Summit County Public Health

2026 Community Health Improvement Plan



C H I P



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A Letter from the Health Commissioner

Summit County Public Health is proud to release the 2026-2028 Community Health Improvement Plan. For over a decade and a half, the Summit Coalition for Community Health Improvement composed of community organizations, nonprofits, hospitals, healthcare providers, schools, faith leaders, businesses, elected officials and community residents have collaborated to improve the health and well-being of the Summit County community. This coalition is essential in the development of the Community Health Improvement Plan (CHIP) and strategically implementing initiatives to increase the health of the residents of Summit County.

Over 25 community partners worked over several months to collect and analyze data, identify priority issues, and plan evidence-based interventions to be implemented and evaluated over the next 3 years. Though the goals and strategies contained in this document were selected through this process, we recognize that the CHIP is a living document that must respond to the evolving needs of the community. Building new partnerships and identifying new opportunities will be critical to achieving our goals. By bringing together a diverse coalition of dedicated partners, thoughtfully analyzing available data, and engaging with the residents of Summit County, we are optimistic that we can achieve the goals set forth in this CHIP.

We appreciate all of the community partners who were part of the process, those who are providing the programmatic opportunities to address these issues, and to the community of Summit County whose health is our mission and purpose.

To a healthier tomorrow,



Christopher A. Barker, MPH
Health Commissioner

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Introduction

The Summit County Community Health Improvement Plan (CHIP) builds upon 2023-2025 CHIP priorities, goals and strategies. The 2026-2028 CHIP also aligns with the Ohio State Health Improvement Plan, as well as hospital and community partner implementation plans. The CHIP aims to highlight community priorities, strategies, and opportunities for expansion while building upon previous successes and adjusting for current challenges.

Referencing the 14 priority areas and data outlined in the Summit County 2025 Community Health Assessment, the four 2026-2028 priority areas have been identified as:

1. Adverse Childhood Experiences
2. Mental Health & Addiction
3. Housing
4. Aging Population

Additionally, Resource Access and Connection and Poverty are interwoven into many of these priorities and act as cross-cutting impacts.

Priority Areas

The SCPH CHIP was developed through a collaborative community health improvement planning process informed by Public Health Accreditation Board (PHAB) standards to create a comprehensive community health improvement plan with measurable outcomes or indicators of health improvement and priorities for action; considerations of social drivers of health; causes of higher risks and poorer health outcomes and health inequities.

Strategies in the 2026-2028 CHIP are reflective of past successes and current health improvement challenges. The CHIP does not replace or supersede any concurrent action planning document produced by the health department or any of our community partners. Though SCPH has been the organization responsible for coordinating the community health improvement process, it is not the sole organization responsible for CHIP implementation. The Summit Coalition for Community Health Improvement played an important role in determining the focus priorities, identified key partners and existing programming/efforts surrounding those topics, and potential gaps in care that need to be addressed during an afternoon workshop meeting.

These priorities include Adverse Childhood Experiences, Mental Health and Addiction, Housing, and Aging Populations. Additionally, Resource Access and Poverty were identified as overarching impacts that are interwoven into all of the priority areas.

Work in these areas yielded the following report documents and programmatic focus areas, some of which were used to help inform the CHIP: Eviction Task Force Strategic Plan, Opiate Abatement Advisory Committee Abatement Plan, Suicide Prevention Coalition Strategic Plan, Summa Health CHNA Implementation Plan, Cleveland Clinic Akron General CHNA Implementation Plan, Akron Children's Hospital CHNA Implementation Plan, SCPH Strategic Plan, County of Summit Alcohol, Drug Addiction & Mental Health Services Board (ADM) Community Plan, Youth Violence Prevention Plan, and more.

SCPH's commitment to this effort can be seen through its work to build community capacity and developing collaborative partnerships with community stakeholders to address key population health issues.

Cross-cutting Factors

Resource access and connection are important factors that influence health and well-being across all Community Health Improvement Plan (CHIP) priority areas. Access to healthcare is one component, but residents also need reliable connections to resources such as housing, food, transportation, education, social supports, and financial assistance. When individuals and families can easily find and access the services they need, they are better positioned to maintain their health, prevent crises, and improve overall quality of life. Conversely, barriers to accessing resources can contribute to poorer outcomes and challenges that extend across multiple areas of health and well-being.

Summit County has invested in efforts that strengthen connections between residents and available services. For example, the implementation of Unite Us created a coordinated referral network that helps connect individuals to community resources through a warm handoff approach, while United Way of Summit and Medina Counties' 211 service serves as a centralized entry point for residents seeking assistance with housing, healthcare, food, and other essential needs. These systems help improve navigation of available resources and reduce barriers to accessing support.

Economic stability also plays a critical role in resource access and connection. Poverty can limit a person's ability to meet basic needs, plan for the future, and actively engage with their community. As a result, **poverty is interconnected with all CHIP priority areas and can influence both immediate and long-term health outcomes.** Across the selected priority areas, many indicators reflect issues related to resource access, social connection, and economic opportunity, underscoring the broad impact these factors have on the health and well-being of Summit County residents. Throughout this document, metrics and strategies associated with resource access and connection are indicated with an asterisk (*) and for poverty, a pound sign (#).

Setting CHIP 2029 Targets

Where available, CHIP 2029 targets are aligned with the corresponding Healthy People 2030 objectives. For indicators that do not have a comparable Healthy People 2030 target, a 10 percent improvement from the baseline value was used to establish the 2029 target.

For indicators where the Healthy People 2030 target has already been achieved, a new CHIP 2029 target was set using a 10 percent improvement from the current baseline to encourage continued progress and improvement. The listed indicators will be green if they perform better than the Healthy People 2030 target.

Adverse Childhood Experiences (ACEs)

ACEs are potentially traumatic events that occur before the age of 18, such as abuse, neglect, or family instability that can have lasting impacts on health and well-being. According to the 2023 Summit County Youth Risk Behavior Survey (YRBS), Adverse Childhood Experiences (ACEs) represent a critical public health priority across local communities. Two-thirds (66%) of high school students surveyed in Summit County report experiencing at least one ACE, with 15% reporting four or more high-risk traumatic events.

Localized YRBS data indicates that youth experiencing elevated ACE scores (≥4) suffer disproportionate impacts in mental health, substance use, self-harm, suicidal ideation, and sexual violence vulnerability. Significant health disparities exist among female youth, LGBTQ+ students, and youth residing outside two-parent household structures. Addressing childhood trauma early is vital to strengthening protective factors and preventing long-term chronic disease, addiction, and health inequities across Summit County.

GOALS

Goal 1: Expand community-based violence prevention strategies, focusing on safe spaces, trusted adults, and youth supports

Goal 2: Strengthen coordinated family support

Goal 3: Improve cross-system coordination for children and families

Goal 4: Reduce rates of youth substance use and abuse

Community Insights | Adverse Childhood Experiences (ACEs)

45% of survey respondents indicated that they have been emotionally affected by news or events of gun violence.

Which issues have the greatest impact on your community's health and wellness?

32.2% identified gun related injuries as having one of the greatest impacts on community health and wellness.

What would help families in your community better support children ages 0-5 being ready for kindergarten and lifelong learning?

72.9% selected access to affordable, high-quality early-learning programs.

Adverse Childhood Experiences

Core ACEs

- Emotional abuse
- Physical abuse
- Sexual abuse
- Physical neglect
- Witnessing intimate partner violence
- Household substance use
- Household mental illness
- Household incarceration

Expanded ACEs

- Racial or ethnic discrimination
- Sexual-minority discrimination
- Exposure to community violence

Positive Childhood Experiences

- Presence of a supportive adult
- Presence of peer support
- Sense of belonging at school

Note: Core ACE scores were calculated for students who answered at least five of the eight Core ACE questions.

The following dose-response chart shows the associations between Adverse Childhood Experiences (ACEs) and Positive Childhood Experiences (PCEs). While having ACEs can lead to negative health behaviors, PCEs (such as supportive adults, positive peer relationships, and a sense of belonging at school), can help protect young people from the effects of adversity. In Summit County, students with no Adverse Childhood Experiences (ACEs) and at least three PCEs had the lowest rates of negative health outcomes. Even among students who had experienced multiple ACEs, those with positive childhood experiences generally reported better outcomes than those without these protective factors. For example, 3.4% of high school students in Summit County with no ACEs and three PCEs reported depressive symptoms, compared with 27.6% of students with no ACEs but no PCEs. Among students with four or more ACEs, the rate increased to 51.3% for those with PCEs and 70.8% for those without PCEs. This pattern demonstrates that while ACEs increase the risk of poor health outcomes, PCEs can help buffer their impact.

	ACEs (-)[a]		ACEs (+)[a]	
	PCEs (+)[b]	PCEs (-)[b]	PCEs (+)[b]	PCEs (-)[b]
	%	%	%	%
Depressive symptoms	3.4	27.6	51.3	70.8
Suicide ideation	0.5	6.7	24.4	41.9
Suicide plan	0.4	5.7	16.2	36.3
Suicide attempt	-	3.1	10.2	19.3
Current tobacco use	1.1	-	19.2	23.2
Current marijuana use	0.9	1.7	29.6	32.0
Current alcohol use	5.6	-	30.5	27.4
Ever misused prescription medication	0.7	-	7.9	21.8
Ever used illicit drugs	1.3	1.3	18.6	25.5
Current gambling	12.1	7.3	22.9	20.8
Carried a weapon	2.1	4.0	13.6	22.0
Could get a loaded gun without permission	13.2	9.4	35.7	41.6
In a physical fight	3.7	31.2	34.1	32.4
Had obesity	10.9	22.8	24.0	28.4
Obtained 8 or more hours of sleep	38.7	23.7	20.8	9.7
Had 4 or more sexual partners	7.5	10.9	37.0	33.5
Used a condom during last sexual intercourse	77.2	31.4	46.3	40.9
Did not use effective birth control method	7.8	65.7	33.6	42.4
Source: 2023 Summit County Youth Risk Behavior Survey High School Report (2024)				

[a] ACEs (-) refers to having had no Adverse Childhood Experiences while ACEs (+) refers to having four or more ACEs based on the CDC's Tier 2/DVP expanded ACEs scale.
[b] PCEs (-) refers to having had no Positive Childhood Experiences while PCEs (+) refers to having all 3 PCEs based on the CDC DVP PCEs Scale.

Goal 1: Expand community-based violence prevention strategies, focusing on safe spaces, trusted adults, and youth supports

Outcome Measure	2023 CHIP	2026 CHIP	CHIP 2029 Target	Source
Engaged in physical fighting (HS) in past 12 months	22.4% (2018)	18.9% (2023)	17%	YRBS
Carried weapon in past 30 days (gun, knife, or club)	11.0% (2018)	8.7% (2023)	7.8%	YRBS
Victim of dating violence (all students) in past 12 months	12.3% (2018)	9.3% (2023)	8.4%	YRBS
Number of partners engaged in the City of Akron Youth Violence Intervention Programming	N/A	37	40	City of Akron - Violence Intervention Programming
Number of youth (aged 13-24) engaged in the City of Akron Youth Violence Intervention Programming		10,909	12,000	City of Akron - Violence Intervention Programming
Children in custody per 1,000 children	13.5	14.6	10% reduction	Public Children's Services Association of Ohio
Adolescents adjudicated for felonies (per 1,000 youths)	1.8 (2019)	1.3 (2022)	10% reduction	KidsCount
Child non-sexual assault-related ER visits		1,018	10% reduction	Epicenter
Child sexual assault-related ER visits		168	10% reduction	Epicenter

* *Green demonstrates an indicator performed better than the Healthy People 2030 target.*

Goal 1 Strategy & Key Partners

Strategy	Key Partners
Expand programming that supports positive activities for youth during high-risk times, such as after school and during school breaks (Out-of-school time programming)	City of Akron, Youth Violence Prevention Coalition, Youth Success Summit
Provide one-on-one support to returning youth to assist with re-enrollment in school, job training and employment, housing, reconnecting with family and children	Summit County DJFS, Man2Man Fatherhood Initiative, Truly Reaching You, City of Akron,
Promote and enhance gun safety, awareness and reduction programs	Various
Provide school-aged youth with caring supportive adults as an additional resiliency building resource through mentoring programs	iCare Mentoring, Man2Man Fatherhood Initiative, Koinonia, Red Oak Behavioral Health, Youth Success Summit
Provide the opportunity for peer-to-peer education, skill-building, and positive socialization for youth	Various
Expand programming in school setting aimed at increasing academic performance and preventing risky behaviors	Various

Goal 2: Strengthen coordinated family supports

Outcome Measure	2023 CHIP	2026 CHIP	CHIP 2029 Target	Source
Child poverty rate#	17.7%	18%	16.2%	U.S. Census
Overall rate of food insecurity#	11.2%	15.2%	13.7%	Feeding America, Map the Meal Gap
211 unmet needs for Food (%)*	7.7%	2.7%	2.4%	211 Summit Data Dashboard

Goal 2 Strategy & Key Partners

Strategy	Key partners
Increase access to fresh produce options and address food insecurity through community gardens and food pantries*	SCPH, Let's Grow Akron, Akron Canton Regional Foodbank
Expand existing partnerships with DJFS to connect more clients accessing resources through other channels to Medicaid, SNAP, etc. *	CoC, SCPH, DJFS

Goal 3: Improve cross-system coordination for children and families

Outcome Measure	2023 CHIP	2026 CHIP	CHIP 2029 Target	Source
Have you ever had difficulty accessing help from a nonprofit or community organization?*	N/A	20.9% indicated yes	18.8%	CHA
211 unmet needs for Childcare and Parenting (%)*	6.5%	4.4%	10% reduction	211 Summit Data Dashboard
Kindergarten Readiness Score – Students in Summit County (Demonstrating)	37.0%	45.2% (2025-2026 school year)	50%	ODE

Goal 3 Strategy & Key Partners

Strategy	Key partners
Facilitate coordination of local resources, increase awareness of community partners and programs for families*	211, UniteUs
Convene and collaborate with partner organizations to align efforts and achieve positive educational outcomes	SEI

Goal 4: Reduce rates of youth substance use and abuse

Outcome Measure	2023 CHIP	2026 CHIP	CHIP 2029 Target	Source
Youth smoking HS – (current user)	5.8%	N/A	10% Reduction	YRBS, 2023
Youth alcohol use HS – (last 30 days)	23.8%	N/A	6.3%	YRBS, 2023

Goal 4 Strategy & Key Partners

Strategies	Key Partners
Provide school-aged youth with caring supportive adults as an additional resiliency building resource through mentoring programs	iCare Mentoring, City of Akron
Provide the opportunity for peer-to-peer education, skill-building, and positive socialization for youth	City of Akron
Expand programming in school setting aimed at increasing academic performance and preventing risky behaviors	Various
Expand programming that supports positive activities for youth during high-risk times, such as after school and during school breaks (Out-of-school time programming)	City of Akron, SEI

Mental Health & Addiction

Addiction is a chronic disease of the brain which causes a person to engage in compulsive behaviors or use dangerous substances despite the harmful consequences.
The Summit County Alcohol, Drug Addiction and Mental Health Services Board (ADM) is responsible for planning, funding, monitoring, and evaluating services that provide treatment, prevention and support for people who experience alcoholism, drug addiction, and/or mental illness. When an individual is struggling to manage day-to-day life for any reason, there is a full continuum of care and services available through the public and private network of healthcare providers in Summit County. A robust recovery network of licensed peer support agencies, self-help support groups, and others with lived experience of mental health and addiction related issues are available to help people navigate the resources they may need.

Despite the rich landscape of overdose prevention, treatment and recovery agencies, social support, and community resources, Summit County is still battling an opioid epidemic. SCPH monitors overdoses daily from emergency room data, while also tracking illicit substance concentrations for known and emerging drug trends in the wastewater. While overdose deaths have declined in recent years, it is important to remain vigilant to prevent any future increases.

Summit County initiated one of the bellwether cases resulting in a multimillion-dollar settlement and those funds are managed by the county and distributed through an RFP process facilitated by the Opiate Abatement Advisory Council. $45 million has been transferred to the Akron Community Foundation, with an additional $5 million dedicated to impacting minority populations. These new funds will allow the settlement to continue to grow and for new programmatic efforts to arise as the needs of the community change.

Suicide Prevention efforts have also expanded across Summit County. SCPH was selected to participate in a national cohort on increasing suicide prevention capacity through a joint partnership with SAMHSA and the VA. Efforts also include coalition and collaboration on local, statewide, and national levels to learn best practices, develop further prevention efforts, and begin post-vention work. While overdose fatalities have decreased, suicide deaths have remained relatively consistent with some variance.

GOALS

Goal 1: Expand coordinated, countywide awareness and navigation of behavioral health resources using tools such as 211, 988, and Unite Us, with culturally responsive outreach

Goal 2: Increase workforce recruitment and retention strategies to support access to quality services to improve behavioral health outcomes

Goal 3: Ensure access to mental health and substance use treatment in the criminal justice setting

Goal 4: Reduce overdose deaths

Goal 5: Reduce suicide deaths

Community Insights | Mental Health & Addiction

In the past 6 months, have you ever delayed seeking care or experienced barriers to seeking care due to any of the following?

31.3% of survey respondents stated that a lack of available providers prevented them from seeking care.

42.4% of survey respondents cited long wait-times.

Which health conditions have the greatest impact on your community's overall health and wellness?

50% of survey respondents selected drug use.

Most people, 64.3%, are usually or always able to get the social and emotional support that they need.

Goal 1: Expand coordinated, countywide awareness and navigation of behavioral health resources using tools, such as 211 and 988, with culturally responsive outreach

Outcome Measure	2023 CHIP	2026 CHIP	CHIP 2029 Target	Source
Percent of residents reporting that they are usually or always able to get the services needed to maintain or improve their mental health*	49.1%	63.9%	70%	2025 Summit County CHA Community Survey
Suicide related ER visits	4,889 (2023)	4,878	10% reduction	SCPH
Suicide death rate per 100,000	15.6	15.4	13.9	ODH
211 calls for crisis intervention / suicide assistance per 100,000 population*	37.2	46.5	51.2*	211 Summit Data Dashboard
988 call volume*	12,995	23,969	26,338**	ADM
211 Unmet mental health needs*	5.8%	4.2%	3.8%	211Summit

** The calls to 2-1-1 increased over the specified period of time. An increase in calls does not necessarily reflect an increase in crises or suicidal ideation, but rather more likely that more individuals are seeking help and that resources are increasingly publicized and widely available.*

*** The calls to 9-8-8 increased over the specified period of time. An increase in calls does not necessarily reflect an increase in crises or suicidal ideation, but rather more likely that more individuals are seeking help and that resources are increasingly publicized and widely available*

Goal 1 Strategy & Key Partners

Strategy	Key Partners
Promote behavioral health provider enrollment into UniteUs platform for referrals and warm handoffs*	Summit County Executive's Office, ADM funded providers, ADM, private and public behavioral health providers
Promote 988 and other self-harm/suicidal prevention messaging to Summit County residents*	Suicide Prevention Coalition, Summit County Public Health, ADM Board, Portage Path,
Increase understanding in the community surrounding trauma and its effects	ADM, SCPH, Trauma Informed Care Coalition,
Improve care and outcomes for individuals at risk of suicide in health care systems	ADM

Goal 2: Increase workforce recruitment and retention strategies to support access to quality services to improve behavioral health outcomes

Outcome Measure	2023 CHIP	2026 CHIP	CHIP 2029 Target	Source
Number of first responders trained in Crisis Intervention training	1,096	1,459 (total)	1,605	ADM
Mental health provider to population ratio	260:1	250:1	225:1	HRSA

Goal 2 Strategy & Key Partners

Strategy	Key Partners
Work to implement Dual-Diagnosis Capability (DCC) principles within the network of care	ADM
Support agencies in the development and implementation of a full continuum of services	ADM
Use the Trauma Informed Care (TIC) Needs Assessment and Strategic Plan completed by the University of Akron for the implementation of best practices of TIC countywide	ADM , SCPH, Trauma Informed Care Coalition, OAAC, University of Akron
Maintain support for Medication Assisted Treatment availability in Outpatient Settings	Summa Health, CCAG
Increase availability of Medication Assisted Treatment in the Emergency Department Setting	OAAC, Summa Health, CCAG

Goal 3: Ensure access to mental health and substance use treatment in the criminal justice setting

Outcome Measure	2023 CHIP	2026 CHIP	CHIP 2029 Target	Source
Number of naloxone kits provided to incarcerated individuals upon release*	-	27	Expanded partners/access	SCPH, Cuyahoga Falls Police Department
Number of referrals made for additional services with UniteUs for individuals being released from incarceration*	-	205 (April-Sept 2026)	-	SCPH, County of Summit

Goal 3 Strategy & Key Partners

Strategy	Key Partners
Provide linkage to community-based treatment, recovery supports, supportive housing and other related needs upon release from incarceration*	ADM, Summit Psychological Associates, Oriana House
Increase the availability of Medication Assisted Treatment and naloxone in the jail settings and upon release from incarceration*	ADM, OAAC, Summit Psychological Associates, SCPH
Increase awareness and utilization of the low barrier same day MAT access in the Summit Safe program for clients*	SCPH
Increase the number of behavioral health service providers who are trained in Trauma Informed Care practices	ADM , SCPH, TICC
Increase TIC practices across sectors to address intersectionality and culturally-relevant trauma experiences - collective trauma, generational trauma, systemic oppression/marginalization, complex and/or relational trauma, etc.	ADM, SCPH, TICC

Goal 4: Reduce overdose deaths

Outcome Measure	2023 CHIP	2026 CHIP	CHIP 2029 Target	Source
Dawn kits distributed*	3,156	6,422	7,500	ADM, SCPH, 2022
Overdose rate (per 100,000)	39.3	18.6	15.8	ADM

Goal 4 Strategy & Key Partners

Strategy	Key Partners
Maintain an Overdose Fatality Review Board to identify and address community needs	SCPH, ADM, Law Enforcement, Medical Examiner, Community Stakeholders
Work to collaborate and enhance the use of Quick Response Teams in the community	ADM, SCPH, Akron Fire
Continue to provide free community-based access to naloxone*	SCPH, ADM, Project DAWN, Community Stakeholders
Provide access to and promote the use of substance testing strips (e.g. fentanyl test strips) in the community and routine fentanyl testing in clinical settings*	SCPH, OAAC
Promote and expand Bloodborne Pathogen Prevention and Overdose Prevention programming*	SCPH, OAAC

Goal 5: **Reduce suicide deaths**

Outcome Measure	2020 CHIP	2023 CHIP	CHIP 2029 Target	Source
Suicide death rate per 100,000	15.6	15.4	13.9	ODH

Goal 5 Strategy & Key Partners

Strategy	Key Partners
Improve care and outcomes for individuals at risk of suicide in health care systems	ADM
Facilitate coordination of local resources, increase awareness of suicide as a public health problem, increase awareness of suicide hotlines (988), and educate the community to recognize suicide risk factors through the Suicide Prevention Coalition (SPC)*	ADM, SPC
Increase understanding in the community surrounding trauma and its effects	ADM, TICC, SCPH
Work to further the youth suicide prevention strategic plan goals	ADM, Akron Children's Hospital
Identify and target at-risk youth populations using culturally responsive outreach methods	Akron Children's Hospital, Suicide Prevention Coalition

Housing

Housing is a foundational Social Determinant of Health. Where people live directly impacts their physical health, emotional well-being, and long-term economic mobility. In Summit County, housing concerns center on three interconnected challenges: affordability, structural safety, and equity.

Approximately 47% of renter households and nearly 20% of homeowners with a mortgage in Summit County pay 30% or more of their gross income toward housing costs. Severe cost burden can force families to make trade-offs between rent and basic needs such as nutritious food, necessary medical care, and prescription medications. Disparities in home loan and improvement loan denial rates among low-income and minority applicants exacerbate neighborhood instability and wealth gaps in vulnerable census tracts.

Beyond affordability, environmental hazards in older housing stock present significant risk. Hot spots for housing constructed prior to 1950 strongly overlap with geographic clusters of elevated blood-lead levels in children under age 6 and elevated pediatric asthma rates—particularly within urban centers such as Akron and designated Ohio Health Improvement Zones.

GOALS

Goal 1: Expand housing stability supports

Goal 2: Strengthen housing system coordination

Goal 3: Support policies and programming to expand housing access and quality

Community Insights | Housing

When you think about your overall well-being, what is the biggest unmet need in your life or household right now?

22.1% of survey respondents indicated affordable housing or rent subsidies.

1 in 3 survey respondents indicated that they have access to affordable housing in their community.

17.6% of survey indicated that in the past 6 months, they've worried about losing their housing.

Goal 1: Expand housing stability supports

Outcome Measure	2023 CHIP	2026 CHIP	CHIP 2029 Target	Source
In the past 6 months, have you had trouble paying your utility bills? #	---	25.4% (yes or sometimes)	22%	CHA
Housing burden – owners (30% or more of income going toward housing costs) #	18.0%	17.1%	15%	Census
Housing burden – renters (30% or more of income going toward housing costs) #	46.8%	46.6%	41%	Census
Homelessness counts#	315	690	631	Summit COC
Right to Counsel filings/cases (Akron)	N/A	58 (all-time completed cases)	10% increase	Legal Aid

Goal 1 Strategy & Key Partners

Strategy	Key Partners
Refer clients eligible for Right to Counsel cases to Community Legal Aid to reduce evictions	Community Legal Aid
Promote findings from the Housing Research Collaborative to strengthen housing policy and systems in Summit County#	Summit County Housing Research Collaborative and partners

Goal 2: Strengthen housing system coordination

Outcome Measure	2023 CHIP	2026 CHIP	CHIP 2029 Target	Source
Median length of time homeless#	N/A	31.0 days	28	Summit COC
Average age of housing in low-income census tracts (years)	84.2	88.2	N/A	SC Fiscal Office
Average age of housing in middle- and upper-income census tracts (years)	63	61.1	N/A	SC Fiscal Office
211 unmet needs for housing (%)*	27.6%	33.6%	10% reduction	211 Summit Data Dashboard

Goal 2 Strategy & Key Partners

Strategy	Key Partners
Promote housing stability programming for at risk individuals through referrals, warm hand offs, and programmatic assistance*#	Continuum of Care , AMHA, United Way
Utilize the Roadmap for the Unhoused to assist individuals in being connected to resources across systems to intervene at multiple points*	CSS, CoC, AMHA, VA, APD,

Goal 3: Support policies and programming to expand housing access and quality

Outcome Measure	2023 CHIP	2026 CHIP	CHIP 2029 Target	Source
Housing affordability index – Housing expenses as a percentage of annual median income#	N/A	23%	N/A	Center for Neighborhood Technology
Units with severe housing problems	14.0%	12.9%	10% reduction	HUD
Elevated blood lead levels in children under 6 years	2.1%	4.8%	10% reduction	ODH Data Warehouse

Goal 3 Strategy & Key Partners

Strategy	Key Partners
Provide hoarding education trainings focused on evidence-based treatment quarterly*	SCPH
Promote housing access programming such as the City of Akron's Mortgage Assistance Program to provide additional support to qualifying individuals to help increase homeownership*	City of Akron, Family Promise

Aging Population

Ohio’s aging population is projected to peak in 2030. This increasing demographic has the potential to put a strain on resources in the community if not planned for appropriately. Key factors influencing older adults' health and well-being include chronic illnesses like arthritis, diabetes, and dementia, as well as their living environments and resource access

Living a healthy lifestyle is essential to healthy aging.

Chronic pain is one of the most prevalent chronic conditions especially in older adults. Arthritis is a major cause of chronic persistent pain, reduces functionality, limits mobility, and often interferes with activities of daily living. When older adults lose independence in these activities, they may become less able to live alone, leading to dependence on caregivers or a transition to long-term care.

In Summit County there are 109,166 residents aged 65 and older. Of these individuals, an estimated 10.7 percent are currently living with Alzheimer’s Disease and related dementias (ADRD). ADRD is one of the top 5 causes of death for Summit County residents over age 75, claiming the lives of nearly 5,000 seniors since 2007.Goals and strategies to mitigate risk factors associated with aging can help reduce the potential strain on the healthcare system and other community resources by ensuring that older adults have what they need to age successfully at home.

GOALS

Goal 1: Improve service awareness and coordination
Goal 2: Reduce unintentional injuries, including falls, among seniors/older adults

Community Insights | Aging Population

1 in 3 survey respondents stated that they have access to services for seniors in their communities.

What supports are most needed for older adults in your community?

64.1%	In-home care
57.5%	Affordable housing
51.6%	Social activities
46.4%	Transportation services
39.9%	Technology training
36.2%	Access to healthcare

Goal 1: Improve service awareness and coordination

Outcome Measure	2023 CHIP	2026 CHIP	CHIP 2029 Target	Source
Preventable hospital stays (Number of hospital stays for ambulatory-care sensitive conditions per 1,000 Medicare enrollees)	40	30	27	2019 CHR
Percent of older adults 65+ below the poverty level[#]	7.8%	9.2%	8.3%	U.S. Census

Goal 2: Reduce unintentional injuries, including falls, among seniors/older adults

Outcome Measure	2023 CHIP	2026 CHIP	CHIP 2029 Target	Source
Falls among senior citizens leading to death	51.4 per 100,000	65.1 per 100,000	63.4 per 100,000	ODH
ER visit rate resulting from falls among senior citizens	82.4 per 1,000	79.1 per 1,000	54.5 per 1,000	Epicenter

Goal 1 & 2 Strategy & Key Partners

Strategy	Key Partners
Age Friendly Akron/Age Friendly Summit County initiatives to ensure that the built environment (sidewalks, parks, streets) is safe for all ages and abilities	Age Friendly Akron/Summit County
Train healthcare provider agencies and/or community-based organizations to screen and refer older adults to evidence-based falls prevention programming	SCPH
Provide falls prevention outreach and education at senior/older adult community education events*	SCPH, Direction Home, Falls Prevention Committee
Strengthen supports for aging in place (programming such as education for older adults, caregivers, etc.)*	SCPH, Direction Home

CHA-related Topics

While the previous topics were chosen by SCCHI as the priority focus areas for this CHIP cycle, it is important to note that there are additional health topics that were included in the Community Health Assessment (CHA). SCPH will continue to monitor health metrics and outcomes identified in the CHA and will evaluate additional priority areas as they arise, reinforcing the concept that the CHIP and CHA are living documents to be updated with shifts in circumstances.

Chronic Disease

SCPH monitors the prevalence of multiple chronic conditions of Summit County residents. Other metrics include smoking/tobacco use, physical activity/obesity, access to healthy food, and asthma rates are evaluated to provide an overall snapshot of the health of our community.

Maternal and Child Health

The leading causes of infant mortality in Summit County in the last ten years were prematurity, sleep-related death, congenital defects, and other causes (which include a variety of accidental, medical and undetermined causes). This rate prompted a request to systematically address these rates and the significant disparity for African American families and their infants. Observations include preterm birth rates, preterm death rates, and prenatal care access.

Education Access

Key education indicators include kindergarten readiness, 3rd grade reading level, 8th grade math level, and those taking the ACT who score above a 21. While not a complete picture of the educational landscape, these points provide insight into the future educational success of students in Summit County.

Health Equity

SCPH is committed to reducing health disparities and improving health which requires focusing on the root causes and drivers of poor health in our community such as poverty, education, employment, housing, access to health- care, clean air and water, and access to healthy foods.

Neighborhood and Built Environment

Factors impacting the quality of housing, access to transportation, air and water quality and neighborhood crime and violence are key indicators in the environmental aspects of health quality in Summit County.

Next Steps

Monitoring CHIP Priorities

CHIP priorities will be monitored by the Summit Coalition for Community Health Improvement (SCCHI) on an ongoing quarterly basis. SCPH utilizes a variety of tools to monitor CHIP goals, strategies, and outcomes including a variety of data dashboards, maps, and data briefs. As health outcomes are routinely monitored, priorities or responsible parties may shift and require adjustments to meet those needs.

Evaluation of CHIP Strategies

CHIP strategies will be evaluated based on outcome and process measures identified by lead agencies and/or coalitions. SCCHI will continue to work collaboratively with lead partners to use evaluation measures to identify and circumvent challenges, address any forces of change, and adapt to political or funding changes

Appendix 1 | CHIP Partners

Akron Area YMCA

Akron Canton Regional Foodbank

Akron Children's Hospital

Akron Metropolitan Housing Authority

Akron Summit County Public Library

American Cancer Society

Asian Services in Action, Inc.

AxessPointe Community Health Center

Child Guidance & Family Solutions

City of Akron

Cleveland Clinic Akron General

Community Action Akron Summit

Community Legal Aid

County of Summit

County of Summit Alcohol, Drug Addiction & Mental Health Services Board

Direction Home Akron Canton Area Agency on Aging and Disabilities

Greater Akron Chamber
International Institute of Akron

Kent State University College of Public Health

METRO Regional Transit Authority

Northeast Ohio Medical University

Ohio Guidestone

Project Learn of Summit County

Summa Health System

Summit County Developmental Disabilities Board

Summit County Children's Services

Summit Education Initiative

Summit Metroparks

The Blick Center

United Way of Summit County

Appendix 2 | Summit County Coalitions

This is not a fully comprehensive list of coalitions that exist in Summit County. However, these diverse coalitions bring together partners from multiple sectors across Summit County to improve the quality of life for residents.

Akron Commission on Aging

Eviction Task Force

First Things First

Full Term First Birthday

Hoarding Task Force

Income Education Workforce Development

Let's Move Summit County

Maternal Depression Network

Minority Health Advisory Committee

Ohio Equity Institute/Better Birth Outcomes

Opiate Abatement Advisory Council

Refugee Task Force

Reimagining Civic Commons

Safe Kids Summit County

Safe Routes to School

Social Services Advisory Board

Summit Food Coalition

Summit County Trauma Informed Care Coalition

Suicide Prevention Coalition

Welcoming Akron Summit County

Youth Violence Intervention and Prevention