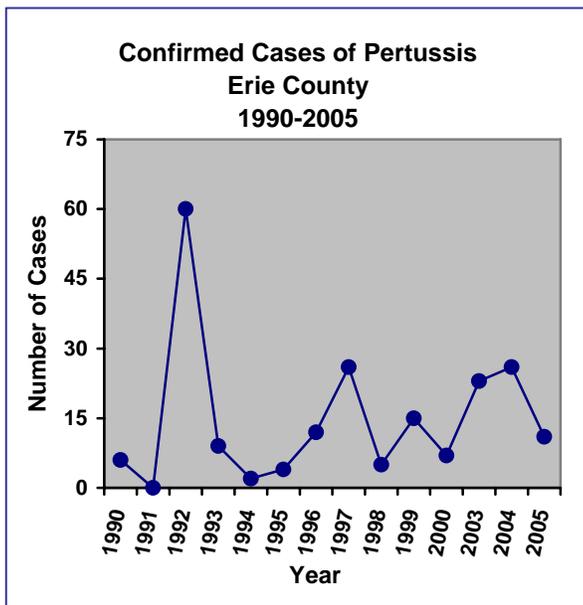
Tobacco use by pregnant women in Erie County has remained relatively unchanged during the past several years. From 1997-2001, 26.3% of pregnant women in Erie County used tobacco during their pregnancy as compared to 26.7% from 2000-2004 (for PA, 17.0%). From 2000-2004, tobacco use by African-American mothers during pregnancy (31.1%) was higher than tobacco use by white

mothers (26.4%). Tobacco use by pregnant women remains a major public health problem.

Vaccine-Preventable Disease Cases

HP2010 Goal: Eliminate all indigenous cases of diphtheria, tetanus, polio, measles, and rubella; Reduce indigenous cases of mumps and pertussis.

The occurrence of vaccine-preventable diseases in Erie County fluctuated between 1990 and 2000 with several outbreaks, including a measles outbreak in 1990, and three pertussis (whooping cough) outbreaks (1992, 1996/1997, and 1999).



Immunization Status of Children

HP2010 Goal: 80% fully-immunized children 19-35 months of age

For the year 2004, the Erie County Department of Health reports that 98% of the department's two-year old children clients are up to date on their immunizations (for PA, 89%).

% Children Under 18 Below Poverty Level

The percentage of all Erie County children under 18 years of age living below the poverty level was 18.8% in 2004 (for PA, 16.8%) compared to 16.2% in 2000 (for PA, 14.7%). In 2000, the respective percentages were 11.4% for whites (for PA, 9.7%) and 46.6% for African-Americans (for PA, 35.8%).

MORTALITY

All Causes of Death

The ten leading causes of death to Erie County residents from 2000-2004 are shown below. Collectively, these leading causes accounted for 78.8% of all deaths. The average annual age-adjusted death rate (per 100,000) from all causes decreased from 880.5 in 1997-2001 to 862.7 in 2000-2004 (for PA, 868.9). From 2000-2004, the respective death rates were 853.6 for whites, 1,214.0 for African-Americans, 1,064.4 for males, and 724.2 for females.

Ten Leading Causes of Death Erie County, 2000-2004

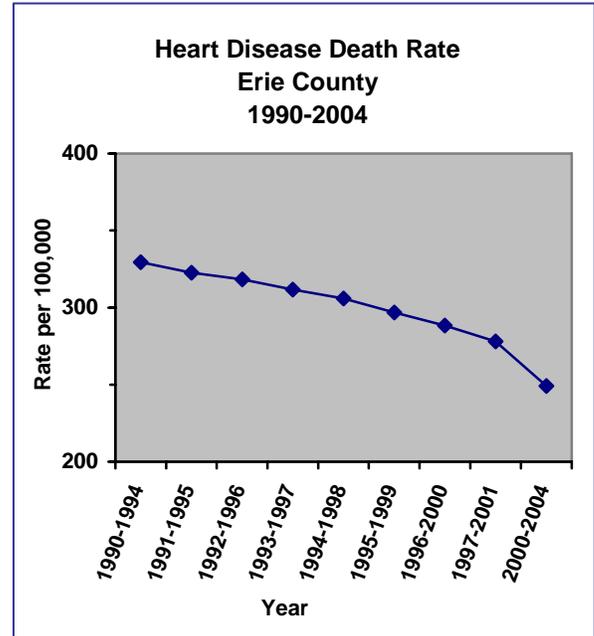
| Cause of Death | # of Deaths | % of Deaths |
|----------------------------|---------------|--------------|
| Heart Disease | 3,919 | 29.2% |
| Cancer | 3,244 | 24.2% |
| Stroke | 883 | 6.6% |
| CLRD (COPD)* | 628 | 4.7% |
| Accidents | 526 | 3.9% |
| Diabetes | 413 | 3.1% |
| Alzheimer's Disease | 290 | 2.2% |
| Kidney Diseases** | 286 | 2.1% |
| Pneumonia/Influenza | 258 | 1.9% |
| Suicide | 127 | 0.9% |
| Leading Causes | 10,574 | 78.8% |
| Total County Deaths | 13,426 | |

* Chronic Lower Respiratory Diseases (formerly COPD)

** Nephritis, Nephrotic Syndrome, and Nephrosis

Heart Disease Deaths

The leading cause of death to Erie County residents continues to be heart disease, which accounted for 29.2% of all deaths from 2000-2004. The average annual age-adjusted heart disease death rate decreased from 278.0 in 1997-2001 to 249.1 in 2000-2004 (for PA, 253.2). From 2000-2004, the respective death rates were 247.4 for whites, 347.3 for African-Americans, 312.4 for males, and 203.8 for females.

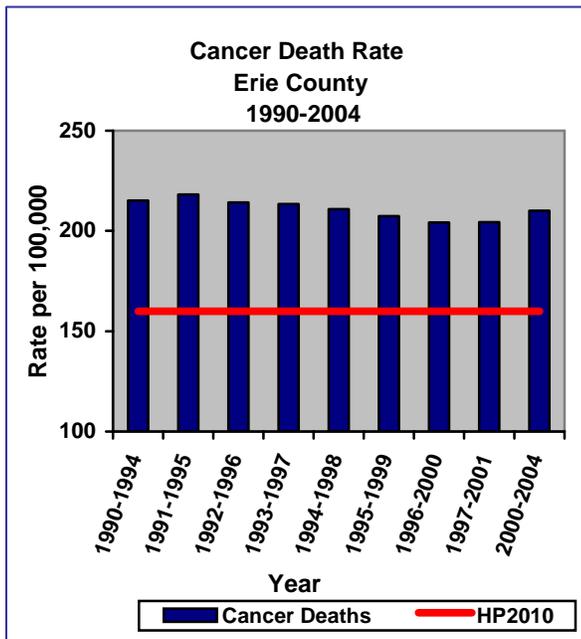


Cancer Deaths and Incidence

HP2010 Goal: 159.9 deaths per 100,000

As the second leading cause of death, cancer claimed 24.2% of all deaths to Erie County residents from 2000-2004. The average annual age-adjusted cancer death rate increased slightly from 204.4 in 1997-2001 to 210.0 in 2000-2004 (for PA, 184.6). From 2000-2004, the respective death rates were 208.1 for whites, 318.5 for African-Americans, 259.1 for males, and 179.8 for females.

The average annual age-adjusted cancer incidence rate (invasive cases only) increased 9.5% from 448.4 per 100,000 in 1996-2000 to 491.1 in 2002-2004 (for PA, 495.3). From 2002-2004, the respective incidence rates were 581.3 for males and 430.9 for females.



Prostate Cancer Deaths & Incidence Rates

HP2010 Goal: 28.8 deaths per 100,000

From 1990-1994, the average annual age-adjusted prostate cancer death rate was 40.7 per 100,000 men. This rate has decreased to 27.3 in 1997-2001 and 29.5 in 2000-2004 (for PA, 28.7). From 2000-2004, the respective death rates were 28.1 for whites and 90.6 for African-Americans.

The average annual age-adjusted prostate cancer incidence rate (invasive cases only) increased from 149.5 per 100,000 in 1996-2000 to 156.0 in 2002-2004 (for PA, 157.5).

Colorectal Cancer Deaths and Incidence

HP 2010 Goal: 13.9 deaths per 100,000

The average annual age-adjusted colorectal cancer death rate increased slightly from 19.9 per 100,000 in 1997-2001 to 20.3 in 2000-2004 (for PA, 21.4). From 2000-2004, the respective death rates were 20.6 for whites, 12.0 for African-Americans, 23.3 for males, and 18.3 for females.

The average annual age-adjusted colorectal cancer incidence rate (invasive cases only) remained unchanged from 55.2 per 100,000 in 1996-2000 to 55.1 in 2002-2004 (for PA, 56.8). From 2002-2004, the respective incidence rates were 63.2 for males (for PA, 68.3) and 49.2 for females (for PA, 48.6).

Melanoma Deaths and Incidence

HP2010 Goal: 2.5 deaths per 100,000

The average annual age-adjusted melanoma cancer death rate increased slightly from 2.5 per 100,000 in 1997-2001 to 2.9 in 2000-2004 (for PA, 2.8). From 2000-2004, all melanoma deaths were among whites. The respective death rates were 4.2 for males, and 1.9 for females.

The average annual age-adjusted melanoma cancer incidence rate (invasive cases only) increased slightly from 12.7 per 100,000 in 1996-2000 to 14.4 in 2002-2004 (for PA, 17.4). From 2002-2004, the respective incidence rates were 17.8 for males (for PA, 21.7) and 11.6 for females (for PA, 14.7).

Lung Cancer Deaths and Incidence

HP2010 Goal: 44.9 deaths per 100,000

The average annual age-adjusted lung cancer death rate increased slightly from 58.4 per 100,000 in 1997-2001 to 59.4 in 2000-2004 (for PA, 54.0). From 2000-2004, the respective death rates were 58.4 for whites, 109.7 for African-Americans, 78.7 for males, and 46.4 for females.

The average annual age-adjusted lung cancer incidence rate (invasive cases only) increased from 67.8 per 100,000 in 1996-2000 to 71.9 in 2002-2004 (for PA, 69.2). From 2002-2004, the respective incidence rates were 90.9 for males (for PA, 90.7) and 58.2 for females (for PA, 54.2).

Female Breast Cancer Deaths & Incidence

HP2010 Goal: 22.3 deaths per 100,000

From 1990-1994, the average annual age-adjusted female breast cancer death rate was 38.9 per 100,000 women. This rate has decreased to 30.6 in 1997-2001 and 30.2 in 2000-2004 (for PA, 27.6). From 2000-2004, the respective death rates were 29.8 for whites and 60.9 for African-Americans.

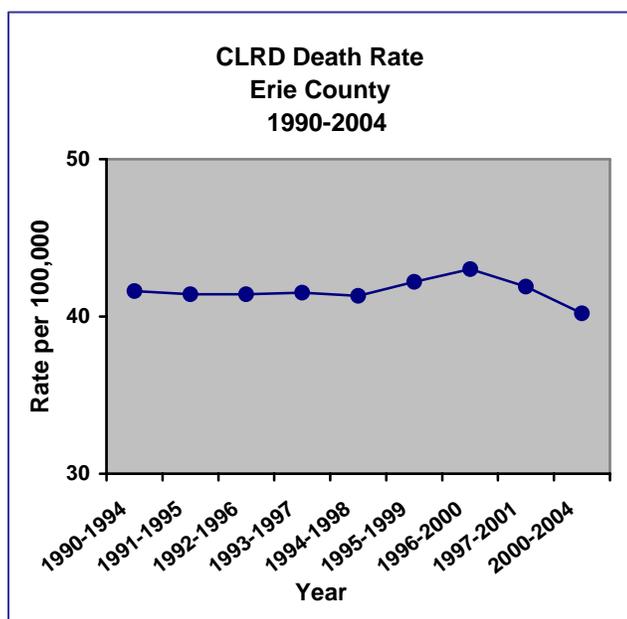
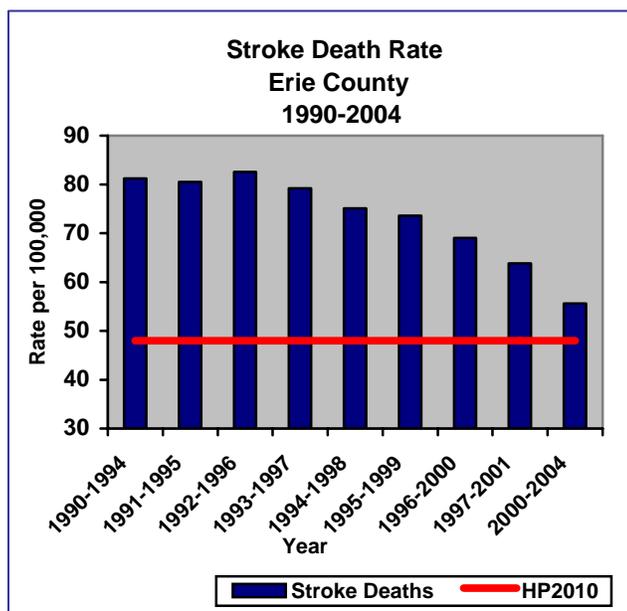
The average annual age-adjusted female breast cancer incidence rate (invasive cases only) decreased from 128.0 per 100,000 in 1996-2000 to 121.5 in 2002-2004 (for PA, 123.2).

Stroke Deaths and Incidence

HP2010 Goal: 48.0 deaths per 100,000

Stroke, the third leading cause of death, claimed 6.6% of all deaths to Erie County residents from 2000-2004. The average annual age-adjusted stroke death rate decreased considerably from 63.8 per 100,000 in 1997-2001 to 55.6 in 2000-2004 (for PA, 54.6). From 2000-2004, the respective stroke death rates were 54.9 for whites, 75.6 for African-Americans, 58.7 for males, and 52.9 for females. All values are higher than the HP 2010 goal.

In 2004, 3.1% of all Erie County adults age 18 years and above reported ever having a stroke.



Chronic Lower Respiratory Disease (CLRD) (formerly COPD) Deaths

CLRD, the fourth leading cause of death, claimed 4.7% of all deaths to Erie County residents from 2000-2004. The average annual age-adjusted CLRD death rate for all ages decreased slightly from 41.9 per 100,000 in 1997-2001 to 40.2 in 2000-2004 (for PA, 39.2). From 2000-2004, the respective CLRD death rates were 40.3 for whites, 41.1 for African-Americans, 52.4 for males, and 32.9 for females.

Chronic Lower Respiratory Disease (CLRD) Deaths Age 45 and Older

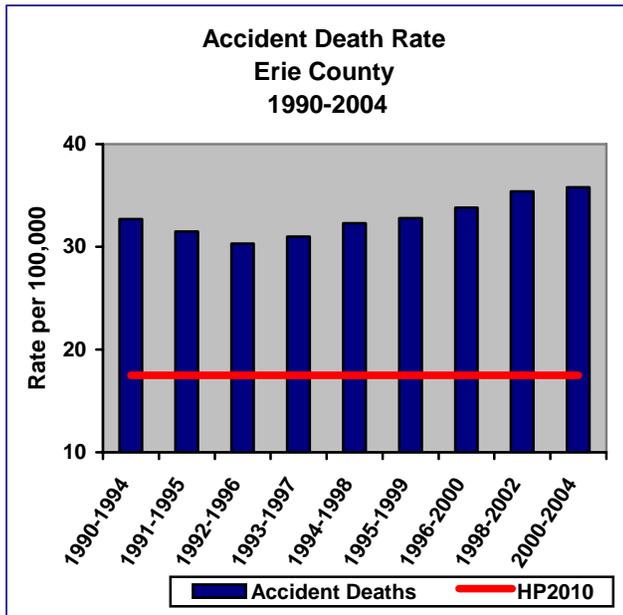
HP2010 Goal: 60 deaths per 100,000 age 45+

The age-adjusted CLRD death rate among individuals age 45 and above was 123.8 in 2004 (for PA, 110.2) compared to 98.1 in 2001 (for PA, 108.1). Erie County has seen a 26% increase in this death rate since 2001 and now has a higher rate than PA.

Accidents (Unintentional Injury) Deaths

HP2010 Goal: 17.5 deaths per 100,000

Accidental injury deaths accounted for 3.9% of all deaths to Erie County residents from 2000-2004. The average annual age-adjusted accident death rate increased from 32.7 per 100,000 in 1990-1994 to 34.5 in 1997-2001 and 35.8 in 2000-2004 (for PA, 35.9). From 2000-2004, the respective accident death rates were 35.8 for whites, 43.2 for African-Americans, 52.6 for males, and 21.6 for females. All values are higher than the HP 2010 goal.



Motor Vehicle Accident Deaths

HP2010 Goal: 9.2 deaths per 100,000

The average annual age-adjusted motor vehicle accident death rate decreased from 15.5 per 100,000 in 1997-2001 to 14.4 in 2000-2004 (for PA, 12.3). From 2000-2004, the respective motor vehicle accident death rates were 14.9 for whites, 11.4 for African-Americans, 20.9 for males, and 8.7 for females. Only the female death rate falls below the HP 2010 goal.

Diabetes Mellitus Deaths and Incidence

Diabetes mellitus deaths accounted for 3.1% of all deaths to Erie County residents in 2000-2004. The average annual age-adjusted diabetes death rate decreased from 28.9 per 100,000 in 1997-2001 to 26.5 in 2000-2004 (for PA, 24.9). From 2000-2004, the respective diabetes death rates were 25.8 for whites, 52.0 for African-Americans, 29.7 for males, and 24.4 for females. The HP 2010 goal for deaths due to diabetes is not directly comparable to these rates.

In 2004, 10.4% of all Erie County adults age 18 years and above reported ever being diagnosed with diabetes.

Alzheimer's Disease Deaths

Deaths due to Alzheimer's disease accounted for 2.2% of all deaths in 2000-2004. The average annual age-adjusted Alzheimer's disease death rate was 20.0 in 2002-2004 (for PA, 19.4). From

2002-2004, the respective Alzheimer's death rates were 20.5 for whites, 3.4 for African-Americans, 17.6 for males, and 21.1 for females. The Alzheimer's disease death rate for males has increased from 11.8 in 2002 to 21.7 in 2004 while the death rate for females has decreased from 24.9 in 2002 to 19.8 in 2004.

Nephritis, Nephrotic Syndrome, and Nephrosis Deaths

Deaths due to kidney disorders accounted for 2.1% of all deaths to Erie County residents in 2000-2004. The average annual age-adjusted kidney disease death rate was 17.9 per 100,000 in 2000-2004 (for PA, 19.1). From 2000-2004, the respective kidney disorder death rates were 17.6 for whites, 32.6 for African-Americans, 27.5 for males, and 13.0 for females.

Pneumonia and Influenza Deaths

Deaths due to pneumonia and influenza (P&I) accounted for 1.9% of all deaths to Erie County residents in 2000-2004. The average annual age-adjusted P&I death rate was 16.2 per 100,000 in 2000-2004 (for PA, 18.9). From 2000-2004, the respective death rates for P&I were 15.9 for whites, 25.5 for African-Americans, 22.3 for males, and 13.0 for females.

Suicide Deaths

HP2010 Goal: 5.0 deaths per 100,000

Deaths due to suicide accounted for 0.9% of all deaths to Erie County residents in 2000-2004. The average annual age-adjusted suicide death rate has decreased from 11.3 per 100,000 in 1997-2001 to 9.1 in 2000-2004 (for PA, 10.6). From 2000-2004, the respective suicide death rates were 9.5 for whites, 5.6 for African-Americans, 16.5 for males, and 2.4 for females. Only the female death rate falls below the HP 2010 goal.

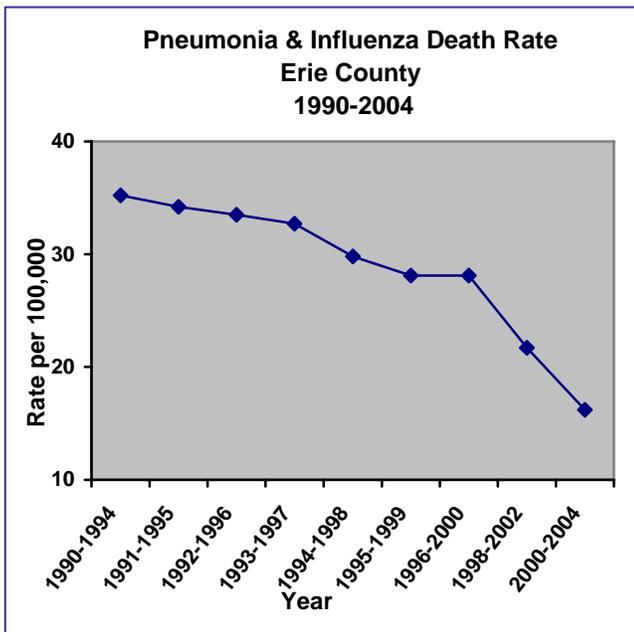
Homicide Deaths

HP2010 Goal: 3.0 deaths per 100,000

The Erie County average annual age-adjusted homicide death rate remains consistently low, ranging from 2.5 per 100,000 in 1998-2002 to 2.1 in 2000-2004 (for PA, 5.5). From 2000-2004, the respective homicide death rates were 1.4 for whites, 11.5 for African-Americans, 3.1 for males, and 1.0 for females.

Pneumonia and Influenza Deaths

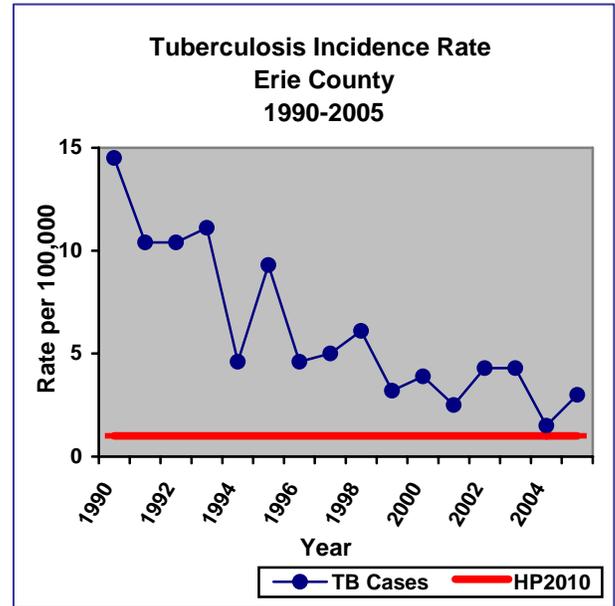
Pneumonia and influenza (P&I) accounted for 2.5% of all deaths to Erie County residents in 1997-2001 and 1.9% in 2000-2004. In 2000-2004, 93.4% (241 cases) of all P&I deaths occurred in residents age 65 and older compared to 57.8% (197 cases) in 1997-2001. The average annual age-adjusted P&I death rate decreased from 35.2 per 100,000 in 1990-1994 to 16.2 in 2000-2004 (for PA, 18.9).



Tuberculosis Incidence

HP2010 Goal: 1.0 case per 100,000

The average annual crude incidence rate of tuberculosis in Erie County declined from 10.2 per 100,000 in 1990-1994 to 4.2 in 1997-2001 and 3.1 in 2001-2005 (for PA, 2.7). From 2001-2005, the respective tuberculosis incidence rates were 2.0 for whites (for PA, 1.1) and 17.9 for African-Americans (for PA, 8.3). The African-American incidence rate has decreased dramatically from 97.4 in 1990-1994. Erie County has made steady progress in approaching the HP 2010 goal, especially among the African-American population.

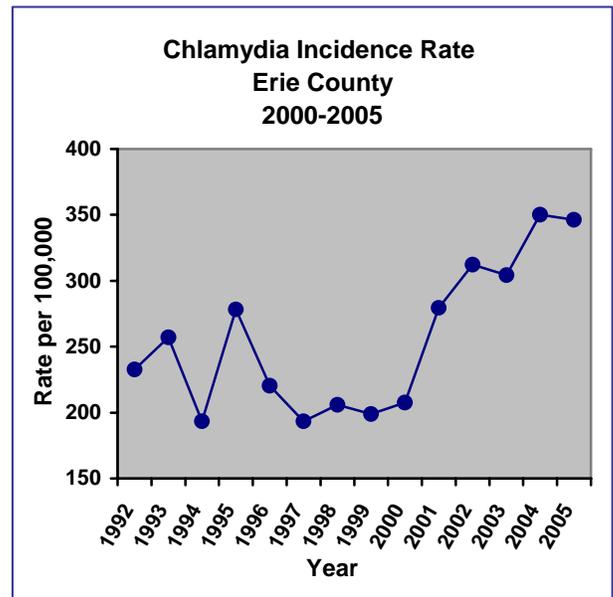
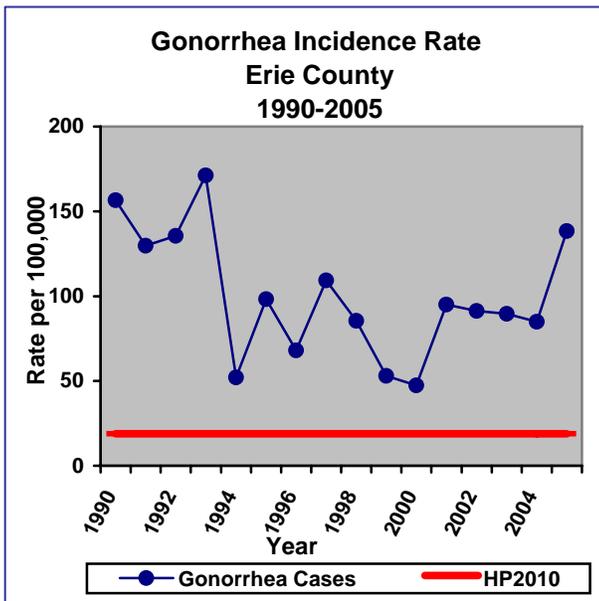


Gonorrhea Incidence

HP2010 Goal: 19 cases per 100,000

The average annual crude incidence rate of gonorrhea in Erie County increased from 78.0 per 100,000 in 1997-2001 to 99.8 in 2001-2005 (for PA, 100.1). From 2001-2005, the respective gonorrhea incidence rates were 42.8 for whites (for PA, 14.8), 816.6 for African-Americans (for PA, 552.6), 69.5 for males, and 130.0 for females. The African-American incidence rate is considerably higher compared to whites. The incidence rate of gonorrhea in Erie County is five times higher than the HP 2010 goal.

The annual crude incidence rate of gonorrhea in Erie County increased from 47.4 cases per 100,000 in 2000 to 138.4 in 2005 (for PA, 91.4). In 2005, the respective gonorrhea incidence rates were 58.5 for whites (for PA, 15.6) compared to 16.4 in 2000, 1002.0 for African-Americans (for PA, 478.3) compared to 430.2 in 2000, 94.3 for males, and 179.7 for females. The African-American incidence rate is considerably higher compared to whites.



Chlamydia Incidence Rate

The average annual crude incidence rate of chlamydia in Erie County increased from 217.0 per 100,000 in 1997-2001 to 318.5 in 2001-2005 (for PA, 280.3). From 2001-2005, the respective chlamydia incidence rates were 198.0 for whites (for PA, 69.1), 1725.6 for African-Americans (for PA, 981.0), 190.8 for males, and 453.5 for females. The African-American incidence rate is considerably higher compared to whites.

The annual crude incidence rate of chlamydia in Erie County increased from 207.6 per 100,000 in 2000 to 346.3 in 2005 (for PA, 303.3). In 2005, the respective chlamydia incidence rates were 196.6 for whites (for PA, 78.5) compared to 111.1 in 2000, 1800.3 for African-Americans (for PA, 1220.1) compared to 1284.7 in 2000, 206.3 for males, and 477.6 for females. The African-American incidence rate is considerably higher compared to whites.

Primary and Secondary Syphilis Incidence

HP2010 Goal: 0.2 cases per 100,000

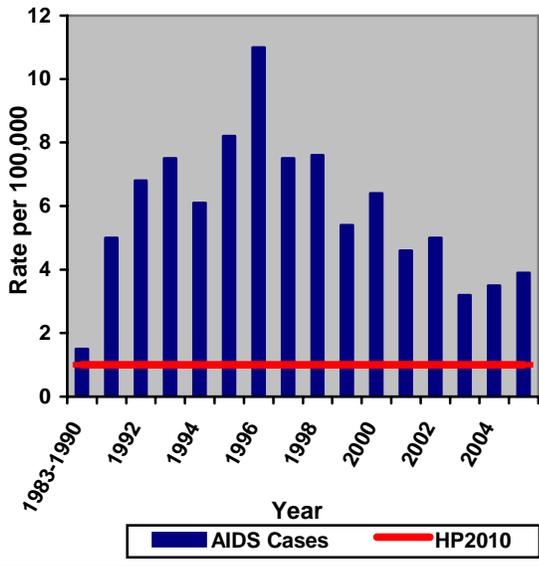
The average annual crude incidence rate of syphilis in Erie County remained unchanged from 0.3 cases per 100,000 in 1997-2001 to 0.3 in 2001-2005 (for PA, 1.1). From 2001-2005, the respective syphilis incidence rates were 0.2 for whites (for PA, 0.5), 1.2 for African-Americans (for PA, 5.7), 0.3 for males, and 0.3 for females. The African-American incidence rate is higher compared to whites and higher than the HP 2010 goal.

AIDS Incidence

HP2010 Goal: 1 case per 100,000 age 13 and over

The first AIDS case among Erie County residents was reported in 1983. From 1983 to 2005, a total of 288 AIDS cases were reported. The AIDS crude incidence rate per 100,000 steadily increased from 1.5 in 1983-1990 to 11.0 in 1996 and then decreased to 7.5 in 1997 and 3.9 in 2005 (for PA, 8.8 in 2004). Erie County's AIDS incidence rate has steadily moved toward the HP 2010 goal.

**AIDS Incidence Rate
Erie County
1983-2005**



ADULT BEHAVIORAL HEALTH RISKS

Health Status

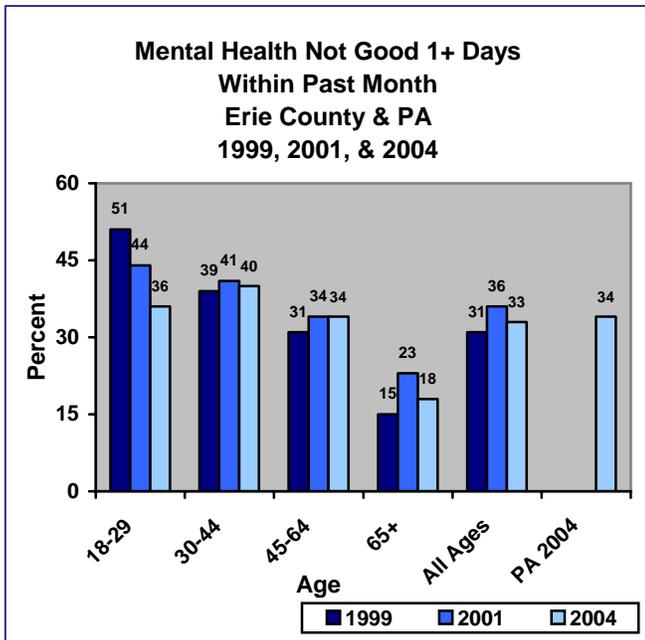
In 2004, 18% of Erie County adults age 18+ reported their general health as “fair” or “poor” (for PA, 16%) compared to 17% in 2001.

The number of adults age 18+ who report that their physical health (illness or injury) was not good at least one day in the previous month has increased from 33% in 2001 to 38% in 2004 (for PA, 36%).

The number of adults age 18+ who indicated their mental health was not good one or more days in the past month has decreased from 36% in 2001 to 33% in 2004 (for PA, 34%).

Of all adults in 2004, 40% of women (for PA, 40%) and 25% of males (for PA, 28%) reported poor mental health on one or more days in the past month.

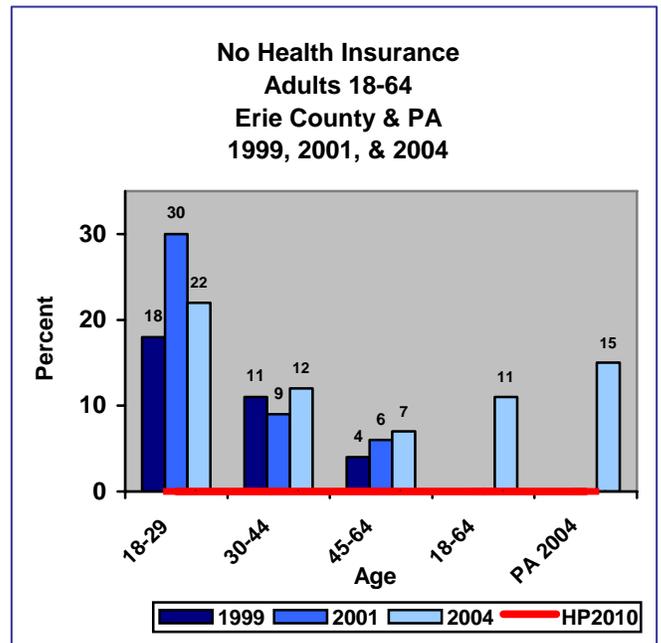
In 2004, the 30-44 age group reported the highest incidence of poor mental health at 40%.



Health Care Access

In 2004, 11% of Erie County adults ages 18-64 said they did not have health insurance (for PA, 15%) compared to 11% in 2001 and 9% in 1999.

HP2010 Goal: 100% of adults ages 18-64 have health insurance



In 2004, 22% of young adults ages 18-29 reported having no health insurance (for PA, 26%). This is the highest of all age groups.

The number of Erie County adults age 18+ who had a routine checkup in the past 12 months decreased from 76% in 2001 to 70% in 2004.

The number of Erie County adults age 18+ who did not see a doctor in the past year because of cost has increased from 7% in 2001 to 10% in 2004 (for PA, 11%).

Hypertension Awareness

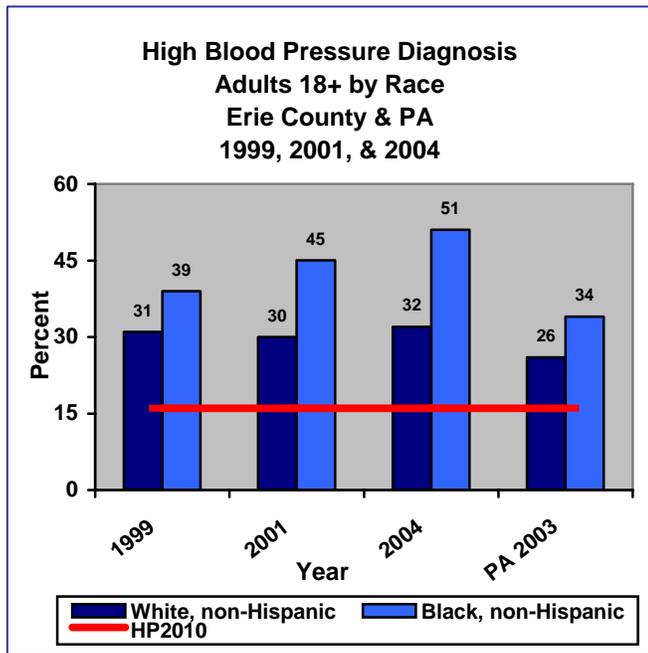
In 2004, 33% of Erie County adults age 18+ were told their blood pressure was high (for PA, 27% in 2003). This remains unchanged from 1999 and 2001.

HP2010 Goal: 16% of age 20+ have hypertension

Of individuals diagnosed with hypertension, 81% currently take medication to control their blood pressure (for PA, 80% in 2003).

The number of black, non-Hispanic adults age 18+ who have ever been diagnosed with high blood pressure increased from 45% in 2001 to 51% in 2004 (for PA, 34% in 2003).

In 2004, 32% of white, non-Hispanic adults reported being diagnosed with high blood pressure (for PA, 26% in 2003) compared to 30% in 2001.



Cholesterol Awareness

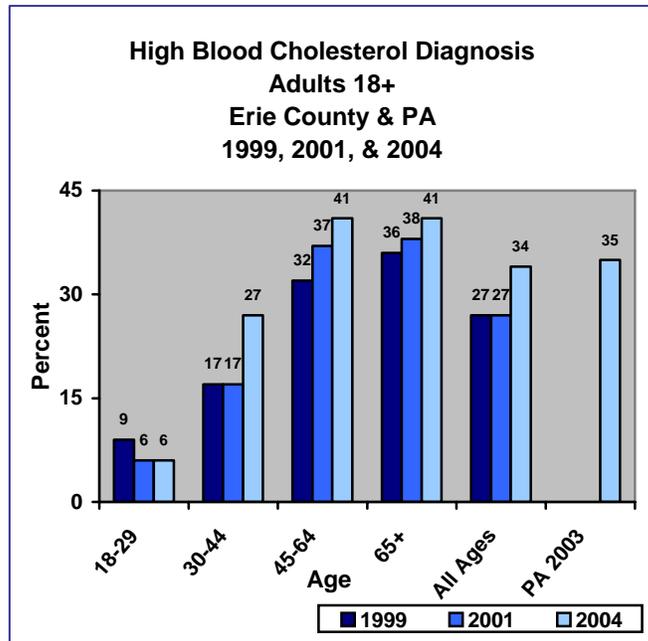
In 2004, 85% of Erie County adults age 18+ responded that they have had their blood cholesterol checked within the past 5 years (for PA, 76% in 2003).

HP2010 Goal: 80% of adults in past 5 years

The number of adults who ever had their cholesterol checked increased from 83% in 1999 and 2001 to 89% in 2004 (for PA, 80% in 2003).

The number of adults age 18+ who have been told by a medical professional that their blood cholesterol was high increased from 27% in 1999 and 2001 to 34% in 2004 (for PA, 35% in 2003).

From 2001 to 2004, the percentage of adults age 18+ who were diagnosed with high blood cholesterol increased within each age group with the exception of the 18-29 age group. The 30-44 age group experienced the largest increase from 17% in 2001 to 27% in 2004 (for PA, 23% in 2003).

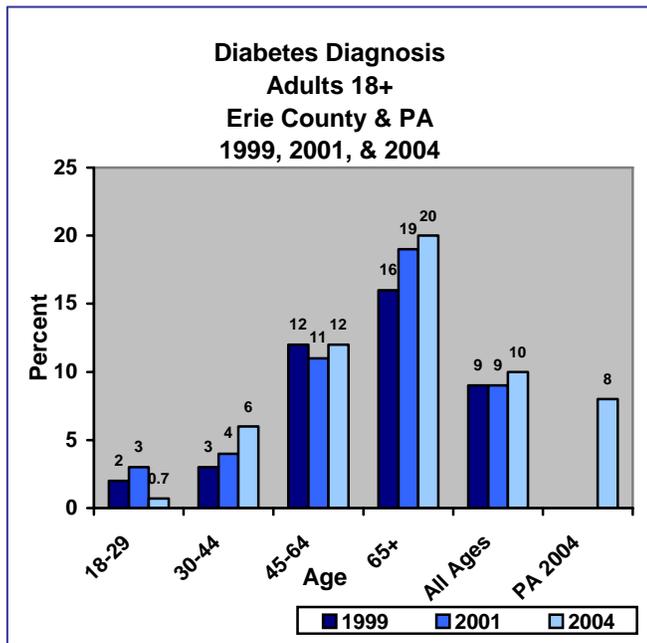


Diabetes

The number of Erie County adults age 18+ who have been told they have diabetes increased from 9% in 1999 and 2001 to 10% in 2004 (for PA, 8%).

Of all individuals diagnosed with diabetes in 2004, 25% currently take insulin (for PA, 30%) and 60% take diabetes pills (for PA, 72%).

In 2004, 16% of African-Americans in Erie County have been diagnosed with diabetes (for PA, 9%) compared to 10% for the white population (for PA, 8%).



Asthma

In 2004, 9% of Erie County adults age 18+ were ever told that they had asthma (for PA, 13%). Of this group, 63% were female and 37% were male.

Of adults age 18+, 6% currently have asthma (for PA, 9%). Of this group, 69% were females and 31% were males.

Cardiovascular Disease

In 2004, 5% of Erie County adults age 35+ reported ever having a heart attack (for PA, 6%).

In 2004, of all Erie County residents who reported ever having a heart attack, 57% were male and 43% were female.

The number of Erie County adults age 35+ who reported ever having a stroke was 4% in 2004 (for PA, 4%).

In 2004, of all Erie County residents who reported ever having a stroke, 40% were male and 60% were female.

HIV/AIDS

In 2004, excluding testing for blood donation, the number of Erie County adults ages 18-64 who ever had an HIV blood test decreased from 40% in 2001 to 35% in 2004 (for PA, 39%).

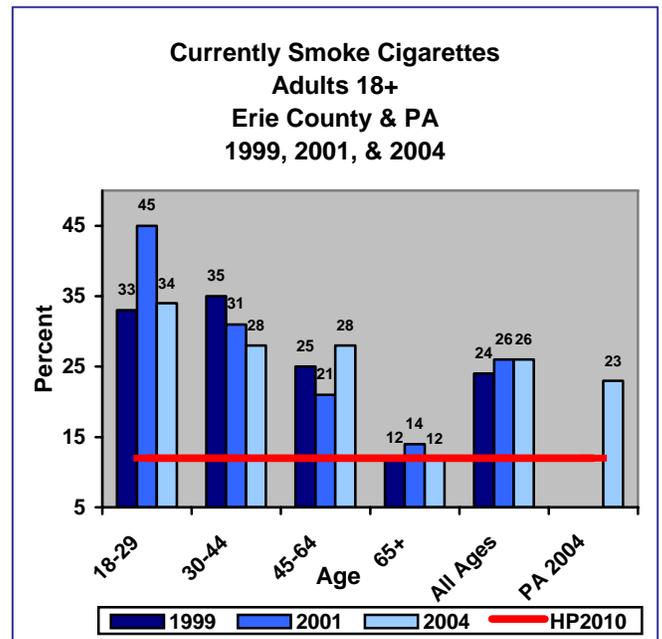
Of all Erie County adults ages 18-64 who have had

an HIV blood test, 22% of the tests were done as part of a routine medical check-up.

Tobacco Use

In 2004, 26% of Erie County adults age 18+ indicated that they were regularly smoking cigarettes (for PA, 23%). This value remains unchanged since 2001.

HP2010 Goal: 12% of adults smoke cigarettes



As age increased, cigarette use decreased. The youngest adults (ages 18-29) reported the highest percentage of smoking at 34% in 2004 (for PA, 30%).

The number of 18-29 year olds who smoked cigarettes decreased from 45% in 2001 to 34% in 2004.

In 2004, every age group saw a reduction in cigarette use except the 45-64 age group which saw an increase from 21% in 2001 to 28% in 2004 (for PA, 23%).

Of all adult smokers age 18+ in Erie County, 50% have quit smoking at least 1 day within the past year (for PA, 47%).

HP2010 Goal: 75% of adult smokers have attempted to quit smoking

In 2004, 31% of adults age 18+ responded that they were former smokers (for PA, 24%) as

compared to 28% in 2001.

The number of Erie County adults age 18+ who use smokeless tobacco products decreased from 5% in 2001 to 2% in 2004.

Injury Control

In 2004, 78% of Erie County adults age 18+ said they “always” used seat belts whenever they drove or rode in a car. This is unchanged since 2001.

HP2010 Goal: 92% always use safety belts

In 2004, 60% of adults age 18+ with a child under age 12 in the household responded that their child “always” wears a helmet when riding a bicycle.

In 2004, 91% of adults age 18+ with a child under age 8 in the household responded that their child “always” uses a car safety seat when they ride in a car.

In 2004, among adults age 18+ who have smoke alarms in their homes, 65% reported testing their smoke alarms within the last six months, 83% tested their smoke alarms within the past year, and 4% have never tested their alarms.

In 2004, 3% of all adults age 18+ in Erie County did not have smoke alarms in their homes.

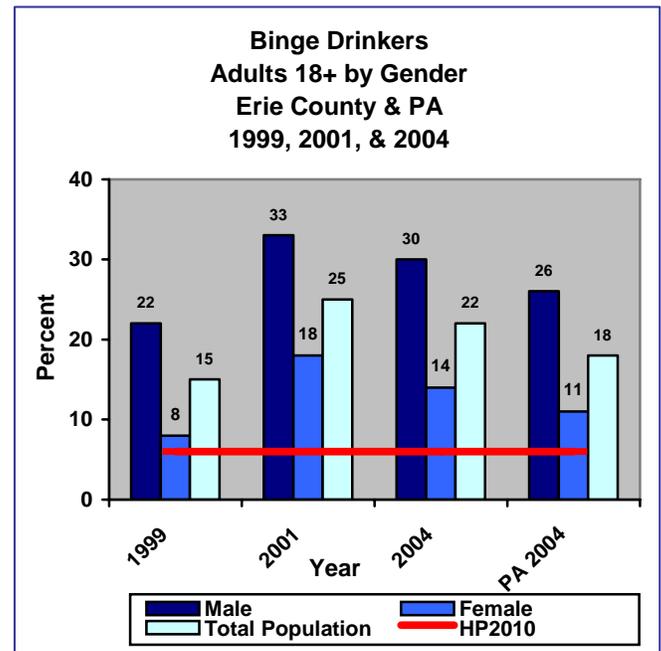
HP2010 Goal: 100% of households have smoke alarms

Alcohol Consumption

The number of Erie County adults age 18+ who admitted to binge drinking (defined as having five or more alcoholic drinks on one occasion) at least once in the past month decreased from 25% in 2001 to 22% in 2004 (for PA, 18%).

HP2010 Goal: 6% of adults binge drink in past month

The number of adults age 18+ who admitted to driving drunk was 3% in 2004 compared to 3% in 2001 and 1999.



Women’s Health

The number of Erie County women age 40+ who reported having a clinical breast exam in the past year decreased from 80% in 1999 and 2001 to 76% in 2004 (for PA, 61%). Of Erie County women age 40+, 92% reported ever having a clinical breast exam.

In 2004, 90% of adult women age 40+ said they had a mammogram in the past 2 years. 92% of Erie County women aged 40+ reported ever having a mammogram.

HP2010 Goal: 70% of women age 40+ had a mammogram in last 2 years

The number of women age 40+ who reported having a mammogram within the past year decreased from 80% in 1999 to 77% in 2001 and 73% in 2004 (for PA, 55%).

In 2004, 89% of adult women age 18+ reported having a Pap test within the last three years (for PA, 81%) compared to 86% in 1999 and 2001.

HP2010 Goal: 90% of women age 18+ received a Pap test within the past 3 years

Men's Health

The number of Erie County males age 50+ who have had a prostate specific antigen (PSA) blood test increased from 64% in 2001 to 73% in 2004 (for PA, 78%).

The number of Erie County males age 50+ who had a digital rectal exam in the past year decreased from 64% in 2001 to 49% in 2004 (for PA, 84%).

Colorectal Cancer Screening

In 2004, 46% of Erie County adults age 50+ indicated that they had ever had a sigmoidoscopic or colonoscopic exam (for PA, 54%) compared to 45% in 2001 and 40% in 1999.

HP2010 Goal: 50% of adults age 50+ who ever received a sigmoidoscopic exam

In 2004, 32% of Erie County adults age 50+ reported having a blood stool test using a home kit within the past two years (for PA, 26%).

HP2010 Goal: 50% of adults age 50+ who ever received a fecal occult blood test (FOBT) for colorectal cancer within the past two years

Skin Cancer

In 2004, of all Erie County adults age 18+, 34% reported having one or more sunburns in the past 12 months (for PA, 36%).

In 2004, 15% of all Erie County adults age 18+ reported having 2 or more sunburns in the past 12 months (for PA, 23%).

Immunization

In 2004, 66% of Erie County adults age 65+, reported that they had a flu shot in the past year (for PA, 64%) compared to 72% in 2001 and 74% in 1999.

HP2010 Goal: 90% of adults 65+ had a flu shot in the past year

In 2004, 71% of adults 65+ said that they have had a pneumonia vaccination (for PA, 64%) compared to 68% in 2001 and 66% in 1999.

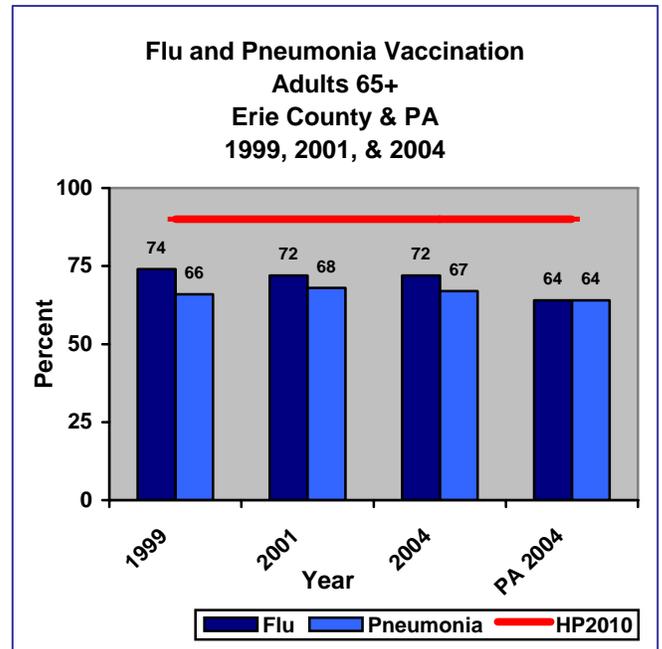
HP2010 Goal: 90% of adults 65+ have ever been vaccinated against pneumococcal disease

In 2004, 28% of adults ages 18-64 reported having a flu shot in the last 12 months.

HP2010 Goal: 60% of adults ages 18-64 had flu shot in the past year

In 2004, 16% of adults ages 18-64 reported having a vaccination against pneumococcal disease.

HP2010 Goal: 60% of adults ages 18-64 have ever been vaccinated against pneumococcal disease



Exercise

In 2004, the number of Erie County adults age 18+ who participated in physical activity or exercise decreased from 81% in 1999 to 77% in 2001 and 74% in 2004 (for PA, 76%).

HP2010 Goal: 20% of adults engage in no leisure-time physical activity

Of all Erie County adults age 18+, 74% reported participating in physical activity or exercise (other than their regular job) during the past month.

Weight Control

Using the standard of a Body Mass Index of 25+, 63% of all Erie County adults in 2004 were considered overweight (for PA, 61%), slightly higher than 61% in 2001. Note: Includes obese individuals.

Using the standard of a Body Mass Index of 30+, 27% of Erie County adults age 18+ were considered obese in 2004 (for PA, 24%).

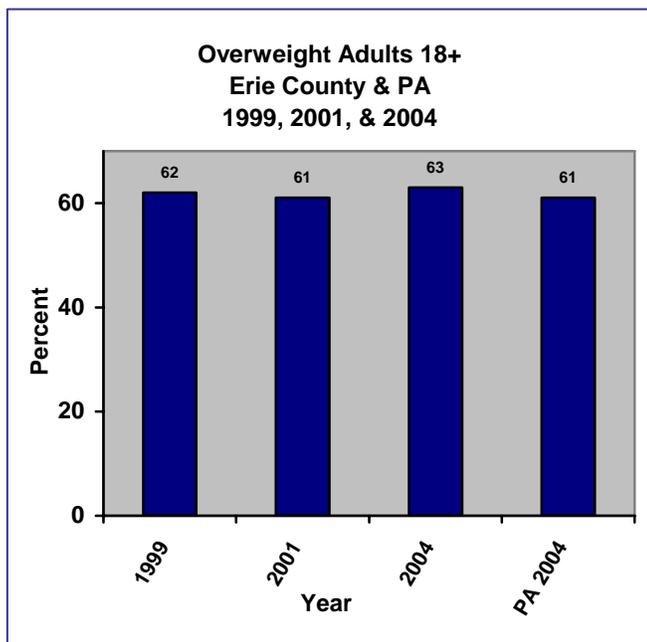
HP2010 Goal: 15% of adults age 20+ who are obese

In 2004, 35% of adults age 18+ were considered a healthy weight using the standard of a Body Mass Index of 18.5 to <25.

HP2010 Goal: 60% of adults age 20+ with a healthy weight

The number of overweight African-American, non-Hispanic adults age 18+ decreased from 76% in 2001 to 70% in 2004 (for PA, 72%).

The number of overweight white, non-Hispanic adults age 18+ increased slightly from 61% in 2001 to 62% in 2004 (for PA, 60%).



YOUTH BEHAVIORAL HEALTH RISKS

In 2005, 2,465 Erie County public school students in grades 6, 8, 10, and 12 participated in the biannual PA Youth Survey (PAYS) sponsored by the PA Commission on Crime and Delinquency.

The top three drugs used by Erie County public school students were alcohol, tobacco, and marijuana.

Alcohol Use

55.7% of Erie County students reported that they had used alcohol at least once in their lifetime, ranging from 26.8% in grade 6 to 82.9% in grade 12. The overall percentage for PA students was 58.8%.

26.1% of Erie County students reported that they had used alcohol within the past 30 days, ranging from 3.9% in grade 6 to 59.0% in grade 12. The overall percentage for PA students was 26.3%.

16.2% of Erie County students reported that they had at least one episode of binge drinking within the past two weeks, ranging from 1.5% in grade 6 to 41.5% in grade 12. The overall percentage for PA students was 14.9%.

10.5% of Erie County students reported that they had ever been drunk or high at school, ranging from 1.1% in grade 6 to 23.6% in grade 12. The overall percentage for PA students was 9.3%.

Tobacco Use

26.1% of Erie County students reported that they had used cigarettes at least once in their lifetime, ranging from 6.0% in grade 6 to 51.2% in grade 12. The overall percentage for PA students was 29.6%.

12.4% of Erie County students reported that they had used cigarettes within the past 30 days, ranging from 0.9% in grade 6 to 28.6% in grade 12. The overall percentage for PA students was 13.3%.

9.8% of Erie County students reported that they had used smokeless tobacco at least once in their lifetime, ranging from 1.9% in grade 6 to 21.1% in

grade 12. The overall percentage for PA students was 12.0%.

3.7% of Erie County students reported that they had used smokeless tobacco within the past 30 days, ranging from 0.5% in grade 6 to 7.3% in grade 12. The overall percentage for PA students was 5.6%.

Marijuana Use

18.3% of Erie County students reported that they had used marijuana at least once in their lifetime, ranging from 0.9% in grade 6 to 45.2% in grade 12. The overall percentage for PA students was 19.1%.

10.4% of Erie County students reported that they had used marijuana within the past 30 days, ranging from 0.5% in grade 6 to 25.9% in grade 12. The overall percentage for PA students was 9.4%.

Other Drug Use

Erie County students reported the following ever used and used within the past 30 days percentages:

| | <u>Ever</u> | <u>Past 30 Days</u> |
|-----------------|-------------|---------------------|
| Inhalants | 9.3 | 2.6 |
| Hallucinogens | 4.3 | 1.9 |
| Cocaine | 3.3 | 1.2 |
| Crack cocaine | 1.4 | 0.5 |
| Ecstasy | 2.8 | 0.8 |
| Methamphetamine | 1.4 | 0.5 |
| Steroids | 1.3 | 0.7 |
| Heroin | 0.7 | 0.2 |

Inhalants are the only drug in which reported prevalence is higher for younger students (grades 6 and 8) compared to older students (grades 10 and 12).