

Population Health Vital Statistics Brief:

Children's Health in Summit County, 2017-2022

The *Population Health Vital Statistics Data Brief* series was created to provide regular updates to the Community Health Assessment and to provide the community with additional important information about population health. For more information on the Community Health Assessment and to access other reports in the *Vital Statistics Data Brief* series, please visit scph.org/assessments-reports

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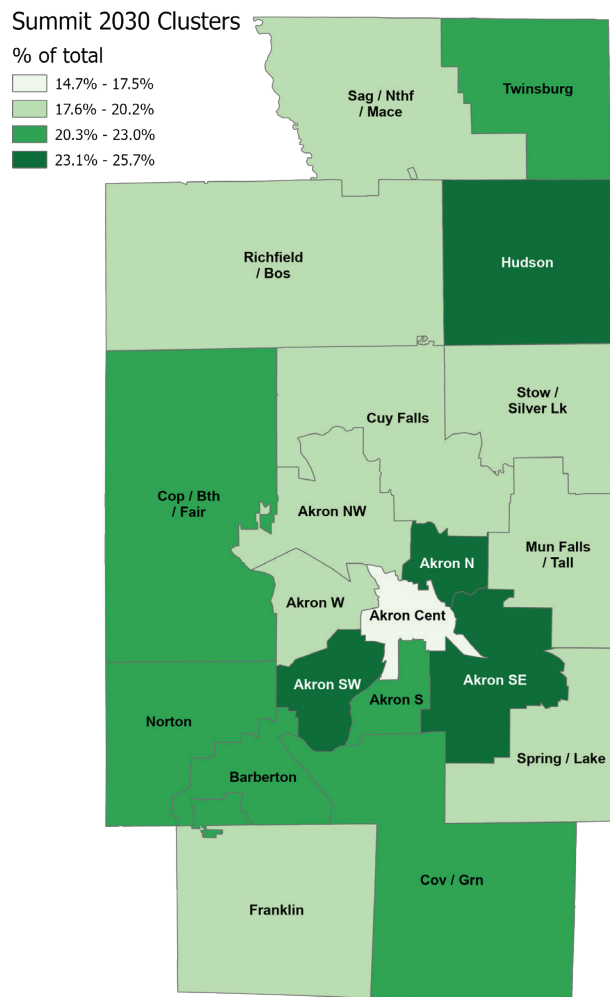


Children In Summit County

Summit County was home to 109,000 children during the past 5 years; nearly 21% of the county's population. The percentage of children is highest in three Akron clusters (North, Southwest, and Southeast) and Hudson, which had the highest childhood population, 25%. Akron Central had the lowest percentage, 14.7%.

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Child Population Projections -- Estimates of the under 18 population for all Ohio counties published by the Ohio Development Services Agency projects Summit County's childhood population will drop steadily from 2020's 126,000 children down to just over 100,000 by 2050; a drop of nearly 20%. The decline in Summit County's childhood population is projected to be faster than population decline in the county as a whole, which is projected to drop by about 16% by 2050.

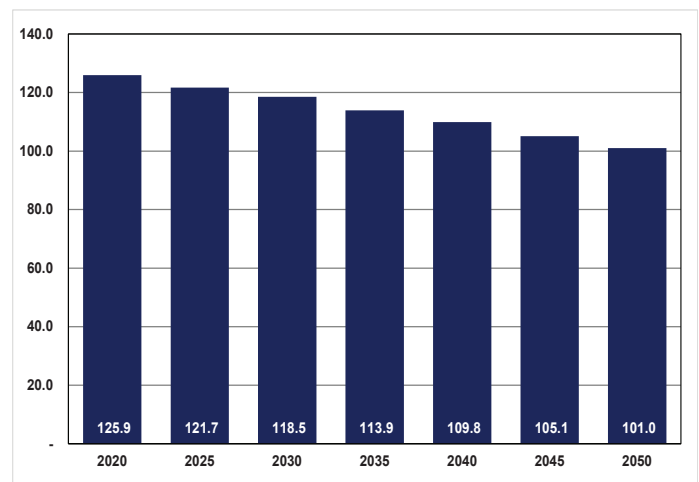


Figure 1: Children As A Percent of Total Population by Summit 2020 Cluster. Source: U.S. Census 2020

Figure 2: Projected Population Under Age 20 in Summit County, 2020-2050 Projection. Source: Ohio Development Services Agency.

Child Demographic Profile

Figure 3 presents a comprehensive demographic profile of the under 18 population in Summit County from the 2022 American Community Survey (ACS). Details on several indicators can be found below:

- Age, sex, and race -- Summit County's 109,000 children are split more or less evenly between those under age 6, ages 6-11, and those ages 12-17. Children are also evenly split by sex, with 51% being male. Nearly two-thirds of children are white alone (64%); lower than the total population percentage identifying as White alone (75%). Over 16% of children identify as Black alone, while 5.2% identify as Asian alone. Nearly 14% of children identify as being of two or more races.
- Household relationships -- The vast majority of children live with their biological, step, or adopted parents (91%). 6% live with a grandparent, while 1% live with another relative and a further 2% live as a foster child or with other non-relatives (Figure 4).
- Income and poverty -- Nearly 17% of children live in a household below the poverty level. More than one-in-four children live in a household that receives, SSI, public assistance, or SNAP benefits. Female-headed households with children are 10 times more likely to have \$25,000 or less in income per year than married couple households (Figures 5-7).
- School enrollment -- The vast majority of children attend a public school, 87% (Figure 8).

Children in Summit County	2022 Estimate
Children under 18 years in households	109,387
AGE	
Under 6 years	30.5%
6 to 11 years	34.9%
12 to 17 years	34.6%
SEX	
Male	50.6%
Female	49.4%
RACE AND HISPANIC OR LATINO ORIGIN	
One race	86.1%
White	63.9%
Black or African American	16.4%
American Indian and Alaska Native	0.1%
Asian	5.2%
Native Hawaiian and Other Pacific Islander	0.0%
Some other race	0.4%
Two or more races	13.9%
Hispanic or Latino origin (of any race)	4.2%
White alone, not Hispanic or Latino	62.4%
RELATIONSHIP TO HOUSEHOLDER	
Own child (biological, step or adopted)	90.8%
Grandchild	6.3%
Other relatives	1.2%
Foster child or other unrelated child	1.7%
NATIVITY	
Native	98.40%
Foreign born	1.6%
PRESENCE OF OTHER ADULTS	
Unmarried partner of householder present	8.9%
DISABILITY STATUS	
Civilian children under 18 years in households	109,387
With any disability	4.7%
SCHOOL ENROLLMENT	
Children 3 to 17 years in households	92,865
Enrolled in school	84,585
Public	83.9%
Private	16.1%
Not enrolled in school	8,280
MEDIAN FAMILY INCOME: FAMILIES WITH OWN CHILDREN	
Median income (dollars)	\$82,694
Children under 18 years in households	109,387
PUBLIC ASSISTANCE IN THE PAST 12 MONTHS	
Children living in households with Supplemental Security Income (SSI), cash public assistance income, or Food Stamp/SNAP benefits	26.1%
POVERTY STATUS IN THE PAST 12 MONTHS	
Children in households for whom poverty status is determined	108,239
Income in the past 12 months below poverty level	16.9%
Income in the past 12 months at or above poverty level	83.1%
HOUSING TENURE	
Children under 18 years in occupied housing units	109,387
In owner-occupied housing units	67.6%
In renter-occupied housing units	32.4%

Figure 3: Child Demographic Profile, 2022

Source: 2022 ACS, 1-year average.

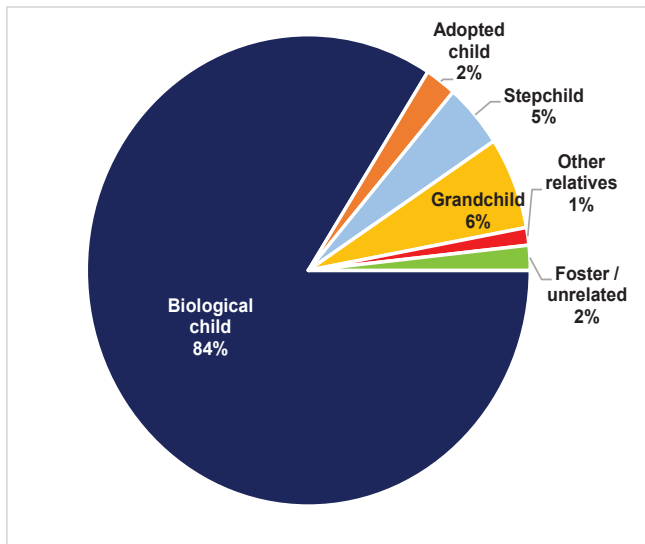


Figure 4: Children's Relationship to Householder, 2022

Source: 2022 ACS, 1-year average.

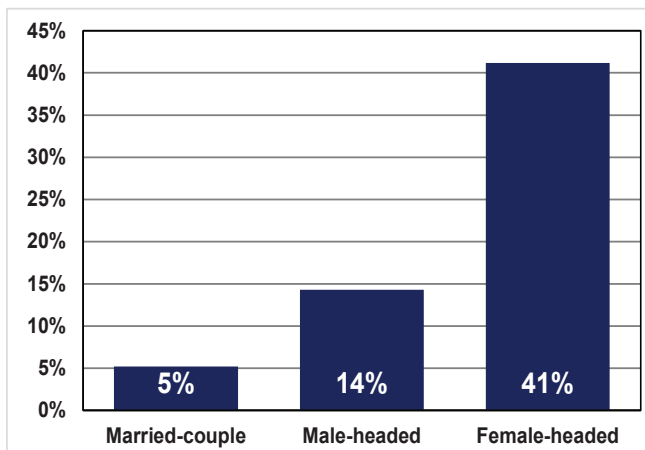


Figure 5: Poverty Rate by Household Type, 2022

Source: 2022 ACS, 1-year average.

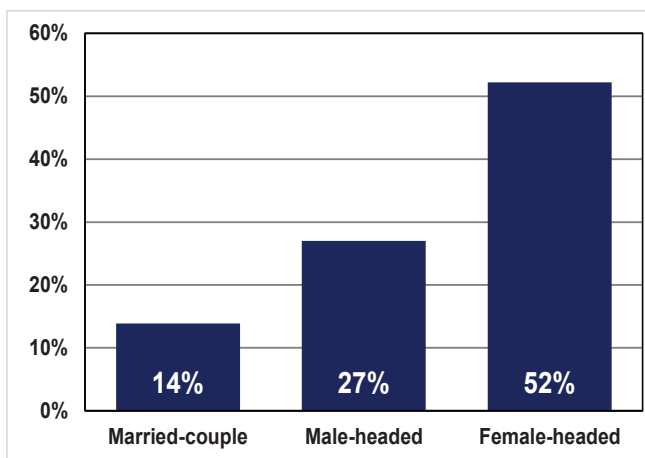


Figure 6: Percentage of Children Living In Family Households Receiving Public Assistance , 2022 Source: 2022 ACS, 1-year average.

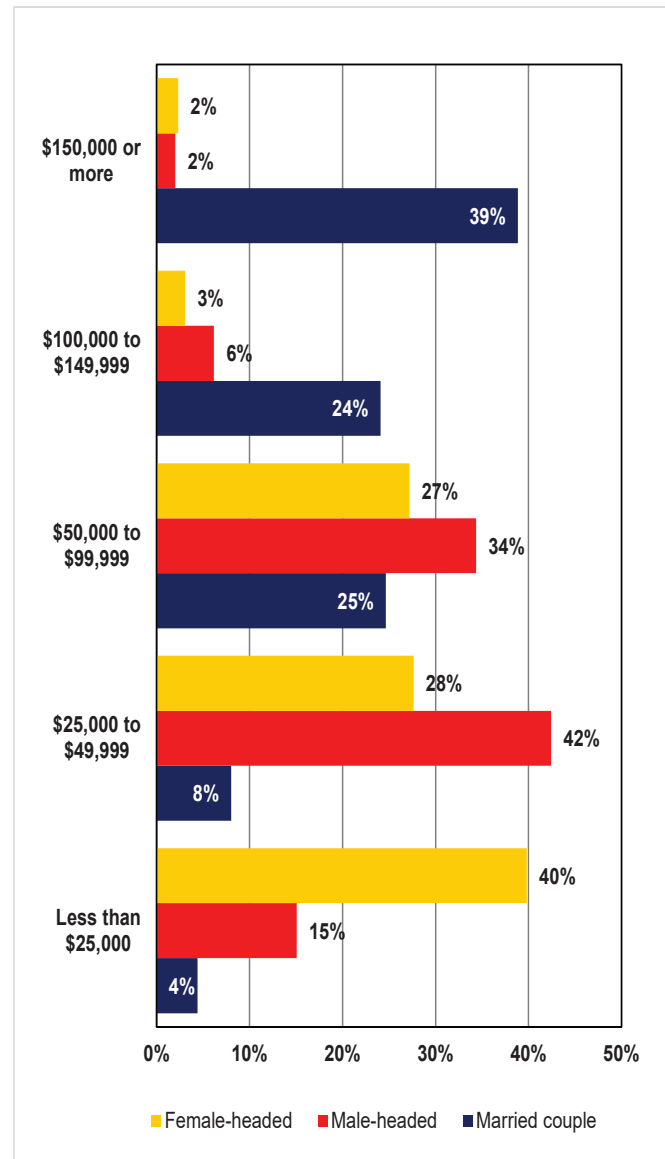


Figure 7: Household Income Breakdown by Type of Household , 2022 Source: 2022 ACS, 1-year average.

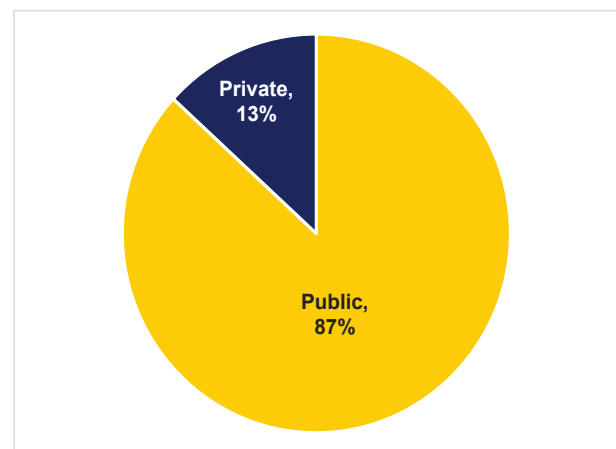


Figure 8: School Enrollment by Type of School , 2022 Source: 2022 ACS, 1-year average.

Child Health Issues

Children face a variety of issues related to their health. One of biggest issues is lead paint; a potential problem for any children living in a home built before 1978 (the year residential lead-based paint was taken off the market). Homes built before 1978 and in poor condition have an elevated risk of having lead contamination. More than two-thirds of Summit County's housing stock was built before 1978.

- Age of housing -- Nearly 70,000 housing units in Summit County were built before 1940, with the heaviest concentrations of this housing located in the areas in grey on the maps below. Areas in red shading in Map 4b (below right) show hot spots for the percent of lead tests of children under age 6 which showed elevated blood-lead levels. As the map shows, the vast majority of those hotspots are located in areas of the county where the highest concentrations of older housing exist.

- Elevated Blood-Lead Levels (EBLL) -- Between 2015 and 2023 to date, about 7,500 children under age 6 have had at least one lead test. Roughly 10% showed concentrations above 5 ug/dl (micrograms per deciliter of blood). According to the CDC,

"Exposure to lead can seriously harm a child's health and cause well-documented adverse effects such as: damage to the brain and nervous system; slowed growth and development; learning and behavior problems and; hearing and speech problems.

This can cause lower IQ; decreased ability to pay attention and; underperformance in school."

Elevated Blood-Lead Levels (>5 ug/dL), 2015-2023 YTD

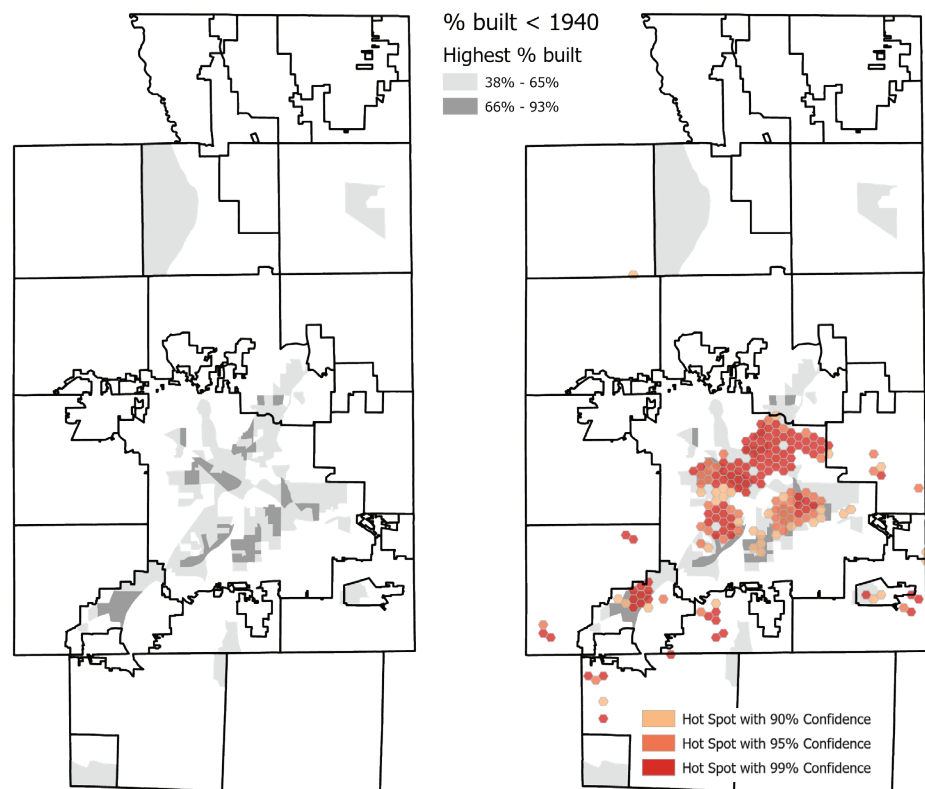
Category	Children under 6
<5 ug/dL	6,737
5-<10 ug/dL	579
10-<45 ug/dL	187
45+ ug/dL	8
Total tested	7,511
Elevated	10%
Not elevated	90%

Centers for Disease Control and Prevention. (2022, September 2). Health effects of lead exposure. Centers for Disease Control and Prevention. <https://www.cdc.gov/nceh/lead/prevention/health-effects.htm>

Percentage of Housing Built Before 1940 (Figure 4a, left); and

Hot Spots for Elevated Blood-Lead Tests in Children Under 6 (Figure 4b, right), 2007-2021.

Source: Ohio Department of Health lead testing database; 2017-2021 ACS, 5-year average year of construction of housing units.



- Emergency Room visits -- Between 2019 and 2020, emergency rooms serving Summit County children had just under 90,000 total visits by those under age 18; about 123 visits per day over the period. However, as shown in Figure 5, ER visits dropped sharply beginning with the COVID-19 lockdowns in March and April of 2020. Average visits dropped from 154 per day before March 2020 to just 79 per day afterward.

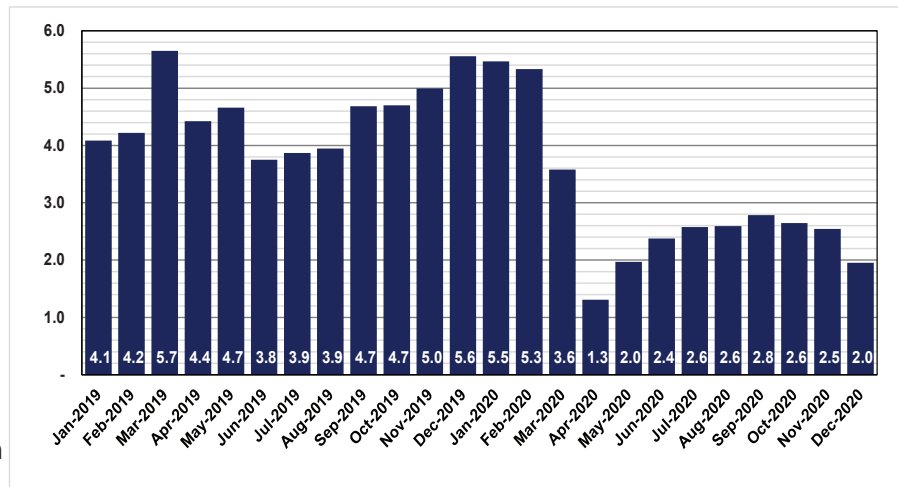


Figure 5: Total ER visits for Children (in thousands) 2019-2020 Source: EpiCenter

- Top 5 reasons for ER visits for children -- One third of all ER visits for children were related to symptoms of an influenza-like illness (ILI). According to the CDC, an ILI is defined as "fever (100°F [37.8°C] or greater) and a cough and/or a sore throat."

Another quarter (23%) were related to other respiratory issues, one-in-five were related to an injury (21%), fever (20%), and 12% were related to abdominal pain. All told, these top 5 causes accounted for 68% of all childhood ER visits in 2019 and 2020. Within the injury category, lacerations (20%), falls (11%), and head injuries (6%) were the largest causes.

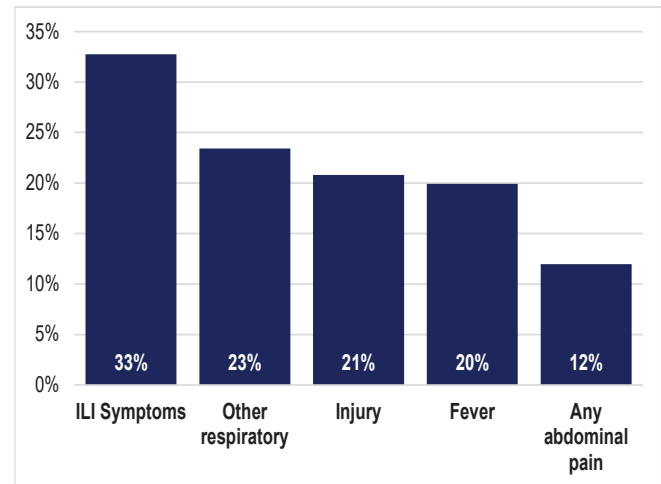


Figure 6: Top 5 Classification for ER Visits for Children As A Percent of All Child ER Visits, 2019-2020 Source: EpiCenter

- Gunshot wounds and other violence -- About 5% of all ER visits were for gunshot wounds to children, as were 6.5% of assault, sexual assault, or rape related visits. For more details, please refer to our [Assault Data Brief](#).
- By Age -- Infants (age 0-2) were the most likely to visit an ER; 30% of all visits. Children 6-12 and adolescents 13-17 were the next likeliest to visit an ER (28% and 25%, respectively), followed by preschool children (3-5) at 17%.

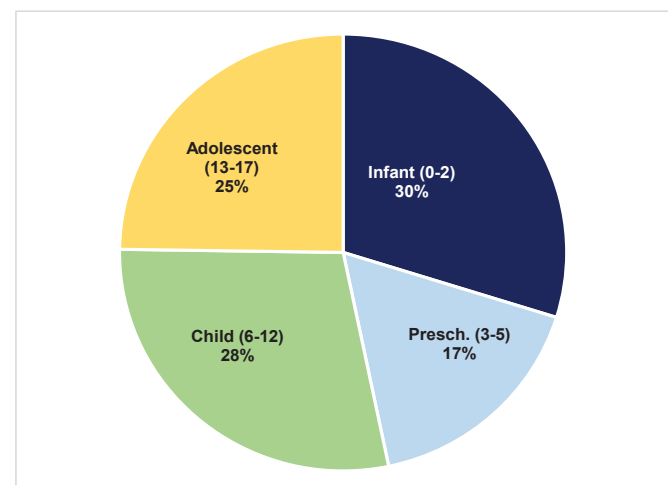


Figure 7: ER visits for Children by Age Group, 2019-2020 Source: EpiCenter

- Leading Causes of Death, Under Age 18 -- A total of 363 confirmed deaths of children ages 1-17 have taken place in Summit County since 2007; an average of 23 per year. As Figure 8 shows, accidents accounted for about one-third of all childhood deaths, followed by homicide, suicide, cancer, and heart disease.
- Within accidental deaths, the most frequent specific causes were: motor vehicle accidents; drowning; exposure to smoke, fire and flames; accidental poisoning; and falls.

A total of 51 children lost their lives because of homicide. Of those, 30 involved firearms. An additional 45 children were lost to suicide; 15 involving firearms. Forty-five percent of homicide victims and 71% of suicide victims were between the ages of 15 and 17.

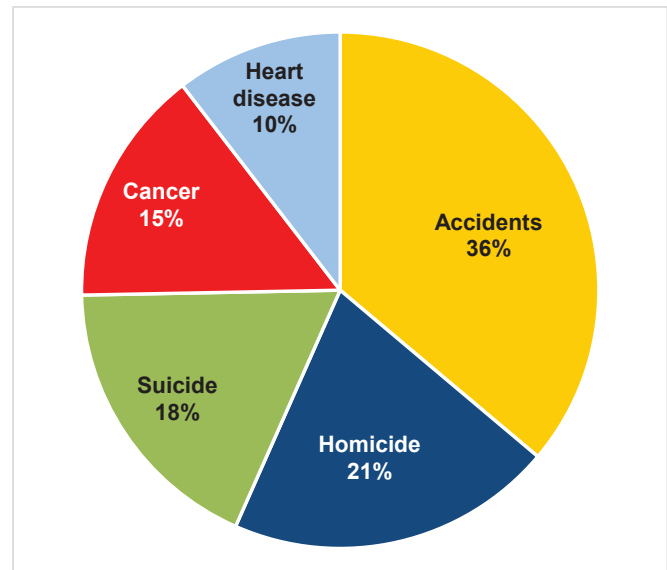


Figure 8: Top 5 Causes of Death, Under Age 18, 2007-2021; Source: Ohio Department of Health

The youngest homicide victim was age 1, while the youngest suicide victim was 10.

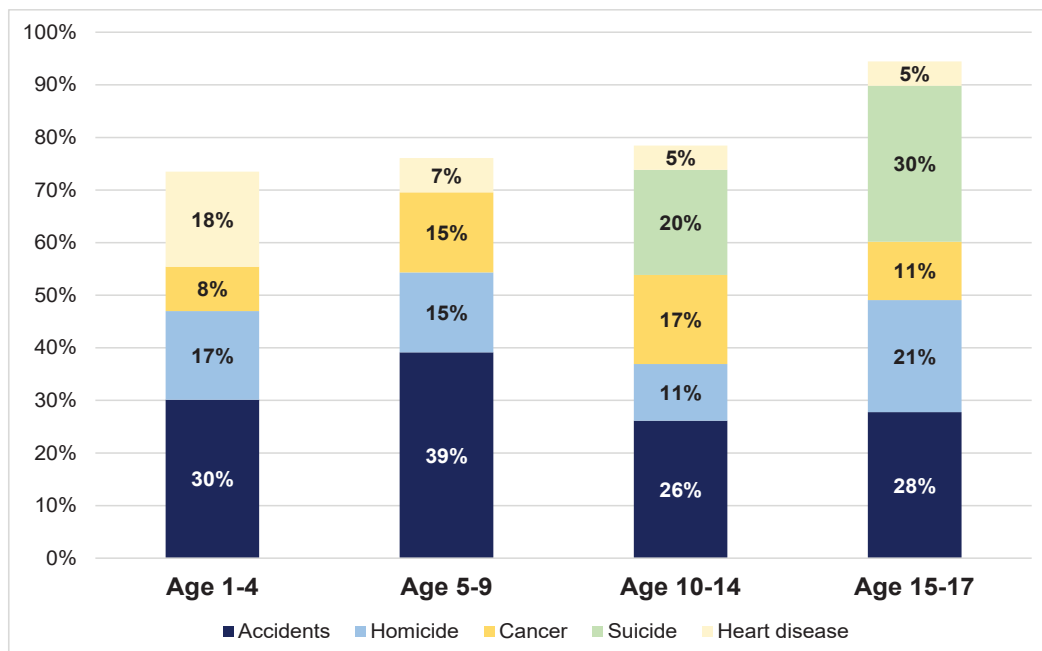


Figure 9: Top 5 Causes of Death, Under Age 18 By Age Group, 2007-2021; Source: Ohio Department of Health

Risky Behaviors Among Youth

Youth Risk Behavior Survey, 2019 -- In the years 2013 and 2018 the Youth Risk Behavior Survey (YRBS) was given to students in Summit County in grades ranging from 7th to 12th grade. The YRBS is currently gearing up for a third round in fall 2023. Below is a summary of the findings of the previous two surveys for high school students.

Unintentional Injuries and Violence

One-fifth of high school students said they've been in a physical fight during the past year, while another fifth say they were bullied at school in the past year. Eleven percent of high school students reported that they carried a weapon, 12% said they were physically hurt by someone they were dating, and 8% said they attempted suicide in the previous year.

Trends since 2013:

- Drinking and driving are down but texting or emailing while driving is unchanged.
- Weapons, fighting and attempted suicides are down; dating violence is up, while bullying, self-harm, and suicidal ideation are unchanged.

Tobacco, Vaping, Alcohol and Drugs

About a quarter of high school students reported using tobacco in the previous year, while 42% said they tried e-cigarettes. Nearly half (46%) said they have ever used alcohol. Nearly one-third said they had ever used marijuana.

Trends since 2013:

- Tobacco use before 13 is down, as are use of cigarettes, smokeless tobacco and cigars

in the past 30 days. However, e-cigarettes have achieved significant penetration into our youth in a short timeframe.

- Alcohol use is down on all measures (ever used, used before age 13, and binge drinking).
- Rates of ever tried drugs are down for all categories asked. However, the percent of kids who think their parents consider marijuana use very wrong has declined from three-quarters 6 years ago to only half today.

Sexual Behaviors

More than one-third of high school students had ever had sex (36%), while more than a quarter said they were currently sexually active (28%). Only half of currently sexually active high school students said they used a condom most or all of the time.

Trends since 2013:

- The percent ever having sex, ever gotten someone pregnant (or being pregnant themselves), and those currently sexually active are all down, as is those sexually active kids who uses drugs and/or alcohol during sex. However, the percent using a condom is also down among those who are sexually active.

Obesity, Diet, and Physical Activity

About a third of high school students described themselves as overweight (33%). Another 16% had a body mass index (BMI) that would classify them as being obese. A small percentage of high school students said they met the recommended intake of fruits and vegetables, while the vast majority (75%) said they ate fast food at least once per week. In addition, only one-quarter of high school students said they ate breakfast every day.

Less than half of high school students met the recommended level of physical activity (42%). A slightly higher percentage of high school students report spending at least 3 hours per day on a computer.

Trends since 2013:

- Both the percent of kids describing themselves as overweight and actual obesity rates are both higher.
- The percent of kids drinking pop or soda at least once per day has improved. However, the percent of kids meeting recommended fruit and vegetable intake got worse, as did the percent who drink milk, don't eat breakfast every day, and ate fast food at least once per week.
- Participation in non-sports-related extracurricular activities is down, as is the percent of kids watching 3+ hours of TV daily. However, the percent of kids spending 3+ hours on computers or video games is up sharply.
- The percent of kids told they have asthma is down, while rates of seeing a doctor, dentist, or mental health professional are up. However, the percent of kids getting 8 hours of sleep per night is also down.
- Kids saying they have an adult they're comfortable talking to is down, as is the percent of kids who talk to their parents about school almost every day. After school and weekend activities are also down.

Summary of Key High School Questions - 2013 and 2019

Subject Areas	Questions	2013	2019	Trend	2013-2019
Unintentional injuries and violence	Drove after drinking - students who drove only	9.3%	5.2%		Better
	Carried a weapon	15.3%	11.0%		Better
	In a physical fight	25.5%	22.4%		Better
	Physically hurt by someone you were dating	8.4%	12.3%		Worse
	Attempted suicide	10.4%	8.4%		Better
Tobacco, alcohol, and drugs	Ever used alcohol	57.0%	45.7%		Better
	Used alcohol in the past 30 days	30.3%	23.8%		Better
	Alcohol use before age 13	16.2%	10.5%		Better
	Binge drank (5+) alcoholic beverages	16.5%	11.3%		Better
	Ever used tobacco	24.9%	25.8%		Worse
	Ever used e-cigarettes (not asked in 2013)	--	42.3%	--	--
	Ever used marijuana	36.6%	32.2%		Better
Gambling and sexual behaviors	Parents think it's very wrong to use marijuana	74.3%	53.0%		Worse
	Gambled money or personal items	24.4%	20.0%		Better
	Gambled over the internet	2.2%	4.0%		Higher
	Ever had sexual intercourse	42.0%	35.7%		Better
	Currently sexually active	30.7%	27.6%		Better
Obesity, weight, diet	Currently active teens using a condom most / all the time	58.2%	53.3%		Worse
	Described themselves as overweight	30.5%	33.0%		Worse
	BMI in the obese category	12.9%	16.4%		Worse
	Met recommended fruit / vegetable intake	18.6%	13.8%		Worse
Physical activity and other health issues	Ate fast food at least once during the week	69.6%	75.1%		Worse
	Spent 3 or more hours per day on television	25.8%	18.3%		Better
	Spent 3 or more hours per day on computers	39.8%	49.7%		Worse
	Ever been told had asthma	23.1%	20.4%		Better
	Saw a doctor in the past 12 months	65.7%	70.0%		Better
	Saw a dentist in the past 12 months	71.5%	73.8%		Better
	Saw someone for a mental health issue in the past 12 months	24.3%	29.1%		Better
	Got 8 hours of sleep per night	26.8%	19.6%		Worse
	Talk to parents about school almost everyday	56.6%	53.1%		Worse

Figure 9: Fall-Related Emergency Room Visits and Fatalities, 2014-2020; Sources: EpiCenter, Ohio Department of Health (ODH) death records

The LGBTQ+ Experience in High School

One troubling set of findings from the 2018 YRBS was the self-reported experiences of LGBTQ+ high school students (sexual orientation was not asked of middle school youth). In the 2018 YRBS, LGBTQ+ youth were significantly more likely than heterosexual youth to say they:

- Felt unsafe at, going to, or coming home from school in the past 30 days
- Were physically hurt (on purpose) by someone they were dating
- Were forced to do sexual things that they didn't want to do
- Were bullied in school, away from school, and electronically
- Purposely hurt themselves
- Felt so sad that they stopped normal activities
- Seriously considered suicide
- Attempted suicide

LGBTQ+ youth were at least 2-3 times more likely than heterosexual youth to have experienced violence, self-harm, depressive sadness, or suicide-related behavior. LGBTQ+ youth were also more likely than heterosexual youth to say they have used cigarettes, e-cigarettes, alcohol, marijuana, or a hard drug such as heroin, methamphetamine, or cocaine at least once.

No matter their orientation, those who have been forced to do something sexual are more likely to have experienced violence, self-harm, depressive sadness, or suicide-related behavior. Overall, just under 14% of all high school students say they have been forced to do something sexual. However, LGBTQ+ high school students were 3 times more likely than heterosexual students to say they were ever forced to do something sexual (30.3% and 10.9%, respectively).

Heterosexual youth who have ever been forced to have sex are three times as likely as other

heterosexual youth who haven't been forced to have sex to say they feel unsafe, suffer from violence, suffer bullying, and have poorer outcomes on self-harm, depressive sadness, and suicide-related questions. LGBTQ+ youth who have ever been forced to have sex are two times as likely as other LGBTQ+ youth to suffer from violence, suffer bullying, and have poorer outcomes on self-harm, depressive sadness, and suicide-related questions.

LGBTQ+ youth who have been forced to have sex have the most worrying outcomes of any demographic group in the survey. For example, 10% of heterosexual youth without a forced sexual experience say they seriously considered suicide in the past 12 months. This figure rises to 36% for heterosexual youth with a forced sexual experience. Just over 33% of LGBTQ+ youth without a forced sexual experience say they seriously considered suicide in the past 12 months; a figure that rises to 62% for LGBTQ+ youth who have ever had a forced sexual experience.

The same situation exists with substance use and sexual activity. Any youth who ever had a forced sexual experience is significantly more likely to use marijuana and other drugs, and also more likely to have ever had sexual intercourse and to be currently sexually active than those who didn't. As with the violence-related questions, rates of substance use and sexual activity are higher among LGBTQ+ youth with a forced sexual experience than heterosexual youth with a forced sexual experience.

One last finding related to forced sexual experiences is the sex of the victims. Nearly 80% of heterosexual teens and 85% of LGBTQ+ teens who have ever been forced to do something sexual were female. 20% of heterosexual and 14% of LGBTQ+ victims of a forced sexual experience were male. Just under 44% of heterosexual teens and 65% of LGBTQ+ teens who were never forced to do something sexual were female.