

## A Local Profile ■ Franklin County

### DEMOGRAPHICS<sup>i</sup>

- 49% of the Franklin County population is male.
- The majority of Franklin County males are White (73%).
- Slightly more than 90% of Franklin County males are native to the United States while almost 10% are foreign born.
- Slightly more than 12% of Franklin County adult males have less than a high school diploma; almost 34% have a Bachelor's degree or higher.
- Almost 75% of men are in the labor force. Of these, 4% are unemployed.
- Median income for Franklin County males (age 15 years and older) is \$32,890.
- Almost 15% of Franklin County males are living below the federal poverty level.<sup>1</sup>

### GENERAL HEALTH<sup>ii</sup>

- Overall Franklin County men consider themselves to be healthy, with over 90% reporting their health is "good," "very good," or "excellent."
- Almost 9% of Franklin County men reported 14 or more days of poor mental health in the past 30 days.
- Slightly more than 7% of Franklin County men reported 14 or more days of poor physical health in the past 30 days.
- 22% of Franklin County men report they are current smokers.<sup>2</sup>

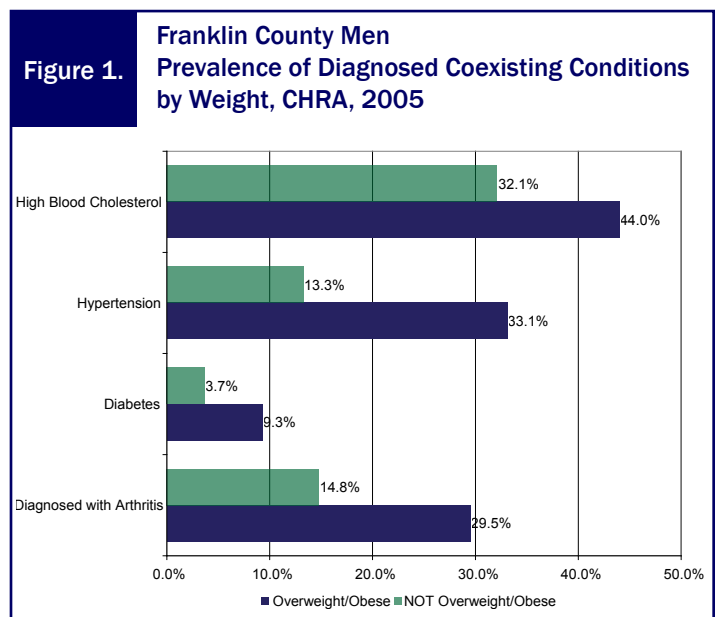
### ACCESS TO CARE<sup>ii</sup>

- Almost 12% of Franklin County men report they have no form of health insurance coverage.<sup>3</sup>
- Over 8% of Franklin County men reported they had not seen a doctor, when they needed to, due to cost in the past year.<sup>4</sup>

### CHRONIC CONDITIONS<sup>ii</sup>

- Over 7% of Franklin County men have been diagnosed with Diabetes, which is the 6<sup>th</sup> leading cause of death among Franklin County men.
- 26% of Franklin County men have been diagnosed with hypertension.
- Over 40% of Franklin County men have been diagnosed with high blood cholesterol.
- Over 42% of Franklin County men are overweight and 23% are considered obese.<sup>5</sup>

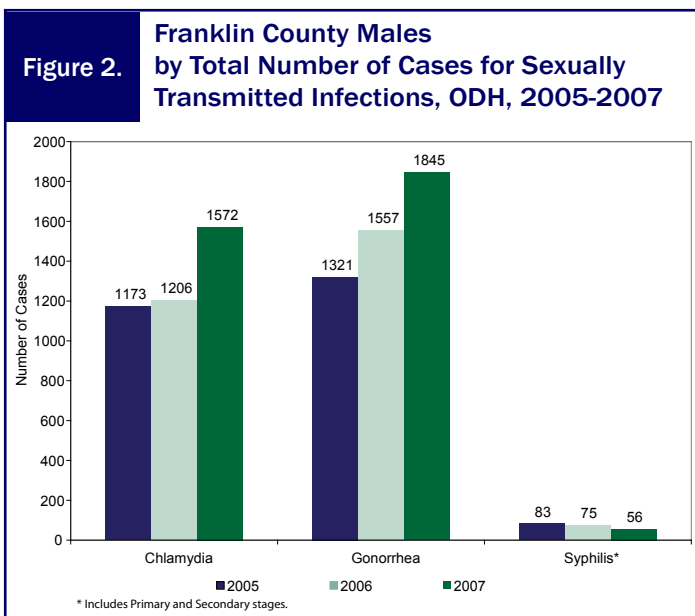
*Overweight and obese men typically have several comorbidities, including those conditions listed above, in addition to their excess weight (Fig.1).*



## INFECTIOUS DISEASE<sup>iii</sup>

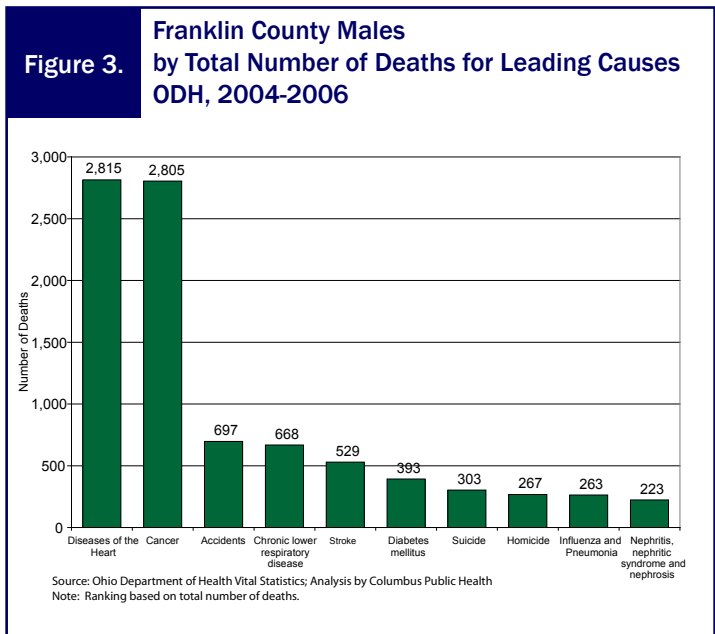
- Of U.S. Born Tuberculosis cases in Franklin County, almost three-fourths were male.
- The majority of both those diagnosed HIV/AIDS<sup>6</sup> and those living with HIV/AIDS<sup>7</sup> in 2007 were male (83% and 82% respectively).
- In 2007, males accounted for 25% of new chlamydia cases, 48% of new gonorrhea cases, and 81% of new syphilis cases.

While the number of cases of both Chlamydia and Gonorrhea increased between 2005 and 2007; the number of Syphilis cases remained relatively constant (Fig. 2).



## MORTALITY<sup>iv</sup>

- Heart disease has been the leading cause of death for Franklin County men since at least 1998, and accounted for over a quarter of all male deaths in Franklin County between 1998 and 2006.
- Lung cancer is the primary cause of death due to cancer among males in Franklin County. The age-adjusted death rate<sup>8</sup> (ADR) for males is 1.3 times higher than the death rate for all of Franklin County.



## SPECIAL TOPIC: RACIAL DISPARITIES AMONG FRANKLIN COUNTY MALES

Almost 20% of the male population in Franklin County is Black. The gap in health status between the Black and White populations in Franklin County has remained unchanged and in some cases has widened over the past decade.<sup>9</sup>

- More non-Hispanic Black men report being chronic heavy drinkers or current smokers than non-Hispanic White men.
- Non-Hispanic Black men have higher occurrence of overweight/obesity, diabetes, and high blood pressure (hypertension) than non-Hispanic White men.
- Non-Hispanic Black men are dying from homicide at almost 9 times the rate of non-Hispanic White men in Franklin County.
- The ADR<sup>6</sup> for non-Hispanic Black men dying from diabetes is over 2 times higher than the ADR<sup>6</sup> for non-Hispanic White men.
- Though more non-Hispanic White men are currently living with HIV/AIDS, the ADR for non-Hispanic Black men dying from HIV is over 3 times higher than the ADR<sup>6</sup> for non-Hispanic White men.



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## DATA SOURCES

- i. 2007 estimates, U. S. Census, American Community Survey,
- ii. 2005 Franklin County Community Health Risk Assessment. This information is reported for those 18 years and older unless otherwise noted.
- iii. HIV/AIDS: 2007, Ohio Department of Health HIV/AIDS Surveillance Program. Data reported through Dec. 31, 2008.; Tuberculosis: 2006, Ohio Department of Health, Analysis by Columbus Public Health; Gonorrhea, Chlamydia, and Syphilis: 2007, Ohio Department of Health, Analysis by Columbus Public Health
- iv. 2004-2006, Ohio Department of Health, Vital Statistics Data, Analysis by Columbus Public Health

## TECHNICAL NOTES:

1. Federal poverty level (includes males of all ages): Following the Office of Management and Budget's (OMB's) Directive 14, the Census Bureau uses a set of money income thresholds that vary by family size and composition to detect who is poor. If the total income for a family or unrelated individual falls below the relevant poverty threshold, then the family or unrelated individual is classified as being "below the poverty level."
2. Includes those who reported they smoked at least 100 cigarettes in their lifetime and now smoke some days or every day.
3. Includes those 18 to 64 with NO health care coverage. Health care coverage includes health insurance, prepaid plans such as HMOs, or government plans such as Medicare.
4. Includes both insured and uninsured individuals.
5. Overweight includes those with a body mass index between 25 and 29.9 or Obese indicates those with a body mass index of 30 or higher.
6. HIV = Human Immunodeficiency Virus; HIV/AIDS diagnoses include persons with a diagnosis of HIV infection (not AIDS), a diagnosis of HIV infection and a later AIDS diagnosis, and concurrent diagnoses of HIV infection and AIDS reported in 2007.
7. "Living with HIV/AIDS" represents all persons ever diagnosed and reported with HIV or AIDS who have not been reported as having died as of Dec. 31, 2007.
8. Age-adjusted death rate is per 100,000 people.
9. Due to data limitations only disparities between Black and White populations can be analyzed locally.

