



# 2025-2028 Jefferson County Community Health Improvement Plan

**Prepared for:** Jefferson County General Health District and  
Trinity Health System, a member of CommonSpirit Health



**Jefferson County  
General Health District**  
— Prevent. Promote. Protect. —



**Trinity Health System™**  
A member of CommonSpirit

Approved: September 22, 2025

*Prepared by:*

  
Center for Marketing & Opinion Research, LLC

## Table of Contents

	Page
EXECUTIVE SUMMARY	3
COMMUNITY HEALTH IMPROVEMENT PLAN (CHIP), AT A GLANCE	4
OUR HEALTH DISTRICT AND COMMUNITY SERVED	5
COMMUNITY ASSESSMENT AND SIGNIFICANT NEEDS	6
OUR CHIP PROCESS	8
<b>PRIORITY 1: MENTAL HEALTH AND SUBSTANCE ABUSE</b>	<b>16</b>
<b>Goal:</b> Reduce the burden of poor mental health and substance use outcomes	18
<b>PRIORITY 2: HEALTH LIVING</b>	<b>19</b>
<b>Goal:</b> Improve the health behaviors that contribute to the overall health and well-being of Jefferson County residents	20
<b>PRIORITY 3: ACCESS TO CARE</b>	<b>21</b>
<b>Goal:</b> Improve access to health services	23



## Executive Summary

The Jefferson County 2025-2028 Community Health Improvement Plan (CHIP) is the result of a collaborative planning process led by the Jefferson County General Health District (JCGHD) and Trinity Health System (THS) that involved nearly 500 representatives from local organizations and community members dedicated to improving the health of Jefferson County residents. The significant community health needs the health district is helping to address and that form the basis of this document were identified in the health district's most recent Community Health Assessment (CHA). Needs being addressed by strategies and programs are:



Access to Health Care



Healthy Living



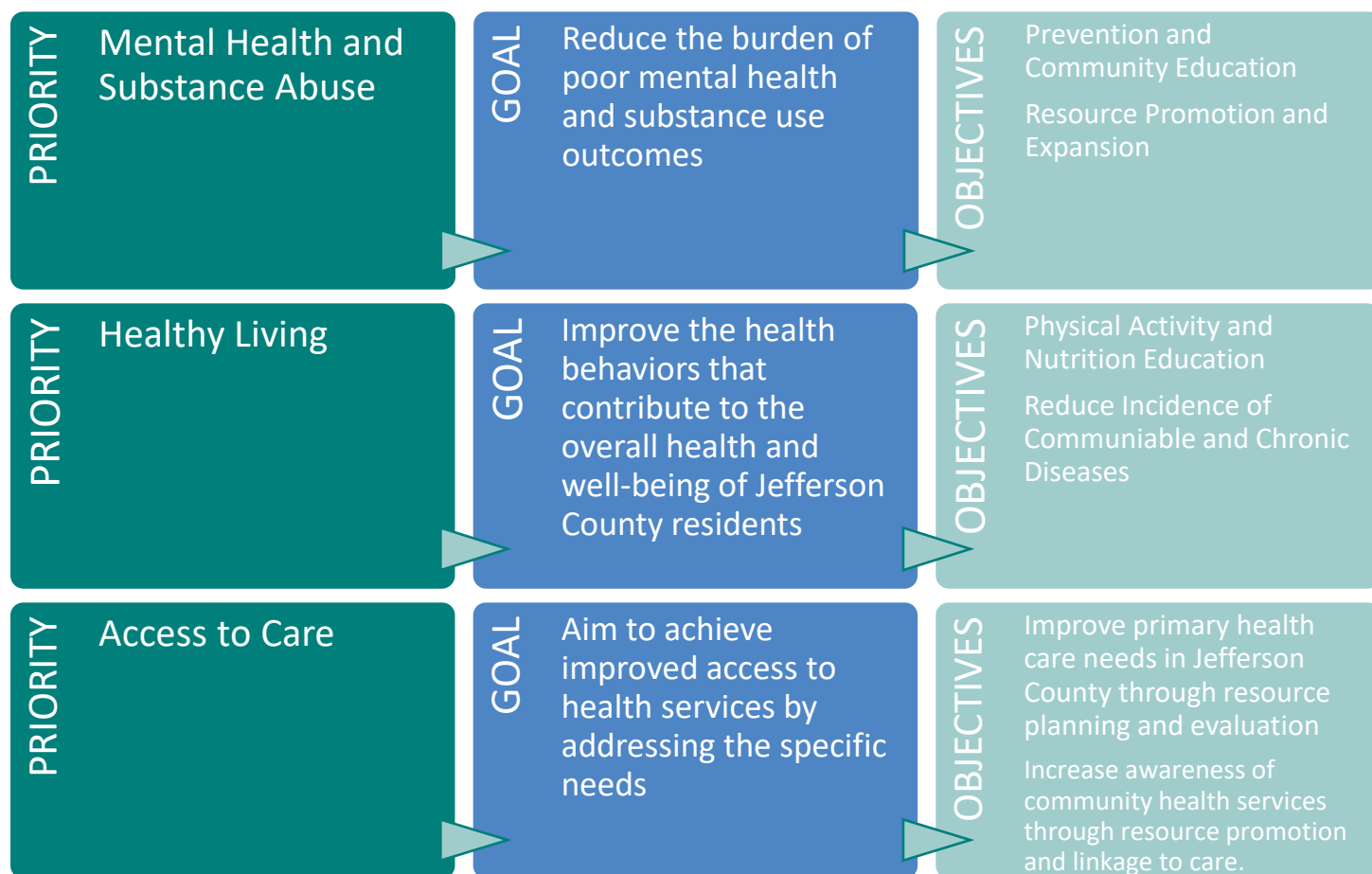
Mental Health and Substance Use

The Jefferson County General Health District serves approximately 65,249 residents, according to the 2020 Census Bureau Data. The City of Steubenville, which is the county seat and where the health department is located, has the highest concentration of residents with a population of 18,055 while the city of Toronto has a population of 5,302 residents. In addition to the two cities, other populated areas include 17 villages ranging from 145 residents in the Village of Bloomingdale to 3,609 residents in Wintersville and 14 townships ranging from 384 residents in Brush Creek Township to 10,173 residents in Island Creek Township. The racial make-up of the county was 91% white, 5.4% Black or African American, 0.3% Asian, 0.3% American Indian, 0.3% other races, and 2.7% from two or more races. The median income for a household in the county was \$53,124 and 18.8% of the population was below the poverty line.

These issues were selected based on the 2025 Community Health Assessment (CHA) that was conducted in early 2025. The assessment and CHIP process is an ongoing cycle that includes building partnerships; coordinating a consortium; assessing data, community needs, and capacity; and conducting planning, prioritization, interventions, implementation, and evaluation. This report begins the 3-year cycle. Primary data was collected through a survey of a demographically representative sample of Jefferson County residents as well as an online survey of community partner agencies with knowledge of and experience in the health related needs of county residents. In addition to the primary data, a number of secondary data sources were also utilized in conjunction with the survey data to identify the most pressing health related needs currently facing the residents of Jefferson County.

Once the Community Health Assessment was completed, more than 30 representatives from community organizations attended and participated in Call-to-Action meetings on May 9 and May 16, 2025, in which data from the CHA was shared and workshop attendees selected the priority areas to include in the CHIP. The priority selection process involved discussions and voting based on the magnitude of the problem, the community's capacity to address the problem, and the availability of effective interventions. In addition, social factors that contribute to the problem and population groups most at risk were taken into consideration in developing health improvement strategies and objectives. Finally, as with the previous CHIP, this CHIP aligns with Ohio's 2023 State Health Improvement Plan (SHIP), utilizing strategies and objectives recommended by the State. What follows is the result of the community's deliberation and planning to address health concerns in a strategic way that aligns resources with needs to make a measurable impact on the health of Jefferson County residents.

## Jefferson County 2025-2028 Community Health Improvement Plan (CHIP), *At a Glance*





## Our Health District and the Community Served

### ABOUT JEFFERSON COUNTY GENERAL HEALTH DISTRICT

The first recorded Jefferson County General Health District Board meeting was in 1941. While there have been many changes in public health since then, the goal remains the same—to promote health, protect population health, and prevent disease and injury for all the residents in Jefferson County. Jefferson County is located in east central Ohio along the west bank of the Ohio River. Its 408 square mile area is bordered on the north by Columbiana County, on the south by Belmont County, on the west by Carroll and Harrison Counties, and on the east by the State of West Virginia.

The Jefferson County General Health District serves approximately 65,249 residents, according to the 2020 Census Bureau Data. The City of Steubenville, which is the county seat and where the health department is located, has the highest concentration of residents with a population of 18,055 while the city of Toronto has a population of 5,302 residents. In addition to the two cities, other populated areas include 17 villages ranging from 145 residents in the Village of Bloomingdale to 3,609 residents in Wintersville and 14 townships ranging from 384 residents in Brush Creek Township to 10,173 residents in Island Creek Township. The racial make-up of the county was 91% white, 5.4% Black or African American, 0.3% Asian, 0.3% American Indian, 0.3% other races, and 2.7% from two or more races. The median income for a household in the county was \$53,124 and 18.8% of the population was below the poverty line.

Jefferson County is mostly an urban county (61%) with 39% of the county being rural. The Appalachian Regional Commission has designated Jefferson County as part of Ohio's Appalachian region. Limited access to healthcare services is a critical issue facing Appalachian communities. The rural areas in Jefferson County lack sufficient medical facilities and providers, making it difficult for residents to receive the care they need. This lack of access can lead to delays in diagnosis and treatment, as well as poorer health outcomes overall. Our approach in addressing the well-being of Jefferson County residents is through a community focused approach, the examination of health and disease trends, healthcare coordination, inspections, education, and by helping communities to cope with disease prevention and emergencies.

A five-member Board of Health governs the Jefferson County General Health District. Board members are appointed by the District Advisory Council, which is composed of a representative from each of the 14 townships, 17 villages, 2 cities, and one county commissioner. The Board of Health contracts with a Health Commissioner to carry out the day to day operations and a Medical Director who oversees medical related services. The staff is composed of 17 full and 2 part-time employees. The Jefferson County General Health District currently has contracts with the City of Steubenville and the City of Toronto to provide public health services to their residents.

The Jefferson County General Health District consists of four divisions which include Environmental, Vital Statistics, Nursing, and the Women, Infants and Children (WIC) Division.



## Community Assessment and Significant Needs

The health issues that form the basis of the health district's community health implementation plan and programs were identified in the most recent CHA report, which was adopted in July 2025. The CHA contains several key elements, including:

- ➔ Description of the assessed community served by the health district;
- ➔ Description of assessment processes and methods;
- ➔ Presentation of data, information and findings, including significant community health needs;
- ➔ Community resources potentially available to help address identified needs

Additional detail about the needs assessment process and findings can be found in the CHA report, which is publicly available on the health district's website or upon request from the health district.

### SIGNIFICANT HEALTH NEEDS

The CHA identified the significant needs in the table below, which also indicates which needs the health district intends to address. Identified needs may include specific health conditions, behaviors and health care services, and also health-related social needs that have an impact on health and well-being.

Significant Health Need	Description	Intend to Address
Access to Health Care	A portion of county residents do not have access to affordable basic health care services including primary care doctors. Access to medical specialists and dentists were also issues.	*
Built Environment	The way communities are created can have positive or negative effects on the physical and mental health of residents. The build environment must allow for engaging in healthy behaviors. The data collected identified areas of concern in transportation access, locations for physical activity, access to fresh food, and crime and safety.	
Healthy Living	Living a healthy lifestyle means a lower risk of developing many illnesses, like heart disease and diabetes, which are prevalent in the county. A healthy lifestyle can also lead to better mental health as well.	*
Housing and Homelessness	Housing significantly impacts health, with unstable or poor quality housing often linked to health issues like poor mental health and increased risk of chronic diseases and injuries. Housing instability can also lead to food insecurity, substance abuse, and increased risk of violence.	
Mental Health	The need for mental health treatment and intervention continues to increase. High diagnosis rates for anxiety and depression as well as the number of residents feeling stressed or lonely/isolated substantiate this issue.	<i>*Combined with Substance Abuse</i>
Substance Abuse	Community residents and partners are extremely concerned with addiction and overdoses and the toll that it has taken on the community. Excessive alcohol and substance use can lead to an increased risk of other health problems such as injuries, violence, liver disease, and cancer.	<i>*Combined with Mental Health</i>



### **SIGNIFICANT NEEDS THE HEALTH DEPARTMENT DOES NOT INTEND TO ADDRESS**

Jefferson County General Health District is located in Ohio and follows the Ohio State Health Improvement Plan (SHIP). The SHIP is a comprehensive approach to improving Ohio's greatest health challenges by identifying cross-cutting factors that impact multiple outcomes. The SHIP drives more efficient and effective allocation of resources toward measurable improvements on a manageable number of health outcomes by focusing on three priority topic areas: mental health and addiction, chronic disease, and maternal and infant health. The three priority topic areas that are related to health factors (or social determinants of health) are community conditions, health behaviors, and access to care. All Ohio health districts are required to align their implementation strategies to the SHIP.

Built environment and housing and homelessness are not a core focus areas for this Community Health Improvement Plan.

Jefferson County General Health District will also continue to seek new partnership initiatives to address priority health issues when there are opportunities to make a meaningful impact on health and quality of life in partnership with others.



## Our CHIP Process

### WHAT IS A COMMUNITY HEALTH IMPROVEMENT PLAN?

The U.S. Centers for Disease Control and Prevention defines a Community Health Improvement Plan (**CHIP**) as “a long-term, systematic effort to address public health problems based on the results of community health assessment activities and the community health improvement process.” In Ohio, local health departments (LHDs) and non-profit or government-owned hospitals are required to work together to conduct an assessment of the health needs of the communities they serve (otherwise known as a Community Health Assessment (CHA), as well as prepare a plan (**CHIP**) for addressing those needs in order to improve the health of the population. In addition, Ohio requires that local health departments and hospitals submit their updated CHA and **CHIP** every three years.

Although local health departments and hospitals are designated by the State as the lead organizations for assessing and addressing community health needs, this process can only be successfully accomplished through a collaborative effort that engages other community organizations whose work impacts the health of residents. A **CHIP** serves as a planning tool to guide these organizations as they implement programs and deliver services in their community in such a way that the health of residents improves over time. To ensure that these efforts are effective, the collaborating partners select strategies based on evidence and/or prior experience that has demonstrated their effectiveness in addressing the priority health problems.

The main components of a **CHIP** are:

1. **Health Improvement Priorities:** Description of specific health problems that must be addressed if the overall health of community residents is to be improved. The Community Health Assessment (CHA) is the primary data source used to develop health improvement priorities.
2. **Outcome Objectives:** Health improvement targets for each of the health priorities that can be measured over time.
3. **Strategies:** Programs and activities that the collaborating organizations will implement to reduce and prevent the priority health problems.
4. **Monitoring Mechanism:** Data collection process to measure progress toward and report to the community.

### STATE HEALTH IMPROVEMENT PLAN (SHIP)

The Ohio Department of Health (ODH) led a similar health improvement planning process that resulted in the State Health Improvement Plan (SHIP) of 2020-2022. The SHIP includes health improvement priorities, objectives, strategies, and guiding principles that local communities are expected to include in their **CHIP** where possible. Specifically, local communities are required to include at least two (2) SHIP priorities, related objectives, and strategies in their local **CHIP**. In this way, each community in Ohio will contribute to reducing and preventing the priority health problems across the State.

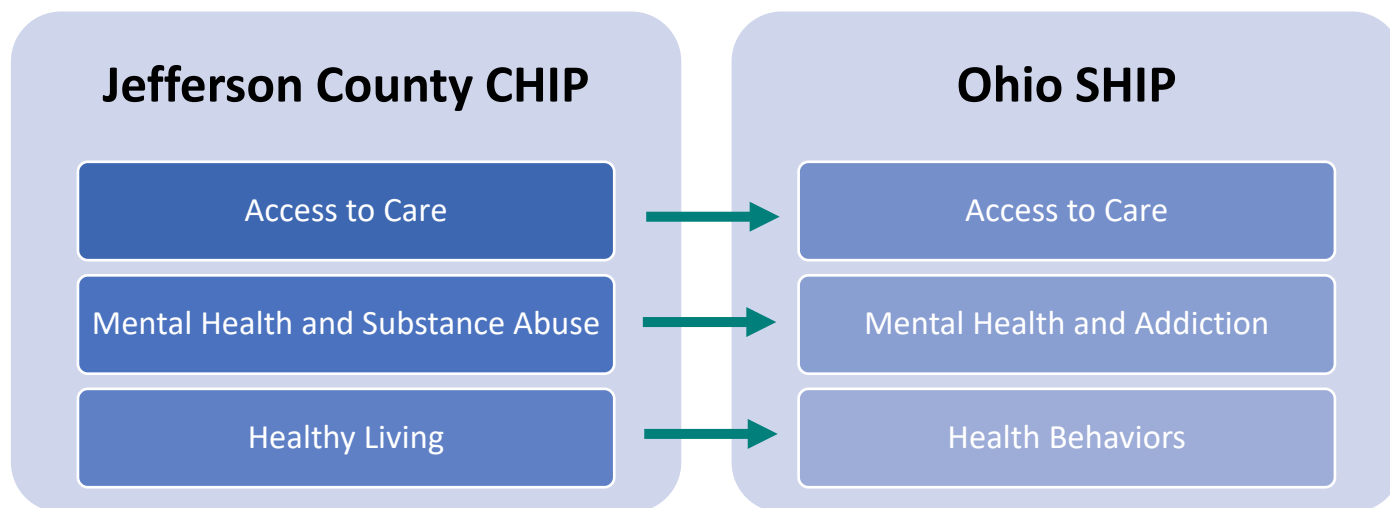
Two guiding principles that are included in the SHIP are **Health Equity** and **Social Determinants of Health**. According to the 2020-2022 SHIP, “**Health equity** is achieved when all people in a community have access to affordable, inclusive and quality infrastructure and services that, despite historical and contemporary injustices, allows them to reach their full health potential.” There are two components to health equity: (1) disparities and (2) inequities.





1. **Health disparities** refers to differences in health outcomes that may exist within a community when comparing one population group with another such as minorities compared to the general population.
2. **Health inequities** refers to differences in access to health resources between one group and another such as access to health care or healthy food.

Local communities are required to address health equity in their **CHIP** by including strategies to reduce disparities and health inequities.



### Connections with 2023 State Health Assessment

#### Health Care Access

- An estimated 2.4 million Ohioans live in Primary Care Health Professional Shortage Areas. Jefferson County is one of these shortage areas.

#### Opportunity for Physical Activity

- The environment in which an individual lives affects the opportunities for physical activity that are available and exerts influence on respiratory health and other health outcomes. Residents of rural areas indicated that their communities are often not conducive to walking, biking, or other outdoor activity. Lack of sidewalks can make it unsafe to engage in inexpensive physical activity.

#### Healthy Nutrition

- The data indicates that progress is being made among youth in terms of vegetable intake, but those who serve low-income Ohioans warned that there are serious obstacles to healthy nutrition among the individuals they serve. For some, simply getting access to healthy foods is a challenge. Cost remains an issue as well. Providers observed that stress and differential access to quality foods led many Ohioans to opt for processed convenience foods with lower nutritional value compared to fresh, whole foods that may take time to prepare.

#### Obesity

- Obesity, which is related to a variety of health circumstances such as chronic disease, mental health, and pregnancy outcomes, has been increasing in Ohio.

**Mental Health**

- Mental health emerged as a concern across all forms of data collection for the SHA, with 96.3% of health departments and hospitals identifying mental-health-related issues as top needs in their most recent needs assessments. SHA contributors attributed the increase in mental health concerns to a variety of factors, including the social isolation experienced by many during COVID, the stress of the COVID pandemic and its economic impact, and the widespread and frequent use of social media.

**Youth Substance Use**

- Data for SHIP indicators suggests that use of alcohol and marijuana by high school students is decreasing in Ohio. Unintentional overdose deaths among youth 15–24 are down from 2017 rates, as well. Within select populations, however, rates of substance use are not decreasing. A higher percentage of high school students who identify as LGBTQ+ are using marijuana, and the same is true for high school students who are Hispanic.

**Infectious Disease**

SHA contributors identified infectious disease as a priority topic due to several factors, including:

- Decreasing immunization rates among school-aged children.
- Increasing use of injection drugs, which has contributed to an increase in infectious diseases such as Hepatitis C.
- RSV outbreaks that stressed pediatric intensive care units in the winter of 2022-2023.
- Increasing rate of syphilis among Black males and members of the LGBTQ+ community.
- Increasing numbers of cases of congenital syphilis in newborns.

Source: <https://dam.assets.ohio.gov/image/upload/odh.ohio.gov/SHA/2023/2023-state-health-assessment.pdf>



**Social Determinants of Health** (SDOH) refers to factors in a community that contribute to and influence the health of its residents. Examples of SDOH include access to health care services, poverty, housing, and education. It is a well-known fact that these and other social conditions affect the health of individuals and families in either positive or negative ways. For example, those who have higher incomes and educational levels are more likely to be healthier, while those with lower incomes and educational levels are more likely to have poorer health. Local communities must take these factors into consideration when developing health improvement strategies so that those with the greatest health needs receive the services and assistance necessary to improve their health. The figure below illustrates how social and economic conditions interact with individual behaviors to impact the health of residents in a community.

**FIGURE 1: SOCIAL DETERMINANTS OF HEALTH**





## COMMUNITY SUPPORT AND INVOLVEMENT

The Jefferson County **CHIP** was developed by a team that consisted of several community health and social service organizations that serve Jefferson County residents. The team included representatives from Jefferson County General Health District (JCGHD) and Trinity Health System (THS). Over 30 community leaders and residents provided extensive input to development of this plan.

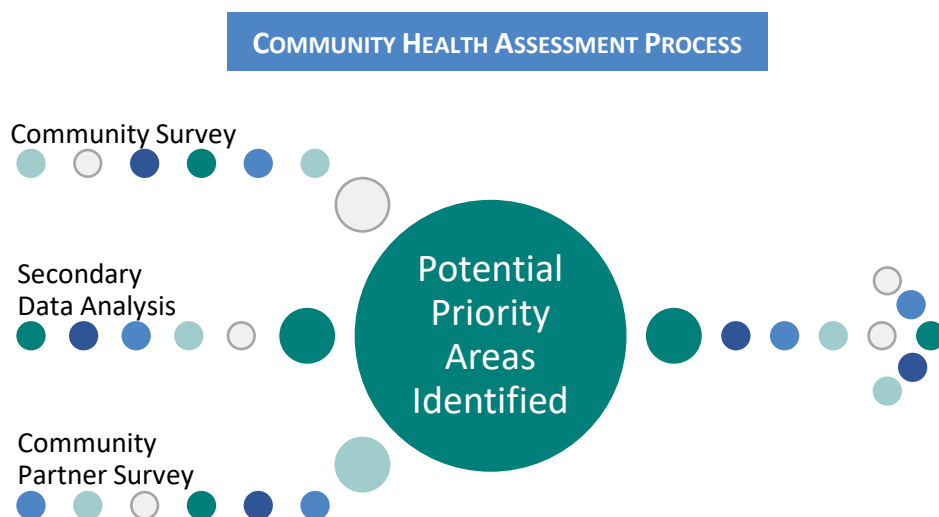
Organizations that collaborated to fund and support the development of the plan included:

- Jefferson County General Health District (JCGHD)
- Trinity Health System (THS)
- Ohio Valley Health Center
- Jefferson County JFS
- Jefferson County Prevention and Recovery Board
- CHANGE INC
- Resource Network
- Jefferson County YMCA
- Jefferson County Board of DD
- Jefferson Metro Housing Authority
- SELF Discovery
- SVRTA
- Aim Women's Center
- United Prevention Partnership
- Urban Mission
- Trinity Health System
- Help Me Grow
- OSU Extension: Jefferson County
- Jefferson County ESC
- NAACP Health Chair
- Our Place of Jefferson County
- Carriage Inn of Steubenville
- Business/Community Leaders
- Community Members

## THE PRIORITY SELECTION PROCESS

The Jefferson County **CHIP** process began by conducting a community needs assessment (CHA). The CHA was conducted in 2025 and involved an extensive data collection process involving three project components. When available, data was compared to previous years' information and other geographic areas such as Ohio or the United States. Analysis included survey data and health and demographic data. Each component is discussed in more detail below.

1. The first component of the project, a Community Survey, consisted of a random sample survey of Jefferson County, Ohio households. This method was used to ensure representativeness of the adult population and to warrant statistical validity. The final sample size was 400 which resulted in an overall sampling error of +/- 5.0% within a 95% confidence level. The survey questions focused on the following areas: community need and social determinants, access to care, mental health and substance abuse, healthy living, vaccinations, chronic diseases, housing, safety, and transportation.
2. The second phase of the project, Secondary Data Analysis, consisted of reviewing and analyzing secondary data sources to identify priority areas of concern when compared to survey data. CMOR gathered and compiled health and demographic data from various sources. The sources of data are outlined in the Research Methodology section of this report.
3. The third and final phase consisted of collecting qualitative data to provide some contextual information to the primary and secondary data outlined above. The qualitative data included a Community Partner Survey which consisted of an on-line survey completed by 21 community partners with knowledge of and experience in community health related issues.



The findings of the CHA were presented at a Community Call to Action meeting on May 9 and 16<sup>th</sup>, 2025. More than 30 individuals attended the Call to Action meeting including the primary agencies, community leaders, residents, and professionals from organizations serving Jefferson County residents. The CHA analysis identified several health and social issues that have a significant impact on the health of Jefferson County residents. The six potential priority areas that were identified through the CHA process were Access to Health Care, Built Environment, Healthy Living, Housing and Homelessness, Mental Health and Substance Abuse. After the findings from the CHA were shared, stakeholders voted on the priority areas to include in the 2025-2028 Jefferson County CHIP using the priority selection criteria below.

PRIORITY SELECTION CRITERIA		
<i>Is the Issue consequential?</i>	<i>Is there Community Support to address the Issue?</i>	<i>Is the Issue pragmatic?</i>
Will it make a difference?	Are there resources to dedicate?	Can we do something to address this priority?
Will there be consequences if not done?	What resources exist that are being or could be directed to this issue?	What can realistically be achieved and over what timeframe?
How many people are affected?	Is there a willingness to collaborate on addressing selected issues?	Is it susceptible to proven and affordable interventions?
Could there be a serious consequence, and does it address wide disparity?	Does the community recognize the issue as an important need?	Does this issue identify a strength that can be replicated throughout the community?
Will the issue have wide implications and long-term health improvements?		Is ongoing monitoring of this issue possible?
Will addressing this issue create a breakthrough in community health?		
Has this issue been persistent, nagging, and seemingly unsolvable?		

Meeting participants were then polled to identify the priorities to be included in the 2025-2028 CHIP. As a result of the voting, the following priorities were selected:



Mental Health and Substance Abuse



Healthy Living



Access to Care

A strategy or implementation plan is a management tool designed to guide organizations in their efforts to address community health problems. The plan includes a goal statement, the strategies that will be implemented to achieve the goal, the organization(s) responsible for implementing the strategies, and specific measurable outcome objectives that will be monitored over time to determine if the strategies are effective in achieving the goals.

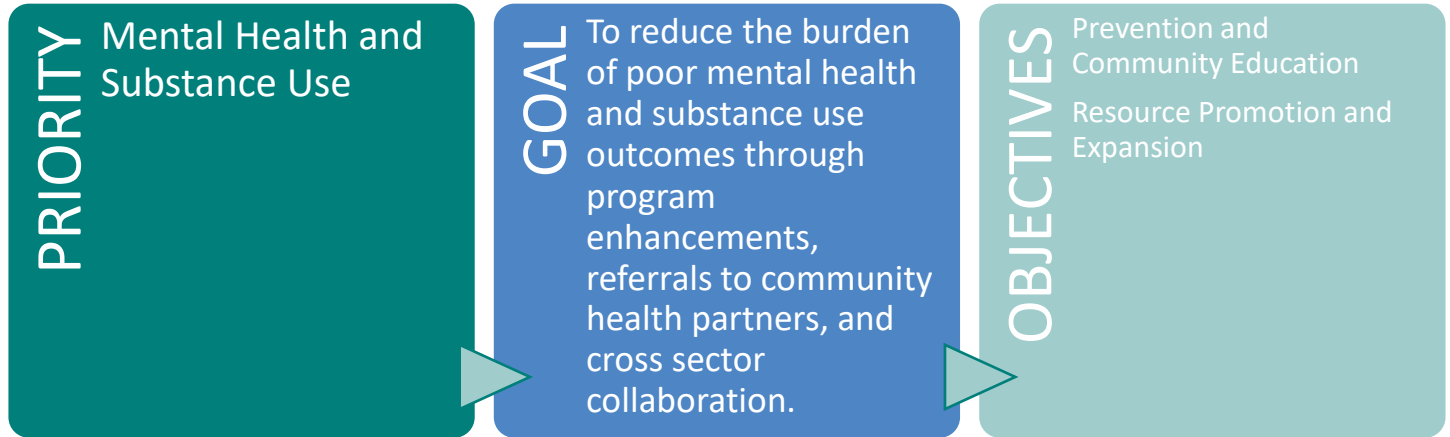


### ***NEXT STEPS***

Creating the Community Health Improvement Plan The health district is dedicated to improving community health and delivering community benefit with the engagement of its management team, board and staff, and in collaboration with community partners.

The CHA and Implementation Plan were informed and supported by a CHA Steering Committee that included health district participants as well as community stakeholders. JCGHD formed an internal team to review the identified priorities and develop the Implementation Strategy.

## PRIORITY 1: MENTAL HEALTH AND SUBSTANCE USE



### CURRENT SITUATION

Data from the 2025 CHA indicates that there is a continuing need to address mental health and substance use issues among residents of Jefferson County to **reduce the burden of poor mental health and substance use outcomes**. The need for mental health and substance use prevention, education and intervention continues to increase. High numbers of overdose fatalities and suicides substantiate this issue. The need to address **mental health and substance use** in Jefferson County was well documented in the 2025 CHA based on several data sources. The community survey showed the following:

- Most residents, 95%, rated heroin or other illegal drug use as a moderate or very serious problem facing Jefferson County, while slightly fewer, 93%, rated mental health as a moderate or very serious problem facing the county.
- Nearly a sixth, 13% of residents or a loved one sought assistance for a mental health issue while 6% of residents or a loved one sought assistance with addiction services in the past year.
- More than a quarter, 27%, stated that their mental health was not good 11 or more days in the past month.
- Nearly a third of respondents, 31%, felt so sad or hopeless almost every day for two weeks or more in a row in the past year that they stopped doing some usual activities and 10% reported seriously considering suicide sometime in their life.
- More than a fifth of residents, 21%, reported to have a high stress level on a typical day while another 44% said that their daily stress level was moderate.
- In terms of social connectedness, nearly a quarter of residents, 23%, only see or talk to someone they care about **once or twice a week** while nearly a fifth, 19%, reported they see or talk to people **less than once a week**.
- Nearly half of residents, 46%, reported they or someone in their household have been diagnosed with depression while two fifths of respondents, 40%, reported they or someone in their household have been diagnosed with an anxiety disorder such as obsessive-compulsive disorder (OCD) or panic disorder.
- On the community survey,
- More than a quarter of males, 26%, drank five or more drinks on one occasion at least once in the past month. For females, 19% binged at least once (4 or more drinks on one occasion).
- Nearly one in ten respondents, 9%, reported driving after drinking any alcoholic beverages during the past month.
- More than a quarter, 28%, of residents felt that it is okay for a person under the age of 21 to drink alcohol as long as they do not drive.
- More than a quarter of respondents, 28%, reported that they or someone in their household had used marijuana in the past six months.
- Nearly a sixth of community survey respondents, 14%, stated that they, a family member, or friend needed drug or alcohol treatment in the past year.



Data from the Community Partner Survey included the following in support of including **mental health and substance use** as a priority:

- Mental and behavioral health were named as one of the MOST important health related issues or challenges, named by 57% of community partners. The same percentage, 57%, named substance abuse and illegal drug use as the most important health related issue or challenge facing the county.
- On a scale in which 1 is 'not at all important' and 10 is 'very important', community partners gave substance use an importance rating of 9.05, the highest of the seventeen issues asked about. Community partners gave mental health services an importance rating of 9.00, the second **highest** of the eleven issues.
- Two thirds, 67%, of community partners felt that mental health was one of the top three issues, that if addressed, would have the largest positive impact on county residents while more than half, 57%, felt that substance abuse/illegal drug use was one of the top three issues, that if addressed, would have the largest positive impact.
- Most, 81% of community partners felt there were NOT enough services and programs currently available to meet the substance abuse needs of Jefferson County right now while more than three quarters, 76%, of community partners felt there were NOT enough services and programs currently available to meet the mental health needs.
- More than half, 52%, of community partners indicated that people with mental illness were not being adequately served by local health services while more than two fifths, 43%, indicated that people addicted to drugs and alcohol were not being adequately served.
- Nearly half of community partners, 45%, disagreed that, *"Residents are able to access mental and behavioral health providers in the area."*

Other data in support of including suicide and mental health as a priority area include:

- The average number of poor mental health days in Jefferson County was 6.0, slightly more than Ohio, 5.5 (*Source: County Health Rankings*).
- In Jefferson County, there is 1 mental health provider for every 330 residents which is slightly worse than the state ratio of 1 mental health provider for every 310 residents. (*Source: County Health Rankings*).
- The percentage of driving deaths with alcohol involvement in Jefferson County was notably higher than the state, 36% compared to 32%. (*Source: County Health Ranking*)
- On average, 60% percent of client admissions in the county were associated with a primary diagnosis of opiate use disorder in SFY 2022, much higher than the state average of 47%. (*Source: Ohio Mental Health and Addiction Services*).
- The number of unintentional drug overdose deaths in Jefferson County has increased significantly since 2017 from 28 to 35. The unintentional drug overdose death rate also increased significantly over the last 5 years from 50.6 to 69.0 which is also higher than the state rate of 46.8. (*Source: Ohio Department of Mental Health and Addiction Services*).



**GOAL: Reduce To reduce the burden of poor mental health and substance use outcomes through program enhancements, referrals to community health partners, and cross sector collaboration.**

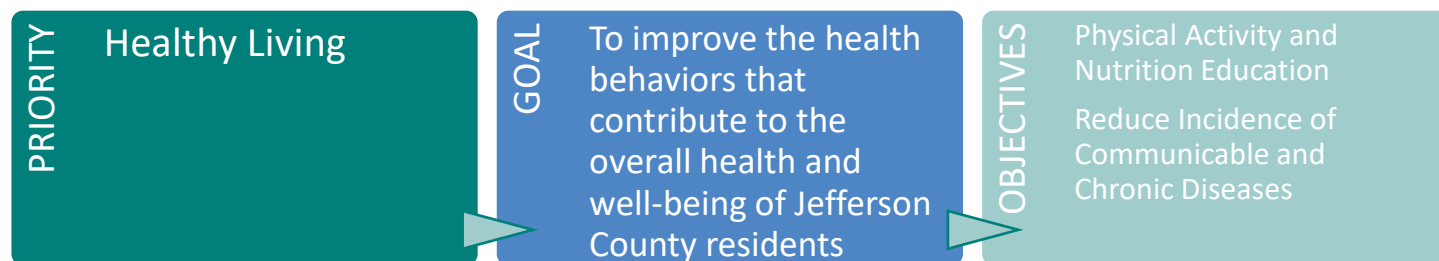
#### GUIDING PRINCIPLES

- Priority populations to be targeted include school-age children, low-income individuals and families, and communities considered drug overdose hot spots.
- Social determinants to be considered include education access, social and community support, uninsured and under-insured, and household income.

STRATEGY	ACTIVITY	TIMEFRAME	LEAD PARTNERS	MEASURE
1- Prevention and Community Education	Youth Drug, Alcohol, and Mental Health Prevention: Participate in United Prevention Partnership strategies and Jefferson County Juvenile Task Force prevention programs.	October 2025 – December 2026 during PreVenture grant.	JCGHD, Prevention and Recovery Board, Family Recovery, and United Prevention Partnership Members organizations.	Improvement in baseline data related to mental health, substance use, and suicide. More specifically:  Reduce number of poor mental health days as measured through County Health Rankings.
	Additionally, the JCGHD will offer the PreVenture mental health program in Jefferson County schools in 2025 and 2026.			
	Overdose and Suicide Fatality Review Findings: Work with community partners to establish one community based education topic or program goal annually as a result of both overdose and suicide reviews.	Annually 2025 - 2028	JCGHD, Prevention and Recovery Board, Family Recovery, and other Overdose and Suicide Fatality Review members	Reduce number of overdose fatalities.  Reduce number of suicides in the county.  On the Jefferson County OHYES Results, have:
2- Resource Promotion and Expansion	Collaborate with providers and partners to ensure quality delivery and expansion of services: Monitor mental health and substance use trends in the county and respond to community needs.	Ongoing October 2025 – September 2028	JCGHD, Prevention and Recovery Board, Trinity Health System	<ul style="list-style-type: none"> <li>• Reduced youth use of electronic vapor products</li> <li>• Reduced youth alcohol consumption</li> <li>• Reduced youth feelings of sadness or hopelessness</li> </ul>



## PRIORITY 2: HEALTHY LIVING



### CURRENT SITUATION

**Healthy living** is also a contributing factor in the county's health challenges. A healthy lifestyle means a lower risk of developing many illnesses, like heart disease and diabetes, which are prevalent in the county. A healthy lifestyle can also lead to better mental health as well. The need to address **healthy living** in Jefferson County was well documented in the 2025 CHA based on several data sources. The community survey showed the following:

- The majority of residents, 91%, rated obesity and healthy choices as a moderately or very serious problem facing Jefferson County.
- Currently, 31% of residents report currently smoking every day or some days while 17% report using electronic cigarettes or vapes some days or every day.
- More than one third, 36%, have not exercised in the past month. The most common reasons for not exercising were physical limitations and lack of time.
- Nearly two-thirds of respondents, 63%, reported they are overweight.
- Residents spend an average of 4.22 hours a day watching television, 3.63 hours using social media, used their cell phone 3.41 hours a day, and spent 2.70 hours using their computer outside of school or work.
- A third of respondents, 34%, reported having difficulty getting fresh fruits and vegetables. Nearly a fifth, 19%, of residents reported eating three or more restaurant or takeout meals a week.
- Chronic disease diagnosis was high in the following areas: high blood pressure (46%), arthritis (37%), high cholesterol (35%), and diabetes (19%).

Data from the Community Partner Survey included the following in support of including **healthy living** as a priority area.

- Less than half of community partners, 48%, named chronic diseases as the most important health related issue or challenge in Jefferson County right now while 43%, named obesity and healthy lifestyle choices.
- On a scale in which 1 is 'not at all important' and 10 is 'very important', community partners gave chronic diseases such as diabetes and high blood pressure an importance rating of 8.00 while obesity and healthy lifestyle choices had an average importance rating of 7.76.
- More than half, 62%, felt that there were NOT enough services and programs currently available to meet the obesity and healthy living needs of Jefferson County right now while 52% felt there were not enough services and programs to address the chronic disease needs of the county.

Other data in support of including healthy living as a priority area include:

- The percentage of adults who smoke in the county is significantly higher than the state average, 24% in the county compared to 19% in Ohio and has increased over the most recent five years of data while the state average has decreased over the same time period. (*Source: County Health Rankings*).
- Nearly a third, 30%, of adults in Jefferson County are considered physically inactive, much higher than the state average, 25%. (*Source: County Health Rankings*).
- Nearly half of adults, 42%, in Jefferson County have a BMI of 30 or more, significantly higher than the state average of 38%. (*Source: County Health Rankings*).
- The top two causes of death in Jefferson County in 2023 were heart disease and cancer. (*Source: ODH*).

## GOAL: Improve the health behaviors that contribute to the overall health and well-being of Jefferson County residents

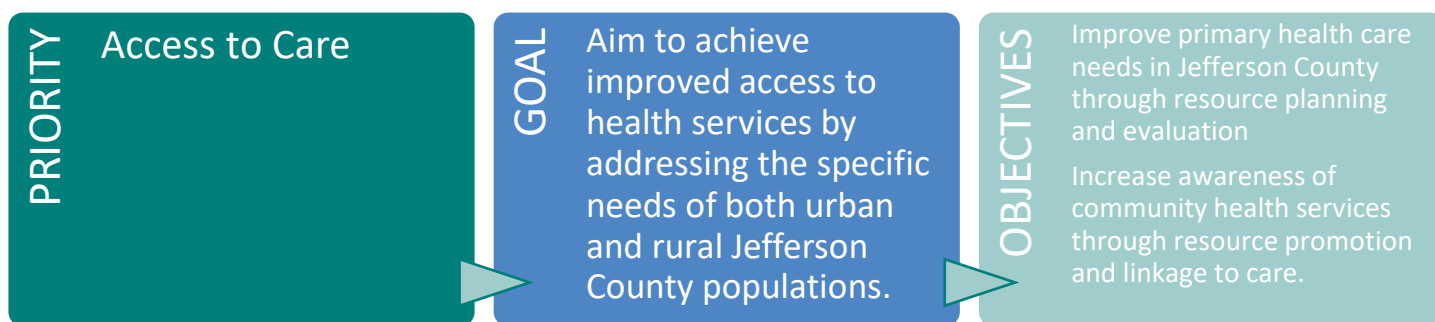
### GUIDING PRINCIPLES

- Priority populations to be targeted include primarily the young and the senior population, with occasional focus on the general adolescent and adult population.
- Social determinants to be considered include social and community support, uninsured and under-insured, and household income.

STRATEGY	ACTIVITY	TIMEFRAME	LEAD PARTNERS	MEASURE
1- Physical Activity and Nutrition Education	Host physical activity events with a variety of local partners to promote access to exercise opportunities.	Ongoing October 2025 – September 2028	JCGHD, Trinity Health System, Steubenville YMCA, Jefferson County food pantries, local parks and recreation.	Improvement in baseline data related to physical health, access to healthy foods, and tobacco use in Jefferson County. More specifically:
	Provide nutrition education and programs for Jefferson County residents.	Ongoing October 2025 – September 2028	Jefferson County WIC, JCGHD Nursing, Jefferson County food pantries	Reduce number of poor physical health days as measured through County Health Rankings.
2- Reduce Incidence of Communicable and Chronic Diseases	Collaborate with Jefferson County healthcare providers to address preventable disease outcomes.	Ongoing October 2025 – September 2028	JCGHD, Regional Epidemiologists, Trinity Health System, Change Inc.	Reduce percentage of residents who rate their health as fair as poor as measured through County Health Rankings.
	Monitor and respond to public health data associated with poor health outcomes (e.g. child vaccination rates, environmental factors, etc.).			<p>Reduce the percentage of residents who self-describe their personal weight as overweight.</p> <p>Reduce percentage of residents who smoke as measured through County Health Rankings.</p>



## PRIORITY 3: ACCESS TO CARE



### CURRENT SITUATION

A portion of county residents do not have access to affordable basic health care services including primary care doctors. Access to medical specialists and dentists were also issues. The need to address **access to care** in Jefferson County was well documented in the 2025 CHA based on several data sources. The community survey showed the following:

- More than two-thirds of residents, 69%, rated access to health care as a moderately or very serious problem facing Jefferson County. Slightly fewer, 65%, rated access to dental care as a moderately or very serious problem.
- A tenth, 10% of residents or a loved one sought assistance for healthcare in the past year while 9% sought assistance for dental care. A notable percentage, 8%, sought prescription assistance.
- A tenth of residents, 10%, reported they do not have one person or group they think of as their doctor or health care provider. Younger residents and those with lower education and income were more likely to report not having a primary care provider.
- Nearly a quarter of residents, 23%, stated that they most often receive health care from a source other than a primary care or family doctor such as an emergency room (9%) or stat care (9%). In addition, nearly a third of residents, 31%, are not 'always' able to visit a doctor when needed.
- One-fifth of residents, 20%, reported there were healthcare services that they or a family member needed in the past two years they were unable to get. The most common reason respondents were unable to get the service was that it was not available in the area.
- Over a third of residents, reported that they currently have dental issues needing addressed, 14% are unable to get the care they need.
- Nearly half of residents, 45%, reported that they have gone outside of Jefferson County for healthcare in the past year. The most common reasons for going outside of the county for care were the location and availability of the doctors. Medical specialists and primary care were the two more common types of services received.

Data from the Community Partner Survey included the following in support of including access to care as a priority area.



- Less than half of community partners, 43%, named access to health care as the most important health related issue or challenge facing Jefferson County right now.
- On a scale in which 1 is 'not at all important' and 10 is 'very important', community partners gave access to primary care doctors/providers an importance rating of 7.90, access to dental care an importance rating of 7.76, and access to medical specialists an importance rating of 7.95.
- Two-thirds, 67%, of community partners felt there were NOT enough services and programs currently available to meet the medical specialist needs of Jefferson County right now, more than half of community partners, 57%, felt there were NOT enough services and programs currently available to meet the access to primary care provider needs, and 48%, felt there were NOT enough services and programs currently available to meet the access to dental care needs.
- Nearly half, 48%, of community partners indicated that rural residents were not being adequately served by local health services.
- Two fifths of community partners, 40.0%, agreed, *"Residents in Jefferson County are able to access a primary care provider in the area when needed."* Less than a third, 30%, of community partners agreed that *"Residents in Jefferson County are able to access a dentist when needed."* More than a quarter of community partners, 26.3%, agreed, *"Residents in Jefferson County are able to access medical specialists LOCALLY when needed (Cardiologist, Dermatologist, etc.)."*

Other data in support of including access to care as a priority area include:

- In Jefferson County, there is 1 primary care physician for every 2,590 residents which is much worse than the state ratio of 1 PCP for every 1,330 residents. (*Source: County Health Rankings*).
- In Jefferson County, there is 1 dentist for every 2,080 residents which is much worse than the state ratio of 1 dentist for every 1,530 residents. (*Source: County Health Rankings*)



## GOAL: Improve access to health services by addressing the specific needs of both urban and rural Jefferson County populations.

### GUIDING PRINCIPLES

- Priority populations to be targeted include rural and urban residents, low-income individuals and families, and residents with transportation barriers.
- Social determinants to be considered include uninsured and under-insured, household income, and marginalized communities with limited access to care.

STRATEGY	ACTIVITY	TIMEFRAME	LEAD PARTNERS	MEASURE
1- Improve primary health care needs in Jefferson County through resource planning and evaluation	Address primary care access in North End of Steubenville as identified in the Steubenville's Choice Neighborhoods Plan.	By December 31, 2027	JCGHD, Trinity Health System, Change Inc., Ohio Valley Health Center, Jefferson Metropolitan Housing Authority	While it is important to note that 90% of Community Health Assessment survey respondents indicated that they have a primary care doctor, improvement goals will be focused on underserved communities in urban and rural Jefferson County. The intent is to grow primary care capacity in these communities. An additional measure of success includes Pathways Hub growth, which fosters linkages to community health services. More specifically: <ul style="list-style-type: none"> <li>• Improve Primary Care Physician to Patient Ratio</li> <li>• Improve community partner perception of the number of PCPs that accept new patients</li> <li>• Increase number of Pathways Hub Clients and number of urban and rural PCPs.</li> </ul>
	Assess the primary care needs in rural and underserved Jefferson County.	Annually 2025 - 2028	JCGHD, Trinity Health System, Change Inc., Ohio Valley Health Center	
2- Increase awareness of community health services through resource promotion and linkage to care.	Work collaboratively with community partners to promote Jefferson County health services (e.g. blood lead testing, HIV program, STI testing. Etc.).	Ongoing October 2025 – September 2028	JCGHD, Trinity Health System, Change Inc., Ohio Valley Health Center	
	Increase the number of clients served in the Mahoning Valley Pathways HUB by JCGH Community Health Workers. The HUB is designed to address health equity, improve maternal health and birth outcomes for all at risk/high risk populations, address chronic disease, social determinants of health, other at risk populations.			