

Utah Health Status Update:

Results of Utah's 2009 Youth Risk Behavior Survey

December 2009

Utah Department of Health

The Youth Risk Behavior Survey (YRBS) monitors priority health risk behaviors among adolescents. The YRBS is conducted every two years during the spring semester and provides data representative of 9th through 12th grade students in public schools in Utah. The YRBS has been used to monitor health risk behaviors among Utah's youth since 1991. In 2009, 52 of 55 randomly selected schools participated and 1,607 of the 2,477 sampled students submitted questionnaires for an overall response rate of 61%. Students do not complete questionnaires in Utah without active parental consent. Utah's YRBS data are available on the Indicator Based Information System (IBIS) at <http://ibis.health.utah.gov/query/selection/yrebs/YRBSSelection.html>.

Physical Activity, Nutrition and Obesity

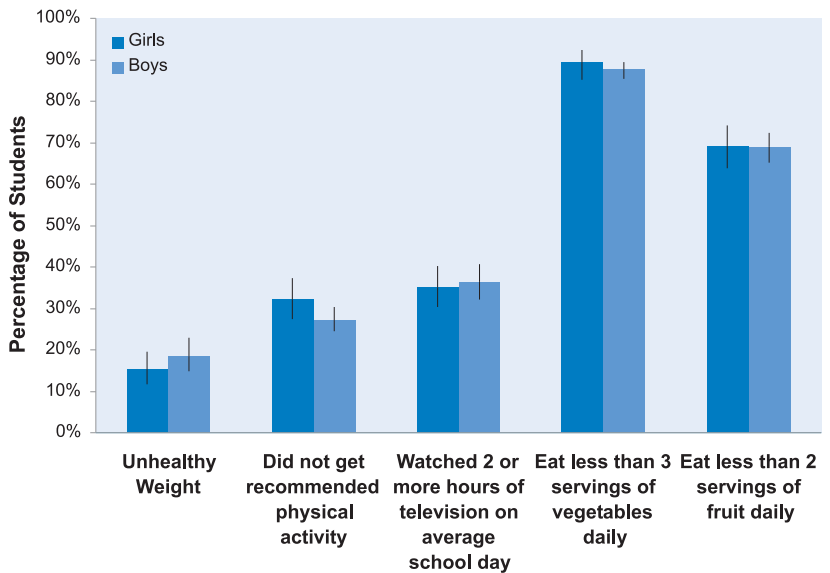
Using self-reported height and weight, 10.5% of youth were overweight (between the 85th and 95th percentile for age and sex) and an additional 6.4% were obese (greater than the 95th percentile). Combined, 17.1% were at an unhealthy weight. Nearly one third of youth (32.1% of girls and 27.2% of boys) did not get either three days per week of vigorous exercise for at least 20 minutes or five days per week of moderate exercise for at least 30 minutes. More than 35% of boys and girls watched two or more hours of television on an average school day. Only 10.6% of girls and 12.4% of boys ate three or more servings of vegetables daily while 30.8% of girls and 31.1% of boys ate two or more servings of fruit daily (see Figure 1). In addition, about one third of girls (30.0%) and one fifth of boys (17.9%) thought they were overweight while nearly half of girls (49.1%) and more than one in five boys (21.7%) ate less food, fewer calories, or foods low in fat to lose weight or to avoid gaining weight.

Tobacco Use

One fourth (26.7%) of boys and one fifth (20.2%) of girls had ever tried cigarettes. More boys (10.2%) than girls (6.5%) smoked cigarettes in the past 30 days. Among those who smoked in the past 30 days, 41.2% of boys and

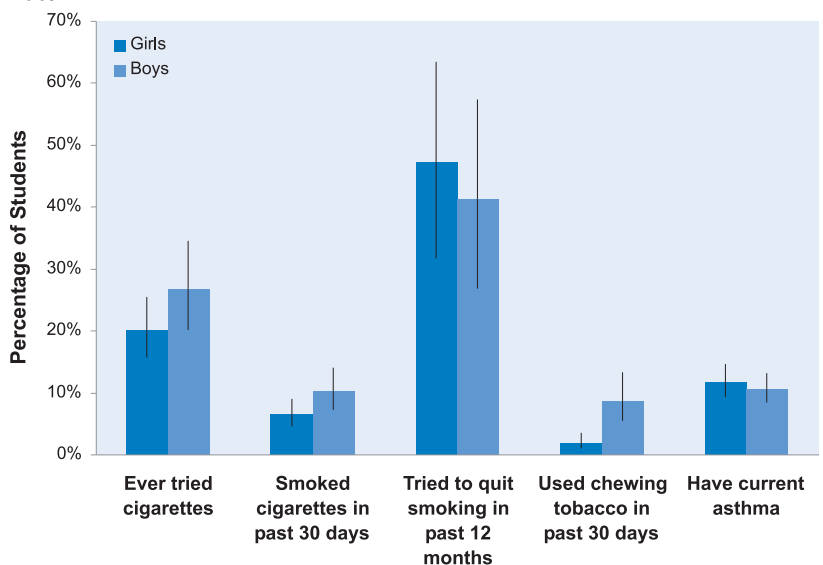
Physical Activity, Nutrition, and Obesity

Figure 1. Percentage of high school students (grades 9-12), Utah YRBS, 2009



Tobacco Use and Current Asthma

Figure 2. Percentage of high school students (grades 9-12), Utah YRBS, 2009



47.3% of girls tried to quit in the past year. The use of chewing tobacco in the past 30 days was much higher for adolescent boys (8.7%) than girls (1.9%). One in ten students (10.6% of boys, 11.7% of girls) had been told they had asthma and they currently still have asthma (see Figure 1). Additionally, 6.8% smoked cigars in the past 30 days, 2.4% smoked on school property, and 5.0% smoked every day for the past 30 days.

Injury and Violence

Among students who rode a bicycle in the past 12 months, 75.7% of girls and 77.3% of boys never or rarely wore a helmet. When riding in a car driven by someone else, 5.4% of girls and 9.8% of boys rarely or never wore a seatbelt. More than one third of adolescents (38.0% of girls and 40.7% of boys) spent one or more minutes per day texting or using a hand-held electronic device while they were driving during the past seven days. Data collection happened prior to July 1, 2009 when a Utah law went into effect that prohibits text messaging while driving. Nearly 1 in 12 girls (8.2%) had ever been physically forced to have sexual intercourse when they did not want to. About 1 in 17 boys (5.8%) were forced to have sex when they did not want to (see Figure 3). Nearly one third of students (28.2%) were in a physical fight in the past year and 10.6% of students were in a physical fight on school property during the past year.

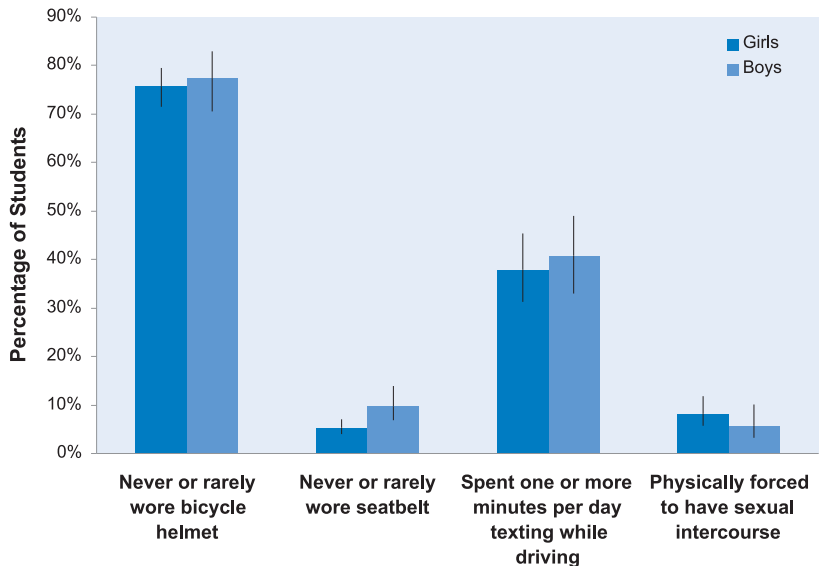
Alcohol and Other Drug Use

When asked about alcohol consumption, about one in five students (14.6% of girls and 21.6% of boys) had at least one drink on one or more of the past 30 days. More boys (14.5%) than girls (8.0%) drank five or more drinks in a row, within a couple of hours in the past 30 days, although the difference is not statistically significant. One in ten adolescents (8.0% of girls, 11.9% of boys) used marijuana one or more times in the past 30 days. About twice as many boys (5.3%) ever used steroid pills or shots without a doctor's prescription as girls (2.6%) (see Figure 4). Other drugs used one or more times during their life included cocaine (5.6%), sniffing glue (10.4%), heroin (3.2%), methamphetamines (3.9%), and ecstasy (7.4%).

The YRBS data have and will continue to be used to describe the prevalence and trend in risk behaviors among youth. The information is used to identify and address areas of greatest concern. The data is critical to ensuring the health and well-being of high school students in Utah and to evaluate the success of programs that target high-risk behaviors among Utah's adolescents.

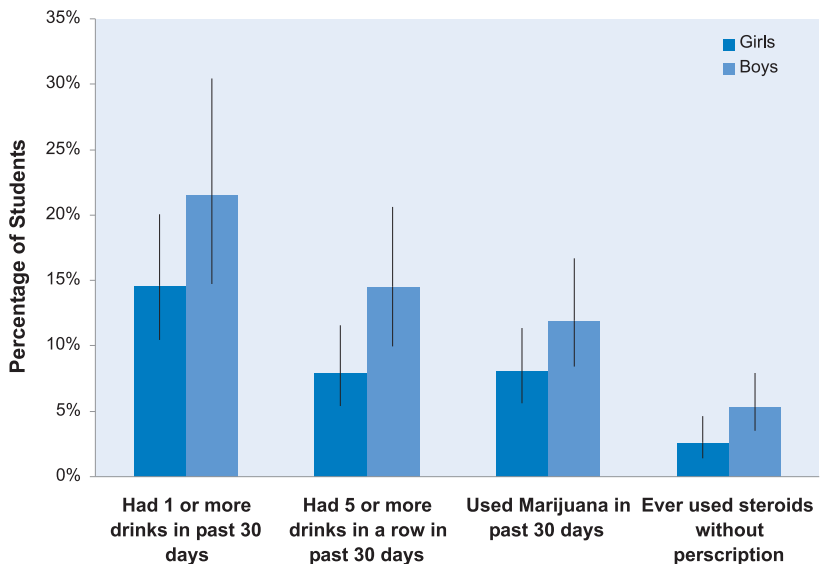
Injury and Violence

Figure 3. Percentage of high school students (grades 9-12), Utah YRBS, 2009



Alcohol and Other Drug Use

Figure 4. Percentage of high school students (grades 9-12), Utah YRBS, 2009



December 2009 Utah Health Status Update

For additional information about this topic, contact Michael Friedrichs, MS, Bureau of Health Promotion, Utah Department of Health, Box 142106, Salt Lake City, UT 84114-2106, (801) 538-6244, email: mfriedrichs@utah.gov, or the Office of Public Health Assessment, Utah Department of Health, Box 142101, Salt Lake City, UT 84114-2101, (801) 538-9191, email: chdata@utah.gov

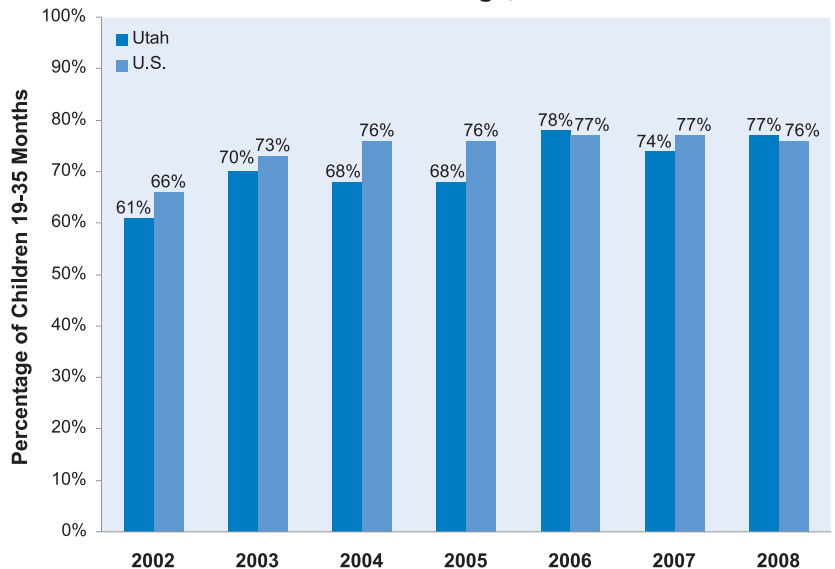
Breaking News, November 2009

Childhood Vaccination

The National Immunization Survey (NIS) is conducted each year by the Centers for Disease Control and Prevention to provide a consistent data set for evaluation of vaccination efforts at the state level and selected urban/regional areas. Two phases of data collection are used to obtain vaccination information: a random-digit-dialing (RDD) survey designed to identify households with children between 19 and 35 months of age, followed by the NIS Provider Record Check (PRC) survey, which obtains provider-reported vaccination histories for these children. These counts are then compared with the number of currently recommended vaccine doses to determine whether the child is up-to-date. The current recommendation for childhood up-to-date status, commonly referred to as the 4:3:1:3:3:1 series includes: 4 doses Diphtheria/Tetanus/Pertussis (DTaP), 3 doses of Polio, 1 dose of Measles/Mumps/Rubella (MMR), 3 doses of Haemophilus influenzae type-B (Hib), 3 doses of Hepatitis B (Hep B), and one dose of Varicella vaccine.

Results from the most recent NIS were published in August 2009 and the 7 year trend can be found in the figure to the right. Utah's coverage level increased from 73.6% (95% CI: 67.5%, 79.7%) in 2007 to 78.1% (95% CI: 69.3%, 83.9%) in 2008. Utah has experienced a statistically significant improvement in coverage from 2002 to 2008.

Utah Childhood Immunization Coverage, 4:3:1:3:3:1 Series



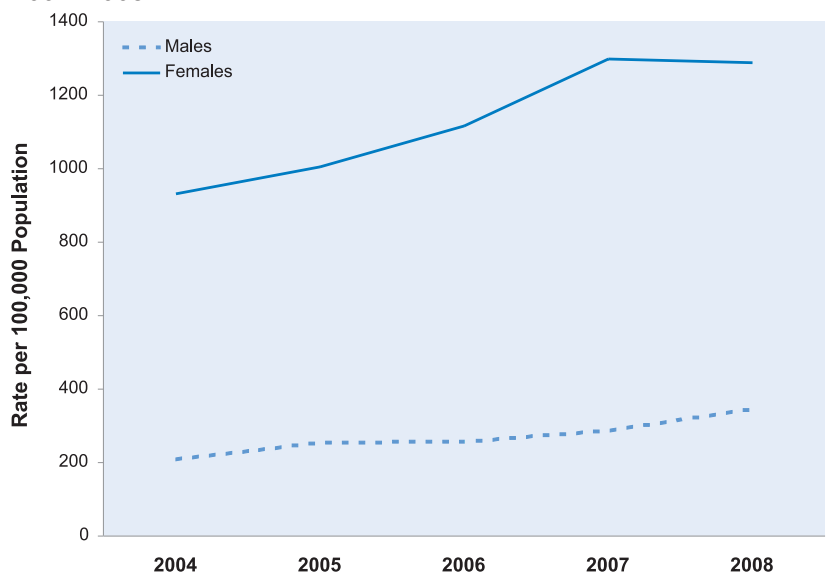
Community Health Indicators Spotlight, November 2009

Adolescent Chlamydia in Utah

Chlamydia trachomatis infections were the most commonly reported notifiable disease in Utah from 2004 to 2008. During this time period, 15- to 19-year-old women had the highest rate of chlamydia each year, with a five-year average of 1,131.0 cases per 100,000 population. Chlamydia rates in 15- to 19-year-old women were about four times higher than in males in the same age group. During this timeframe, chlamydia rates in adolescent females increased by 38% and the rates in adolescent males increased by 66%.

Chlamydia infections in both men and women are commonly asymptomatic. Females with chlamydia infection are at risk for developing pelvic inflammatory disease (PID), and both men and women may become infertile as a result of untreated chlamydia infections. In addition, pregnant women with chlamydia can pass the infection to their infant during delivery, potentially resulting in pneumonia or neonatal ophthalmia. Adolescent women may have a physiologically increased susceptibility to infection due to increased cervical ectopy.

Chlamydia Rates Among 15- to 19-year-olds by Sex, Utah, 2004–2008



Monthly Health Indicators Report

(Data Through October 2009)

Monthly Report of Notifiable Diseases, October 2009	Current Month # Cases	Current Month # Expected Cases (5-yr average)	# Cases YTD	# Expected YTD (5-yr average)	YTD Standard Morbidity Ratio (obs/exp)
Campylobacteriosis (Campylobacter)	24	26	262	283	0.9
Enterotoxigenic Escherichia coli (E. coli)	7	11	99	93	1.1
Hepatitis A (infectious hepatitis)	2	1	6	17	0.3
Hepatitis B (serum hepatitis)	1	3	5	22	0.2
Influenza†	Weekly updates at http://health.utah.gov/epi/h1n1flu/UT_update.html				
Measles (Rubeola, Hard Measles)	0	0	0	0	--
Meningococcal Diseases	1	0	2	8	0.2
Norovirus	0	0	8	13	0.6
Pertussis (Whooping Cough)	4	44	188	367	0.5
Salmonellosis (Salmonella)	18	27	285	273	1.0
Shigellosis (Shigella)	1	9	18	42	0.4
Varicella (Chickenpox)	24	66	438	563	0.8
Viral Meningitis	2	17	47	122	0.4
Notifiable Diseases Reported Quarterly, 3rd Qtr 2009	Current Quarter # Cases	Current Quarter # Expected Cases (5-yr average)	# Cases YTD	# Expected YTD (5-yr average)	YTD Standard Morbidity Ratio (obs/exp)
HIV	28	22	67	64	1.0
AIDS	10	12	33	33	1.0
Chlamydia	1,449	1,300	4,638	3,788	1.2
Gonorrhea	70	177	224	530	0.4
Tuberculosis	7	8	27	25	1.1
Program Enrollment for the Month of October 2009	Current Month	Previous Month	% Change ^s From Previous Month	1 Year Ago	% Change ^s From 1 Year Ago
Medicaid	203,260	201,392	+0.9%	173,943	+16.9%
PCN (Primary Care Network)	20,037	20,782	-3.6%	17,510	+14.4%
CHIP (Children's Health Ins. Plan)	40,305	41,025	-1.8%	36,616	+10.1%

Medicaid Expenditures (in Millions) for the Month of October 2009†	Current Month	Expected/Budgeted for Month ^x	Fiscal YTD	Budgeted Fiscal YTD ^y	Variance - over (under) budget ^z
Capitated Mental Health	\$ 10.2	N/A	\$ 34.0	N/A	N/A
Inpatient Hospital	\$ 33.7	N/A	\$ 76.4	N/A	N/A
Outpatient Hospital	\$ 12.2	N/A	\$ 35.3	N/A	N/A
Long Term Care	\$ 18.3	N/A	\$ 56.3	N/A	N/A
Pharmacy	\$ 13.9	N/A	\$ 46.7	N/A	N/A
Physician/Osteo Services‡	\$ 9.1	N/A	\$ 25.3	N/A	N/A
TOTAL HCF MEDICAID	\$ 189.0	N/A	\$ 500.3	N/A	N/A
Health Care System Measures	Number of Events	Rate per 100 Population	% Change ^s From Previous Year	Total Charges in Millions	% Change ^s From Previous Year
Overall Hospitalizations (2008)	279,504	9.4%	-2.7%	\$ 4,703.3	+10.3%
Non-maternity Hospitalizations (2008)	164,602	5.4%	-3.0%	\$ 3,924.7	+10.4%
Emergency Department Encounters (2007)	682,122	24.0%	-1.3%	\$ 781.0	+17.1%
Outpatient Surgery (2007)	296,596	10.5%	-5.7%	\$ 1,109.0	+8.6%
Annual Community Health Measures	Current Data Year	Population at Risk	Number Affected	Percent/Rate	% Change ^s From Previous Year
Overweight and Obesity (Adults 18+)	2008	1,924,274	1,119,500	58.2%	+0.5%
Cigarette Smoking (Adults 18+)	2008	1,924,274	179,200	9.3%	-20.4%
Influenza Immunization (Adults 65+)	2008	237,275	173,900	73.3%	-3.8%
Health Insurance Coverage (Uninsured)	2008	2,781,954	298,200	10.7%	+0.7%
Motor Vehicle Crash Injury Deaths	2008	2,781,954	268	9.6 / 100,000	-3.3%
Suicide Deaths	2008	2,781,954	384	13.8 / 100,000	+1.3%
Diabetes Prevalence	2008	2,781,954	129,500	4.7%	-1.0%
Coronary Heart Disease Deaths	2008	2,781,954	1,514	54.4 / 100,000	-4.0%
All Cancer Deaths	2008	2,781,954	2,478	89.1 / 100,000	-5.6%
Births to Adolescents (Ages 15-17)	2008	61,727	1,122	18.2 / 1,000	-2.0%
Early Prenatal Care	2008	55,605	43,997	79.1%	-0.4%
Infant Mortality	2008	55,605	264	4.7 / 1,000	-7.9%
Childhood Immunization (4:3:1:3:3:1)	2008	53,525	39,400	73.6%	-5.8%

† Influenza activity remains widespread in Utah. Influenza-like illness activity is above baseline statewide. As of November 7, 2009, 623 influenza-associated hospitalizations have been reported to the UDOH this influenza season. More information can be found at http://health.utah.gov/epi/h1n1flu/UT_update.html.

§ % Change could be due to random variation.

× Determination on tier 1 and tier 2 unemployment enhancements and the ARRA rate differentials for the the school districts are still being decided. For these two reasons the total Medicaid Budget amounts are not ready to be released.

‡ Medicaid payments reported under Physician/Osteo Services do not include enhanced physician payments.

Notes: Data for notifiable diseases are preliminary and subject to change upon the completion of ongoing disease investigations. Active surveillance for West Nile virus has ended until the 2010 season.