

Thank you to our Community Health Needs Assessment Steering Committee,
whose members provided invaluable guidance on identifying the unmet
health needs of Franklin County residents.

- ADAMH Board
- B.R.E.A.D. Organization
- Central Ohio Hospital Council
- Center for Public Health Practice at The Ohio State University
- City of Columbus
- Columbus City Schools
- Columbus Public Health
- Community Shelter Board
- Directions for Youth & Families
- Educational Service Center
- Equitas Health
- Ethiopian Tewahedo Social Services
- Franklin County Coroner
- Franklin County Office of Aging
- Franklin County Public Health
- Future Ready Five
- Health Impact Ohio
- Human Services Chamber
- Mid-Ohio Food Collective
- Mid-Ohio Regional Planning Commission
- Mount Carmel Health System
- Nationwide Children’s Hospital
- Ohio Association of Community Health Centers
- Ohio Department of Health Disability and Health Program
- OhioHealth
- OSU Extension – The Ohio State University
- The Ohio State University Wexner Medical Center
- United Way of Central Ohio
- Workforce Development Board of Central Ohio (Aspyr)

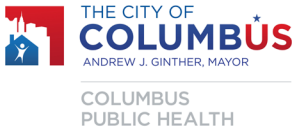
To view the full Franklin County HealthMap2025, visit
[centralohiohospitals.org/ franklin-county-healthmap](https://centralohiohospitals.org/franklin-county-healthmap) or scan the
following QR Code using your smartphone’s camera:



Franklin County HealthMap2025: An Overview

Navigating Our Way to a Healthier Community Together

Franklin County HealthMap2025 is a continuing, collaborative effort of the Central Ohio Hospital Council, Columbus Public Health, and Franklin County Public Health to help health departments, hospitals, government and social service agencies, and other community organizations identify and address the unmet health needs of Franklin County residents. It is our hope that HealthMap2025 serves as a guide to target and prioritize limited resources, a vehicle for strengthening community relationships, and a source of information that contributes to keeping people healthy.



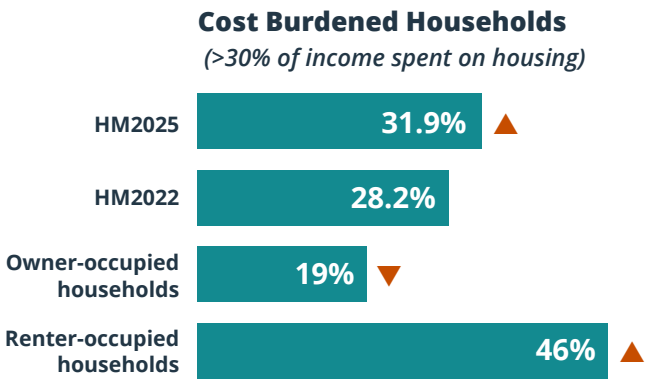
Guided by 30 community organizations serving as our Needs Assessment Steering Committee, the following five health need areas have been identified as those most impactful on the health and wellbeing of Franklin County residents.

■ **Social Drivers of Health** *(with a focus on housing)*

Non-medical social factors, such as economic stability, education and healthcare access, transportation and neighborhood safety, are key drivers of good health outcomes. Poor housing quality and inadequate housing conditions can contribute to negative health outcomes, including chronic disease and injury. The presence of lead, mold, or asbestos, poor air quality and overcrowding can lead to irreversible health effects. The percentage of cost-burdened households – those that spend 30% or more of their monthly household income on housing costs – has increased. Nearly half of renter-occupied households in Franklin County are cost-burdened.

Housing Insecurity indicators:

Cost burdened households: page 36
Renter-occupied housing units: page 36
Unhoused community members: page 37
Eviction filing rate: page 37

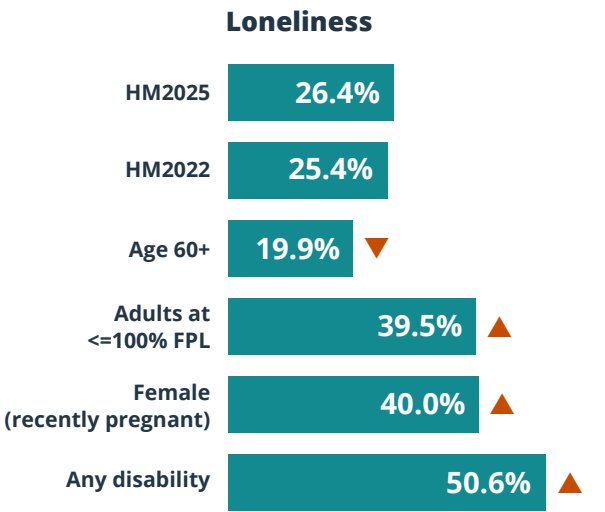


■ **Mental Health**

23% of U.S. adults experienced mental illness in 2021 with 5.5% of adults experiencing a serious mental illness. Social isolation and loneliness can increase a person’s risk for heart disease, self-harm, dementia and eventually may lead to an earlier death. Hospitalizations due to self-harm and deaths from suicide have both increased in Franklin County since the last HealthMap.

Mental Health indicators:

Depression prevalence: page 136
Loneliness prevalence: page 136
Suicide death rate: page 135
Hospitalizations due to self-harm: page 134



■ **Adverse Childhood Experiences (ACEs)**

Adverse childhood experiences, or ACEs, are traumatic events that occur during childhood, such as violence, abuse, or neglect, that can have lasting effects on health and wellbeing in childhood, as well as impact one’s education and job potential into adulthood. These experiences can increase the risks of injury and maternal and child health problems, and can impact a range of chronic diseases and leading causes of death, such as cancer, diabetes, heart disease and suicide.

Adverse Childhood Experiences indicators

Adverse Childhood Experiences prevalence: page 52
Depression prevalence: page 136

ACEs Prevalence in Franklin County Adults

Experienced emotional abuse	40.8%
Parents separated or divorced	35.1%
Alcoholic or someone who used illegal drugs in household	30.7%
Experienced physical abuse	29.8%

■ **Maternal and Infant Health**

126 babies died in Franklin County before their first birthday in 2024, with 20 due to sleep-related conditions. Nationally, 800 women die due to pregnancy-related complications and more than 50,000 pregnant women are affected by severe maternal morbidity. The health of the mother – before, during, and after pregnancy – has a direct impact on the health of the child. Predictors of healthy child development begin before pregnancy, with the health of the mother, and continue after the birth, with the mother-child relationship.

Maternal and Infant Health indicators

Maternal health (multiple indicators): pages 96-112
Infant mortality rate: page 108

Infant Mortality Rate
Rate per 1,000 babies born

HM2025	7.4
HM2022	6.9
White (non-Hispanic)	3.7
Black (non-Hispanic)	12.6
Hispanic	7.8

■ **Violence and Injury-related Deaths**

Americans aged 1 to 44 die from injuries and violence – such as motor vehicle crashes, suicide, overdoses, or homicides – more than any other cause. In Franklin County, the leading cause of death for adults age 18 to 59 is accidents. Intentional self-harm and assaults were the 4th and 5th leading causes of death for this age group, respectively. Drug overdose remains the leading cause of injury-related death among adults in the United States.

Violence and Injury-related Death indicators

Drug overdose death rate: page 164
Alcohol-attributable death rate: page 138
Traumatic injury prevalence: pages 151-157
Violent crime: page 162

Alcohol Attributable Deaths
Rate per 100,000

HM2025	14.7
HM2022	12.9
Age 60+	38.1
Male	21.4
Female	8.2