# 2012 Edition
Ohio

America's Health Rankings®, started in 1990, is the longest running comparative health index of states. It includes measures of behavior, community and environment, public and health policies, clinical care, and health outcomes to describe the health and wellness of each state compared to the other states. The rankings are updated each year to provide a perspective on change over the last 23 years. The primary objective of America's Health Rankings® is to stimulate discussion and action among individuals, community leaders, health professionals, and businesses to improve the health of each state and our nation.

The rankings are sponsored by United Health Foundation and conducted in partnership with the American Public Health Association and the Partnership for Prevention.

For overall health, Ohio is ranked 35th this year. The state has varied from its healthiest ranking of 25th to its poorest ranking of 36th.

Overall health in Ohio has gradually decreased over the last seven years.

Overall Rank
Ohio
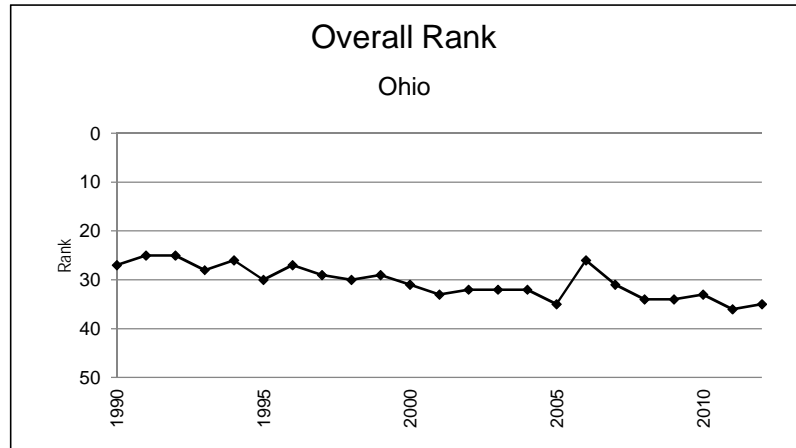
Smoking remains high at 25.1 percent of the adult population, with more than 2.2 million adult smokers.

Last year, the per capita public health funding was $45 per person; this year it is $51 per person.

In the past five years, air pollution decreased from 13.9 to 12.0 micrograms of fine particulate per cubic meter.

In the past five years, the rate of preventable hospitalizations decreased from 88.0 to 78.5 discharges per 1,000 Medicare enrollees; however, it still remains high compared to other states.

In the past ten years, the rate of uninsured population increased from 10.7 percent to 13.7 percent. Last year it was 13.7 percent.

|		2012	
		Value	Rank
DETERMINANTS	**Behaviors**		
Smoking (Percent of adult population)		25.1	43
Binge Drinking (Percent of adult population)		20.1	37
Obesity (Percent of adult population)		29.7	38
Sedentary Lifestyle (Percent of adult population)		27.0	35
	Community and Environment		
High School Graduation (Percent of incoming ninth graders)		79.6	18
Violent Crime (Offenses per 100,000 population)		315	25
Occupational Fatalities (Deaths per 100,000 workers)		3.3	10
Infectious Disease (Cases per 100,000 population)		16.8	43
Children in Poverty (Percent of persons under age 18)		21.1	25
Air Pollution (Micrograms of fine particles per cubic meter)		12.0	47
	Policy		
Lack of Health Insurance (Percent without health insurance)		13.7	21
Public Health Funding (Dollars per person)		$51	43
Immunization Coverage (Percent of children ages 19 to 35 months)		92.3	13
	Clinical Care		
Low Birthweight (Percent of live births)		8.6	34
Primary Care Physicians (Number per 100,000 population)		120.9	19
Preventable Hospitalizations (Number per 1,000 Medicare enrollees)		78.5	42
All Determinants		-0.18	36
OUTCOMES			
Diabetes (Percent of adult population)		10.0	30
Poor Mental Health Days (Days in previous 30 days)		4.1	34
Poor Physical Health Days (Days in previous 30 days)		4.1	32
Geographic Disparity (Percent relative standard deviation)		9.8	14
Infant Mortality (Deaths per 1,000 live births)		7.7	42
Cardiovascular Deaths (Deaths per 100,000 population)		287.6	40
Cancer Deaths (Deaths per 100,000 population)		201.8	43
Premature Death (Years lost per 100,000 population)		8,219	36
All Outcomes		-0.07	37
	OVERALL	-0.25	35

Smoking/Obesity/Sedentary Lifestyle/Diabetes Ohio

Legend:
- ✕ U.S. Median
- ◆ State Rate

Smoking in Ohio remains above the national median, with one in four adults still smoking.

In Ohio, 2,222,000 adults smoke.

Smoking is defined as the percentage of people age 18 and over that regularly smoke cigarettes. Other forms of tobacco, such as smokeless products, are not included in this rate and may contribute to a higher overall rate of tobacco use than displayed by smoking alone. Data from CDC Behavior Risk Factor Surveillance System.

Smoking
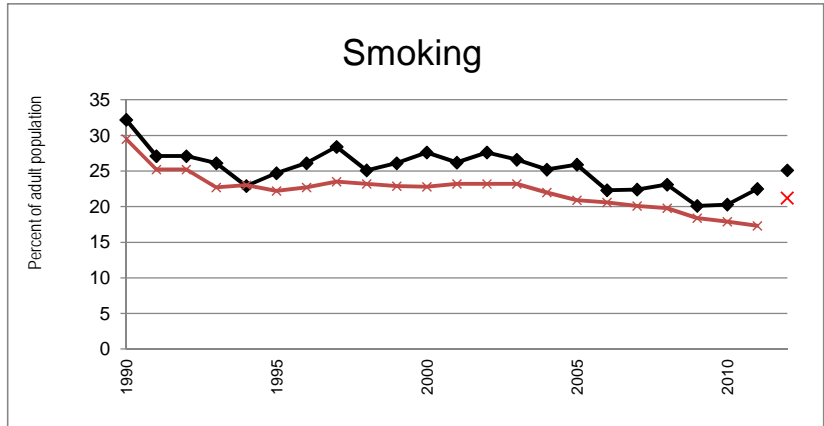
Ohio continues to struggle with a prevalence of obesity higher than most states and rising as rapidly as it is across the nation.

In Ohio, 2,629,000 adults are obese.

Obesity is defined as the percentage of people age 18 and over with a Body Mass Index (BMI) of 30 or more. Data are collected annually by the Behavior Risk Factor Surveillance System and rely on self-reported height and weight. Actual obesity rates are likely to be higher than indicated due to self-report bias.

Obesity
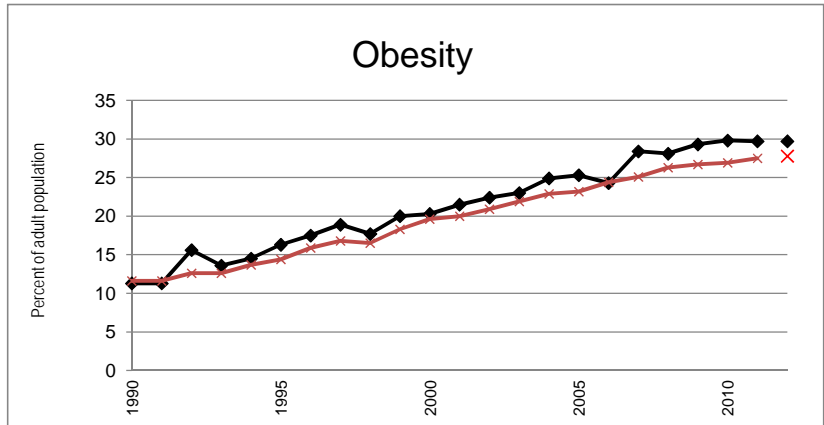
More than one in four adults in Ohio live a sedentary life, slightly more than the national median.

In Ohio, 2,390,000 adults are sedentary.

Sedentary Lifestyle is defined as the percentage of people age 18 and over who do not get any exercise or physical activity outside of their regular employment. Data are collected annually by the Behavior Risk Factor Surveillance System and rely on self-reported activities.
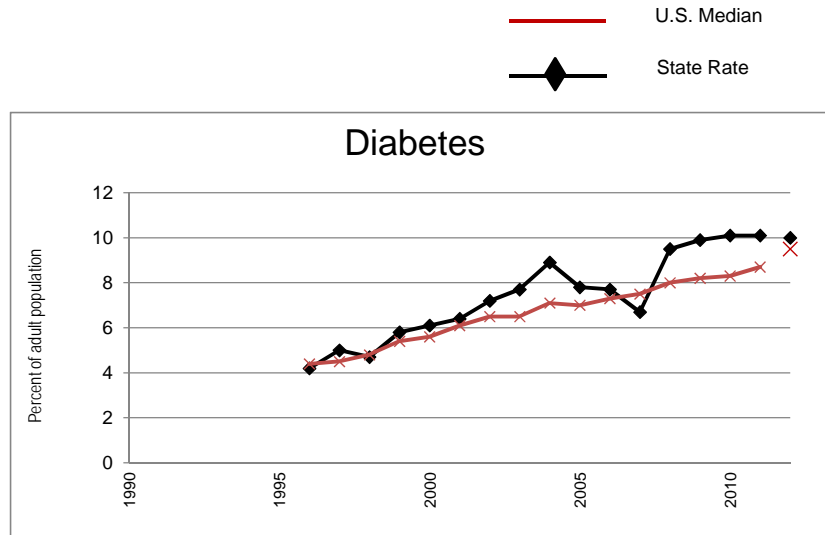
Sedentary Lifestyle
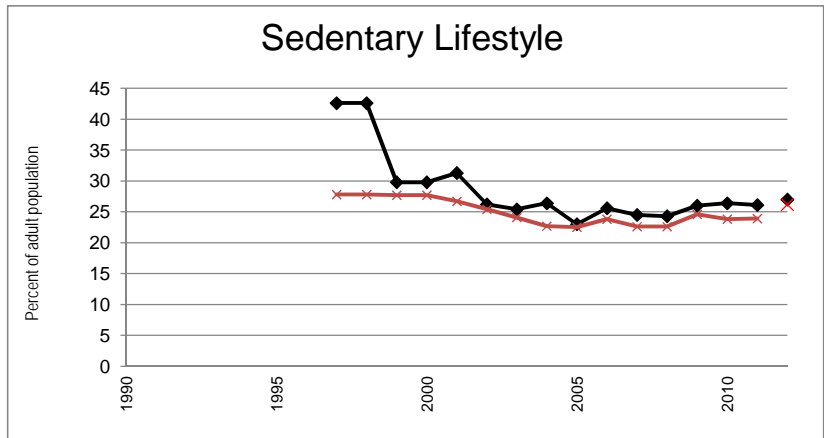
2012 Edition data for these measures are not comparable to prior years because of significant methodological changes in CDC's Behavioral Factor Risk Surveillance System (BRFSS). These changes improve the reliability and accuracy of the prevalence estimates for states.

Comparision of the prevalence of each state to the median of all states for all years is valid.

Diabetes

With one in ten adults in Ohio having diabetes, the prevalence is slightly higher than the national median.

In Ohio, 885,000 adults have diabetes.

Diabetes is defined as the percentage of adults who have been told by a health professional that they had diabetes (does not include pre-diabetes or diabetes during pregnancy). Data are collected annually by the Behavior Risk Factor Surveillance System and are self-reported.

2012 Edition data for this measure is not comparable to prior years because of significant methodological changes in CDC's Behavioral Factor Risk Surveillance System (BRFSS). These changes improve the reliability and accuracy of the prevalence estimates for states.

Comparision of the prevalence of each state to the median of all states for all years is valid.
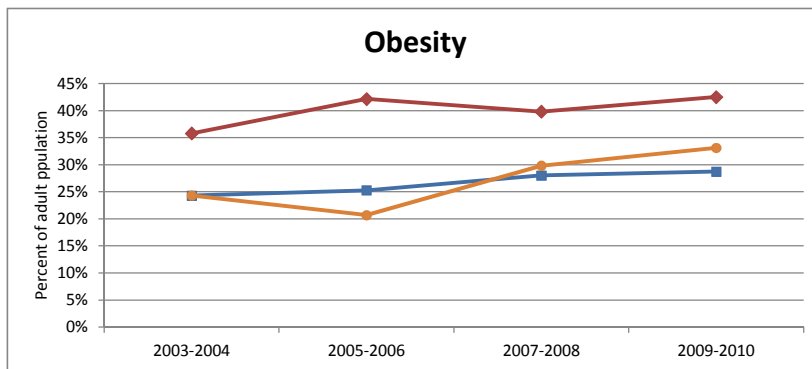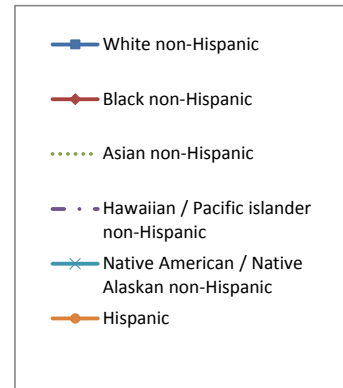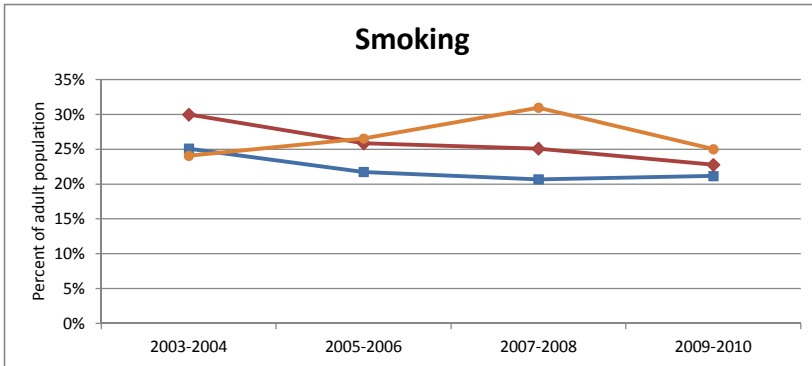
Other Determinants
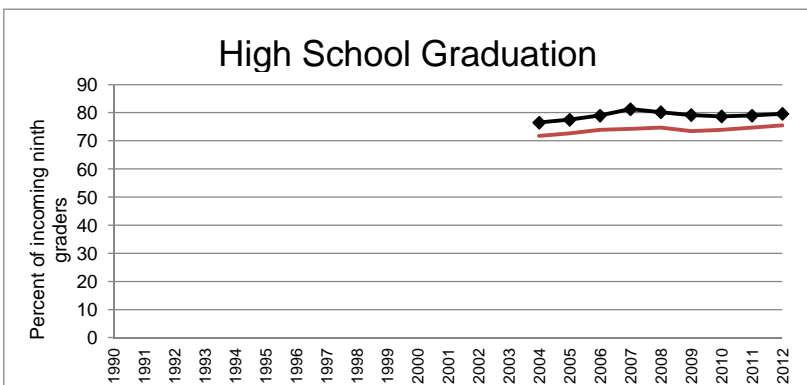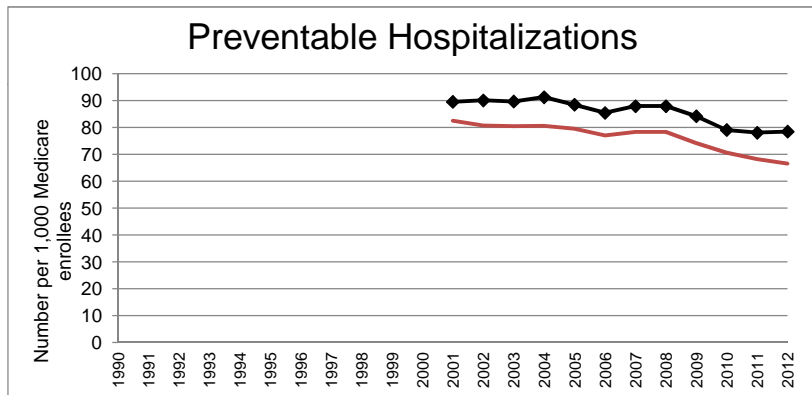
Preventable Hospitalizations

Preventable Hospitalizations is a measure of the discharge rate of Medicare enrollees ages 65 to 99 with full Part A entitlement and no HMO enrollment from hospitals for ambulatory care-sensitive conditions. Preventable hospitalizations reflect how efficiently a population uses the various health care delivery options for necessary care, thus avoiding unnecessary and expensive hospital admissions.

High School Graduation represents the percentage of incoming ninth graders who graduate within four years and are considered regular graduates. Education is a vital contributor to health as people must be able to learn about, create, and maintain a healthy lifestyle. Education can also help facilitate more effective health care visits as patients must be able to understand and participate in their care for optimal results.
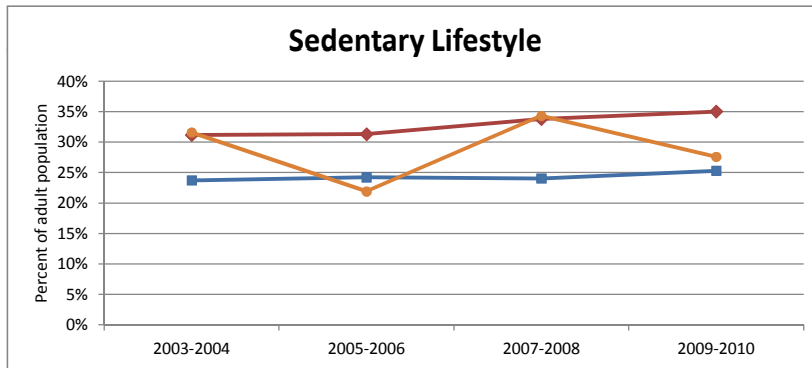
High School Graduation

Health Disparities
Ohio

Smoking

Percent of adult population

(Line chart showing 2003-2004, 2005-2006, 2007-2008, 2009-2010 with y-axis 0% to 35%)

Legend
- White non-Hispanic
- Black non-Hispanic
- Asian non-Hispanic
- Hawaiian / Pacific islander non-Hispanic
- Native American / Native Alaskan non-Hispanic
- Hispanic

Obesity

Percent of adult population

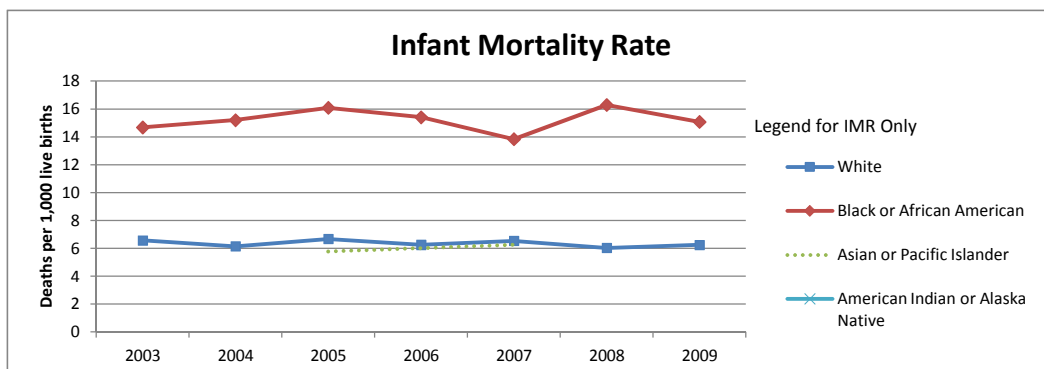(Line chart showing 2003-2004, 2005-2006, 2007-2008, 2009-2010 with y-axis 0% to 45%)

For a population to be healthy, it must minimize health disparities among segments of the population, including differences that occur by gender, race or ethnicity, education, income, disability, geographic location, or sexual orientation.

The statewide measures used in America's Health Rankings® reflect the condition of the "average" resident and can mask differences within the state. When the measures are examined by race, gender, geographic location and/or economic status, startling differences can exist within a state.

Sedentary Lifestyle

Percent of adult population

(Line chart showing 2003-2004, 2005-2006, 2007-2008, 2009-2010 with y-axis 0% to 40%)

The four graphs on this page present the differences in crucial areas of behavior and outcomes relative to race and ethnicity. The goal is to improve all groups and to minimize the differences among groups over time.

Infant Mortality Rate

Deaths per 1,000 live births

(Line chart showing 2003, 2004, 2005, 2006, 2007, 2008, 2009 with y-axis 0 to 18)

Legend for IMR Only
- White
- Black or African American
- Asian or Pacific Islander
- American Indian or Alaska Native

Data represented only if sufficient records exist to be significant.