

LECOM HEALTH MILLCREEK COMMUNITY HOSPITAL
COMMUNITY HEALTH NEEDS ASSESSMENT

2021

Introduction

A community health needs assessment (CHNA) is a tool used to evaluate the health status of residents and identify areas of concern within the community. Data comes from multiple sources, including input from residents themselves. The long-range goal is to provide focus areas for collaborative action and outreach among community stakeholders and residents.

Under the Patient Protection and Affordable Care Act (ACA), nonprofit, tax-exempt hospitals must conduct a CHNA every three years for their primary service area in collaboration with community partners including public health. As part of the national public health accreditation process, the Erie County Department of Health (ECDH), in order to maintain its current national public health accreditation status, must complete a CHNA every five years in collaboration with community partners including the nonprofit, tax-exempt hospitals within its jurisdiction. The first collaborative CHNA was completed in 2012. A basic community health improvement plan was initiated.

The objectives of the 2021 Erie County Community Health Needs Assessment are to (1) provide a comprehensive overview of the health status of Erie County, (2) identify priority health needs within the county, (3) organize these priorities into strategic issues, (4) share this information with the community at large, including stakeholders, and (5) use these priorities to guide community outreach and future collaborative action among organizations within the community.

Local Public Health System Assessment: Assets and Resources

Many of the health-related resources available in Erie County are listed in the body of the assessment and can be found at [Health Care Providers](#) and [Leisure and Recreation](#) (Parks and Trails).

There are many organizations within Erie County that provide a wide range of services, programs, and opportunities for county residents. Many are listed in PA 211 Northwest and Erie Sprout. Services are listed by category and can be searched by agency. Included in the list of categories are advocacy, alcohol/drug & addictions, animals, camps, churches, community action, counseling, daycare & after school programs, education, emergency, employment/volunteerism & career, food/clothing/shelter, funeral homes, health care, home health care, hospice, hospitals-full or partial hospitalizations, housing, assisted living, independent living, transitional living, legal concerns/government, mental health/mental retardation, pregnancy & adoption, recreation, senior citizens, services/utilities, support groups, transportation, and veterans.

A broad cross-section of community organizations, including law enforcement and education, partnered to address tobacco issues within the county. They are: Millcreek Township Police Department, City of Erie Police Department, American Cancer Society, Harbor Creek School District, Millcreek Township School District, Erie City School District, Lake Erie College of Osteopathic Medicine School of Pharmacy, UPMC Hamot, , Pyramid Healthcare, Multicultural Community Resource Center (MCRC), GE Transportation, Erie County Drug and Alcohol Coalition, Erie Seawolves, Erie Otters, NWPB Pride Alliance, and the Erie County Department of Health which is also the regional program manager for the Northwest Pennsylvania Tobacco Control Program.

Nutrition and physical activity are addressed by the YMCA, the Wellsville Program, the Penn State Cooperative Extension, Early Connections (an early childhood focused organization), Kid's Cafes, individual hospital health and wellness initiatives, and individual health plans and insurance providers. A list of over one hundred nutrition and physical activity programs can be found in the 2019 Erie County Community Wellness Directory. Physical activity is the focus of the Erie Walks initiative and the Click Start Your Heart initiative.

Currently, there are approximately twenty organizations and facilities within Erie County that address alcohol and drugs, approximately twenty organizations and facilities that provide emergency and crisis intervention, over twenty organizations that provide information and referral services, approximately six organizations that address language and communication problems, and approximately thirty organizations and facilities that provide mental health and mental retardation services.

As part of its community programming, the United Way of Erie County has implemented a community health initiative. The Erie Community Foundation, which offers competitive grants to community groups, maintains Erie Vital Signs, a website that includes health statistics, as a tool for grant seekers. A school-based health center (Wayne Primary Care) operates in an inner city school, another (Girard School, Community Health Net) operates in West County, and Gannon University, an urban school, focuses efforts on the inner city neighborhoods surrounding its campus.

See Appendix A for a list of these community resources.

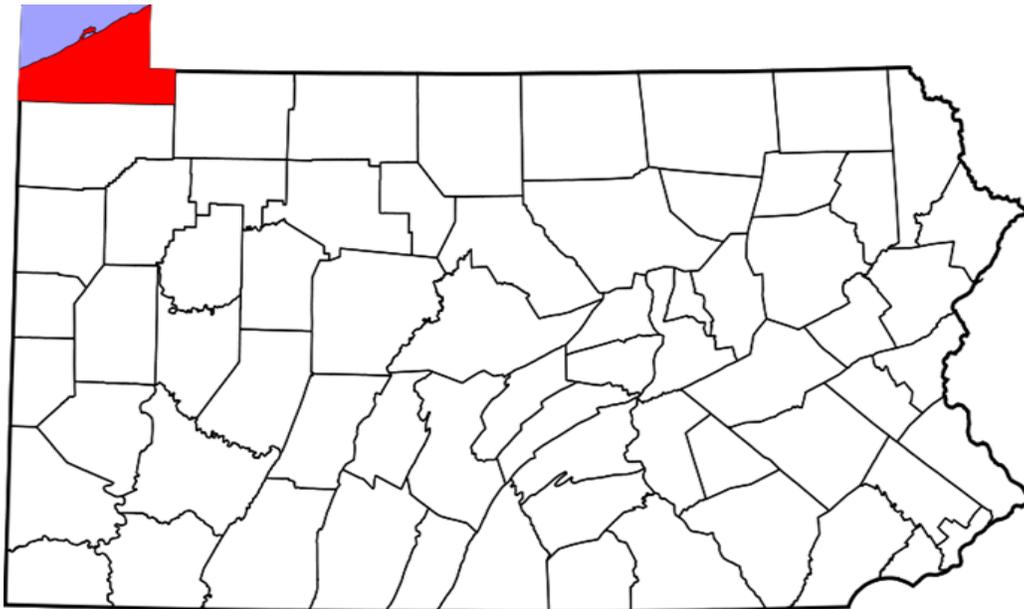
Demographics

Erie County and Its Municipalities

Erie County is located in northwestern Pennsylvania on the south shore of Lake Erie (Figure 1). Established in 1800, it is the Commonwealth's lone link to the Great Lakes. Erie County is bordered on the north by Lake Erie and the province of Ontario, Canada, on the south by Crawford County, Pennsylvania, on the west by Ashtabula County, Ohio, and on the east by Chautauqua County, New York and Warren County, Pennsylvania.

Including land and water areas, Erie is the largest of Pennsylvania's 67 counties, with a total area of 1,558.2 square miles. Overall, 799.2 square miles are land (1.8% of Pennsylvania's total land area), and 759.0 square miles are water (57.9% of Pennsylvania's total water area).

Figure 1. Erie County, Pennsylvania

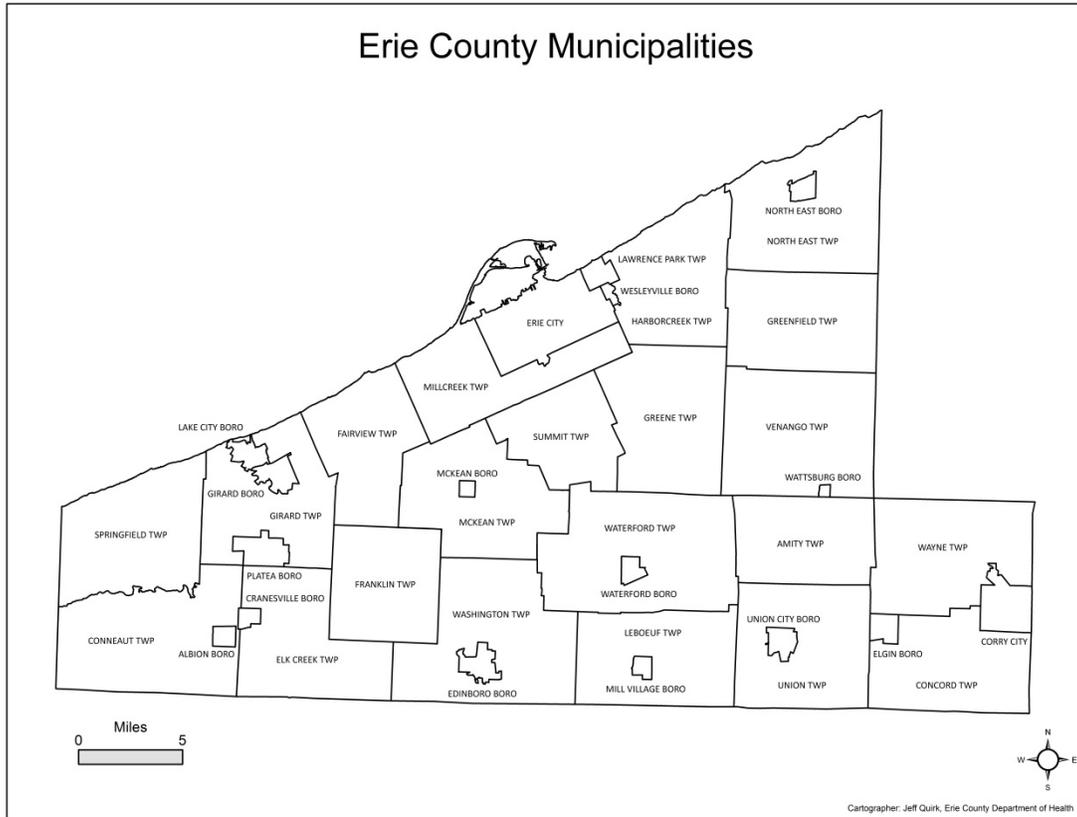


Erie County's population totaled 269,728 residents in 2019. This amounted to 2.1% of Pennsylvania's population of 12,801,989 and placed Erie as the 15th most populous county in the Commonwealth. The county population was 80.0% urban and 20.0% rural according to the 2010 Census.

The 38 municipalities of Erie County are comprised of 2 cities, 14 boroughs, and 22 townships (Figure 2). The county seat is located in the City of Erie, which is currently the fourth most populous municipality in the state, behind Philadelphia, Pittsburgh, and Allentown.

Erie County's 38 municipalities vary greatly in total population, size (land area), and population density (Table 1). In 2019, municipality populations ranged from a low of 205 residents in Elgin Borough to a high of 95,508 in the City of Erie, land areas ranged from a low of 0.3 square miles in Wattsburg Borough to a high of 50.0 in Waterford Township, and population densities ranged from a low of 37.4 persons per square mile in Amity Township to a high of 5,881.1 in Wesleyville Borough. The overall population density of Erie County was 337.5 persons per square mile.

Figure 2. The 38 Municipalities of Erie County



The ten largest county municipalities in 2019 were the City of Erie (95,508), Millcreek Township (52,456), Harborcreek Township (17,091), Fairview Township (10,037), Summit Township (7,233), the City of Corry (6,208), North East Township (6,181), Edinboro Borough (5,515), Girard Township (4,854), and Greene Township (4,491). Taken together, these municipalities accounted for about three-quarters (77.7%) of the total county population.

During the period 1980 to 2019, Erie County’s population slowly fell from 279,780 to 269,728, a loss of 10,052 residents, or 3.6%. The City of Erie lost 23,615 residents, dropping from 119,123 to 95,508. This 19.8% loss was largely due to resident out-migration to the nearby municipalities of Millcreek, Harborcreek, and Summit Townships. Millcreek grew by 8,153 residents (from 44,303 to 52,456, +18.4%), Harborcreek grew by 2,447 residents (from 14,644 to 17,091, +16.7%), and Summit grew by 1,852 residents (from 5,381 to 7,233, +34.4%).

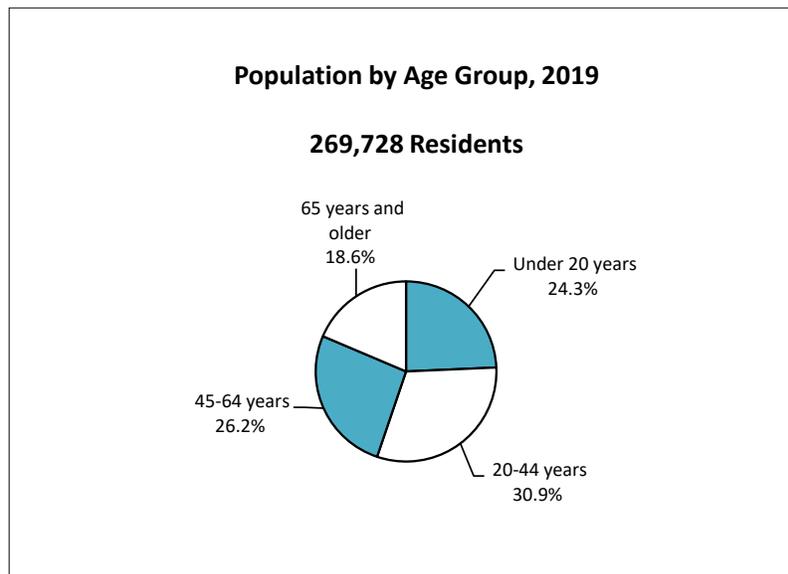
Table 1. Population, Land Area, and Population Density of Erie County Municipalities, 2019

<u>Place</u>	<u>Population</u>	<u>Land Area (Square Miles)</u>	<u>Persons per Square Mile</u>
Pennsylvania	12,801,989	44,742.70	286.1
Erie County	269,728	799.15	337.5
Albion Borough	1,449	1.08	1,341.7
Amity Township	1,048	28.02	37.4
Concord Township	1,278	33.11	38.6
Conneaut Township	4,412	43.07	102.4
City of Corry	6,208	5.99	1,036.4
Cranesville Borough	595	0.94	633.0
Edinboro Borough	5,515	2.29	2,408.3
Elgin Borough	205	1.47	139.5
Elk Creek Township	1,745	34.74	50.2
City of Erie	95,508	19.08	5,005.7
Fairview Township	10,037	28.97	346.5
Franklin Township	1,614	28.66	56.3
Girard Borough	2,913	2.34	1,244.9
Girard Township	4,854	31.50	154.1
Greene Township	4,491	37.39	120.1
Greenfield Township	1,882	33.77	55.7
Harborcreek Township	17,091	34.09	501.3
Lake City Borough	2,854	1.80	1,585.6
Lawrence Park Township	3,744	1.84	2,034.8
LeBoeuf Township	1,639	33.47	49.0
McKean Borough	369	0.57	647.4
McKean Township	4,318	36.80	117.3
Millcreek Township	52,456	32.07	1,635.7
Mill Village Borough	385	0.92	418.5
North East Borough	4,033	1.30	3,102.3
North East Township	6,181	42.15	146.6
Platea Borough	400	3.34	119.8
Springfield Township	3,280	37.38	87.7
Summit Township	7,233	24.05	300.7
Union Township	1,593	36.47	43.7
Union City Borough	3,118	1.83	1,703.8
Venango Township	2,245	43.42	51.7
Washington Township	4,420	45.16	97.9
Waterford Borough	1,495	1.23	1,215.4
Waterford Township	4,058	49.95	81.2
Wattsburg Borough	381	0.30	1,270.0
Wayne Township	1,564	38.07	41.1
Wesleyville Borough	3,117	0.53	5,881.1

Population by Age and Sex

Of the 269,728 people residing in Erie County in 2019, 136,398 (50.6%) were female and 133,330 (49.4%) were male. With respect to age, 65,604 (24.3%) were under 20 years, 83,262 (30.9%) were ages 20 to 44 years, 70,612 (26.2%) were ages 45 to 64 years, and 50,250 (18.6%) were 65 years and older (Figure 3, Table 2).

Figure 3. Erie County's Population by Age Group, 2019



Since the year 2000, Erie County's population has experienced an interesting transition. The number of residents under 45 years of age decreased from 177,932 to 148,866 (a drop of 16.3%), while the number of residents 45 years and older grew from 102,871 to 120,862 (an increase of 17.5%).

The population of Erie County is aging. The median age in Erie County increased to a new high of 40.2 years in 2019, up from 36.2 years in 2000, and 32.9 years in 1990. The median ages for males and females were 38.7 and 41.8 years, respectively. The aging of the baby boom generation (people born between 1946 and 1964) into older age groups, declining birth rates, and improved mortality are some of the key contributors to the observed increase in median age.

Population by Race and Hispanic Origin

Of the 269,728 people residing in Erie County in 2019, 235,814 (87.4%) were White, 21,093 (7.8%) were Black or African American, 5,242 (1.9%) were Asian, 756 (0.3%) were American Indian or Alaska Native, 183 (0.1%) were Native Hawaiian or Other Pacific Islander, and 6,640 (2.5%) were classified as Two or More Races. A total of 11,904 (4.4%) residents were Hispanic, of any race (Table 3).

Table 2. Erie County's Population by Age and Sex, 2019

<u>Age Group</u>	<u>Erie County</u>	<u>Erie County Males</u>	<u>Erie County Females</u>
All ages	269,728	133,330	136,398
< 20	65,604	33,591	32,013
20 - 44	83,262	42,456	40,806
45 - 64	70,612	34,834	35,778
65 and older	50,250	22,449	27,801
< 5	15,052	7,712	7,340
5 - 9	15,453	7,900	7,553
10 - 14	16,472	8,402	8,070
15 - 19	18,627	9,577	9,050
20 - 24	17,531	9,065	8,466
25 - 29	17,739	9,120	8,619
30 - 34	17,384	8,889	8,495
35 - 39	16,073	8,117	7,956
40 - 44	14,535	7,265	7,270
45 - 49	15,777	7,820	7,957
50 - 54	16,848	8,375	8,473
55 - 59	18,601	9,151	9,450
60 - 64	19,386	9,488	9,898
65 - 69	16,767	8,030	8,737
70 - 74	12,276	5,818	6,458
75 - 79	8,597	3,815	4,782
80 - 84	5,785	2,428	3,357
85 and older	6,825	2,358	4,467

Table 3. Erie County’s Population by Race and Hispanic Origin, 2019

<u>Race or Hispanic Origin</u>	<u>July 1, 2000</u>	<u>July 1, 2019</u>
All Races	280,803	269,728
White	257,904	235,814
Black or African American	17,625	21,093
Asian	1,979	5,242
American Indian or Alaska Native	476	756
Native Hawaiian or Other Pacific Islander	75	183
Two or More Races	2,744	6,640
Hispanic, of any race	6,170	11,904

Erie County’s racial and Hispanic composition continues to grow more diverse. From July 1, 2000 to July 1, 2019, the number of Whites in Erie County decreased by 8.6%, the Black population increased by 19.7%, the number of Asians increased by 164.9%, the number of residents classified as Two or More Races increased by 142.0%, and the Hispanic population rose by 92.9% (Table 3).

Social and Physical Environment

Because of its location on Lake Erie, Erie County has a robust tourist industry. Presque Isle State Park, a peninsula that extends into Lake Erie, offers sandy beaches and recreational opportunities. Erie County also has many park trails, bicycle paths, and hiking trails. A large number of religious, civic, and social organizations in the county provide opportunities for social engagement. Housing is affordable but many properties are poorly maintained, especially within the City of Erie. In Erie County, 27% of housing units were built in 1939 or earlier; 66% of housing units are owner-occupied with a median value of \$120,300; median rent is \$701; and although the median household income is \$47,094, 26% of all households had income below \$25,000. Erie County offers several subsidized housing options including HUD apartments, Section 8 apartments, public housing apartments, and non-profit low income apartments. The City of Erie is beginning downtown transformation and neighborhood revitalization initiatives to address urban decline and blight. Erie County has a public transportation system with routes concentrated in the City of Erie and surrounding areas and limited service to other areas of the county. The primary mode of transportation is by motor vehicle. There are two public airports in Erie County and one hosts three national airlines. Group and gun violence had become areas of concern in Erie County. Unified Erie, a collaborative violence reduction initiative, was formed

in 2010 to address this issue. Since 2014 there has been improvement in 5 indicators used to measure group violence.

Environmental Health

Erie County Department of Health oversees food safety, water pollution, the water supply of public facilities, public bathing quality, beach water monitoring and notification, and camps and campgrounds. The department also oversees schools, manufactured home parks, body art establishments, and vector control. Air quality is regulated by the state.

Physician Shortage

Undoubtedly health care cost will rise and the need for additional health care providers will grow as the U.S. population grows older. Primary care physicians and specialists are vital to communities as they assist in the health and care coordination of community residents. Impacted by the growing need for more primary care and specialty physicians in the region, LECOM Health must grapple with this community concern. In addition to manpower issues, transportation difficulties in rural regions create accessibility problems to health care services and impact how rural residents obtain care. It is clear that the need for physicians will grow; however, it is also imperative to support and provide pathways to assist residents in obtaining care in order to reduce and close the gaps in health care disparities. As primary care and specialty physicians tend to practice in more populated communities' rural residents are forced to travel further for services – making access to services more difficult. It will be important for LECOM Health to seek innovative and thoughtful ways to fill this transportation issue.

Care Coordination

Health system navigation is an approach to reduce barriers to care. Patients with health and social support needs experience gaps in service delivery and often require assistance. Care coordinators assist those in chronic care settings or larger integrated health networks because they help patients “navigate” the health care system. Care coordinators educate consumers and provide the skills to properly access and self-manage their health care effectively. Health care coordinators assist patients through the logistical infrastructure in health insurance coverage or undergoing complex care management regimens. Assisting patients in a complex health care environment empowers patients to be confident and become self-reliant to ensure their interactions can be more effective. Care coordinators are vital to the health system because they assist patients in understanding an industry that can often be complicated. Roles and responsibilities can include assisting patients to find and access treatment, understanding their illnesses/disease, and understanding their care plans. Without care coordinators, the inability to obtain assistance can hinder a patient's ability to obtain care or adequately recuperate from an injury. Care coordinators can also streamline and ease the discharge process. Health care providers use care coordination to organize patient care events and share patient information with all of the health care participants and caregivers concerned with the

patient's outcome to achieve safe and more effective care. Care coordination can assist residents and address potential gaps in meeting educational, medical, social, and financial needs in order to achieve optimal health. Both navigation and care coordination are intertwined as they aim to achieve the desired result of assisting the patient with their health care needs. Geography, economics, and culture contribute to how residents obtain care. Health care access plays a tremendous role on an individual's overall health. Transportation, care coordination, and navigation were identified as issues in the current community cycle; thus, LECOM Health will explore strategies to address this need. Access to health care services is critical to good health, yet residents still face a variety of access barriers. Access to services such as primary care, dental care, behavioral health, emergency care, and public health services should be convenient and available. Access to health care can improve one's overall health status, improve quality of life, reduce diseases, and provide treatment to illnesses and other abnormalities.

Behavior Health

Behavioral health, which includes mental health and substance abuse, affects families and individuals throughout the United States. The disease and the number of residents diagnosed with the disease continue to grow exponentially. Along with the growth, the needs for mental health services and substance abuse programs have not diminished. According to the American Hospital Association, in 2016, only 43% of the 44.7 million adults with any mental health disorder received treatment, and less than 11% of adults with a substance use disorder received treatment. Regrettably, behavioral health disorders affect nearly one in five Americans and have community-wide impacts. While hospitals and health systems provide essential behavioral health care services every day, timely access to affordable services remains a significant challenge for many Americans. It has been shown that increasing access to behavioral health services can improve outcomes and lower health care costs. Genetics and socioeconomic are factors in individuals who are diagnosed with a mental health problem, and often times societal factors increase the likelihood for one to engage in unhealthy life choices such as alcohol and drug use. The 2021 CHNA prioritized behavioral health as a top need and continues to highlight the need for additional mental health and substance abuse services and programs regionally.

NEEDS ASSESSMENT

Rural Americans face numerous health challenges. Rural residents are more likely to die from heart disease, cancer, **unintentional injury**, chronic lower respiratory disease, and stroke than their urban counterparts.ⁱ In comparison to their urban counterparts, suicide rates are higher.ⁱⁱ Industries which are highly concentrated in rural areas such as mining, quarrying, oil, and gas extraction and agriculture, forestry, fishing, and hunting are among the top five industries with higher suicide rates than found in the general population.ⁱⁱⁱ The high rate of avoidable or excess death due to drug overdoses is a particular concern for rural residents.^{iv} Residents of rural communities like the Corry service area experience higher rates of poverty and chronic disease and generally have poorer health outcomes than their urban counterparts.^v

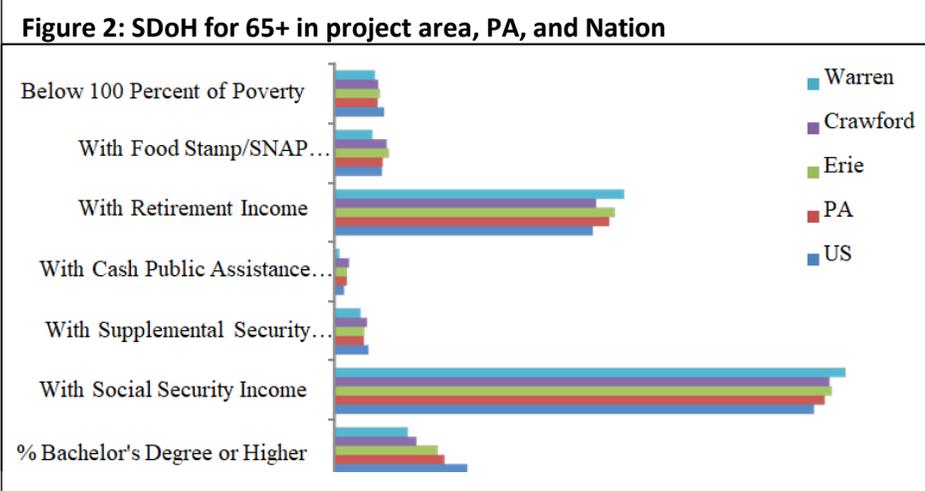
Population Demographics

The table below illustrates demographic information for Corry, PA in comparison to the United States as a whole:

Measure	Data for Service Area (Corry, PA)	Comparative Data (U.S.)	Data Source/year
Race	American Indian/Alaska Native 0.3%	American Indian/Alaska Native 1.3%	https://www.census.gov/quickfacts/fact/table/corrycity/pennsylvania,US/PST045221 2021
	Asian 0%	Asian 5.9%	
	Black 4%	Black 13.4%	
	Native Hawaiian/Pacific Islander 0%	Native Hawaiian/Pacific Islander 0.2%	
	White 87.6%	White 76.3%	
Ethnicity	Hispanic or Latino 1.9%	Hispanic or Latino 18.5%	
	Not Hispanic or Latino 87.6%	Not Hispanic or Latino 60.1%	
Age	Under 5yrs 4.8%	Under 5yrs 6.0%	
	Under 18yrs 19.7%	Under 18yrs 22.3%	
	65yrs and over 23.7%	65yrs and over 16.5%	
Sex	Female 55.9%	Female 50.8%	

Data from the 2019 National Survey on Drug Use and Health by SAMHSA revealed that prevalence of any mental illness was higher among females (24.5%) than males (16.3%).^{vi} Likewise, more females with any mental illness (49.7%) received mental health services than males with any mental illness (36.8%). Of the patients receiving BH services from LH, approximately 53% are female, 45% are male, and 2% identify as neither female or male. The 2018 Erie County Community Health Needs Assessment reported 5% of the population identified as LGBTQA^{vii} in comparison to 2.7% in the Commonwealth of PA.^{viii} Individuals who identify as LGBTQA are more than twice as likely to have a mental health disorder in their lifetime^{ix} and 2.5 times more likely to experience depression, anxiety, and substance misuse compared with heterosexual individuals.^x The rate of suicide attempts is 4 times greater for lesbian, gay, and bisexual youth and 2 times greater for questioning youth than that of heterosexual youth.^{xi} Individuals who identify as LGBTQA have higher rates of mental health service use than their heterosexual counterparts^{xii} which is reflective of our patient base where LH BH patient data indicates nearly 9% identified as LGBTQA.

Social Determinants of Health. The physical and social conditions under which people live dictate what resources are available to them and impact their chance of thriving or engaging in risk-taking behaviors. Poverty is closely connected with poorer physical and mental health and if experienced chronically, can create toxic stress and trauma. Socioeconomic measures for our project area indicate that the region is more poor and more disabled than other Pennsylvanians and the general population of the United States (Figure 2).^{xiii} The median household income in the U.S. is \$57,652, but Erie County zip codes reflect median household incomes

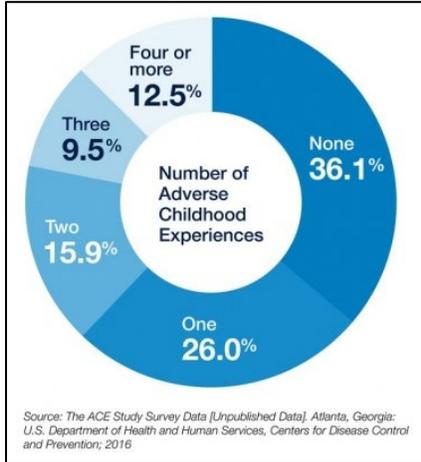


between \$10,631 and \$41,917. U.S. Census data reveals that the poverty rate in Erie County, 15.7%, exceeded the national rate of 13.4%. Socioeconomic measures for the service area indicate that the region is more poor and more disabled than other Pennsylvanians and the general population of the United States.^{xiv} These data suggest a compelling need for high-quality, fully integrated behavioral health services.

Adverse Childhood Experiences (ACEs) refer to potentially traumatic events that occur before the age of 18. Such experiences have negative effects on health, well-being, and opportunity.^{xv} According to the PA Department of Health, “trauma is one of the most under-addressed social determinants of health.”^{xvi} Chronic stress and traumatic experiences are intertwined with, and even at the root of, many of the community’s most pressing challenges and public health issues including mental illness, substance abuse, crime, and more. Figure 5 illustrates approximately 64% of people have at least one adverse experience. The Trauma Informed PA Plan reports the average PA classroom has 7-8 students out of 22 who are struggling with trauma.^{xvii}

Figure 3: Incidence of ACEs

Childhood maltreatment and exposure to domestic violence is a significant predictor of future acts of violence. In the Pennsylvania Youth Survey (PAYS), an average of 22.3% of students reported being threatened with violent behavior on school property and 8.4% reported having actually been attacked.



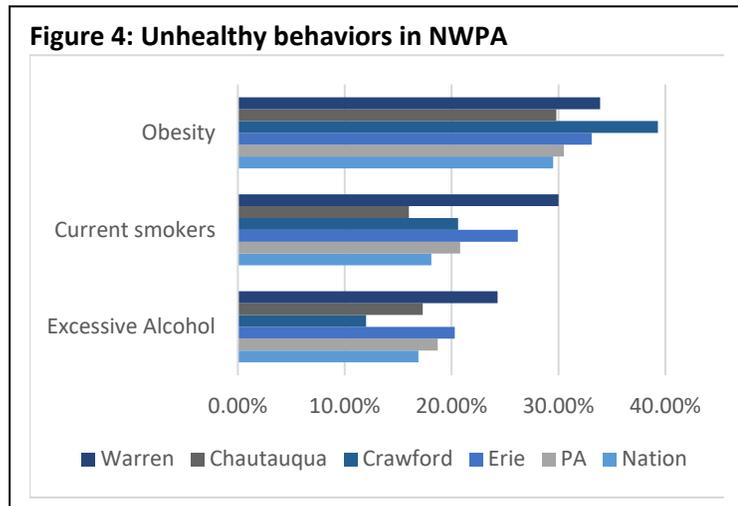
Additionally, 26.7% of students experienced bullying. Abusive sexual or romantic relationships as well as physical and cyber bullying are common sources of peer violence and subsequent trauma during adolescence.^{xviii} Our region is seeing a spike in violent crimes committed by juveniles. When identifying groups to target for violence reduction programming, children as young as 11 are appearing on lists of offenders in gun-related incidents. While there has been success in reducing group-related and gun-related crime committed by adults over the last three years, this spike in young people presents the concern that a new generation of violent offenders is developing. Unaddressed trauma is

resulting in dysregulated children and adults leading to increased risk for mental health challenges, substance use disorders, and violence.

Unfavorable health status

indicators in our region: Lifestyle and health behaviors impact overall health. Our region exhibits less favorable health behaviors than the rest of Pennsylvania and the nation. Figure 3 illustrates this for representative unhealthy behaviors.^{xix} The health of Erie, Crawford, and Warren Counties ranks 47, 54, and 21, respectively out of 67 Pennsylvania Counties.^{xx} For example, 24% of Erie, 26% of Crawford, and 23% of Warren

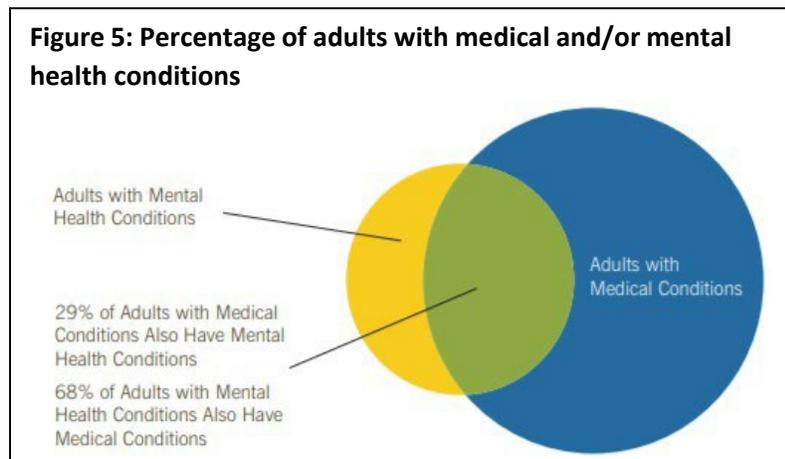
Figure 4: Unhealthy behaviors in NWPA



Counties report no exercise compared to 20% of the rest of PA. In addition, 75.5% of Pennsylvanians do not eat adequate amounts of fruits and vegetables while 78.3%, 76.3%, and 79.4% of Erie, Crawford, and Warren County residents do not.

Link between behavioral health and physical health: Behavioral health is the continuum of services for persons at risk of or suffering from mental, behavioral, or substance use disorders. Behavioral health issues are the leading cause of disease burden and contribute to rising healthcare costs in the United States.^{xxi} Despite poor physical health parameters, mental health causes more distress than physical ailments. The average number of mentally unhealthy days as self-reported in the past 30 days are 4.8, 4.7, 3.8, and 4.4 for Erie, Crawford, Chautauqua, and Warren Counties, respectively, while the number of physically unhealthy days in the past 30 days are 4.2, 4.1, and 4.0 for Erie, Crawford, Chautauqua, and Warren Counties, respectively.^{xxii} Individuals with a behavioral health condition encounter significant barriers to receiving appropriate healthcare due to low income, poor health habits, and difficulties with complicated healthcare systems and are thereby at greater risk of succumbing to the effects of undetected or untreated physical conditions. People with BH disorders have more co-occurring health conditions (figure 4).^{xxiii} There is a 10–25-year life expectancy reduction in patients with severe mental disorders. Mortality rates are 200-250% higher for schizophrenia, 35-50% higher for bipolar disorder compared to the general population. There is also a 1.8 times higher risk of dying associated with depression.^{xxiv} Though suicide (rates of 18.3%, 19.4%, 16.8% in Erie,

Crawford, and Warren Counties compared to 13.6% across the nation) is an important preventable cause of death in patients with mental illness, the majority of deaths in patients with severe mental illness are due to unattended physical health conditions.



Substance Abuse Disorder (SUD) and Any Mental Illness (AMI) Prevalence

According to the results from the National Survey on Drug Use and Health, 21% of U.S. adults and 16.5% of U.S. youth aged 6-17 experience mental illness annually.^{xxv} 32.1% of U.S. adults with mental illness also experienced a substance use disorder in 2020. Substance use defined as tobacco, alcohol, or illicit drug use in the past month is prevalent in approximately 58.7% of the population age 12 and older. This includes 50.0% who drank alcohol, 18.7% who used a tobacco product, and 13.5% who used an illicit drug.^{xxvi} The table below depicts prevalence of any mental illness and SUD related emergencies, morbidity and mortality. Though SUD data is aggregated by the Commonwealth of PA, there is a lack of comprehensive community mental health statistics as noted as one of the limitations of the Community Health Needs Assessment.

Measure	Data for Service Area	Comparative Data	Year	Data Source
Any mental illness (AMI) prevalence				
Adults with AMI	18.23% in all of PA	21.0% in all of US	2020	https://www.samhsa.gov/data/release/2020-national-survey-drug-use-and-health-nsduh-releases
SUD related hospitalizations and/or emergency room visits				
Doses of Narcan administered by EMS	813 in Erie, Crawford, and Warren Counties	25,404 in all of PA	2018-2021	https://data.pa.gov/Opioid-Related/Emergency-Medical-Services-EMS-Naloxone-Dose-Admin/wst4-3int/data
Hospitalizations for opioid overdose per 100,000	72.6 in Erie County	64.6 in all of PA	2016-2017	https://data.pa.gov/Opioid-Related/Rate-of-Hospitalizations-for-Opioid-Overdose-per-1/3f26-q827
SUD related morbidity and mortality				
Overdose deaths	1,789 in Erie, Crawford, and Warren Counties	32,822 in all of PA	2018-March, 2022	https://data.pa.gov/Opioid-Related/Overdose-Information-Network-Data-CY-January-2018-/hbkk-dwy3/data
New HIV diagnoses among IV drug users	120 in Erie, Crawford, and Warren Counties	3,440 in all of PA	2016-2019	https://data.pa.gov/Opioid-Related/Counts-and-Rates-of-New-HIV-Diagnoses-Among-Indivi/sckz-9pzz/data
New HCV diagnoses among ages 15-34	1101 in Erie, Crawford, and Warren Counties	27,831 in all of PA	2007-2016	https://data.pa.gov/Opioid-Related/Newly-Identified-Confirmed-Chronic-Hepatitis-C-Age/xsm2-kreq
Estimated lost lifetime wages due to opioid use	\$27,248,433 in Erie, Crawford, and Warren Counties	\$1,340,394,660 in all of PA	2019	https://data.pa.gov/Opioid-Related/Estimated-Lost-Lifetime-Wages-Due-to-Premature-Opi/8rwb-e4pv

The average delay between onset of mental illness symptoms and treatment is 11 years. 46.2% of U.S. adults with mental illness received treatment in 2020. 50.6% of U.S. youth aged 6-17 with a mental health disorder received treatment in 2016.^{xxviii} Even for those in treatment, about half of adults aged 18 or older with a serious mental illness (49.7%) perceived an unmet need for mental health services in the past year indicating whatever services they were receiving were not adequate.^{xxix} Service use in 2020 among people with co-occurring SUD and mental health issues reveals about half of adults aged 18 or older with a co-occurring SUD and any mental illness in the past year received either substance use treatment or mental health services in the past year (50.5%), but only 5.7% received both services.^{xxx}

Suicide rates for urban and rural areas increased overall from 2000 through 2018, with the pace of increase greater for rural suicide rates (48%), compared with urban (34%). In 2018, both the rural male suicide rate (30.7 per 100,000) was higher than the urban male suicide rate (21.5) and the rural rate for females (8.0) was higher than the urban rate (5.9).^{xxxi} Contributing in rural

areas include have been identified to include geographic isolation, socioeconomic factors, stigma and difficulty obtaining behavioral health services.

Maternal, Infant, and Child Health

Erie County Resident Live Births

There were 14,746 resident live births reported in Erie County during the period 2015 to 2019, for a corresponding crude live birth rate of 10.9 births per 1,000 total population. With respect to gender, males accounted for a slight majority of babies (7,560 births, 51.3%). Overall, 10,844 (73.5%) of the 14,746 resident births were to White women, 1,764 (12.0%) were to Black women, 485 (3.3%) were to Asian/Pacific Islander women, 865 (5.9%) were to women categorized as Multi-Race, 604 (4.1%) were to women classified as Other Race, and 184 (1.2%) were to women of Unknown Race. A total of 1,039 (7.0%) births were to women of Hispanic origin, of any race.

Selected summary statistics for Erie County and Pennsylvania resident live births are presented in Table 1.

Table 1. Selected Statistics for Erie County and Pennsylvania Resident Births, 2015-2019

<u>Measure</u>	<u>Erie County</u>	<u>Pennsylvania</u>	<u>Comparison</u>
Percent cesarean section deliveries	36.4	30.1	Higher
Percent low birth weight infants	8.7	8.3	Similar
Percent received prenatal care in first trimester	80.3	73.4	Higher
Percent preterm births	9.7	9.5	Similar
Percent non-smoking mothers during pregnancy	82.3	89.0	Lower
Percent unmarried mothers	49.1	41.2	Higher
Percent received WIC food during pregnancy	44.0	33.8	Higher
Percent Medicaid as source of payment	36.6	33.9	Higher
General fertility rate (ages 15 to 44)	57.4	57.6	Similar
Birth rates by age of mother			
Under 15	0.2	0.2	Similar
15 to 19	19.9	15.1	Higher
20 to 24	74.6	62.0	Higher
25 to 29	100.5	95.5	Higher
30 to 34	93.1	103.8	Lower
35 to 39	40.2	51.1	Lower
40 to 44	7.8	10.0	Lower
45 and older	0.7	0.8	Similar

Note: Rates are per 1,000 females for each specified age group.

Infant mortality is defined as the death of an infant less than 1 year of age. Of the 99 total infant deaths during 2015-2019, 68 (68.7%) occurred during the neonatal period (first 27 days of life). Erie County's infant mortality rate was 6.7 deaths per 1,000 live births (for PA, 6.0). The rates were 5.2 for Whites, 18.7 for Blacks, and 8.7 for Hispanics.

Mortality, Cancer, and Injury

Erie County Resident Deaths

A total of 14,643 Erie County residents died during the period 2015 to 2019, for a corresponding crude death rate of 10.1 deaths per 1,000 population. Overall, 7,280 (49.7%) deaths were in males and 7,363 (50.3%) were in females. The crude rates for males and females were 10.8 and 10.6 deaths per 1,000, respectively.

With respect to race and ethnicity, 13,662 (93.3%) deaths were in Whites, 759 (5.2%) were in Blacks, 203 (1.4%) were in persons classified as Other Race, and 19 (0.1%) were of Unknown Race. A total of 181 (1.2%) deaths were in Hispanics, of any race.

Although only 8.3% of all resident deaths occurred in persons under the age of 50 years, two-thirds (66.7%) occurred in those 70 years and older.

Leading Causes of Death

In 2015-2019, Erie County's age-adjusted death rate for all causes of death was 803.6 deaths per 100,000 population. The rates for males and females were 948.0 and 680.4, respectively. With respect to race, the rates for Whites and Blacks were 789.3 and 1,023.6, respectively.

The 10 leading causes of death collectively accounted for 70.3% of all county deaths (Table 1). Heart disease and cancer accounted for 42.4%.

Erie County males had a statistically significant higher rate than Erie County females for all causes of death and for six of the leading causes: heart disease, cancer, chronic lower respiratory diseases, accidents, diabetes mellitus, and suicide. Although females had a higher rate than males for Alzheimer's disease, the difference was not statistically significant.

Table 1. Erie County Leading Causes of Death – Age-Adjusted Rates by Sex, 2015-2019

Cause of Death	Total Population			Males			Females		
	Deaths	Erie Co.	PA	Deaths	Erie Co.	PA	Deaths	Erie Co.	PA
All Causes of Death	14,643	803.6	746.2	7,280	948.0	912.4	7,363	680.4	642.4
Heart Disease	3,120	164.7	175.3	1,645	210.8	223.5	1,475	127.7	138.8
Cancer (Malignant Neoplasms)	3,095	168.0	160.0	1,580	194.8	191.0	1,515	148.8	138.1
Chronic Lower Respiratory Diseases	785	42.2	36.2	391	49.1	40.4	394	37.3	33.4
Accidents (Unintentional Injuries)	779	54.0	61.0	497	73.4	84.6	282	35.1	38.7
Stroke (Cerebrovascular Diseases)	684	36.0	36.4	273	35.6	36.3	282	35.1	38.7
Nephritis, Nephrotic Syndrome & Nephrosis	433	23.0	16.0	196	25.9	20.0	237	20.8	13.4
Diabetes Mellitus	426	23.6	20.7	242	31.4	26.0	184	17.1	16.6
Alzheimer's Disease	405	20.4	21.2	125	17.1	17.0	280	22.2	23.6
Influenza & Pneumonia	306	15.9	14.6	144	18.7	17.3	162	13.9	12.8
Suicide (Intentional Self-Harm)	255	17.9	14.5	203	29.8	23.1	52	6.4	6.4

Note: Age-adjusted rates are per 100,000 population.

Cancer Mortality

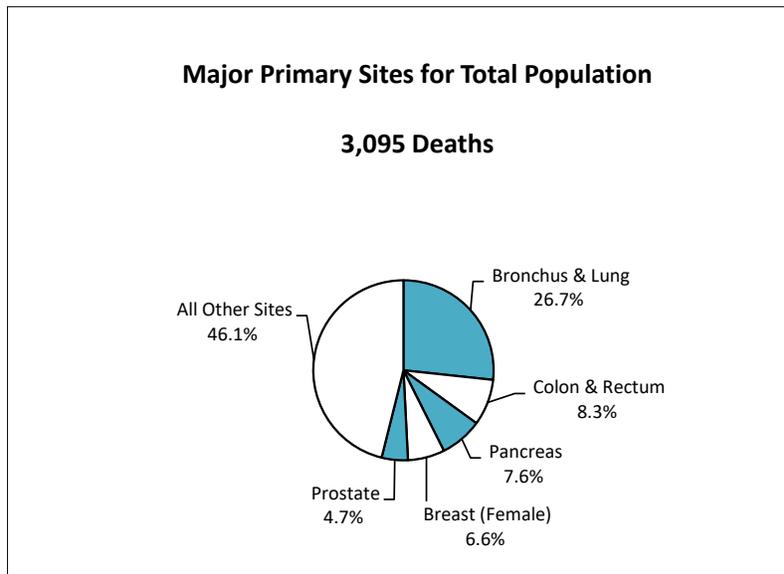
From 2015 to 2019, there were 3,095 cancer deaths (primary malignant neoplasms) among Erie County residents, for a corresponding age-adjusted death rate of 168.0 deaths per 100,000 population.

Overall, 1,580 deaths (51.1%) were in males and 1,515 (48.9%) were in females. The death rates for males and females were 194.8 and 148.8 deaths per 100,000, respectively. For Pennsylvania, the death rates were 160.0 for the total population, 191.0 for males, and 138.1

for females. With respect to race and ethnicity, 2,873 (92.8%) deaths were in Whites, 169 (5.5%) were in Blacks, and 53 (1.7%) were in persons of Other/Unknown Race. A total of 32 (1.0%) deaths were in Hispanics, of any race.

Erie County's five leading cancer mortality sites were: (1) lung and bronchus (827 deaths), (2) colon and rectum (258 deaths), (3) pancreas (235 deaths), (4) female breast (204 deaths), and (5) prostate (147 deaths). These sites accounted for 54.0% of all cancer deaths (Figure 1).

Figure 1. Erie County Cancer Deaths, 2015-2019



Among Erie County males, the five leading sites were: (1) lung and bronchus (399 deaths, 25.2%), (2) prostate (143 deaths, 9.1%), (3) colon and rectum (139 deaths, 8.8%), (4) pancreas (119 deaths, 7.5%), and (5) urinary bladder (74 deaths, 4.7%). These sites accounted for 55.3% of all male deaths.

Among Erie County females, the five leading sites were: (1) lung and bronchus (428 deaths, 28.3%), (2) breast (204 deaths, 13.5%), (3) colon and rectum (119 deaths, 7.9%), (4) pancreas (116 deaths, 7.7%), and (5) ovary (72 deaths, 4.8%). These sites accounted for 62.0% of all female deaths.

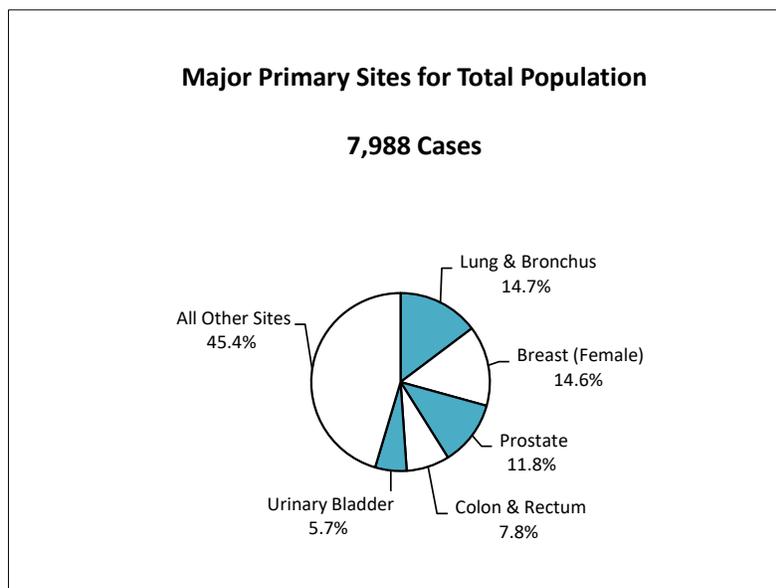
Cancer Incidence

From 2014 to 2018, there were 7,988 new cancer cases (primary invasive cancers and in situ urinary bladder cancers) diagnosed among Erie County residents, for a corresponding age-adjusted incidence rate of 458.5 cases per 100,000 population.

Overall, cancers were diagnosed in 4,041 males (50.6%) and 3,947 females (49.4%). The incidence rates for males and females were 493.5 and 436.7 cases per 100,000, respectively. For Pennsylvania, the incidence rates were 466.2 for the total population, 497.6 for males, and 448.3 for females. Cancers were diagnosed in 7,458 Whites (93.4%), 420 Blacks (5.3%), 110 persons of Other/Unknown Race (1.4%), and 46 Hispanics, of any race (1.0%).

Erie County's five leading cancer incidence sites were: (1) lung and bronchus (1,172 cases), (2) female breast (1,164 cases), (3) prostate (943 cases), (4) colon and rectum (625 cases), and (5) urinary bladder (457 cases). These sites accounted for 54.6% of all resident diagnoses (Figure 2).

Figure 2. Erie County Erie County New Cancer Cases, 2014-2018



Among Erie County males, the five leading sites were: (1) prostate (943 cases, 23.3%), (2) lung and bronchus (611 cases, 15.1%), (3) urinary bladder (343 cases, 8.5%), (4) colon and rectum (328 cases, 8.1%), and (5) non-Hodgkin lymphoma (204 cases, 5.0%). These sites accounted for 60.1% of all male diagnoses.

Among Erie County females, the five leading sites were: (1) breast (1,164 cases, 29.5%), (2) lung and bronchus (561 cases, 14.2%), (3) colon and rectum (297 cases, 7.5%), (4) uterus (276 cases, 7.0%), and (5) thyroid (198 cases, 5.0%). These sites accounted for 63.2% of all female diagnoses.

Infectious Diseases

Chlamydia

Chlamydia is a common sexually transmitted infection (STI) caused by the bacterium *Chlamydia trachomatis*. Symptoms can be mild or absent and a majority of infections are not diagnosed. The CDC estimates that only about 10% of men and 5-30% of women with laboratory-confirmed chlamydial infection develop symptoms.

- In 2019, there were 1,259 chlamydia cases reported in Erie County for a crude incidence rate of 466.8 cases per 100,000 (482.2 for PA), compared to 1,288 cases in 2018 with a rate of 473.4 (463.3 for PA).
- From 2015-2019, there were 5,801 cases for an average annual rate of 423.3 per 100,000 (465.3 for PA).
- In 2019, the rate of chlamydia was 59% higher for women (603.4, 823 cases) compared to men (327.0, 436 cases).
- Nearly two-thirds (64.4%) of chlamydia cases in 2019 occurred among those age 15-24.
- The highest incidence of chlamydia occurs among women age 15-24 (3,231.3 per 100,000).

Gonorrhea

Gonorrhea is a common STI caused by the bacterium *Neisseria gonorrhoeae*. Untreated, gonorrhea can cause pelvic inflammatory disease (PID) in women and may lead to infertility in men.

- In 2019, there were 331 gonorrhea cases reported in Erie County for a crude incidence rate of 127.7 cases per 100,000 (125.6 for PA), compared to 236 cases in 2018 with a rate of 86.7 (124.0 for PA).
- From 2015-2019, there were 1,670 cases for an average annual rate of 121.8 per 100,000 (116.7 for PA).
- In 2019, the rate of gonorrhea was 31% higher for men (141.8, 189 cases) compared to women (104.1, 142 cases).

- The largest proportion of gonorrhea cases in 2019 occurred among those age 25-34 (131 of 333 cases, 40.0%).
- The highest incidence of gonorrhea occurred among men age 25-34 (433.1 per 100,000).

Hepatitis A

Hepatitis A is an acute, vaccine-preventable liver disease caused by the hepatitis A virus (HAV) that is transmitted by the fecal-oral route via person-to-person contact or by contaminated food or water. HAV infection does not result in chronic infection or chronic liver disease.

- In 2019, there were no confirmed cases of hepatitis A in Erie County.
- The Healthy People 2020 Goal is 0.3 cases per 100,000.

Hepatitis B

Hepatitis B is a vaccine-preventable liver disease caused by hepatitis B virus (HBV) and is transmitted by contact with the blood or other body fluids of infected individuals. HBV infection can lead to chronic or lifelong infection and liver disease.

Acute Hepatitis B

- In 2019, there were 2 confirmed cases of acute hepatitis B in Erie County with a crude incidence rate of 0.7 cases per 100,000 (0.7 for PA).
- The Healthy People 2020 Goal is 1.9 cases per 100,000 aged 19 and above.

Chronic Hepatitis B

- In 2019, there were 12 confirmed cases of chronic hepatitis B in Erie County with a crude incidence rate of 4.4 cases per 100,000 (7.2 for PA).

- **Hepatitis C**

Hepatitis C is a liver disease caused by the hepatitis C virus (HCV) and is spread by contact with the blood of an infected person. Most individuals with HCV infection develop a chronic infection that is asymptomatic with chronic liver disease developing decades later.

Acute Hepatitis C

- In 2019, there were 2 reported cases of acute hepatitis C in Erie County with a crude incidence rate of 0.7 cases per 100,000.
- The Healthy People 2020 Goal is 0.2 new cases per 100,000.

Chronic Hepatitis C

For chronic hepatitis C, both confirmed and probable cases are counted. However, confirmed cases are generally used to report overall rates for comparison.

- In 2019, there were 346 confirmed cases of chronic hepatitis C in Erie County with a crude incidence rate of 128.2 per 100,000.

Influenza

Influenza (also known as the flu) is a vaccine-preventable respiratory illness caused by influenza viruses. The virus is usually spread from person to person during coughing and sneezing.

To standardize disease case counting, the CDC assigns a number to every week (Sunday through Saturday) in the calendar year with Week 1 at the beginning of the year. The flu season officially begins with CDC Week 40 of one year and ends with CDC Week 39 of the following year. Case counts for the flu season correspond to the cases reported during these weeks.

- For the 2019-2020 Erie County flu season, a preliminary total of 4,566 cases were reported (2,264 seasonal Type A, 2,302 Type B, and 0 unknown types).
- Among age groups, 19% of all cases were 0 to 4 years old, 35% were aged 5-18, 6% were aged 19-24, 25% were aged 25-49, 8% were aged 50-64, and 6% were aged 65 and above. Six deaths and 202 hospitalizations were reported.

Lyme Disease

Lyme disease is caused by the bacterium *Borrelia burgdorferi* and is transmitted to humans by the bite of infected blacklegged ticks. Pennsylvania is considered a high incidence state for Lyme disease in the United States with the majority of cases occurring in the eastern portion of the state. However, in recent years, Erie County has seen a steep rise in the number of cases as well as the incidence rate for Lyme disease.

- From 2009 to 2019, the number of cases of Lyme disease increased by 647% from 19 to 142.

- The incidence rate per 100,000 population for Lyme disease in Erie County increased from 6.8 in 2009 to 52.6 in 2019 (70.3 for PA).
- The Erie County Department of Health has introduced an aggressive awareness campaign in response to this increase.

Measles

Measles is a vaccine-preventable disease spread through coughing or sneezing and is characterized by rash, high fever, coughing, and runny nose. Complications can occur.

- There were no reported cases of measles in Erie County in 2019. The last reported case occurred in 1991.

Mumps

Mumps is a vaccine-preventable disease caused by the mumps virus.

- From 2003 to 2019, only one case of mumps occurred in Erie County. It was reported in 2006.

Pertussis (Whooping Cough)

Pertussis, a vaccine-preventable respiratory disease caused by the bacteria *Bordetella pertussis*, is found mainly in children.

- In 2019, there were 7 cases of pertussis reported in Erie County for a crude incidence rate of 2.6 cases per 100,000 (5.0 for PA) compared with 2 cases in 2015 with a rate of 0.7.

Respiratory Syncytial Virus

Respiratory syncytial virus (RSV) is the most common cause of bronchiolitis and pneumonia in children under 1 year of age in the United States.

- In 2019, there were 1,002 reported cases of RSV in Erie County compared to 152 cases in 2015.

Tuberculosis

Tuberculosis (TB) is a mycobacterial disease that is spread from person to person through the air and usually affects the lungs.

Active Tuberculosis

- In 2019, there were 3 cases of tuberculosis disease reported in Erie County for a crude incidence rate of 1.1 cases per 100,000 (1.5 for PA).
- From 2017-2019, there were 10 reported cases of tuberculosis with an average annual incidence rate of 1.2 (1.6 for PA).
- The Healthy People 2020 Goal for active tuberculosis is 1.0 new case per 100,000 population.

Latent Tuberculosis Infection (LTBI)

- In 2019, there were 171 cases of LTBI reported in Erie County. Erie County has a large refugee resettlement population which may account for elevated case counts.

Varicella zoster (Chickenpox)

Chickenpox is a vaccine-preventable disease caused by infection with the *Varicella zoster* virus.

- In 2019, there was 1 chickenpox case reported in Erie County for a crude incidence rate of 0.4 cases per 100,000 (3.7 for PA), compared to 21 cases in 2015 with a rate of 7.6 (5.8 for PA).
- From 2015-2019, there were 52 cases for an average annual rate of 3.8 (4.9 for PA).

West Nile Virus

West Nile virus is transmitted to humans by mosquitoes. About 20% of infected individuals develop mild symptoms (West Nile fever) and less than 1% develop a neurological infection (West Nile encephalitis).

- In 2019, there was 1 reported cases of West Nile fever.

COVID-19

COVID-19 (coronavirus disease 2019) is caused by infection with the SARS-CoV-2 virus, and was discovered in December 2019 in Wuhan, China. COVID-19 is very contagious and has quickly spread across the globe.

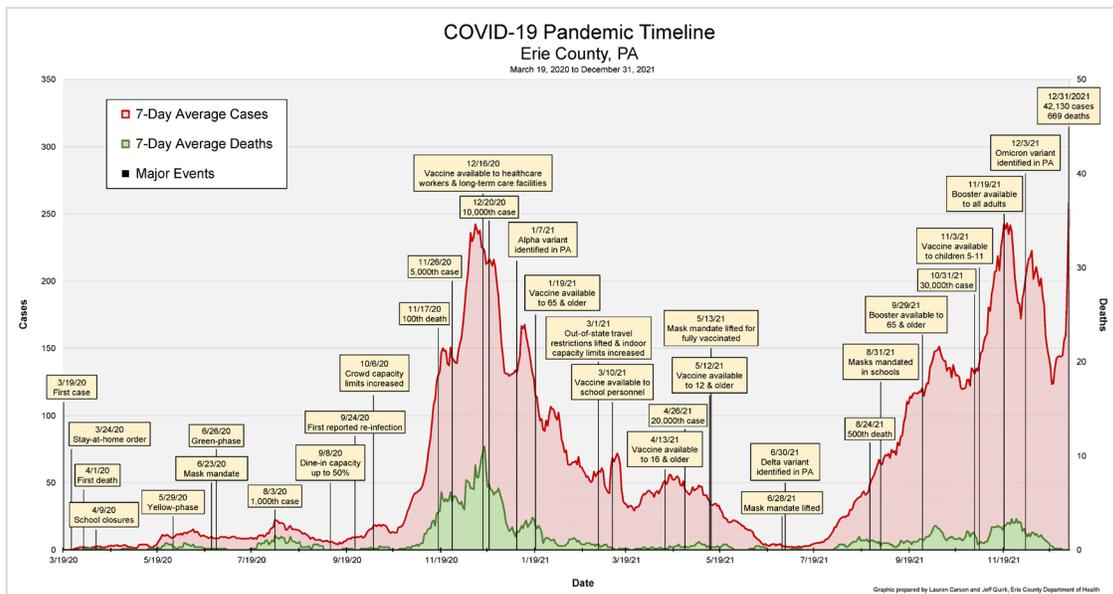
COVID-19 most often causes respiratory symptoms that can feel much like a cold, a flu, or pneumonia. However, COVID-19 may attack other parts of the body in addition to the lungs and respiratory system. Although most people with COVID-19 have mild symptoms, some become severely ill. Some people including those with minor or no symptoms may suffer from a range of post-COVID conditions known as “long COVID”. Older adults and people with certain underlying medical conditions are at increased risk of severe illness from COVID-19.

As of January 31st, 2022, there have been 54,645 COVID-19 cases reported among Erie County residents. Of these, 48,087 (88.0%) are confirmed and 6,558 (12.0%) are probable cases. There are somewhat more female cases than males, 53.2% compared to 46.8%. To date, 32.0% of cases are over 50 years of age, and 13.2% are 65 and older.

There have been 728 deaths among county residents reported to PA-NEDSS, with 656 confirmed and 72 probable cases. The overall case fatality rate among reported cases is 1.3%. Males account for 53.2% of all deaths. The mean age of persons who have died is 76.5 years, with ages ranging from 17 to 103 years.

An Erie County COVID-19 pandemic timeline through December 31st, 2021 is shown in Figure 1, and highlights major events together with case and death counts.

Figure 1. Erie County Pandemic Timeline, 2020-2021



Appendix A: Community Resources

PA 2-1-1 Northwest, Powered by United Way of Erie County

Call center that provides telephone numbers and web resources for finding health and human services for everyday needs and in crisis situations.

[PA 2-1-1 Northwest](#)



Erie County Free and Low Cost Medical/Dental Clinics and Community Health Centers

[Erie County Free Clinics Directory](#)



Erie County Department of Human Services, Erie Sprout

A web-based directory that contains a wide range of community resources.

[Erie Sprout](#)

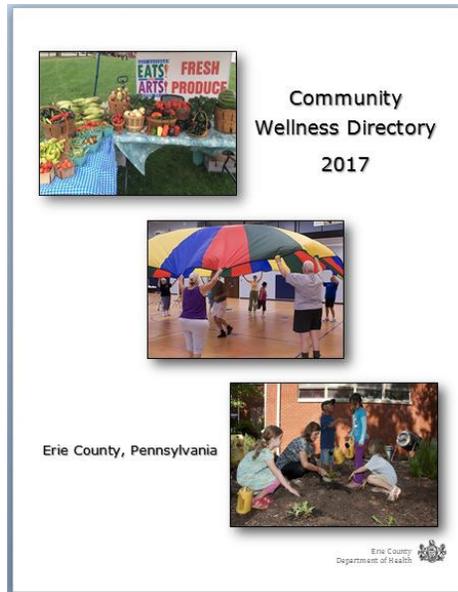


Erie County
Erie County
Directory

Department of Health, 2017
Community Wellness

Nutrition and physical activity information for Erie County.

[Erie County Department of Health](#)



Pennsylvania Department of Health, 2015 Erie County Online Resource Guide

[Pennsylvania Department of Health](#)

Erie County Resource Guide

Children and youth with special healthcare needs and their families
The Special Kids Network Helpline – 1-800-986-4550

- o Advocacy for special healthcare needs
 - o [The Arc of Pennsylvania](#) [Website link]
The largest advocacy organization in the United States for people with intellectual and developmental disabilities containing 34 local chapters serving 56 counties across Pennsylvania.
 - o [Erie Sprout](#) 24 Hour Information Hotline: 814-874-6996
[Select 'Community Resources' Tab to review various Categories and Organizations. Special Needs organizations are listed within 'Adult Resources'.] Erie Sprout is supporting people through resources, outreach, understanding, and time, and was developed by a group of human service parents and professionals in Erie County. The purpose of the website is to educate people and give them a place to find information for themselves and their loved ones.
 - o [Juvenile Law Center](#) [Select 'Erie' County then 'Advocacy and Legal Services'.]
Advancing the rights and well-being of children in jeopardy. 1-888-864-6393
 - [Association of Retarded Citizens \(ARC\)](#) [Please look at website for contact info]
Offers services for individuals with intellectual and developmental disabilities such as early intervention, supported employment, job training, transition planning, respite care, supported living and transportation
 - [Community Resources For Independence, Inc.](#) 1-800-530-5541 or 814-838-7222
Offers independent living services to people with disabilities along with accessibility education, waiver information, independent living services, attendant care service coordination, assisting technology, and information and referral
 - [Voices for Independence](#) Erie: 814-874-0064 or 1-866-407-0064
Voices for Independence provides services for individuals with physical disabilities such as independent living skills training, personal care services, housing services, peer support, information and referral
 - [Pennsylvania Bar Association Lawyer Referral Service](#) 1-800-932-0311
Pennsylvania Bar Association Lawyer Referral Service matches clients to a Pennsylvania lawyer in a specific area of law.
 - [Northwestern Legal Services](#) 814-362-6596 or 800-756-5703
Legal services for low income persons
 - [American Civil Liberties Union](#) Pittsburgh: 412-681-7796
Free Legal Help to those who have had their constitutional rights violated
 - [Office of Vocational Rehabilitation](#) 1-800-541-0721 or 814-871-4551
OVR provides assistance with obtaining and maintaining employment to individuals with disabilities.
 - [Special Kids Network](#) 1-800-986-4550
Statewide referral service designed to serve families of children with chronic health of disabling conditions through information and service coordination
 - [Disability Rights Network Of Pennsylvania](#) Harrisburg: 717-236-8110
Philadelphia: 215-238-8070; Pittsburgh: 412-391-5225

Updated June 2015

Erie County Guide to Adult Mental Health Services

<https://www.eriecountypa.gov/media/271284/erie-county-adult-mh-services.pdf>

**ERIE COUNTY GUIDE
TO
ADULT MENTAL HEALTH SERVICES**

Additional Community Resources

Community Based Organizations and Collaboratives

- Regional Tobacco Coalition, Northwest PA
- School-Based Health Centers
- Healthcare Collaborative Initiative
- Erie Vital Signs
- United Way Health Initiatives
- Erie County Policy and Planning Council
- Erie Together
- Gannon University, Erie GAINS
- Mercyhurst Civic Institute, Mercyhurst University

Medical and Health Resources

Cancer Resources

- American Cancer Society: Erie and Corry, PA, Local
- UPMC Hamot: Cancer Institute
- St. Vincent Hospital: Cancer Institute
- Regional Cancer Center - Northwest PA - Erie

Cardiovascular Health Resources

- American Heart Association – Online Programs
- UPMC Hamot – Cardiopulmonary Rehabilitation
- UPMC Hamot – Dr. Dean Ornish Program to Reverse Heart Disease
- St. Vincent Heart and Vascular Center
- LECOM Health – Cardiology
- Corry Memorial Hospital - Cardiology

Diabetes Resources

- St. Vincent Center for Nutrition and Diabetes
- UPMC Hamot - Diabetes Institute
- The Sight Center of NWPA: Diabetes Prevention Program
- LECOM Health Institute of Successful Aging: Diabetes Care Pathway

Home Health Care/Medical Equipment Resources

- Blackburn's
- UPMC Health Plan
- Great Lakes Home Healthcare Services
- Lynch Home Medical Supply

- Lanza Respiratory Services and Home Medical Equipment
- Interim HealthCare of Erie, Inc.
- BAYADA Home Health Care
- LECOM Health - Regional Home Health
- Ramps of Hope
- American Home Patient
- Apria Healthcare
- Carter Orthopedics Ltd.
- Lincare
- Villa Medical Supply
- Community Resources for Independence

Hospice Resources

- Hospice of Metropolitan Erie
- Heartland Hospice Services of Erie
- Great Lakes Hospice Care - UPMC Hamot
- LECOM Health - Regional Home Health and Hospice
- Visiting Nurse Association of Erie County

Urgent Care

- UPMC Urgent Care West
- UPMC Urgent Care South
- EmergencyCare, Inc.
- Corry Memorial Hospital-Corry Ambulance Services
- Millcreek Paramedic Service
- St. Vincent Hospital Urgent Care
- Millcreek Community Hospital Urgent Care
- MedExpress Urgent Care
- Erie VA Medical Center
- PlushCare

Vision

- Bureau of Blindness and Visual Services
- Sight Center of NWPA

Behavioral Health Resources

Crisis or Mental Health Resources

- Mental Health Association - Our Place
- National Runaway Safeline
- National Youth Crisis Hotline
- Adult Protective Services - GECAC
- Safe Harbor Behavioral Health of UPMC Hamot
- Crime Victim Center - Crisis Intervention
- Stairways Behavioral Health
- Corry Counseling Services
- Family Services of NWPA
- Millcreek Community Hospital – Millcreek Behavioral Care

Housing and Living Resources

Food and Meals

- The Second Harvest Food Bank
- St. Martin Center
- Salvation Army Family Store
- North East Community Food Pantry
- Metro-Erie Meals on Wheels (City Residents)
- Kearsarge Area Food Pantry
- Joel Two Restoration Outreach
- Farmers Market Nutrition Program - GECAC
- Erie City Mission - Family Care Center, Food Pantry
- Emmaus Ministries
- Community of Caring
- Bethany Outreach Center
- Second Harvest Food Bank NWPA
- Tri-Boro Senior Center

Clothing Assistance

- Thrifty Shopper
- Salvation Army Family Store - Erie and Corry
- Rainbow Connection Thrift Store
- My Sister's Closet
- Bella Design
- 4 Neighbors In North East Thrift Store (4 N.I.N.E)
- Erie United Methodist Alliance

Homeless Prevention and Outreach

- Erie United Methodist Alliance - Hope for the Homeless
- Erie County Care Management - Homeless Case Management
- GECAC Homeless Prevention
- St. Martin Center - Housing Services
- Mental Health Association - Consumer Recovery Center

ⁱ <https://www.cdc.gov/mmwr/volumes/66/ss/ss6602a1.htm> (accessed April 12, 2022)

ⁱⁱ <https://www.cdc.gov/mmwr/volumes/66/ss/ss6618a1.htm> (accessed April 12, 2022)

ⁱⁱⁱ https://www.cdc.gov/mmwr/volumes/69/wr/mm6903a1.htm?s_cid=mm6903a1_w (accessed April 12, 2022)

^{iv} <https://www.cdc.gov/mmwr/volumes/66/ss/ss6619a1.htm> (accessed April 12, 2022)

^v <https://www.ruralhealthresearch.org/publications/1323> (accessed April 12, 2022)

^{vi} <https://www.samhsa.gov/data/report/2019-nsduh-annual-national-report> (accessed April 16, 2022)

^{vii} <https://eriecountypa.gov/wp-content/uploads/2019/03/2018-erie-county-community-health-needs-assessment.pdf> (accessed April 11, 2022)

^{viii} <https://www.psychiatry.org/File%20Library/Psychiatrists/Cultural-Competency/Mental-Health-Disparities/Mental-Health-Facts-for-LGBTQ.pdf> (accessed April 16, 2022)

^{ix} <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4806482/> (accessed April 17, 2022)

-
- x <https://www.kff.org/racial-equity-and-health-policy/issue-brief/health-and-access-to-care-and-coverage-for-lesbian-gay-bisexual-and-transgender-individuals-in-the-u-s/> (accessed April 16, 2022)
- xi <https://www.cdc.gov/mmwr/volumes/65/ss/ss6509a1.htm> (accessed April 16, 2022)
- xii <https://pubmed.ncbi.nlm.nih.gov/28346079/> (accessed April 16, 2022)
- xiii https://www.cdc.gov/brfss/annual_data/annual_2020.html (accessed April 11, 2022)
- xiv <https://healthinappalachia.org/disparities-report/interactive-report>(accessed April 11, 2022)
- xv <https://www.cdc.gov/vitalsigns/aces/index.html> (accessed April 4, 2022)
- xvi <https://www.governor.pa.gov/wp-content/uploads/2021/10/Trauma-Informed-PA-Plan-Final.pdf> (accessed April 4, 2022)
- xvii <https://www.health.pa.gov/topics/HealthStatistics/BehavioralStatistics/InjuryStatistics/Documents/ACE%20Report%202019.pdf> (accessed April 4, 2022)
- xviii [https://www.pccd.pa.gov/Juvenile-Justice/Pages/Pennsylvania-Youth-Survey-\(PAYS\).aspx](https://www.pccd.pa.gov/Juvenile-Justice/Pages/Pennsylvania-Youth-Survey-(PAYS).aspx) (accessed April 4, 2022)
- xix <https://www.communitycommons.org/collections/Maps-and-Data> (accessed April 5, 2022)
- xx <https://www.countyhealthrankings.org/app/pennsylvania/2021/rankings/erie/county/outcomes/overall/snapshot> (accessed April 5, 2022)
- xxi <https://jamanetwork.com/journals/jama/fullarticle/2646703> (accessed April 17, 2022)
- xxii <https://www.communitycommons.org/entities/4c128e63-7457-4e58-84bb-ac161fa0277e> (accessed April 17, 2022)
- xxiii <https://www.aha.org/system/files/research/reports/tw/12jan-tw-behavhealth.pdf> (accessed April 17, 2022)
- xxiv https://www.who.int/mental_health/management/info_sheet.pdf (accessed April 5, 2022)
- xxv <https://www.nami.org/mhstats> (accessed April 17, 2022)
- xxvi <https://www.samhsa.gov/data/sites/default/files/reports/rpt35325/NSDUHF1PDFWHTMLFiles2020/2020NSDUHF1PDFW102121.pdf> (accessed April 17, 2022)
- xxvii <https://eriecountypa.gov/wp-content/uploads/2019/12/2018-erie-county-community-health-needs-assessment.pdf> (accessed April 17, 2022)
- xxviii <https://www.nami.org/mhstats> (accessed April 17, 2022)
- xxix https://www.samhsa.gov/data/sites/default/files/2021-10/2020_NSDUH_Highlights.pdf (accessed April 17, 2022)
- xxx https://www.samhsa.gov/data/sites/default/files/2021-10/2020_NSDUH_Highlights.pdf (accessed April 17, 2022)
- xxxi <https://www.cdc.gov/nchs/products/databriefs/db373.htm> (accessed April 17, 2022)