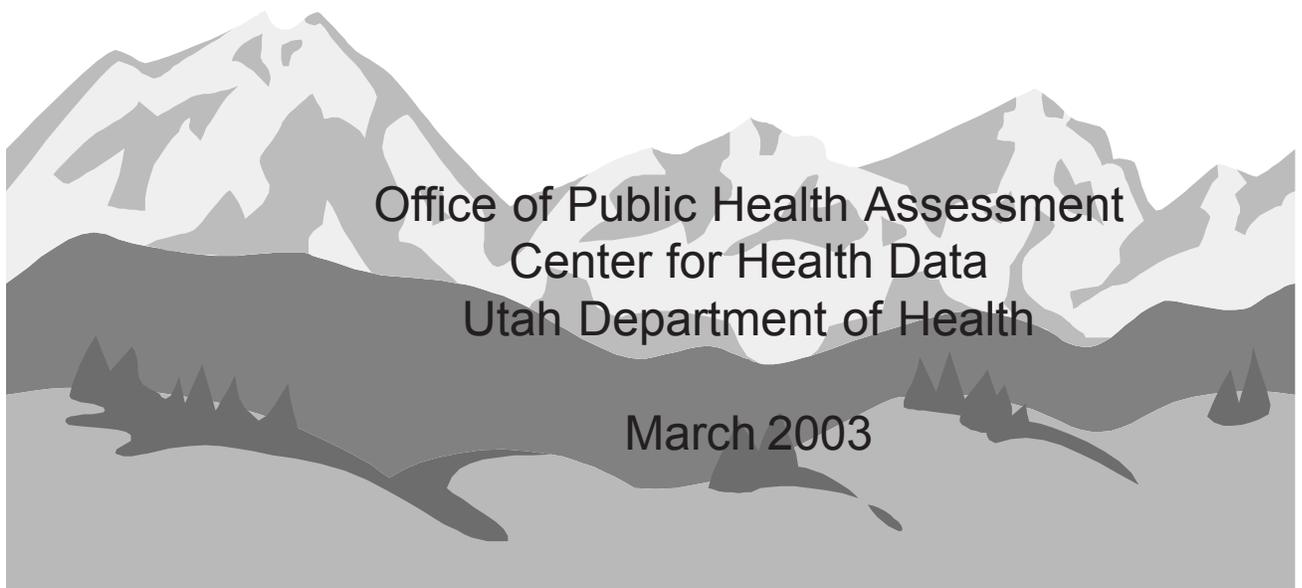




Utah Behavioral Risk Factor Surveillance System

Local Health District Report,
1999-2001



Office of Public Health Assessment
Center for Health Data
Utah Department of Health

March 2003

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The Utah Department of Health would especially like to thank the citizens of Utah who graciously took the time to participate in the Behavioral Risk Factor Surveillance System telephone survey.



The Utah Behavioral Risk Factor Surveillance System (BRFSS) has been collecting and reporting health-related data since 1984. In 1995 Utah began collecting BRFSS data by Utah's 12 local health districts so that precise estimates by local health district could be calculated approximately every three years. This is the second Utah BRFSS Local Health District Report and uses data from 1999-2001. The first BRFSS Local Health District Report was based on data from the 1995-1998 surveys.

The primary purpose of this report is to examine the BRFSS measures and related demographic information in each of the 12 local health districts in order to give a comprehensive picture of each health district. This information is summarized below. The combined data for years 1999-2001 also allowed estimates to be computed for common demographic groups using the statewide data. The demographic information is discussed in the body of the report for each measure.

Bear River Health District

Compared to the rest of the state, Bear River Health District was characterized by:

- the lowest percentage of adults with less than a high school education (2.8%).
- a high percentage of persons ages 18-34 in the adult population (47.6%).
- a high percentage of students in the adult population (5.7%).

Bear River Health District age-adjusted rates for the following BRFSS measures were considered different from the state because their 95 percent confidence interval did not include the state rate:

- Adults ages 18 or over were:
 - ✓ less likely to report current cigarette smoking (7.9% vs. 13.0%).
 - ✓ less likely to report binge drinking (5.9% vs. 9.5%).
- Adults ages 18 to 64 were least likely to report ever being tested for HIV (23.9% vs. 34.9%).

Compared to the first BRFSS Local Health District Report (1995-1998), Bear River Health District saw a significant change in the following BRFSS measure that was included in both analyses:

- A decrease in the percentage of adults who reported a cholesterol check in the past five years (74.2% to 62.8%).

Central Utah Health District

Compared to the rest of the state, Central Utah Health District was characterized by:

- the highest percentage of adults with an annual household income less than \$20,000 (25.3%).
- a high percentage of persons ages 65 or over in the adult population (18.2%).

Central Utah Health District age-adjusted rates for the following BRFSS measures were considered different from the state because their 95 percent confidence interval did not include the state rate:

- Adults ages 18 or over were:
 - ✓ less likely to report having health insurance coverage (83.2% vs. 88.6%).
 - ✓ less likely to report having dental insurance (56.4% vs. 64.3%).
 - ✓ less likely to report visiting a dental clinic in the past year (69.9% vs. 74.1%).
 - ✓ less likely to report a cholesterol screening test in the past five years (61.3% vs. 67.7%).
 - ✓ least likely to report using SPF 15 or greater sunscreen always or nearly always (20.5% vs. 30.4%).
 - ✓ less likely to report eating at least two servings of fruit each day (28.0% vs. 33.8%).
 - ✓ most likely to be overweight or obese (60.3% vs. 54.1%).

Executive Summary



- Adults ages 50 or over were less likely to report ever having a sigmoidoscopy or colonoscopy (28.7% vs. 41.6%).
- Women ages 40 or over were least likely to report a screening mammogram in the past two years (53.5% vs. 67.5%).
- Women of childbearing age (18-44 years old) were least likely to report taking folic acid daily (35.3% vs. 48.7%).

Compared to the first BRFSS Local Health District Report (1995-1998), Central Utah Health District saw no significant changes in the BRFSS measures that were included in both analyses.

Davis County Health District

Compared to the rest of the state, Davis County Health District was characterized by:

- the lowest percentage of adults who were unemployed (3.0%).
- a high percentage of adults with an annual household income of \$50,000 or higher (47.7%).
- a high percentage of adults with a college degree (31.7%).

Davis County Health District age-adjusted rates for the following BRFSS measures were different from the state because their 95 percent confidence interval did not include the state rate:

- Adults ages 18 or over were:
 - ✓ least likely to report having current asthma (5.1% vs. 7.4%).
 - ✓ most likely to report having health insurance coverage (93.1% vs. 88.6%).
 - ✓ least likely to report being unable to get needed health care due to cost (6.8% vs. 10.0%).
 - ✓ more likely to report having dental insurance (71.4% vs. 64.3%).
 - ✓ more likely to report visiting a dental clinic in the past year (78.7% vs. 74.1%).
 - ✓ less likely to report chronic drinking (1.3% vs. 4.0%).
 - ✓ least likely to report binge drinking (5.1% vs. 9.5%).
 - ✓ more likely to be overweight or obese (58.9% vs. 54.1%).

Compared to the first BRFSS Local Health District Report (1995-1998), Davis County Health District saw a significant change in the following BRFSS measure that was included in both analyses:

- An increase in the percentage of adults who reported having been told that they had high cholesterol (15.0% to 24.5%).

Salt Lake Valley Health District

Compared to the rest of the state, Salt Lake Valley Health District was characterized by:

- the highest percentage of Asian (2.7%) and Pacific Islander (1.0%) adults.
- the highest percentage of Hispanic adults (11.4%).
- a high percentage of adults who were college graduates (31.7%).
- a high percentage of adults who were employed (69.5%).
- the lowest percentage of adults who were married (66.1%).

Salt Lake Valley Health District age-adjusted rates for the following BRFSS measures were considered different from the state because their 95 percent confidence interval did not include the state rate:

- Adults ages 18 or over were:
 - ✓ most likely to report one or more days in the past 30 when their mental health was not good (42.8% vs. 40.6%).
 - ✓ more likely to report current cigarette smoking (15.6% vs. 13.0%).



- ✓ more likely to report chronic drinking (5.7% vs. 4.0%) and binge drinking (12.8% vs. 9.5%).
- Adults ages 50 or over were most likely to report ever having a sigmoidoscopy or colonoscopy (46.3% vs. 41.6%).

Compared to the first BRFSS Local Health District Report (1995-1998), Salt Lake Valley Health District saw significant changes in the following BRFSS measures that were included in both analyses:

- A decrease in the percentage of adults who reported a cholesterol check in the past five years (76.3% to 67.1%).
- An increase in the percentage of adults who reported visiting a dental clinic in the past year (70.8% to 75.3%).

Southeastern Utah Health District

Compared to the rest of the state, Southeastern Utah Health District was characterized by:

- the lowest percentage of persons ages 18-34 in the adult population (32.0%).
- the highest percentage of American Indian adults (13.4%).
- a high percentage of adults with less than a high school education (11.0%).
- the highest percentage of adults who were divorced (11.0%).

Southeastern Utah Health District age-adjusted rates for the following BRFSS measures were considered different from the state because their 95 percent confidence interval did not include the state rate:

- Adults ages 18 or over were:
 - ✓ more likely to report fair or poor health status (16.5% vs. 11.3%).
 - ✓ most likely to report having arthritis (41.5% vs. 33.4%).
 - ✓ least likely to report being told they had high cholesterol (16.1% vs. 21.7%).
 - ✓ less likely to report having health insurance coverage (78.8% vs. 88.6%).
 - ✓ more likely to report being unable to get needed health care due to cost (15.9% vs. 10.0%).
 - ✓ less likely to report having dental insurance (52.1% vs. 64.3%).
 - ✓ less likely to report visiting a dental clinic in the past year (66.2% vs. 74.1%).
 - ✓ less likely to report a cholesterol check in the past five years (60.1% vs. 67.7%).
 - ✓ more likely to report current cigarette smoking (19.1% vs. 13.0%).
- Adults ages 50 or over were less likely to report ever having a sigmoidoscopy or colonoscopy (32.1% vs. 41.6%).
- Adults ages 65 or over were:
 - ✓ least likely to report having a flu shot in the past year (60.3% vs. 72.8%).
 - ✓ less likely to report ever having a pneumococcal vaccine (50.9% vs. 65.3%).

Compared to the first BRFSS Local Health District Report (1995-1998), Southeastern Utah Health District saw no significant changes in the BRFSS measures that were included in both analyses.

Southwest Utah Health District

Compared to the rest of the state, Southwest Utah Health District was characterized by:

- the highest percentage of persons ages 65 or over in the adult population (21.4%).
- the lowest percentage of adults who were employed (57.7%).
- the largest percentage of adults who were retired (22.0%).

Southwest Utah Health District age-adjusted rates for the following BRFSS measures were different from the state rate because their 95 percent confidence interval did not include the state rate:

Executive Summary



- Adults ages 18 or over were:
 - ✓ less likely to report having diabetes (3.3% vs. 5.0%).
 - ✓ more likely to report having arthritis (40.4% vs. 33.4%).
 - ✓ less likely to report having health insurance coverage (83.3% vs. 88.6%).
 - ✓ more likely to report not being able to get needed health care due to cost (16.4% vs. 10.0%).
 - ✓ less likely to report having dental insurance (50.9% vs. 64.3%).
 - ✓ less likely to report visiting a dental clinic in the past year (69.8% vs. 74.1%).
 - ✓ most likely to report eating three or more servings of vegetables daily (28.3% vs. 22.6%).
- Adults ages 18 to 64 were more likely to report ever being tested for HIV (40.2% vs. 34.9%).
- Adults ages 50 or over were less likely to report ever having a sigmoidoscopy or colonoscopy (34.2% vs. 41.6%).

Compared to the first BRFSS Local Health District Report (1995-1998), Southwest Utah Health District saw no significant changes in the BRFSS measures that were included in both analyses.

Summit County Health District

Compared to the rest of the state, Summit County Health District was characterized by:

- the highest percentage of persons ages 35-49 in the adult population (40.5%).
- the lowest percentage of persons ages 65 or over in the adult population (6.9%).
- the highest percentage of adults with annual household incomes of \$50,000 or greater (57.8%).
- the highest percentage of adults with a college degree (44.9%).
- the highest percentage of adults who were employed (71.8%).

Summit County Health District age-adjusted rates for the following BRFSS measures were considered different from the state because their 95 percent confidence interval did not include the state rate:

- Adults ages 18 or over were:
 - ✓ least likely to report
 - ! fair or poor health (7.5% vs. 11.3%).
 - ! one or more days when their physical health was not good in the past 30 days (34.5 vs. 39.1%).
 - ! one or more days when their mental health was not good in the past 30 days (34.7% vs. 40.6%).
 - ! having arthritis (26.3% vs. 33.4%).
 - ! ever being told they had high blood pressure (16.0% vs. 23.5%).
 - ! no leisure time physical activity (12.1% vs. 17.0%).
 - ✓ least likely to be overweight or obese (42.0% vs. 54.1%).
 - ✓ less likely to report current cigarette smoking (8.2% vs. 13.0%).
 - ✓ most likely to report:
 - ! visiting a dental clinic in the past year (83.6% vs. 74.1%).
 - ! using SPF 15 or greater sunscreen always or nearly always (45.4% vs. 30.4%).
 - ! chronic drinking (9.5% vs. 4.0%) and binge drinking (19.5% vs. 9.5%).
 - ! regular physical activity (40.9% vs. 26.3%).
- Adults ages 18 to 64 were most likely to report ever being tested for HIV (42.5% vs. 34.9%).
- Women ages 40 or over were more likely to report having a mammogram in the past year (73.7% vs. 67.5%).



Compared to the first BRFSS Local Health District Report (1995-1998), Summit County Health District saw a significant change in the following BRFSS measure that was included in both analyses:

- An increase in the percentage of adults who reported visiting a dental clinic in the past year (73.7% to 84.3%).

Tooele County Health District

Compared to the rest of the state, Tooele County Health District was characterized by:

- a low percentage of adults with a college degree (19.5%).
- the lowest percentage of students in the adult population (0.6%).
- a high percentage of Hispanic adults (9.7%).

Tooele County Health District age-adjusted rates for the following BRFSS measures were different from the state because their 95 percent confidence interval did not include the state rate:

- Adults ages 18 or over were:
 - ✓ more likely to report fair or poor health (16.6% vs. 11.3%).
 - ✓ most likely to report having diabetes (8.1% vs. 5.0%).
 - ✓ most likely to report ever being told they had high blood pressure (28.9% vs. 23.5%).
 - ✓ most likely to report having dental insurance (74.9% vs. 64.3%).
 - ✓ less likely to report visiting a dental clinic in the past year (69.2% vs. 74.1%).
 - ✓ more likely to report current cigarette smoking (18.2% vs. 13.0%).

Compared to the first BRFSS Local Health District Report (1995-1998), Tooele County Health District saw no significant changes in the BRFSS measures that were included in both analyses.

TriCounty Health District

Compared to the rest of the state, TriCounty Health District was characterized by:

- the highest percentage of persons ages 50-64 in the adult population (20.4%).
- the second highest percentage of American Indian adults (7.2%).
- the lowest percentage of adults with annual household incomes of \$50,000 or greater (21.7%).
- the highest percentage of adults with less than a high school education (13.1%) and the lowest with a college degree (13.4%).
- the highest percentage of unemployed adults (11.3%).

TriCounty Health District age-adjusted rates for the following BRFSS measures were considered different from the state because their 95 percent confidence interval did not include the state rate:

- Adults ages 18 or over were:
 - ✓ most likely to report fair or poor health (18.4% vs. 11.3%).
 - ✓ least likely to report having health insurance coverage (77.6% vs. 88.6%).
 - ✓ most likely to report cost as a barrier to needed health care (19.5% vs. 10.0%).
 - ✓ least likely to report having dental insurance (45.4% vs. 64.3%) and visiting a dental clinic in the past year (58.7% vs. 74.1%).
 - ✓ least likely to report having a cholesterol check in the past five years (58.4% vs. 67.7%).
 - ✓ less likely to report using SPF 15 or higher sunscreen always or nearly always (24.0% vs. 30.4%).
 - ✓ most likely to report current cigarette smoking (19.2% vs. 13.0%).
 - ✓ most likely to report no leisure time physical activity (24.0% vs. 17.0%).
 - ✓ more likely to be overweight or obese (60.3% vs. 54.1%).

Executive Summary



- Adults ages 65 or over were less likely to report ever having a pneumococcal vaccination (49.5% vs. 65.3%).
- Women ages 40 or over were less likely to report having a screening mammogram in the past year (56.8% vs. 67.5%).
- Women ages 18 or over were least likely to report having a Pap test in the past three years (72.8% vs. 81.1%).
- Men ages 40 or over were least likely to report ever having had a prostate-specific antigen (PSA) test (39.3% vs. 52.4%).

Compared to the first BRFSS Local Health District Report (1995-1998), TriCounty Health District saw a significant change in the following BRFSS measure that was included in both analyses:

- An increase in the percentage of adults who were overweight or obese (51.9% to 60.8%).

Utah County Health District

Compared to the rest of the state, Utah County Health District was characterized by:

- the highest percentage of persons ages 18-34 in the adult population (54.9%).
- the highest percentage of students in the adult population (9.4%).
- the highest percentage of adults never married (20.0%).
- a high percentage of adults who were homemakers (14.7%).

Utah County Health District age-adjusted rates for the following BRFSS measures were different from the state because their 95 percent confidence interval did not include the state rate:

- Adults ages 18 or over were:
 - ✓ least likely to report current cigarette smoking (5.8% vs. 13.0%).
 - ✓ least likely to report chronic drinking (1.1% vs. 4.0%).
 - ✓ less likely to report binge drinking (5.2% vs. 9.5%).
- Adults ages 18 to 64 were less likely to report ever being tested for HIV (28.1% vs. 34.9%).

Compared to the first BRFSS Local Health District Report (1995-1998), Utah County Health District saw a significant change in the following BRFSS measure that was included in both analyses:

- A decrease in the percentage of adults who reported a cholesterol check in the past five years (76.4% to 62.7%).

Wasatch County Health District

Compared to the rest of the state, Wasatch County Health District was characterized by:

- the highest percentage of White adults (96.1%).
- the highest percentage of adults who were married (81.5%).
- a high percentage of persons ages 35-49 in the adult population (32.9%).

Wasatch County Health District age-adjusted rates for the following BRFSS measures were considered different from the state because their 95 percent confidence interval did not include the state rate:

- Adults ages 18 or over were less likely to report current cigarette smoking (9.7% vs. 13.0%).
- Adults ages 18 or over who were current daily smokers were most likely to report a quit smoking attempt (72.3% vs. 53.1%).
- Adults ages 65 or over were least likely to report ever having a pneumococcal vaccination (30.5% vs. 65.3%).



Compared to the first BRFSS Local Health District Report (1995-1998), Wasatch County Health District saw no significant changes in the BRFSS measures that were included in both analyses.

Weber-Morgan Health District

Compared to the rest of the state, Weber-Morgan Health District was characterized by:

- the second highest percentage of Hispanic adults (11.0%).
- the second highest percentage of adults who were retired (16.6%).

Weber-Morgan Health District age-adjusted rates for the following BRFSS measures were different from the state because their 95 percent confidence interval did not include the state rate:

- Adults ages 18 or over were:
 - ✓ more likely to report having dental insurance (70.2% vs. 64.3%).
 - ✓ least likely to report eating two or more servings of fruits daily (26.5% vs. 33.8%).
- Women ages 40 or over were less likely to report having a screening mammogram in the past two years (56.8% vs. 67.5%).

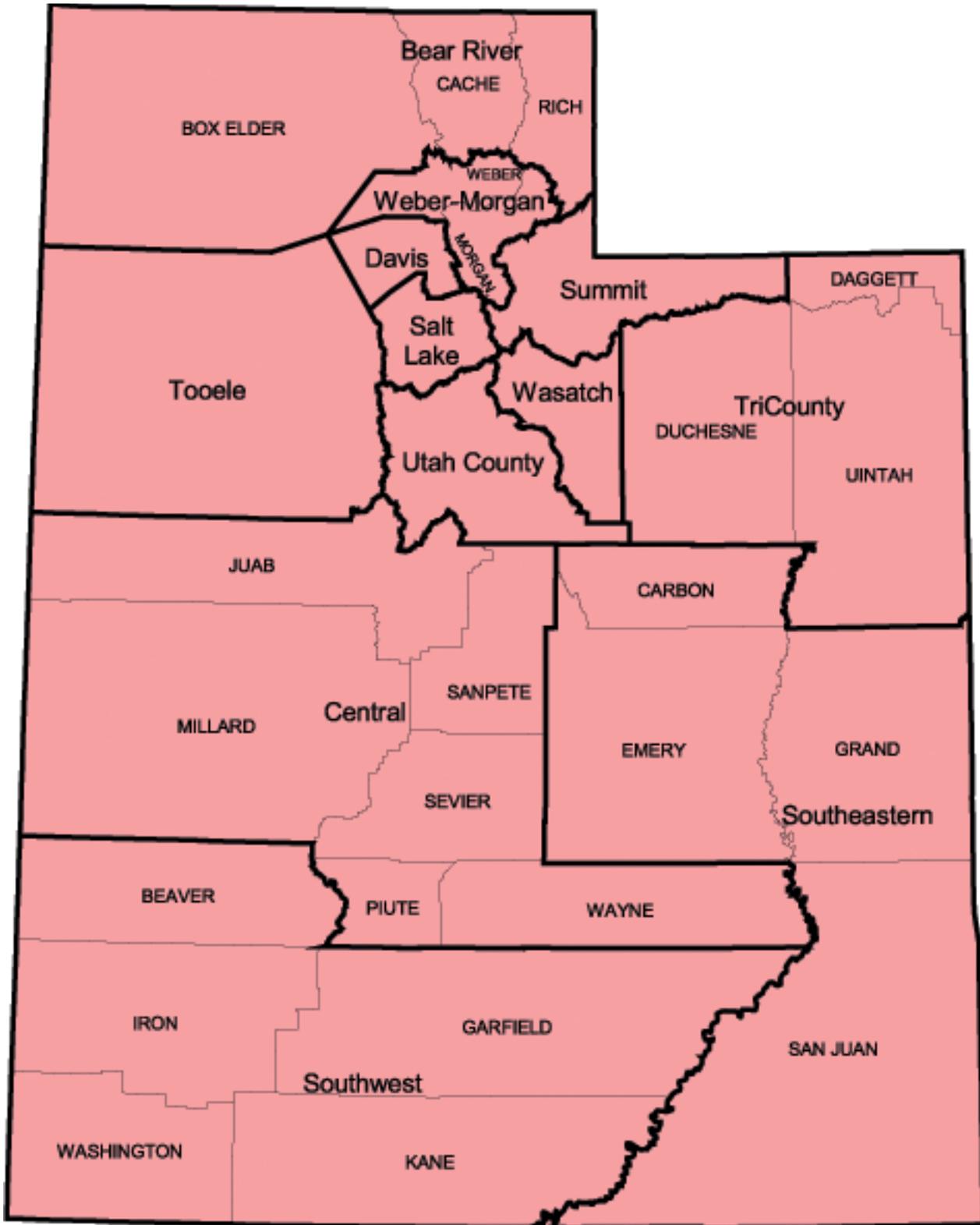
Compared to the first BRFSS Local Health District Report (1995-1998), Weber-Morgan Health District saw no significant changes in the BRFSS measures that were included in both analyses.



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Utah Public Health Districts





Behaviors such as smoking, excessive alcohol consumption, poor nutrition, overweight, and physical inactivity contribute to a substantial portion of the mortality and morbidity associated with chronic disease and unintentional injury. The under-utilization of health screening services, such as mammography and serum cholesterol, also contribute to morbidity and premature death from a variety of diseases. In an effort to better measure these well-established health-related behaviors at the state level, the Centers for Disease Control and Prevention (CDC), in collaboration with U.S. states and territories, developed the Behavioral Risk Factor Surveillance System (BRFSS).

The BRFSS collects uniform, state-specific data on preventive health practices and risk behaviors that are linked to chronic diseases, injuries, and preventable infectious diseases in the adult population. Measuring the prevalence of high risk behaviors and preventive health services provides information for developing and monitoring interventions designed to reduce disease prevalence and premature death. The BRFSS represents an important step forward for the U.S. public health system in recognizing the importance of health behaviors in determining individual and population risk of major diseases, such as heart disease, stroke, cancer, and diabetes.

From 1981-1983, the CDC funded 29 states to conduct point-in-time prevalence surveys. In 1984, the CDC established the BRFSS within 14 participating states, including Utah. Through cooperative agreements between CDC and state departments of health, the BRFSS expanded to include all states, the District of Columbia, and three U.S. territories by 1994. The BRFSS is conducted as a random-digit-dial telephone survey of the non-institutionalized adult population living in households with phones. Utah's annual sample has increased from 612 respondents in 1984 to 3,650 in 2001.

Utah is divided into 12 single- or multi-county health districts. Each district has a local health department that is responsible for public health services for that district's population. Since 1995 Utah's BRFSS sample has been stratified by local health district and is large enough to obtain reasonably precise estimates by health district approximately every three years for at least some measures. The first report of the Utah BRFSS data by local health district combined data from 1995 through 1998 and was completed in December 1999.

This report is the second to look at BRFSS data by local health district in Utah and combines data from 1999 through 2001. The report is intended specifically for use by local health districts. It should be used along with other health information to provide a picture of health status and health-related behaviors in Utah's local health districts. Measures were also examined for subpopulations including sex, age group, race/ethnicity, income category, and education level. Due to the small numbers of many racial and ethnic groups in Utah, questions were analyzed by three groups only: White, non-Hispanic; Hispanic, and non-White, non-Hispanic. The non-White, non-Hispanic group includes Black or African American, Native Hawaiian or Other Pacific Islander, American Indian or Alaska Native, Asian, and "Others."

Many of the BRFSS measures are related to age. Therefore, the data for this report were age adjusted to the 2000 U.S. standard population to control for differences in the measures that were due to differences in the age composition of the populations being compared. This adjustment allows for comparison of rates between local health district, state and the U.S. These comparisons are presented graphically in a map for each measure.

However, age-adjusted rates are useful for comparison purposes only, and do not reflect absolute magnitude. The actual numerical value of an age-adjusted rate is dependent on the standard population used, and therefore, has no intrinsic meaning. To convey absolute magnitude, the crude rates and estimated numbers of people affected are presented in a table along with the age-adjusted data. The crude rates are also depicted in a horizontal bar graph with lines indicating the 95 percent confidence intervals.

A Guide To This Report



Four pages of the report are devoted to each measure. This “Guide” outlines what is covered on each page.

This label describes the measure being addressed and is present on each page.

General Health Status

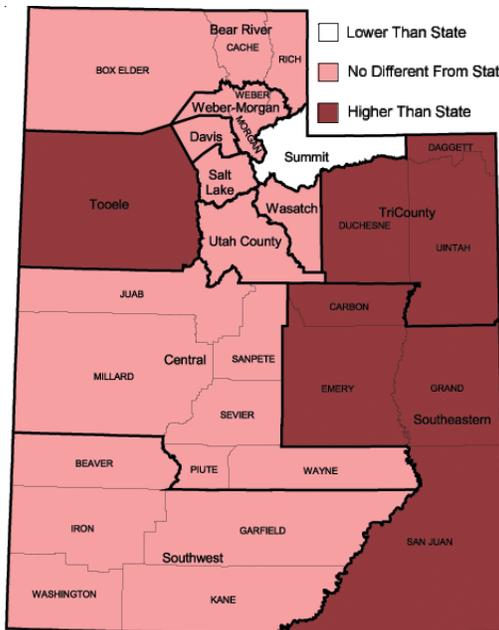


Question: *Would you say that in general your health is: excellent, very good, good, fair, or poor?*

General health status is considered to be a reliable indicator of a person’s health, quality of life, and general well being. Self-rated health (SRH) has been collected for many years on National Center for Health Statistics surveys and since 1993 on the state-based BRFSS. SRH is an independent predictor of important health outcomes, including mortality, functional status, and health services utilization. SRH has been found to be a good proxy index for chronic physical health conditions in populations. The Institute of Medicine Committee on Using Performance Monitoring to Improve Community Health proposed that the proportion of adults reporting that their general health is good to excellent be included in a basic set of 25 Community Health Profile Indicators.

- After adjusting for age, persons in Summit County Health District were less likely to report fair or poor health when compared to the entire state. Persons in TriCounty, Tooele County, and Southeastern Utah Health Districts were more likely to report fair or poor health.
- Utah adults were less likely to report fair or poor health than adults in the entire U.S. The magnitude of the crude difference was due in part to the fact that Utah has a younger population. However, the difference remained significant even after age adjustment.
- Persons living in the Summit County Health District were least likely to report fair or poor health (6.2%). Persons living in the TriCounty Health District were most likely to report fair or poor health (17.6%).

Fair or Poor Health Status by Whether the Local Health District Percentage Differed From the State, Utah Adults Ages 18+, 1999-2001



Age adjusted to the U.S. 2000 standard population. Percentage for a local health district was considered different from the state percentage if its 95% confidence interval did not include the state percentage. Source: Behavioral Risk Factor Surveillance System

This text contains the BRFSS question(s) that were used to calculate the measure.

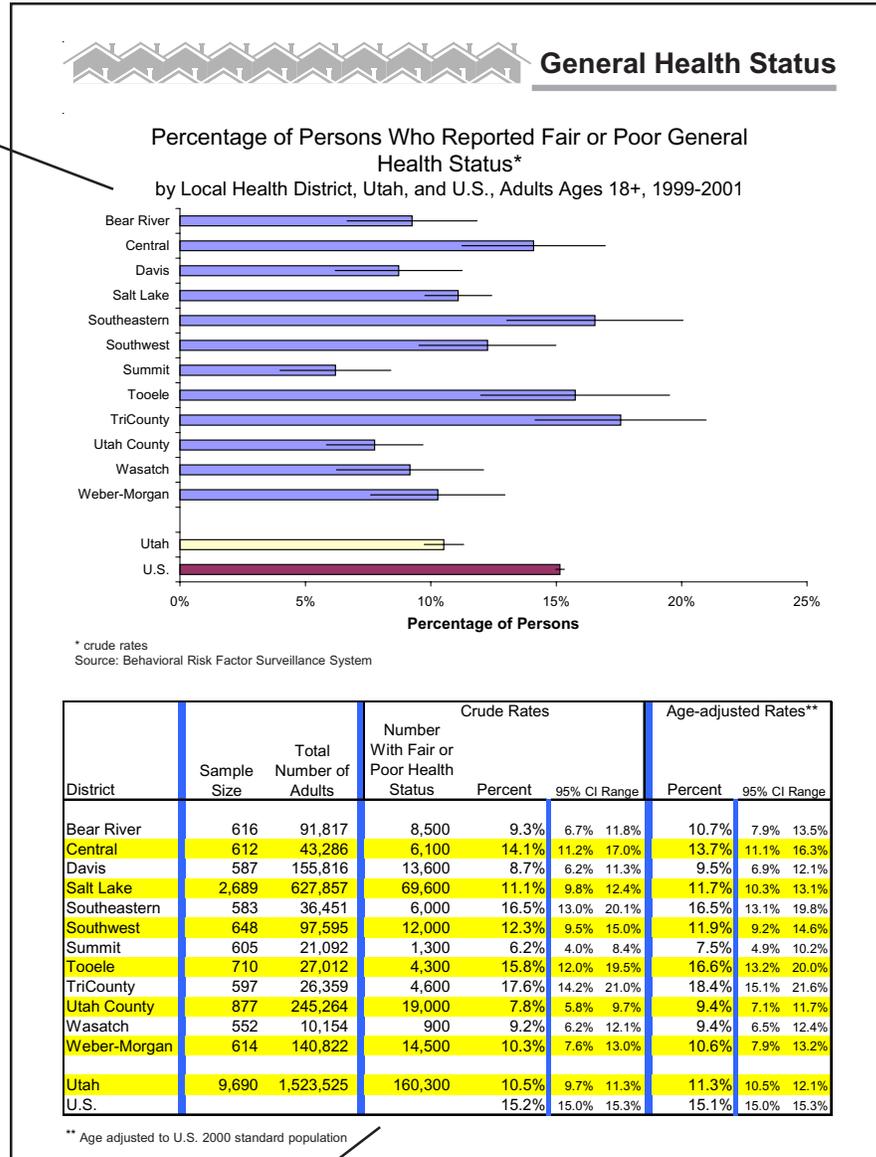
This text further defines and describes the measure being addressed.

The map of Utah’s 12 local health districts (LHDs) uses shading to indicate whether for the particular BRFSS measure the LHD rate was lower, higher, or no different from the state rate. The comparison was done using age-adjusted data. The percentage for the LHD was considered different from the state if its 95% confidence interval did not include the state percentage.

The bulleted text summarizes findings from the map and the graph and table on the next page.



This graph displays the crude rate by LHD, state, and U.S. (where available). The crude rate was used because it more accurately reflects the actual disease or risk burden in the community.



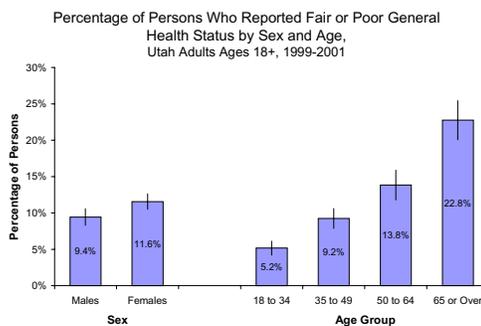
This table contains the data used to create the map and graph. It also includes the sample size, total number of adults in the relevant population, and the estimated number of those adults who obtained a positive (or negative) score on the measure.



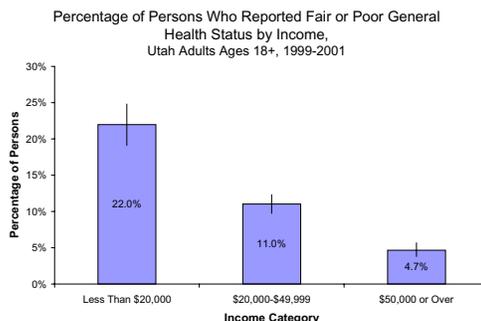
General Health Status



- The likelihood that an individual reported fair or poor health increased with age, rising from 5.2% among persons 18 to 34, to 22.8% among persons 65 or over.
- Women were more likely to report fair or poor health (11.6%) than men (9.4%).



- Those persons earning less than \$20,000 were four times as likely to report fair or poor health (22.0%) than persons earning more than \$50,000 (4.7%).
- Those persons with less than a high school education were also four times as likely to report fair or poor health (24.5%) than persons who were college graduates (5.9%) (not graphed).



The Utah Department of Health in collaboration with Utah's 12 local health districts works to prevent avoidable illness, injury, disability, and premature death, to assure access to affordable quality health care and to promote healthy lifestyles.

Utah Objective: No objective listed.
HP2010 Objective: Overarching: Improve the quality and years of healthy life and eliminate health disparities.

This bulleted text summarizes demographic differences for the measure using statewide data.

These two graphs display the measure by selected demographic subgroups using state-level data.

Utah Department of Health program information related to the measure is included in unbulleted text above the text box when available.

This text box contains Utah Department of Health and Healthy People 2010 objectives that relate to the BRFSS measure. If the objective utilizes age-adjusted data, that is also indicated in this text box.



The last page for each measure is a table of the combined available state-level data for years 1999-2001 for the demographic subgroups. The applicable response category row(s) is/are shaded. The shaded columns show the percentage of people who obtained a positive (or negative) score on the measure and includes the 95% confidence intervals.

		General Health Status				
		Percentage of Persons Who Reported Fair or Poor General Health Status by Selected Demographic Characteristics, Utah Adults Ages 18+, 1999 - 2001.				
Demographic Subgroup	Utah Population		Survey Estimates			Distribution of Persons Who Reported Fair or Poor Health Status by Category
	Distribution	Number of Persons ¹	Percentage of Persons Who Reported Fair or Poor Health Status ²		Number of Persons ^{1,3}	
				95% Confidence Intervals		
			Lower	Upper		
General Health Status						
Excellent	25.0%	381,300				
Very Good	36.5%	556,200				
Good	27.9%	425,700				
Fair	7.9%	121,000				
Poor	2.6%	39,300				
Total, All Adults	100.0%	1,523,500				
Sex						
Males	49.5%	753,700	9.4%	8.3%	10.6%	71,100
Females	50.5%	769,800	11.6%	10.5%	12.6%	89,000
Total, All Adults	100.0%	1,523,500	10.5%	9.7%	11.3%	160,300
Age Group						
18 to 34	42.6%	648,500	5.2%	4.2%	6.1%	33,500
35 to 49	28.5%	433,700	9.2%	7.9%	10.6%	40,000
50 to 64	16.4%	250,000	13.8%	11.8%	15.9%	34,600
65 or Over	12.6%	191,300	22.8%	20.1%	25.5%	43,500
Total, All Adults	100.0%	1,523,500	10.5%	9.7%	11.3%	160,300
Race/Ethnicity						
White, Non-Hispanic	88.4%	1,346,000	10.5%	9.7%	11.3%	141,600
Hispanic	8.3%	126,000	9.7%	6.9%	12.6%	12,300
Non-White, Non-Hispanic	3.4%	51,500	11.9%	7.1%	16.7%	6,100
Total, All Adults	100.0%	1,523,500	10.5%	9.7%	11.3%	160,300
Income						
Less Than \$20,000	13.6%	207,700	22.0%	19.1%	24.8%	45,600
\$20,000-\$49,999	47.8%	727,500	11.0%	9.7%	12.3%	80,200
\$50,000 or Over	38.6%	588,400	4.7%	3.8%	5.7%	27,400
Total, All Adults	100.0%	1,523,500	10.5%	9.7%	11.3%	160,300
Education						
Less Than High School	6.0%	91,700	24.5%	19.6%	29.5%	22,500
H.S. Grad or G.E.D.	30.1%	458,100	13.9%	12.4%	15.5%	63,900
Some Post High School	35.1%	534,100	8.9%	7.7%	10.2%	47,700
College Graduate	28.9%	439,500	5.9%	4.8%	7.0%	25,900
Total, All Adults	100.0%	1,523,500	10.5%	9.7%	11.3%	160,300

1 Rounded to the nearest 100 persons.
 2 Plus or minus 95% confidence interval.
 3 Figures in these columns may not sum to the total because some surveyed individuals had missing values on the grouping variables.
 Population counts for age, sex, and total population were the 2000 estimates provided by the Governor's Office of Planning and Budget. Population count estimates for race/ethnicity, income, and education populations were derived from averaging three years of the BRFSS surveys from 1999-2001.

Utah BRFSS
Local Health District and
Demographic Subgroup Findings,
1999-2001



General Health Status

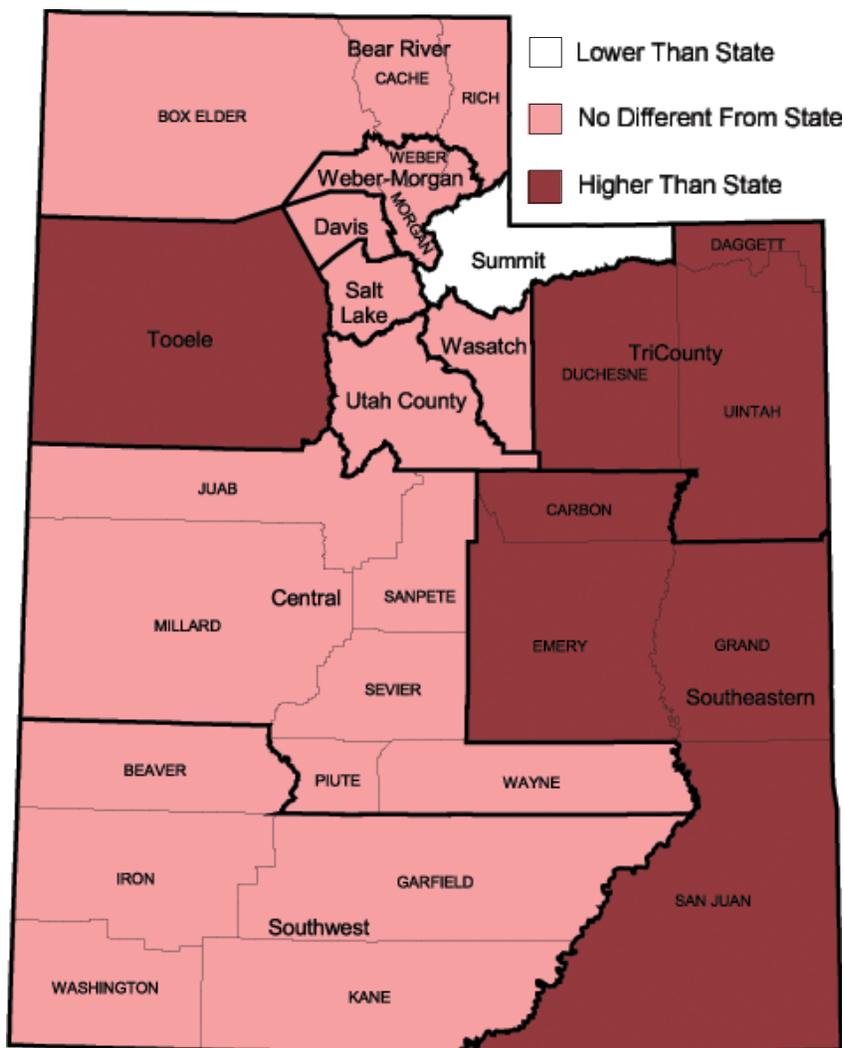


Question: *Would you say that in general your health is: excellent, very good, good, fair, or poor?*

General health status is considered to be a reliable indicator of a person's health, quality of life, and general well being. Self-rated health (SRH) has been collected for many years on National Center for Health Statistics surveys and since 1993 on the state-based BRFSS. SRH is an independent predictor of important health outcomes, including mortality, functional status, and health services utilization. SRH has been found to be a good proxy index for chronic physical health conditions in populations. The Institute of Medicine Committee on Using Performance Monitoring to Improve Community Health proposed that the proportion of adults reporting that their general health is good to excellent be included in a basic set of 25 Community Health Profile Indicators.

- After adjusting for age, persons in Summit County Health District were less likely to report fair or poor health when compared to the entire state. Persons in TriCounty, Tooele County, and Southeastern Utah Health Districts were more likely to report fair or poor health.
- Utah adults were less likely to report fair or poor health than adults in the entire U.S. The magnitude of the crude difference was due in part to the fact that Utah has a younger population. However, the difference remained significant even after age adjustment.
- Persons living in the Summit County Health District were least likely to report fair or poor health (6.2%). Persons living in the TriCounty Health District were most likely to report fair or poor health (17.6%).

Fair or Poor Health Status by Whether the Local Health District Percentage Differed From the State, Utah Adults Ages 18+, 1999-2001



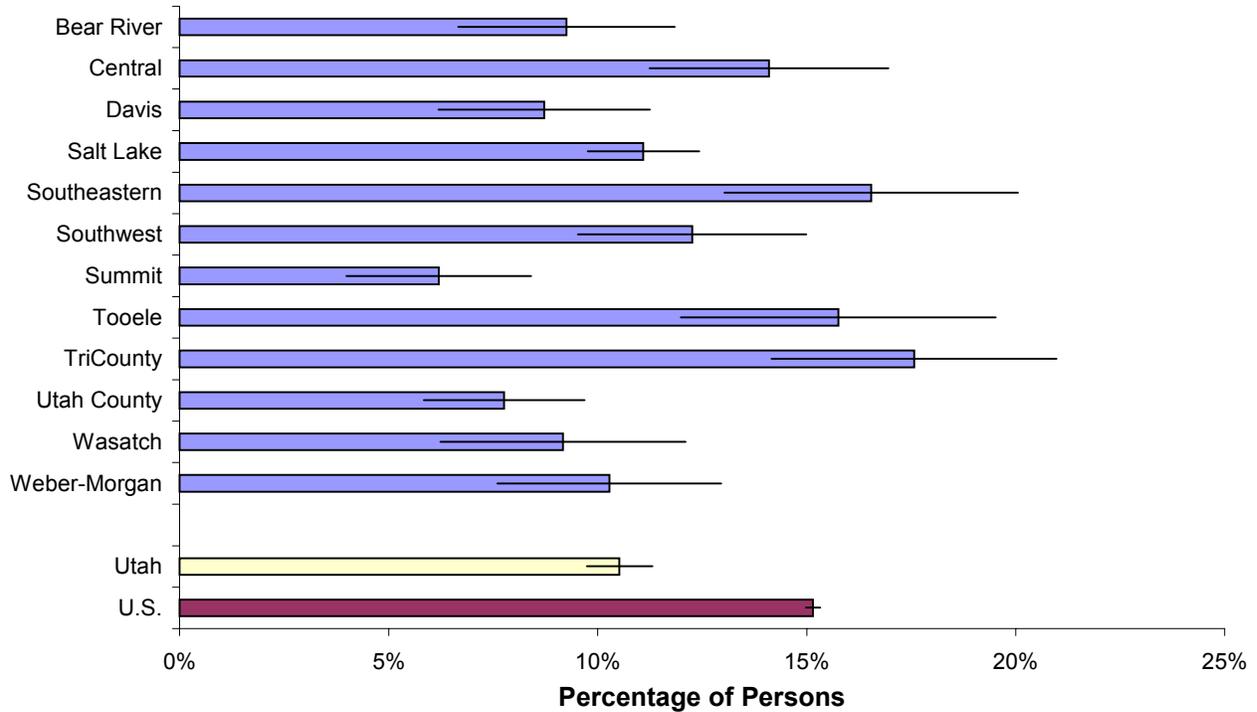
Age adjusted to the U.S. 2000 standard population. Percentage for a local health district was considered different from the state percentage if its 95% confidence interval did not include the state percentage. Source: Behavioral Risk Factor Surveillance System



General Health Status

Percentage of Persons Who Reported Fair or Poor General Health Status*

by Local Health District, Utah, and U.S., Adults Ages 18+, 1999-2001



* crude rates
Source: Behavioral Risk Factor Surveillance System

District	Sample Size	Total Number of Adults	Crude Rates			Age-adjusted Rates**		
			Number With Fair or Poor Health Status	Percent	95% CI Range	Percent	95% CI Range	
Bear River	616	91,817	8,500	9.3%	6.7% 11.8%	10.7%	7.9% 13.5%	
Central	612	43,286	6,100	14.1%	11.2% 17.0%	13.7%	11.1% 16.3%	
Davis	587	155,816	13,600	8.7%	6.2% 11.3%	9.5%	6.9% 12.1%	
Salt Lake	2,689	627,857	69,600	11.1%	9.8% 12.4%	11.7%	10.3% 13.1%	
Southeastern	583	36,451	6,000	16.5%	13.0% 20.1%	16.5%	13.1% 19.8%	
Southwest	648	97,595	12,000	12.3%	9.5% 15.0%	11.9%	9.2% 14.6%	
Summit	605	21,092	1,300	6.2%	4.0% 8.4%	7.5%	4.9% 10.2%	
Tooele	710	27,012	4,300	15.8%	12.0% 19.5%	16.6%	13.2% 20.0%	
TriCounty	597	26,359	4,600	17.6%	14.2% 21.0%	18.4%	15.1% 21.6%	
Utah County	877	245,264	19,000	7.8%	5.8% 9.7%	9.4%	7.1% 11.7%	
Wasatch	552	10,154	900	9.2%	6.2% 12.1%	9.4%	6.5% 12.4%	
Weber-Morgan	614	140,822	14,500	10.3%	7.6% 13.0%	10.6%	7.9% 13.2%	
Utah	9,690	1,523,525	160,300	10.5%	9.7% 11.3%	11.3%	10.5% 12.1%	
U.S.				15.2%	15.0% 15.3%	15.1%	15.0% 15.3%	

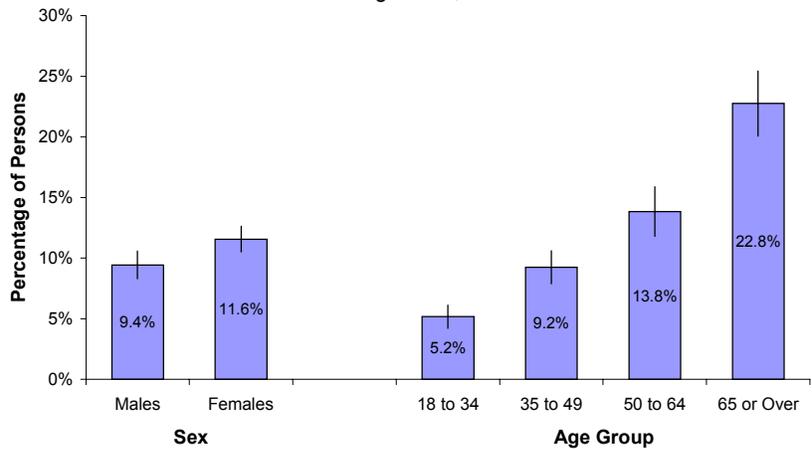
** Age adjusted to U.S. 2000 standard population

General Health Status



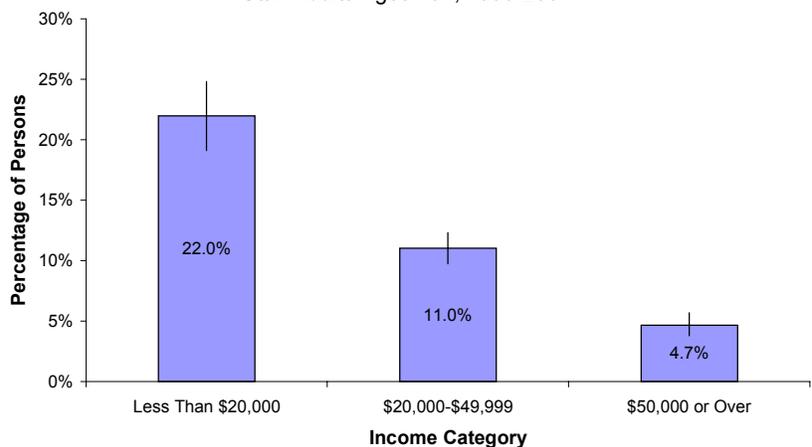
- The likelihood that an individual reported fair or poor health increased with age, rising from 5.2% among persons 18 to 34, to 22.8% among persons 65 or over.
- Women were more likely to report fair or poor health (11.6%) than men (9.4%).

Percentage of Persons Who Reported Fair or Poor General Health Status by Sex and Age, Utah Adults Ages 18+, 1999-2001



- Those persons earning less than \$20,000 were four times as likely to report fair or poor health (22.0%) than persons earning more than \$50,000 (4.7%).
- Those persons with less than a high school education were also four times as likely to report fair or poor health (24.5%) than persons who were college graduates (5.9%) (not graphed).

Percentage of Persons Who Reported Fair or Poor General Health Status by Income, Utah Adults Ages 18+, 1999-2001



The Utah Department of Health in collaboration with Utah's 12 local health districts works to prevent avoidable illness, injury, disability, and premature death, to assure access to affordable quality health care and to promote healthy lifestyles.

Utah Objective: No objective listed.

HP2010 Objective: Overarching: Improve the quality and years of healthy life and eliminate health disparities.



General Health Status

Percentage of Persons Who Reported Fair or Poor General Health Status by Selected Demographic Characteristics, Utah Adults Ages 18+, 1999 - 2001.

Demographic Subgroup	Utah Population		Survey Estimates				
	Distribution	Number of Persons ¹	Percentage of Persons Who Reported Fair or Poor Health Status ²			Number of Persons ^{1,3}	Distribution of Persons Who Reported Fair or Poor Health Status by Category
			95% Confidence Intervals				
			Lower	Upper			
General Health Status							
Excellent	25.0%	381,300					
Very Good	36.5%	556,200					
Good	27.9%	425,700					
Fair	7.9%	121,000					
Poor	2.6%	39,300					
Total, All Adults	100.0%	1,523,500					
Sex							
Males	49.5%	753,700	9.4%	8.3%	10.6%	71,100	44.4%
Females	50.5%	769,800	11.6%	10.5%	12.6%	89,000	55.6%
Total, All Adults	100.0%	1,523,500	10.5%	9.7%	11.3%	160,300	100.0%
Age Group							
18 to 34	42.6%	648,500	5.2%	4.2%	6.1%	33,500	22.1%
35 to 49	28.5%	433,700	9.2%	7.9%	10.6%	40,000	26.4%
50 to 64	16.4%	250,000	13.8%	11.8%	15.9%	34,600	22.8%
65 or Over	12.6%	191,300	22.8%	20.1%	25.5%	43,500	28.7%
Total, All Adults	100.0%	1,523,500	10.5%	9.7%	11.3%	160,300	100.0%
Race/Ethnicity							
White, Non-Hispanic	88.4%	1,346,000	10.5%	9.7%	11.3%	141,600	88.5%
Hispanic	8.3%	126,000	9.7%	6.9%	12.6%	12,300	7.7%
Non-White, Non-Hispanic	3.4%	51,500	11.9%	7.1%	16.7%	6,100	3.8%
Total, All Adults	100.0%	1,523,500	10.5%	9.7%	11.3%	160,300	100.0%
Income							
Less Than \$20,000	13.6%	207,700	22.0%	19.1%	24.8%	45,600	29.8%
\$20,000-\$49,999	47.8%	727,500	11.0%	9.7%	12.3%	80,200	52.3%
\$50,000 or Over	38.6%	588,400	4.7%	3.8%	5.7%	27,400	17.9%
Total, All Adults	100.0%	1,523,500	10.5%	9.7%	11.3%	160,300	100.0%
Education							
Less Than High School	6.0%	91,700	24.5%	19.6%	29.5%	22,500	14.1%
H.S. Grad or G.E.D.	30.1%	458,100	13.9%	12.4%	15.5%	63,900	39.9%
Some Post High School	35.1%	534,100	8.9%	7.7%	10.2%	47,700	29.8%
College Graduate	28.9%	439,500	5.9%	4.8%	7.0%	25,900	16.2%
Total, All Adults	100.0%	1,523,500	10.5%	9.7%	11.3%	160,300	100.0%

1 Rounded to the nearest 100 persons.

2 Plus or minus 95% confidence interval.

3 Figures in these columns may not sum to the total because some surveyed individuals had missing values on the grouping variables.

Population counts for age, sex, and total population were the 2000 estimates provided by the Governor's Office of Planning and Budget. Population count estimates for race/ethnicity, income, and education populations were derived from averaging three years of the BRFSS surveys from 1999-2001.

Physical Health Past 30 Days

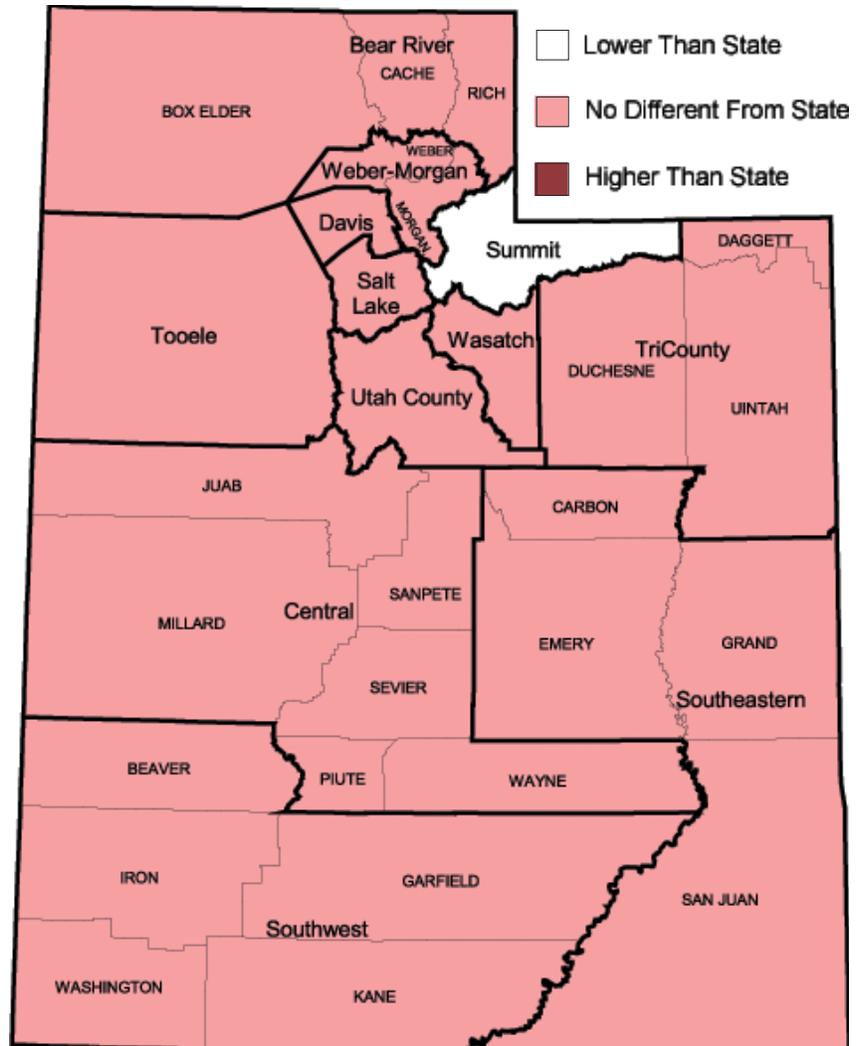


Question: Now thinking about your physical health, which includes physical illness and injury, for how many days during the past 30 days was your physical health not good?

Traditionally, ill health has been measured only in its severe manifestations at the individual level. However, self-assessed physical health status has proved to be as good a predictor of mortality and morbidity as many objective measures of health.¹ The Institute of Medicine recommended this measure as one of 25 Community Health Profile Indicators. For this report, we looked at the percentage of respondents who reported at least one day in the past 30 days when their physical health was not good.

- Adults in Summit County Health District were less likely to report a recent poor physical health day as compared to the state total. None of the other health districts were found to differ significantly from the state total.
- Approximately 39.3% of Utah adults reported a recent poor physical health day as compared to only 33.6% in the entire U.S. This difference was significant even after age adjustment.
- Utah County Health District reported the highest rate at 43.8% while Summit County Health District's rate was lowest at 32.7%.

Recent Poor Physical Health Day(s) by Whether the Local Health District Percentage Differed From the State, Utah Adults Ages 18+, 1999-2001

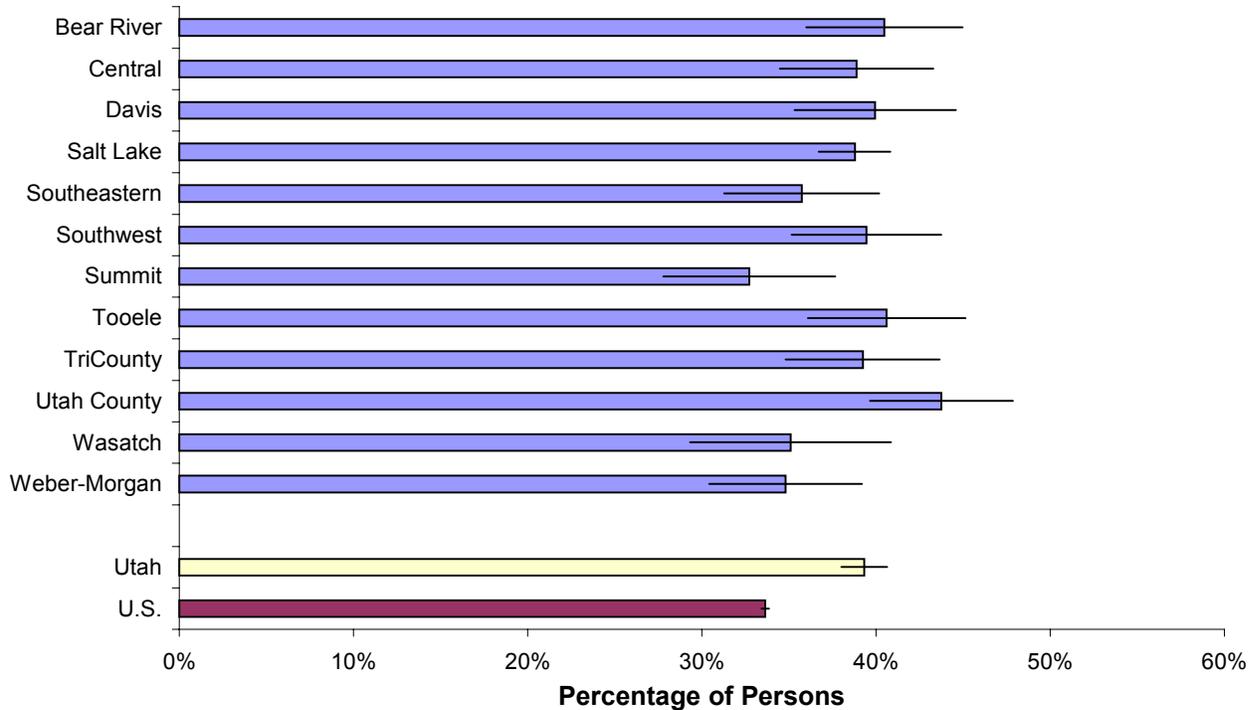


Age adjusted to the U.S. 2000 standard population. Percentage for a local health district was considered different from the state percentage if its 95% confidence interval did not include the state percentage. Source: Behavioral Risk Factor Surveillance System



Physical Health Past 30 Days

Percentage of Persons Who Reported One or More Days Poor Physical Health in the Past 30 Days*
by Local Health District, Utah, and U.S., Adults Ages 18+, 1999-2001



* crude rates
Source: Behavioral Risk Factor Surveillance System

District	Sample Size	Total Number of Adults	Crude Rates			Age-adjusted Rates**		
			Number With Poor Physical Health Day	Percent	95% CI Range	Percent	95% CI Range	
Bear River	614	91,817	37,200	40.5%	36.0% 45.0%	40.1%	35.7% 44.5%	
Central	604	43,286	16,800	38.9%	34.5% 43.3%	39.9%	35.5% 44.2%	
Davis	582	155,816	62,200	40.0%	35.3% 44.6%	39.7%	35.0% 44.4%	
Salt Lake	2,670	627,857	243,500	38.8%	36.7% 40.8%	38.6%	36.6% 40.7%	
Southeastern	583	36,451	13,000	35.7%	31.3% 40.2%	36.3%	32.0% 40.6%	
Southwest	642	97,595	38,500	39.5%	35.2% 43.8%	39.7%	35.4% 44.0%	
Summit	604	21,092	6,900	32.7%	27.8% 37.7%	34.5%	30.1% 39.0%	
Tooele	701	27,012	11,000	40.6%	36.1% 45.1%	41.0%	36.4% 45.5%	
TriCounty	584	26,359	10,300	39.2%	34.8% 43.7%	39.7%	35.2% 44.1%	
Utah County	871	245,264	107,300	43.8%	39.6% 47.9%	42.1%	38.1% 46.1%	
Wasatch	546	10,154	3,600	35.1%	29.3% 40.9%	35.2%	29.7% 40.7%	
Weber-Morgan	611	140,822	49,000	34.8%	30.4% 39.2%	34.9%	30.6% 39.1%	
Utah	9,612	1,523,525	599,200	39.3%	38.0% 40.7%	39.1%	37.8% 40.4%	
U.S.				33.6%	33.4% 33.9%	33.7%	33.5% 33.9%	

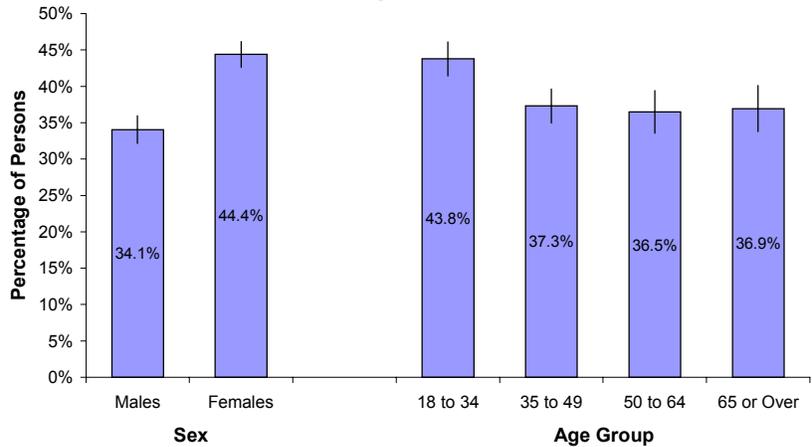
** Age adjusted to U.S. 2000 standard population

Physical Health Past 30 Days



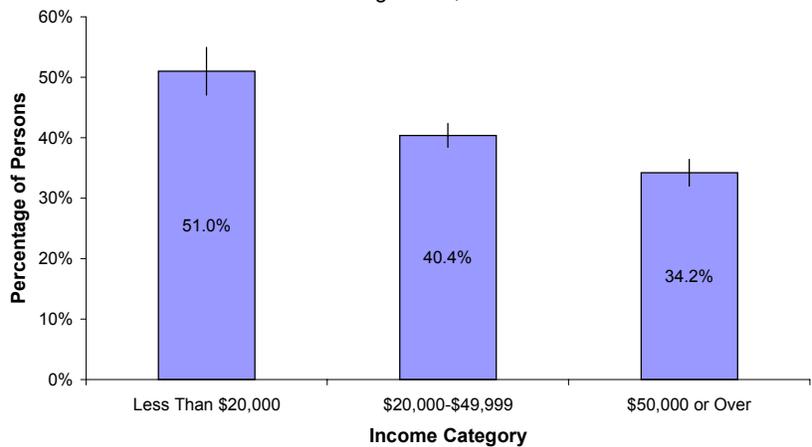
- Females were more likely to report a recent poor physical health day (44.4%) than were males (34.1%) in Utah.
- Young adults ages 18-34 were more likely than other age groups to report at least one day of poor physical health in the past 30 days.

Percentage of Persons Who Reported One or More Days Poor Physical Health in the Past 30 Days by Sex and Age, Utah Adults Ages 18+, 1999-2001



- Adults with annual household incomes less than \$20,000 were much more likely to report a recent poor physical health day than those with higher incomes.
- College graduates were less likely to report a recent poor physical health day than adults with less education (not graphed).

Percentage of Persons Who Reported One or More Days Poor Physical Health in the Past 30 Days by Income, Utah Adults Ages 18+, 1999-2001



Utah Objective: No objective listed.

HP2010 Objective: Overarching: Improve the quality and years of healthy life and eliminate health disparities.



Physical Health Past 30 Days

Percentage of Persons Who Reported One or More Days Poor Physical Health in the Past 30 Days by Selected Demographic Characteristics, Utah Adults Ages 18+, 1999 - 2001.

Demographic Subgroup	Utah Population		Survey Estimates				
	Distribution	Number of Persons ¹	Percentage of Persons Who Reported Recent Poor Physical Health ²			Number of Persons ^{1,3}	Distribution of Persons Who Reported Recent Poor Physical Health by Category
			95% Confidence Intervals Lower	95% Confidence Intervals Upper			
Days Poor Physical Health							
Zero	60.7%	924,300					
One or More	39.3%	599,200					
Total, All Adults	100.0%	1,523,500					
Sex							
Males	49.5%	753,700	34.1%	32.1%	36.0%	256,700	42.9%
Females	50.5%	769,800	44.4%	42.6%	46.2%	341,600	57.1%
Total, All Adults	100.0%	1,523,500	39.3%	38.0%	40.7%	599,200	100.0%
Age Group							
18 to 34	42.6%	648,500	43.8%	41.4%	46.1%	283,800	46.7%
35 to 49	28.5%	433,700	37.3%	35.0%	39.6%	161,700	26.6%
50 to 64	16.4%	250,000	36.5%	33.5%	39.4%	91,200	15.0%
65 or Over	12.6%	191,300	36.9%	33.8%	40.1%	70,700	11.6%
Total, All Adults	100.0%	1,523,500	39.3%	38.0%	40.7%	599,200	100.0%
Race/Ethnicity							
White, Non-Hispanic	88.4%	1,346,000	39.8%	38.4%	41.2%	535,200	89.8%
Hispanic	8.3%	126,000	35.3%	29.6%	41.0%	44,400	7.4%
Non-White, Non-Hispanic	3.4%	51,500	32.2%	25.1%	39.3%	16,600	2.8%
Total, All Adults	100.0%	1,523,500	39.3%	38.0%	40.7%	599,200	100.0%
Income							
Less Than \$20,000	13.6%	207,700	51.0%	47.1%	55.0%	105,900	17.6%
\$20,000-\$49,999	47.8%	727,500	40.4%	38.4%	42.4%	293,800	48.9%
\$50,000 or Over	38.6%	588,400	34.2%	32.0%	36.4%	201,400	33.5%
Total, All Adults	100.0%	1,523,500	39.3%	38.0%	40.7%	599,200	100.0%
Education							
Less Than High School	6.0%	91,700	42.9%	36.8%	49.1%	39,400	6.6%
H.S. Grad or G.E.D.	30.1%	458,100	40.0%	37.7%	42.4%	183,400	30.6%
Some Post High School	35.1%	534,100	41.7%	39.4%	44.0%	222,700	37.2%
College Graduate	28.9%	439,500	35.0%	32.6%	37.3%	153,700	25.7%
Total, All Adults	100.0%	1,523,500	39.3%	38.0%	40.7%	599,200	100.0%

1 Rounded to the nearest 100 persons.

2 Plus or minus 95% confidence interval.

3 Figures in these columns may not sum to the total because some surveyed individuals had missing values on the grouping variables.

Population counts for age, sex, and total population were the 2000 estimates provided by the Governor's Office of Planning and Budget. Population count estimates for race/ethnicity, income, and education populations were derived from averaging three years of the BRFSS surveys from 1999-2001.

Mental Health Past 30 Days



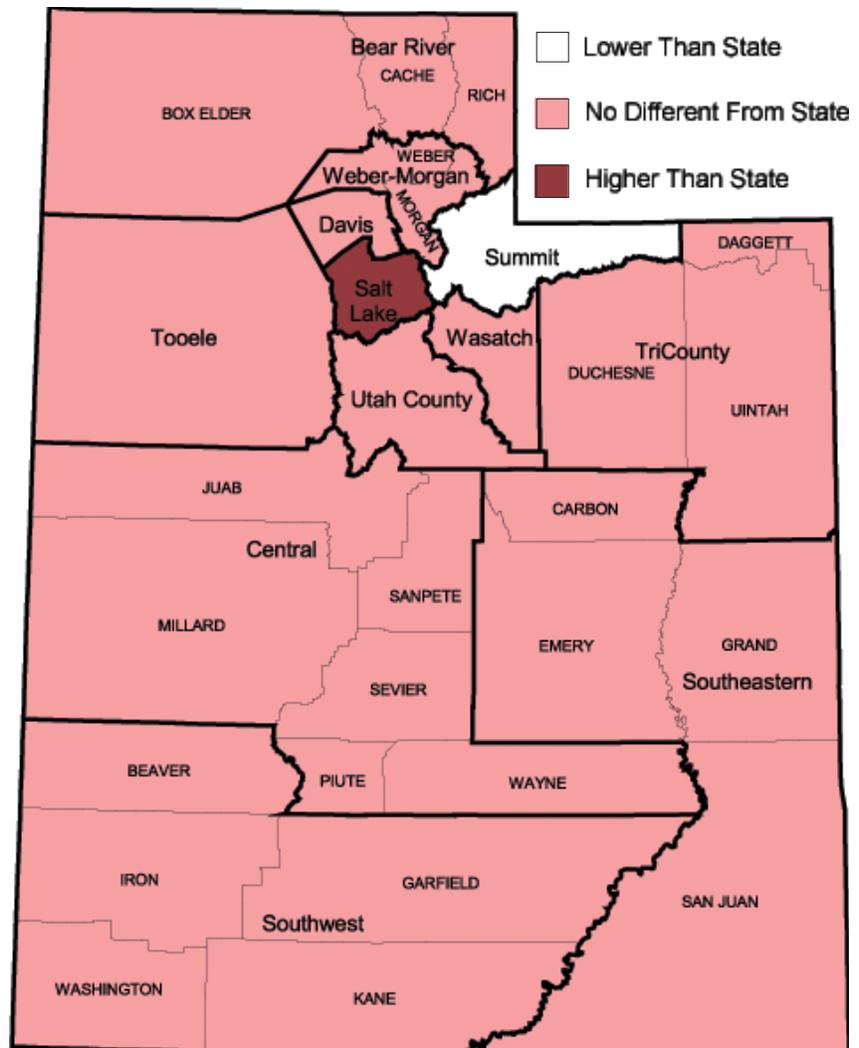
Question: Now thinking about your mental health, which includes stress, depression, and problems with emotions, for how many days during the past 30 days was your mental health not good?

The Global Burden of Disease study,² conducted by the World Health Organization, the World Bank, and Harvard University, reveals that mental illness ranks second in the burden of disease in established market economies, such as the United States. Major depression alone ranked second only to ischemic heart disease in magnitude of disease burden.

In the United States, mental disorders collectively account for more than 15 percent of the overall burden of disease from all causes and slightly more than the burden associated with all forms of cancer.² This measure was recommended by the Institute of Medicine as one of 25 Community Health Profile Indicators. For this report, we looked at the percentage of adults who reported one or more days when their mental health was not good in the past 30 days.

- Persons in Summit County Health District were less likely to report recent poor mental health than the entire state, whereas persons in Salt Lake Valley Health District were more likely.
- In Utah, approximately 41.9% of adults reported at least one day of poor mental health in the past 30 days. This was higher than the U.S. rate of 33.3%, even after age adjustment.
- Summit County Health District had the lowest percentage of adults with recent poor mental health (36.1%), and Salt Lake Valley Health District had the highest with 43.9%.

Recent Poor Mental Health Day(s) by Whether the Local Health District Percentage Differed From the State, Utah Adults Ages 18+, 1999-2001

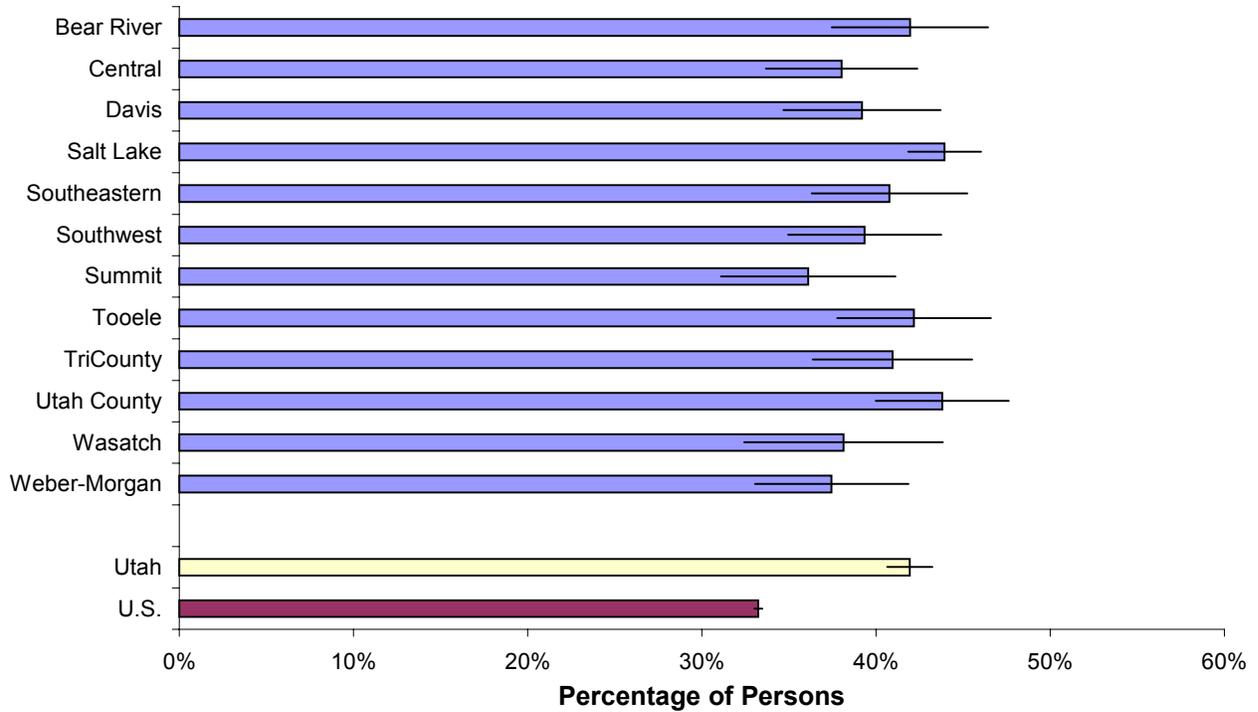


Age adjusted to the U.S. 2000 standard population. Percentage for a local health district was considered different from the state percentage if its 95% confidence interval did not include the state percentage. Source: Behavioral Risk Factor Surveillance System



Mental Health Past 30 Days

Percentage of Persons Who Reported One or More Days Poor Mental Health in the Past 30 Days*
by Local Health District, Utah, and U.S., Adults Ages 18+, 1999-2001



* crude rates
Source: Behavioral Risk Factor Surveillance System

District	Sample Size	Total Number of Adults	Crude Rates			Age-adjusted Rates**		
			Number With Poor Mental Health Day	Percent	95% CI Range	Percent	95% CI Range	
Bear River	609	91,817	38,500	42.0%	37.5% 46.4%	39.3%	35.0% 43.6%	
Central	606	43,286	16,500	38.0%	33.7% 42.4%	39.0%	34.7% 43.2%	
Davis	585	155,816	61,100	39.2%	34.7% 43.7%	37.7%	33.4% 42.0%	
Salt Lake	2,679	627,857	275,800	43.9%	41.8% 46.0%	42.8%	40.7% 44.8%	
Southeastern	578	36,451	14,900	40.8%	36.3% 45.3%	40.6%	36.4% 44.8%	
Southwest	643	97,595	38,400	39.4%	35.0% 43.7%	40.4%	36.0% 44.7%	
Summit	603	21,092	7,600	36.1%	31.1% 41.1%	34.7%	30.2% 39.2%	
Tooele	700	27,012	11,400	42.2%	37.8% 46.6%	42.3%	38.1% 46.4%	
TriCounty	588	26,359	10,800	41.0%	36.4% 45.5%	40.4%	36.0% 44.8%	
Utah County	870	245,264	107,500	43.8%	40.0% 47.6%	39.6%	35.9% 43.2%	
Wasatch	551	10,154	3,900	38.1%	32.4% 43.8%	37.9%	32.8% 43.1%	
Weber-Morgan	613	140,822	52,700	37.5%	33.1% 41.9%	37.2%	33.1% 41.4%	
Utah	9,625	1,523,525	638,800	41.9%	40.6% 43.2%	40.6%	39.3% 41.8%	
U.S.				33.3%	33.0% 33.5%	33.4%	33.2% 33.6%	

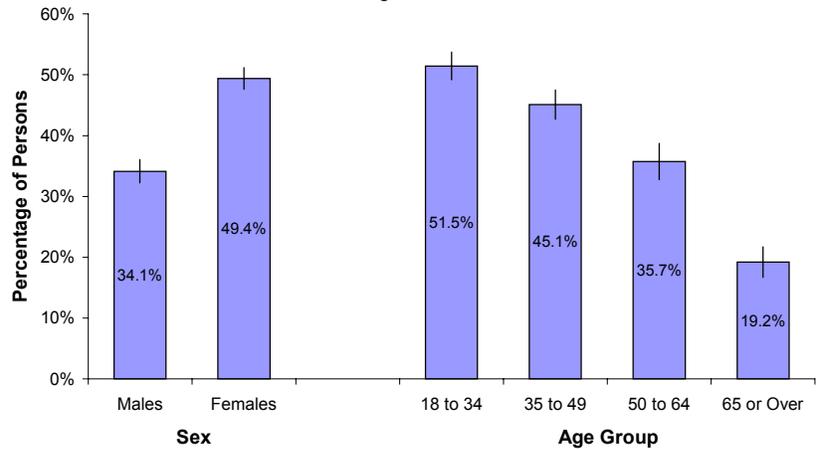
** Age adjusted to U.S. 2000 standard population

Mental Health Past 30 Days



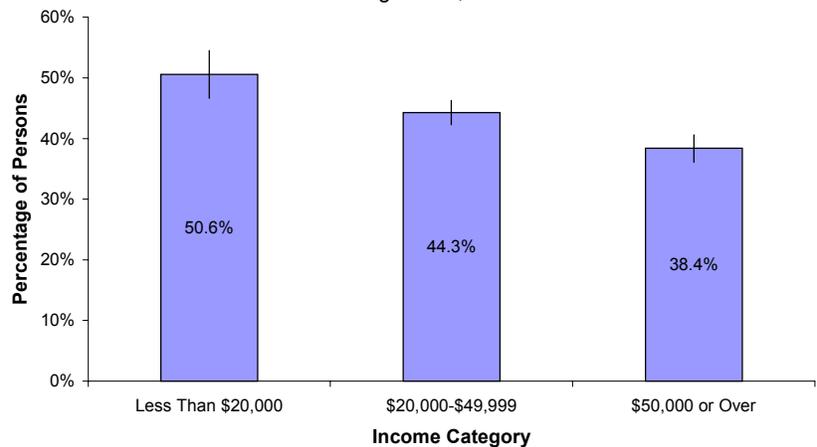
- Women were more likely than men to report a recent poor mental health day (49.4% vs. 34.1%).
- The prevalence of a recent poor mental health day decreased with increasing age.

Percentage of Persons Who Reported One or More Days Poor Mental Health in the Past 30 Days by Sex and Age, Utah Adults Ages 18+, 1999-2001



- The percentage of adults with a recent poor mental health day decreased with increasing income.
- Those adults with a college education were less likely to report a recent poor mental health day than adults with less education (not graphed).

Percentage of Persons Who Reported One or More Days Poor Mental Health in the Past 30 Days by Income, Utah Adults Ages 18+, 1999-2001



Utah Objective: No objective listed.

HP2010 Objective: Overarching: Improve the quality and years of healthy life and eliminate health disparities.



Mental Health Past 30 Days

Percentage of Persons Who Reported One or More Days Poor Mental Health in the Past 30 Days by Selected Demographic Characteristics, Utah Adults Ages 18+, 1999 - 2001.

Demographic Subgroup	Utah Population		Survey Estimates				
	Distribution	Number of Persons ¹	Percentage of Persons Who Reported Recent Poor Mental Health ²			Number of Persons ^{1,3}	Distribution of Persons Who Reported Recent Poor Mental Health by Category
			95% Confidence Intervals Lower	Upper			
Days Poor Mental Health							
Zero	58.1%	884,700					
One or More	41.9%	638,800					
Total, All Adults	100.0%	1,523,500					
Sex							
Males	49.5%	753,700	34.1%	32.2%	36.0%	257,200	40.4%
Females	50.5%	769,800	49.4%	47.6%	51.2%	380,200	59.6%
Total, All Adults	100.0%	1,523,500	41.9%	40.6%	43.2%	638,800	100.0%
Age Group							
18 to 34	42.6%	648,500	51.5%	49.2%	53.7%	333,700	50.9%
35 to 49	28.5%	433,700	45.1%	42.7%	47.5%	195,600	29.8%
50 to 64	16.4%	250,000	35.7%	32.8%	38.7%	89,300	13.6%
65 or Over	12.6%	191,300	19.2%	16.7%	21.7%	36,700	5.6%
Total, All Adults	100.0%	1,523,500	41.9%	40.6%	43.2%	638,800	100.0%
Race/Ethnicity							
White, Non-Hispanic	88.4%	1,346,000	41.8%	40.4%	43.1%	562,200	88.0%
Hispanic	8.3%	126,000	42.8%	37.1%	48.5%	53,900	8.4%
Non-White, Non-Hispanic	3.4%	51,500	43.9%	36.4%	51.3%	22,600	3.5%
Total, All Adults	100.0%	1,523,500	41.9%	40.6%	43.2%	638,800	100.0%
Income							
Less Than \$20,000	13.6%	207,700	50.6%	46.7%	54.5%	105,100	16.1%
\$20,000-\$49,999	47.8%	727,500	44.3%	42.3%	46.3%	322,100	49.3%
\$50,000 or Over	38.6%	588,400	38.4%	36.1%	40.7%	225,800	34.6%
Total, All Adults	100.0%	1,523,500	41.9%	40.6%	43.2%	638,800	100.0%
Education							
Less Than High School	6.0%	91,700	42.2%	36.2%	48.2%	38,700	6.1%
H.S. Grad or G.E.D.	30.1%	458,100	44.6%	42.3%	47.0%	204,500	32.0%
Some Post High School	35.1%	534,100	44.2%	42.0%	46.5%	236,200	37.0%
College Graduate	28.9%	439,500	36.1%	33.8%	38.5%	158,700	24.9%
Total, All Adults	100.0%	1,523,500	41.9%	40.6%	43.2%	638,800	100.0%

1 Rounded to the nearest 100 persons.

2 Plus or minus 95% confidence interval.

3 Figures in these columns may not sum to the total because some surveyed individuals had missing values on the grouping variables.

Population counts for age, sex, and total population were the 2000 estimates provided by the Governor's Office of Planning and Budget. Population count estimates for race/ethnicity, income, and education populations were derived from averaging three years of the BRFSS surveys from 1999-2001.

Diabetes



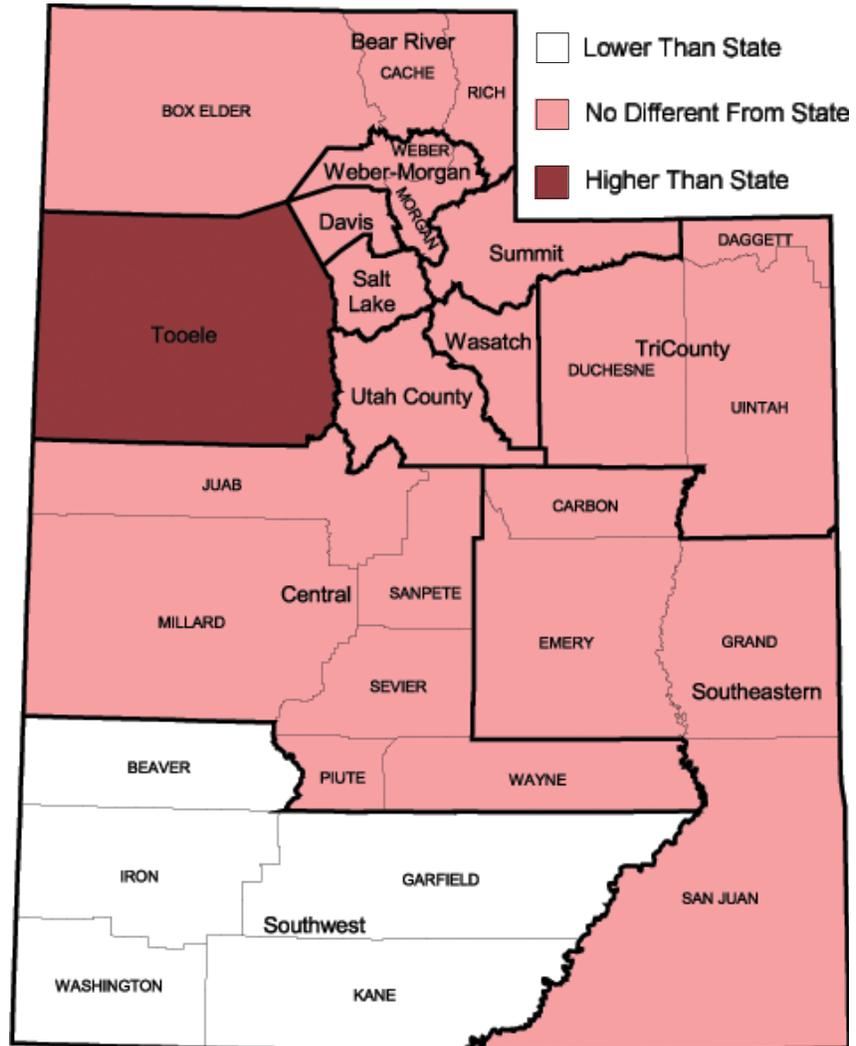
Question: *Have you ever been told by a doctor that you have diabetes?*

Diabetes is the sixth leading cause of death in the U.S. Approximately 80,000 Utahns have been diagnosed with diabetes. It is the leading cause of blindness in working-age adults, and a major contributor to heart disease, stroke, and kidney failure. It is the number one cause of non-traumatic lower extremity amputations.

One third of Utahns with diabetes are ages 65 or over. Hispanic, Polynesian, and Native American Utahns are almost twice as likely to develop type 2 diabetes as White, non-Hispanic Utahns. Diabetes is generally classified as type 1 or type 2. Type 1, an autoimmune disease that occurs when the pancreas produces too little or no insulin, usually develops prior to age 30. Less than 10 percent of all cases of diabetes are type 1. Type 2 diabetes occurs when available insulin is not used effectively.

About 40,000 Utahns with diabetes are not aware they have it. Early detection is essential if complications are to be prevented or delayed. Maintaining a healthy weight and participating in regular physical activity is one of the best ways to prevent diabetes.

Doctor-diagnosed Diabetes by Whether the Local Health District Percentage Differed From the State, Utah Adults Ages 18+, 1999-2001

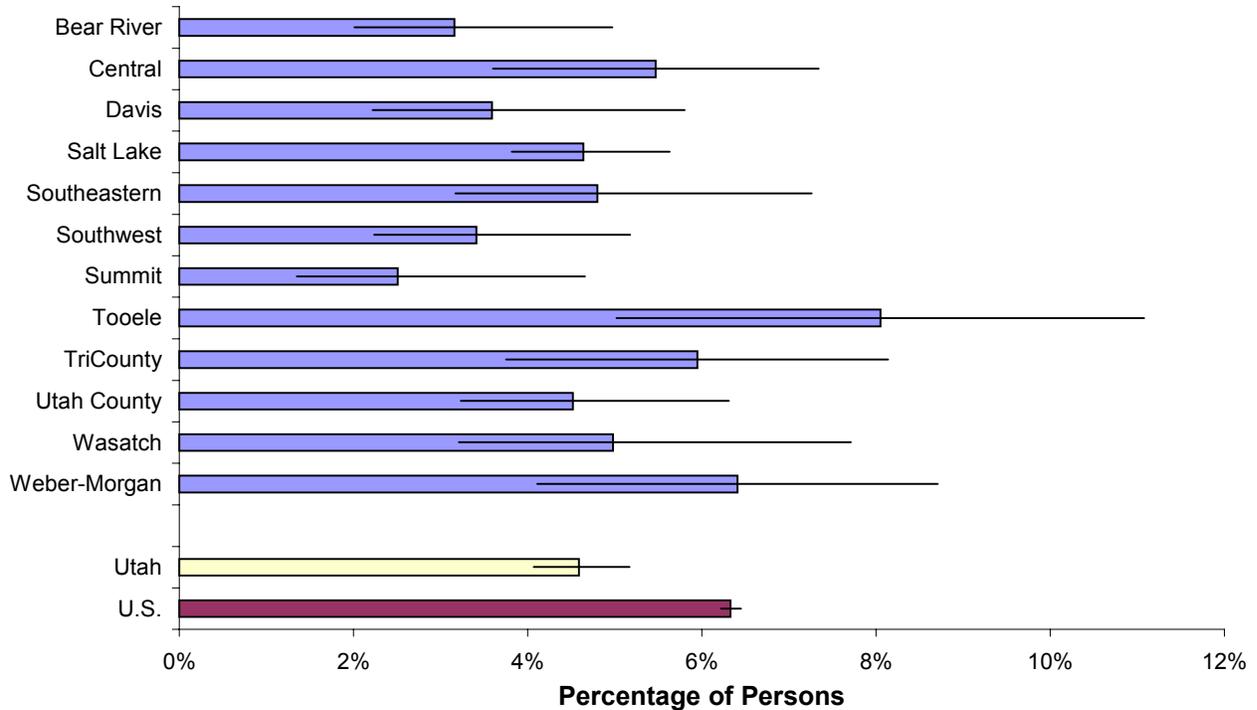


Age adjusted to the U.S. 2000 standard population. Percentage for a local health district was considered different from the state percentage if its 95% confidence interval did not include the state percentage. Source: Behavioral Risk Factor Surveillance System

- Diabetes prevalence has increased dramatically in past decades. Tooele County Health District had a prevalence rate higher than the state rate, even after adjusting for the effects of age. The prevalence in Southwest Utah Health District was lower than the state total.
- The percentage of Utah adults with doctor-diagnosed diabetes (4.6%) was lower than the U.S. total (6.3%), even after adjusting for age.



Percentage of Persons Who Reported Being Told by a Doctor That They Had Diabetes* by Local Health District, Utah, and U.S., Adults Ages 18+, 1999-2001



* crude rates
Source: Behavioral Risk Factor Surveillance System

District	Sample Size	Total Number of Adults	Crude Rates			Age-adjusted Rates**		
			Number With Diagnosed Diabetes	Percent	95% CI Range	Percent	95% CI Range	
Bear River	616	91,817	2,900	3.2%	2.0% 5.0%	3.8%	2.4% 5.8%	
Central	615	43,286	2,400	5.5%	3.6% 7.3%	5.2%	3.5% 7.0%	
Davis	587	155,816	5,600	3.6%	2.2% 5.8%	3.9%	2.4% 6.1%	
Salt Lake	2,688	627,857	29,100	4.6%	3.8% 5.6%	4.9%	4.1% 5.9%	
Southeastern	582	36,451	1,700	4.8%	3.2% 7.3%	4.7%	3.2% 7.0%	
Southwest	648	97,595	3,300	3.4%	2.2% 5.2%	3.3%	2.2% 5.0%	
Summit	605	21,092	500	2.5%	1.4% 4.7%	2.9%	1.6% 5.3%	
Tooele	710	27,012	2,200	8.1%	5.0% 11.1%	8.1%	5.4% 10.8%	
TriCounty	598	26,359	1,600	6.0%	3.8% 8.1%	5.9%	3.8% 7.9%	
Utah County	877	245,264	11,100	4.5%	3.2% 6.3%	5.8%	4.0% 7.7%	
Wasatch	553	10,154	500	5.0%	3.2% 7.7%	4.9%	3.2% 7.5%	
Weber-Morgan	614	140,822	9,000	6.4%	4.1% 8.7%	6.5%	4.3% 8.7%	
Utah	9,693	1,523,525	69,900	4.6%	4.1% 5.2%	5.0%	4.4% 5.6%	
U.S.				6.3%	6.2% 6.5%	6.2%	6.1% 6.3%	

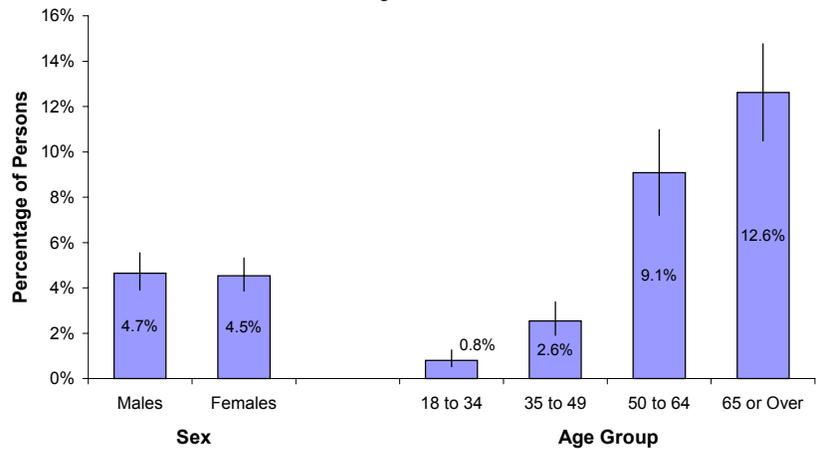
** Age adjusted to U.S. 2000 standard population

Diabetes



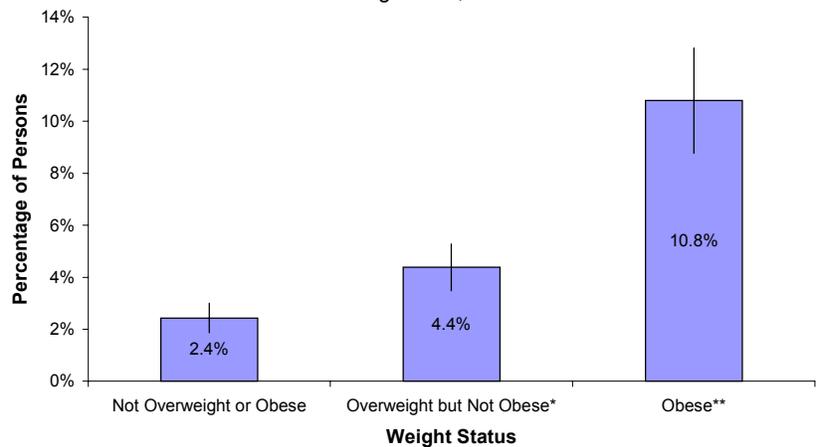
- The prevalence of doctor-diagnosed diabetes drastically increased with increasing age, but did not differ between men and women.

Percentage of Persons Who Reported Ever Being Told by a Doctor That They Had Diabetes by Sex and Age, Utah Adults Ages 18+, 1999-2001



- Obese adults were four times more likely to report doctor-diagnosed diabetes than people who were not overweight or obese.

Percentage of Persons Who Reported Ever Being Told by a Doctor That They Had Diabetes by Weight Status, Utah Adults Ages 18+, 1999-2001



* Overweight, but not obese, is defined as a BMI 25-29.

** Obese is defined as a BMI of 30 or more.

The National Diabetes Education Program has just launched a campaign to help people reduce their risk of type 2 diabetes, “Small Steps, Big Rewards.” This campaign is designed to increase public awareness of the “small steps” that can lead to diabetes prevention, such as moderate exercise and a healthy diet.

Utah Objective: Same as HP2010 Objective

HP2010 Objective (related) 5-3: Reduce the overall rate of diabetes that is clinically diagnosed to 25 overall cases per 1,000 population (age adjusted to the U.S. 2000 standard population).



Percentage of Persons Who Reported Ever Being Told by a Doctor That They Had Diabetes

by Selected Demographic Characteristics, Utah Adults Ages 18+, 1999 - 2001.

Demographic Subgroup	Utah Population		Survey Estimates			Number of Persons ^{1,3}	Distribution of Persons Who Reported Diagnosed Diabetes by Category
	Distribution	Number of Persons ¹	Percentage of Persons Who Reported Diagnosed Diabetes ²				
			95% Confidence Intervals				
			Lower	Upper			
Diagnosed With Diabetes							
Yes	4.6%	69,900					
Yes - During Pregnancy Only	1.2%	18,400					
No	94.2%	1,435,100					
Total, All Adults	100.0%	1,523,500					
Sex							
Males	49.5%	753,700	4.7%	3.9%	5.5%	35,000	50.1%
Females	50.5%	769,800	4.5%	3.9%	5.3%	34,900	49.9%
Total, All Adults	100.0%	1,523,500	4.6%	4.1%	5.2%	69,900	100.0%
Age Group							
18 to 34	42.6%	648,500	0.8%	0.5%	1.3%	5,300	8.4%
35 to 49	28.5%	433,700	2.6%	1.9%	3.4%	11,100	17.6%
50 to 64	16.4%	250,000	9.1%	7.2%	11.0%	22,700	35.9%
65 or Over	12.6%	191,300	12.6%	10.5%	14.8%	24,100	38.1%
Total, All Adults	100.0%	1,523,500	4.6%	4.1%	5.2%	69,900	100.0%
Race/Ethnicity							
White, Non-Hispanic	88.4%	1,346,000	4.8%	4.2%	5.4%	63,900	92.3%
Hispanic	8.3%	126,000	3.0%	1.7%	5.2%	3,800	5.5%
Non-White, Non-Hispanic	3.4%	51,500	2.8%	1.3%	6.3%	1,500	2.2%
Total, All Adults	100.0%	1,523,500	4.6%	4.1%	5.2%	69,900	100.0%
Income							
Less Than \$20,000	13.6%	207,700	6.6%	5.1%	8.2%	13,800	20.2%
\$20,000-\$49,999	47.8%	727,500	5.4%	4.5%	6.4%	39,600	58.0%
\$50,000 or Over	38.6%	588,400	2.5%	2.0%	3.3%	14,900	21.8%
Total, All Adults	100.0%	1,523,500	4.6%	4.1%	5.2%	69,900	100.0%
Education							
Less Than High School	6.0%	91,700	5.6%	3.3%	7.9%	5,100	7.3%
H.S. Grad or G.E.D.	30.1%	458,100	4.7%	3.9%	5.8%	21,700	31.1%
Some Post High School	35.1%	534,100	4.9%	3.9%	6.0%	25,900	37.1%
College Graduate	28.9%	439,500	3.9%	3.0%	5.0%	17,100	24.5%
Total, All Adults	100.0%	1,523,500	4.6%	4.1%	5.2%	69,900	100.0%
Weight Status							
Not Overweight or Obese	46.7%	711,300	2.4%	1.9%	3.0%	17,300	24.4%
Overweight but Not Obese*	35.0%	532,600	4.4%	3.5%	5.3%	23,300	32.9%
Obese**	18.4%	279,600	10.8%	8.8%	12.8%	30,200	42.7%
Total, All Adults	100.0%	1,523,500	4.6%	4.1%	5.2%	69,900	100.0%

1 Rounded to the nearest 100 persons.

2 Plus or minus 95% confidence interval.

3 Figures in these columns may not sum to the total because some surveyed individuals had missing values on the grouping variables.

* Overweight, but not obese, is defined as a BMI 25-29.

** Obese is defined as a BMI of 30 or more.

Population counts for age, sex, and total population were the 2000 estimates provided by the Governor's Office of Planning and Budget. Population count estimates for race/ethnicity, income, and education populations were derived from averaging three years of the BRFSS surveys from 1999-2001.

Asthma



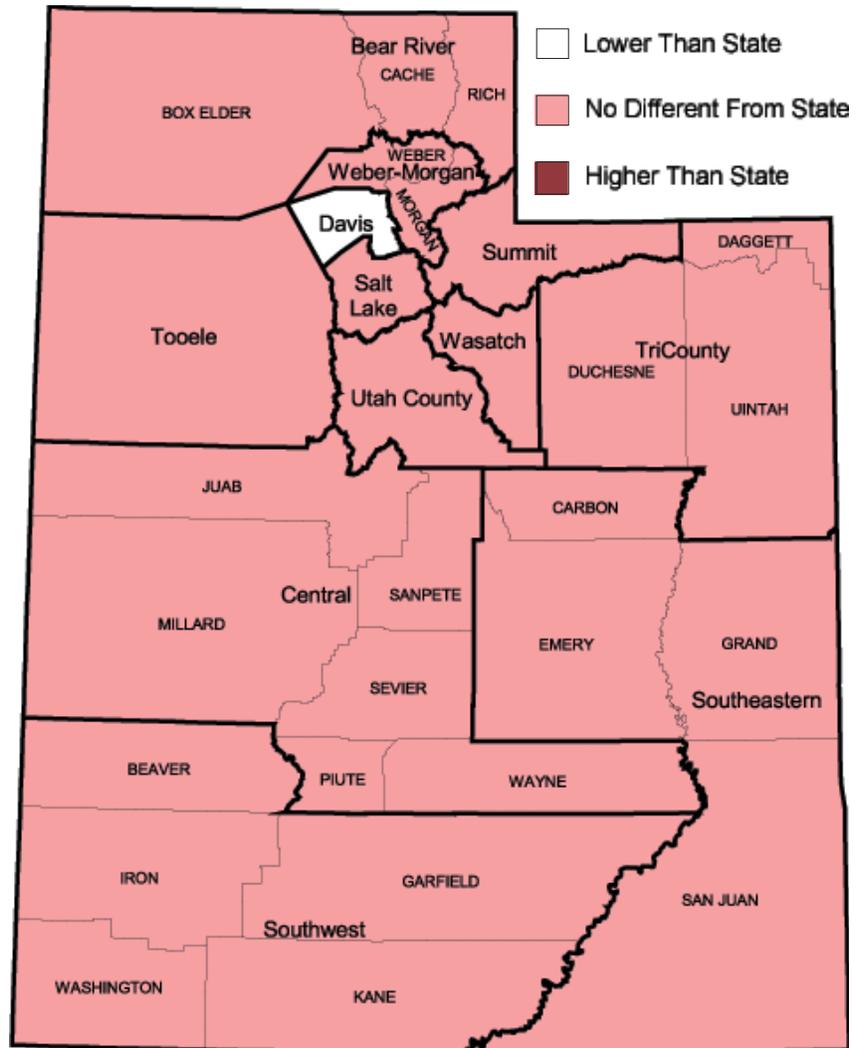
Questions: *Have you ever been told by a doctor, nurse, or other health professional that you had asthma? Do you still have asthma?*

Asthma is a chronic lung disease caused by airway inflammation that causes reversible airflow obstruction. Asthma is one of the ten leading chronic conditions that restrict activity. Approximately 15 million people in the U.S. have asthma including some 5 million children. Although not much is known about how to prevent asthma, effective asthma management by patients, their family members, and their health care providers can reduce or prevent many problems caused by the disease.

The Healthy People 2010 has set a series of objectives to reduce the burden of asthma. They include: reduce deaths from asthma; reduce hospitalizations, emergency department visits, and activity limitations caused by asthma; increase patient education and appropriate asthma care; and establish surveillance systems for states.

- During 1999-2001, 7.4% of Utah adults were estimated to be living with asthma.
- Persons living in Davis County Health District were less likely to have asthma when compared to the entire state.

Current Asthma by Whether the Local Health District Percentage Differed From the State, Utah Adults Ages 18+, 1999-2001

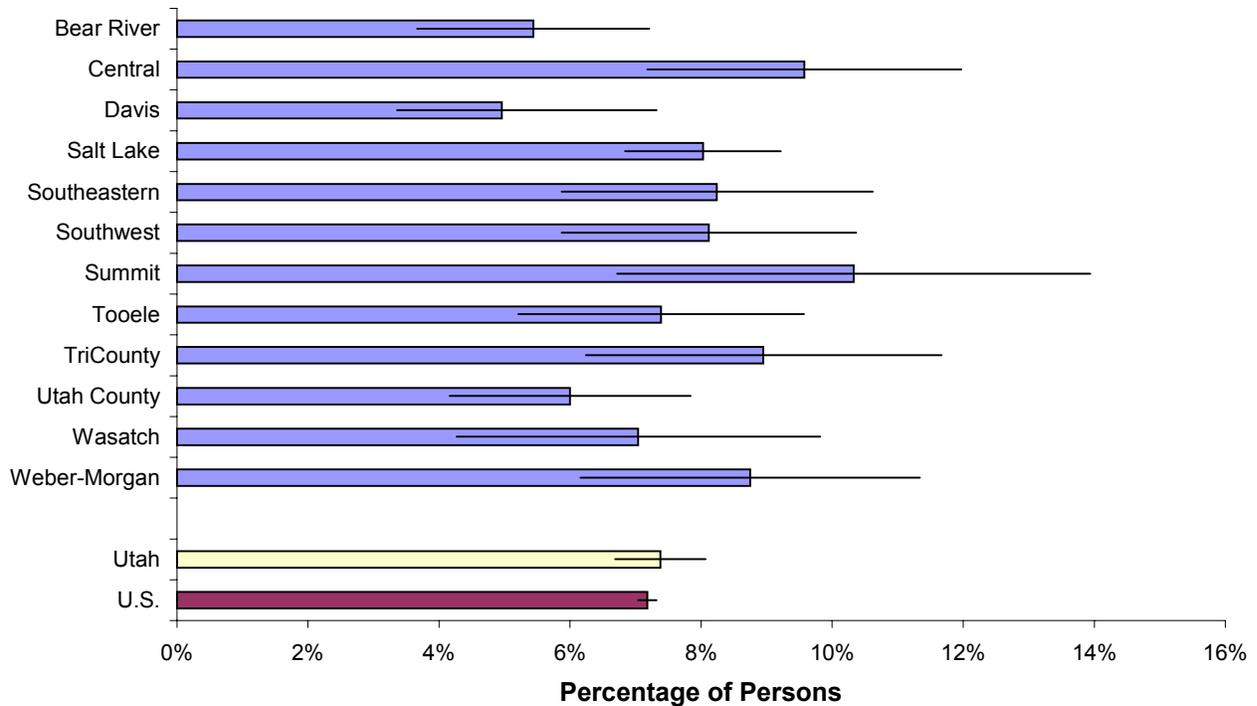


Age adjusted to the U.S. 2000 standard population. Percentage for a local health district was considered different from the state percentage if its 95% confidence interval did not include the state percentage. Source: Behavioral Risk Factor Surveillance System



Percentage of Persons Who Reported Current Diagnosed Asthma*

by Local Health District, Utah, and U.S., Adults Ages 18+, 1999-2001



* crude rates
Source: Behavioral Risk Factor Surveillance System

District	Sample Size	Total Number of Adults	Crude Rates			Age-adjusted Rates**		
			Number With Current Asthma	Percent	95% CI Range	Percent	95% CI Range	
Bear River	615	91,817	5,000	5.4%	3.7% 7.2%	5.7%	3.9% 7.6%	
Central	614	43,286	4,100	9.6%	7.2% 12.0%	9.8%	7.3% 12.2%	
Davis	584	155,816	7,700	5.0%	3.4% 7.3%	5.1%	3.1% 7.1%	
Salt Lake	2,680	627,857	50,400	8.0%	6.8% 9.2%	8.0%	6.8% 9.2%	
Southeastern	582	36,451	3,000	8.2%	5.9% 10.6%	8.4%	6.0% 10.7%	
Southwest	646	97,595	7,900	8.1%	5.9% 10.4%	8.1%	5.9% 10.4%	
Summit	603	21,092	2,200	10.3%	6.7% 13.9%	10.7%	7.4% 14.0%	
Tooele	709	27,012	2,000	7.4%	5.2% 9.6%	7.6%	5.3% 9.8%	
TriCounty	596	26,359	2,400	9.0%	6.2% 11.7%	8.6%	6.1% 11.1%	
Utah County	873	245,264	14,700	6.0%	4.2% 7.8%	6.4%	4.4% 8.4%	
Wasatch	550	10,154	700	7.0%	4.3% 9.8%	6.9%	4.3% 9.6%	
Weber-Morgan	612	140,822	12,300	8.8%	6.2% 11.3%	8.8%	6.2% 11.4%	
Utah	9,664	1,523,525	112,400	7.4%	6.7% 8.1%	7.4%	6.7% 8.1%	
U.S.				7.2%	7.0% 7.3%	7.2%	7.0% 7.3%	

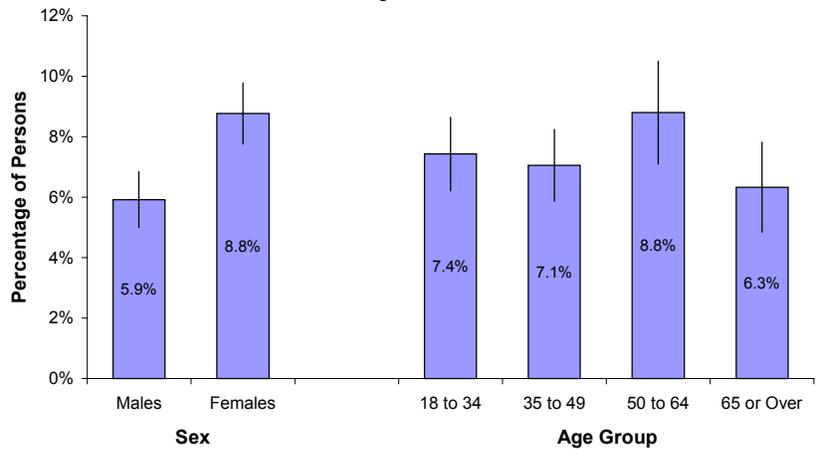
** Age adjusted to U.S. 2000 standard population
U.S. rate includes only years 2000 and 2001.

Asthma



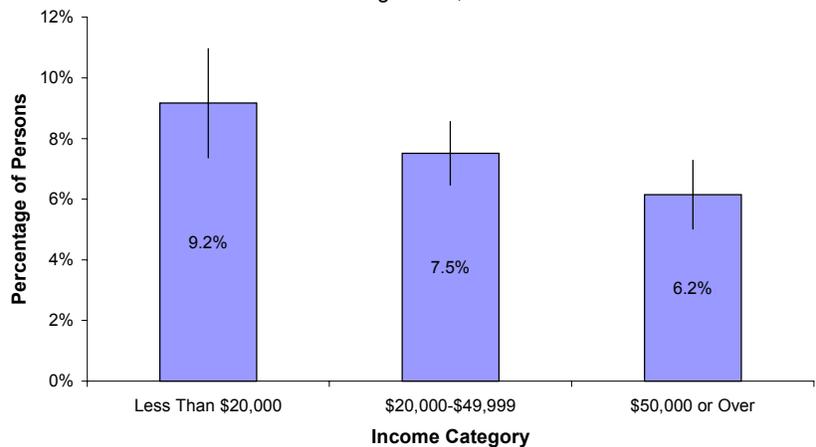
- Women (8.8%) were more likely to have asthma than men (5.9%).

Percentage of Persons Who Reported Current Diagnosed Asthma by Sex and Age, Utah Adults Ages 18+, 1999-2001



- The percentage of persons living with asthma increased as their income level decreased.

Percentage of Persons Who Reported Current Diagnosed Asthma by Income, Utah Adults Ages 18+, 1999-2001



The Utah Asthma Program was created in the Utah Department of Health in 2001. This program is working to identify the burdens of asthma in Utah and ways to reduce them with numerous partners and experts from the community.

Utah Objective: No objective listed.

HP2010 Objective (related) 24-1c: Reduce asthma deaths for adolescents and adults aged 15 to 34 to 2 deaths per million.

HP2010 Objective (related) 24-1d: Reduce asthma deaths for adults ages 35 to 64 to 9 deaths per million.

HP2010 Objective (related) 24-1e: Reduce asthma deaths for adults aged 65 or over to 60 deaths per million.



**Percentage of Persons Who Reported Current Diagnosed Asthma
by Selected Demographic Characteristics, Utah Adults Ages 18+, 1999 - 2001.**

Demographic Subgroup	Utah Population		Survey Estimates				
	Distribution	Number of Persons ¹	Percentage of Persons Who Reported Current Asthma ²			Number of Persons ^{1,3}	Distribution of Persons Who Reported Current Asthma by Category
			95% Confidence Intervals				
			Lower	Upper			
Current Diagnosed Asthma							
Yes	7.4%	112,400					
No	92.6%	1,411,100					
Total, All Adults	100.0%	1,523,500					
Sex							
Males	49.5%	753,700	5.9%	5.0%	6.8%	44,600	39.8%
Females	50.5%	769,800	8.8%	7.8%	9.8%	67,500	60.2%
Total, All Adults	100.0%	1,523,500	7.4%	6.7%	8.1%	112,400	100.0%
Age Group							
18 to 34	42.6%	648,500	7.4%	6.2%	8.6%	48,200	42.7%
35 to 49	28.5%	433,700	7.1%	5.9%	8.2%	30,600	27.1%
50 to 64	16.4%	250,000	8.8%	7.1%	10.5%	22,000	19.5%
65 or Over	12.6%	191,300	6.3%	4.9%	7.8%	12,100	10.7%
Total, All Adults	100.0%	1,523,500	7.4%	6.7%	8.1%	112,400	100.0%
Race/Ethnicity							
White, Non-Hispanic	88.4%	1,346,000	7.5%	6.8%	8.2%	100,700	89.6%
Hispanic	8.3%	126,000	5.9%	3.3%	8.5%	7,400	6.6%
Non-White, Non-Hispanic	3.4%	51,500	8.4%	4.4%	12.4%	4,300	3.8%
Total, All Adults	100.0%	1,523,500	7.4%	6.7%	8.1%	112,400	100.0%
Income							
Less Than \$20,000	13.6%	207,700	9.2%	7.4%	11.0%	19,000	17.3%
\$20,000-\$49,999	47.8%	727,500	7.5%	6.5%	8.6%	54,600	49.7%
\$50,000 or Over	38.6%	588,400	6.2%	5.0%	7.3%	36,200	33.0%
Total, All Adults	100.0%	1,523,500	7.4%	6.7%	8.1%	112,400	100.0%
Education							
Less Than High School	6.0%	91,700	8.3%	5.4%	11.3%	7,600	6.8%
H.S. Grad or G.E.D.	30.1%	458,100	6.9%	5.8%	8.1%	31,800	28.3%
Some Post High School	35.1%	534,100	7.8%	6.5%	9.0%	41,400	36.8%
College Graduate	28.9%	439,500	7.2%	5.9%	8.5%	31,600	28.1%
Total, All Adults	100.0%	1,523,500	7.4%	6.7%	8.1%	112,400	100.0%

1 Rounded to the nearest 100 persons.

2 Plus or minus 95% confidence interval.

3 Figures in these columns may not sum to the total because some surveyed individuals had missing values on the grouping variables.

Population counts for age, sex, and total population were the 2000 estimates provided by the Governor's Office of Planning and Budget. Population count estimates for race/ethnicity, income, and education populations were derived from averaging three years of the BRFSS surveys from 1999-2001.

Arthritis



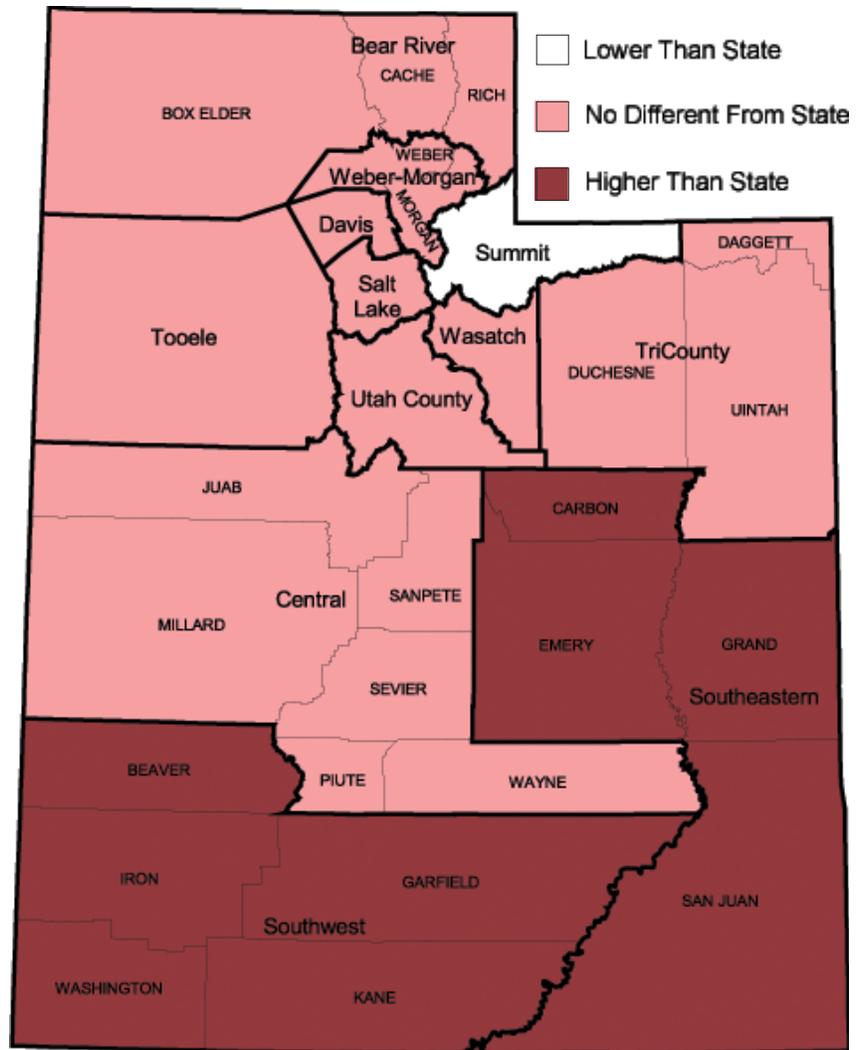
Questions: *During the past 12 months, have you had pain, aching, stiffness or swelling in or around a joint? Were these symptoms present on most days for at least one month? Have you ever been told by a doctor that you have arthritis?*

The word *arthritis* means inflammation of a joint and refers to over 100 different types of arthritis and rheumatic conditions that cause a combination of symptoms such as pain, aching, stiffness, and swelling in or around a joint. Some of these conditions include osteoarthritis, rheumatoid arthritis, fibromyalgia, juvenile rheumatoid arthritis, lupus, gout, and bursitis.

The CDC defines persons with arthritis as those who have either chronic joint symptoms (CJS) and/or doctor-diagnosed arthritis. Persons were considered to have CJS if they answered yes to both of the first two questions. Persons were considered to have doctor-diagnosed arthritis if they answered yes to the third question.

- After age adjusting, Southeastern Utah and Southwest Utah Health Districts had a higher prevalence of arthritis than the state total, while Summit County Health District had a lower prevalence.
- Using the CDC definition, the 2000-2001 Utah BRFSS survey results show that 31.5% of Utah adults had arthritis. Of these, 20.7% (214,600) Utah adults had been diagnosed with arthritis by a doctor, and 10.9% (166,200) had CJS only and had not been diagnosed by a doctor.

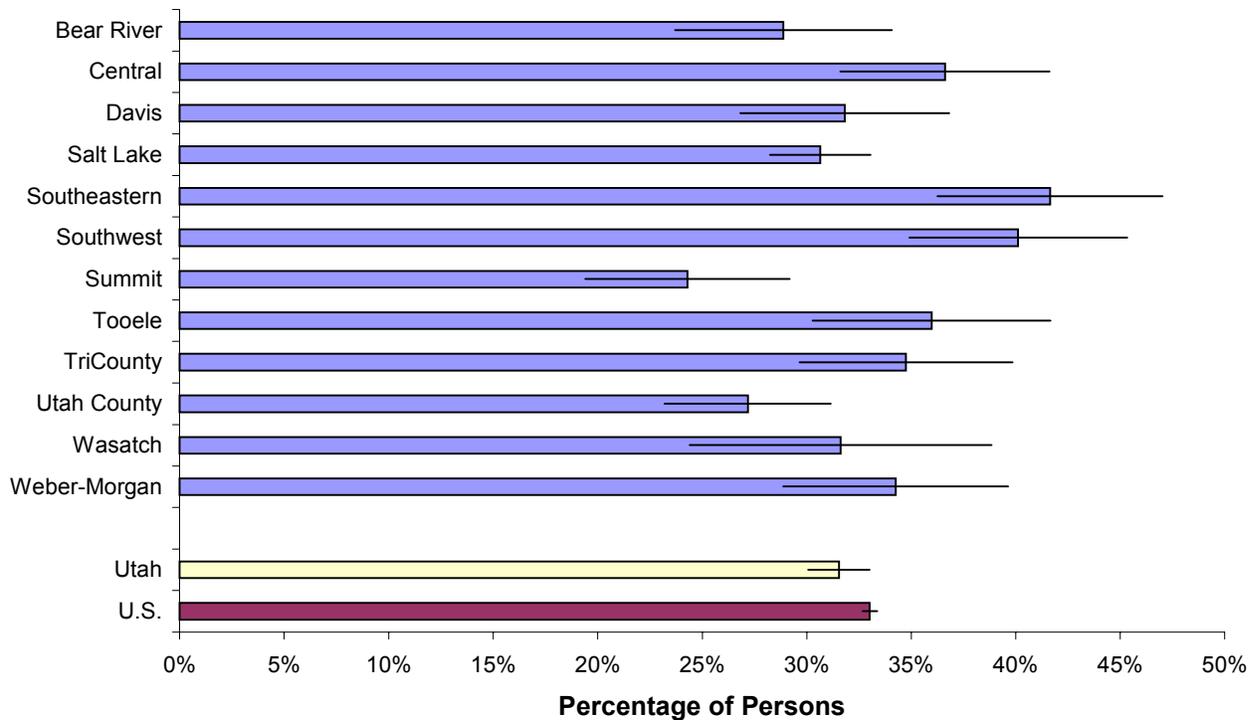
Arthritis by Whether the Local Health District Percentage Differed From the State, Utah Adults Ages 18+, 2000-2001



Age adjusted to the U.S. 2000 standard population. Percentage for a local health district was considered different from the state percentage if its 95% confidence interval did not include the state percentage. Note: Arthritis is defined as joint symptoms present on most days for at least one month during the past 12 months and/or doctor-diagnosed arthritis. Source: Behavioral Risk Factor Surveillance System



Percentage of Persons Who Reported Arthritis* by Local Health District, Utah, and U.S., Adults Ages 18+, 2000-2001



* crude rates

Note: Arthritis is defined as joint symptoms present on most days for at least one month during the past 12 months and/or doctor-diagnosed arthritis.

Source: Behavioral Risk Factor Surveillance System

District	Sample Size	Total Number of Adults	Crude Rates			Age-adjusted Rates**		
			Number With Arthritis	Percent	95% CI Range	Percent	95% CI Range	
Bear River	405	91,817	26,500	28.9%	23.7% 34.1%	32.3%	27.1% 37.6%	
Central	421	43,286	15,900	36.6%	31.6% 41.6%	36.2%	31.4% 41.0%	
Davis	411	155,816	49,600	31.8%	26.8% 36.8%	33.4%	28.6% 38.3%	
Salt Lake	1,829	627,857	192,400	30.7%	28.2% 33.1%	31.9%	29.5% 34.2%	
Southeastern	386	36,451	15,200	41.6%	36.3% 47.0%	41.5%	36.5% 46.6%	
Southwest	420	97,595	39,200	40.1%	34.9% 45.3%	40.4%	35.6% 45.2%	
Summit	435	21,092	5,100	24.3%	19.4% 29.2%	26.3%	21.4% 31.1%	
Tooele	405	27,012	9,700	36.0%	30.3% 41.7%	36.6%	31.6% 41.5%	
TriCounty	416	26,359	9,200	34.8%	29.7% 39.8%	35.5%	30.7% 40.3%	
Utah County	610	245,264	66,700	27.2%	23.2% 31.2%	32.1%	27.8% 36.4%	
Wasatch	363	10,154	3,200	31.6%	24.4% 38.8%	32.7%	27.0% 38.3%	
Weber-Morgan	401	140,822	48,200	34.3%	28.9% 39.6%	35.1%	30.3% 40.0%	
Utah	6,502	1,523,525	480,500	31.5%	30.1% 33.0%	33.4%	32.0% 34.9%	
U.S.				33.0%	32.7% 33.4%	32.7%	32.4% 33.0%	

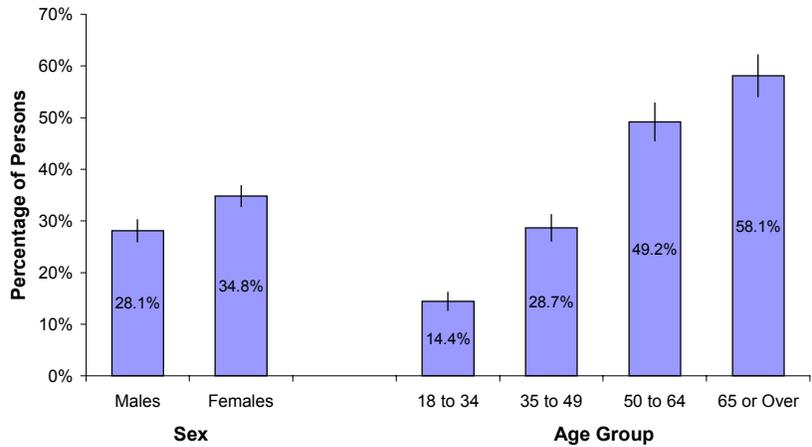
** Age adjusted to U.S. 2000 standard population
U.S. rate includes only year 2001.

Arthritis



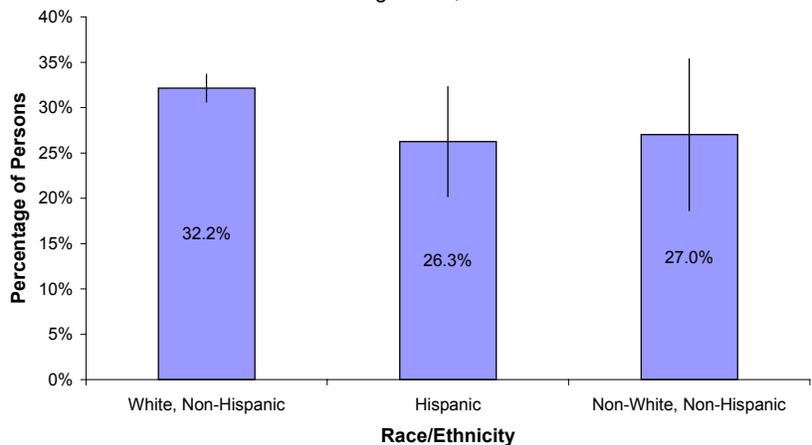
- Arthritis was more common among Utah females (34.8%) than males (28.1%).
- The prevalence of arthritis increased with age, rising from 14.4% among adults 18-34, to 28.7% among adults 35-49, to almost half (49.2%) among adults 50-64, and 58.1% among those over 65.

Percentage of Persons Who Reported Arthritis* by Sex and Age, Utah Adults Ages 18+, 2000-2001



- Hispanic and non-White, non-Hispanic Utah adults had similar prevalence rates for arthritis (26.3% and 27.0% respectively), while prevalence among White, non-Hispanic Utah adults was slightly, but not significantly higher (32.2%).

Percentage of Persons Who Reported Arthritis* by Race/Ethnicity, Utah Adults Ages 18+, 2000-2001



* Arthritis is defined as joint symptoms present on most days for at least one month during the past 12 months and/or doctor-diagnosed arthritis.

The Utah Department of Health Arthritis Program was established in December 1999 with funding from the Centers for Disease Control and Prevention (CDC). The mission of the Utah Arthritis Program is to increase the quality of life among persons in Utah affected by arthritis.

Utah Objective: Same as HP2010 Objective

HP2010 Objective (related) 2-7: (Developmental) Increase the proportion of adults who have seen a health care provider for their chronic joint symptoms.



Percentage of Persons Who Reported Arthritis* by Selected Demographic Characteristics, Utah Adults Ages 18+, 2000 - 2001.

Demographic Subgroup	Utah Population		Survey Estimates				
	Distribution	Number of Persons ¹	Percentage of Persons Who Reported Arthritis ²			Number of Persons ^{1,3}	Distribution of Persons Who Reported Arthritis by Category
			95% Confidence Intervals	Lower	Upper		
Arthritis*							
CJS Only	10.9%	166,200					
Doctor-diagnosed Only	8.5%	129,200					
CJS and Doctor-diagnosed	12.2%	185,400					
No	68.4%	1,042,700					
Total, All Adults	100.0%	1,523,500					
Sex							
Males	49.5%	753,700	28.1%	26.0%	30.3%	211,800	44.1%
Females	50.5%	769,800	34.8%	32.8%	36.9%	268,100	55.9%
Total, All Adults	100.0%	1,523,500	31.5%	30.1%	33.0%	480,500	100.0%
Age Group							
18 to 34	42.6%	648,500	14.4%	12.6%	16.2%	93,500	20.7%
35 to 49	28.5%	433,700	28.7%	26.1%	31.3%	124,300	27.5%
50 to 64	16.4%	250,000	49.2%	45.5%	52.9%	123,000	27.2%
65 or Over	12.6%	191,300	58.1%	54.1%	62.1%	111,100	24.6%
Total, All Adults	100.0%	1,523,500	31.5%	30.1%	33.0%	480,500	100.0%
Race/Ethnicity							
White, Non-Hispanic	88.4%	1,346,000	32.2%	30.6%	33.7%	432,700	90.2%
Hispanic	8.3%	126,000	26.3%	20.2%	32.3%	33,100	6.9%
Non-White, Non-Hispanic	3.4%	51,500	27.0%	18.6%	35.4%	13,900	2.9%
Total, All Adults	100.0%	1,523,500	31.5%	30.1%	33.0%	480,500	100.0%
Income							
Less Than \$20,000	13.6%	207,700	42.0%	37.8%	46.3%	87,300	18.0%
\$20,000-\$49,999	47.8%	727,500	32.2%	29.9%	34.4%	234,100	48.3%
\$50,000 or Over	38.6%	588,400	27.7%	25.2%	30.1%	162,800	33.6%
Total, All Adults	100.0%	1,523,500	31.5%	30.1%	33.0%	480,500	100.0%
Education							
Less Than High School	6.0%	91,700	37.4%	31.3%	43.4%	34,300	7.1%
H.S. Grad or G.E.D.	30.1%	458,100	33.4%	30.7%	36.1%	153,000	31.8%
Some Post High School	35.1%	534,100	31.8%	29.2%	34.3%	169,600	35.3%
College Graduate	28.9%	439,500	28.3%	25.5%	31.0%	124,200	25.8%
Total, All Adults	100.0%	1,523,500	31.5%	30.1%	33.0%	480,500	100.0%

1 Rounded to the nearest 100 persons.

2 Plus or minus 95% confidence interval.

3 Figures in these columns may not sum to the total because some surveyed individuals had missing values on the grouping variables.

* Arthritis is defined as joint symptoms present on most days for at least one month during the past 12 months and/or doctor-diagnosed arthritis.

Population counts for age, sex, and total population were the 2000 estimates provided by the Governor's Office of Planning and Budget. Population count estimates for race/ethnicity, income, and education populations were derived from averaging three years of the BRFSS surveys from 1999-2001.

High Cholesterol Awareness

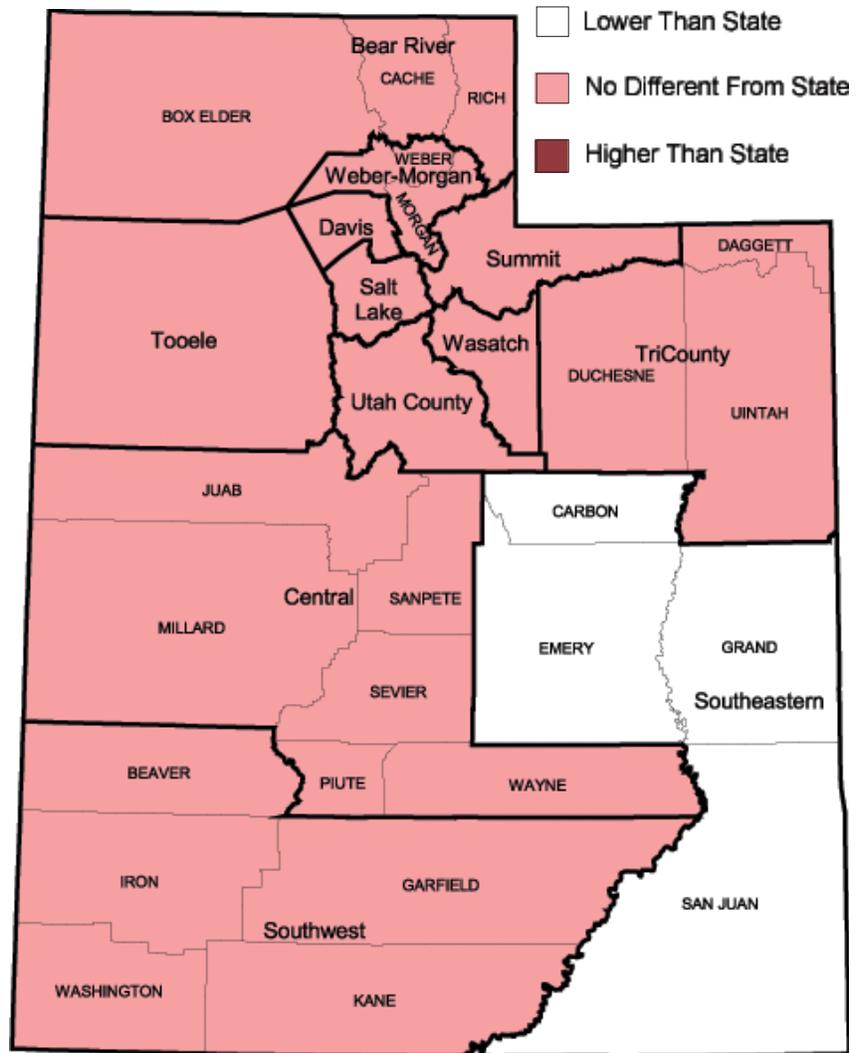


Questions: Blood cholesterol is a fatty substance found in the blood. Have you ever had your blood cholesterol checked? Have you ever been told by a doctor, nurse, or other health professional that your blood cholesterol is high?

High levels of cholesterol and triglycerides increase the risk for heart disease. The National Heart, Lung, and Blood Institute (NHLBI) defines “high” blood cholesterol as 240 mg/dl or greater and “borderline high” cholesterol as 200 to 239 mg/dl. Risk categories for cholesterol levels vary depending on factors such as age, gender, family history, and general health conditions. Obesity and diets high in saturated fat or cholesterol contribute to high levels of blood cholesterol. Variation in rates of high cholesterol awareness can either be due to differences in the prevalence of high cholesterol or to different rates of testing for high blood cholesterol. Behaviors that prevent or lower high blood cholesterol include eating a diet low in saturated fat and cholesterol, increasing physical activity, not smoking or drinking excessive alcohol, and maintaining a healthy weight. The NHLBI recommends that adults 20 years or older be screened for high blood cholesterol at least every five years.

- The percentage of Utah adults living in Southeastern Utah Health District who reported having been told that they had high blood cholesterol was significantly lower than the statewide percentage.
- Utah adults living in Tooele County, Davis County, and Bear River Health Districts were most likely to report having been told that they had high blood cholesterol, though not substantially higher than the state rate.
- The percentage of Utah adults who reported having been told that they had high blood cholesterol was slightly below that of the U.S. (21.7% and 22.7% respectively, age-adjusted rates).

High Cholesterol by Whether the Local Health District Percentage Differed From the State, Utah Adults Ages 18+, 1999 and 2001

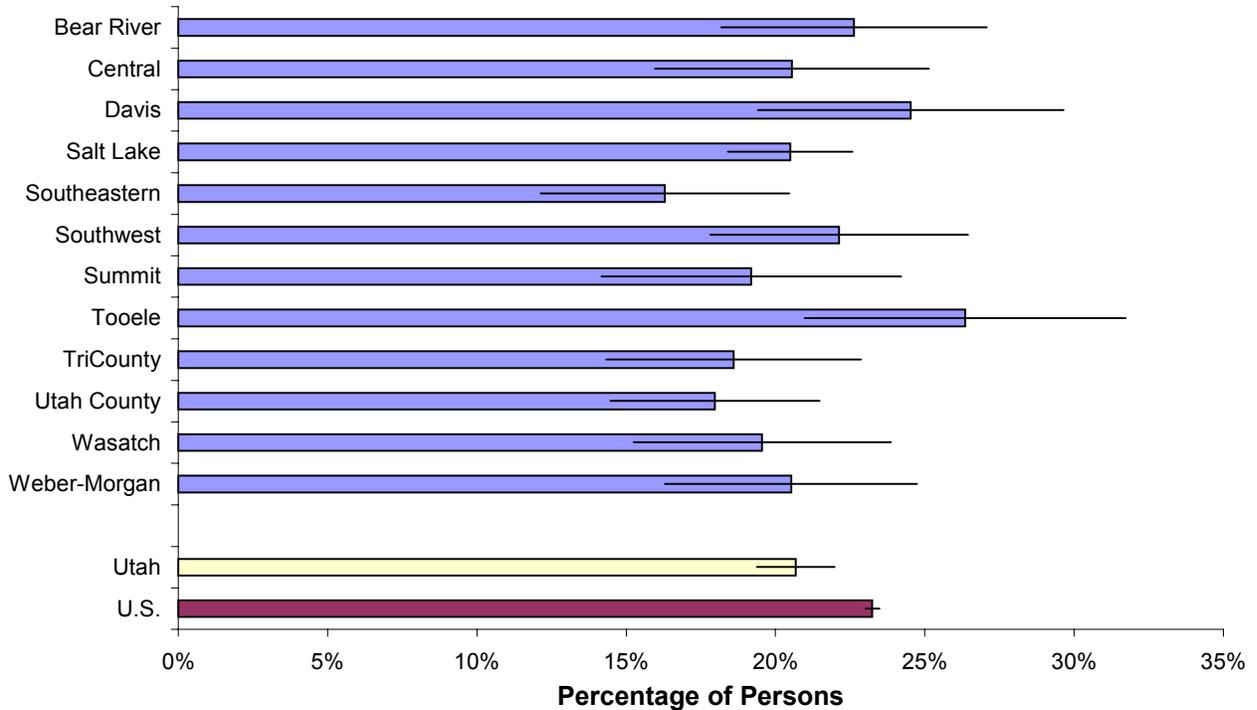


Age adjusted to the U.S. 2000 standard population. Percentage for a local health district was considered different from the state percentage if its 95% confidence interval did not include the state percentage. Source: Behavioral Risk Factor Surveillance System



High Cholesterol Awareness

Percentage of Persons Who Reported Having Been Told That They Had High Cholesterol*
by Local Health District, Utah, and U.S., Adults Ages 18+, 1999 and 2001



* crude rates
Source: Behavioral Risk Factor Surveillance System

District	Sample Size	Total Number of Adults	Crude Rates			Age-adjusted Rates**		
			Number Told Had High Cholesterol	Percent	95% CI Range	Percent	95% CI Range	
Bear River	429	91,817	20,800	22.6%	18.2% 27.1%	24.7%	20.3% 29.0%	
Central	409	43,286	8,900	20.6%	16.0% 25.1%	20.2%	15.8% 24.7%	
Davis	378	155,816	38,200	24.5%	19.4% 29.7%	24.0%	19.3% 28.7%	
Salt Lake	1,826	627,857	128,600	20.5%	18.4% 22.6%	21.2%	19.2% 23.2%	
Southeastern	413	36,451	5,900	16.3%	12.1% 20.5%	16.1%	12.0% 20.1%	
Southwest	451	97,595	21,600	22.1%	17.8% 26.5%	21.4%	17.5% 25.3%	
Summit	377	21,092	4,000	19.2%	14.2% 24.2%	20.8%	16.4% 25.1%	
Tooele	516	27,012	7,100	26.4%	21.0% 31.7%	23.8%	19.9% 27.8%	
TriCounty	399	26,359	4,900	18.6%	14.3% 22.9%	17.9%	13.9% 21.9%	
Utah County	593	245,264	44,100	18.0%	14.5% 21.5%	22.1%	18.3% 26.0%	
Wasatch	408	10,154	2,000	19.6%	15.3% 23.9%	19.6%	15.4% 23.8%	
Weber-Morgan	445	140,822	28,900	20.5%	16.3% 24.7%	20.2%	16.3% 24.1%	
Utah	6,644	1,523,525	315,100	20.7%	19.4% 22.0%	21.7%	20.5% 23.0%	
U.S.				23.2%	23.0% 23.5%	22.7%	22.5% 22.9%	

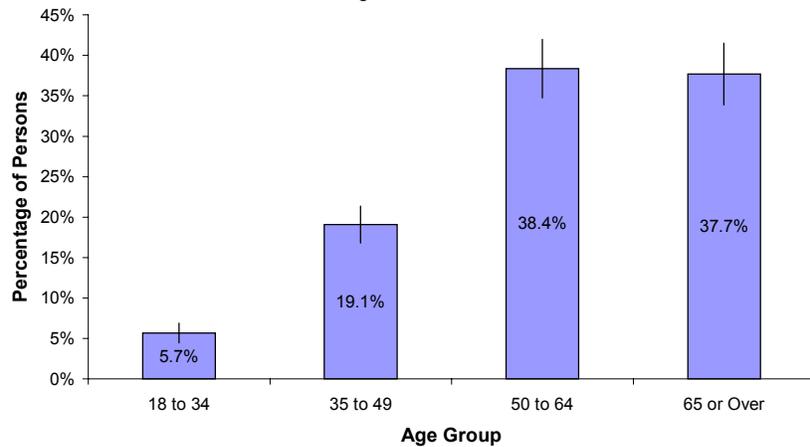
** Age adjusted to U.S. 2000 standard population

High Cholesterol Awareness



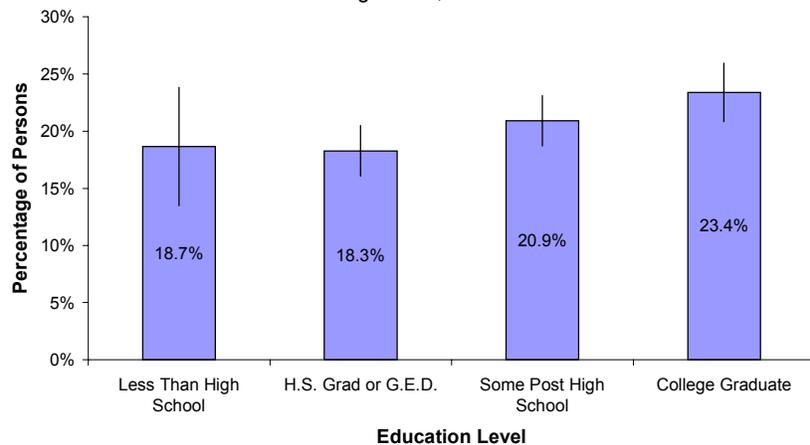
- The percentage of adults who reported being told they had high cholesterol increased with age.

Percentage of Persons Who Reported Having Been Told That They Had High Cholesterol by Age, Utah Adults Ages 18+, 1999 and 2001



- As annual household income (not graphed) and years of education increased, the percentage of Utah adults who reported having been told that they had high blood cholesterol also increased.

Percentage of Persons Who Reported Having Been Told That They Had High Cholesterol by Education, Utah Adults Ages 18+, 1999 and 2001



Utah Objective (related): By 2010, increase the proportion of adults who have had their blood cholesterol measured within the preceding five years to at least 80% (age adjusted to the U.S. 2000 standard population).
HP2010 Objective (related) 12-15: Increase the proportion of adults who have had their blood cholesterol checked within the preceding five years to 80% (age adjusted to the U.S. 2000 standard population).



High Cholesterol Awareness

Percentage of Persons Who Reported Having Been Told That They Had High Cholesterol by Selected Demographic Characteristics, Utah Adults Ages 18+, 1999 and 2001.

Demographic Subgroup	Utah Population		Survey Estimates				
	Distribution	Number of Persons ¹	Percentage of Persons Who Reported They Had High Cholesterol ²			Number of Persons ^{1,3}	Distribution of Persons Who Reported They Had High Cholesterol by Category
			95% Confidence Intervals	Lower	Upper		
Told Cholesterol High							
Told High	20.7%	315,100					
Not Told High	51.4%	783,200					
Never Tested	27.9%	425,100					
Total, All Adults	100.0%	1,523,500					
Sex							
Males	49.5%	753,700	21.4%	19.4%	23.4%	161,100	51.1%
Females	50.5%	769,800	20.0%	18.3%	21.7%	154,000	48.9%
Total, All Adults	100.0%	1,523,500	20.7%	19.4%	22.0%	315,100	100.0%
Age Group							
18 to 34	42.6%	648,500	5.7%	4.5%	6.9%	36,900	12.8%
35 to 49	28.5%	433,700	19.1%	16.8%	21.4%	82,800	28.8%
50 to 64	16.4%	250,000	38.4%	34.7%	42.0%	95,900	33.3%
65 or Over	12.6%	191,300	37.7%	33.9%	41.5%	72,100	25.1%
Total, All Adults	100.0%	1,523,500	20.7%	19.4%	22.0%	315,100	100.0%
Race/Ethnicity							
White, Non-Hispanic	88.4%	1,346,000	21.1%	19.8%	22.5%	284,400	90.6%
Hispanic	8.3%	126,000	18.0%	13.1%	22.9%	22,700	7.2%
Non-White, Non-Hispanic	3.4%	51,500	13.5%	7.6%	19.4%	6,900	2.2%
Total, All Adults	100.0%	1,523,500	20.7%	19.4%	22.0%	315,100	100.0%
Income							
Less Than \$20,000	13.6%	207,700	19.1%	15.9%	22.4%	39,800	12.6%
\$20,000-\$49,999	47.8%	727,500	19.6%	17.7%	21.6%	142,800	45.1%
\$50,000 or Over	38.6%	588,400	22.8%	20.3%	25.2%	133,900	42.3%
Total, All Adults	100.0%	1,523,500	20.7%	19.4%	22.0%	315,100	100.0%
Education							
Less Than High School	6.0%	91,700	18.7%	13.5%	23.8%	17,100	5.4%
H.S. Grad or G.E.D.	30.1%	458,100	18.3%	16.1%	20.5%	83,700	26.6%
Some Post High School	35.1%	534,100	20.9%	18.7%	23.1%	111,600	35.4%
College Graduate	28.9%	439,500	23.4%	20.8%	26.0%	102,800	32.6%
Total, All Adults	100.0%	1,523,500	20.7%	19.4%	22.0%	315,100	100.0%

1 Rounded to the nearest 100 persons.

2 Plus or minus 95% confidence interval.

3 Figures in these columns may not sum to the total because some surveyed individuals had missing values on the grouping variables.

Population counts for age, sex, and total population were the 2000 estimates provided by the Governor's Office of Planning and Budget. Population count estimates for race/ethnicity, income, and education populations were derived from averaging three years of the BRFSS surveys from 1999-2001.

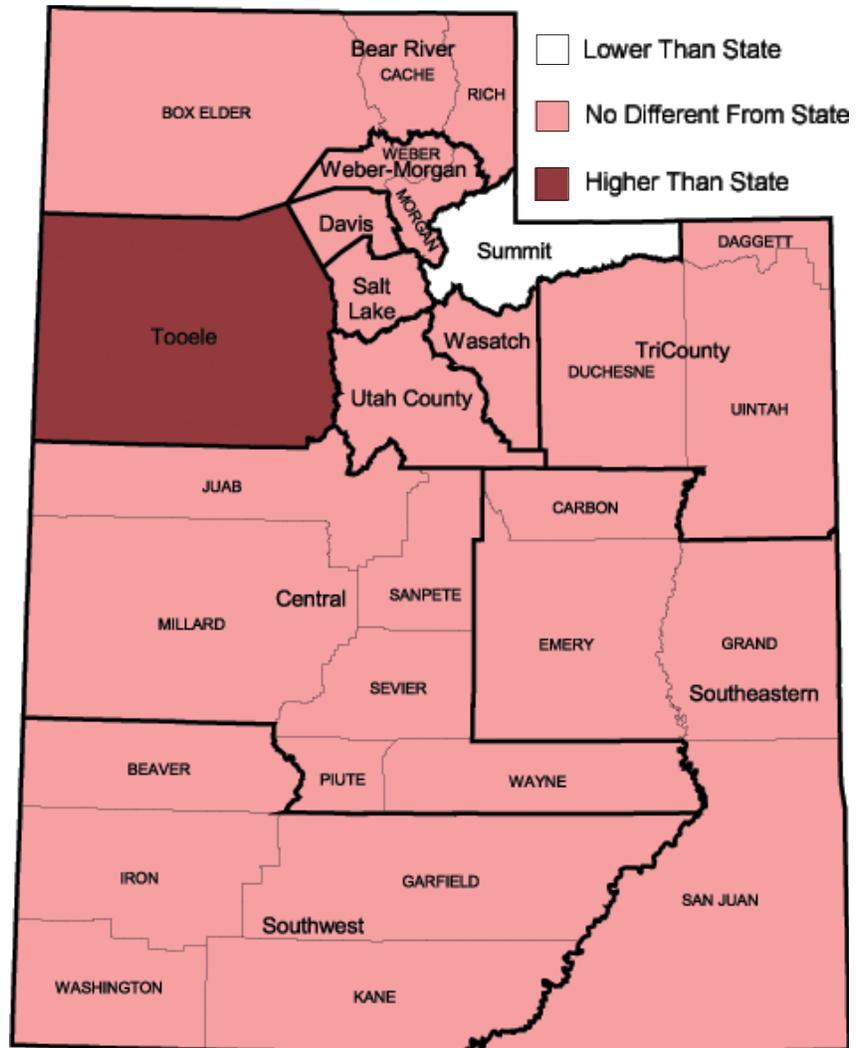
High Blood Pressure Awareness



Question: *Have you ever been told by a doctor, nurse, or other health professional that you have high blood pressure?*

High blood pressure is a condition that can be found in persons of all ages. It is defined as a systolic blood pressure of 140 mm Hg or greater or a diastolic blood pressure of 90 mm Hg or greater. As a result of high blood pressure, the heart has to work harder, increasing the risk of stroke, coronary heart disease, and kidney failure. About one in four U.S. adults has high blood pressure but nearly one third of these people are unaware that they have it.³ The only way to detect high blood pressure is through regular blood pressure measurement. According to the American Heart Association, blood pressure measurement should be performed at least every two years after a normal reading. Individuals with blood pressures near the top of the normal range or with a family history of high blood pressure should consult their health care providers about how often to have their blood pressures checked. Weight loss, medication, exercise, smoking cessation, stress management, and lowering sodium and alcohol intake can control high blood pressure.

High Blood Pressure by Whether the Local Health District Percentage Differed From the State, Utah Adults Ages 18+, 1999 and 2001



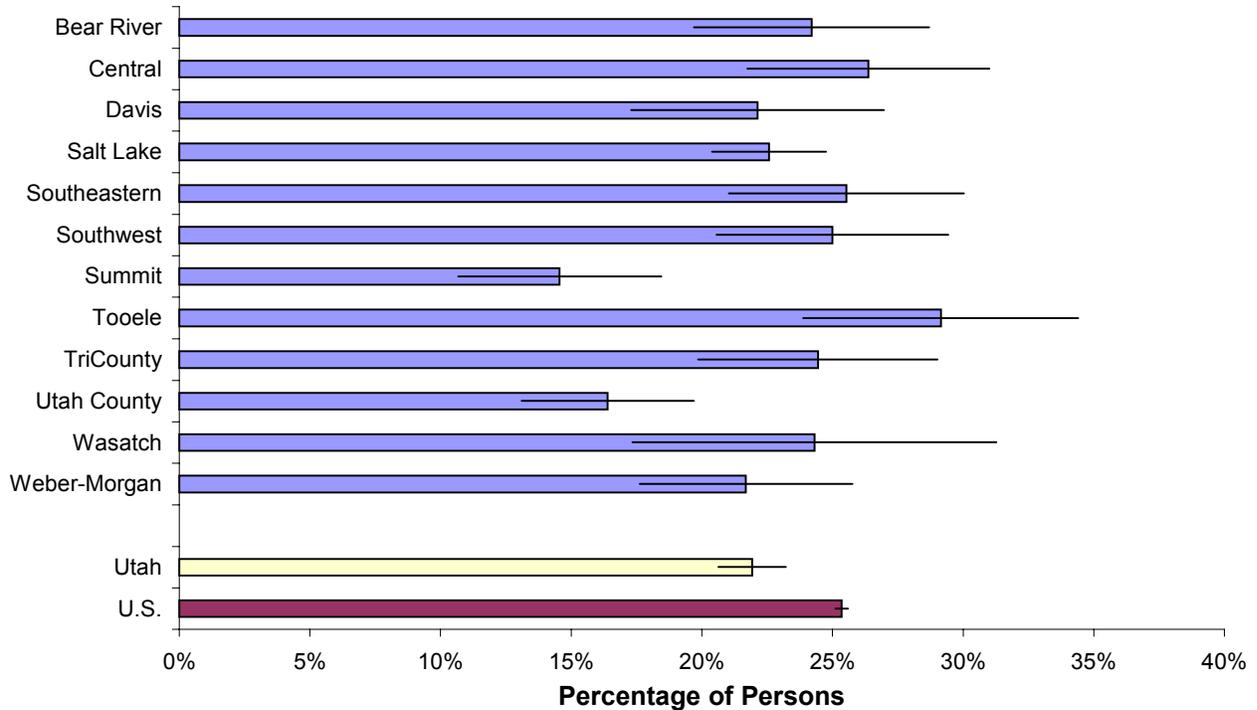
Age adjusted to the U.S. 2000 standard population. Percentage for a local health district was considered different from the state percentage if its 95% confidence interval did not include the state percentage. Source: Behavioral Risk Factor Surveillance System

- The percentage of Utah adults living in Tooele County Health District who reported having been told that they had high blood pressure was significantly higher than the state percentage. The percentage in Summit County Health District was significantly lower than the state percentage.
- The percentage of Utah adults who reported having been told that they had high blood pressure was below that of the U.S. (23.5% and 25.0% respectively, age-adjusted rates).



High Blood Pressure Awareness

Percentage of Persons Who Reported Having Been Told That They Had High Blood Pressure*
by Local Health District, Utah, and U.S., Adults Ages 18+, 1999 and 2001



* crude rates
Source: Behavioral Risk Factor Surveillance System

District	Sample Size	Total Number of Adults	Crude Rates			Age-adjusted Rates**		
			Number Told Had High Blood Pressure	Percent	95% CI Range	Percent	95% CI Range	
Bear River	445	91,817	22,200	24.2%	19.7% 28.7%	26.9%	22.6% 31.3%	
Central	419	43,286	11,400	26.4%	21.7% 31.0%	25.3%	21.2% 29.4%	
Davis	393	155,816	34,500	22.1%	17.3% 27.0%	23.7%	19.0% 28.4%	
Salt Lake	1,872	627,857	141,700	22.6%	20.4% 24.8%	23.9%	21.8% 25.9%	
Southeastern	420	36,451	9,300	25.5%	21.0% 30.0%	25.8%	21.9% 29.7%	
Southwest	460	97,595	24,400	25.0%	20.6% 29.4%	23.6%	19.4% 27.7%	
Summit	382	21,092	3,100	14.6%	10.7% 18.5%	16.0%	12.0% 20.1%	
Tooele	533	27,012	7,900	29.2%	23.9% 34.4%	28.9%	24.2% 33.6%	
TriCounty	409	26,359	6,400	24.4%	19.9% 29.0%	25.7%	21.3% 30.1%	
Utah County	610	245,264	40,200	16.4%	13.1% 19.7%	20.7%	17.1% 24.4%	
Wasatch	414	10,154	2,500	24.3%	17.3% 31.3%	24.2%	19.2% 29.3%	
Weber-Morgan	451	140,822	30,500	21.7%	17.6% 25.8%	21.1%	17.5% 24.7%	
Utah	6,808	1,523,525	334,100	21.9%	20.6% 23.2%	23.5%	22.3% 24.8%	
U.S.				25.4%	25.1% 25.6%	25.0%	24.8% 25.2%	

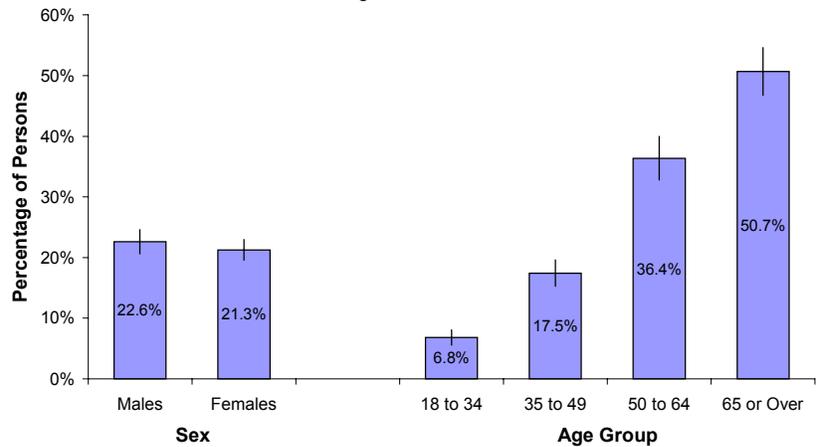
** Age adjusted to U.S. 2000 standard population

High Blood Pressure Awareness



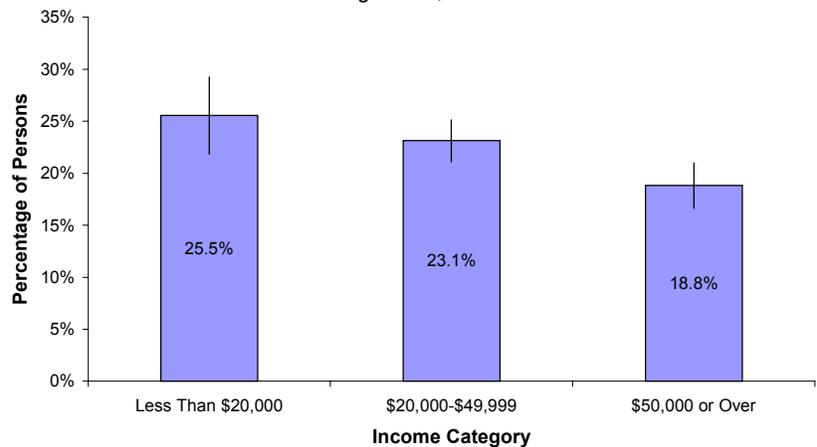
- The percentage of Utah adults who reported having been told that they had high blood pressure increased with age. Almost 51% of Utahns ages 65 or over reported having been told that they had high blood pressure.

Percentage of Persons Who Reported Having Been Told That They Had High Blood Pressure by Sex and Age, Utah Adults Ages 18+, 1999 and 2001



- As annual household income and years of education (not graphed) increased, the percentage of Utah adults who reported having been told that they had high blood pressure decreased.

Percentage of Persons Who Reported Having Been Told That They Had High Blood Pressure by Income, Utah Adults Ages 18+, 1999 and 2001



Utah Objective: By 2010, increase the proportion of Utah adults ages 18 or over who have had their blood pressure measured in the preceding two years to 95% (age adjusted to the U.S. 2000 standard population).

HP2010 Objective 12-12: Increase the proportion of adults who have had their blood pressure measured within the preceding two years and can state whether their blood pressure was normal or high to 95% (age adjusted to the U.S. 2000 standard population).



High Blood Pressure Awareness

Percentage of Persons Who Reported Having Been Told That They Had High Blood Pressure by Selected Demographic Characteristics, Utah Adults Ages 18+, 1999 and 2001.

Demographic Subgroup	Utah Population		Survey Estimates				
	Distribution	Number of Persons ¹	Percentage of Persons Who Reported They Were Told They Had High Blood Pressure ²			Number of Persons ^{1,3}	Distribution of Persons Who Reported They Were Told They Had High Blood Pressure by Category
			95% Confidence Intervals	Lower	Upper		
Told Blood Pressure High							
Told High	21.9%	334,100					
Not Told High	78.1%	1,189,400					
Total, All Adults	100.0%	1,523,500					
Sex							
Males	49.5%	753,700	22.6%	20.6%	24.6%	170,400	51.0%
Females	50.5%	769,800	21.3%	19.6%	23.0%	163,800	49.0%
Total, All Adults	100.0%	1,523,500	21.9%	20.6%	23.2%	334,100	100.0%
Age Group							
18 to 34	42.6%	648,500	6.8%	5.5%	8.1%	44,200	14.4%
35 to 49	28.5%	433,700	17.5%	15.3%	19.6%	75,700	24.6%
50 to 64	16.4%	250,000	36.4%	32.8%	40.0%	91,000	29.6%
65 or Over	12.6%	191,300	50.7%	46.8%	54.6%	97,000	31.5%
Total, All Adults	100.0%	1,523,500	21.9%	20.6%	23.2%	334,100	100.0%
Race/Ethnicity							
White, Non-Hispanic	88.4%	1,346,000	22.5%	21.1%	23.9%	302,700	91.1%
Hispanic	8.3%	126,000	15.7%	10.8%	20.6%	19,800	6.0%
Non-White, Non-Hispanic	3.4%	51,500	19.1%	12.3%	25.9%	9,800	2.9%
Total, All Adults	100.0%	1,523,500	21.9%	20.6%	23.2%	334,100	100.0%
Income							
Less Than \$20,000	13.6%	207,700	25.5%	21.8%	29.3%	53,000	16.0%
\$20,000-\$49,999	47.8%	727,500	23.1%	21.1%	25.1%	168,200	50.7%
\$50,000 or Over	38.6%	588,400	18.8%	16.6%	21.0%	110,700	33.4%
Total, All Adults	100.0%	1,523,500	21.9%	20.6%	23.2%	334,100	100.0%
Education							
Less Than High School	6.0%	91,700	25.8%	19.9%	31.7%	23,600	7.1%
H.S. Grad or G.E.D.	30.1%	458,100	23.7%	21.4%	26.1%	108,700	32.6%
Some Post High School	35.1%	534,100	21.0%	18.8%	23.1%	111,900	33.5%
College Graduate	28.9%	439,500	20.3%	18.0%	22.7%	89,400	26.8%
Total, All Adults	100.0%	1,523,500	21.9%	20.6%	23.2%	334,100	100.0%

1 Rounded to the nearest 100 persons.

2 Plus or minus 95% confidence interval.

3 Figures in these columns may not sum to the total because some surveyed individuals had missing values on the grouping variables.

Population counts for age, sex, and total population were the 2000 estimates provided by the Governor's Office of Planning and Budget. Population count estimates for race/ethnicity, income, and education populations were derived from averaging three years of the BRFSS surveys from 1999-2001.

Health Care Coverage



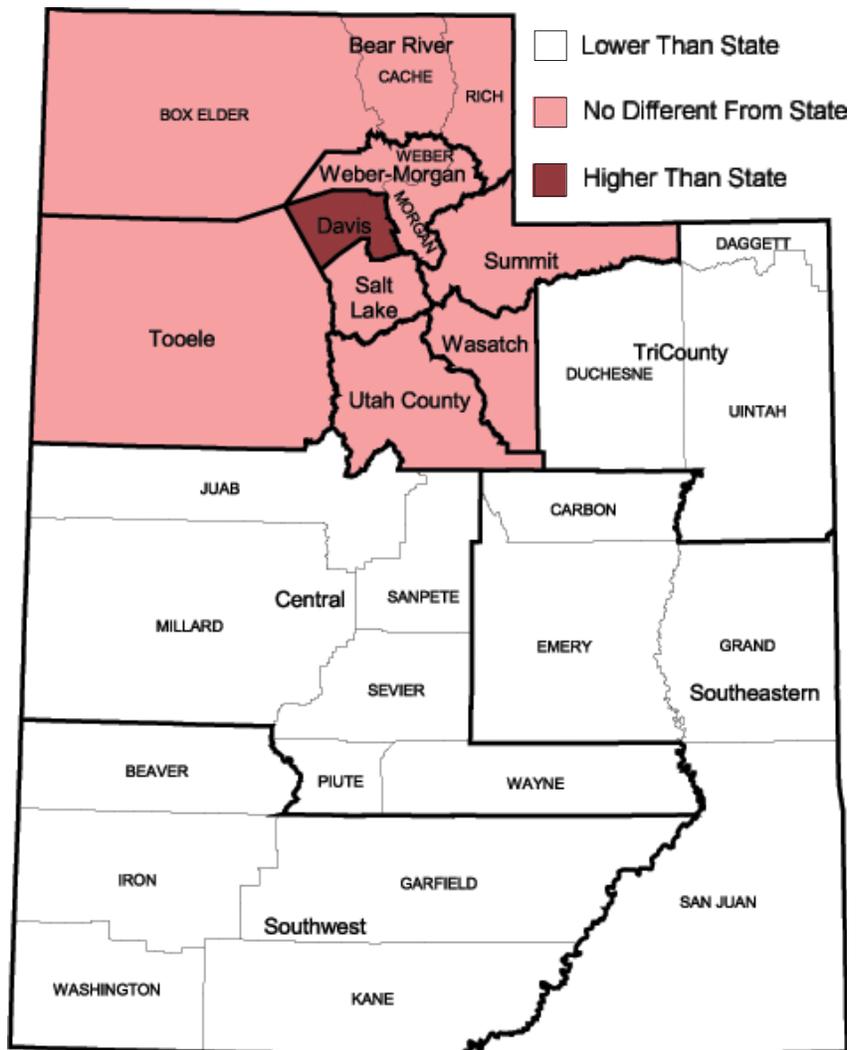
Question: Do you have any kind of health care coverage, including health insurance, prepaid plans such as HMOs, or government plans such as Medicare?

Having health insurance encourages individuals to seek and obtain needed health care. Individuals with health insurance are more likely than those without health insurance to have a regular and accessible source of health care. Due to the high cost of health care, persons who do not have health insurance are less likely to get timely medical care than those with health insurance. Not receiving timely medical care can result in more severe health problems and unnecessary high-cost health care such as hospitalizations and emergency department visits.

In this report, health insurance coverage means that persons had health insurance or were enrolled in prepaid plans such as HMOs or government plans such as Medicare at the time of the survey.

- Persons living in Davis County Health District were more likely to have health insurance when compared to the state total using the age adjusted rate.
- Residents of Central Utah, Southeastern Utah, Southwest Utah, and TriCounty Health Districts were less likely to have health insurance when compared to the state total.
- During 1999-2001, 87.9% of Utah adults were estimated to have health care insurance coverage.
- About 12.1% of Utah adults surveyed said they did not have any health care coverage.
- A higher percentage of Utah adults reported having health care coverage than adults in the entire U.S.

Health Care Coverage by Whether the Local Health District Percentage Differed From the State, Utah Adults Ages 18+, 1999-2001

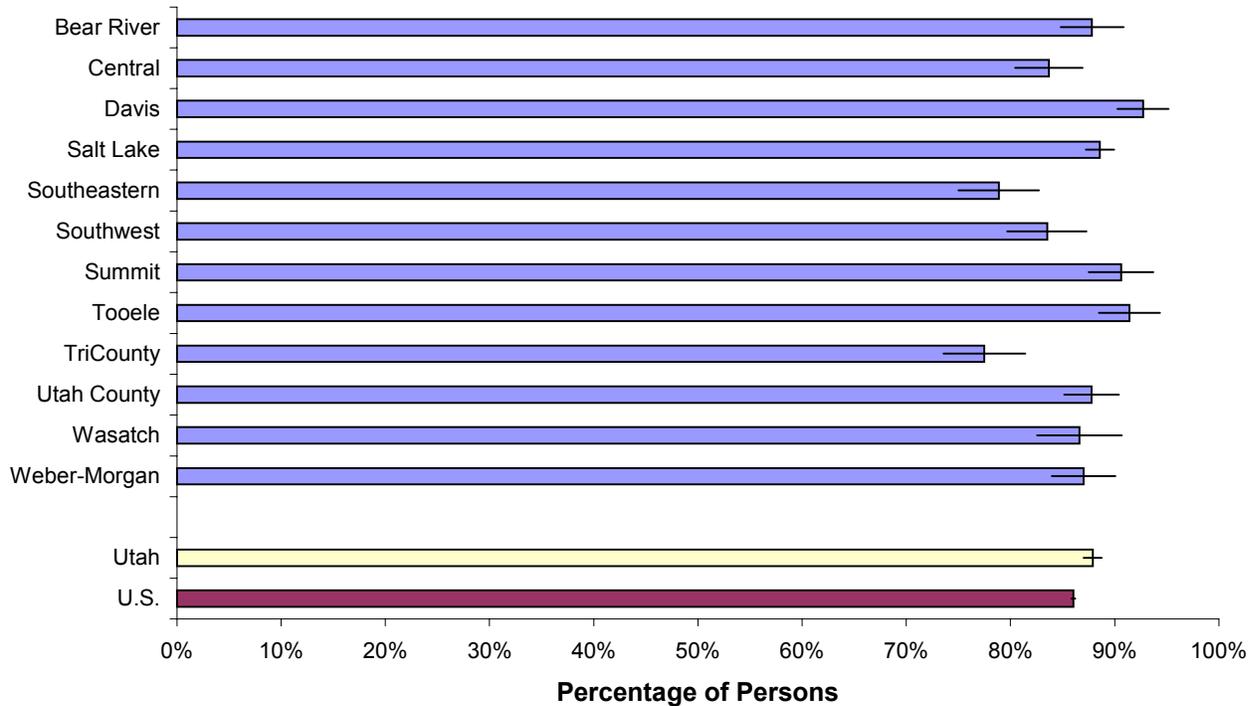


Age adjusted to the U.S. 2000 standard population. Percentage for a local health district was considered different from the state percentage if its 95% confidence interval did not include the state percentage. Source: Behavioral Risk Factor Surveillance System



Health Care Coverage

Percentage of Persons Who Reported Having Health Care Coverage*
by Local Health District, Utah, and U.S., Adults Ages 18+, 1999-2001



* crude rates
Source: Behavioral Risk Factor Surveillance System

District	Sample Size	Total Number of Adults	Crude Rates			Age-adjusted Rates**		
			Number With Health Care Coverage	Percent	95% CI Range	Percent	95% CI Range	
Bear River	615	91,817	80,600	87.8%	84.8% 90.9%	89.2%	86.6% 91.8%	
Central	614	43,286	36,200	83.7%	80.5% 86.9%	83.2%	80.1% 86.4%	
Davis	586	155,816	144,500	92.7%	90.3% 95.2%	93.1%	90.9% 95.4%	
Salt Lake	2,685	627,857	556,200	88.6%	87.2% 90.0%	89.1%	87.8% 90.4%	
Southeastern	579	36,451	28,800	78.9%	75.0% 82.7%	78.8%	75.1% 82.5%	
Southwest	645	97,595	81,500	83.5%	79.7% 87.3%	83.3%	79.6% 86.9%	
Summit	603	21,092	19,100	90.6%	87.5% 93.7%	90.6%	87.6% 93.6%	
Tooele	708	27,012	24,700	91.4%	88.5% 94.3%	91.3%	88.5% 94.2%	
TriCounty	595	26,359	20,400	77.5%	73.6% 81.4%	77.6%	73.8% 81.4%	
Utah County	876	245,264	215,300	87.8%	85.1% 90.4%	88.6%	86.1% 91.0%	
Wasatch	552	10,154	8,800	86.6%	82.6% 90.7%	86.6%	82.8% 90.3%	
Weber-Morgan	612	140,822	122,500	87.0%	84.0% 90.1%	87.4%	84.5% 90.3%	
Utah	9,670	1,523,525	1,339,000	87.9%	87.0% 88.8%	88.6%	87.7% 89.4%	
U.S.				86.0%	85.9% 86.2%	85.9%	85.7% 86.0%	

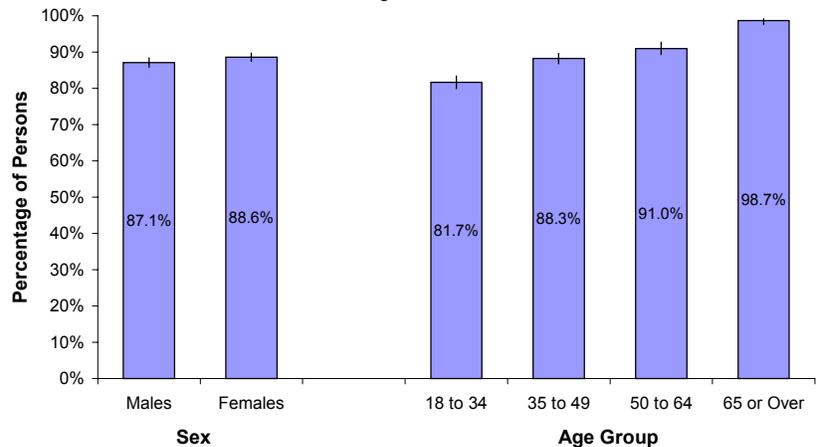
** Age adjusted to U.S. 2000 standard population

Health Care Coverage



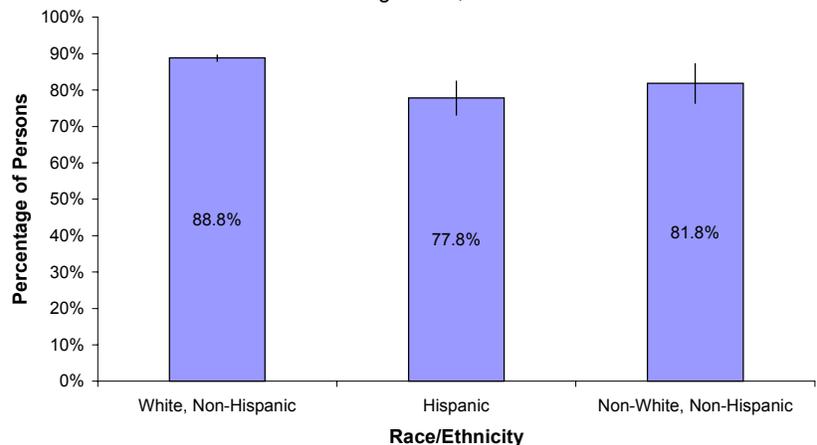
- Young adults ages 18 through 34 showed the highest proportion (18.3%) without health insurance at the time of the survey than those ages 35 or over.
- Men and women were equally likely to report having health care coverage.

Percentage of Persons Who Reported Having Health Care Coverage by Sex and Age, Utah Adults Ages 18+, 1999-2001



- Hispanic adults were significantly less likely to have health insurance (77.8%) than White, non-Hispanic adults (88.8%).

Percentage of Persons Who Reported Having Health Care Coverage by Race/Ethnicity, Utah Adults Ages 18+, 1999-2001



The survey also asked respondents with current health insurance, “During the past 12 months, was there any time that you did not have any health insurance or coverage?” Including data from this question, 17.2 percent of Utah adults did not have any health care coverage at some point in the past 12 months. Hispanic adults were almost twice as likely to have no continuous health coverage (29.3%) than White, non-Hispanic adults (16.2%).

The Utah Department of Health offers health insurance to low income adults through the Medicaid program (call 1-800-310-6949 for more information) and the Primary Care Network (PCN) (call 1-888-222-2542 for more information).

Utah Objective: No objective listed.

HP2010 Objective 1-1: Increase the proportion of persons with health insurance to 100% (age adjusted to the U.S. 2000 standard population).



Health Care Coverage

Percentage of Persons Who Reported Having Health Care Coverage by Selected Demographic Characteristics, Utah Adults Ages 18+, 1999 - 2001.

Demographic Subgroup	Utah Population		Survey Estimates				
	Distribution	Number of Persons ¹	Percentage of Persons Who Reported Having Health Care Coverage ²			Number of Persons ^{1,3}	Distribution of Persons Who Reported Having Health Care Coverage by Category
			95% Confidence Intervals				
			Lower	Upper			
Health Care Coverage							
Have Coverage	87.9%	1,339,000					
Do Not Have Coverage	12.1%	184,500					
Total, All Adults	100.0%	1,523,500					
Sex							
Males	49.5%	753,700	87.1%	85.8%	88.5%	656,600	49.0%
Females	50.5%	769,800	88.6%	87.5%	89.7%	682,100	51.0%
Total, All Adults	100.0%	1,523,500	87.9%	87.0%	88.8%	1,339,000	100.0%
Age Group							
18 to 34	42.6%	648,500	81.7%	79.9%	83.5%	529,600	39.9%
35 to 49	28.5%	433,700	88.3%	86.8%	89.7%	382,700	28.8%
50 to 64	16.4%	250,000	91.0%	89.3%	92.7%	227,600	17.1%
65 or Over	12.6%	191,300	98.7%	97.7%	99.3%	188,800	14.2%
Total, All Adults	100.0%	1,523,500	87.9%	87.0%	88.8%	1,339,000	100.0%
Race/Ethnicity							
White, Non-Hispanic	88.4%	1,346,000	88.8%	87.9%	89.7%	1,195,200	89.5%
Hispanic	8.3%	126,000	77.8%	73.1%	82.4%	98,000	7.3%
Non-White, Non-Hispanic	3.4%	51,500	81.8%	76.4%	87.3%	42,100	3.2%
Total, All Adults	100.0%	1,523,500	87.9%	87.0%	88.8%	1,339,000	100.0%
Income							
Less Than \$20,000	13.6%	207,700	72.4%	69.1%	75.8%	150,500	11.2%
\$20,000-\$49,999	47.8%	727,500	86.8%	85.4%	88.1%	631,200	46.9%
\$50,000 or Over	38.6%	588,400	96.1%	95.1%	96.8%	565,200	42.0%
Total, All Adults	100.0%	1,523,500	87.9%	87.0%	88.8%	1,339,000	100.0%
Education							
Less Than High School	6.0%	91,700	75.7%	70.8%	80.5%	69,400	5.2%
H.S. Grad or G.E.D.	30.1%	458,100	83.1%	81.3%	84.8%	380,500	28.4%
Some Post High School	35.1%	534,100	89.3%	87.8%	90.7%	476,900	35.6%
College Graduate	28.9%	439,500	93.8%	92.7%	94.9%	412,300	30.8%
Total, All Adults	100.0%	1,523,500	87.9%	87.0%	88.8%	1,339,000	100.0%

1 Rounded to the nearest 100 persons.

2 Plus or minus 95% confidence interval.

3 Figures in these columns may not sum to the total because some surveyed individuals had missing values on the grouping variables.

Population counts for age, sex, and total population were the 2000 estimates provided by the Governor's Office of Planning and Budget. Population count estimates for race/ethnicity, income, and education populations were derived from averaging three years of the BRFSS surveys from 1999-2001.

Unable to Get Needed Health Care Due to Cost

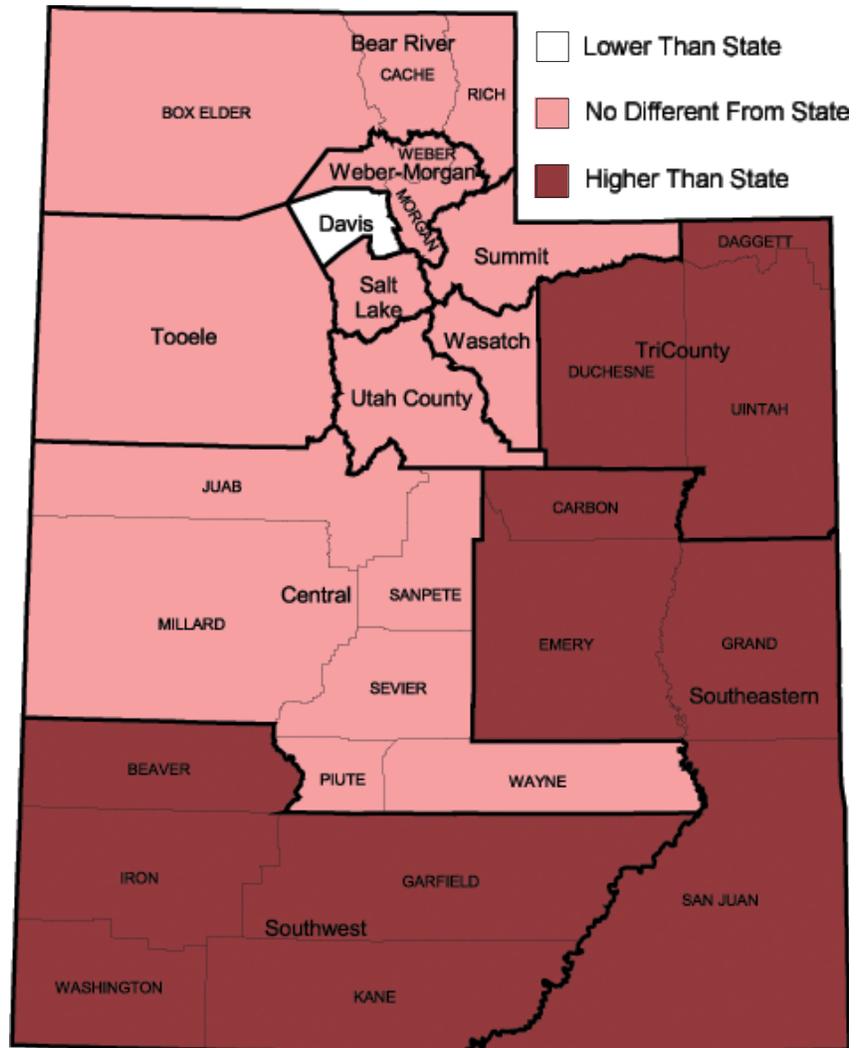


Question: Was there a time during the last 12 months when you needed to see a doctor, but could not because of the cost?

People’s inability to afford health care has been a major barrier to receiving timely care regardless of their health insurance status. For those without health insurance, high cost of health care is certainly one of the biggest obstacles in getting timely care. For individuals with health insurance, not having adequate health insurance benefits or the burden of out-of-pocket co-payments can keep them from seeking needed care in a timely manner.

- Among Utah’s health districts, residents of Southeastern Utah, Southwest Utah, and TriCounty Health Districts were more likely to report an inability to get needed care because of cost when compared to the state total.
- Adults living in Davis County Health District were less likely to have a problem getting needed care because of cost when compared to the state total.
- The 1999 and 2000 Utah BRFSS showed that 10.4% of Utah adults were unable to get needed care because of cost.
- TriCounty Health District had the highest percentage of adults who reported not being able to get needed health care due to cost (19.7%) whereas Davis County Health District had the lowest (7.2%).

Unable to Get Health Care by Whether the Local Health District Percentage Differed From the State, Utah Adults Ages 18+, 1999-2000



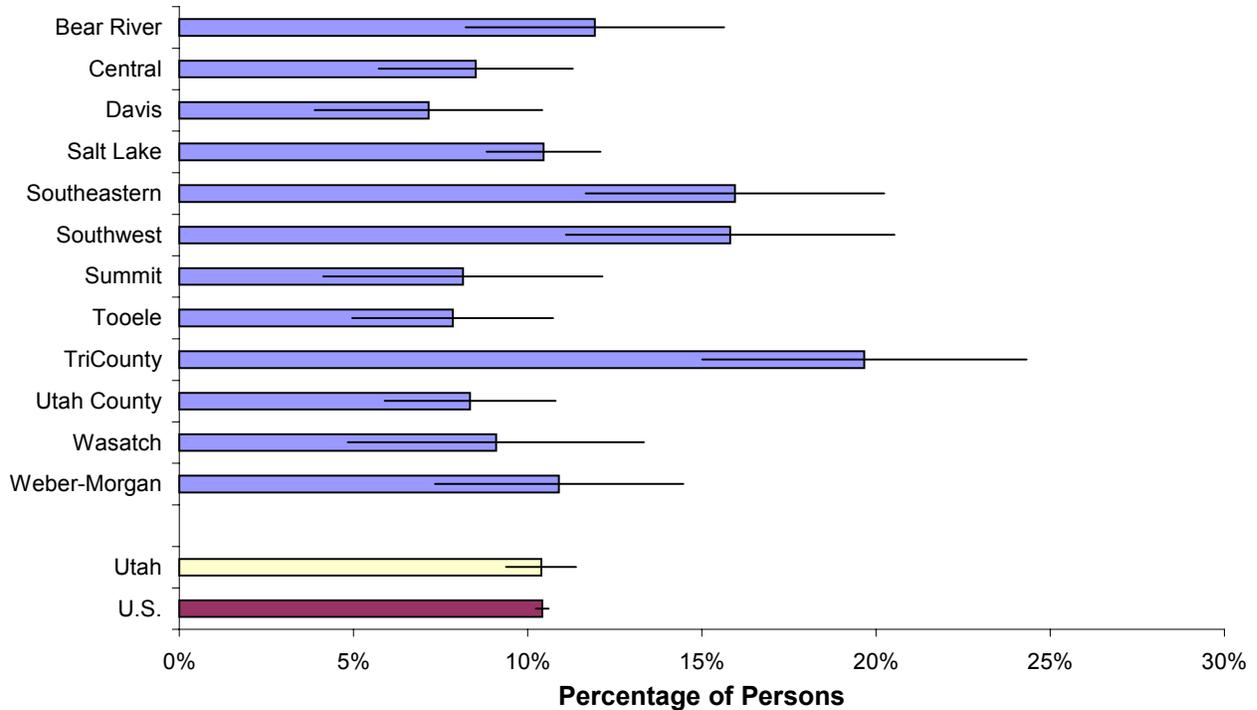
Age adjusted to the U.S. 2000 standard population. Percentage for a local health district was considered different from the state percentage if its 95% confidence interval did not include the state percentage. Source: Behavioral Risk Factor Surveillance System



Unable to Get Needed Health Care Due to Cost

Percentage of Persons Who Reported They Were Unable to Get Needed Health Care Due to Cost*

by Local Health District, Utah, and U.S., Adults Ages 18+, 1999-2000



* crude rates
Source: Behavioral Risk Factor Surveillance System

District	Sample Size	Total Number of Adults	Number Unable to Get Care	Crude Rates			Age-adjusted Rates**		
				Percent	95% CI Range		Percent	95% CI Range	
Bear River	378	91,817	11,000	11.9%	8.2%	15.6%	11.8%	8.2%	15.4%
Central	389	43,286	3,700	8.5%	5.7%	11.3%	8.7%	5.9%	11.6%
Davis	370	155,816	11,200	7.2%	3.9%	10.4%	6.8%	3.8%	9.8%
Salt Lake	1,674	627,857	65,700	10.5%	8.8%	12.1%	9.8%	8.3%	11.3%
Southeastern	359	36,451	5,800	16.0%	11.7%	20.2%	15.9%	11.7%	20.0%
Southwest	413	97,595	15,400	15.8%	11.1%	20.5%	16.4%	11.8%	20.9%
Summit	393	21,092	1,700	8.1%	4.1%	12.2%	8.0%	4.3%	11.8%
Tooele	481	27,012	2,100	7.9%	5.0%	10.7%	7.9%	5.1%	10.7%
TriCounty	369	26,359	5,200	19.7%	15.0%	24.3%	19.5%	14.8%	24.2%
Utah County	532	245,264	20,500	8.4%	5.9%	10.8%	8.2%	5.8%	10.7%
Wasatch	327	10,154	900	9.1%	4.8%	13.3%	9.2%	5.3%	13.1%
Weber-Morgan	376	140,822	15,300	10.9%	7.3%	14.5%	11.0%	7.5%	14.5%
Utah	6,061	1,523,525	158,300	10.4%	9.4%	11.4%	10.0%	9.0%	10.9%
U.S.				10.4%	10.2%	10.6%	10.5%	10.3%	10.7%

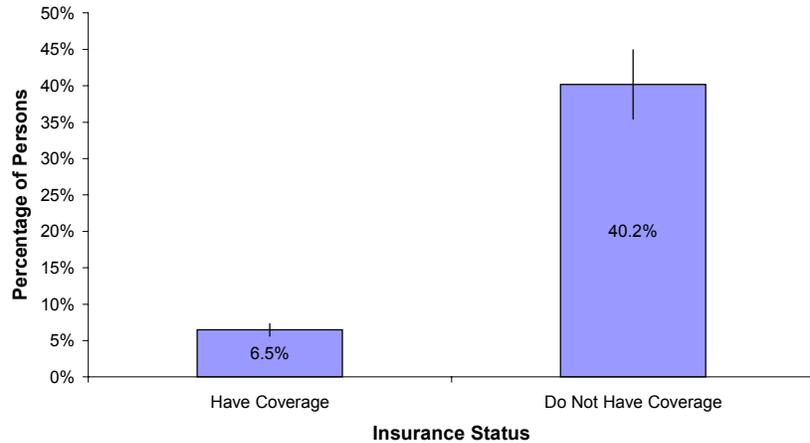
** Age adjusted to U.S. 2000 standard population

Unable to Get Needed Health Care Due to Cost



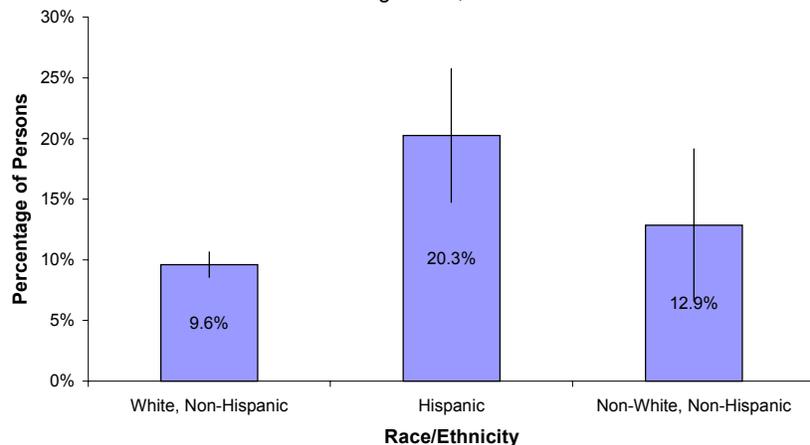
- The likelihood that one was unable to obtain needed care because of cost increased six-fold for those without health insurance coverage (40.2%) when compared to adults with coverage (6.5%).
- Women (12.6%) were more likely to report cost as a barrier to care compared to men (8.1%) (not graphed).

Percentage of Persons Who Reported Being Unable to Get Needed Health Care Due to Cost by Insurance Status, Utah Adults Ages 18+, 1999-2000



- Hispanic adults (20.3%) were more likely to report having a problem with getting needed care due to cost than non-Hispanic adults.
- Persons without a high school diploma (19.2%) were about three times more likely to have a problem in getting needed care due to cost than those graduated from college (6.2%) (not graphed).

Percentage of Persons Who Reported Being Unable to Get Needed Health Care Due to Cost by Race/Ethnicity, Utah Adults Ages 18+, 1999-2000



Utah Objective: No objective listed.

HP2010 Objective: No objective listed.



Unable to Get Needed Health Care Due to Cost

Percentage of Persons Who Reported Being Unable to Get Needed Health Care Due to Cost by Selected Demographic Characteristics, Utah Adults Ages 18+, 1999 - 2000.

Demographic Subgroup	Utah Population		Survey Estimates				
	Distribution	Number of Persons ¹	Percentage of Persons Who Reported Unable to Get Care Due to Cost ²			Number of Persons ^{1,3}	Distribution of Persons Who Reported Unable to Get Care Due to Cost by Category
			95% Confidence Intervals				
			Lower	Upper			
Health Care Coverage							
Cost Presented Barrier	10.4%	158,300					
Cost Was Not a Barrier	89.6%	1,365,200					
Total, All Adults	100.0%	1,523,500					
Sex							
Males	49.5%	753,700	8.1%	6.7%	9.4%	60,700	38.5%
Females	50.5%	769,800	12.6%	11.1%	14.1%	97,100	61.5%
Total, All Adults	100.0%	1,523,500	10.4%	9.4%	11.4%	158,300	100.0%
Age Group							
18 to 34	42.6%	648,500	13.1%	11.2%	15.1%	85,200	52.7%
35 to 49	28.5%	433,700	12.0%	10.0%	13.9%	51,900	32.1%
50 to 64	16.4%	250,000	7.1%	5.3%	8.8%	17,600	10.9%
65 or Over	12.6%	191,300	3.7%	2.6%	5.4%	7,100	4.4%
Total, All Adults	100.0%	1,523,500	10.4%	9.4%	11.4%	158,300	100.0%
Race/Ethnicity							
White, Non-Hispanic	88.4%	1,346,000	9.6%	8.6%	10.7%	129,400	80.1%
Hispanic	8.3%	126,000	20.3%	14.7%	25.8%	25,500	15.8%
Non-White, Non-Hispanic	3.4%	51,500	12.9%	6.6%	19.2%	6,600	4.1%
Total, All Adults	100.0%	1,523,500	10.4%	9.4%	11.4%	158,300	100.0%
Income							
Less Than \$20,000	13.6%	207,700	24.3%	20.4%	28.3%	50,500	33.1%
\$20,000-\$49,999	47.8%	727,500	11.4%	9.9%	13.0%	83,000	54.5%
\$50,000 or Over	38.6%	588,400	3.2%	2.2%	4.7%	18,900	12.4%
Total, All Adults	100.0%	1,523,500	10.4%	9.4%	11.4%	158,300	100.0%
Education							
Less Than High School	6.0%	91,700	19.2%	13.4%	25.0%	17,600	11.1%
H.S. Grad or G.E.D.	30.1%	458,100	12.5%	10.6%	14.5%	57,300	36.2%
Some Post High School	35.1%	534,100	10.5%	8.7%	12.3%	56,100	35.5%
College Graduate	28.9%	439,500	6.2%	4.7%	7.7%	27,200	17.2%
Total, All Adults	100.0%	1,523,500	10.4%	9.4%	11.4%	158,300	100.0%
Health Care Coverage							
Have Coverage	87.9%	1,339,000	6.5%	5.6%	7.3%	86,500	53.9%
Do Not Have Coverage	12.1%	184,500	40.2%	35.4%	44.9%	74,100	46.1%
Total, All Adults	100.0%	1,523,500	10.4%	9.4%	11.4%	158,300	100.0%

1 Rounded to the nearest 100 persons.

2 Plus or minus 95% confidence interval.

3 Figures in these columns may not sum to the total because some surveyed individuals had missing values on the grouping variables.

Population counts for age, sex, and total population were the 2000 estimates provided by the Governor's Office of Planning and Budget. Population count estimates for race/ethnicity, income, and education populations were derived from averaging three years of the BRFSS surveys from 1999-2001.

Dental Care Coverage

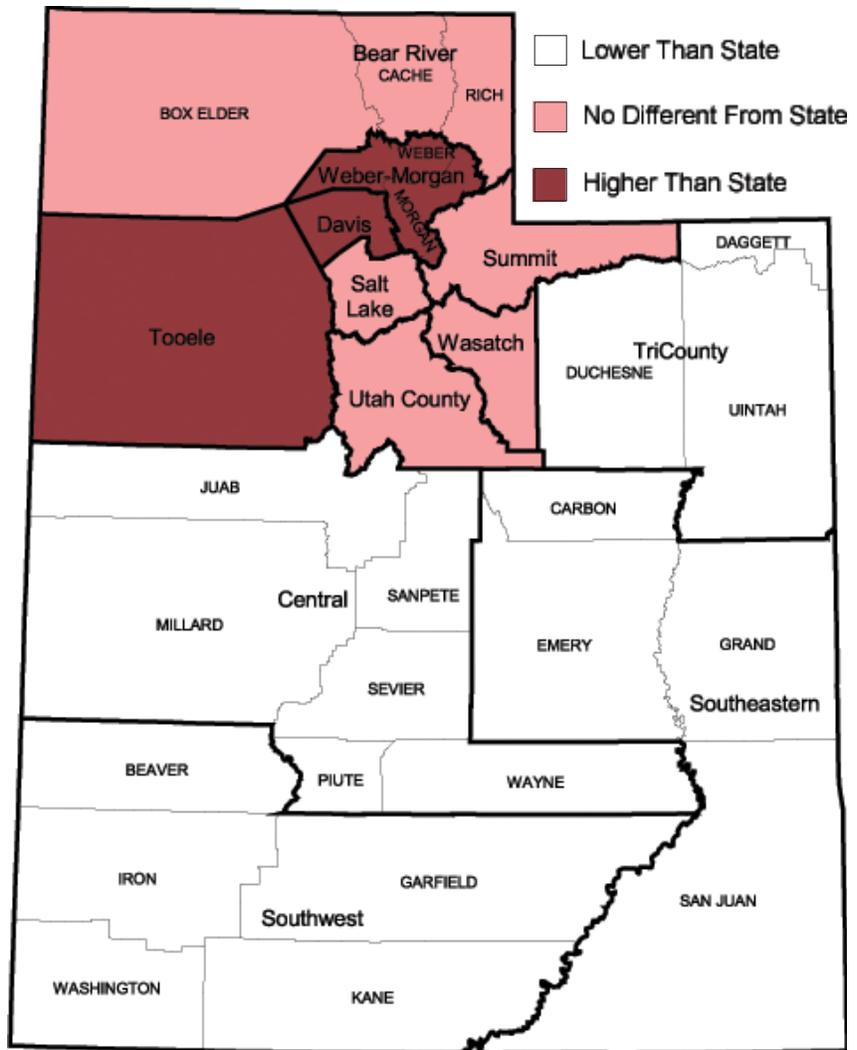


Question: Do you have any kind of insurance coverage that pays for some or all of your routine dental care, including dental insurance, prepaid plans such as HMOs, or government plans such as Medicaid?

Lack of dental insurance is one of several barriers to obtaining oral health care and accounts in part for the generally poorer oral health of those who live at or near the poverty line, lack health insurance, or lose their insurance upon retirement. Insurance coverage for oral health care is increasing but still lags behind medical insurance. It is often employer based and has limited benefits and high co-payments. Medicare is not designed to reimburse for routine dental care. There needs to be improved access to primary preventive and early intervention services, and removal of barriers to the dental care system. One approach includes making dental insurance more available to Americans.

- Dental care coverage was higher than the state rate in Weber-Morgan, Davis County, and Tooele County Health Districts. It was lower in the Central Utah, Southeastern Utah, Southwest Utah, and TriCounty Health Districts.
- Approximately 66% of Utah adults reported having dental insurance. This question was not asked in the core questionnaire, so there were no comparable U.S. data.

Dental Care Coverage by Whether the Local Health District Percentage Differed From the State, Utah Adults Ages 18+, 1999-2001

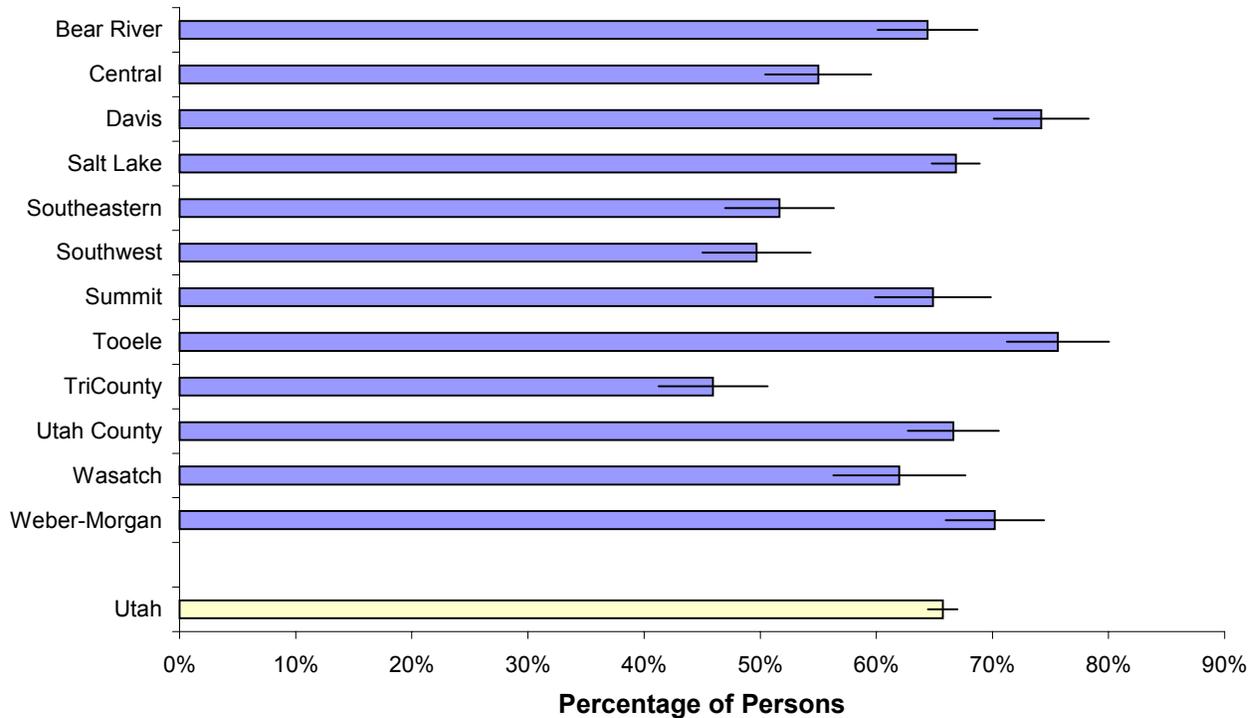


Age adjusted to the U.S. 2000 standard population. Percentage for a local health district was considered different from the state percentage if its 95% confidence interval did not include the state percentage. Source: Behavioral Risk Factor Surveillance System



Dental Care Coverage

Percentage of Persons Who Reported Having Dental Care Coverage*
by Local Health District, Utah Adults Ages 18+, 1999-2001



* crude rates
Source: Behavioral Risk Factor Surveillance System

District	Sample Size	Total Number of Adults	Crude Rates			Age-adjusted Rates**		
			Number With Dental Care Coverage	Percent	95% CI Range	Percent	95% CI Range	
Bear River	589	91,817	59,100	64.4%	60.1% 68.7%	63.4%	59.5% 67.3%	
Central	596	43,286	23,800	55.0%	50.4% 59.5%	56.4%	52.2% 60.6%	
Davis	541	155,816	115,600	74.2%	70.1% 78.3%	71.4%	67.4% 75.5%	
Salt Lake	2,588	627,857	419,700	66.8%	64.8% 68.9%	65.2%	63.2% 67.1%	
Southeastern	550	36,451	18,800	51.7%	47.0% 56.3%	52.1%	47.7% 56.6%	
Southwest	614	97,595	48,500	49.7%	45.0% 54.4%	50.9%	46.3% 55.5%	
Summit	588	21,092	13,700	64.9%	59.9% 69.9%	60.8%	56.4% 65.2%	
Tooele	684	27,012	20,400	75.6%	71.2% 80.0%	74.9%	70.8% 79.0%	
TriCounty	567	26,359	12,100	45.9%	41.2% 50.6%	45.4%	41.0% 49.9%	
Utah County	842	245,264	163,400	66.6%	62.7% 70.6%	64.0%	60.4% 67.7%	
Wasatch	519	10,154	6,300	62.0%	56.3% 67.7%	61.1%	55.7% 66.6%	
Weber-Morgan	587	140,822	98,900	70.2%	66.0% 74.4%	70.2%	66.0% 74.5%	
Utah	9,265	1,523,525	1,001,100	65.7%	64.4% 67.0%	64.3%	63.1% 65.6%	

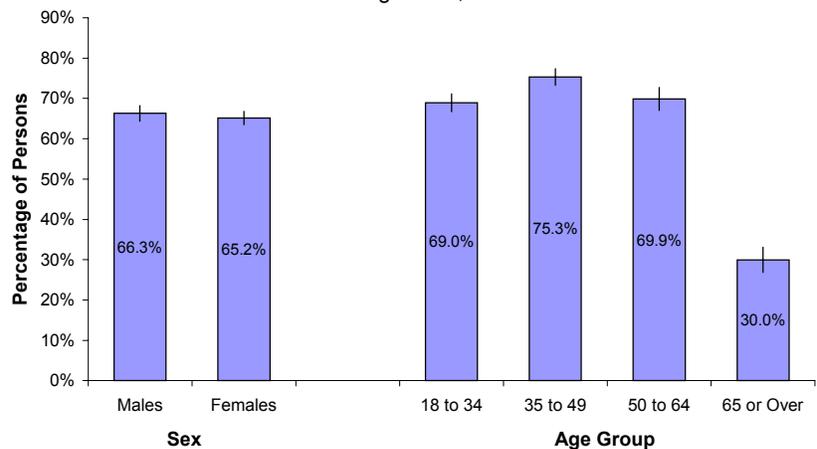
** Age adjusted to U.S. 2000 standard population

Dental Care Coverage



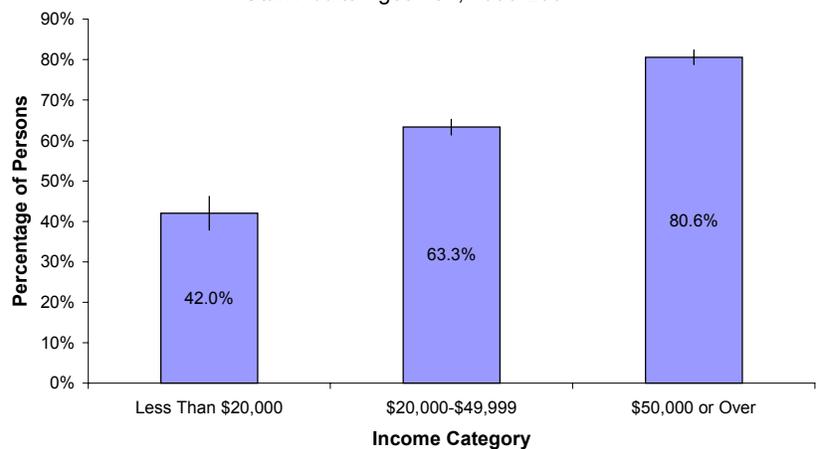
- Only 30.0% of adults ages 65 or over reported dental insurance, as compared to 69.0% to 75.3% for adults younger than 65.

Percentage of Persons Who Reported Having Dental Care Coverage by Sex and Age, Utah Adults Ages 18+, 1999-2001



- Dental coverage increased from 42.0% for those with annual household incomes of less than \$20,000 to 80.6% for those with annual household incomes of \$50,000 or over.
- The percentage of adults with dental coverage increased with higher education levels from 48.5% for people with less than a high school education to 70.0% for adults with a college degree (not graphed).

Percentage of Persons Who Reported Having Dental Care Coverage by Income, Utah Adults Ages 18+, 1999-2001



The Utah Department of Health provides dental care coverage to qualified low income or disabled Utah residents through the Utah Medicaid program. For Medicaid information including a complete list of dentists and dental clinics providing services for people enrolled in Medicaid, call (801) 538-6155 or 1-800-662-9651.

Utah Objective: No objective listed.

HP2010 Objective: No objective listed.



Dental Care Coverage

Percentage of Persons Who Reported Having Dental Care Coverage by Selected Demographic Characteristics, Utah Adults Ages 18+, 1999 - 2001.

Demographic Subgroup	Utah Population		Survey Estimates				
	Distribution	Number of Persons ¹	Percentage of Persons Who Reported Having Dental Care Coverage ²			Number of Persons ^{1,3}	Distribution of Persons Who Reported Having Dental Care Coverage by Category
			95% Confidence Intervals	Lower	Upper		
Dental Insurance							
Yes	65.7%	1,001,100					
No	34.3%	522,400					
Total, All Adults	100.0%	1,523,500					
Sex							
Males	49.5%	753,700	66.3%	64.3%	68.2%	499,600	49.9%
Females	50.5%	769,800	65.2%	63.5%	66.9%	501,600	50.1%
Total, All Adults	100.0%	1,523,500	65.7%	64.4%	67.0%	1,001,100	100.0%
Age Group							
18 to 34	42.6%	648,500	69.0%	66.7%	71.2%	447,100	44.5%
35 to 49	28.5%	433,700	75.3%	73.3%	77.4%	326,600	32.5%
50 to 64	16.4%	250,000	69.9%	67.0%	72.7%	174,700	17.4%
65 or Over	12.6%	191,300	30.0%	26.9%	33.1%	57,400	5.7%
Total, All Adults	100.0%	1,523,500	65.7%	64.4%	67.0%	1,001,100	100.0%
Race/Ethnicity							
White, Non-Hispanic	88.4%	1,346,000	65.6%	64.2%	66.9%	882,300	88.2%
Hispanic	8.3%	126,000	64.6%	59.0%	70.1%	81,300	8.1%
Non-White, Non-Hispanic	3.4%	51,500	70.2%	63.2%	77.3%	36,200	3.6%
Total, All Adults	100.0%	1,523,500	65.7%	64.4%	67.0%	1,001,100	100.0%
Income							
Less Than \$20,000	13.6%	207,700	42.0%	37.9%	46.2%	87,300	8.5%
\$20,000-\$49,999	47.8%	727,500	63.3%	61.4%	65.3%	460,700	45.1%
\$50,000 or Over	38.6%	588,400	80.6%	78.8%	82.4%	474,100	46.4%
Total, All Adults	100.0%	1,523,500	65.7%	64.4%	67.0%	1,001,100	100.0%
Education							
Less Than High School	6.0%	91,700	48.5%	41.8%	55.1%	44,400	4.4%
H.S. Grad or G.E.D.	30.1%	458,100	62.2%	59.9%	64.5%	285,100	28.5%
Some Post High School	35.1%	534,100	68.0%	65.8%	70.2%	363,300	36.3%
College Graduate	28.9%	439,500	70.0%	67.7%	72.2%	307,500	30.7%
Total, All Adults	100.0%	1,523,500	65.7%	64.4%	67.0%	1,001,100	100.0%

1 Rounded to the nearest 100 persons.

2 Plus or minus 95% confidence interval.

3 Figures in these columns may not sum to the total because some surveyed individuals had missing values on the grouping variables.

Population counts for age, sex, and total population were the 2000 estimates provided by the Governor's Office of Planning and Budget. Population count estimates for race/ethnicity, income, and education populations were derived from averaging three years of the BRFSS surveys from 1999-2001.

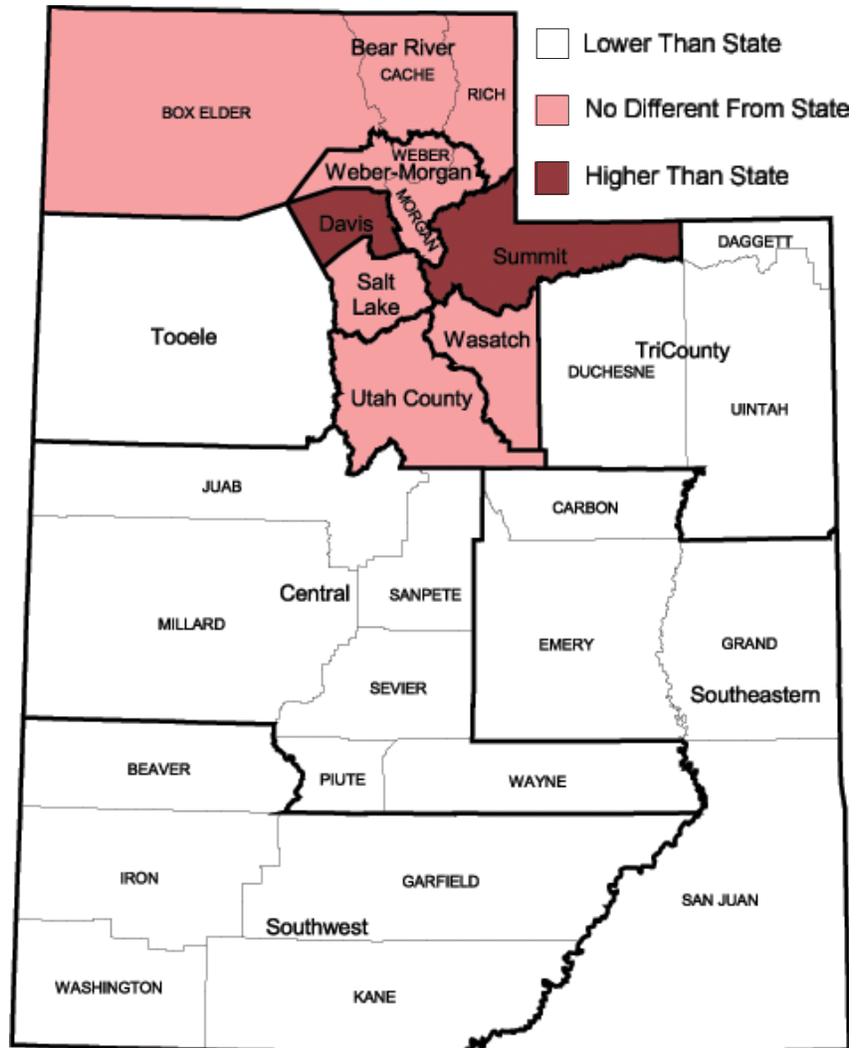
Routine Dental Care



Question: How long has it been since you last visited a dentist or a dental clinic for any reason?

Great progress has been made in understanding the common oral diseases including dental caries and periodontal disease. Now most middle age and younger Americans can expect to retain their natural teeth over their lifetime. But oral health means much more than just healthy teeth and gums. Research findings have pointed to possible associations between chronic oral infections and diabetes, heart and lung disease, stroke, and low birth weight premature births. Regular dental visits are important in the prevention, early detection, and treatment of oral and craniofacial diseases and conditions for all ages. Those who suffer the worst oral health include poor Americans, and members of racial and ethnic minority groups. This measure cannot be compared to the first printed BRFSS Local Health District Report (1995-1998) because that analysis included adults who had visited a dental clinic in the past two years. The online version will be corrected and Appendix D is correct.

Dental Visit in Past Year by Whether the Local Health District Percentage Differed From the State, Utah Adults Ages 18+, 1999-2001



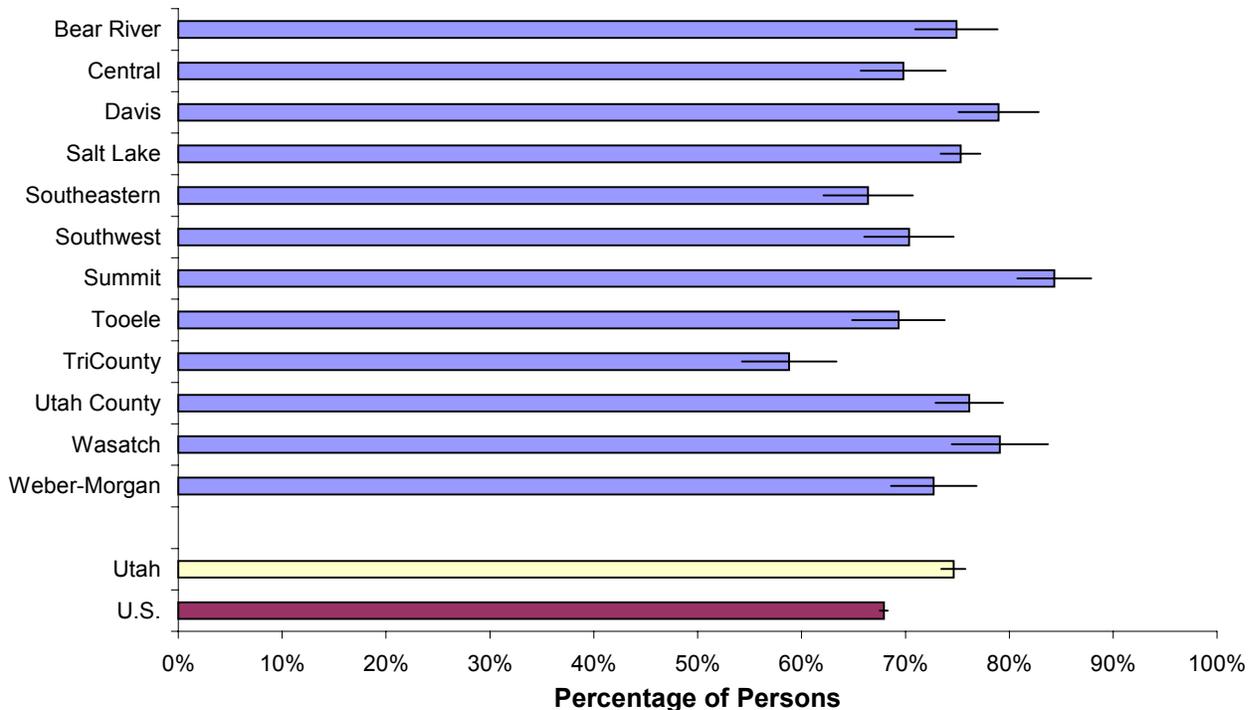
Age adjusted to the U.S. 2000 standard population. Percentage for a local health district was considered different from the state percentage if its 95% confidence interval did not include the state percentage. Source: Behavioral Risk Factor Surveillance System

- Adult residents of Summit County and Davis County Health Districts were more likely to have reported visiting a dental clinic in the past year as compared to the state rate.
- Adults in Central Utah, Tooele County, TriCounty, Southwest Utah, and Southeastern Utah Health Districts were less likely to have reported visiting a dental clinic in the past year when compared to the state total.
- Approximately 74.6% of Utah adults reported visiting a dental clinic in the past year. This was higher than the U.S. rate of 67.9%. This difference was significant even after age adjustment.



Routine Dental Care

Percentage of Persons Who Reported a Dental Visit in the Past Year*
by Local Health District, Utah, and U.S., Adults Ages 18+, 1999-2001



* crude rates
Source: Behavioral Risk Factor Surveillance System

District	Sample Size	Total Number of Adults	Crude Rates			Age-adjusted Rates**		
			Number With Dental Visit in Past Year	Percent	95% CI Range	Percent	95% CI Range	
Bear River	610	91,817	68,800	74.9%	70.9% 78.9%	74.3%	70.2% 78.4%	
Central	607	43,286	30,200	69.8%	65.7% 73.9%	69.9%	66.0% 73.9%	
Davis	582	155,816	123,000	79.0%	75.1% 82.8%	78.7%	74.8% 82.5%	
Salt Lake	2,654	627,857	472,800	75.3%	73.4% 77.2%	74.6%	72.7% 76.6%	
Southeastern	579	36,451	24,200	66.4%	62.1% 70.7%	66.2%	62.1% 70.4%	
Southwest	640	97,595	68,700	70.4%	66.1% 74.6%	69.8%	65.5% 74.0%	
Summit	599	21,092	17,800	84.3%	80.8% 87.9%	83.6%	79.9% 87.3%	
Tooele	708	27,012	18,700	69.3%	64.9% 73.8%	69.2%	65.1% 73.4%	
TriCounty	594	26,359	15,500	58.8%	54.3% 63.4%	58.7%	54.2% 63.3%	
Utah County	872	245,264	186,800	76.2%	72.9% 79.4%	75.4%	72.0% 78.7%	
Wasatch	549	10,154	8,000	79.1%	74.5% 83.7%	78.5%	74.1% 82.9%	
Weber-Morgan	608	140,822	102,400	72.7%	68.6% 76.8%	71.7%	67.7% 75.8%	
Utah	9,602	1,523,525	1,137,000	74.6%	73.5% 75.8%	74.1%	72.9% 75.3%	
U.S.				67.9%	67.5% 68.3%	67.9%	67.5% 68.3%	

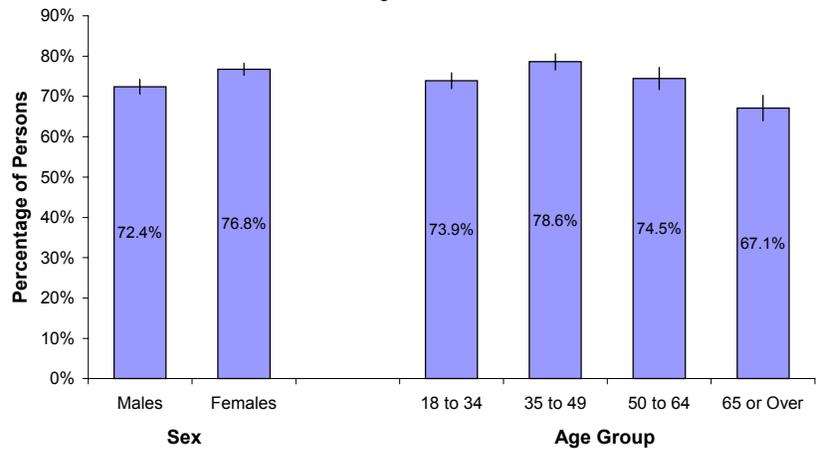
** Age adjusted to U.S. 2000 standard population
U.S. rate includes only year 1999.

Routine Dental Care



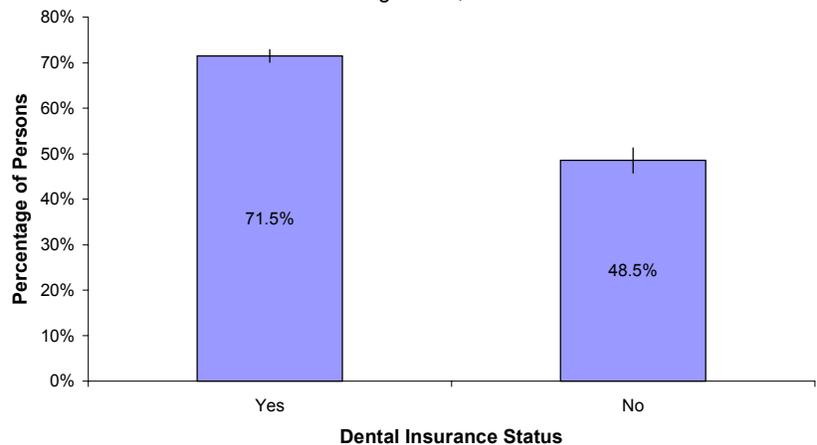
- Adults ages 65 or over were less likely than other age groups to have reported visiting a dental clinic in the past year.
- Males were less likely than females to have reported visiting a dental clinic in the past year.

Percentage of Persons Who Reported a Dental Visit in the Past Year by Sex and Age, Utah Adults Ages 18+, 1999-2001



- As with dental insurance coverage, the percentage of adults who reported visiting a dental clinic in the past year increased with increasing education and income (not graphed).
- Utah adults with dental insurance were much more likely to have reported visiting a dental clinic in the past year than those without dental insurance.

Percentage of Persons Who Reported a Dental Visit in the Past Year by Dental Insurance Status, Utah Adults Ages 18+, 1999-2001



The Utah Department of Health Oral Health Program strives to meet the goals of preventing oral disease, assuring access to affordable oral health care, and promoting oral health awareness. It meets these goals by participating in a wide range of oral health programs and providing public information about a variety of oral health topics such as community water fluoridation and dental sealants, dental insurance, and dental care providers. Visit the Utah Oral Health Listserv at health.utah.gov/oralhealth/ for more information.

Utah Objective: Increase the percentage of Utah adults ages 18 or over who report having a routine dental visit in the past year to 78%.

HP2010 Objective 21-10: Increase the proportion of children and adults who use the oral health care system each year to 56%.



Routine Dental Care

Percentage of Persons Who Reported a Dental Visit in the Past Year by Selected Demographic Characteristics, Utah Adults Ages 18+, 1999 - 2001.

Demographic Subgroup	Utah Population		Survey Estimates				
	Distribution	Number of Persons ¹	Percentage of Persons Who Reported a Dental Visit in Past Year ²			Number of Persons ^{1,3}	Distribution of Persons Who Reported a Dental Visit in Past Year by Category
			95% Confidence Intervals	Lower	Upper		
Visited a Dentist							
Within the Past Year	74.6%	1,137,000					
Within the Past 2 Years	11.5%	174,700					
Within the Past 5 Years	6.6%	100,700					
5 or More Years Ago	7.1%	108,200					
Never	0.2%	2,900					
Total, All Adults	100.0%	1,523,500					
Sex							
Males	49.5%	753,700	72.4%	70.6%	74.2%	545,800	48.0%
Females	50.5%	769,800	76.8%	75.3%	78.3%	590,800	52.0%
Total, All Adults	100.0%	1,523,500	74.6%	73.5%	75.8%	1,137,000	100.0%
Age Group							
18 to 34	42.6%	648,500	73.9%	72.0%	75.9%	479,400	42.2%
35 to 49	28.5%	433,700	78.6%	76.6%	80.6%	340,900	30.0%
50 to 64	16.4%	250,000	74.5%	71.7%	77.2%	186,200	16.4%
65 or Over	12.6%	191,300	67.1%	63.9%	70.3%	128,400	11.3%
Total, All Adults	100.0%	1,523,500	74.6%	73.5%	75.8%	1,137,000	100.0%
Race/Ethnicity							
White, Non-Hispanic	88.4%	1,346,000	75.0%	73.8%	76.2%	1,009,800	88.8%
Hispanic	8.3%	126,000	73.7%	68.9%	78.6%	92,900	8.2%
Non-White, Non-Hispanic	3.4%	51,500	66.4%	59.3%	73.5%	34,200	3.0%
Total, All Adults	100.0%	1,523,500	74.6%	73.5%	75.8%	1,137,000	100.0%
Income							
Less Than \$20,000	13.6%	207,700	59.8%	56.1%	63.6%	124,200	10.9%
\$20,000-\$49,999	47.8%	727,500	72.6%	70.8%	74.4%	528,300	46.4%
\$50,000 or Over	38.6%	588,400	82.5%	80.6%	84.3%	485,100	42.6%
Total, All Adults	100.0%	1,523,500	74.6%	73.5%	75.8%	1,137,000	100.0%
Education							
Less Than High School	6.0%	91,700	56.6%	50.4%	62.8%	51,900	4.6%
H.S. Grad or G.E.D.	30.1%	458,100	69.6%	67.4%	71.7%	318,600	28.0%
Some Post High School	35.1%	534,100	77.0%	75.1%	79.0%	411,300	36.2%
College Graduate	28.9%	439,500	80.7%	78.8%	82.7%	354,900	31.2%
Total, All Adults	100.0%	1,523,500	74.6%	73.5%	75.8%	1,137,000	100.0%
Dental Insurance							
Yes	65.7%	1,001,100	71.5%	70.1%	72.9%	715,900	73.8%
No	34.3%	522,400	48.5%	45.8%	51.3%	253,500	26.2%
Total, All Adults	100.0%	1,523,500	74.6%	73.5%	75.8%	1,137,000	100.0%

1 Rounded to the nearest 100 persons.

2 Plus or minus 95% confidence interval.

3 Figures in these columns may not sum to the total because some surveyed individuals had missing values on the grouping variables.

Population counts for age, sex, and total population were the 2000 estimates provided by the Governor's Office of Planning and Budget. Population count estimates for race/ethnicity, income, and education populations were derived from averaging three years of the BRFSS surveys from 1999-2001.

Mammography



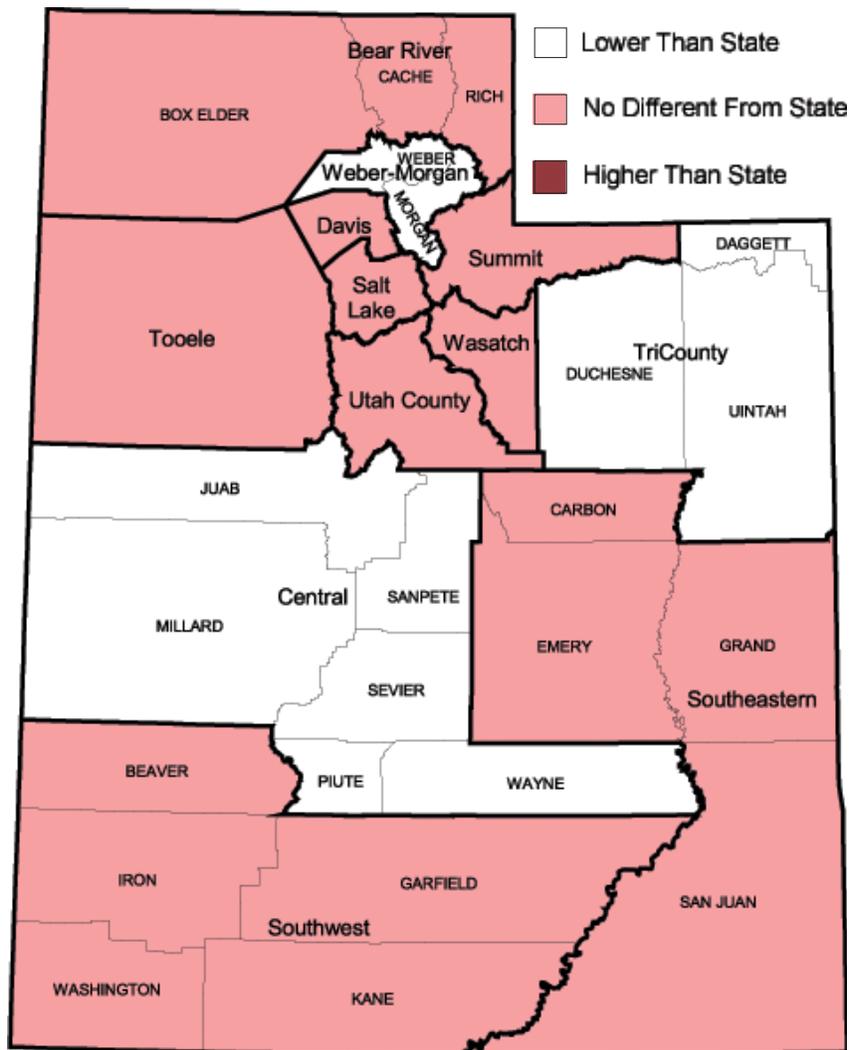
Questions: *A mammogram is an x-ray of each breast to look for breast cancer. Have you ever had a mammogram? How long has it been since you had your last mammogram?*

Excluding skin cancers, breast cancer is the most commonly occurring cancer in U.S. and Utah women and the leading cause of cancer death among Utah women. The risk of developing breast cancer increases with age. Other risk factors include family and/or personal history of breast cancer, history of abnormal breast biopsy, and hormonal factors such as early menstruation or late age at menopause. Early detection can increase survival. Clinical trials have demonstrated that routine screening with mammography can reduce breast cancer deaths by 20 to 30 percent in women ages 50 to 69 years⁴⁻⁹ and by about 17 percent in women ages 40 to 49 years.¹⁰⁻¹¹ There is consensus that women ages 40 or over undergo routine screening with mammography at least every two years. Women who are at higher than average risk for breast cancer should seek medical advice about when to begin screening.¹²

- The self-reported use of screening mammography among women ages 40 or over in Central Utah, Tri-County, and Weber-Morgan Health Districts was significantly below that for the state. The rate of screening mammography among women in the remaining health districts did not differ significantly from the state rate.

- Women living in Davis County Health District had the highest rate of screening mammography (77.4%), although it was not significantly higher than the state.
- The percentage of Utah women ages 40 or older who reported receiving a screening mammogram in the past two years was below that of the U.S. (67.5% and 73.2% respectively, age-adjusted rates).

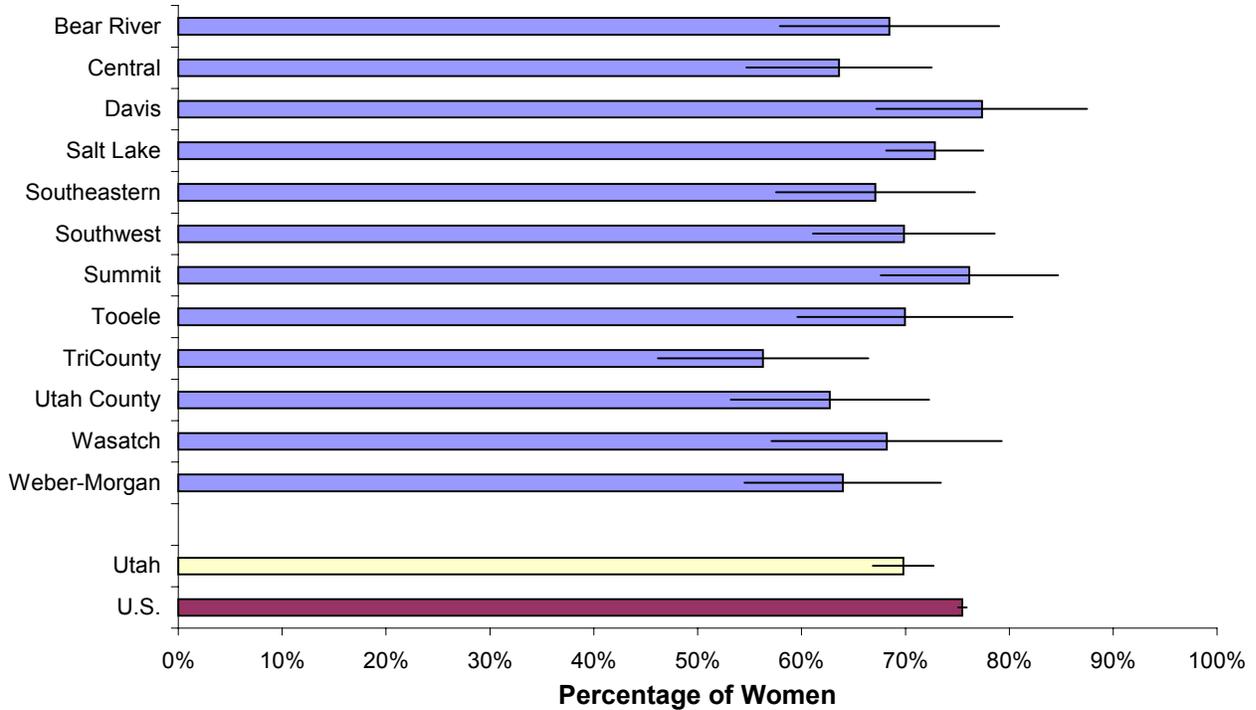
Mammogram in Past Two Years by Whether the Local Health District Percentage Differed From the State, Utah Women Ages 40+, 1999-2000



Age adjusted to the U.S. 2000 standard population. Percentage for a local health district was considered different from the state percentage if its 95% confidence interval did not include the state percentage. Note: Percentages represent mammography for routine screening and do not include women who had a mammogram because of cancer or other breast problem. Source: Behavioral Risk Factor Surveillance System



Percentage of Women Who Reported Having a Screening Mammogram in the Past Two Years* by Local Health District, Utah, and U.S., Women Ages 40+, 1999-2000



* crude rates

Note: Percentages represent mammography for routine screening and do not include women who had a mammogram because of cancer or other breast problem.

Source: Behavioral Risk Factor Surveillance System

District	Sample Size	Total Number of Women 40+	Crude Rates			Age-adjusted Rates**		
			Number of Women 40+ With Recent Mammogram	Percent	95% CI Range	Percent	95% CI Range	
Bear River	102	20,699	14,200	68.5%	57.9% 79.0%	66.9%	56.2% 77.5%	
Central	134	12,521	8,000	63.6%	54.7% 72.6%	53.5%	44.2% 62.9%	
Davis	85	38,992	30,200	77.4%	67.2% 87.5%	75.6%	66.5% 84.7%	
Salt Lake	458	155,978	113,600	72.8%	68.1% 77.5%	70.5%	65.4% 75.6%	
Southeastern	112	10,952	7,300	67.1%	57.5% 76.7%	61.8%	52.3% 71.2%	
Southwest	125	28,498	19,900	69.9%	61.1% 78.6%	67.9%	57.4% 78.5%	
Summit	117	5,529	4,200	76.2%	67.6% 84.7%	73.7%	65.3% 82.1%	
Tooele	135	6,388	4,500	70.0%	59.6% 80.3%	71.0%	61.4% 80.6%	
TriCounty	121	7,616	4,300	56.3%	46.2% 66.4%	56.8%	47.1% 66.5%	
Utah County	126	47,102	29,500	62.7%	53.2% 72.3%	62.9%	53.4% 72.4%	
Wasatch	108	2,718	1,900	68.2%	57.1% 79.3%	62.1%	52.1% 72.1%	
Weber-Morgan	134	37,684	24,100	64.0%	54.5% 73.4%	56.8%	48.0% 65.7%	
Utah	1,757	374,677	261,500	69.8%	66.9% 72.7%	67.5%	64.3% 70.7%	
U.S.				75.5%	75.1% 75.9%	73.2%	72.7% 73.6%	

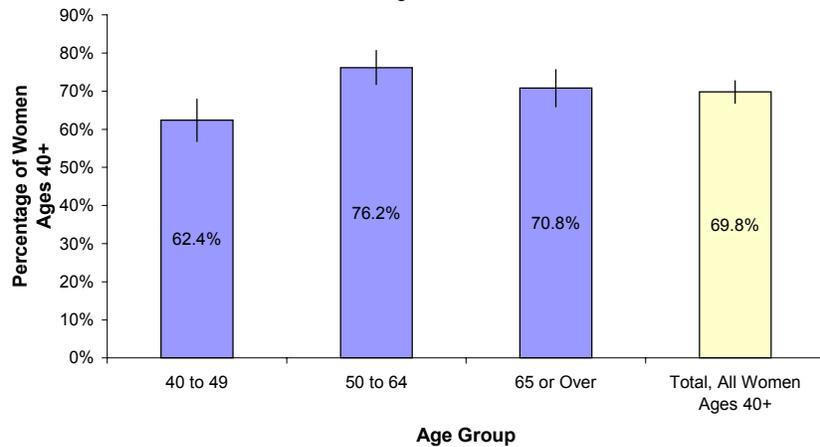
** Age adjusted to U.S. 2000 standard population

Mammography



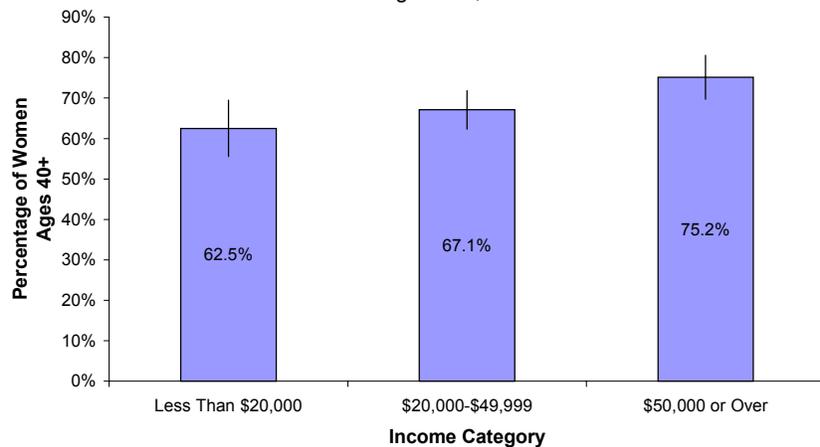
- In Utah, women ages 40 to 49 were less likely than those 50 years or over to report having a screening mammogram in the past two years.

Percentage of Women Who Reported Having a Screening Mammogram* in the Past Two Years by Age, Utah Women Ages 40+, 1999-2000



- Utah women with less than a high school education or annual household incomes less than \$20,000 were less likely to report having a screening mammogram in the past two years compared to women with more years of education (not graphed) or women in higher income groups.

Percentage of Women Who Reported Having a Screening Mammogram* in the Past Two Years by Income, Utah Women Ages 40+, 1999-2000



* Percentages represent mammography for routine screening and do not include women who had a mammogram because of breast cancer or other breast problem.

The Utah Cancer Control Program (UCCP) distributes free mammography vouchers to women who receive a clinical breast exam at a UCCP sponsored cancer screening clinic and meet age and income guidelines.

Utah Objective: By 2010, increase the proportion of Utah women age 40 or over who have received a screening mammogram* in the preceding two years to 78% (age adjusted to the U.S. 2000 standard population).

HP2010 Objective (related) 3-13: Increase the proportion of women age 40 or over who have received a mammogram within the preceding two years to 70% (age adjusted to the U.S. 2000 standard population).



Percentage of Women Ages 40+ Who Reported Having a Screening Mammogram* in the Past Two Years by Selected Demographic Characteristics, Utah Women Ages 40+, 1999 - 2000.

Demographic Subgroup	Utah Population		Survey Estimates				Distribution of Women 40+ Who Reported a Screening Mammogram in Past Two Years by Category
	Distribution	Number of Persons ¹	Percentage of Women Ages 40+ Who Reported a Screening Mammogram in Past Two Years ²			Number of Persons ^{1,3}	
			95% Confidence Intervals Lower	Upper			
Had Mammogram							
Within the Past Year	53.8%	201,400					
Within the Past 2 Years	16.0%	60,000					
Within the Past 3 Years	6.4%	24,100					
Within the Past 5 Years	4.1%	15,300					
5 or More Years Ago	4.7%	17,500					
Never	15.0%	56,200					
Total, All Women Ages 40+	100.0%	374,700					
Age Group							
40 to 49	37.4%	140,200	62.4%	56.8%	67.9%	87,400	33.6%
50 to 64	33.9%	126,900	76.2%	71.7%	80.7%	96,700	37.1%
65 or Over	28.7%	107,600	70.8%	65.9%	75.7%	76,200	29.3%
Total, All Women Ages 40+	100.0%	374,700	69.8%	66.9%	72.7%	261,500	100.0%
Race/Ethnicity							
White, Non-Hispanic	93.1%	348,800	70.1%	67.1%	73.2%	244,600	93.6%
Hispanic	4.3%	16,100	62.2%	48.0%	76.4%	10,000	3.8%
Non-White, Non-Hispanic	2.6%	9,700	69.8%	51.1%	88.5%	6,800	2.6%
Total, All Women Ages 40+	100.0%	374,700	69.8%	66.9%	72.7%	261,500	100.0%
Income							
Less Than \$20,000	16.9%	63,400	62.5%	55.6%	69.5%	39,600	15.2%
\$20,000-\$49,999	44.6%	167,100	67.1%	62.4%	71.9%	112,200	43.1%
\$50,000 or Over	38.5%	144,200	75.2%	69.7%	80.6%	108,400	41.7%
Total, All Women Ages 40+	100.0%	374,700	69.8%	66.9%	72.7%	261,500	100.0%
Education							
Less Than High School	4.6%	17,200	57.3%	44.5%	70.0%	9,800	3.7%
H.S. Grad or G.E.D.	34.5%	129,200	68.0%	63.0%	72.9%	87,800	33.6%
Some Post High School	37.7%	141,200	72.2%	67.4%	76.9%	101,900	39.0%
College Graduate	23.2%	87,100	71.3%	65.1%	77.5%	62,100	23.7%
Total, All Women Ages 40+	100.0%	374,700	69.8%	66.9%	72.7%	261,500	100.0%

1 Rounded to the nearest 100 persons.

2 Plus or minus 95% confidence interval.

3 Figures in these columns may not sum to the total because some surveyed individuals had missing values on the grouping variables.

* Percentages represent mammography for routine screening and do not include women who had a mammogram because of breast cancer or other breast problem.

Population counts for age, sex, and total population were the 2000 estimates provided by the Governor's Office of Planning and Budget. Population count estimates for race/ethnicity, income, and education populations were derived from averaging three years of the BRFSS surveys from 1999-2001.

Pap Test

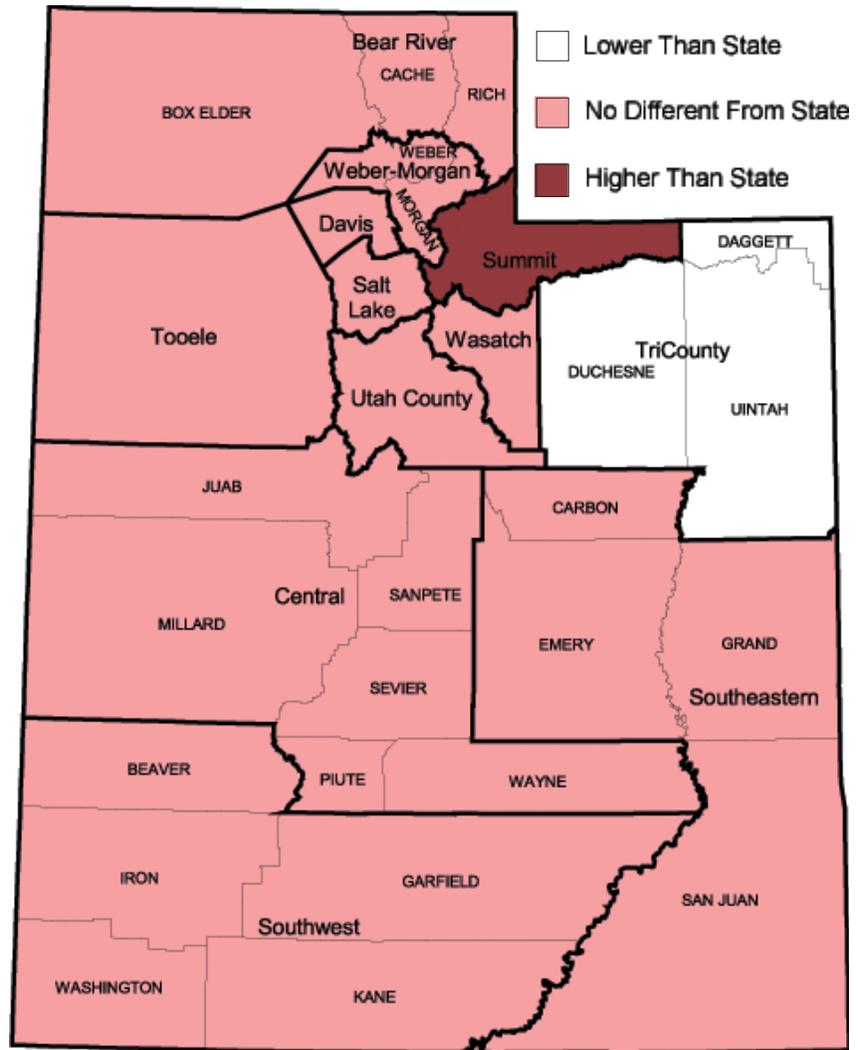


Questions: *A Pap smear is a test for cancer of the cervix. Have you ever had a Pap smear? How long has it been since you had your last Pap smear?*

Cervical cancer is one of the most curable cancers if detected early through routine screening. Almost all cases of cervical cancer are caused by infection with high-risk types of the human papillomavirus. As these viruses are transmitted through sexual contact, any woman who is sexually active is at risk for developing cervical cancer. Other risk factors include having sexual relations at an early age, having multiple sex partners or partners with many other partners, and cigarette smoking. New guidelines released by the American Cancer Society¹³ recommend that cervical screening begin about three years after a woman begins having intercourse but no later than 21 years of age. Cervical screening should be performed every year with conventional Pap tests or every two years with liquid-based Pap tests. Beginning at age 30, women who have had three normal test results in a row may undergo screening every two to three years.

- The percentage of women in TriCounty Health District who reported having a Pap test in the past three years was below the statewide percentage.
- The percentage of Utah women ages 18 or older who reported receiving a Pap test within the past three years was below that of the U.S. (81.1% and 84.9% respectively, age-adjusted rates).

Pap Test in Past Three Years by Whether the Local Health District Percentage Differed From the State, Utah Women Ages 18+, 1999-2000

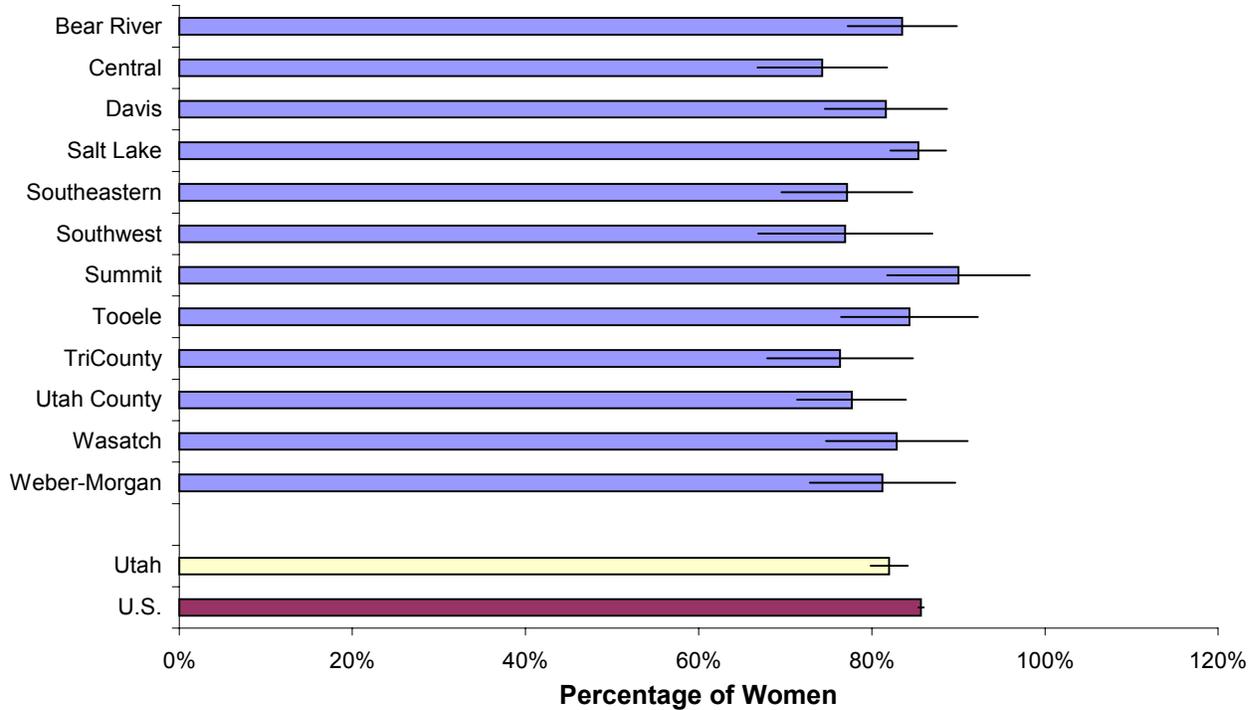


Age adjusted to the U.S. 2000 standard population. Percentage for a local health district was considered different from the state percentage if its 95% confidence interval did not include the state percentage. Note: Percentages include only women with a uterine cervix and do not include women who had a Pap smear for a current or previous problem. Source: Behavioral Risk Factor Surveillance System



Percentage of Women Who Reported Having a Pap Test in the Past Three Years*

by Local Health District, Utah, and U.S., Women Ages 18+, 1999-2000



* crude rates

Note: Percentages include only women with a uterine cervix and do not include women who had a Pap smear for a current or previous problem.

Source: Behavioral Risk Factor Surveillance System

District	Sample Size	Total Number of Women 18+	Crude Rates			Age-adjusted Rates**		
			Number of Women 18+ With Pap Test	Percent	95% CI Range	Percent	95% CI Range	
Bear River	183	46,990	39,200	83.5%	77.2% 89.8%	82.6%	76.7% 88.6%	
Central	187	21,680	16,100	74.3%	66.8% 81.8%	77.1%	71.7% 82.5%	
Davis	167	78,493	64,100	81.6%	74.6% 88.7%	80.5%	73.2% 87.7%	
Salt Lake	675	314,387	268,400	85.4%	82.2% 88.6%	84.2%	80.9% 87.5%	
Southeastern	146	18,723	14,400	77.1%	69.6% 84.7%	76.5%	69.9% 83.1%	
Southwest	153	50,081	38,500	76.9%	66.9% 87.0%	77.3%	68.8% 85.7%	
Summit	173	10,125	9,100	90.0%	81.8% 98.3%	89.6%	82.8% 96.4%	
Tooele	191	13,825	11,700	84.4%	76.4% 92.3%	84.0%	78.8% 89.3%	
TriCounty	135	13,300	10,200	76.3%	67.9% 84.8%	72.8%	64.6% 81.1%	
Utah County	252	126,077	97,900	77.7%	71.4% 84.0%	76.7%	71.3% 82.1%	
Wasatch	143	5,089	4,200	82.9%	74.7% 91.1%	84.1%	77.6% 90.6%	
Weber-Morgan	145	71,049	57,700	81.2%	72.8% 89.7%	79.9%	71.6% 88.2%	
Utah	2,550	769,819	631,300	82.0%	79.8% 84.2%	81.1%	78.9% 83.2%	
U.S.				85.7%	85.4% 86.0%	84.9%	84.6% 85.2%	

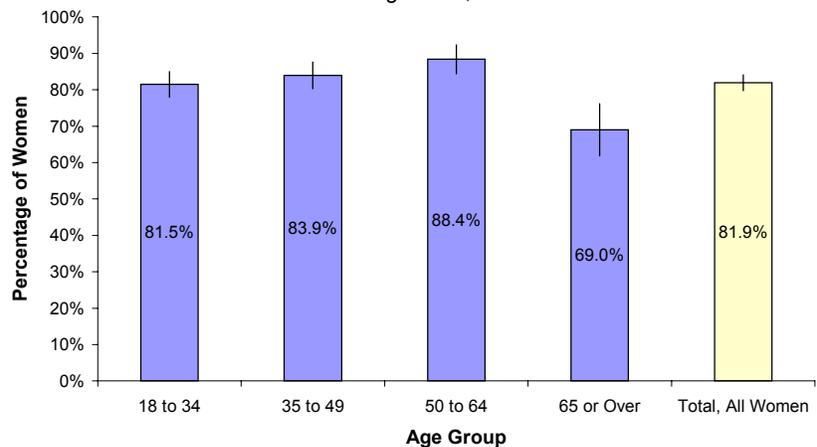
** Age adjusted to U.S. 2000 standard population

Pap Test



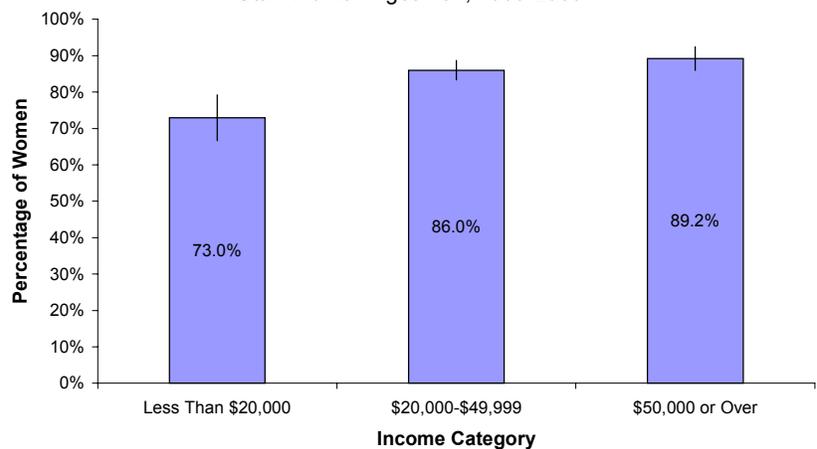
- Utah women ages 65 or over were less likely than younger women to report having a Pap smear in the past three years.

Percentage of Women Who Reported Having a Pap Smear* in the Past Three Years by Age, Utah Women Ages 18+, 1999-2000



- In Utah, women with annual household incomes less than \$20,000 were less likely than women in higher income groups to report having a Pap test in the past three years.

Percentage of Women Who Reported Having a Pap Smear* in the Past Three Years by Income, Utah Women Ages 18+, 1999-2000



* Includes only women with intact cervixes. Does not include women who had a Pap smear for a current or previous problem.

The Utah Cancer Control Program provides free Pap tests at program-sponsored cancer screening clinics to women who meet age and income guidelines.

Utah Objective: By 2010, increase the proportion of Utah women age 18 or over who received a Pap test within the preceding three years to 90% (age adjusted to the U.S. 2000 standard population).

HP2010 Objective 3-11b: Increase the proportion of women age 18 or over who received a Pap test within the preceding three years to 90% (age adjusted to the U.S. 2000 standard population).



Percentage of Women Who Reported Having a Pap Smear* in the Past Three Years by Selected Demographic Characteristics, Utah Women Ages 18+, 1999 - 2000.

Demographic Subgroup	Utah Population		Survey Estimates				
	Distribution	Number of Persons ¹	Percentage of Women Who Reported a Pap Smear in Past Three Years ²			Number of Persons ^{1,3}	Distribution of Women Who Reported a Pap Smear in Past Three Years by Category
			95% Confidence Intervals				
			Lower	Upper			
Had Pap Smear							
Within the Past Year	63.1%	485,700					
Within the Past 2 Years	15.0%	115,800					
Within the Past 3 Years	3.9%	29,800					
Within the Past 5 Years	3.8%	29,400					
5 or More Years Ago	6.5%	50,200					
Never	7.7%	59,000					
Total, All Women	100.0%	769,800					
Age Group							
18 to 34	41.6%	320,500	81.5%	77.9%	85.0%	261,100	41.6%
35 to 49	27.9%	214,800	83.9%	80.3%	87.6%	180,300	28.7%
50 to 64	16.5%	126,900	88.4%	84.4%	92.3%	112,100	17.9%
65 or Over	14.0%	107,600	69.0%	61.8%	76.1%	74,200	11.8%
Total, All Women	100.0%	769,800	81.9%	79.8%	84.1%	630,800	100.0%
Race/Ethnicity							
White, Non-Hispanic	90.3%	695,000	82.1%	79.8%	84.4%	570,900	90.5%
Hispanic	5.9%	45,400	78.3%	69.7%	87.0%	35,600	5.6%
Non-White, Non-Hispanic	3.8%	29,300	83.7%	74.2%	93.3%	24,500	3.9%
Total, All Women	100.0%	769,800	81.9%	79.8%	84.1%	630,800	100.0%
Income							
Less Than \$20,000	15.4%	118,200	73.0%	66.7%	79.3%	86,200	13.2%
\$20,000-\$49,999	50.8%	390,800	86.0%	83.3%	88.7%	336,000	51.3%
\$50,000 or Over	33.9%	260,900	89.2%	86.0%	92.4%	232,700	35.5%
Total, All Women	100.0%	769,800	81.9%	79.8%	84.1%	630,800	100.0%
Education							
Less Than High School	4.8%	36,600	71.1%	59.5%	82.7%	26,000	4.1%
H.S. Grad or G.E.D.	29.7%	228,700	80.4%	76.8%	84.1%	183,900	29.1%
Some Post High School	38.8%	299,000	78.8%	74.7%	82.9%	235,700	37.3%
College Graduate	26.7%	205,500	90.5%	87.9%	93.1%	186,000	29.4%
Total, All Women	100.0%	769,800	81.9%	79.8%	84.1%	630,800	100.0%

1 Rounded to the nearest 100 persons.

2 Plus or minus 95% confidence interval.

3 Figures in these columns may not sum to the total because some surveyed individuals had missing values on the grouping variables.

* Includes only women with intact cervixes. Does not include women who had a pap smear for a current or previous problem.

Population counts for age, sex, and total population were the 2000 estimates provided by the Governor's Office of Planning and Budget. Population count estimates for race/ethnicity, income, and education populations were derived from averaging three years of the BRFSS surveys from 1999-2001.

Prostate-specific Antigen Screening

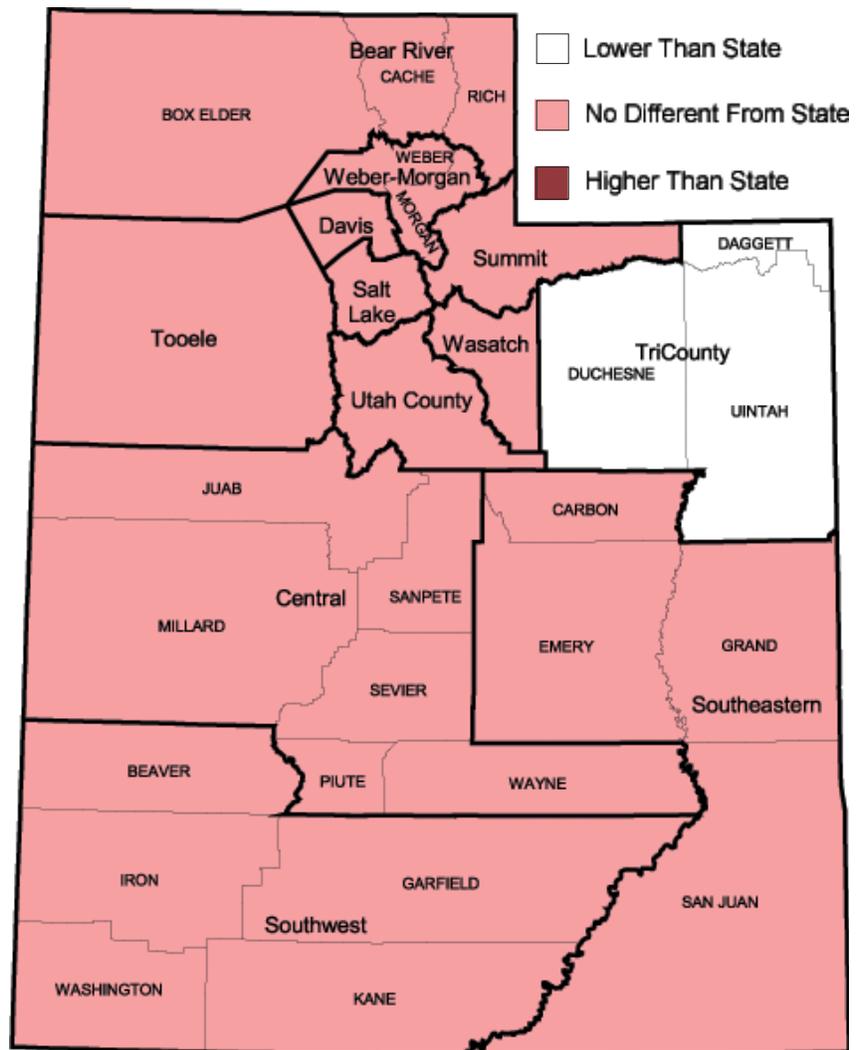


Question: A prostate-specific antigen test, also called a PSA test, is a blood test used to check men for prostate cancer. Have you ever had a PSA test?

Prostate cancer is the most common form of cancer (excluding skin cancer) among men and the second leading cause of cancer death for men in Utah and the U.S. The risk of developing prostate cancer increases with age. Other risk factors include a history of prostate cancer in a first-degree relative and Black race. Two tests are commonly used to screen for prostate cancer: the prostate-specific antigen, or PSA test, and the digital rectal exam. Although screening can detect early-stage prostate cancers, it is not yet known whether early detection results in reduced mortality from this disease. Clinical trials designed to answer this question are ongoing. Most major U.S. medical organizations recommend that physicians discuss with their patients the potential benefits and possible harms of PSA screening, consider patient preferences, and individualize the decision to screen.¹⁴

- The percentage of Utah men ages 40 or over in TriCounty Health District that reported having a PSA test was significantly below the state-wide percentage. The rate of PSA testing among men in the remaining health districts did not differ significantly from the state rate.
- Men living in Tooele County Health District reported the highest use of PSA testing, though not substantially different from the state rate.
- The percentage of Utah men who reported having a PSA test was below that of the U.S. (52.4% and 55.5% respectively, age-adjusted rates).

PSA Test Ever by Whether the Local Health District Percentage Differed From the State, Utah Men Ages 40+, 2000-2001

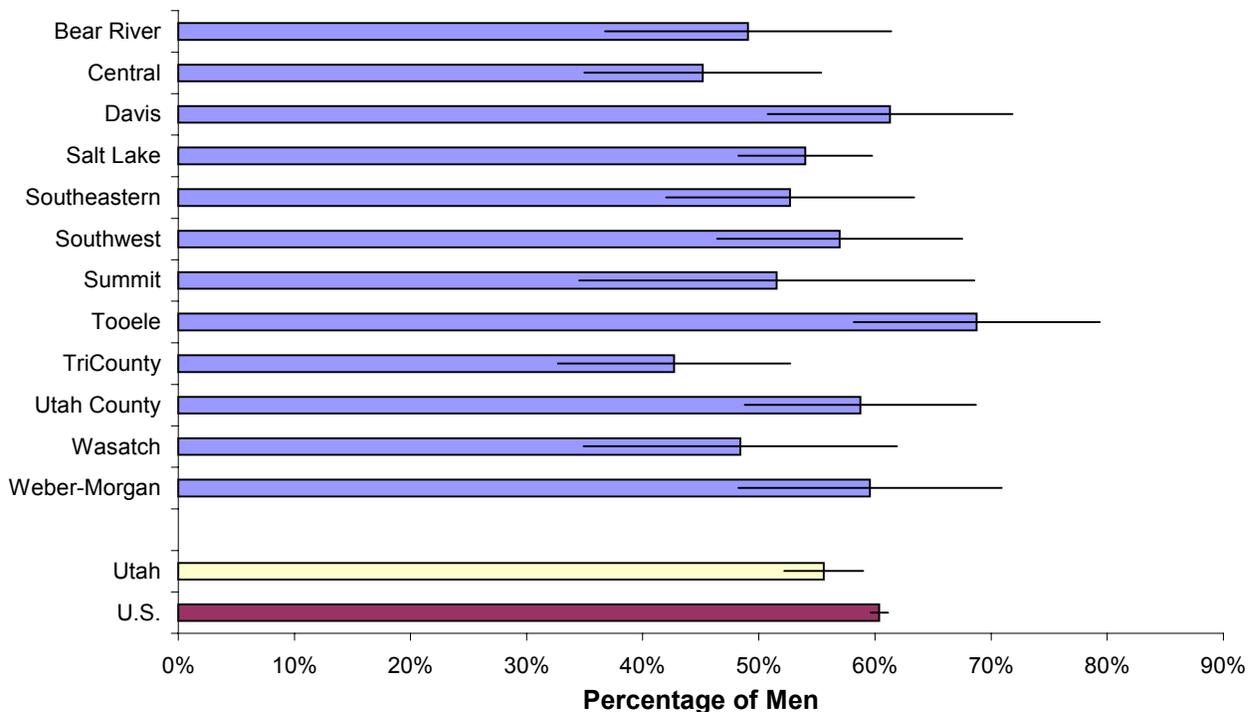


Age adjusted to the U.S. 2000 standard population. Percentage for a local health district was considered different from the state percentage if its 95% confidence interval did not include the state percentage. Source: Behavioral Risk Factor Surveillance System



Prostate-specific Antigen Screening

Percentage of Men Who Reported Ever Having Had a PSA Test*
by Local Health District, Utah, and U.S., Men Ages 40+, 2000-2001



* crude rates
Source: Behavioral Risk Factor Surveillance System

District	Sample Size	Total Number of Men 40+	Crude Rates			Age-adjusted Rates**		
			Number of Men 40+ With PSA Test	Percent	95% CI Range	Percent	95% CI Range	
Bear River	81	19,320	9,500	49.1%	36.7% 61.4%	46.1%	36.4% 55.8%	
Central	113	12,105	5,500	45.2%	35.0% 55.4%	42.8%	32.2% 53.4%	
Davis	106	36,773	22,500	61.3%	50.7% 71.9%	59.6%	51.1% 68.1%	
Salt Lake	364	144,176	77,800	54.0%	48.2% 59.8%	52.1%	47.4% 56.8%	
Southeastern	104	10,284	5,400	52.7%	42.0% 63.4%	45.5%	35.5% 55.5%	
Southwest	99	26,058	14,800	57.0%	46.4% 67.5%	47.5%	38.2% 56.9%	
Summit	120	5,958	3,100	51.5%	34.5% 68.6%	54.2%	43.8% 64.6%	
Tooele	87	6,253	4,300	68.8%	58.2% 79.4%	60.2%	51.7% 68.8%	
TriCounty	120	7,401	3,200	42.7%	32.7% 52.7%	39.4%	32.1% 46.6%	
Utah County	115	42,790	25,100	58.7%	48.8% 68.7%	55.7%	47.0% 64.4%	
Wasatch	97	2,634	1,300	48.4%	34.9% 61.9%	46.1%	37.0% 55.3%	
Weber-Morgan	97	35,027	20,900	59.6%	48.2% 70.9%	56.1%	45.3% 66.9%	
Utah	1,503	348,779	193,900	55.6%	52.2% 59.0%	52.4%	49.4% 55.4%	
U.S.				60.4%	59.6% 61.1%	55.5%	54.8% 56.2%	

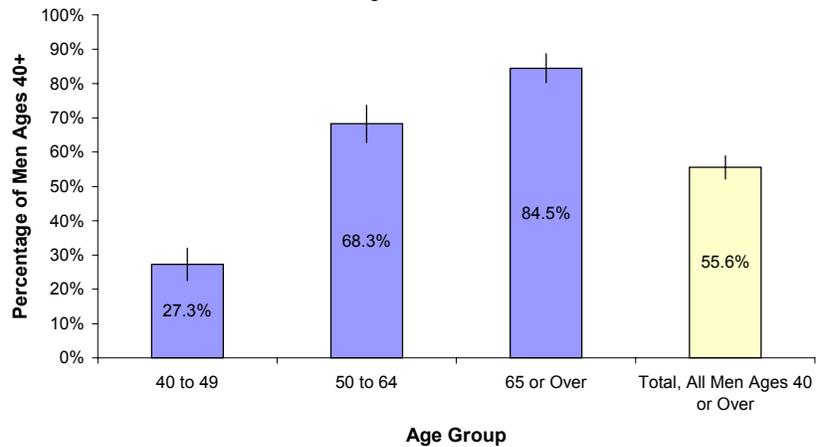
** Age adjusted to U.S. 2000 standard population
U.S. rate includes only year 2001.

Prostate-specific Antigen Screening



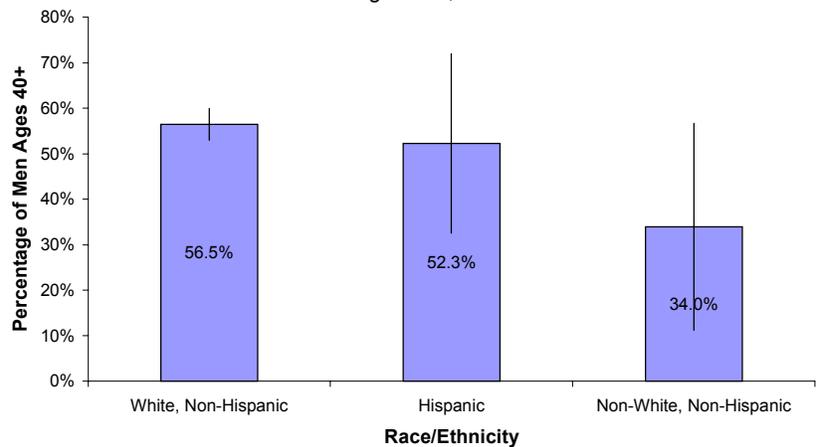
- The percentage of Utah men who underwent PSA testing increased with increasing age.

Percentage of Men Who Reported Ever Having Had a PSA Test by Age, Utah Men Ages 40+, 2000-2001



- Non-White, non-Hispanic Utah men were least likely to report ever having had a PSA test compared to White, non-Hispanic and Hispanic Utah men (34.0%, 56.5%, and 52.3%, respectively).

Percentage of Men Who Reported Ever Having Had a PSA Test by Race/Ethnicity, Utah Men Ages 40+, 2000-2001



The Utah Cancer Action Network supports “Man to Man,” the American Cancer Society’s support group for men with prostate cancer and their partners.

The Utah Department of Health is exploring ways to increase the number of men ages 40 or over who make regular visits to a health care provider to receive appropriate preventive services.

Utah Objective (related): By 2010, reduce the prostate cancer death rate to 25.0 per 100,000 males (age adjusted to the U.S. 2000 standard population).

HP2010 Objective 3-7 (related): Reduce the prostate cancer death rate to 28.8 deaths per 100,000 males (age adjusted to the U.S. 2000 standard population).



Prostate-specific Antigen Screening

Percentage of Men Ages 40+ Who Reported Ever Having Had a PSA Test by Selected Demographic Characteristics, Utah Men Ages 40+, 2000 - 2001.

Demographic Subgroup	Utah Population		Survey Estimates				
	Distribution	Number of Persons ¹	Percentage of Men Ages 40+ Who Reported Ever Having Had a PSA Test ²			Number of Persons ^{1,3}	Distribution of Men Ages 40+ Who Reported Ever Having Had a PSA Test by Category
			95% Confidence Intervals				
			Lower	Upper			
Had PSA Test							
Yes	55.6%	193,900					
No	44.4%	154,900					
Total, All Men Ages 40+	100.0%	348,800					
Age Group							
40 to 49	40.7%	141,900	27.3%	22.6%	32.0%	38,800	31.6%
50 to 64	35.3%	123,100	68.3%	62.8%	73.7%	84,000	54.3%
65 or Over	24.0%	83,700	84.5%	80.2%	88.7%	70,700	45.7%
Total, All Men Ages 40+	100.0%	348,800	55.6%	52.2%	59.0%	193,900	100.0%
Race/Ethnicity							
White, Non-Hispanic	91.2%	318,100	56.5%	53.0%	59.9%	179,600	92.7%
Hispanic	5.9%	20,500	52.3%	32.5%	72.0%	10,700	5.5%
Non-White, Non-Hispanic	2.9%	10,200	34.0%	11.2%	56.7%	3,500	1.8%
Total, All Men Ages 40+	100.0%	348,800	55.6%	52.2%	59.0%	193,900	100.0%
Income							
Less Than \$20,000	21.2%	74,000	55.4%	44.3%	66.5%	41,000	21.4%
\$20,000-\$49,999	50.6%	176,500	54.0%	48.6%	59.3%	95,300	49.8%
\$50,000 or Over	28.2%	98,400	56.0%	50.8%	61.1%	55,100	28.8%
Total, All Men Ages 40+	100.0%	348,800	55.6%	52.2%	59.0%	193,900	100.0%
Education							
Less Than High School	7.0%	24,300	62.4%	48.4%	76.5%	15,200	8.0%
H.S. Grad or G.E.D.	32.5%	113,400	50.0%	43.2%	56.8%	56,700	29.9%
Some Post High School	37.0%	129,100	52.8%	46.6%	59.0%	68,100	35.9%
College Graduate	23.5%	82,000	60.4%	55.1%	65.7%	49,500	26.1%
Total, All Men Ages 40+	100.0%	348,800	55.6%	52.2%	59.0%	193,900	100.0%

1 Rounded to the nearest 100 persons.

2 Plus or minus 95% confidence interval.

3 Figures in these columns may not sum to the total because some surveyed individuals had missing values on the grouping variables.

Population counts for age, sex, and total population were the 2000 estimates provided by the Governor's Office of Planning and Budget. Population count estimates for race/ethnicity, income, and education populations were derived from averaging three years of the BRFSS surveys from 1999-2001.

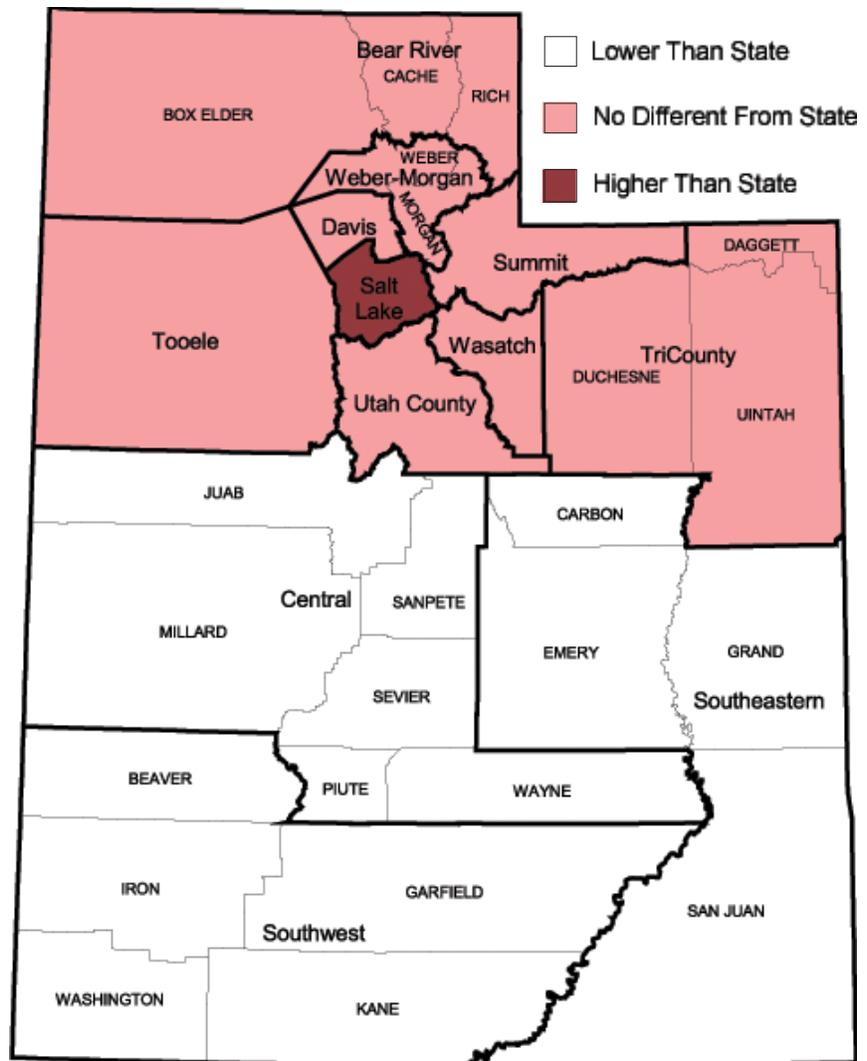
Sigmoidoscopy or Colonoscopy



Question: Sigmoidoscopy and colonoscopy are exams in which a tube is inserted in the rectum to view the bowel for signs of cancer or other health problems. Have you ever had either of these exams?

Colorectal cancer is the second leading cause of cancer-related deaths in Utah and the U.S. Risk factors include increasing age, inflammatory bowel disease, a personal and/or family history of polyps or colorectal cancer, and certain hereditary syndromes. Physical inactivity (colon cancer only), a low fiber/high fat diet, obesity, excessive alcohol consumption, and tobacco use may also increase risk. Deaths from colorectal cancer can be substantially reduced when precancerous polyps are detected early and removed. Several scientific organizations recommend that routine screening for colorectal cancer begin at age 50 for all adults at average risk.¹⁵ Routine screening can include either annual fecal occult blood test (FOBT), and/or flexible sigmoidoscopy every five years or colonoscopy every ten years or double contrast barium enema every five to ten years. A randomized clinical trial has demonstrated that annual screening with FOBT can reduce colorectal cancer deaths by 33 percent in individuals over age 50.¹⁶

Sigmoidoscopy/Colonoscopy Ever by Whether the Local Health District Percentage Differed From the State, Utah Adults Ages 50+, 1999-2001



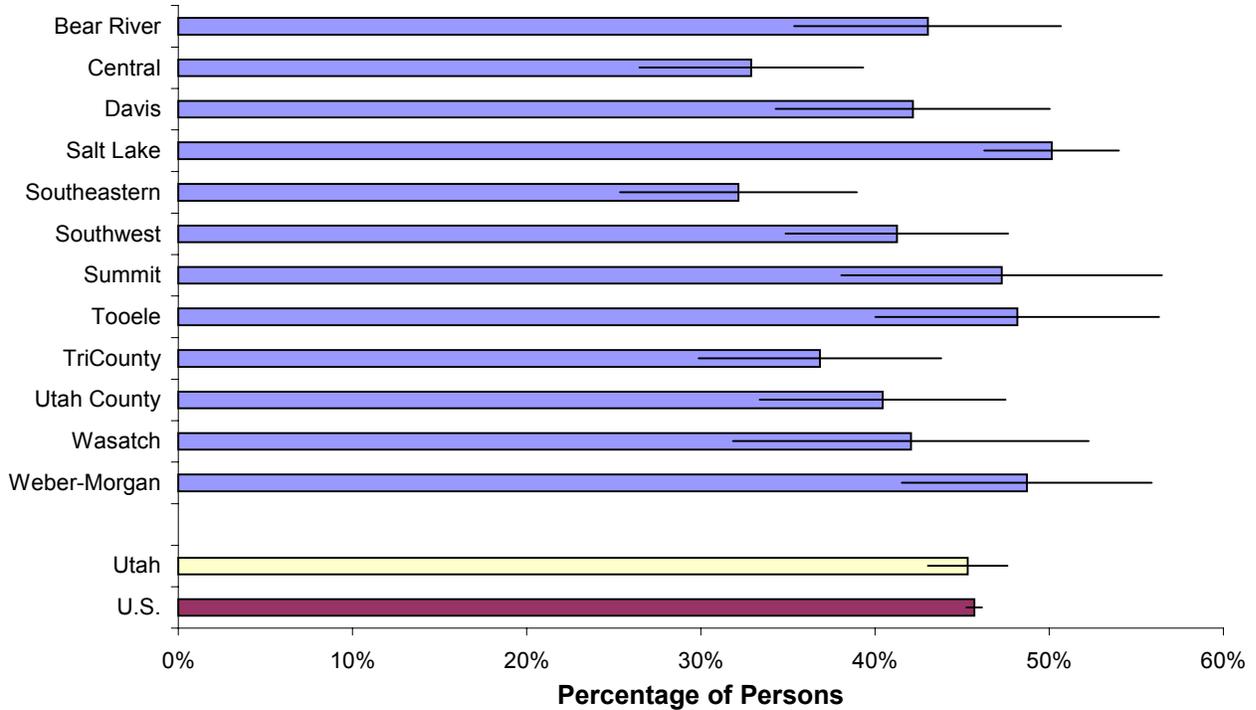
Age adjusted to the U.S. 2000 standard population. Percentage for a local health district was considered different from the state percentage if its 95% confidence interval did not include the state percentage. Source: Behavioral Risk Factor Surveillance System

- The percentage of adults 50 years or older who reported ever having a sigmoidoscopy/colonoscopy was below the statewide percentage in Southwest Utah, Southeastern Utah, and Central Utah Health Districts and above this percentage in Salt Lake Valley Health District.
- The percentage of Utah adults ages 50 or older who reported ever having a sigmoidoscopy/colonoscopy during the time period 1999 through 2001 was slightly below that of the U.S. (41.6% and 42.5% respectively, age-adjusted rates).



Sigmoidoscopy or Colonoscopy

Percentage of Persons Who Reported Ever Having Had a Sigmoidoscopy or Colonoscopy*
by Local Health District, Utah, and U.S., Adults Ages 50+, 1999-2001



* crude rates
Source: Behavioral Risk Factor Surveillance System

District	Sample Size	Total Number of Adults 50+	Crude Rates			Age-adjusted Rates**		
			Number With Sigmoidoscopy/Colonoscopy	Percent	95% CI Range	Percent	95% CI Range	
Bear River	201	24,571	10,600	43.0%	35.4% 50.7%	38.4%	30.9% 45.9%	
Central	263	16,444	5,400	32.9%	26.5% 39.3%	28.7%	22.7% 34.8%	
Davis	185	44,130	18,600	42.2%	34.3% 50.0%	38.9%	31.5% 46.4%	
Salt Lake	850	177,535	89,000	50.1%	46.3% 54.0%	46.3%	42.6% 50.0%	
Southeastern	226	13,428	4,300	32.2%	25.4% 39.0%	32.1%	25.0% 39.2%	
Southwest	270	38,808	16,000	41.3%	34.9% 47.7%	34.2%	28.0% 40.5%	
Summit	196	5,688	2,700	47.3%	38.1% 56.5%	45.9%	36.6% 55.3%	
Tooele	236	7,582	3,700	48.2%	40.0% 56.3%	42.8%	35.4% 50.2%	
TriCounty	237	9,370	3,500	36.8%	29.9% 43.8%	35.0%	28.2% 41.7%	
Utah County	233	54,780	22,200	40.4%	33.4% 47.5%	36.3%	29.8% 42.8%	
Wasatch	203	3,160	1,300	42.1%	31.9% 52.3%	36.5%	28.1% 44.8%	
Weber-Morgan	250	45,822	22,300	48.7%	41.5% 55.9%	45.3%	37.8% 52.9%	
Utah	3,350	441,318	200,000	45.3%	43.0% 47.6%	41.6%	39.4% 43.9%	
U.S.				45.7%	45.3% 46.1%	42.5%	42.1% 43.0%	

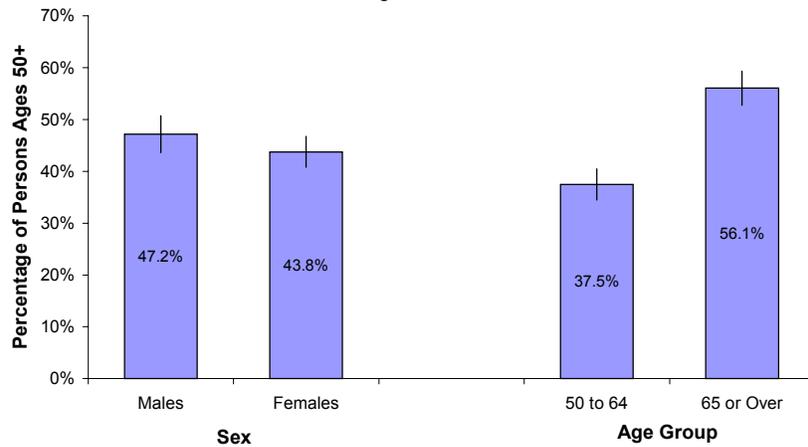
** Age adjusted to U.S. 2000 standard population
U.S. rate includes only years 1999 and 2001.

Sigmoidoscopy or Colonoscopy



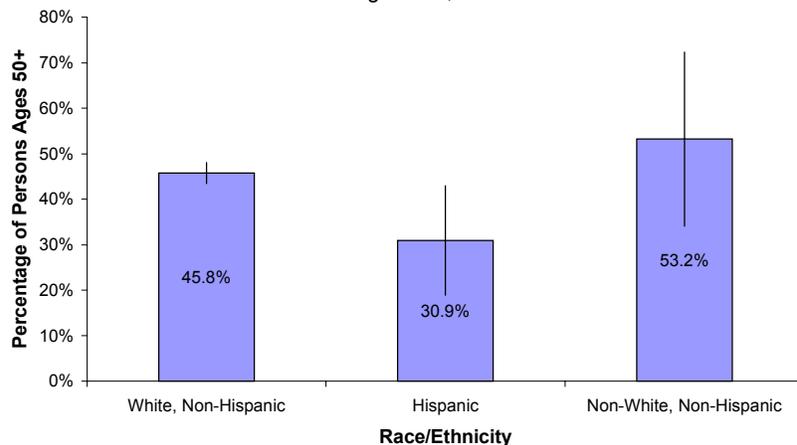
- More Utah men than women reported ever having a sigmoidoscopy/colonoscopy (47.2% compared to 43.8% respectively).
- Adults ages 65 or over were more likely to have reported ever having a sigmoidoscopy/colonoscopy (56.1%) than adults ages 50 to 64 (37.5%).

Percentage of Persons Who Reported Ever Having a Sigmoidoscopy or Colonoscopy by Sex and Age, Utah Adults Ages 50+, 1999-2001



- Utah adults who were Hispanic were least likely to report ever having had a sigmoidoscopy or colonoscopy compared to White, non-Hispanic and non-White, non-Hispanic persons (30.9%, 45.8%, and 53.2%, respectively).

Percentage of Persons Who Reported Ever Having a Sigmoidoscopy or Colonoscopy by Race/Ethnicity, Utah Adults Ages 50+, 1999-2001



The Utah Cancer Action Network is a statewide partnership that is working to decrease mortality from colorectal cancer in Utah. Strategies include conduction of a media campaign to educate the public about colorectal cancer and methods of early detection.

Utah Objective: By 2010, increase the proportion of Utah adults aged 50 years or over who have ever received a sigmoidoscopy or colonoscopy to 50% (age adjusted to the U.S. 2000 standard population).

HP2010 Objective 3-12b: Increase the proportion of adults aged 50 years or over who have ever received a sigmoidoscopy to 50% (age adjusted to the U.S. 2000 standard population).



Sigmoidoscopy or Colonoscopy

Percentage of Persons Ages 50+ Who Reported Ever Having a Sigmoidoscopy or Colonoscopy by Selected Demographic Characteristics, Utah Adults Ages 50+, 1999 - 2001.

Demographic Subgroup	Utah Population		Survey Estimates				
	Distribution	Number of Persons ¹	Percentage of Persons Ages 50+ Who Ever Had a Sigmoidoscopy or Colonoscopy ²			Number of Persons ^{1,3}	Distribution of Persons Ages 50+ Who Ever Had a Sigmoidoscopy or Colonoscopy by Category
			Intervals	Lower	Upper		
Had Sigmoidoscopy or Colonoscopy							
Within the Past Year	14.1%	62,100					
Within the Past 2 Years	8.4%	37,100					
Within the Past 5 Years	9.7%	42,900					
5 or More Years Ago	13.2%	58,000					
Never	54.7%	241,300					
Total, Ages 50+	100.0%	441,300					
Sex							
Males	46.9%	206,800	47.2%	43.6%	50.7%	97,500	48.7%
Females	53.1%	234,500	43.8%	40.8%	46.7%	102,600	51.3%
Total, Ages 50+	100.0%	441,300	45.3%	43.0%	47.6%	200,000	100.0%
Age Group							
50 to 64	56.7%	250,000	37.5%	34.5%	40.5%	93,800	46.7%
65 or Over	43.3%	191,300	56.1%	52.8%	59.3%	107,200	53.3%
Total, Ages 50+	100.0%	441,300	45.3%	43.0%	47.6%	200,000	100.0%
Race/Ethnicity							
White, Non-Hispanic	93.0%	410,500	45.8%	43.4%	48.1%	187,800	94.3%
Hispanic	5.0%	22,100	30.9%	18.9%	43.0%	6,800	3.4%
Non-White, Non-Hispanic	2.0%	8,700	53.2%	34.1%	72.3%	4,600	2.3%
Total, Ages 50+	100.0%	441,300	45.3%	43.0%	47.6%	200,000	100.0%
Income							
Less Than \$20,000	15.8%	69,900	44.8%	39.6%	50.0%	31,300	16.2%
\$20,000-\$49,999	47.4%	209,200	44.5%	41.0%	48.1%	93,200	48.3%
\$50,000 or Over	36.8%	162,200	42.1%	37.9%	46.4%	68,300	35.4%
Total, Ages 50+	100.0%	441,300	45.3%	43.0%	47.6%	200,000	100.0%
Education							
Less Than High School	6.4%	28,300	47.1%	38.1%	56.2%	13,300	6.7%
H.S. Grad or G.E.D.	29.3%	129,300	43.0%	39.1%	47.0%	55,600	27.8%
Some Post High School	33.4%	147,300	44.2%	40.3%	48.2%	65,200	32.6%
College Graduate	30.9%	136,300	48.3%	44.1%	52.6%	65,800	32.9%
Total, Ages 50+	100.0%	441,300	45.3%	43.0%	47.6%	200,000	100.0%

1 Rounded to the nearest 100 persons.

2 Plus or minus 95% confidence interval.

3 Figures in these columns may not sum to the total because some surveyed individuals had missing values on the grouping variables.

Population counts for age, sex, and total population were the 2000 estimates provided by the Governor's Office of Planning and Budget. Population count estimates for race/ethnicity, income, and education populations were derived from averaging three years of the BRFSS surveys from 1999-2001.

Cholesterol Screening

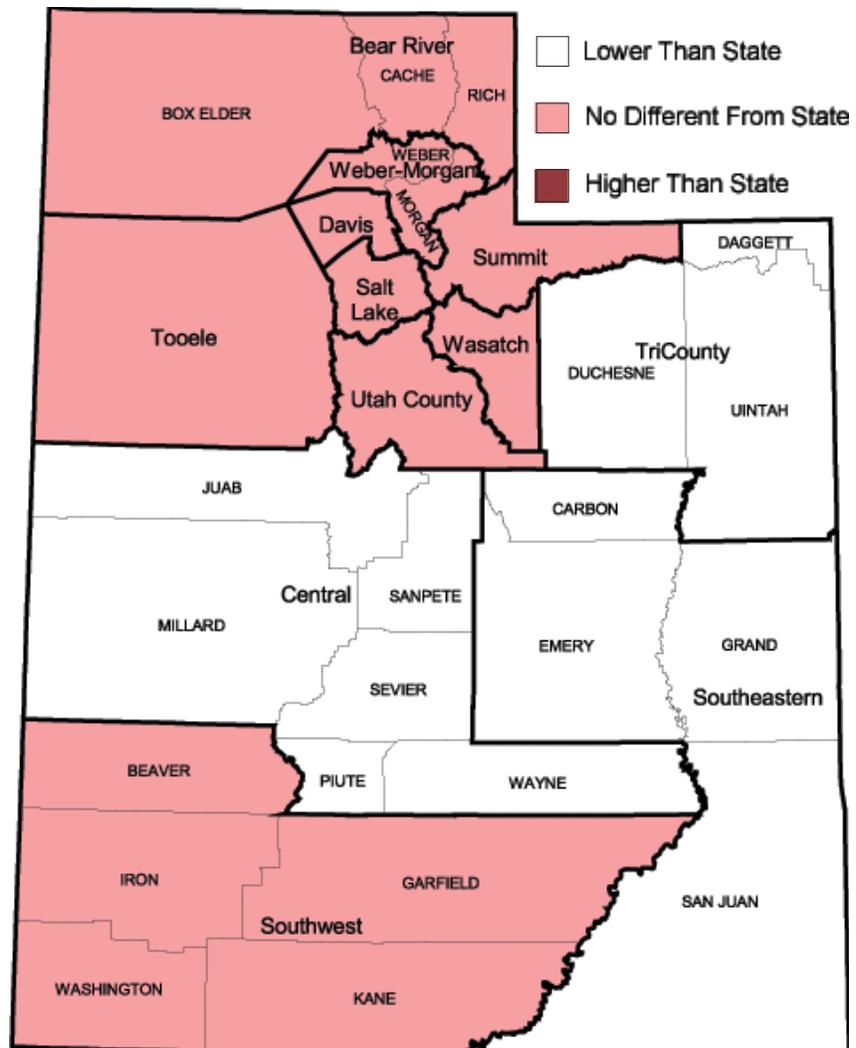


Questions: *Blood cholesterol is a fatty substance found in the blood. Have you ever had your blood cholesterol checked? About how long has it been since you last had your blood cholesterol checked?*

High blood cholesterol is a major risk factor for coronary heart disease. The National Heart, Lung, and Blood Institute recommends that adults 20 years or older be screened for high blood cholesterol at least every five years. Obesity and diets high in saturated fat or cholesterol contribute to high levels of blood cholesterol. Behaviors that prevent or lower high blood cholesterol include eating a diet low in saturated fat and cholesterol, increasing physical activity, not smoking or drinking excessive alcohol, and maintaining a healthy weight.

- The percentage of Utah adults living in Central Utah, Southeastern Utah, and TriCounty Health Districts who reported having their blood cholesterol checked in the past five years was lower than the statewide percentage.
- The percentage of Utah adults who reported having had their blood cholesterol level checked in the past five years was below that of the U.S. (67.7% and 71.6% respectively, age-adjusted rates).

Cholesterol Test in Past Five Years by Whether the Local Health District Percentage Differed From the State, Utah Adults Ages 18+, 1999 and 2001

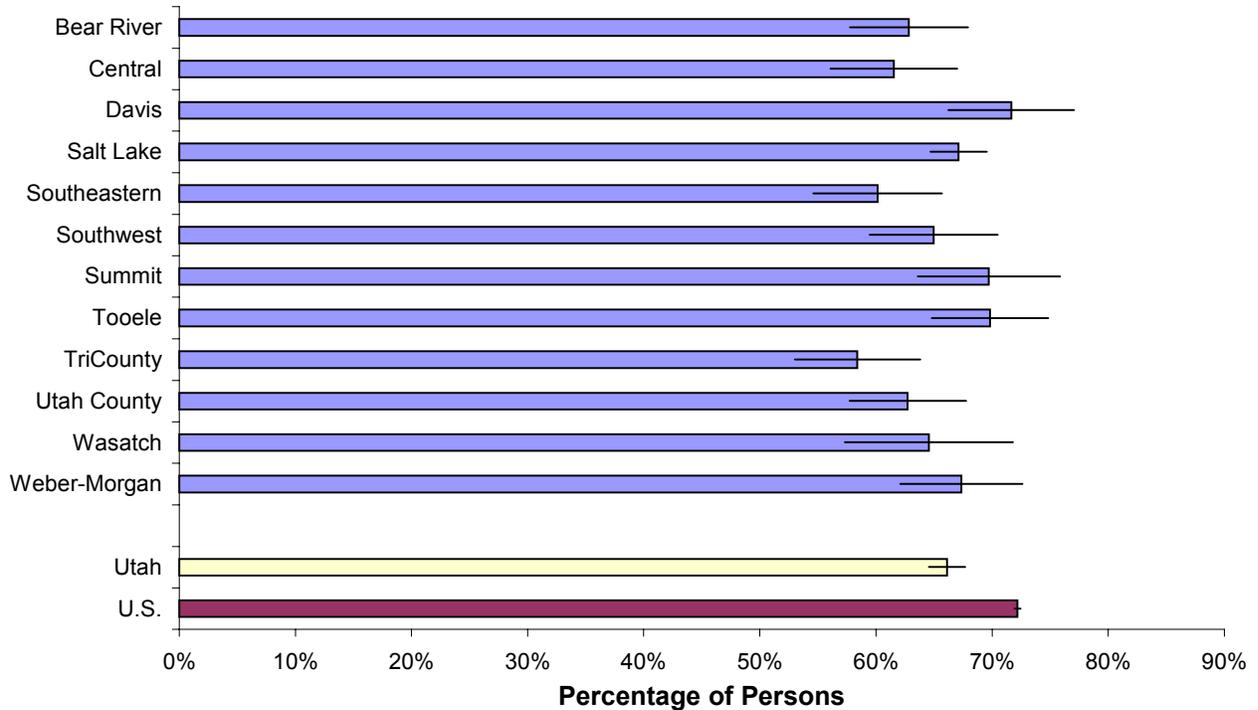


Age adjusted to the U.S. 2000 standard population. Percentage for a local health district was considered different from the state percentage if its 95% confidence interval did not include the state percentage. Source: Behavioral Risk Factor Surveillance System



Cholesterol Screening

Percentage of Persons Who Reported Having Their Cholesterol Checked in the Past Five Years*
by Local Health District, Utah, and U.S., Adults Ages 18+, 1999 and 2001



* crude rates
Source: Behavioral Risk Factor Surveillance System

District	Sample Size	Total Number of Adults	Crude Rates			Age-adjusted Rates**		
			Number With Cholesterol Test	Percent	95% CI Range	Percent	95% CI Range	
Bear River	426	91,817	57,700	62.8%	57.8% 67.9%	64.7%	59.9% 69.5%	
Central	407	43,286	26,600	61.5%	56.1% 67.0%	61.3%	56.1% 66.5%	
Davis	378	155,816	111,600	71.6%	66.2% 77.1%	72.0%	67.2% 76.8%	
Salt Lake	1,818	627,857	421,400	67.1%	64.7% 69.6%	68.0%	65.8% 70.3%	
Southeastern	409	36,451	21,900	60.1%	54.6% 65.7%	60.1%	55.0% 65.3%	
Southwest	444	97,595	63,400	65.0%	59.4% 70.5%	65.1%	60.4% 69.8%	
Summit	377	21,092	14,700	69.7%	63.6% 75.9%	70.1%	64.5% 75.7%	
Tooele	519	27,012	18,900	69.8%	64.8% 74.8%	68.6%	64.1% 73.1%	
TriCounty	396	26,359	15,400	58.4%	53.0% 63.8%	58.4%	53.2% 63.7%	
Utah County	596	245,264	153,900	62.7%	57.7% 67.8%	68.3%	64.4% 72.1%	
Wasatch	405	10,154	6,600	64.6%	57.3% 71.8%	65.1%	59.0% 71.2%	
Weber-Morgan	443	140,822	94,800	67.4%	62.1% 72.6%	67.4%	62.6% 72.2%	
Utah	6,618	1,523,525	1,007,200	66.1%	64.5% 67.7%	67.7%	66.3% 69.1%	
U.S.				72.2%	71.9% 72.4%	71.6%	71.3% 71.9%	

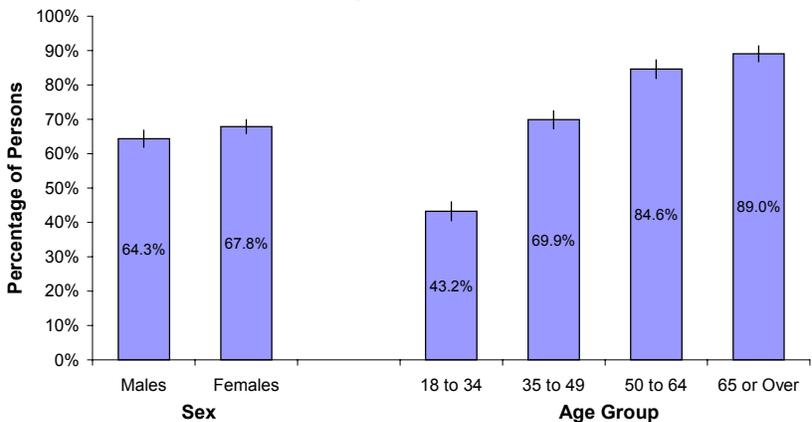
** Age adjusted to U.S. 2000 standard population

Cholesterol Screening



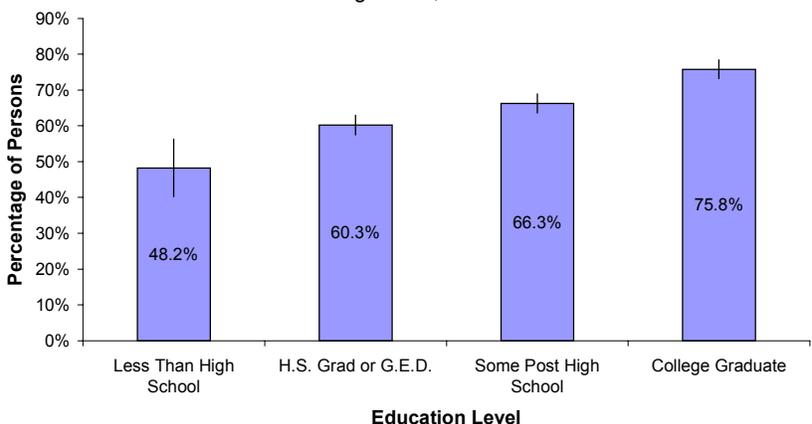
- A higher percentage of women than men reported having had their cholesterol checked in the past five years (67.8% compared to 64.3% respectively). However, this difference was not statistically significant.
- The likelihood of a cholesterol check in the past five years increased with age.

Percentage of Persons Who Reported Having Their Cholesterol Checked in the Past Five Years by Sex and Age, Utah Adults Ages 18+, 1999 and 2001



- As annual household income (not graphed) and years of education increased, the percentage of Utah adults who reported having had their blood cholesterol checked in the past five years also increased.

Percentage of Persons Who Reported Having Their Cholesterol Checked in the Past Five Years by Education, Utah Adults Ages 18+, 1999 and 2001



Utah Objective: By 2010, increase the proportion of adults who have had their cholesterol measured within the preceding five years to at least 80% (age adjusted to the U.S. 2000 standard population).

HP2010 Objective 12-15: Increase the proportion of adults who have had their blood cholesterol checked within the preceding five years to 80% (age adjusted to the U.S. 2000 standard population).



Cholesterol Screening

Percentage of Persons Who Reported Having Their Cholesterol Checked in the Past Five Years by Selected Demographic Characteristics, Utah Adults Ages 18+, 1999 and 2001.

Demographic Subgroup	Utah Population		Survey Estimates				Distribution of Persons Who Reported Cholesterol Checked in Past Five Years by Category
	Distribution	Number of Persons ¹	Percentage of Persons Who Reported Cholesterol Checked in Past Five Years ²			Number of Persons ^{1,3}	
			95% Confidence Intervals Lower		Upper		
Had Cholesterol Checked							
Within the Past Year	43.8%	667,800					
Within the Past 2 Years	13.1%	200,000					
Within the Past 5 Years	9.2%	139,400					
5 or More Years Ago	5.9%	90,200					
Never	28.0%	426,100					
Total, All Adults	100.0%	1,523,500					
Sex							
Males	49.5%	753,700	64.3%	61.9%	66.8%	484,900	48.1%
Females	50.5%	769,800	67.8%	65.8%	69.9%	522,200	51.9%
Total, All Adults	100.0%	1,523,500	66.1%	64.5%	67.7%	1,007,200	100.0%
Age Group							
18 to 34	42.6%	648,500	43.2%	40.5%	46.0%	280,300	29.0%
35 to 49	28.5%	433,700	69.9%	67.2%	72.5%	303,000	31.4%
50 to 64	16.4%	250,000	84.6%	81.9%	87.3%	211,400	21.9%
65 or Over	12.6%	191,300	89.0%	86.7%	91.3%	170,300	17.6%
Total, All Adults	100.0%	1,523,500	66.1%	64.5%	67.7%	1,007,200	100.0%
Race/Ethnicity							
White, Non-Hispanic	88.4%	1,346,000	67.1%	65.5%	68.8%	903,600	90.0%
Hispanic	8.3%	126,000	56.2%	49.5%	62.9%	70,900	7.1%
Non-White, Non-Hispanic	3.4%	51,500	57.1%	48.3%	66.0%	29,400	2.9%
Total, All Adults	100.0%	1,523,500	66.1%	64.5%	67.7%	1,007,200	100.0%
Income							
Less Than \$20,000	13.6%	207,700	54.3%	49.2%	59.4%	112,700	11.1%
\$20,000-\$49,999	47.8%	727,500	64.3%	62.0%	66.6%	467,900	46.0%
\$50,000 or Over	38.6%	588,400	74.1%	71.6%	76.5%	435,800	42.9%
Total, All Adults	100.0%	1,523,500	66.1%	64.5%	67.7%	1,007,200	100.0%
Education							
Less Than High School	6.0%	91,700	48.2%	40.2%	56.3%	44,200	4.4%
H.S. Grad or G.E.D.	30.1%	458,100	60.3%	57.5%	63.0%	276,000	27.4%
Some Post High School	35.1%	534,100	66.3%	63.6%	68.9%	353,900	35.1%
College Graduate	28.9%	439,500	75.8%	73.2%	78.4%	333,100	33.1%
Total, All Adults	100.0%	1,523,500	66.1%	64.5%	67.7%	1,007,200	100.0%

1 Rounded to the nearest 100 persons.

2 Plus or minus 95% confidence interval.

3 Figures in these columns may not sum to the total because some surveyed individuals had missing values on the grouping variables.

Population counts for age, sex, and total population were the 2000 estimates provided by the Governor's Office of Planning and Budget. Population count estimates for race/ethnicity, income, and education populations were derived from averaging three years of the BRFSS surveys from 1999-2001.

Sunscreen Use

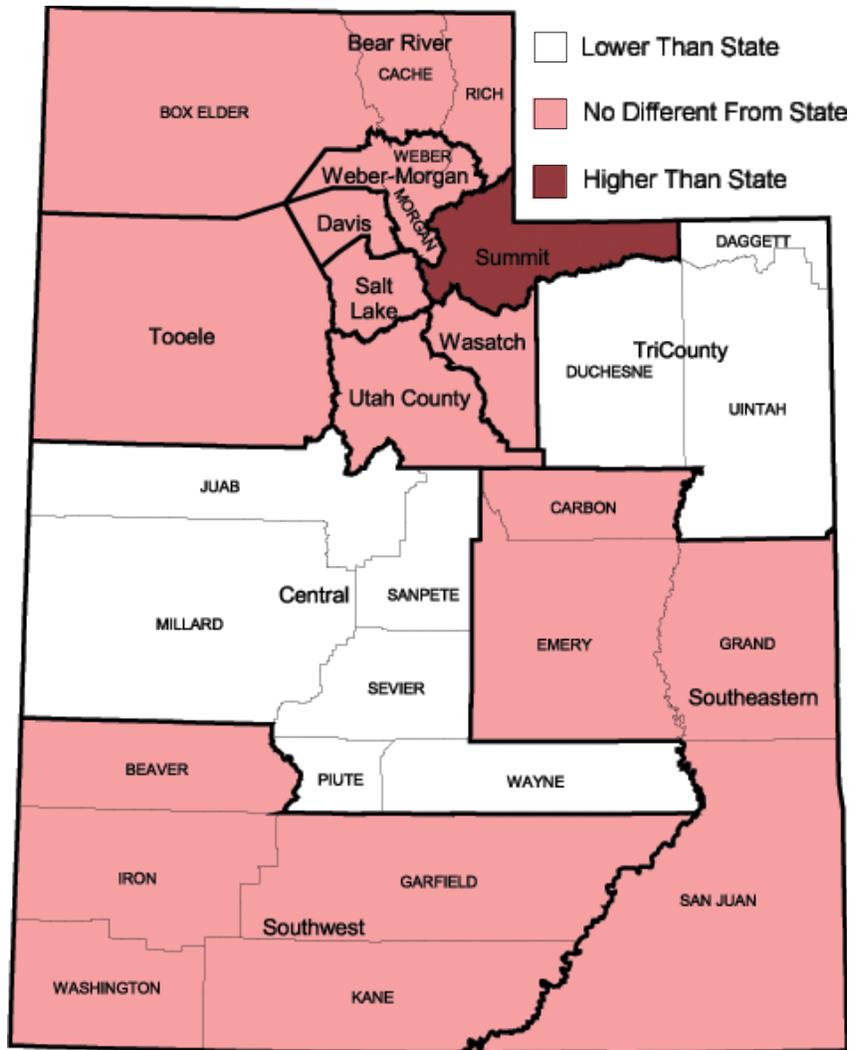


Questions: *When you go outside on a sunny summer day for more than one hour, how often do you use sunscreen or sunblock? Would you say: always, nearly always, sometimes, seldom, or never? What is the sun protection factor or SPF of the sunscreen you use most often?*

Skin cancer is the most common form of cancer in the U.S. There are three major types of skin cancer: basal cell carcinoma, squamous cell carcinoma, and melanoma. Although basal and squamous cell carcinomas can be cured if detected and treated early, these cancers can cause damage and disfigurement. Melanoma is the deadliest form of skin cancer and causes more than 75 percent of all skin cancer deaths. The most important environmental factor in the development of skin cancer seems to be exposure to the sun's ultraviolet rays. Skin cancer can be prevented when sun-protective behaviors are practiced consistently. Sun-protective behaviors include avoiding the sun between 10 a.m. and 4 p.m., wearing sun-protective clothing when exposed to sunlight, using sunscreen with a sun protective factor of 15 or higher, and avoiding artificial sources of ultraviolet light.

- The percentage of Utah adults in Central Utah and TriCounty Health Districts who reported frequently using sunscreen with an SPF of 15 or higher was significantly below the statewide percentage while the percentage in Summit County Health District was significantly above the statewide percentage.
- Utah adults living in Central Utah Health District reported the lowest use of sunscreen with an SPF of 15 or higher.

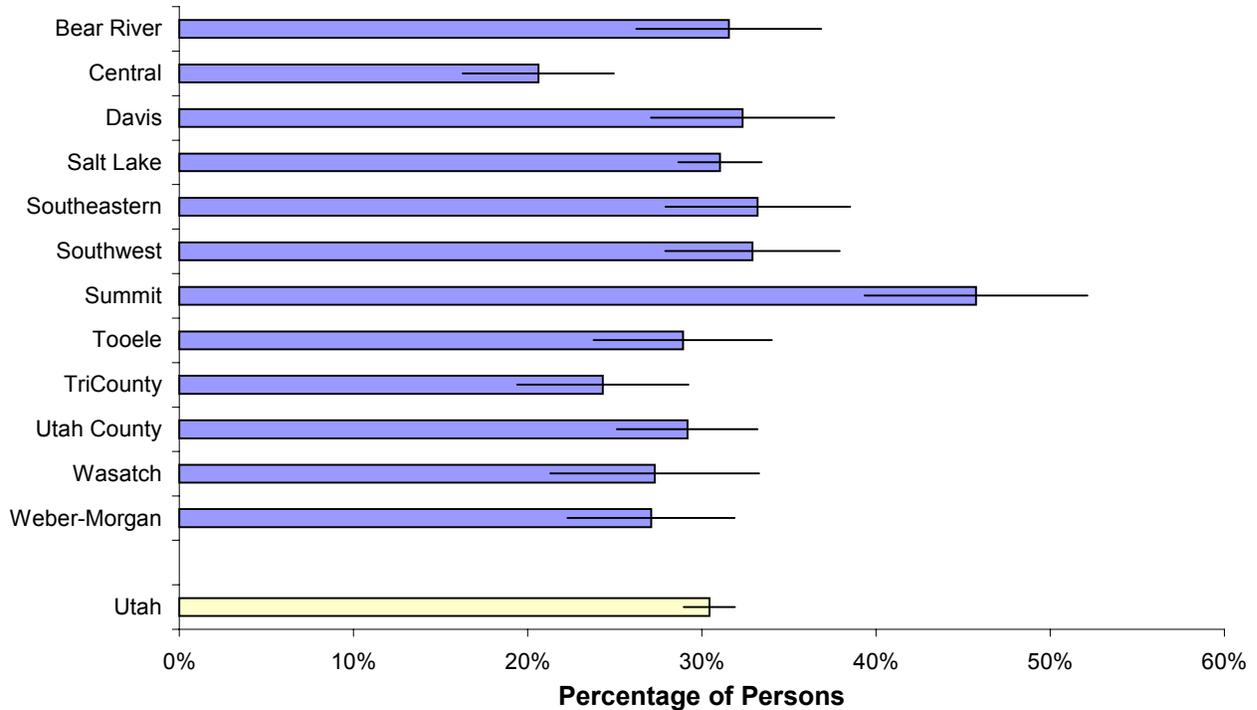
Frequent Sunscreen SPF 15+ by Whether the Local Health District Percentage Differed From the State, Utah Adults Ages 18+, 2000-2001



Age adjusted to the U.S. 2000 standard population. Percentage for a local health district was considered different from the state percentage if its 95% confidence interval did not include the state percentage. Source: Behavioral Risk Factor Surveillance System



Percentage of Persons Who Reported Always or Nearly Always Using Sunscreen With SPF 15+* by Local Health District, Utah Adults Ages 18+, 2000-2001



* crude rates
Source: Behavioral Risk Factor Surveillance System

District	Sample Size	Total Number of Adults	Crude Rates			Age-adjusted Rates**		
			Number Using Adequate Sunscreen	Percent	95% CI Range	Percent	95% CI Range	
Bear River	397	91,817	29,000	31.6%	26.2% 36.9%	31.5%	26.3% 36.7%	
Central	408	43,286	8,900	20.6%	16.3% 25.0%	20.5%	16.3% 24.8%	
Davis	401	155,816	50,400	32.3%	27.1% 37.6%	32.2%	26.9% 37.6%	
Salt Lake	1,771	627,857	194,900	31.0%	28.7% 33.4%	30.7%	28.3% 33.1%	
Southeastern	372	36,451	12,100	33.2%	27.9% 38.5%	33.0%	27.8% 38.1%	
Southwest	406	97,595	32,100	32.9%	27.9% 37.9%	34.1%	29.0% 39.1%	
Summit	425	21,092	9,600	45.8%	39.4% 52.1%	45.4%	39.4% 51.4%	
Tooele	397	27,012	7,800	28.9%	23.8% 34.0%	29.0%	24.3% 33.8%	
TriCounty	406	26,359	6,400	24.3%	19.4% 29.2%	24.0%	19.2% 28.7%	
Utah County	595	245,264	71,500	29.2%	25.1% 33.2%	30.5%	26.2% 34.7%	
Wasatch	351	10,154	2,800	27.3%	21.3% 33.3%	27.2%	21.7% 32.7%	
Weber-Morgan	386	140,822	38,100	27.1%	22.3% 31.9%	26.8%	22.1% 31.5%	
Utah	6,315	1,523,525	463,600	30.4%	29.0% 31.9%	30.4%	28.9% 31.9%	

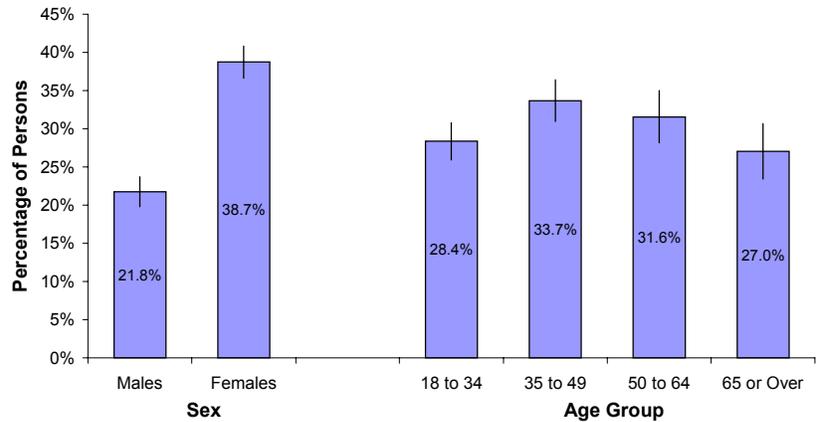
** Age adjusted to U.S. 2000 standard population

Sunscreen Use



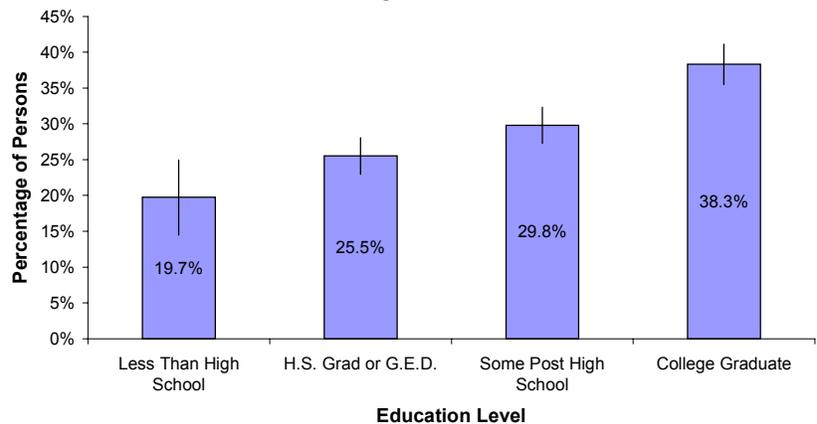
- In Utah, more women than men reported regularly using sunscreen with an SPF of 15 or higher (38.7% and 21.8% respectively).

Percentage of Persons Who Reported Always or Nearly Always Using Sunscreen With an SPF of 15+ by Sex and Age, Utah Adults Ages 18+, 2000-2001



- The regular use of sunscreen with an SPF of 15 or higher by Utah adults increased with increasing years of education and annual household income (not graphed).

Percentage of Persons Who Reported Always or Nearly Always Using Sunscreen With an SPF of 15+ by Education, Utah Adults Ages 18+, 2000-2001



The Utah Cancer Action Network is a statewide partnership that is working to reduce the incidence of skin cancer in Utah. Strategies include conduction of a media campaign to educate the public about skin cancer and ways to prevent its occurrence.

Utah Objective: By 2010, increase the proportion of Utah adults aged 18 years or over who use sunscreen with a sun protective factor (SPF) of 15 or higher to 50% (age adjusted to the U.S. 2000 standard population).

HP2010 Objective 3-9b: Increase the proportion of adults aged 18 years or over who use at least one of the identified protective measures to 75% (age adjusted to the U.S. 2000 standard population).



Percentage of Persons Who Reported Always or Nearly Always Using Sunscreen With an SPF of 15+ by Selected Demographic Characteristics, Utah Adults Ages 18+, 2000 - 2001.

Demographic Subgroup	Utah Population		Survey Estimates				
	Distribution	Number of Persons ¹	Percentage of Persons Who Reported Always or Nearly Always Using Sunscreen With SPF 15+ ²			Number of Persons ^{1,3}	Distribution of Persons Who Reported Always or Nearly Always Using Sunscreen With SPF 15+ by Category
			95% Confidence Intervals	Lower	Upper		
Sunscreen Use							
Always	13.6%	207,300					
Nearly Always	16.8%	256,300					
Sometimes	22.7%	345,400					
Seldom	17.5%	266,600					
Never	25.0%	381,500					
SPF Less Than 15	4.4%	66,400					
Total, All Adults	100.0%	1,523,500					
Sex							
Males	49.5%	753,700	21.8%	19.8%	23.7%	164,000	35.5%
Females	50.5%	769,800	38.7%	36.6%	40.8%	298,100	64.5%
Total, All Adults	100.0%	1,523,500	30.4%	29.0%	31.9%	463,600	100.0%
Age Group							
18 to 34	42.6%	648,500	28.4%	25.9%	30.8%	183,800	39.9%
35 to 49	28.5%	433,700	33.7%	30.9%	36.4%	146,000	31.7%
50 to 64	16.4%	250,000	31.6%	28.1%	35.0%	78,900	17.1%
65 or Over	12.6%	191,300	27.0%	23.4%	30.7%	51,700	11.2%
Total, All Adults	100.0%	1,523,500	30.4%	29.0%	31.9%	463,600	100.0%
Race/Ethnicity							
White, Non-Hispanic	88.4%	1,346,000	31.6%	30.0%	33.2%	425,300	92.6%
Hispanic	8.3%	126,000	20.2%	14.7%	25.7%	25,400	5.5%
Non-White, Non-Hispanic	3.4%	51,500	16.7%	10.6%	22.8%	8,600	1.9%
Total, All Adults	100.0%	1,523,500	30.4%	29.0%	31.9%	463,600	100.0%
Income							
Less Than \$20,000	13.6%	207,700	23.0%	19.2%	26.7%	47,700	10.3%
\$20,000-\$49,999	47.8%	727,500	27.5%	25.4%	29.6%	200,100	43.2%
\$50,000 or Over	38.6%	588,400	36.6%	34.0%	39.2%	215,500	46.5%
Total, All Adults	100.0%	1,523,500	30.4%	29.0%	31.9%	463,600	100.0%
Education							
Less Than High School	6.0%	91,700	19.7%	14.5%	25.0%	18,100	3.9%
H.S. Grad or G.E.D.	30.1%	458,100	25.5%	23.0%	28.1%	117,000	25.3%
Some Post High School	35.1%	534,100	29.8%	27.3%	32.3%	159,200	34.4%
College Graduate	28.9%	439,500	38.3%	35.5%	41.1%	168,400	36.4%
Total, All Adults	100.0%	1,523,500	30.4%	29.0%	31.9%	463,600	100.0%

1 Rounded to the nearest 100 persons.

2 Plus or minus 95% confidence interval.

3 Figures in these columns may not sum to the total because some surveyed individuals had missing values on the grouping variables.

Population counts for age, sex, and total population were the 2000 estimates provided by the Governor's Office of Planning and Budget. Population count estimates for race/ethnicity, income, and education populations were derived from averaging three years of the BRFSS surveys from 1999-2001.

Influenza Vaccination



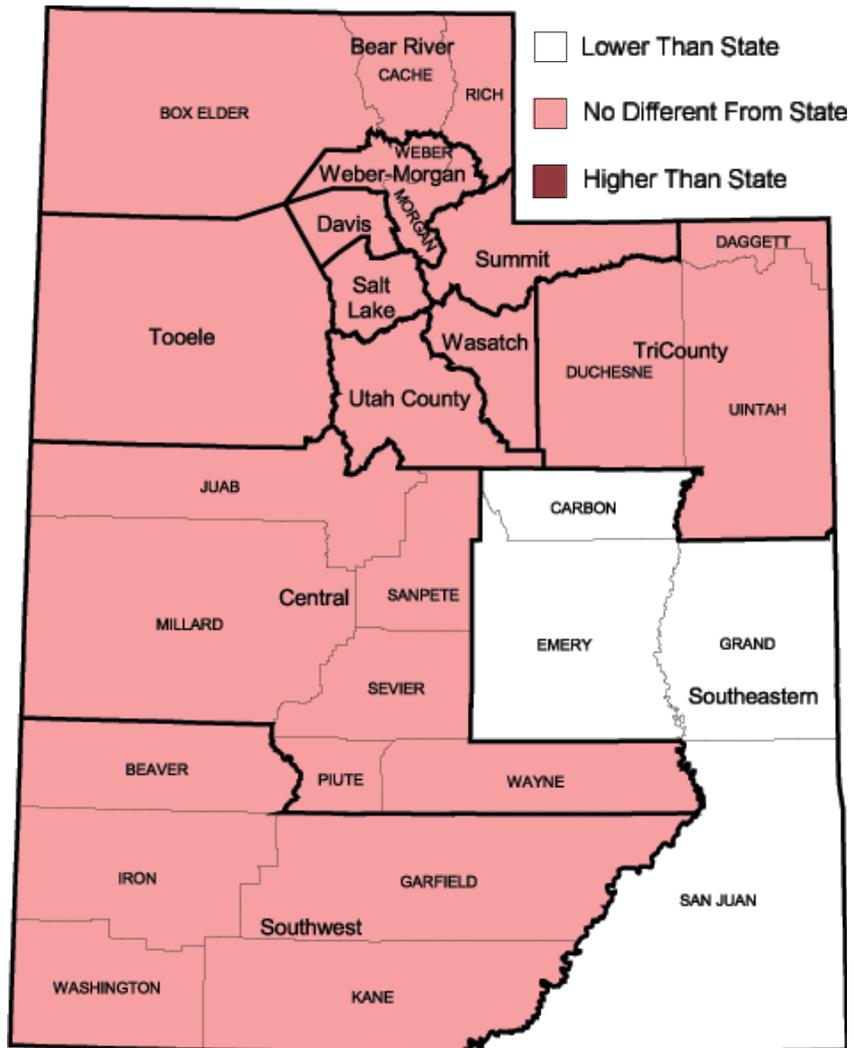
Question: During the past 12 months, have you had a flu shot?

Each year since 1969 an average of 114,000 people are hospitalized nationwide for influenza related complications.¹⁷ This number climbs markedly during severe flu seasons. In the U.S. the annual direct medical costs (hospitalizations, doctors office visits, medications, etc.) of influenza are estimated at up to \$4.6 billion. Total direct and indirect costs (work days lost, school days lost, etc.) of a severe flu epidemic are at least \$12 billion.¹⁷ Older adults are at increased risk of contracting influenza and pneumonia due to a natural decline in the strength of their immune system.

Pneumonia and influenza together are the fifth leading cause of death among adults 65 or over in Utah.¹⁸ Influenza vaccine can prevent 50 to 60 percent of hospitalizations and up to 80 percent of deaths from influenza-related complications among the elderly.¹⁷

- In many sparsely-populated areas, lack of local availability of health care services often presents a significant barrier to getting needed care. This may be at least partially responsible for the low vaccination rates in Southeastern Health District on this map. The population in this region is rural, and access to vaccination was limited by distance and the number of sites.
- The table on the facing page indicates several districts in Utah where vaccination rates on the BRFSS were lower than the state rate, however the difference in rates was not statistically significant, partially due to small sample size of adults ages 65+.
- In Utah, the estimated percentage of persons ages 65 or over who reported having a flu shot within the past 12 months increased substantially from 54.8% in 1993 to 68.7% in 2001. Nationwide, the rate for the same group dropped from 67.4% in 1999 to 66.2% in 2001. The age-adjusted rates shown here for influenza vaccination do not differ significantly from the crude rates.

Flu Shot in Past 12 Months by Whether the Local Health District Percentage Differed From the State, Utah Adults Ages 65+, 1999 and 2001

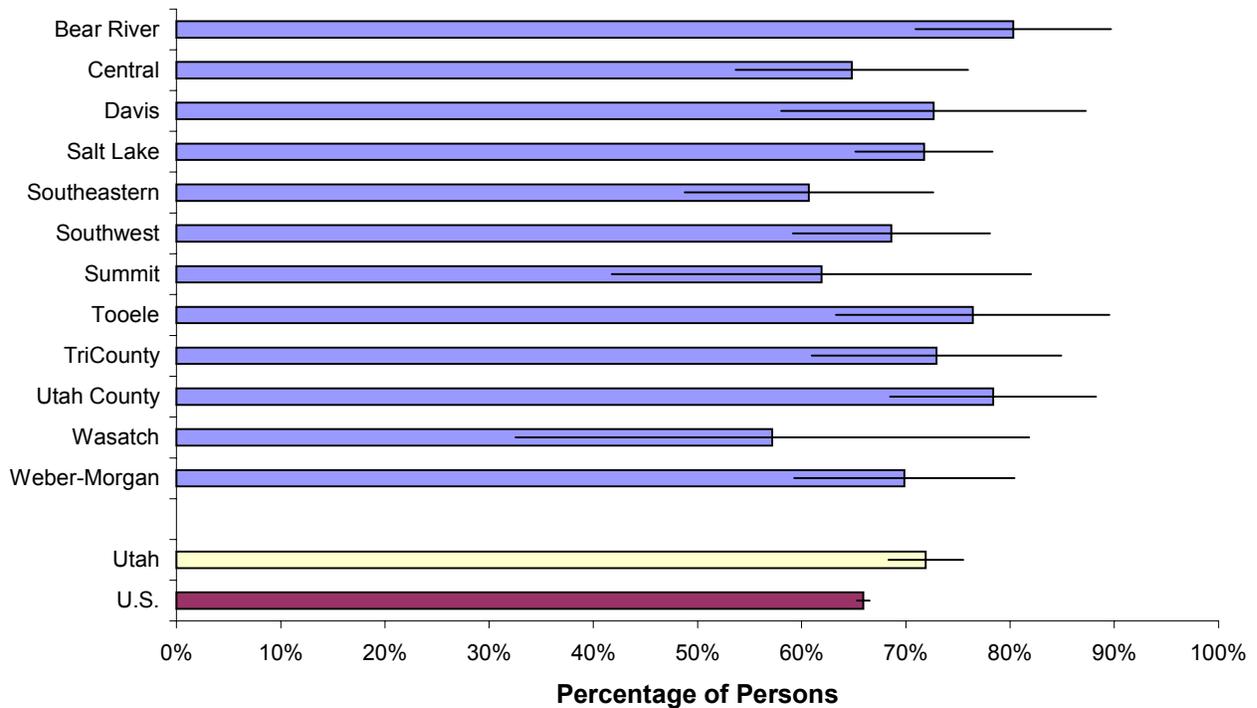


Age adjusted to the U.S. 2000 standard population. Percentage for a local health district was considered different from the state percentage if its 95% confidence interval did not include the state percentage. Source: Behavioral Risk Factor Surveillance System



Percentage of Persons Who Reported Having a Flu Shot in the Past 12 Months*

by Local Health District, Utah, and U.S., Adults Ages 65+, 1999 and 2001



* crude rates
Source: Behavioral Risk Factor Surveillance System

District	Sample Size	Total Number of Adults 65+	Crude Rates			Age-adjusted Rates**		
			Number of Adults 65+ With Flu Shot	Percent	95% CI Range	Percent	95% CI Range	
Bear River	79	11,306	9,100	80.3%	70.9% 89.7%	80.4%	71.3% 89.5%	
Central	92	7,870	5,100	64.8%	53.7% 76.0%	67.8%	58.1% 77.6%	
Davis	42	17,629	12,800	72.6%	58.0% 87.3%	72.6%	57.4% 87.8%	
Salt Lake	253	73,036	52,400	71.7%	65.1% 78.3%	72.8%	66.5% 79.1%	
Southeastern	74	6,064	3,700	60.7%	48.7% 72.6%	60.3%	48.2% 72.4%	
Southwest	105	20,904	14,300	68.6%	59.1% 78.1%	68.0%	58.4% 77.5%	
Summit	46	1,461	900	61.9%	41.8% 82.0%	62.8%	45.8% 79.9%	
Tooele	75	3,034	2,300	76.4%	63.3% 89.5%	79.2%	68.1% 90.4%	
TriCounty	71	3,990	2,900	72.9%	61.0% 84.9%	76.0%	65.9% 86.1%	
Utah County	77	23,717	18,600	78.4%	68.5% 88.3%	77.5%	67.3% 87.7%	
Wasatch	86	1,303	700	57.2%	32.5% 81.8%	59.7%	42.1% 77.4%	
Weber-Morgan	96	21,009	14,700	69.9%	59.3% 80.4%	72.7%	63.1% 82.3%	
Utah	1,096	191,323	137,600	71.9%	68.3% 75.5%	72.8%	69.3% 76.3%	
U.S.				65.9%	65.3% 66.5%	66.4%	65.8% 67.1%	

** Age adjusted to U.S. 2000 standard population

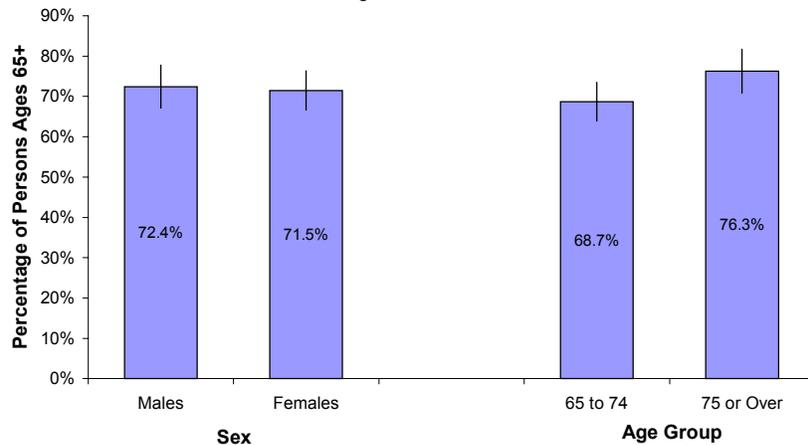
Note: Estimates based on a sample size of less than 50 should be considered statistically unreliable.

Influenza Vaccination



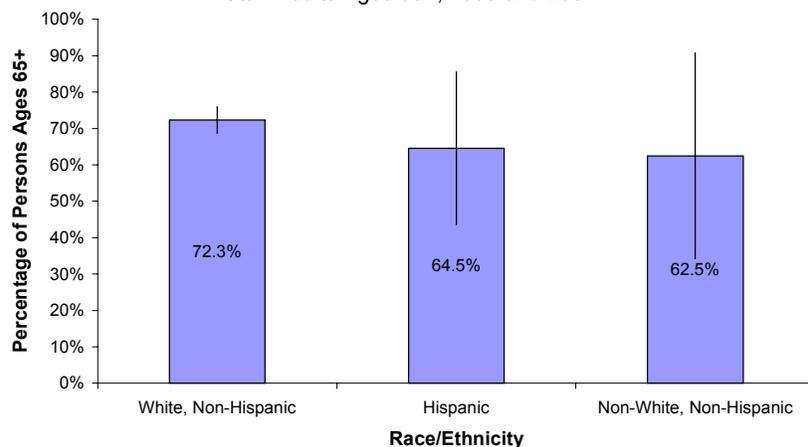
- Adults in the 75 or over age group were more likely than adults ages 65 to 74 to report a flu shot in the past 12 months.

Percentage of Persons Who Reported Having a Flu Shot in the Past 12 Months by Sex and Age, Utah Adults Ages 65+, 1999 and 2001



- Though the data makes it look as though racial and ethnic minority senior citizens in Utah were less likely to report a flu shot in the past 12 months, the sample size was too small to ascertain whether this difference was significant.

Percentage of Persons Who Reported Having a Flu Shot in the Past 12 Months by Race/Ethnicity, Utah Adults Ages 65+, 1999 and 2001



The Utah Immunization Program encourages adults 50 or over, those with high-risk conditions, healthy children between 6 and 23 months of age, women who are more than three months pregnant, and all others wishing to protect themselves to get an annual influenza vaccination. For more detailed influenza recommendations or general information about symptoms of influenza, please call our immunization hotline at 1-800-275-0659 or visit our website at: <http://www.immunize-utah.org>.

Utah Objective: Increase to 90% the proportion of adults aged 65 or over who are vaccinated annually against influenza over the next five years (age adjusted to the U.S. 2000 standard population).

HP2010 Objective 14-29a: Increase to 90% the proportion of noninstitutionalized adults aged 65 years or over who are vaccinated annually against influenza (age adjusted to the U.S. 2000 standard population).



Percentage of Persons Who Reported Having a Flu Shot in the Past 12 Months by Selected Demographic Characteristics, Utah Adults Ages 65+, 1999 and 2001.

Demographic Subgroup	Utah Population		Survey Estimates				
	Distribution	Number of Persons ¹	Percentage of Persons Ages 65+ Who Reported a Flu Shot in Past 12 Months ²			Number of Persons ^{1,3}	Distribution of Persons Ages 65+ Who Reported a Flu Shot in Past 12 Months by Category
			95% Confidence Intervals				
			Lower	Upper			
Had Flu Shot in Last 12 Months							
Yes	71.9%	137,500					
No	28.1%	53,800					
Total, Ages 65+	100.0%	191,300					
Sex							
Males	43.8%	83,700	72.4%	67.1%	77.8%	60,600	44.1%
Females	56.2%	107,600	71.5%	66.6%	76.3%	76,900	55.9%
Total, Ages 65+	100.0%	191,300	71.9%	68.3%	75.5%	137,500	100.0%
Age Group							
65 to 74	53.4%	102,100	68.7%	63.9%	73.5%	70,100	50.7%
75 or Over	46.6%	89,200	76.3%	70.8%	81.8%	68,100	49.3%
Total, Ages 65+	100.0%	191,300	71.9%	68.3%	75.5%	137,500	100.0%
Race/Ethnicity							
White, Non-Hispanic	94.8%	181,400	72.3%	68.6%	76.0%	131,200	95.3%
Hispanic	3.9%	7,400	64.5%	43.6%	85.5%	4,800	3.5%
Non-White, Non-Hispanic	1.3%	2,500	62.5%	34.2%	90.8%	1,600	1.2%
Total, Ages 65+	100.0%	191,300	71.9%	68.3%	75.5%	137,500	100.0%
Income							
Less Than \$20,000	28.1%	53,700	70.0%	62.7%	77.2%	37,600	27.1%
\$20,000-\$49,999	56.6%	108,200	73.2%	68.1%	78.3%	79,200	57.0%
\$50,000 or Over	15.4%	29,400	75.6%	65.8%	85.3%	22,200	16.0%
Total, Ages 65+	100.0%	191,300	71.9%	68.3%	75.5%	137,500	100.0%
Education							
Less Than High School	10.4%	20,000	69.6%	58.9%	80.4%	13,900	10.1%
H.S. Grad or G.E.D.	33.2%	63,600	75.2%	69.8%	80.7%	47,800	34.8%
Some Post High School	31.9%	60,900	66.7%	60.0%	73.4%	40,600	29.5%
College Graduate	24.5%	46,800	75.2%	67.2%	83.1%	35,200	25.6%
Total, Ages 65+	100.0%	191,300	71.9%	68.3%	75.5%	137,500	100.0%

1 Rounded to the nearest 100 persons.

2 Plus or minus 95% confidence interval.

3 Figures in these columns may not sum to the total because some surveyed individuals had missing values on the grouping variables.

Population counts for age, sex, and total population were the 2000 estimates provided by the Governor's Office of Planning and Budget. Population count estimates for race/ethnicity, income, and education populations were derived from averaging three years of the BRFSS surveys from 1999-2001.

Pneumococcal Vaccination



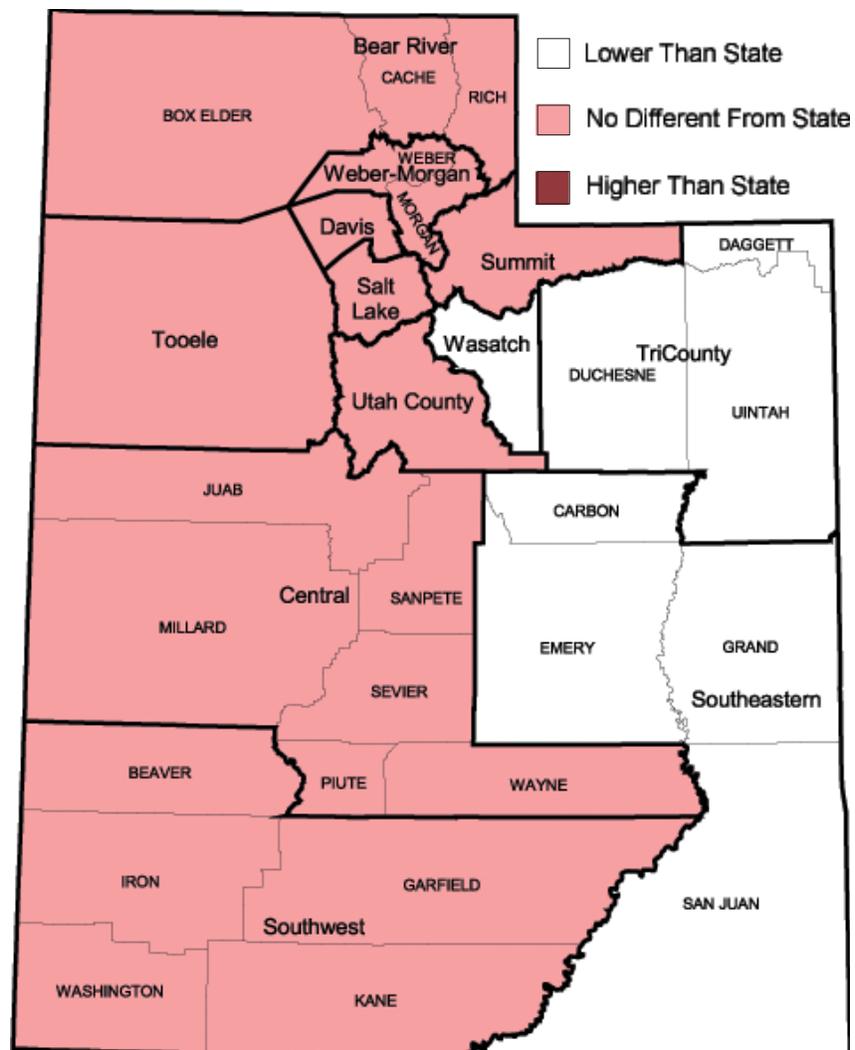
Question: *Have you ever had a pneumonia shot? This shot is usually given only once or twice in a person's lifetime and is different from the flu shot. It is also called the pneumococcal vaccine.*

Nationwide, pneumococcal disease accounts for an estimated 500,000 cases of pneumonia (infection of the lungs), 60,000 cases of bacteremia (blood stream infection), and 3,300 cases of meningitis (inflammation of the tissues and fluids surrounding the brain and spinal cord).¹⁹ Pneumococcal pneumonia accounts for up to 175,000 hospitalizations each year in the U.S., and is the most common type of bacterial pneumonia in persons 65 years of age or older.¹⁹ The elderly and persons with certain chronic medical conditions are at particular risk of death from pneumococcal pneumonia.

In 1999, 70 percent of deaths reported for persons ages 65 or over in Utah were due to pneumonia.¹⁸ Approximately 50 percent of these deaths could have been prevented through the use of the pneumococcal vaccine.

- The white areas on the map indicate areas of the state where vaccination rates for pneumonia were lower than the state rate. This difference could potentially be due to a limited number of vaccination sites, and the necessity for many people to travel long distances to be vaccinated in these areas.
- In 1995, only 42.7% of adults ages 65 or over in Utah reported receiving a pneumococcal vaccine at any time in the past. In 2001, that rate had climbed to 67.3%. Nationwide, for the same group, the rate climbed from 38.4% in 1995, to 61.2% in 2001.

Pneumococcal Vaccine Ever by Whether the Local Health District Percentage Differed From the State, Utah Adults Ages 65+, 1999 and 2001



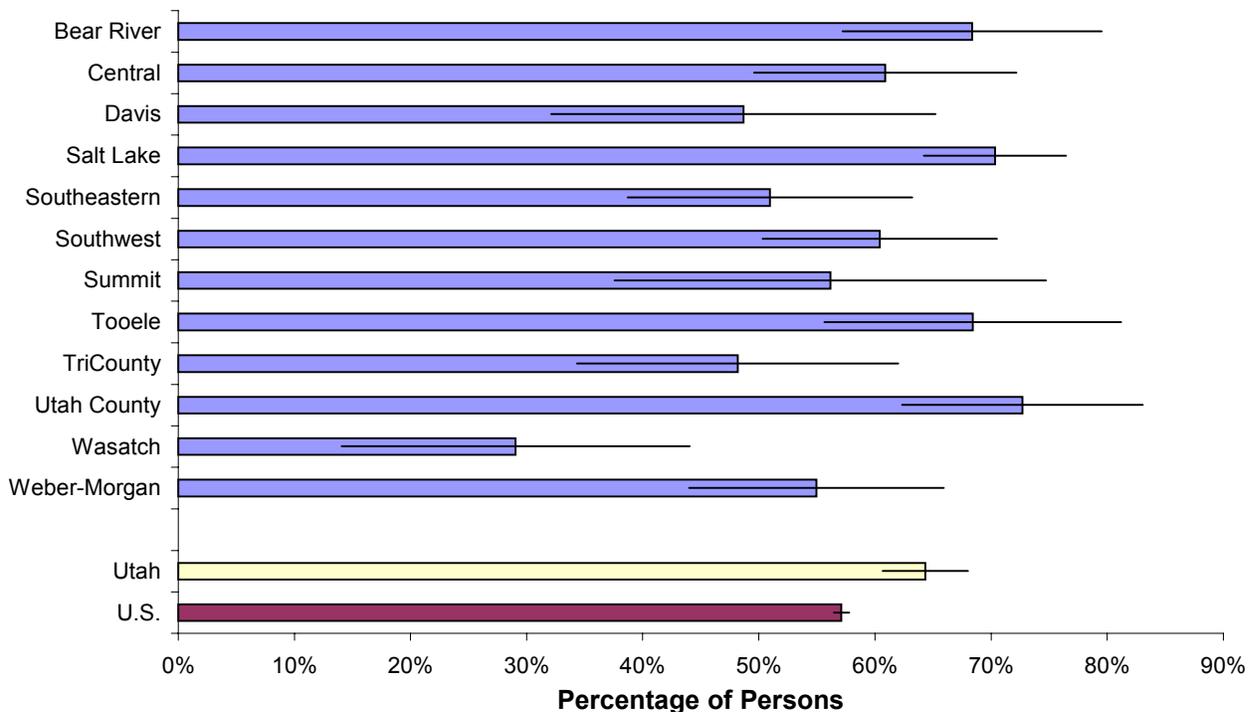
Age adjusted to the U.S. 2000 standard population. Percentage for a local health district was considered different from the state percentage if its 95% confidence interval did not include the state percentage. Source: Behavioral Risk Factor Surveillance System



Pneumococcal Vaccination

Percentage of Persons Who Reported Having a Pneumococcal Vaccination*

by Local Health District, Utah, and U.S., Adults Ages 65+, 1999 and 2001



* crude rates

Source: Behavioral Risk Factor Surveillance System

District	Sample Size	Total Number of Adults 65+	Crude Rates			Age-adjusted Rates**		
			Number With Pneumo-coccal Vaccine	Percent	95% CI Range	Percent	95% CI Range	
Bear River	80	11,306	7,700	68.4%	57.2% 79.5%	68.9%	58.3% 79.6%	
Central	89	7,870	4,800	60.9%	49.6% 72.2%	59.3%	47.6% 70.9%	
Davis	42	17,629	8,600	48.7%	32.1% 65.2%	56.6%	42.5% 70.7%	
Salt Lake	252	73,036	51,400	70.3%	64.2% 76.5%	70.2%	64.3% 76.2%	
Southeastern	73	6,064	3,100	51.0%	38.7% 63.2%	50.9%	39.0% 62.8%	
Southwest	103	20,904	12,600	60.4%	50.3% 70.5%	60.6%	50.5% 70.7%	
Summit	42	1,461	800	56.2%	37.6% 74.7%	57.2%	43.2% 71.3%	
Tooele	74	3,034	2,100	68.4%	55.6% 81.2%	69.7%	57.0% 82.4%	
TriCounty	67	3,990	1,900	48.2%	34.3% 62.0%	49.5%	35.1% 63.8%	
Utah County	77	23,717	17,200	72.7%	62.3% 83.1%	73.0%	62.7% 83.4%	
Wasatch	84	1,303	400	29.1%	14.1% 44.0%	30.5%	16.2% 44.7%	
Weber-Morgan	95	21,009	11,500	55.0%	44.0% 65.9%	56.4%	45.8% 67.0%	
Utah	1,078	191,323	123,100	64.3%	60.7% 68.0%	65.3%	61.8% 68.8%	
U.S.				57.1%	56.5% 57.8%	57.7%	57.1% 58.4%	

** Age adjusted to U.S. 2000 standard population

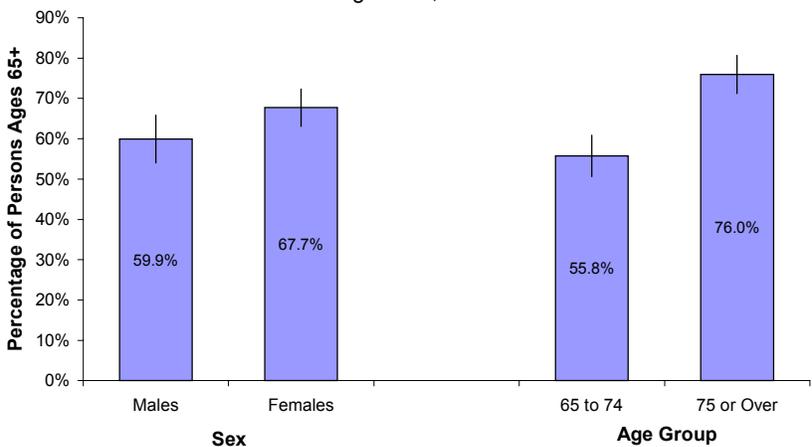
Note: Estimates based on a sample size of less than 50 should be considered statistically unreliable.

Pneumococcal Vaccination



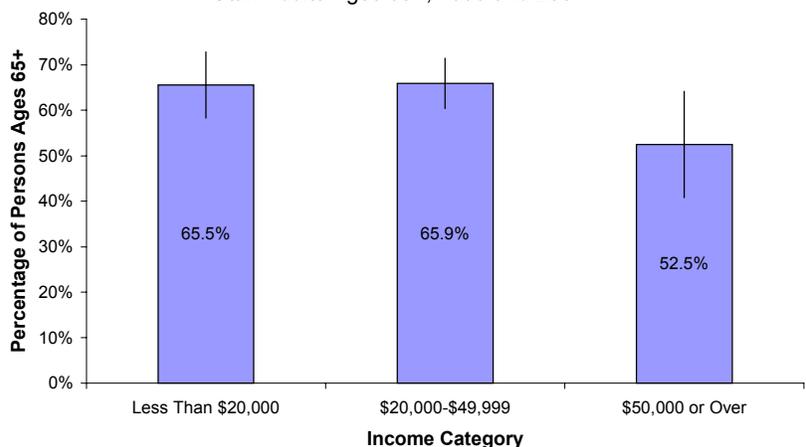
- Females were more likely to report a pneumococcal vaccine than males. Senior citizens ages 75 or over reported a pneumococcal vaccine more frequently than those ages 65 to 74.

Percentage of Persons Who Reported Having a Pneumococcal Vaccination by Sex and Age, Utah Adults Ages 65+, 1999 and 2001



- Pneumococcal vaccine rates were not related to annual household income. This was potentially due to high insurance rates for seniors with Medicare coverage.

Percentage of Persons Who Reported Having a Pneumococcal Vaccination by Income, Utah Adults Ages 65+, 1999 and 2001



The Utah Immunization Program is working with long-term care facilities to establish standing orders for pneumococcal and influenza vaccinations. Facilities will now be keeping immunization histories, offering vaccinations, and reporting the vaccinations given on an annual basis. Pneumococcal vaccination is recommended for all adults 65 or over and persons 2 years of age or older with high-risk conditions. For more information call the immunization hotline at 1-800-275-0659 or visit our website at:

<http://www.immunize-utah.org>.

Utah Objective: By 2010, increase immunization levels to 60% for pneumococcal and influenza vaccines among adults ages 50 or over (age adjusted to the U.S. 2000 standard population).

HP2010 Objective 14-29b: Increase the proportion of noninstitutionalized adults aged 65 years or over who are ever vaccinated against pneumococcal disease to 90% (age adjusted to the U.S. 2000 standard population).



Pneumococcal Vaccination

Percentage of Persons Who Reported Having a Pneumococcal Vaccination by Selected Demographic Characteristics, Utah Adults Ages 65+, 1999 and 2001.

Demographic Subgroup	Utah Population		Survey Estimates				
	Distribution	Number of Persons ¹	Percentage of Persons Ages 65+ Who Reported a Pneumococcal Vaccination ²			Number of Persons ^{1,3}	Distribution of Persons Ages 65+ Who Reported a Pneumococcal Vaccination by Category
			95% Confidence Intervals				
			Lower	Upper			
Ever Had Pneumococcal Vaccination							
Yes	64.3%	123,100					
No	35.7%	68,200					
Total, Ages 65+	100.0%	191,300					
Sex							
Males	43.8%	83,700	59.9%	54.0%	65.8%	50,200	40.8%
Females	56.2%	107,600	67.7%	63.1%	72.3%	72,900	59.2%
Total, Ages 65+	100.0%	191,300	64.3%	60.7%	68.0%	123,100	100.0%
Age Group							
65 to 74	53.4%	102,100	55.8%	50.7%	60.9%	56,900	45.6%
75 or Over	46.6%	89,200	76.0%	71.3%	80.7%	67,800	54.4%
Total, Ages 65+	100.0%	191,300	64.3%	60.7%	68.0%	123,100	100.0%
Race/Ethnicity							
White, Non-Hispanic	94.8%	181,400	64.3%	60.5%	68.0%	116,600	94.8%
Hispanic	3.9%	7,400	66.3%	44.8%	87.8%	4,900	4.0%
Non-White, Non-Hispanic	1.3%	2,500	60.4%	31.6%	89.2%	1,500	1.2%
Total, Ages 65+	100.0%	191,300	64.3%	60.7%	68.0%	123,100	100.0%
Income							
Less Than \$20,000	28.1%	53,700	65.5%	58.2%	72.8%	35,200	28.9%
\$20,000-\$49,999	56.6%	108,200	65.9%	60.3%	71.4%	71,300	58.5%
\$50,000 or Over	15.4%	29,400	52.5%	40.8%	64.2%	15,400	12.6%
Total, Ages 65+	100.0%	191,300	64.3%	60.7%	68.0%	123,100	100.0%
Education							
Less Than High School	10.4%	20,000	71.7%	61.3%	82.1%	14,300	11.6%
H.S. Grad or G.E.D.	33.2%	63,600	65.1%	59.2%	71.1%	41,400	33.6%
Some Post High School	31.9%	60,900	61.2%	54.2%	68.2%	37,300	30.3%
College Graduate	24.5%	46,800	64.4%	56.8%	72.1%	30,200	24.5%
Total, Ages 65+	100.0%	191,300	64.3%	60.7%	68.0%	123,100	100.0%

1 Rounded to the nearest 100 persons.

2 Plus or minus 95% confidence interval.

3 Figures in these columns may not sum to the total because some surveyed individuals had missing values on the grouping variables.

Population counts for age, sex, and total population were the 2000 estimates provided by the Governor's Office of Planning and Budget. Population count estimates for race/ethnicity, income, and education populations were derived from averaging three years of the BRFSS surveys from 1999-2001.

Folic Acid Consumption

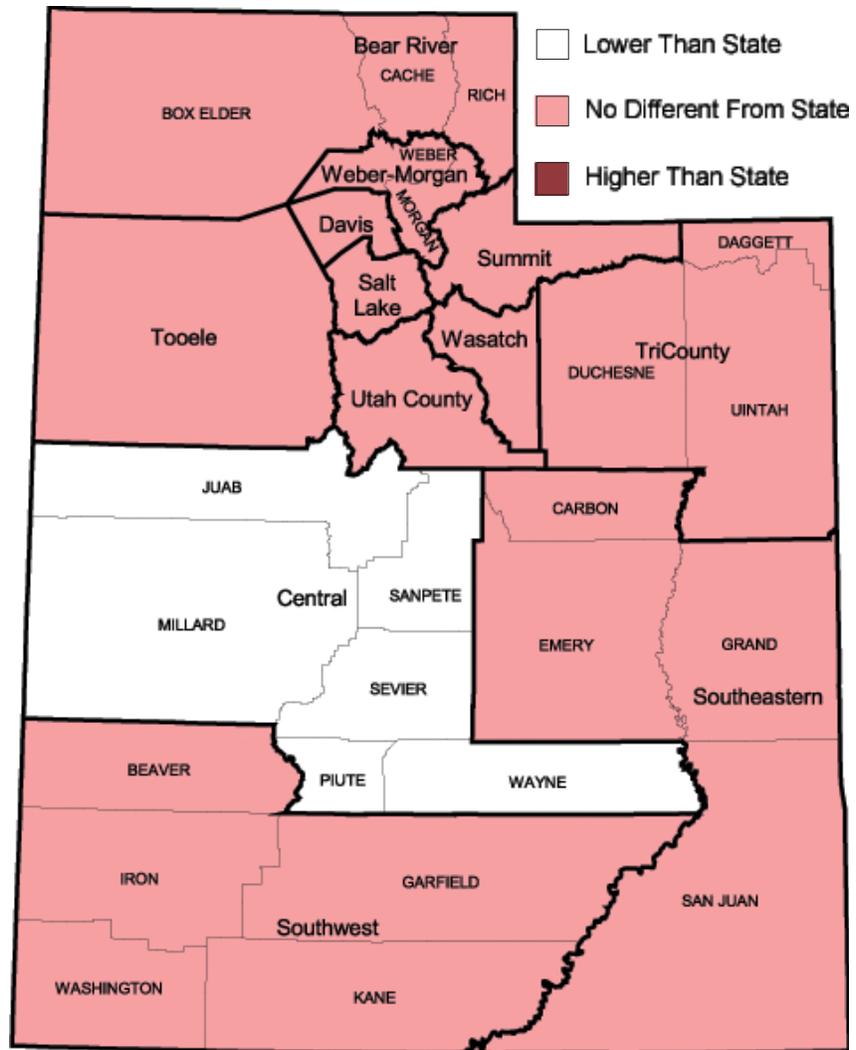


Questions: *Do you currently take any vitamin pills or supplements? Are any of these a multivitamin? Do any of the vitamin pills or supplements you take contain folic acid? How often do you take this vitamin pill or supplement?*

Neural tube defects (NTDs), including spina bifida, occur when the neural tube fails to close fully during fetal development. Each year in Utah, about 1 in 1,000 pregnancies are affected by NTDs. The occurrence of NTDs could be reduced by more than half if women consumed adequate folic acid one month before conception through the first three months of pregnancy. The U.S. Public Health Service recommended in 1992 that all women of childbearing age consume 400 micrograms of folic acid daily. The BRFSS asked the four questions above in order to determine if female respondents ages 18-44 (childbearing age) were taking vitamins or supplements with 400 micrograms of folic acid daily.

- The map shows that in Central Utah Health District women were less likely to report daily folic acid consumption than the state average. These questions were not asked in every state, so no comparison can be made between Utah and the U.S. as a whole.
- The crude rates for daily folic acid consumption differed from 34.8% in Central Utah Health District to 54.8% in TriCounty Health District.

Daily Folic Acid by Whether the Local Health District Percentage Differed From the State, Utah Women Ages 18-44, 1999-2001

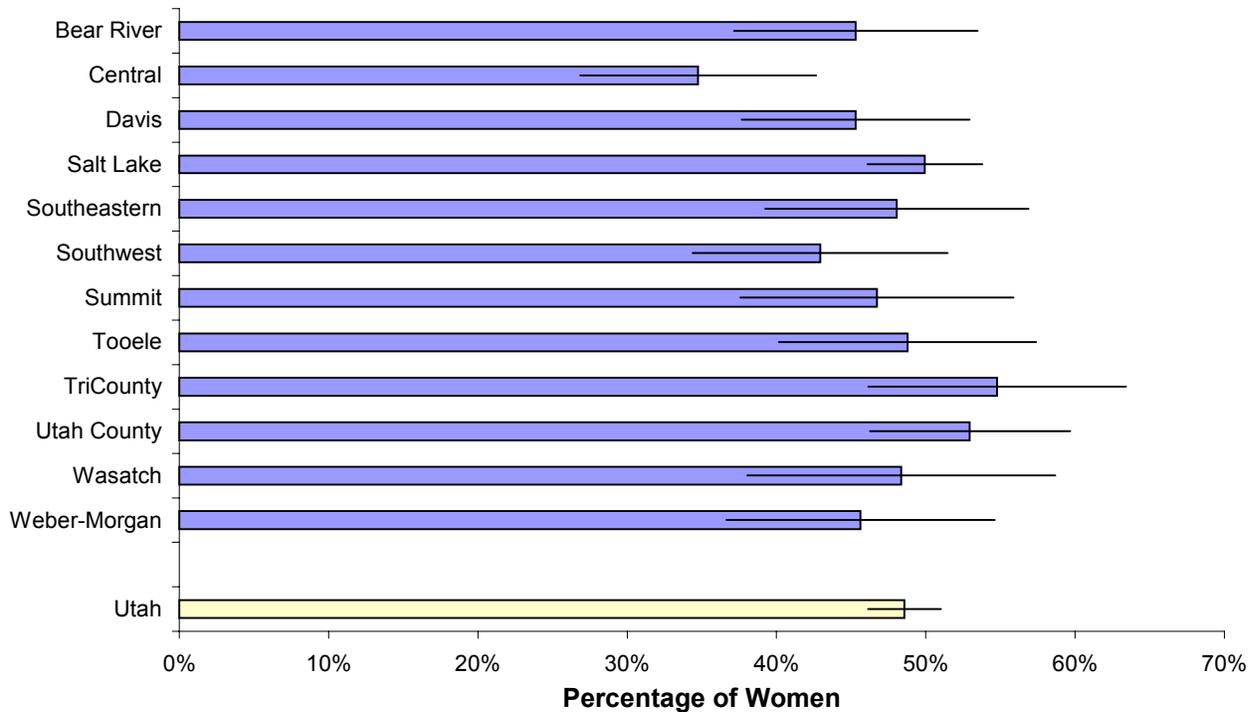


Age adjusted to the U.S. 2000 standard population. Percentage for a local health district was considered different from the state percentage if its 95% confidence interval did not include the state percentage. Source: Behavioral Risk Factor Surveillance System



Folic Acid Consumption

Percentage of Women Who Reported Taking Folic Acid Daily*
by Local Health District, Utah Women Ages 18-44, 1999-2001



* crude rates
Source: Behavioral Risk Factor Surveillance System

District	Sample Size	Total Number of Women 18-44	Number of Women With Daily Folic Acid	Crude Rates			Age-adjusted Rates**		
				Percent	95% CI Range		Percent	95% CI Range	
Bear River	204	30,361	13,800	45.3%	37.2%	53.5%	45.6%	37.4%	53.8%
Central	163	11,187	3,900	34.8%	26.8%	42.7%	35.3%	27.4%	43.1%
Davis	203	47,911	21,700	45.3%	37.7%	52.9%	44.7%	37.3%	52.0%
Salt Lake	833	190,451	95,100	49.9%	46.1%	53.8%	49.8%	45.9%	53.7%
Southeastern	159	9,754	4,700	48.1%	39.2%	56.9%	48.1%	39.3%	56.9%
Southwest	183	25,723	11,000	42.9%	34.4%	51.5%	44.1%	35.7%	52.6%
Summit	175	6,165	2,900	46.7%	37.6%	55.9%	45.8%	35.6%	56.0%
Tooele	204	8,760	4,300	48.8%	40.2%	57.4%	49.4%	41.3%	57.5%
TriCounty	166	7,207	3,900	54.8%	46.1%	63.4%	54.7%	45.8%	63.5%
Utah County	299	88,438	46,800	53.0%	46.3%	59.7%	53.2%	46.6%	59.8%
Wasatch	155	2,974	1,400	48.4%	38.1%	58.7%	48.5%	38.5%	58.5%
Weber-Morgan	161	40,413	18,400	45.6%	36.6%	54.6%	45.8%	36.8%	54.7%
Utah	2,905	469,344	228,000	48.6%	46.1%	51.0%	48.7%	46.2%	51.1%

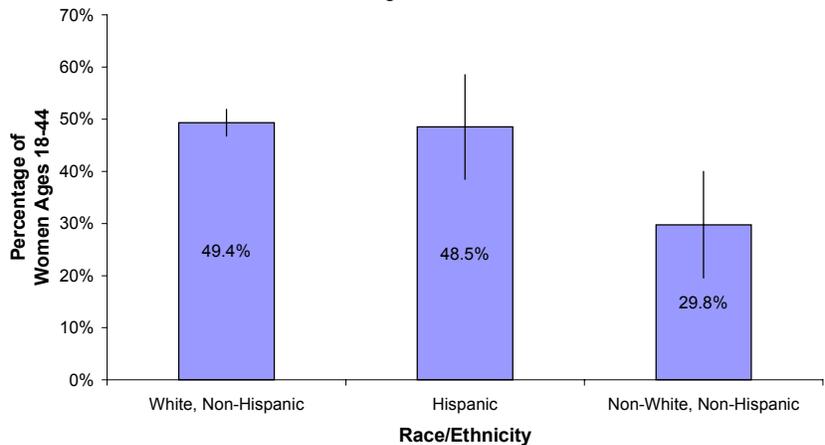
** Age adjusted to U.S. 2000 standard population

Folic Acid Consumption



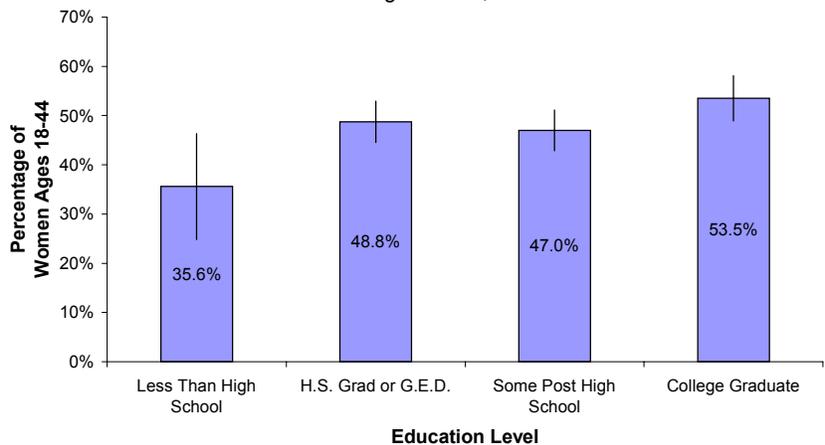
- Demographic comparisons showed that non-White, non-Hispanic women (including Black, Asian, Native Hawaiian or other Pacific Islander, and American Indian or Alaska Native women) were less likely than either the White, non-Hispanic or Hispanic women to report daily folic acid consumption.

Percentage of Women Who Reported Taking Folic Acid Daily by Race/Ethnicity, Utah Women Ages 18-44, 1999-2001



- The percentage of women reporting daily folic acid consumption increased with increasing education and income levels (income not graphed).

Percentage of Women Who Reported Taking Folic Acid Daily by Education, Utah Women Ages 18-44, 1999-2001



Since 1996, the Utah Birth Defect Network, in partnership with the Utah Chapter of the March of Dimes, the Spina Bifida Clinic at Primary Children’s Medical Center, and other programs in the Utah Department of Health, has worked through the Folic Acid Educational Campaign to increase folic acid consumption by providing educational materials to women, health care providers, and local health departments.

Utah Objective: Increase the number of women who know folic acid prevents birth defects and consume a multivitamin daily, prior to pregnancy.

HP2010 Objective (related) 16-6: Increase the proportion of pregnancies begun with an optimum folic acid level.



Folic Acid Consumption

Percentage of Women Who Reported Taking Folic Acid Daily by Selected Demographic Characteristics, Utah Women Ages 18-44, 1999 - 2001.

Demographic Subgroup	Utah Population		Survey Estimates				
	Distribution	Number of Persons ¹	Percentage of Women Ages 18-44 Who Reported Taking Folic Acid Daily ²			Number of Persons ^{1, 3}	Distribution of Women Ages 18-44 Who Reported Taking Folic Acid Daily by Category
			95% Confidence Intervals				
			Lower	Upper			
Folic Acid Consumption							
Take Daily Multiple Vitamin	45.6%	214,000					
Take Daily Folic Acid Supplement	3.0%	14,300					
Take Folic Acid < Daily	8.6%	40,200					
Do Not Consume FA	42.8%	200,900					
Total, All Women Ages 18-44	100.0%	469,300					
Age Group							
18 to 34	68.3%	320,500	48.3%	45.2%	51.5%	154,900	68.0%
35 to 44	31.7%	148,800	49.0%	45.1%	52.8%	72,800	32.0%
Total, All Women Ages 18-44	100.0%	469,300	48.6%	46.1%	51.0%	227,900	100.0%
Race/Ethnicity							
White, Non-Hispanic	85.0%	398,900	49.4%	46.8%	51.9%	196,900	86.7%
Hispanic	10.5%	49,300	48.5%	38.5%	58.6%	23,900	10.5%
Non-White, Non-Hispanic	4.5%	21,200	29.8%	19.5%	40.0%	6,300	2.8%
Total, All Women Ages 18-44	100.0%	469,300	48.6%	46.1%	51.0%	227,900	100.0%
Income							
Less Than \$20,000	14.0%	65,600	46.5%	39.9%	53.1%	30,500	13.1%
\$20,000-\$49,999	51.3%	240,700	49.4%	45.8%	52.9%	118,800	50.9%
\$50,000 or Over	34.8%	163,100	51.7%	47.3%	56.0%	84,300	36.1%
Total, All Women Ages 18-44	100.0%	469,300	48.6%	46.1%	51.0%	227,900	100.0%
Education							
Less Than High School	5.4%	25,500	35.6%	24.8%	46.4%	9,100	4.0%
H.S. Grad or G.E.D.	30.2%	141,800	48.8%	44.6%	52.9%	69,200	30.4%
Some Post High School	39.2%	183,800	47.0%	42.9%	51.1%	86,400	37.9%
College Graduate	25.2%	118,200	53.5%	49.0%	58.1%	63,300	27.8%
Total, All Women Ages 18-44	100.0%	469,300	48.6%	46.1%	51.0%	227,900	100.0%

1 Rounded to the nearest 100 persons.

2 Plus or minus 95% confidence interval.

3 Figures in these columns may not sum to the total because some surveyed individuals had missing values on the grouping variables.

Population counts for age, sex, and total population were the 2000 estimates provided by the Governor's Office of Planning and Budget. Population count estimates for race/ethnicity, income, and education populations were derived from averaging three years of the BRFSS surveys from 1999-2001.

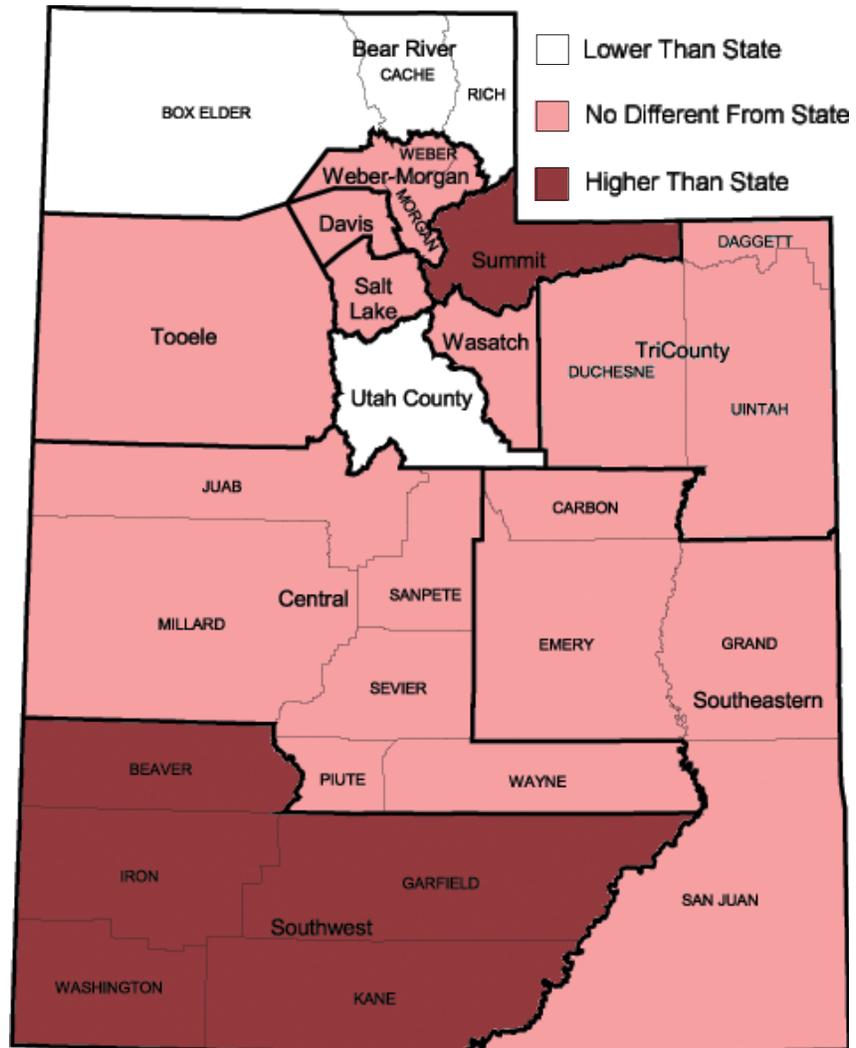
HIV Test



Question: *As far as you know, have you ever been tested for HIV? Do not count tests you may have had as part of a blood donation.*

Estimates of the number of people infected with HIV in the United States range from 800,000 to 900,000. The true extent of the epidemic is difficult to assess because of the long period of time from initial HIV infection to AIDS and the lack of awareness of HIV serostatus. There may be as many as 200,000 to 250,000 persons in the U.S. who are not aware of their infection. HIV/AIDS remains a significant cause of illness, disability, and death in the U.S. despite the fact that new therapies for HIV/AIDS have been developed. HIV/AIDS has been reported in every racial and ethnic population, age group, and socioeconomic group. In the U.S., Black and Hispanic persons have been affected disproportionately by HIV and AIDS. Increasing the number of people who know their HIV serostatus is an important component of a national program to slow or halt the transmission of HIV in the U.S. This question was asked only of those adults ages 18-64.

HIV Test* Ever by Whether the Local Health District Percentage Differed From the State, Utah Adults Ages 18-64, 1999-2001



Age adjusted to the U.S. 2000 standard population. Percentage for a local health district was considered different from the state percentage if its 95% confidence interval did not include the state percentage.

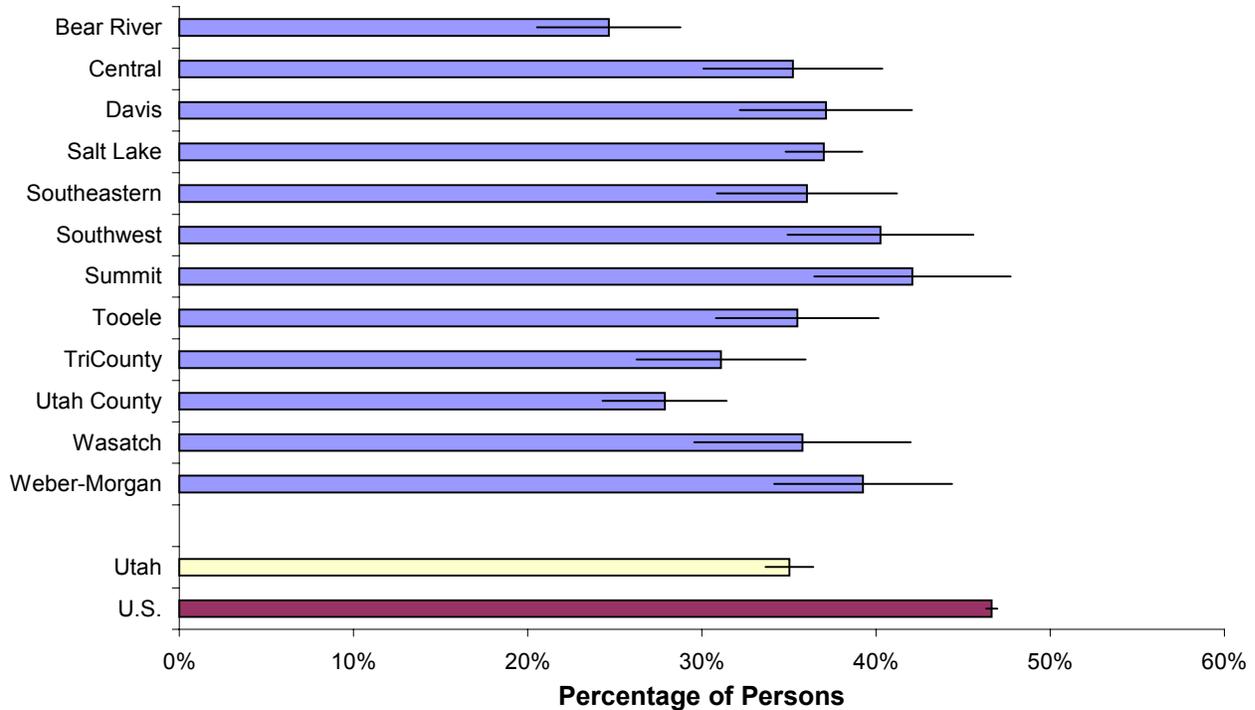
* Does not include tests that were done as part of a blood donation.

Source: Behavioral Risk Factor Surveillance System

- Adults in the Bear River and Utah County Health Districts were less likely to report they had ever been tested for HIV, compared with 34.9% for adults in the state as a whole. Adults in Southwest Utah and Summit County Health Districts were more likely to report ever being tested for HIV.
- The crude rates show that 35.0% of Utah adults reported ever being tested for HIV as compared to 46.6% of adults in the U.S. as a whole. The difference was significant even after adjusting for age.
- The health district rates ranged from 24.7% for Bear River Health District up to 42.1% in Summit County Health District.



Percentage of Persons Who Reported Ever Being Tested for HIV* by Local Health District, Utah, and U.S., Adults Ages 18-64, 1999-2001



* crude rates

Note: Does not include tests that were done as part of a blood donation.

Source: Behavioral Risk Factor Surveillance System

District	Sample Size	Total Number of Adults 18-64	Crude Rates			Age-adjusted Rates**		
			Number With HIV Test	Percent	95% CI Range	Percent	95% CI Range	
Bear River	494	80,511	19,900	24.7%	20.5% 28.8%	23.9%	19.9% 27.9%	
Central	455	35,416	12,500	35.2%	30.1% 40.4%	35.6%	30.6% 40.6%	
Davis	504	138,187	51,300	37.1%	32.2% 42.1%	37.1%	32.2% 42.1%	
Salt Lake	2,242	554,821	205,300	37.0%	34.8% 39.2%	36.7%	34.5% 38.8%	
Southeastern	461	30,387	11,000	36.0%	30.9% 41.2%	36.2%	31.4% 40.9%	
Southwest	486	76,691	30,900	40.3%	34.9% 45.6%	40.2%	35.2% 45.2%	
Summit	526	19,631	8,300	42.1%	36.4% 47.7%	42.5%	37.4% 47.6%	
Tooele	587	23,978	8,500	35.5%	30.8% 40.1%	35.4%	30.9% 40.0%	
TriCounty	473	22,369	7,000	31.1%	26.3% 36.0%	31.2%	26.4% 35.9%	
Utah County	744	221,547	61,700	27.9%	24.3% 31.4%	28.1%	24.4% 31.8%	
Wasatch	430	8,851	3,200	35.8%	29.6% 42.0%	35.7%	29.7% 41.7%	
Weber-Morgan	470	119,813	47,000	39.3%	34.2% 44.4%	39.6%	34.6% 44.6%	
Utah	7,872	1,332,202	466,700	35.0%	33.7% 36.4%	34.9%	33.5% 36.3%	
U.S.				46.6%	46.3% 47.0%	46.3%	45.9% 46.6%	

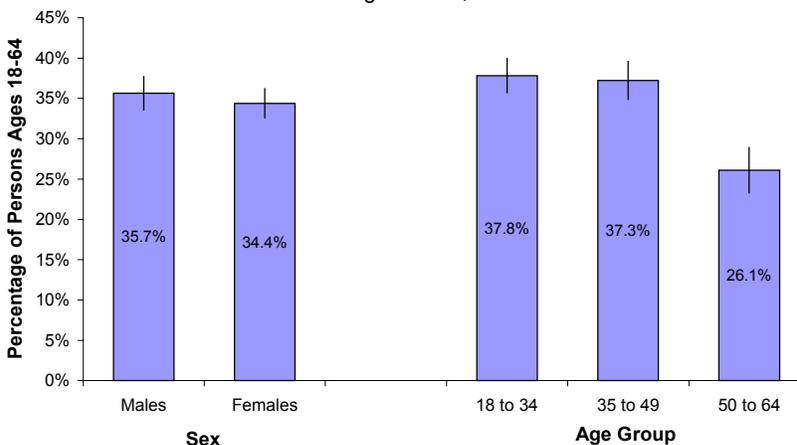
** Age adjusted to U.S. 2000 standard population

HIV Test



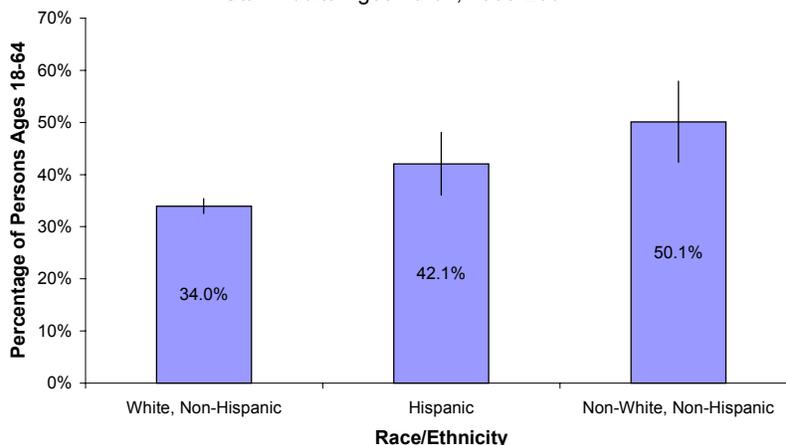
- Utah adults ages 18-34 (37.9%) and 35-49 (38.1%) were more likely than older adults ages 50-64 (27.8%) to report HIV testing.

Percentage of Persons Who Reported Ever Being Tested for HIV* by Sex and Age, Utah Adults Ages 18-64, 1999-2001



- Utah minorities, including Hispanic persons (44.6%) and other minority racial groups combined (51.9%), were more likely than White, non-Hispanic persons (34.6%) to report HIV testing.

Percentage of Persons Who Reported Ever Being Tested for HIV* by Race/Ethnicity, Utah Adults Ages 18-64, 1999-2001



* Does not include tests that were done as part of a blood donation.

The HIV Prevention Program, Bureau of Communicable Disease Control provides confidential and anonymous HIV counseling and testing at local health departments and alternate testing sites. For more information on where to get tested call (801) 538-6096 or 1-800-537-1046.

Utah Objective: No objective listed.

HP2010 Objective (related) 13-7: (Developmental) Increase the number of HIV-positive persons who know their serostatus.



Percentage of Persons Who Reported Ever Being Tested for HIV* by Selected Demographic Characteristics, Utah Adults Ages 18-64, 1999 - 2001.

Demographic Subgroup	Utah Population		Survey Estimates				
	Distribution	Number of Persons ¹	Percentage of Persons Ages 18-64 Who Reported Ever Being Tested for HIV ²			Number of Persons ^{1,3}	Distribution of Persons Ages 18-64 Who Reported Ever Being Tested for HIV by Category
			95% Confidence Intervals				
			Lower		Upper		
Had HIV Test							
Yes	35.0%	466,700					
No	65.0%	865,500					
Total, Ages 18-64	100.0%	1,332,200					
Sex							
Males	50.3%	670,000	35.7%	33.6%	37.8%	238,900	51.2%
Females	49.7%	662,200	34.4%	32.6%	36.2%	227,900	48.8%
Total, Ages 18-64	100.0%	1,332,200	35.0%	33.7%	36.4%	466,700	100.0%
Age Group							
18 to 34	48.7%	648,500	37.8%	35.7%	40.0%	245,400	52.0%
35 to 49	32.6%	433,700	37.3%	34.9%	39.6%	161,600	34.2%
50 to 64	18.8%	250,000	26.1%	23.3%	28.9%	65,200	13.8%
Total, Ages 18-64	100.0%	1,332,200	35.1%	33.7%	36.5%	467,600	100.0%
Race/Ethnicity							
White, Non-Hispanic	88.4%	1,177,000	34.0%	32.5%	35.4%	399,800	85.3%
Hispanic	8.3%	110,200	42.1%	36.1%	48.1%	46,400	9.9%
Non-White, Non-Hispanic	3.4%	45,000	50.1%	42.3%	57.9%	22,600	4.8%
Total, Ages 18-64	100.0%	1,332,200	35.1%	33.7%	36.5%	467,300	100.0%
Income							
Less Than \$20,000	13.6%	181,600	40.1%	35.5%	44.7%	72,800	15.3%
\$20,000-\$49,999	47.8%	636,100	35.6%	33.5%	37.7%	226,300	47.5%
\$50,000 or Over	38.6%	514,500	34.5%	32.2%	36.8%	177,500	37.2%
Total, Ages 18-64	100.0%	1,332,200	35.7%	34.2%	37.1%	474,900	101.6%
Education							
Less Than High School	6.0%	80,200	36.9%	30.1%	43.8%	29,600	6.3%
H.S. Grad or G.E.D.	30.1%	400,600	35.2%	32.6%	37.7%	140,900	30.2%
Some Post High School	35.1%	467,100	32.7%	30.4%	35.0%	152,600	32.7%
College Graduate	28.9%	384,300	37.4%	34.9%	40.0%	143,800	30.8%
Total, Ages 18-64	100.0%	1,332,200	35.0%	33.7%	36.4%	466,700	99.8%

1 Rounded to the nearest 100 persons.

2 Plus or minus 95% confidence interval.

3 Figures in these columns may not sum to the total because some surveyed individuals had missing values on the grouping variables.

* Does not include tests that were done as part of a blood donation.

Population counts for age, sex, and total population were the 2000 estimates provided by the Governor's Office of Planning and Budget. Population count estimates for race/ethnicity, income, and education populations were derived from averaging three years of the BRFSS surveys from 1999-2001.

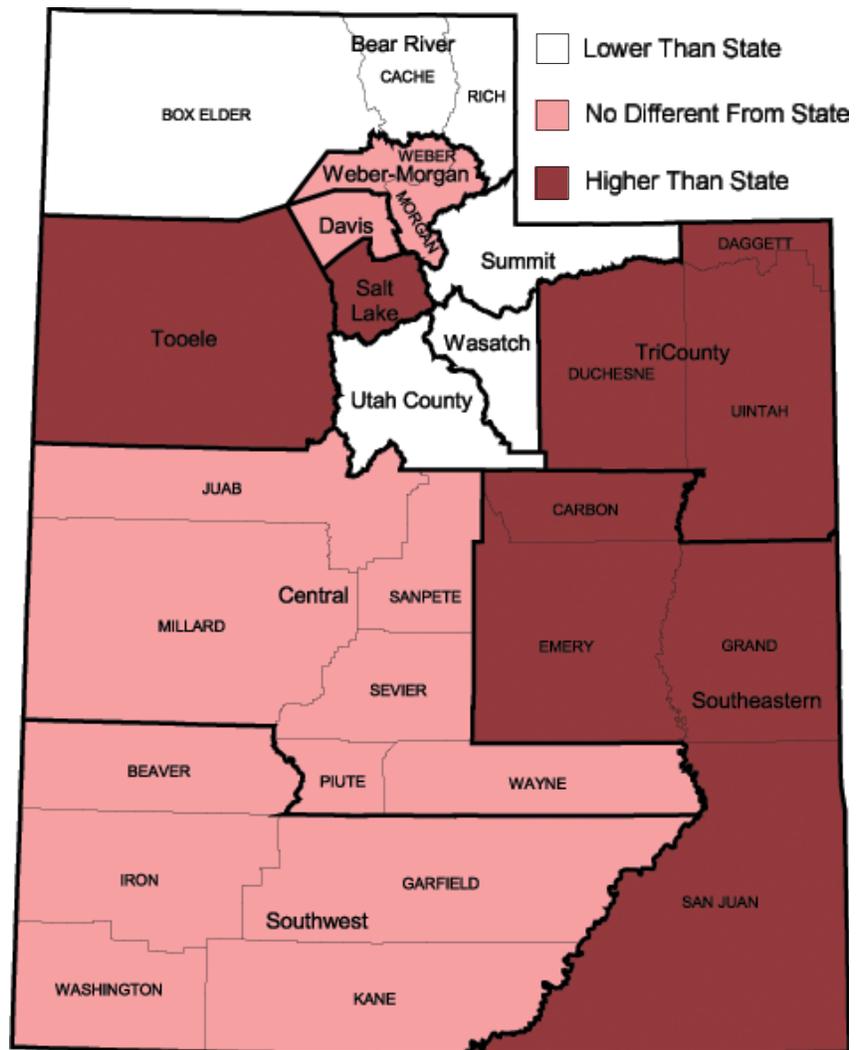
Current Cigarette Smoking



Questions: *Have you smoked at least 100 cigarettes in your entire life? Do you now smoke cigarettes every day, some days, or not at all?*

More than 440,000 U.S. deaths each year are attributed to cigarette smoking, making it the leading preventable cause of death in the United States. Smoking increases the risk for chronic lung disease, coronary heart disease, and stroke, as well as cancer of the lungs, larynx, esophagus, mouth, and bladder. In addition, smoking contributes to cancer of the cervix, pancreas, and kidneys. Smoking during pregnancy is associated with miscarriage, low birth weight, and sudden infant death syndrome. The BRFSS defines current smokers as anyone who has ever smoked 100 cigarettes or more and currently smokes every day or some days.

Current Cigarette Smoking by Whether the Local Health District Percentage Differed From the State, Utah Adults Ages 18+, 1999-2001



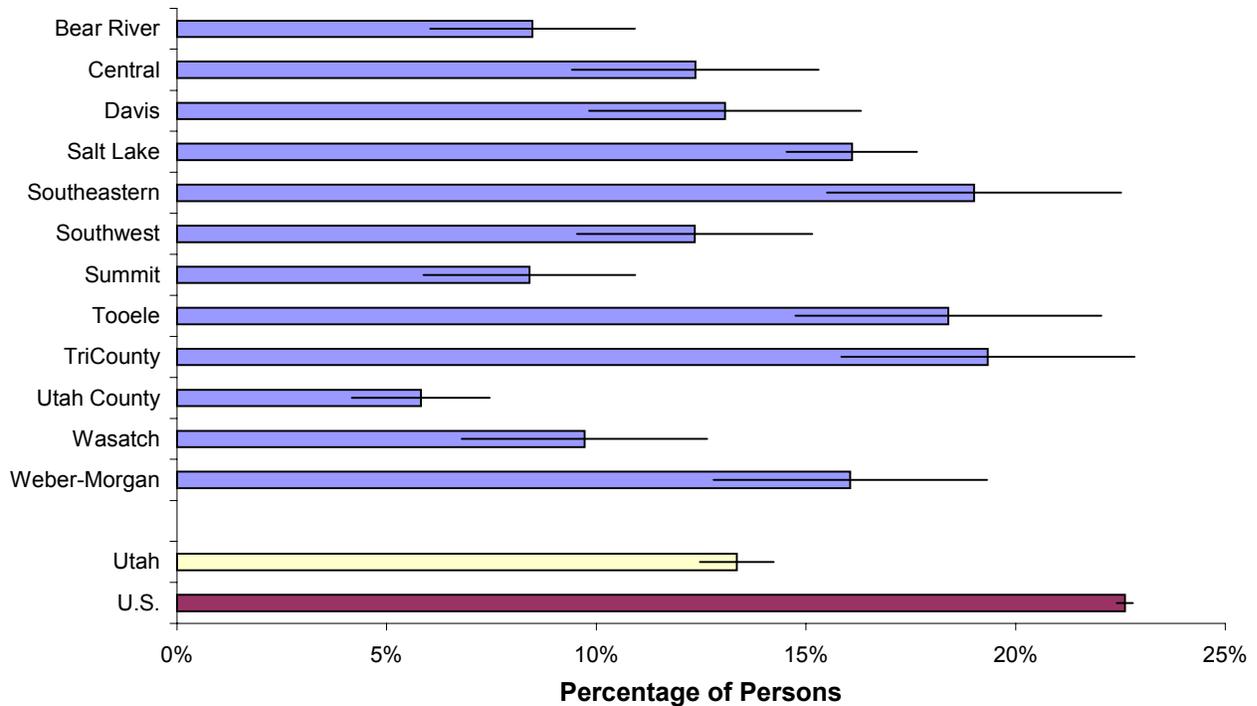
- Adults in the Salt Lake Valley, Tooele County, TriCounty and Southeastern Utah Health Districts were more likely to report current cigarette smoking than the state average, while in Bear River, Summit County, Wasatch County, and Utah County Health Districts, adults were less likely to report current smoking.
- Utah's age adjusted smoking rate (13.0%) was significantly less than the U.S. rate (22.7%). Utah has had the lowest smoking rate of the participating states for all years that the BRFSS has been conducted.
- The graph with crude rates illustrates a large variation in adult smoking rates with a low of 5.8% in Utah County Health District up to 19.3% in TriCounty Health District.

Age adjusted to the U.S. 2000 standard population. Percentage for a local health district was considered different from the state percentage if its 95% confidence interval did not include the state percentage. Note: Current cigarette smoking is defined as anyone who has smoked 100 cigarettes or more and currently smokes every day or some days. Source: Behavioral Risk Factor Surveillance System



Current Cigarette Smoking

Percentage of Persons Who Reported Current Cigarette Smoking*
by Local Health District, Utah, and U.S., Adults Ages 18+, 1999-2001



* crude rates

Note: Current cigarette smoking is defined as anyone who has smoked 100 cigarettes or more and currently smokes every day or some days.

Source: Behavioral Risk Factor Surveillance System

District	Sample Size	Total Number of Adults	Crude Rates			Age-adjusted Rates**		
			Number of Adults Who Smoke	Percent	95% CI Range	Percent	95% CI Range	
Bear River	616	91,817	7,800	8.5%	6.0% 10.9%	7.9%	5.7% 10.2%	
Central	615	43,286	5,400	12.4%	9.4% 15.3%	13.0%	9.9% 16.0%	
Davis	587	155,816	20,400	13.1%	9.8% 16.3%	12.8%	9.7% 15.8%	
Salt Lake	2,690	627,857	101,100	16.1%	14.5% 17.7%	15.6%	14.1% 17.1%	
Southeastern	583	36,451	6,900	19.0%	15.5% 22.5%	19.1%	15.7% 22.6%	
Southwest	648	97,595	12,100	12.4%	9.5% 15.2%	12.5%	9.6% 15.3%	
Summit	605	21,092	1,800	8.4%	5.9% 10.9%	8.2%	5.7% 10.7%	
Tooele	709	27,012	5,000	18.4%	14.8% 22.1%	18.2%	14.7% 21.7%	
TriCounty	598	26,359	5,100	19.3%	15.8% 22.8%	19.2%	15.7% 22.6%	
Utah County	877	245,264	14,300	5.8%	4.2% 7.5%	5.8%	4.1% 7.5%	
Wasatch	552	10,154	1,000	9.7%	6.8% 12.7%	9.7%	6.9% 12.6%	
Weber-Morgan	614	140,822	22,600	16.1%	12.8% 19.3%	16.1%	12.9% 19.3%	
Utah	9,694	1,523,525	203,400	13.4%	12.5% 14.2%	13.0%	12.1% 13.8%	
U.S.				22.6%	22.4% 22.8%	22.7%	22.5% 22.9%	

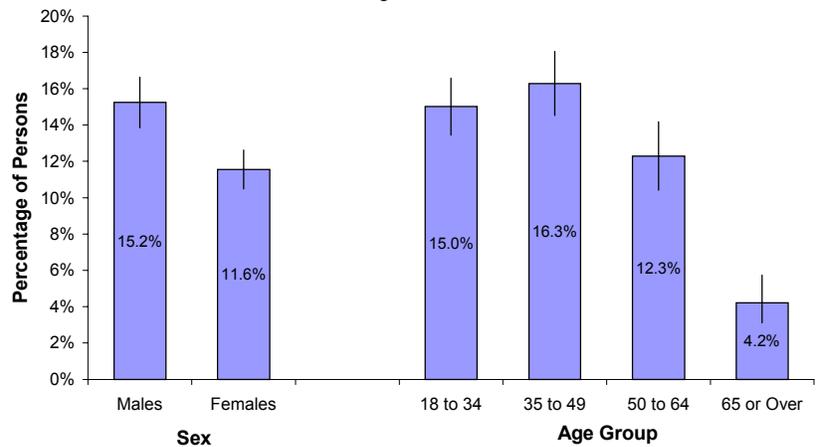
** Age adjusted to U.S. 2000 standard population

Current Cigarette Smoking



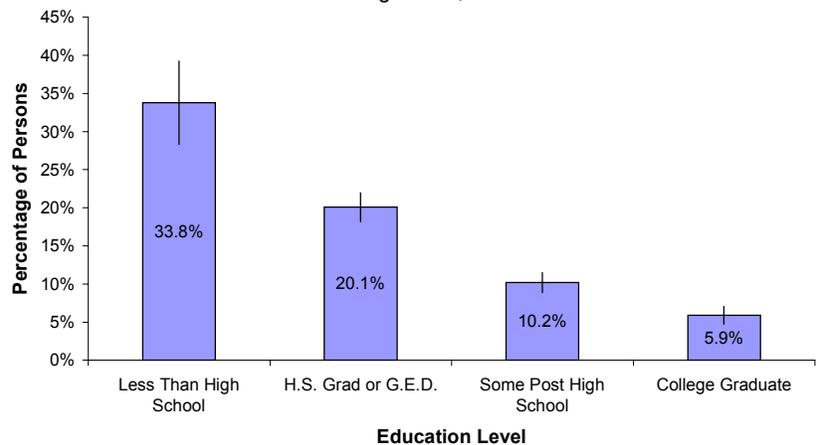
- Men were more likely to report current smoking (15.2%) than women (11.6%).
- Current smoking was higher in the younger age groups; 15.0% for ages 18-34 and 16.3% for ages 35-49. It then decreased to 12.3% for ages 50-64 and was only 4.2% for ages 65+.

Percentage of Persons Who Reported Current Cigarette Smoking* by Sex and Age, Utah Adults Ages 18+, 1999-2001



- Smoking prevalence decreased with increased education. It was highest among those with less than a high school education (33.8%).

Percentage of Persons Who Reported Current Cigarette Smoking* by Education, Utah Adults Ages 18+, 1999-2001



* Current cigarette smoking is defined as anyone who has smoked 100 cigarettes or more and currently smokes everyday or somedays.

The Tobacco Prevention and Control Program (TPCP) at the Utah Department of Health oversees a comprehensive statewide tobacco control program. This program includes the “Truth About Tobacco” media campaign, statewide and local prevention and cessation services, and initiatives to improve tobacco-related policies. To receive more information about tobacco prevention and control programs in Utah, call the Tobacco Free Resource Line at 1-877-220-3466. To receive help or information on quitting tobacco use, call the Utah Tobacco Quit Line at 1-888-567-TRUTH.

Utah Objective: same as HP2010.

HP2010 Objective (related) 27-1a: Reduce adult cigarette smoking to 12% (age adjusted to the U.S. 2000 standard population).



Current Cigarette Smoking

Percentage of Persons Who Reported Current Cigarette Smoking* by Selected Demographic Characteristics, Utah Adults Ages 18+, 1999 - 2001.

Demographic Subgroup	Utah Population		Survey Estimates				
	Distribution	Number of Persons ¹	Percentage of Persons Who Reported Current Smoking ²			Number of Persons ^{1,3}	Distribution of Persons Who Reported Current Smoking by Category
			95% Confidence Intervals				
			Lower	Upper			
Cigarette Smoking Status							
Current Daily Smokers	9.7%	147,200					
Current Some Day Smokers	3.7%	56,200					
Former Smokers	17.6%	267,700					
Never Smoked	69.1%	1,052,400					
Total, All Adults	100.0%	1,523,500					
Sex							
Males	49.5%	753,700	15.2%	13.8%	16.6%	114,900	56.4%
Females	50.5%	769,800	11.6%	10.5%	12.6%	88,900	43.6%
Total, All Adults	100.0%	1,523,500	13.4%	12.5%	14.2%	203,400	100.0%
Age Group							
18 to 34	42.6%	648,500	15.0%	13.5%	16.6%	97,400	47.1%
35 to 49	28.5%	433,700	16.3%	14.5%	18.1%	70,600	34.1%
50 to 64	16.4%	250,000	12.3%	10.4%	14.2%	30,700	14.8%
65 or Over	12.6%	191,300	4.2%	3.1%	5.7%	8,100	3.9%
Total, All Adults	100.0%	1,523,500	13.4%	12.5%	14.2%	203,400	100.0%
Race/Ethnicity							
White, Non-Hispanic	88.4%	1,346,000	12.8%	11.9%	13.8%	172,800	84.6%
Hispanic	8.3%	126,000	16.8%	12.7%	20.8%	21,100	10.3%
Non-White, Non-Hispanic	3.4%	51,500	20.1%	14.4%	25.8%	10,300	5.0%
Total, All Adults	100.0%	1,523,500	13.4%	12.5%	14.2%	203,400	100.0%
Income							
Less Than \$20,000	13.6%	207,700	20.2%	17.4%	23.1%	42,000	20.7%
\$20,000-\$49,999	47.8%	727,500	14.7%	13.4%	16.1%	107,000	52.7%
\$50,000 or Over	38.6%	588,400	9.2%	7.9%	10.6%	54,100	26.6%
Total, All Adults	100.0%	1,523,500	13.4%	12.5%	14.2%	203,400	100.0%
Education							
Less Than High School	6.0%	91,700	33.8%	28.3%	39.3%	31,000	15.2%
H.S. Grad or G.E.D.	30.1%	458,100	20.1%	18.2%	22.0%	92,000	45.3%
Some Post High School	35.1%	534,100	10.2%	8.9%	11.5%	54,400	26.8%
College Graduate	28.9%	439,500	5.9%	4.7%	7.1%	25,900	12.7%
Total, All Adults	100.0%	1,523,500	13.4%	12.5%	14.2%	203,400	100.0%

1 Rounded to the nearest 100 persons.

2 Plus or minus 95% confidence interval.

3 Figures in these columns may not sum to the total because some surveyed individuals had missing values on the grouping variables.

* Current cigarette smoking is defined as anyone who has smoked 100 cigarettes or more and currently smokes everyday or somedays.

Population counts for age, sex, and total population were the 2000 estimates provided by the Governor's Office of Planning and Budget. Population count estimates for race/ethnicity, income, and education populations were derived from averaging three years of the BRFSS surveys from 1999-2001.

Quit Smoking Attempt

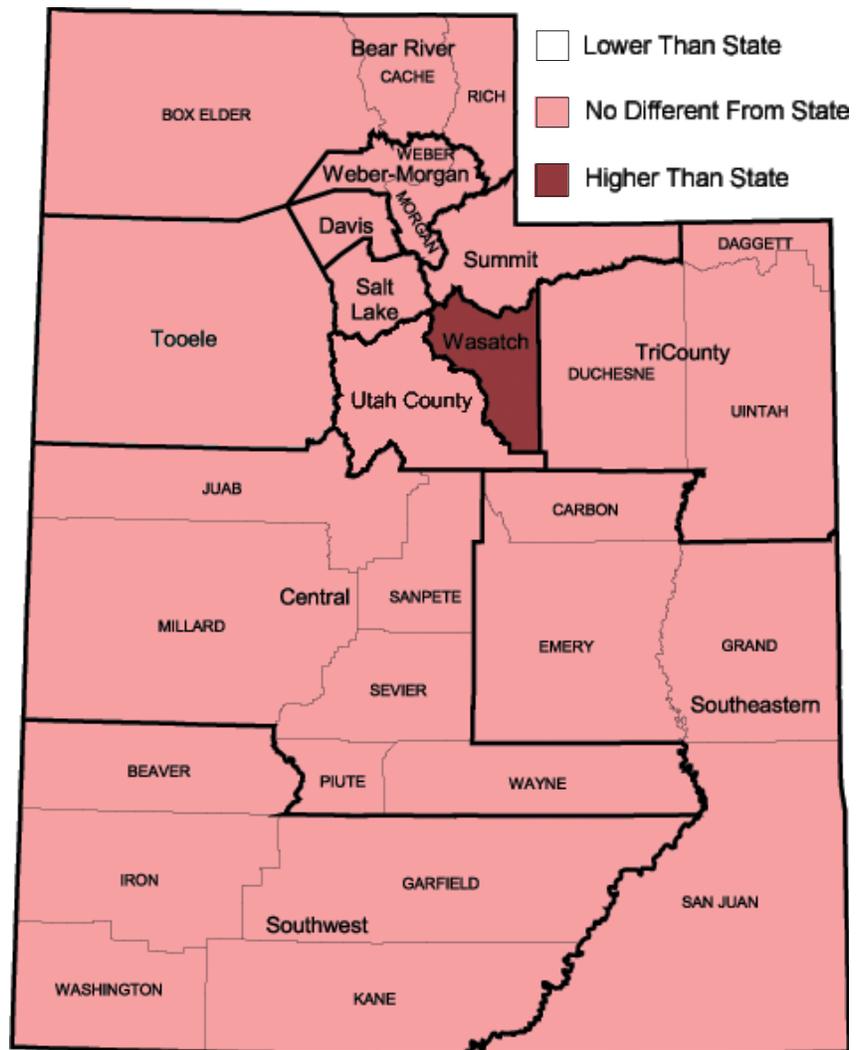


Question: During the past 12 months, have you stopped smoking for one day or longer because you were trying to quit smoking?

There is overwhelming evidence that the nicotine found in tobacco is addictive, making it very difficult for people to quit smoking. Smokers often try to quit more than once before they succeed. Quitting smoking carries major and immediate health benefits for men and women of all ages, even those in the older age groups who have smoked for many years. Quitting smoking decreases the risk of: cancers of the lung, mouth, larynx, bladder, kidney, pancreas, and cervix; respiratory diseases such as emphysema, chronic bronchitis, pneumonia, and chronic obstructive pulmonary disease (COPD); and cardiovascular diseases such as stroke and heart disease. This analysis was limited to current smokers who smoked everyday.

- The map shows that when comparing the age-adjusted data for each health district to the state's overall rate, current smokers living in the Wasatch County Health District were more likely to try quitting.
- Utah's overall age-adjusted rate for quit smoking attempt was 53.1%. This was not significantly different than the U.S. rate of 49.7%. Utah was still below the HP2010 objective of 75%.
- Crude rates for quit attempt ranged from 45.8% in Summit County Health District to a high of 66.3% in Utah County Health District.

Quit Smoking Attempt in Past 12 Months by Whether the Local Health District Percentage Differed From the State, Utah Adult Current Daily Smokers Ages 18+, 1999-2001



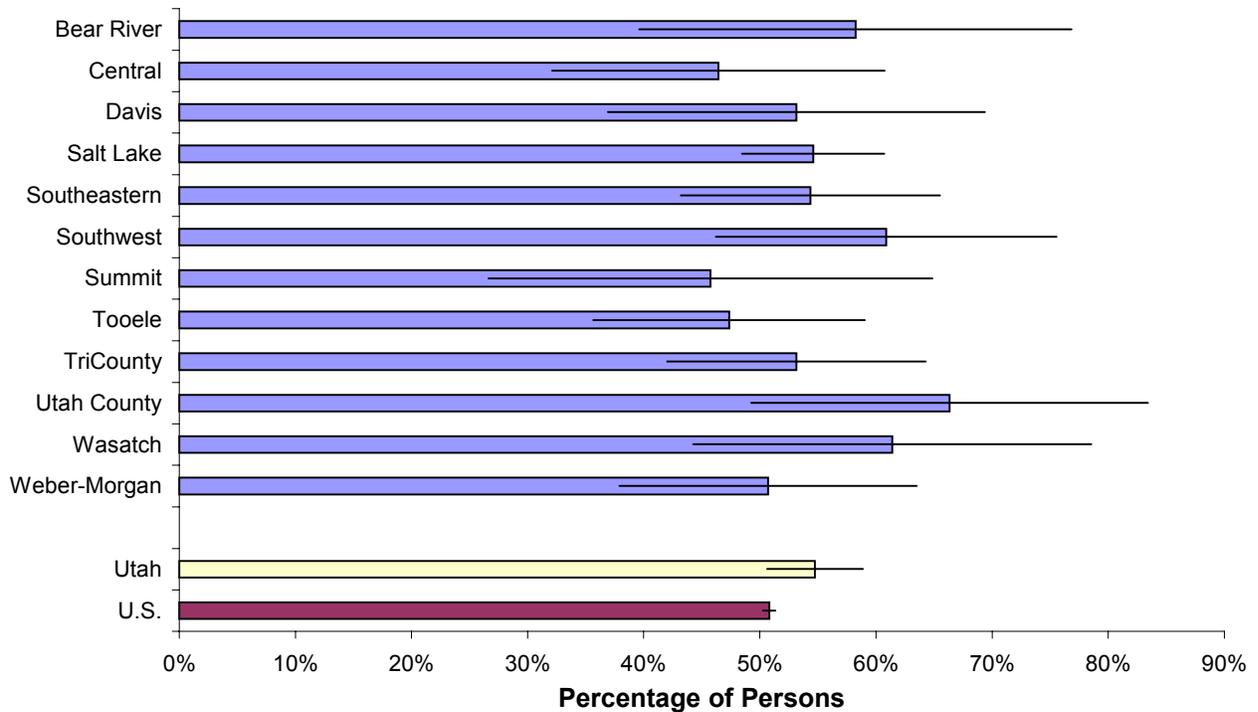
Age adjusted to the U.S. 2000 standard population. Percentage for a local health district was considered different from the state percentage if its 95% confidence interval did not include the state percentage. Note: Quit attempt is defined as quitting smoking for one day or longer in the past 12 months for current smokers who smoke every day. Source: Behavioral Risk Factor Surveillance System



Quit Smoking Attempt

Percentage of Current Daily Smokers Who Reported a Quit Attempt in the Past 12 Months*

by Local Health District, Utah, and U.S., Adults Ages 18+, 1999-2001



* crude rates

Note: Quit attempt is defined as quitting smoking for 1 day or longer in the past 12 months for current smokers who smoke every day.
Source: Behavioral Risk Factor Surveillance System

District	Sample Size	Total Number of Current Daily Smokers	Crude Rates			Age-adjusted Rates**		
			Number of Smokers With Quit Attempt	Percent	95% CI Range	Percent	95% CI Range	
Bear River	37	7,786	4,500	58.2%	39.6% 76.8%	51.7%	37.5% 65.9%	
Central	62	5,350	2,500	46.4%	32.1% 60.7%	45.1%	32.4% 57.8%	
Davis	58	20,365	10,800	53.2%	36.9% 69.4%	46.9%	34.0% 59.8%	
Salt Lake	310	101,085	55,200	54.6%	48.5% 60.7%	52.2%	46.6% 57.8%	
Southeastern	93	6,929	3,800	54.4%	43.2% 65.5%	51.8%	40.2% 63.4%	
Southwest	58	12,053	7,300	60.9%	46.2% 75.6%	62.5%	51.9% 73.0%	
Summit	34	1,774	800	45.8%	26.6% 64.9%	50.9%	36.9% 64.8%	
Tooele	117	4,970	2,400	47.4%	35.7% 59.0%	45.3%	35.7% 54.9%	
TriCounty	100	5,098	2,700	53.2%	42.0% 64.3%	50.0%	39.8% 60.3%	
Utah County	41	14,274	9,500	66.3%	49.3% 83.4%	66.6%	50.0% 83.1%	
Wasatch	37	987	600	61.4%	44.3% 78.5%	72.3%	61.6% 82.9%	
Weber-Morgan	77	22,616	11,500	50.7%	37.9% 63.5%	48.0%	36.1% 60.0%	
Utah	1,181	203,391	111,300	54.7%	50.6% 58.9%	53.1%	49.0% 57.2%	
U.S.				50.8%	50.3% 51.3%	49.7%	49.1% 50.3%	

** Age adjusted to U.S. 2000 standard population

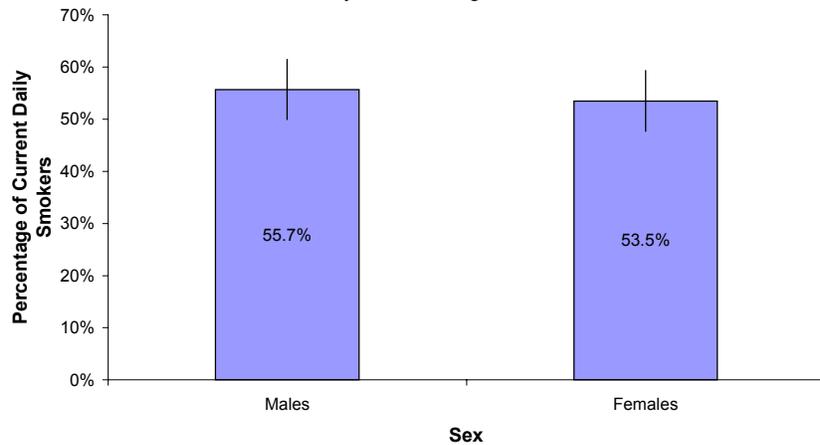
Note: Estimates based on a sample size of less than 50 should be considered statistically unreliable.

Quit Smoking Attempt



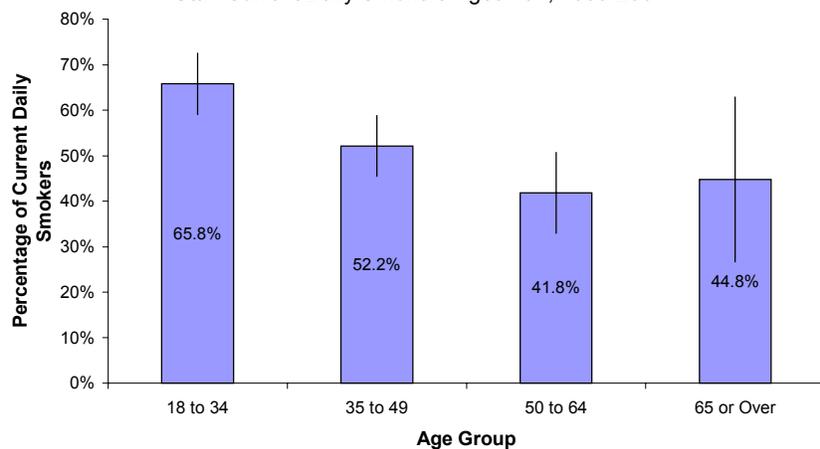
- There was no difference in the percentage of men and women smokers who reported a quit attempt.

Percentage of Current Daily Smokers Who Reported a Quit Attempt* in the Past 12 Months by Sex, Utah Current Daily Smokers Ages 18+, 1999-2001



- Utah's young adult smokers ages 18-34 were the most likely to report a quit attempt (65.8%). The older age groups were less likely to try quitting (41.8%-52.2%).
- There was no significant difference in this measure for the education and income groups used (not graphed).

Percentage of Current Daily Smokers Who Reported a Quit Attempt* in the Past 12 Months by Age, Utah Current Daily Smokers Ages 18+, 1999-2001



* Quit attempt is defined as quitting smoking for one day or longer in the past year, for current smokers who smoke daily.

The Tobacco Prevention and Control Program at the Utah Department of Health encourages teen and adult tobacco users to quit by providing information and education about the negative health effects of tobacco use and by supporting diverse statewide cessation services. The Utah Tobacco Quit Line (1-888-567-TRUTH) offers free cessation counseling to Utah teens and adults. For a listing of community-based programs to quit tobacco use, call the Tobacco Free Resource Line at 1-877-220-3466.

Utah Objective: same as HP2010 Objective.

HP2010 Objective 27-5: Increase smoking cessation attempts by adult smokers to 75% (age adjusted to the U.S. 2000 standard population).



Quit Smoking Attempt

Percentage of Current Daily Smokers Who Reported a Quit Attempt* in the Past 12 Months by Selected Demographic Characteristics, Utah Current Daily Smokers Ages 18+, 1999 - 2001.

Demographic Subgroup	Utah Population		Survey Estimates				
	Distribution	Number of Persons ¹	Percentage of Current Daily Smokers Who Reported Quit Attempt in Past 12 Months ²			Number of Persons ^{1,3}	Distribution of Current Daily Smokers Who Reported Quit Attempt in Past 12 Months by Category
			95% Confidence Intervals Lower		Upper		
Quit Attempt							
Yes	54.7%	80,600					
No	45.3%	66,600					
Total, Current Daily Smokers	100.0%	147,200					
Sex							
Males	56.4%	83,000	55.7%	50.0%	61.5%	46,200	57.3%
Females	43.6%	64,200	53.5%	47.7%	59.4%	34,400	42.7%
Total, Current Daily Smokers	100.0%	147,200	54.7%	50.6%	58.9%	80,600	100.0%
Age Group							
18 to 34	47.1%	69,300	65.8%	59.0%	72.6%	45,600	54.5%
35 to 49	34.1%	50,300	52.2%	45.5%	58.9%	26,200	31.3%
50 to 64	14.8%	21,900	41.8%	33.0%	50.7%	9,200	11.0%
65 or Over	3.9%	5,800	44.8%	26.7%	62.9%	2,600	3.1%
Total, Current Daily Smokers	100.0%	147,200	54.7%	50.5%	58.8%	80,600	100.0%
Race/Ethnicity							
White, Non-Hispanic	85.3%	125,500	54.0%	49.6%	58.5%	67,800	83.7%
Hispanic	10.3%	15,200	64.8%	48.9%	80.6%	9,800	12.1%
Non-White, Non-Hispanic	4.4%	6,500	52.8%	32.3%	73.3%	3,400	4.2%
Total, Current Daily Smokers	100.0%	147,200	54.7%	50.4%	58.7%	80,600	100.0%
Income							
Less Than \$20,000	20.7%	30,400	51.1%	42.7%	59.5%	15,500	19.4%
\$20,000-\$49,999	52.7%	77,500	59.7%	54.0%	65.4%	46,300	57.8%
\$50,000 or Over	26.6%	39,200	46.6%	37.3%	55.9%	18,300	22.8%
Total, Current Daily Smokers	100.0%	147,200	54.7%	50.2%	58.7%	80,600	100.0%
Education							
Less Than High School	15.2%	22,400	58.4%	48.3%	68.5%	13,100	16.2%
H.S. Grad or G.E.D.	45.3%	66,600	53.0%	46.9%	59.0%	35,300	43.7%
Some Post High School	26.8%	39,400	55.5%	47.6%	63.5%	21,900	27.1%
College Graduate	12.7%	18,800	55.4%	40.8%	69.9%	10,400	12.9%
Total, Current Daily Smokers	100.0%	147,200	54.7%	50.6%	58.9%	80,600	100.0%

1 Rounded to the nearest 100 persons.

2 Plus or minus 95% confidence interval.

3 Figures in these columns may not sum to the total because some surveyed individuals had missing values on the grouping variables.

* Quit attempt is defined as quitting smoking for 1 day or longer in the past year, for current smokers who smoke daily.

Population counts for age, sex, and total population were the 2000 estimates provided by the Governor's Office of Planning and Budget. Population count estimates for race/ethnicity, income, and education populations were derived from averaging three years of the BRFSS surveys from 1999-2001.

Chronic Drinking

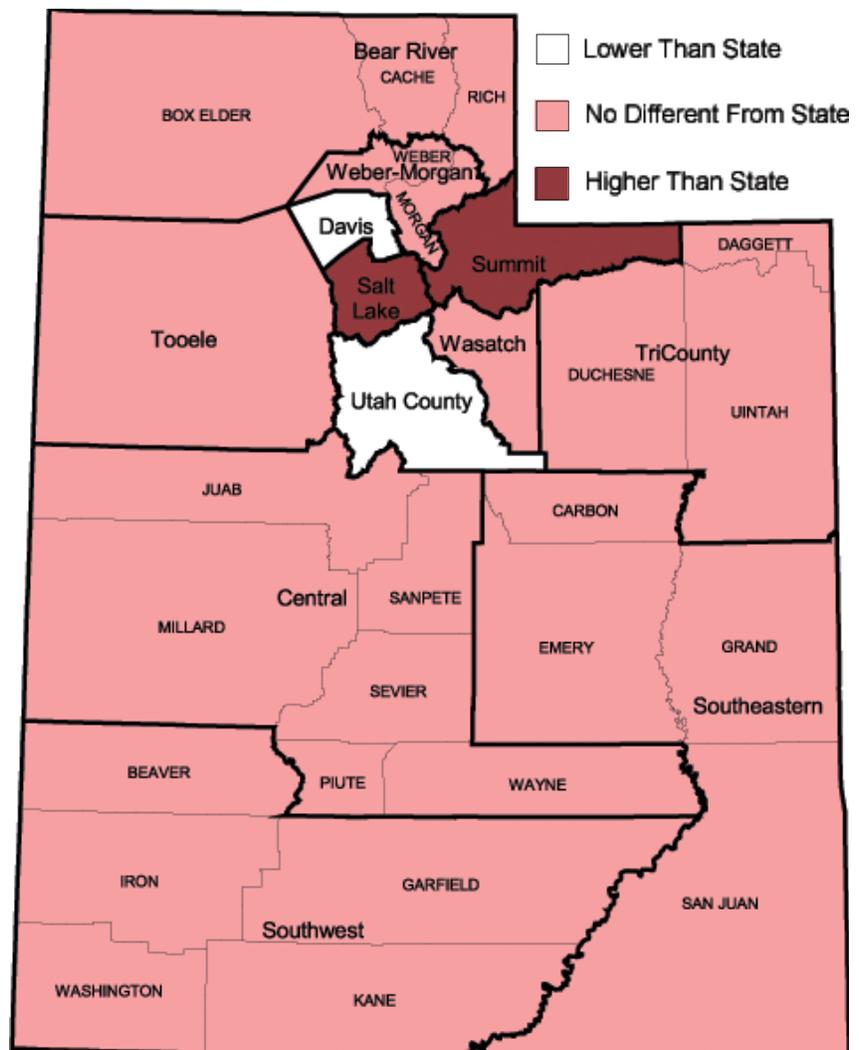


Questions: *A drink of alcohol is 1 can or bottle of beer, 1 glass of wine, 1 can or bottle of wine cooler, 1 cocktail, or 1 shot of liquor. During the past 30 days, how often have you had at least one drink of any alcoholic beverage? On the days when you drank, about how many drinks did you drink on the average?*

Alcohol misuse can lead to health problems and accidental injuries. It is also associated with disruptions in family, work, and personal life. Alcohol use during pregnancy is known to cause fetal alcohol syndrome. Chronic drinking is defined as 60 or more alcoholic drinks in the past 30 days for men and 30 or more alcoholic drinks in the past 30 days for women. These guidelines differ because women metabolize alcohol less efficiently than men. In addition, females have less body water than males, so they become more intoxicated than males after drinking the same amount of alcohol.

- Adults in Summit County and Salt Lake Valley Health Districts were more likely to report chronic drinking than the state as a whole, whereas adults in Davis County and Utah County Health Districts were less likely.
- Looking at the crude rates, estimated chronic drinking in Utah was 4.2% which was quite a bit lower than the U.S. rate of 6.7%. Even after age adjustment, Utah's rate was lower than the U.S. rate.

Chronic Drinking by Whether the Local Health District Percentage Differed From the State, Utah Adults Ages 18+, 1999 and 2001



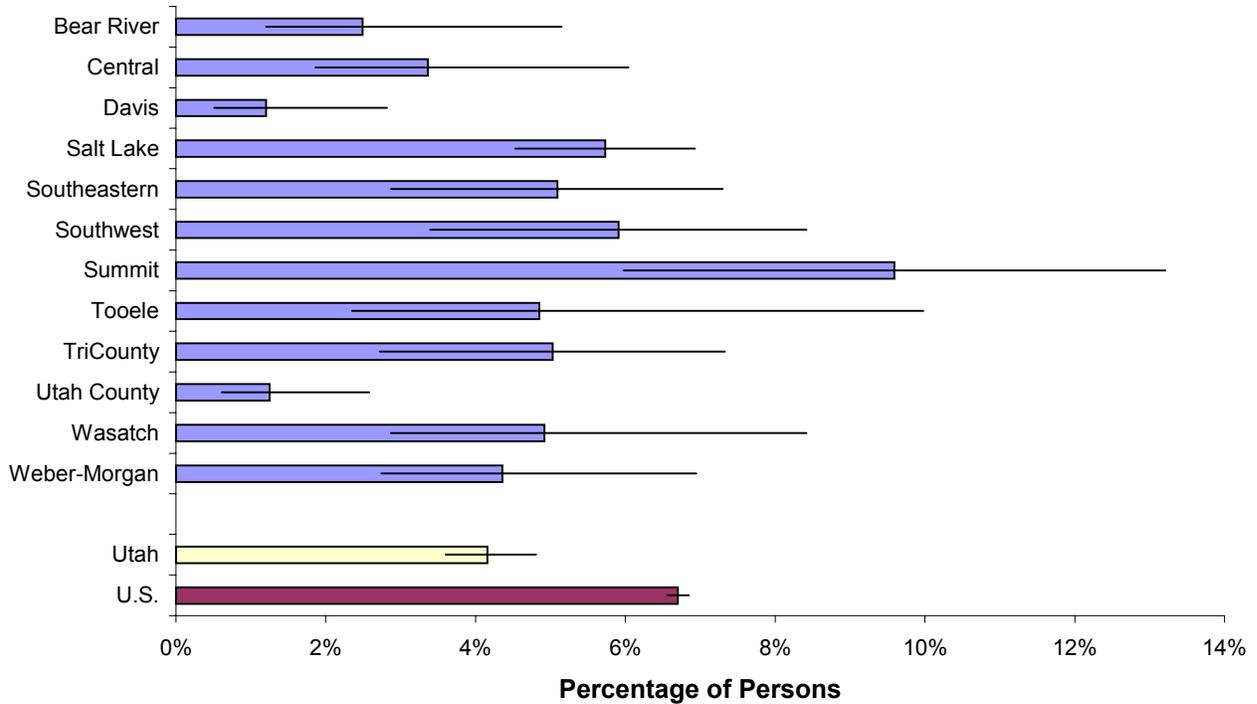
Age adjusted to the U.S. 2000 standard population. Percentage for a local health district was considered different from the state percentage if its 95% confidence interval did not include the state percentage. Note: Chronic drinking is defined as drinking 60 or more alcoholic drinks in the past 30 days for men, and 30 or more alcoholic drinks in the past 30 days for women. Source: Behavioral Risk Factor Surveillance System



Chronic Drinking

Percentage of Persons Who Reported Chronic Drinking in the Past 30 Days*

by Local Health District, Utah, and U.S. Adults Ages 18+, 1999 and 2001



* crude rates

Note: Chronic drinking is defined as drinking 60 or more alcoholic drinks in the past 30 days for men, and 30 or more alcoholic drinks in the past 30 days for women.

Source: Behavioral Risk Factor Surveillance System

District	Sample Size	Total Number of Adults	Crude Rates			Age-adjusted Rates**		
			Number of Chronic Drinkers	Percent	95% CI Range	Percent	95% CI Range	
Bear River	445	91,817	2,300	2.5%	1.2% 5.2%	2.2%	1.2% 4.2%	
Central	418	43,286	1,500	3.4%	1.9% 6.0%	3.5%	2.0% 6.1%	
Davis	393	155,816	1,900	1.2%	0.5% 2.8%	1.3%	0.5% 3.0%	
Salt Lake	1,860	627,857	36,000	5.7%	4.5% 6.9%	5.7%	4.5% 6.9%	
Southeastern	415	36,451	1,900	5.1%	2.9% 7.3%	5.0%	3.2% 7.7%	
Southwest	459	97,595	5,800	5.9%	3.4% 8.4%	5.9%	3.3% 8.5%	
Summit	378	21,092	2,000	9.6%	6.0% 13.2%	9.5%	5.9% 13.0%	
Tooele	530	27,012	1,300	4.9%	2.4% 10.0%	4.6%	2.4% 8.7%	
TriCounty	405	26,359	1,300	5.0%	2.7% 7.3%	5.0%	3.1% 7.8%	
Utah County	610	245,264	3,100	1.3%	0.6% 2.6%	1.1%	0.5% 2.2%	
Wasatch	412	10,154	500	4.9%	2.9% 8.4%	4.9%	2.9% 8.4%	
Weber-Morgan	446	140,822	6,100	4.4%	2.7% 7.0%	4.4%	2.8% 7.0%	
Utah	6,771	1,523,525	63,400	4.2%	3.6% 4.8%	4.0%	3.5% 4.7%	
U.S.				6.7%	6.6% 6.9%	6.7%	6.6% 6.9%	

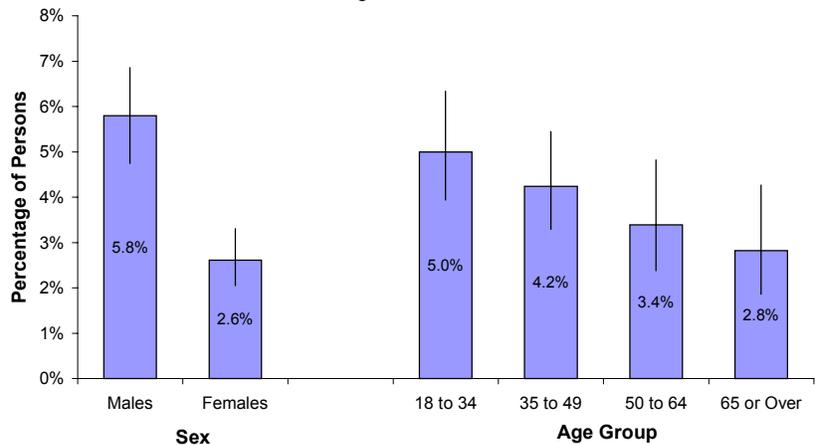
** Age adjusted to U.S. 2000 standard population

Chronic Drinking



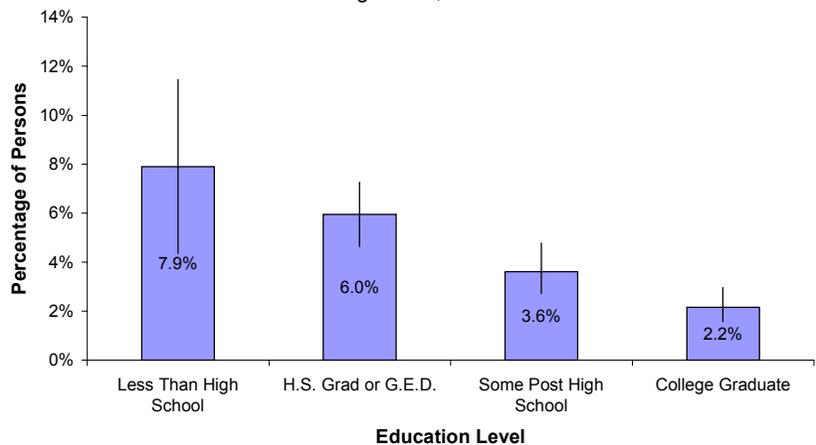
- Men were more likely to report chronic drinking (5.8%) than were women (2.6%).
- Chronic drinking decreased with age, from 5.0% for young adults ages 18-34, to 2.8% for older adults ages 65 or over.

Percentage of Persons Who Reported Chronic Drinking* in the Past 30 Days by Sex and Age, Utah Adults Ages 18+, 1999 and 2001



- The prevalence of chronic drinking decreased with increasing education. The highest percentage of chronic drinkers were adults with less than a high school education (7.9%).

Percentage of Persons Who Reported Chronic Drinking* in the Past 30 Days by Education, Utah Adults Ages 18+, 1999 and 2001



* Chronic drinking is defined as drinking 60 or more alcoholic drinks in the past 30 days for men, and 30 or more alcoholic drinks in the past 30 days for women.

Utah Objective: No objective listed.

HP2010 Objective 26-13 (related): Reduce the proportion of adults who exceed guidelines for low-risk drinking.



Chronic Drinking

Percentage of Persons Who Reported Chronic Drinking* in the Past 30 Days by Selected Demographic Characteristics, Utah Adults Ages 18+, 1999 and 2001.

Demographic Subgroup	Utah Population		Survey Estimates				
	Distribution	Number of Persons ¹	Percentage of Persons Who Reported Chronic Drinking ²			Number of Persons ^{1,3}	Distribution of Persons Who Reported Chronic Drinking by Category
			95% Confidence Intervals				
			Lower	Upper			
Chronic Drinking							
Yes	4.2%	63,400					
No	95.8%	1,460,100					
Total, All Adults	100.0%	1,523,500					
Sex							
Males	49.5%	753,700	5.8%	4.8%	6.9%	43,700	68.5%
Females	50.5%	769,800	2.6%	2.1%	3.3%	20,100	31.5%
Total, All Adults	100.0%	1,523,500	4.2%	3.6%	4.8%	63,400	100.0%
Age Group							
18 to 34	42.6%	648,500	5.0%	3.9%	6.3%	32,400	50.1%
35 to 49	28.5%	433,700	4.2%	3.3%	5.5%	18,400	28.4%
50 to 64	16.4%	250,000	3.4%	2.4%	4.8%	8,500	13.1%
65 or Over	12.6%	191,300	2.8%	1.9%	4.3%	5,400	8.3%
Total, All Adults	100.0%	1,523,500	4.2%	3.6%	4.8%	63,400	100.0%
Race/Ethnicity							
White, Non-Hispanic	88.4%	1,346,000	4.1%	3.5%	4.8%	55,500	87.5%
Hispanic	8.3%	126,000	4.9%	2.8%	8.3%	6,100	9.6%
Non-White, Non-Hispanic	3.4%	51,500	3.9%	1.6%	9.7%	2,000	3.2%
Total, All Adults	100.0%	1,523,500	4.2%	3.6%	4.8%	63,400	100.0%
Income							
Less Than \$20,000	13.6%	207,700	7.4%	5.0%	9.8%	15,400	23.0%
\$20,000-\$49,999	47.8%	727,500	4.3%	3.5%	5.4%	31,400	46.8%
\$50,000 or Over	38.6%	588,400	3.5%	2.7%	4.5%	20,300	30.3%
Total, All Adults	100.0%	1,523,500	4.2%	3.6%	4.8%	63,400	100.0%
Education							
Less Than High School	6.0%	91,700	7.9%	4.4%	11.5%	7,200	11.4%
H.S. Grad or G.E.D.	30.1%	458,100	6.0%	4.6%	7.3%	27,300	43.1%
Some Post High School	35.1%	534,100	3.6%	2.7%	4.8%	19,300	30.5%
College Graduate	28.9%	439,500	2.2%	1.6%	3.0%	9,500	15.0%
Total, All Adults	100.0%	1,523,500	4.2%	3.6%	4.8%	63,400	100.0%

1 Rounded to the nearest 100 persons.

2 Plus or minus 95% confidence interval.

3 Figures in these columns may not sum to the total because some surveyed individuals had missing values on the grouping variables.

* Chronic drinking is defined as drinking 60 or more alcoholic drinks in the past 30 days for men, and 30 or more alcoholic drinks in the past 30 days for women.

Population counts for age, sex, and total population were the 2000 estimates provided by the Governor's Office of Planning and Budget. Population count estimates for race/ethnicity, income, and education populations were derived from averaging three years of the BRFSS surveys from 1999-2001.

Binge Drinking



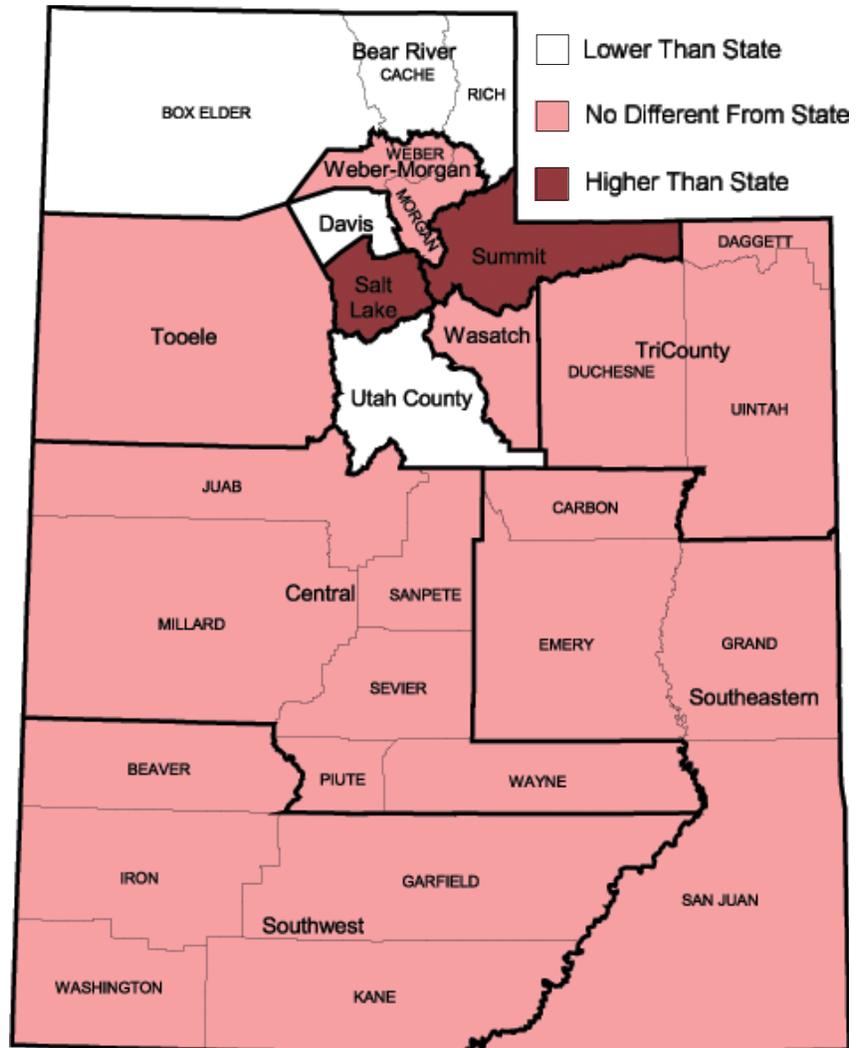
Question: Considering all types of alcoholic beverages, how many times during the past 30 days did you have 5 or more drinks on an occasion?

Binge drinking, which is generally defined as the consumption of five or more alcoholic beverages on one occasion, can result in acute impairment and has many adverse health affects. Binge drinkers are more likely to drive while under the influence of alcohol than non-binge drinkers. Reducing binge drinking among adults is one of the leading health indicators in Healthy People 2010. A drink is defined as one can or bottle of beer (12 ounces), one glass of wine (5 ounces), one can or bottle of wine cooler, one cocktail, or one shot of liquor (1.5 ounces of 80-proof distilled spirits).

The percentage of adults who reported one or more episodes of binge drinking in the past 30 days was used for this report.

- Looking at age-adjusted rates, adults in Salt Lake Valley and Summit County Health Districts were more likely to report a recent binge drinking episode than adults in the state as a whole. Bear River, Davis County, and Utah County Health District residents were less likely to report a recent binge drinking episode. The highest binge drinking rate was in Summit County Health District.
- Combining 1999 and 2001 data, 10.0% of adults in Utah reported at least one binge drinking episode in the past 30 days, which was significantly less than the 14.7% reported by adults in the U.S. as a whole. These rates were very similar after adjusting for age and remained significantly different.

Binge Drinking by Whether the Local Health District Percentage Differed From the State, Utah Adults Ages 18+, 1999 and 2001



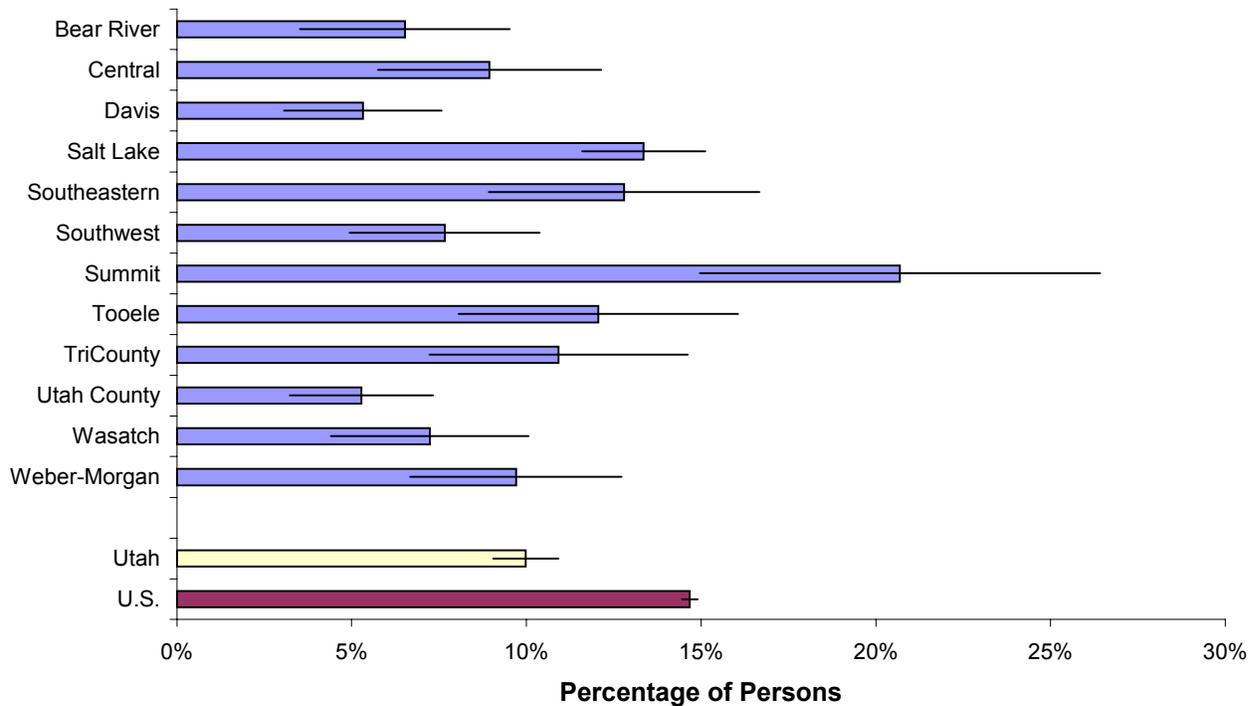
Age adjusted to the U.S. 2000 standard population. Percentage for a local health district was considered different from the state percentage if its 95% confidence interval did not include the state percentage. Note: Binge drinking is defined as having five or more alcoholic drinks on an occasion. Source: Behavioral Risk Factor Surveillance System



Binge Drinking

Percentage of Persons Who Reported Binge Drinking in the Past 30 Days*

by Local Health District, Utah, and U.S., Adults Ages 18+, 1999 and 2001



* crude rates

Note: Binge drinking is defined as having 5 or more alcoholic drinks on an occasion.

Source: Behavioral Risk Factor Surveillance System

District	Sample Size	Total Number of Adults	Crude Rates			Age-adjusted Rates**		
			Number of Binge Drinkers	Percent	95% CI Range	Percent	95% CI Range	
Bear River	445	91,817	6,000	6.5%	3.5% 9.5%	5.9%	3.4% 8.4%	
Central	418	43,286	3,900	9.0%	5.8% 12.1%	9.5%	6.2% 12.8%	
Davis	391	155,816	8,300	5.3%	3.1% 7.6%	5.1%	3.0% 7.2%	
Salt Lake	1,868	627,857	83,800	13.4%	11.6% 15.1%	12.8%	11.2% 14.5%	
Southeastern	418	36,451	4,700	12.8%	8.9% 16.7%	12.8%	9.0% 16.6%	
Southwest	459	97,595	7,500	7.7%	4.9% 10.4%	7.8%	5.0% 10.6%	
Summit	382	21,092	4,400	20.7%	15.0% 26.4%	19.5%	14.5% 24.5%	
Tooele	530	27,012	3,300	12.1%	8.1% 16.1%	11.8%	8.2% 15.5%	
TriCounty	406	26,359	2,900	10.9%	7.2% 14.6%	11.0%	7.3% 14.6%	
Utah County	610	245,264	12,900	5.3%	3.2% 7.3%	5.2%	3.1% 7.3%	
Wasatch	412	10,154	700	7.2%	4.4% 10.1%	7.2%	4.4% 9.9%	
Weber-Morgan	446	140,822	13,700	9.7%	6.7% 12.7%	9.8%	6.8% 12.8%	
Utah	6,785	1,523,525	152,000	10.0%	9.1% 10.9%	9.5%	8.6% 10.4%	
U.S.				14.7%	14.5% 14.9%	14.9%	14.7% 15.1%	

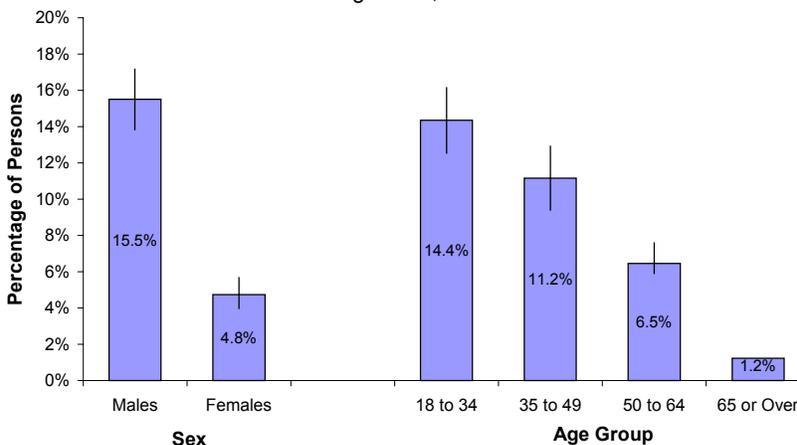
** Age adjusted to U.S. 2000 standard population

Binge Drinking



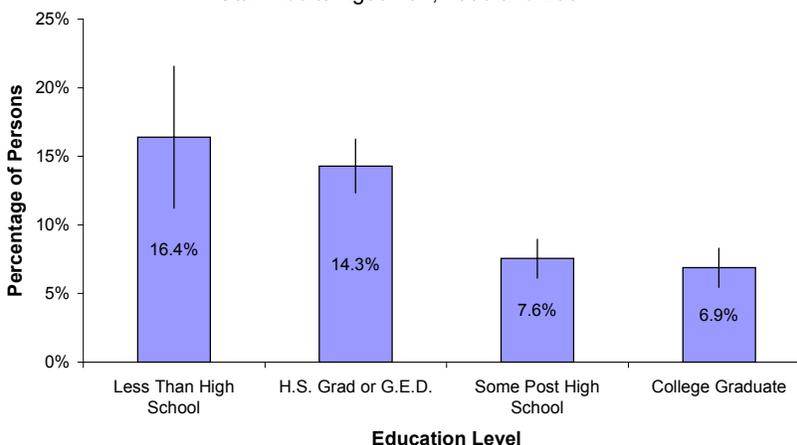
- Men were three times more likely to report recent binge drinking than women; 15.5% vs. 4.8%.
- Binge drinking decreased with increasing age from 14.4% for adults ages 18-34 to 1.2% for older adults ages 65+.

Percentage of Persons Who Reported Binge Drinking* in the Past 30 Days by Sex and Age, Utah Adults Ages 18+, 1999 and 2001



- Utah's Hispanic adults were more likely to report binge drinking (16.9%) than the White, non-Hispanic adult population (9.3%) (not graphed).
- Reported binge drinking decreased with increases in both of the common socio-economic indicators of education and annual household income (income not graphed).

Percentage of Persons Who Reported Binge Drinking* in the Past 30 Days by Education, Utah Adults Ages 18+, 1999 and 2001



*Binge drinking is defined as having 5 or more alcoholic drinks on an occasion one or more times in the past 30 days.

Utah Objective: No objective listed.

HP2010 Objective 26-13 (related): Reduce the proportion of adults who exceed guidelines for low-risk drinking.



Binge Drinking

Percentage of Persons Who Reported Binge Drinking* in the Past 30 Days by Selected Demographic Characteristics, Utah Adults Ages 18+, 1999 and 2001.

Demographic Subgroup	Utah Population		Survey Estimates				
	Distribution	Number of Persons ¹	Percentage of Persons Who Reported Binge Drinking ²			Number of Persons ^{1,3}	Distribution of Persons Who Reported Binge Drinking by Category
			95% Confidence Intervals				
			Lower	Upper			
Binge Drinking							
Yes	10.0%	152,000					
No	90.0%	1,371,500					
Total, All Adults	100.0%	1,523,500					
Sex							
Males	49.5%	753,700	15.5%	13.8%	17.2%	116,900	76.2%
Females	50.5%	769,800	4.8%	4.0%	5.7%	36,600	23.8%
Total, All Adults	100.0%	1,523,500	10.0%	9.1%	10.9%	152,000	100.0%
Age Group							
18 to 34	42.6%	648,500	14.4%	12.5%	16.2%	93,100	58.2%
35 to 49	28.5%	433,700	11.2%	9.4%	13.0%	48,400	30.2%
50 to 64	16.4%	250,000	6.5%	4.7%	8.2%	16,200	10.1%
65 or Over	12.6%	191,300	1.2%	0.7%	2.4%	2,400	1.5%
Total, All Adults	100.0%	1,523,500	10.0%	9.1%	10.9%	152,000	100.0%
Race/Ethnicity							
White, Non-Hispanic	88.4%	1,346,000	9.1%	8.1%	10.0%	122,100	79.8%
Hispanic	8.3%	126,000	16.9%	11.9%	21.9%	21,300	13.9%
Non-White, Non-Hispanic	3.4%	51,500	18.7%	11.8%	25.7%	9,700	6.3%
Total, All Adults	100.0%	1,523,500	10.0%	9.1%	10.9%	152,000	100.0%
Income							
Less Than \$20,000	13.6%	207,700	13.8%	10.7%	16.9%	28,700	18.1%
\$20,000-\$49,999	47.8%	727,500	10.2%	8.8%	11.6%	74,400	46.9%
\$50,000 or Over	38.6%	588,400	9.4%	7.8%	11.0%	55,400	35.0%
Total, All Adults	100.0%	1,523,500	10.0%	9.1%	10.9%	152,000	100.0%
Education							
Less Than High School	6.0%	91,700	16.4%	11.2%	21.6%	15,000	9.9%
H.S. Grad or G.E.D.	30.1%	458,100	14.3%	12.3%	16.3%	65,500	43.3%
Some Post High School	35.1%	534,100	7.6%	6.1%	9.0%	40,300	26.7%
College Graduate	28.9%	439,500	6.9%	5.5%	8.3%	30,300	20.1%
Total, All Adults	100.0%	1,523,500	10.0%	9.1%	10.9%	152,000	100.0%

1 Rounded to the nearest 100 persons.

2 Plus or minus 95% confidence interval.

3 Figures in these columns may not sum to the total because some surveyed individuals had missing values on the grouping variables.

* Binge drinking is defined as having 5 or more alcoholic drinks on an occasion one or more times in the past 30 days.

Population counts for age, sex, and total population were the 2000 estimates provided by the Governor's Office of Planning and Budget. Population count estimates for race/ethnicity, income, and education populations were derived from averaging three years of the BRFSS surveys from 1999-2001.

Daily Vegetable Consumption

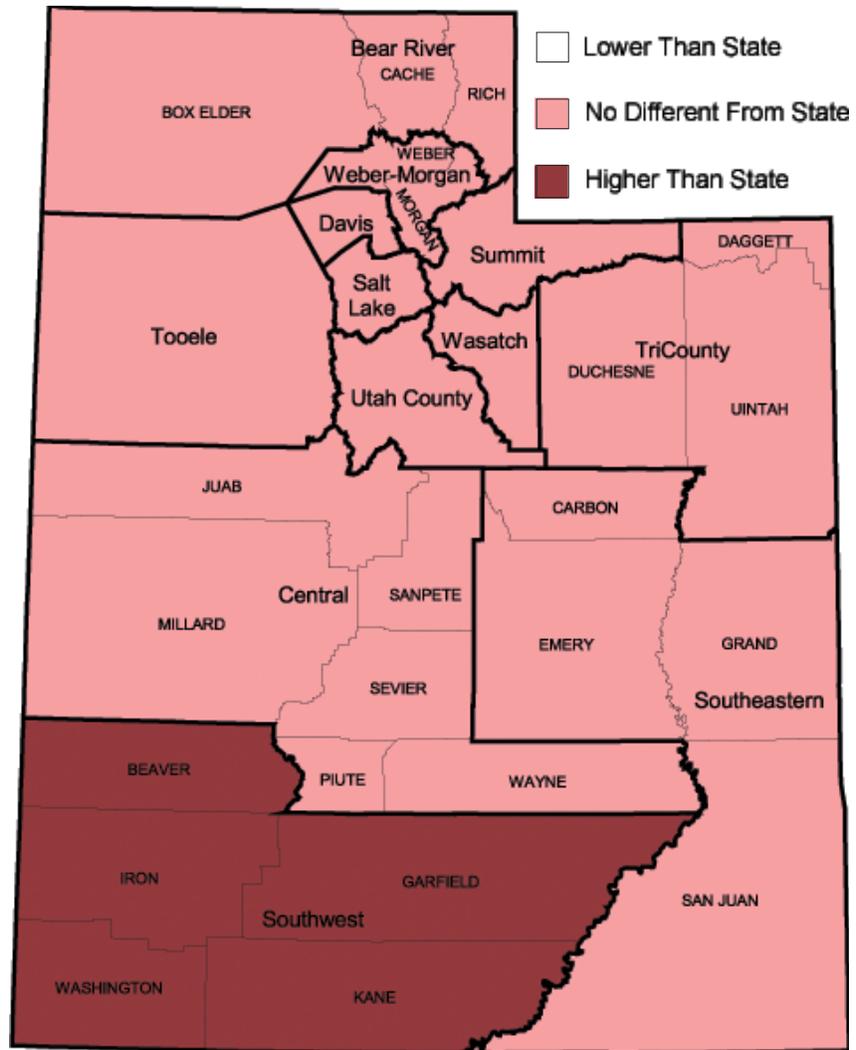


Questions: *How often do you eat green salad? How often do you eat potatoes not including french fries, fried potatoes, or potato chips? How often do you eat carrots? Not counting carrots, potatoes, or salad, how many servings of vegetables do you usually eat?*

The *Dietary Guidelines for Americans* recommend at least three servings of vegetables daily. It is best to consume a variety of vegetables in order to receive a broad range of beneficial vitamins and minerals. The Healthy People 2010 goal specifically states that one third of vegetables be the dark green or orange variety. Vegetables should be prepared or served with little or no fat. Using a set of questions about daily vegetable consumption, the data were analyzed to determine the percentage of adults who consumed at least three servings of vegetables daily. The BRFSS excludes french fries, fried potatoes, and potato chips when asking about potato consumption as one of the set of questions.

- Using age adjusted data for years 1999 and 2000, the map illustrates that adults in the Southwest Utah Health District were more likely to report consuming three servings of vegetables daily than adults in the state as a whole.
- The percentage of Utah adults who reported eating three or more servings of vegetables daily in 1990 and 2000 combined was lower than that of the U.S. for 2000 only (22.6% vs. 26.5% respectively, age-adjusted rates).

Three or More Vegetables Daily by Whether the Local Health District Percentage Differed From the State, Utah Adults Ages 18+, 1999-2000



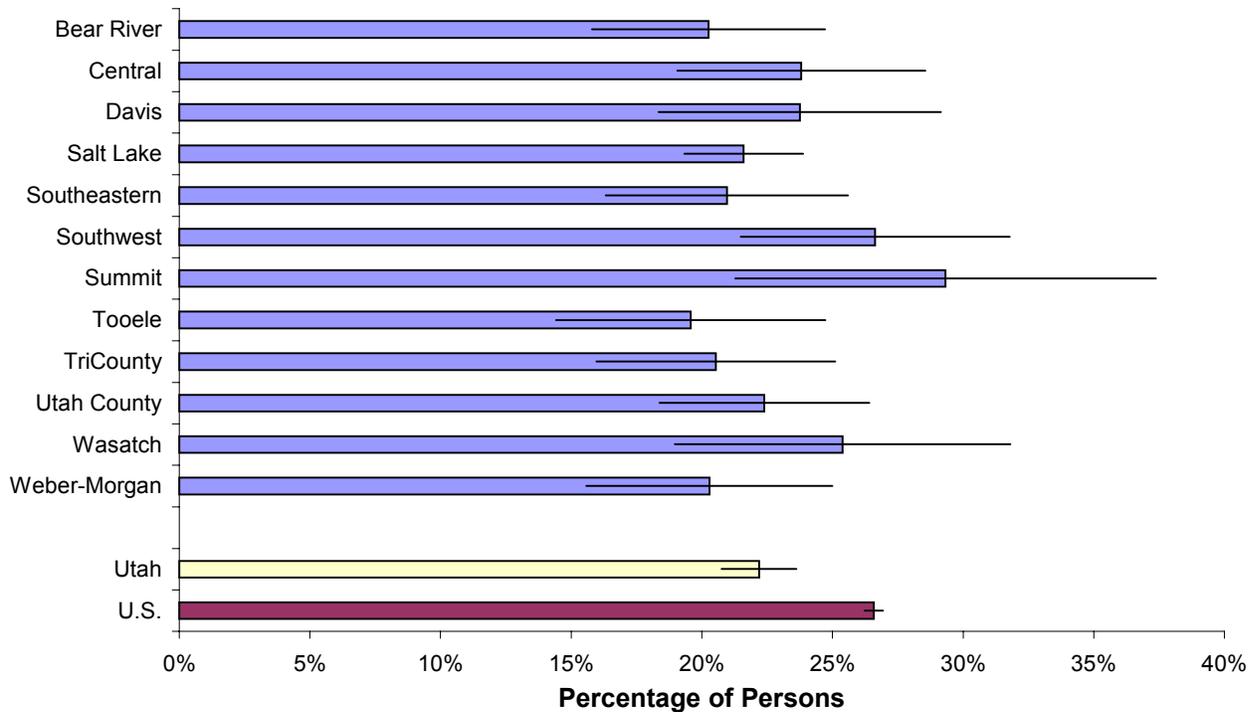
Age adjusted to the U.S. 2000 standard population. Percentage for a local health district was considered different from the state percentage if its 95% confidence interval did not include the state percentage. Source: Behavioral Risk Factor Surveillance System



Daily Vegetable Consumption

Percentage of Persons Who Reported Eating Three or More Vegetables Daily*

by Local Health District, Utah, and U.S., Adults Ages 18+, 1999-2000



* crude rates
Source: Behavioral Risk Factor Surveillance System

District	Sample Size	Total Number of Adults	Crude Rates			Age-adjusted Rates**		
			Number Eating Enough Vegetables	Percent	95% CI Range	Percent	95% CI Range	
Bear River	379	91,817	18,600	20.3%	15.8% 24.7%	20.6%	16.1% 25.1%	
Central	389	43,286	10,300	23.8%	19.1% 28.6%	23.7%	19.1% 28.3%	
Davis	370	155,816	37,000	23.8%	18.4% 29.2%	23.4%	18.3% 28.4%	
Salt Lake	1,671	627,857	135,600	21.6%	19.3% 23.9%	21.7%	19.4% 24.0%	
Southeastern	359	36,451	7,600	21.0%	16.3% 25.6%	20.6%	16.2% 25.1%	
Southwest	412	97,595	26,000	26.6%	21.5% 31.8%	28.3%	23.0% 33.5%	
Summit	392	21,092	6,200	29.3%	21.3% 37.4%	27.3%	20.9% 33.7%	
Tooele	481	27,012	5,300	19.6%	14.4% 24.7%	19.6%	14.9% 24.4%	
TriCounty	369	26,359	5,400	20.5%	16.0% 25.1%	21.7%	17.2% 26.2%	
Utah County	531	245,264	54,900	22.4%	18.4% 26.4%	25.5%	21.3% 29.8%	
Wasatch	327	10,154	2,600	25.4%	19.0% 31.8%	25.6%	19.3% 32.0%	
Weber-Morgan	374	140,822	28,600	20.3%	15.6% 25.0%	20.2%	15.6% 24.9%	
Utah	6,054	1,523,525	338,100	22.2%	20.8% 23.6%	22.6%	21.2% 24.0%	
U.S.				26.6%	26.2% 26.9%	26.5%	26.2% 26.9%	

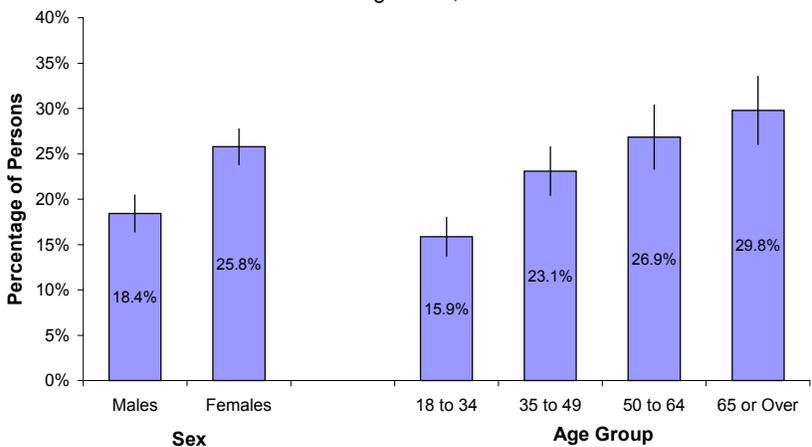
** Age adjusted to U.S. 2000 standard population
U.S. rate includes only year 2000.

Daily Vegetable Consumption



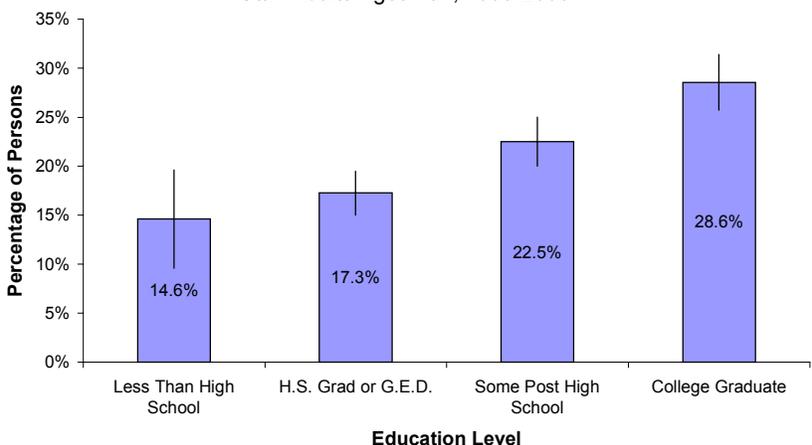
- Utah women were more likely to report eating three or more servings of vegetables daily (25.8%) than men (18.4%).
- Older adults were more likely to report three servings of vegetables daily.

Percentage of Persons Who Reported Eating Three or More Vegetables Daily by Sex and Age, Utah Adults Ages 18+, 1999-2000



- The percentage of adults who reported three or more servings of vegetables daily increased with education level from 14.6% for adults with less than high school to 28.6% for adults with a college degree or more.

Percentage of Persons Who Reported Eating Three or More Vegetables Daily by Education, Utah Adults Ages 18+, 1999-2000



The Cardiovascular Health Program in the Utah Department of Health is home to the 5 a Day Program for the state of Utah. The 5 a Day Association of Utah is a non-profit organization comprised of over 40 public and private companies committed to promoting the importance of eating more fruits and vegetables for better health. Since 1994, the 5 a Day Association of Utah and the Cardiovascular Health Program have provided the state of Utah with educational materials, resources and 5 a Day promotional activities. 5 a Day at School has reached more than 90 percent of Utah's elementary schools. 5 A Day is also working with organizations statewide on strategies to target populations with low consumption of fruits and vegetables.

Utah Objective: By 2005, increase the proportion of persons who consume at least three daily servings of vegetables to 52% (age adjusted to the U.S. 2000 standard population).

HP2010 Objective 19-6: Increase the proportion of persons aged two years or over who consume at least three daily servings of vegetables, with at least one-third being dark green or orange vegetables to 50% (age adjusted to the U.S. 2000 standard population).



Daily Vegetable Consumption

Percentage of Persons Who Reported Eating Three or More Vegetables Daily by Selected Demographic Characteristics, Utah Adults Ages 18+, 1999 - 2000.

Demographic Subgroup	Utah Population		Survey Estimates				
	Distribution	Number of Persons ¹	Percentage of Persons Who Reported Eating Three+ Daily Servings of Vegetables ²			Number of Persons ^{1,3}	Distribution of Persons Who Reported Eating Three+ Daily Servings of Vegetables by Category
			95% Confidence Intervals	Lower	Upper		
Vegetable Servings							
Less Than 1 per Day or Never	13.0%	198,200					
1 to 2 Times per Day	64.8%	987,200					
3 or More Times per Day	22.2%	338,100					
Total, All Adults	100.0%	1,523,500					
Sex							
Males	49.5%	753,700	18.4%	16.4%	20.5%	138,800	41.2%
Females	50.5%	769,800	25.8%	23.8%	27.8%	198,500	58.8%
Total, All Adults	100.0%	1,523,500	22.2%	20.8%	23.6%	338,100	100.0%
Age Group							
18 to 34	42.6%	648,500	15.9%	13.7%	18.0%	102,900	31.4%
35 to 49	28.5%	433,700	23.1%	20.4%	25.8%	100,200	30.6%
50 to 64	16.4%	250,000	26.9%	23.3%	30.4%	67,100	20.5%
65 or Over	12.6%	191,300	29.8%	26.0%	33.6%	57,000	17.4%
Total, All Adults	100.0%	1,523,500	22.2%	20.8%	23.6%	338,100	100.0%
Race/Ethnicity							
White, Non-Hispanic	88.4%	1,346,000	22.5%	21.0%	24.0%	302,900	89.8%
Hispanic	8.3%	126,000	18.6%	13.4%	23.8%	23,400	6.9%
Non-White, Non-Hispanic	3.4%	51,500	21.1%	13.1%	29.1%	10,900	3.2%
Total, All Adults	100.0%	1,523,500	22.2%	20.8%	23.6%	338,100	100.0%
Income							
Less Than \$20,000	13.6%	207,700	19.5%	15.9%	23.0%	40,400	12.3%
\$20,000-\$49,999	47.8%	727,500	20.5%	18.4%	22.5%	148,800	45.2%
\$50,000 or Over	38.6%	588,400	23.8%	21.2%	26.5%	140,000	42.5%
Total, All Adults	100.0%	1,523,500	22.2%	20.8%	23.6%	338,100	100.0%
Education							
Less Than High School	6.0%	91,700	14.6%	9.6%	19.6%	13,400	4.0%
H.S. Grad or G.E.D.	30.1%	458,100	17.3%	15.0%	19.5%	79,100	23.4%
Some Post High School	35.1%	534,100	22.5%	20.0%	25.0%	120,200	35.5%
College Graduate	28.9%	439,500	28.6%	25.7%	31.4%	125,600	37.1%
Total, All Adults	100.0%	1,523,500	22.2%	20.8%	23.6%	338,100	100.0%

1 Rounded to the nearest 100 persons.

2 Plus or minus 95% confidence interval.

3 Figures in these columns may not sum to the total because some surveyed individuals had missing values on the grouping variables.

Population counts for age, sex, and total population were the 2000 estimates provided by the Governor's Office of Planning and Budget. Population count estimates for race/ethnicity, income, and education populations were derived from averaging three years of the BRFSS surveys from 1999-2001.

Daily Fruit Consumption

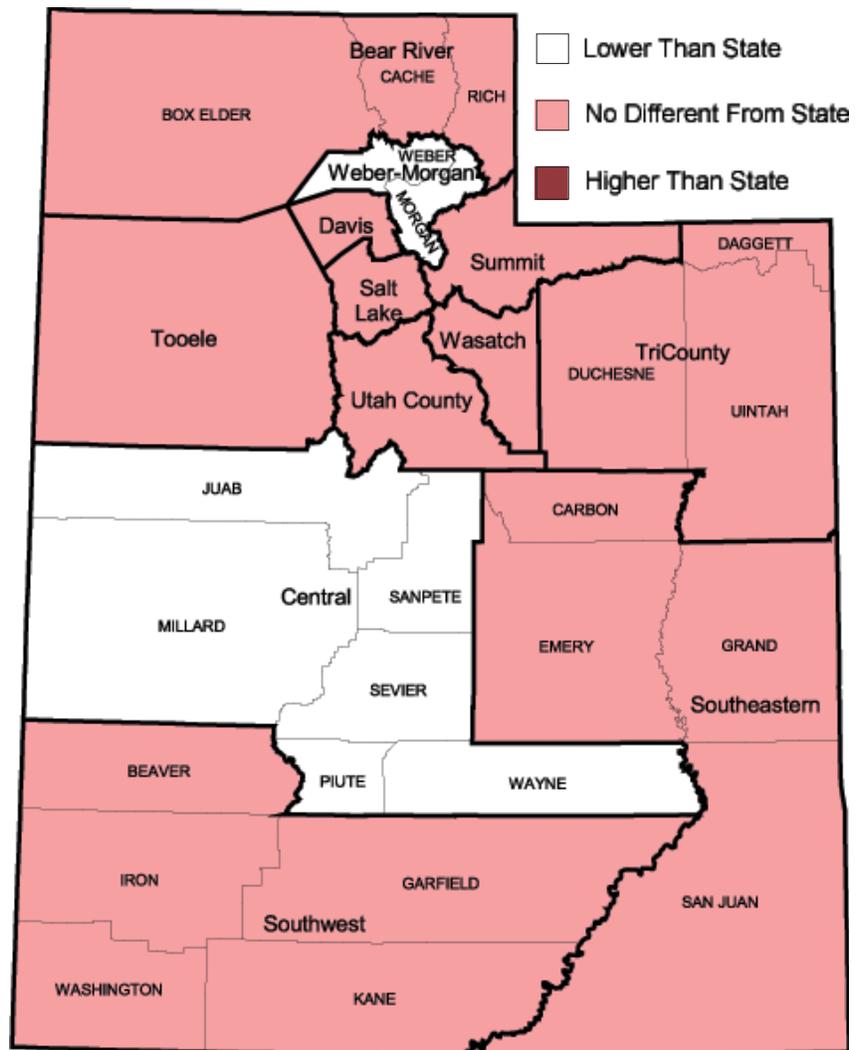


Questions: How often do you drink fruit juices such as orange, grapefruit, or tomato? Not counting juice, how often do you eat fruit?

The *Dietary Guidelines for Americans* recommend that persons ages two years or over choose a healthful assortment of foods that includes vegetables and fruits. Fruits and vegetables are rich in a variety of nutrients and low in fat. Research suggests that a diet high in fruits and vegetables is associated with reduced risk for some types of cancers, coronary heart disease, diabetes, and other chronic diseases. Fresh and dried fruits should be kept on hand for healthy snacks and used even as a naturally sweet dessert at meals. Using a set of questions about daily fruit and vegetable consumption, the data were analyzed to determine the percentage of adults who consumed at least two servings of fruit daily.

- Using age adjusted data for years 1999 and 2000, the map shows that adults in the Weber-Morgan and Central Utah Health Districts were less likely to consume two servings of fruit daily than adults in the state as a whole. The lowest rate was in Weber-Morgan Health District.
- The percentage of adults who reported eating two or more fruits daily was about the same in Utah as in the entire U.S. (33.8% vs. 34.2% respectively, age-adjusted rates).

Two or More Fruits Daily by Whether the Local Health District Percentage Differed From the State, Utah Adults Ages 18+, 1999-2000



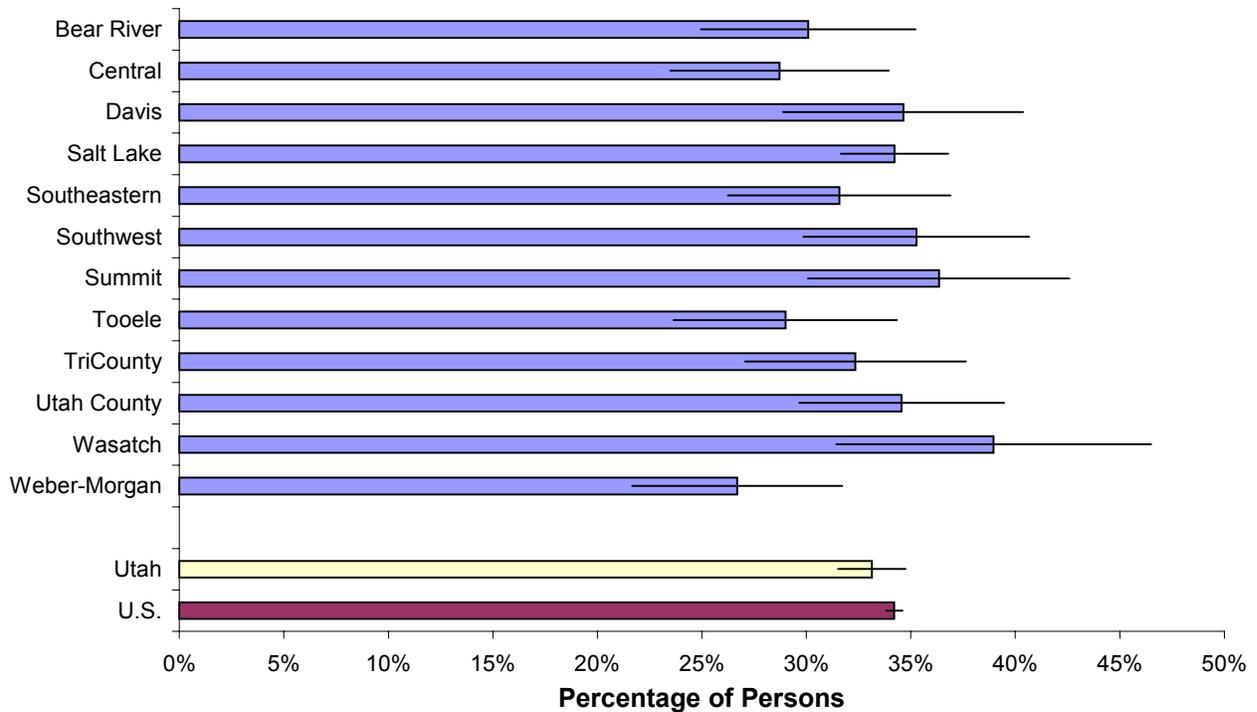
Age adjusted to the U.S. 2000 standard population. Percentage for a local health district was considered different from the state percentage if its 95% confidence interval did not include the state percentage. Source: Behavioral Risk Factor Surveillance System



Daily Fruit Consumption

Percentage of Persons Who Reported Eating Two or More Fruits Daily*

by Local Health District, Utah, and U.S., Adults Ages 18+, 1999-2000



* crude rates
Source: Behavioral Risk Factor Surveillance System

District	Sample Size	Total Number of Adults	Crude Rates			Age-adjusted Rates**		
			Number Eating Enough Fruit	Percent	95% CI Range	Percent	95% CI Range	
Bear River	379	91,817	27,600	30.1%	25.0% 35.2%	29.9%	25.0% 34.8%	
Central	389	43,286	12,400	28.7%	23.5% 33.9%	28.0%	23.1% 32.9%	
Davis	370	155,816	54,000	34.6%	28.9% 40.4%	36.1%	30.3% 41.9%	
Salt Lake	1,671	627,857	214,900	34.2%	31.6% 36.8%	35.0%	32.4% 37.6%	
Southeastern	359	36,451	11,500	31.6%	26.3% 36.9%	31.6%	26.4% 36.9%	
Southwest	412	97,595	34,400	35.3%	29.9% 40.7%	36.3%	31.0% 41.6%	
Summit	392	21,092	7,700	36.3%	30.1% 42.6%	36.5%	30.5% 42.5%	
Tooele	481	27,012	7,800	29.0%	23.7% 34.3%	29.2%	24.2% 34.2%	
TriCounty	369	26,359	8,500	32.3%	27.1% 37.6%	33.4%	28.3% 38.5%	
Utah County	531	245,264	84,700	34.6%	29.7% 39.5%	34.7%	29.9% 39.6%	
Wasatch	327	10,154	4,000	39.0%	31.4% 46.5%	38.8%	32.2% 45.3%	
Weber-Morgan	374	140,822	37,600	26.7%	21.7% 31.7%	26.5%	21.8% 31.1%	
Utah	6,054	1,523,525	504,900	33.1%	31.5% 34.8%	33.8%	32.2% 35.5%	
U.S.				34.2%	33.8% 34.6%	34.2%	33.9% 34.6%	

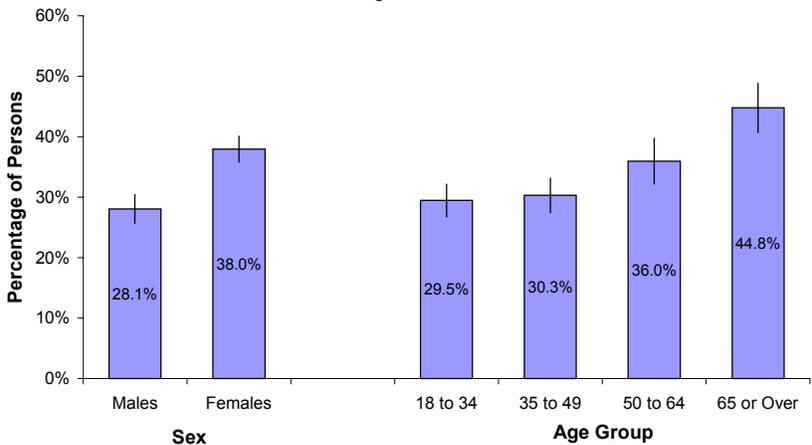
** Age adjusted to U.S. 2000 standard population
U.S. rate includes only year 2000.

Daily Fruit Consumption



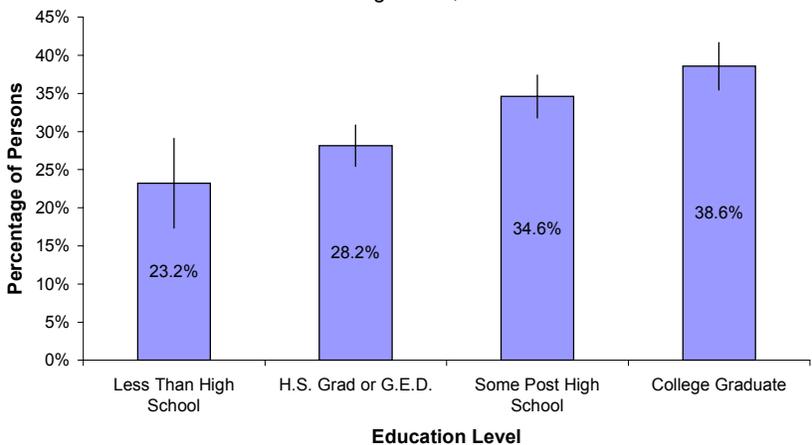
- Women were more likely to report eating two or more servings of fruits daily than were men in Utah (38.0% vs. 28.1% respectively).
- The percentage of adults who reported eating two or more servings of fruits daily increased with age.

Percentage of Persons Who Reported Eating Two or More Fruits Daily by Sex and Age, Utah Adults Ages 18+, 1999-2000



- The percentage of adults who reported two or more servings of fruits daily increased with increasing education from 23.2% for adults with less than high school to 38.6% for Utahns with at least a college degree.

Percentage of Persons Who Reported Eating Two or More Fruits Daily by Education, Utah Adults Ages 18+, 1999-2000



The Cardiovascular Health Program in the Utah Department of Health is home to the 5 a Day Program for the state of Utah. The 5 a Day Association of Utah is a non-profit organization comprised of over 40 public and private companies committed to promoting the importance of eating more fruits and vegetables for better health. Since 1994, the 5 a Day Association of Utah and the Cardiovascular Health Program have provided the state of Utah with educational materials, resources and 5 a Day promotional activities. 5 a Day at School has reached more than 90 percent of Utah's elementary schools. 5 A Day is also working with organizations statewide on strategies to target populations with low consumption of fruits and vegetables.

Utah Objective: By 2005, increase the proportion of persons who consume at least two daily servings of fruit to 48% (age adjusted to the U.S. 2000 standard population).

HP2010 Objective 19-5: Increase the proportion of persons aged two years or over who consume at least two daily servings of fruit to 75% (age adjusted to the U.S. 2000 standard population).



Daily Fruit Consumption

Percentage of Persons Who Reported Eating Two or More Fruits Daily by Selected Demographic Characteristics, Utah Adults Ages 18+, 1999 - 2000.

Demographic Subgroup	Utah Population		Survey Estimates				
	Distribution	Number of Persons ¹	Percentage of Persons Who Reported Eating Two or More Daily Servings of Fruits ²			Number of Persons ^{1,3}	Distribution of Persons Who Reported Eating Two or More Daily Servings of Fruits by Category
			95% Confidence Intervals				
			Lower	Upper			
Fruit Servings							
Less Than 1 per Day or Never	66.9%	1,018,600					
2 or More Times per Day	33.1%	504,900					
Total, All Adults	100.0%	1,523,500					
Sex							
Males	49.5%	753,700	28.1%	25.7%	30.4%	211,600	42.0%
Females	50.5%	769,800	38.0%	35.8%	40.1%	292,200	58.0%
Total, All Adults	100.0%	1,523,500	33.1%	31.5%	34.8%	504,900	100.0%
Age Group							
18 to 34	42.6%	648,500	29.5%	26.7%	32.2%	191,000	38.3%
35 to 49	28.5%	433,700	30.3%	27.4%	33.2%	131,500	26.4%
50 to 64	16.4%	250,000	36.0%	32.2%	39.8%	89,900	18.0%
65 or Over	12.6%	191,300	44.8%	40.7%	48.9%	85,700	17.2%
Total, All Adults	100.0%	1,523,500	33.1%	31.5%	34.8%	504,900	100.0%
Race/Ethnicity							
White, Non-Hispanic	88.4%	1,346,000	33.2%	31.5%	34.9%	446,500	88.5%
Hispanic	8.3%	126,000	32.1%	25.6%	38.6%	40,500	8.0%
Non-White, Non-Hispanic	3.4%	51,500	33.9%	24.9%	42.9%	17,500	3.5%
Total, All Adults	100.0%	1,523,500	33.1%	31.5%	34.8%	504,900	100.0%
Income							
Less Than \$20,000	13.6%	207,700	31.7%	27.3%	36.2%	65,800	13.2%
\$20,000-\$49,999	47.8%	727,500	32.3%	29.9%	34.6%	234,700	47.2%
\$50,000 or Over	38.6%	588,400	33.4%	30.5%	36.3%	196,300	39.5%
Total, All Adults	100.0%	1,523,500	33.1%	31.5%	34.8%	504,900	100.0%
Education							
Less Than High School	6.0%	91,700	23.2%	17.3%	29.1%	21,300	4.2%
H.S. Grad or G.E.D.	30.1%	458,100	28.2%	25.4%	30.9%	129,000	25.6%
Some Post High School	35.1%	534,100	34.6%	31.8%	37.4%	184,800	36.6%
College Graduate	28.9%	439,500	38.6%	35.5%	41.7%	169,500	33.6%
Total, All Adults	100.0%	1,523,500	33.1%	31.5%	34.8%	504,900	100.0%

1 Rounded to the nearest 100 persons.

2 Plus or minus 95% confidence interval.

3 Figures in these columns may not sum to the total because some surveyed individuals had missing values on the grouping variables.

Population counts for age, sex, and total population were the 2000 estimates provided by the Governor's Office of Planning and Budget. Population count estimates for race/ethnicity, income, and education populations were derived from averaging three years of the BRFSS surveys from 1999-2001.

Physical Inactivity

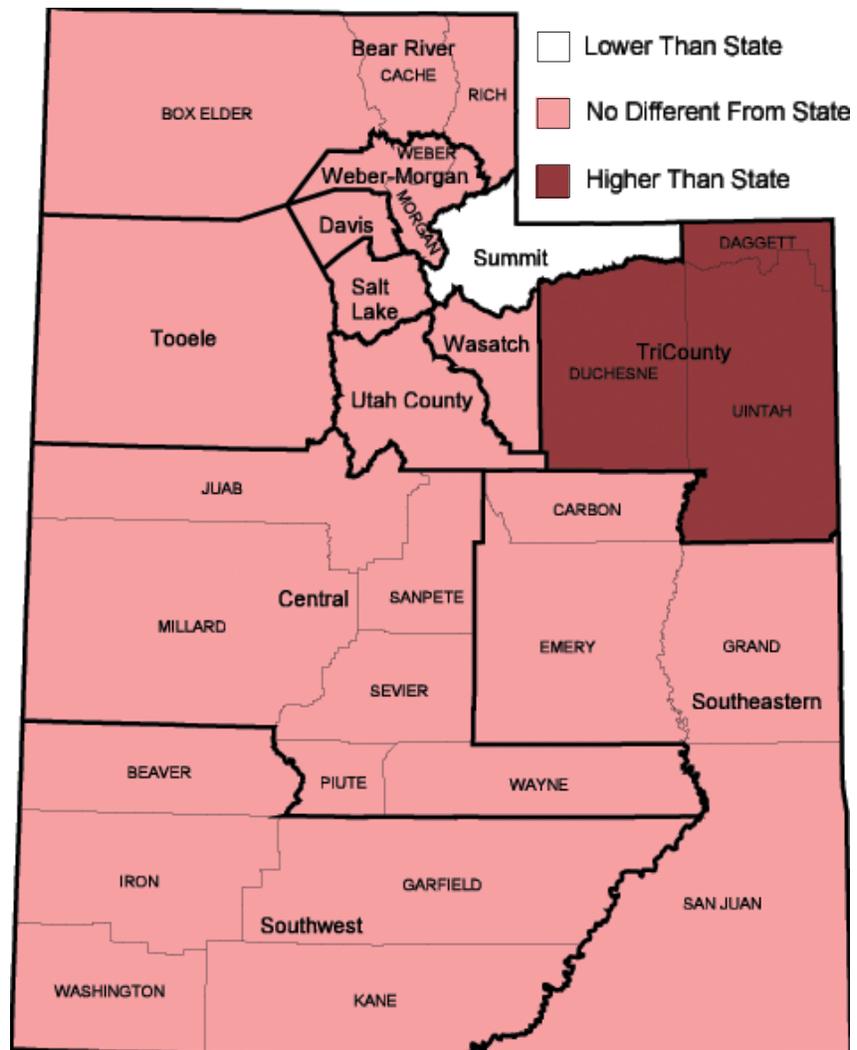


Question: *The next few questions are about exercise, recreation, or physical activities other than your regular job duties. During the past month, did you participate in any physical activities or exercise such as running, calisthenics, golf, gardening, or walking for exercise?*

The risk posed by physical inactivity is almost as high as several well-known risk factors, such as cigarette smoking, high blood pressure, and high blood cholesterol. Physically inactive persons are almost twice as likely to develop coronary heart disease (CHD) as persons who engage in regular physical activity.²⁰ Physical inactivity is also linked to other adverse health conditions, including diabetes, osteoporosis, and some cancers²¹ and is associated with the increased rates of obesity seen in Utah and the U.S. Sedentary lifestyle was defined as no participation in any physical activities for exercise, other than those associated with a regular job.

- Summit County Health District had a lower rate of sedentary lifestyle than the state average. Neighboring TriCounty Health District had a higher rate of sedentary lifestyle than the state average.
- Only 16.4% of adults in Utah reported that they engaged in no leisure time physical activity. This is down from 22.1% in 1989.²² Utah already meets the HP2010 objective of no more than 20% of adults engaging in no leisure time activity. If the current trend continues, by 2010 Utah will meet the state objective of no more than 15%.
- Utah did much better than the U.S. average of 26.8% of adults reporting no leisure time physical activity. The difference was significant even after adjusting for age.

Physical Inactivity by Whether the Local Health District Percentage Differed From the State, Utah Adults Ages 18+, 1999-2000

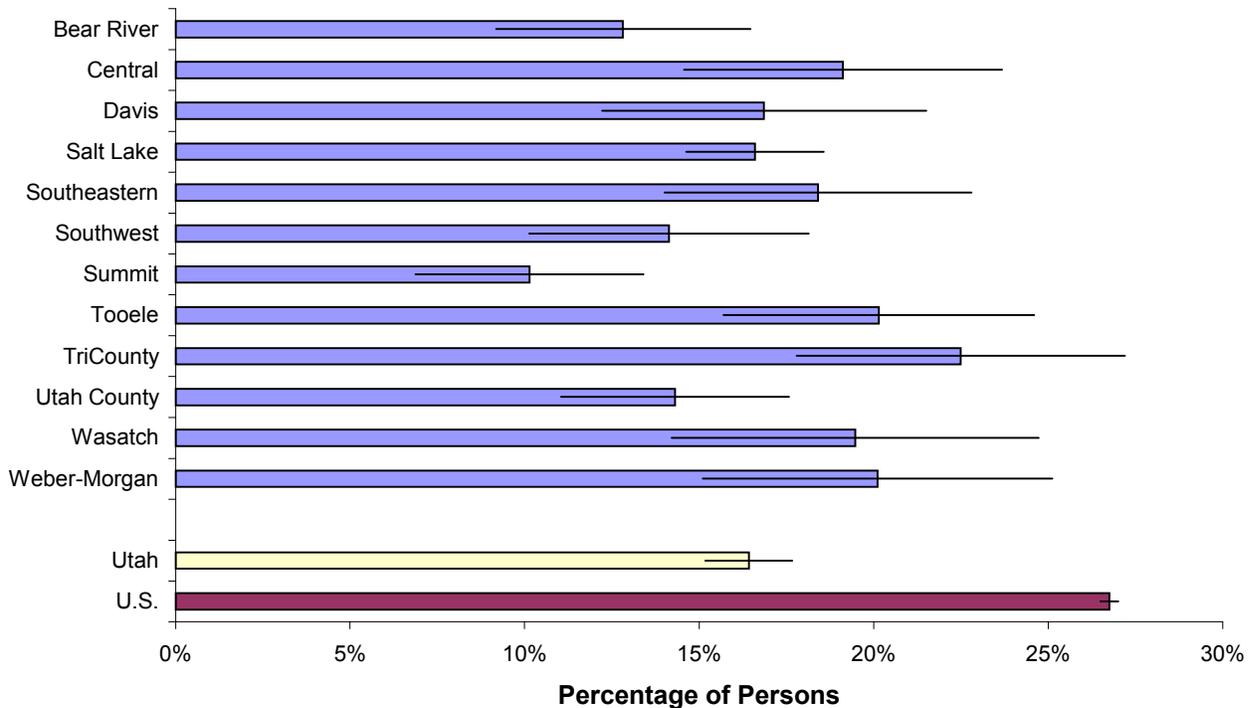


Age adjusted to the U.S. 2000 standard population. Percentage for a local health district was considered different from the state percentage if its 95% confidence interval did not include the state percentage. Source: Behavioral Risk Factor Surveillance System



Physical Inactivity

Percentage of Persons Who Reported No Leisure Time Physical Activity* in the Past 30 Days by Local Health District, Utah, and U.S., Adults Ages 18+, 1999-2000



* crude rates
Source: Behavioral Risk Factor Surveillance System

District	Sample Size	Total Number of Adults	Crude Rates			Age-adjusted Rates**		
			Number Physically Inactive	Percent	95% CI Range	Percent	95% CI Range	
Bear River	379	91,817	11,800	12.8%	9.2% 16.5%	14.0%	10.2% 17.9%	
Central	389	43,286	8,300	19.1%	14.6% 23.7%	19.1%	14.7% 23.4%	
Davis	370	155,816	26,300	16.9%	12.2% 21.5%	17.9%	13.2% 22.6%	
Salt Lake	1,669	627,857	104,200	16.6%	14.6% 18.6%	16.8%	14.8% 18.8%	
Southeastern	359	36,451	6,700	18.4%	14.0% 22.8%	18.8%	14.4% 23.1%	
Southwest	412	97,595	13,800	14.1%	10.1% 18.1%	14.8%	10.8% 18.7%	
Summit	391	21,092	2,100	10.1%	6.9% 13.4%	12.1%	8.2% 16.0%	
Tooele	480	27,012	5,400	20.2%	15.7% 24.6%	20.6%	16.7% 24.6%	
TriCounty	369	26,359	5,900	22.5%	17.8% 27.2%	24.0%	19.6% 28.4%	
Utah County	531	245,264	35,100	14.3%	11.0% 17.6%	15.9%	12.3% 19.4%	
Wasatch	327	10,154	2,000	19.5%	14.2% 24.7%	20.1%	15.1% 25.2%	
Weber-Morgan	374	140,822	28,300	20.1%	15.1% 25.1%	20.2%	15.3% 25.1%	
Utah	6,050	1,523,525	250,300	16.4%	15.2% 17.7%	17.0%	15.7% 18.3%	
U.S.				26.8%	26.5% 27.0%	26.9%	26.6% 27.1%	

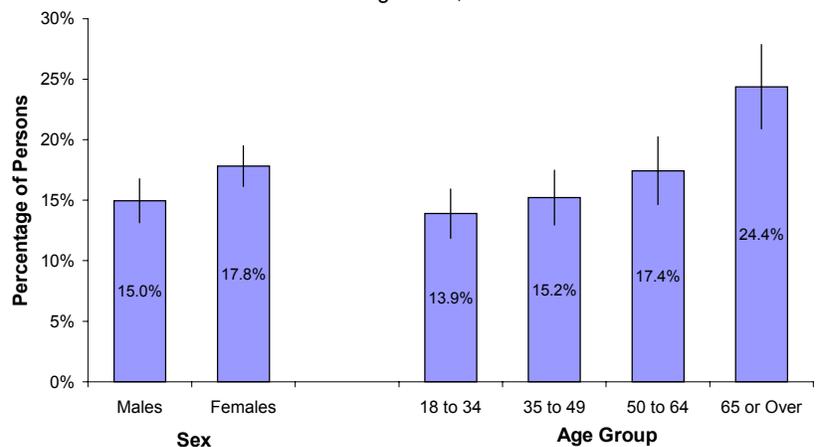
** Age adjusted to U.S. 2000 standard population
U.S. rate includes only years 2000 and 2001.

Physical Inactivity



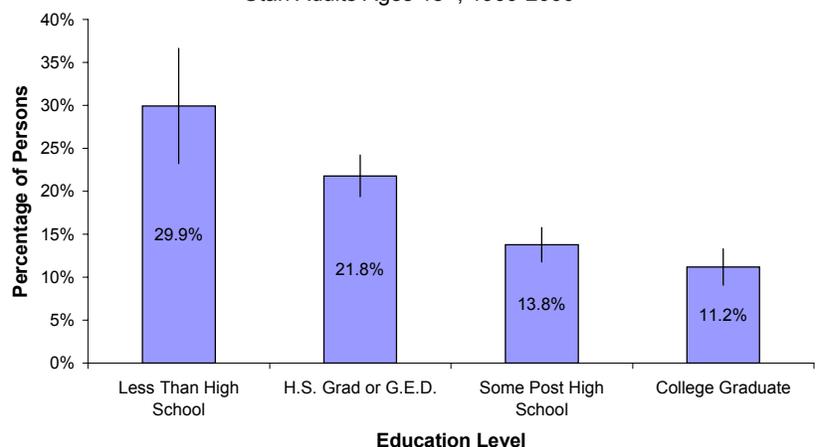
- Women in Utah were slightly more likely to report having a sedentary lifestyle than men.
- Persons of Hispanic ethnicity and those ages 65 or over were also slightly more likely to report getting no leisure time physical activity (race/ethnicity not graphed).

Percentage of Persons Who Reported No Leisure Time Physical Activity in the Past 30 Days by Sex and Age, Utah Adults Ages 18+, 1999-2000



- Persons with a household income of less than \$20,000 (not graphed) or less than a high school education were significantly more likely to report getting no leisure time physical activity.

Percentage of Persons Who Reported No Leisure Time Physical Activity in the Past 30 Days by Education, Utah Adults Ages 18+, 1999-2000



The Utah Cardiovascular Health Program is implementing strategies to address physical activity issues in schools, communities, worksites, and among health care professionals.

Utah Objective: Reduce the proportion of adults who engage in no leisure time physical activity to no more than 15% (age adjusted to the U.S. 2000 standard population).

HP2010 Objective 22-1: Reduce the proportion of adults who engage in no leisure time physical activity to no more than 20% (age adjusted to the U.S. 2000 standard population).



Physical Inactivity

Percentage of Persons Who Reported No Leisure Time Physical Activity in the Past 30 Days by Selected Demographic Characteristics, Utah Adults Ages 18+, 1999 - 2000.

Demographic Subgroup	Utah Population		Survey Estimates				
	Distribution	Number of Persons ¹	Percentage of Persons Who Engaged in No Physical Activity ²			Number of Persons ^{1,3}	Distribution of Persons Who Engaged in No Physical Activity by Category
			95% Confidence Intervals Lower	Upper			
Physical Activity Pattern							
Inactive*	16.4%	250,300					
Irregular**	32.2%	490,400					
Regular/Not Vigorous***	35.9%	546,900					
Regular/Vigorous****	15.5%	235,800					
Total, All Adults	100.0%	1,523,500					
Sex							
Males	49.5%	753,700	15.0%	13.1%	16.8%	112,800	45.1%
Females	50.5%	769,800	17.8%	16.1%	19.5%	137,200	54.9%
Total, All Adults	100.0%	1,523,500	16.4%	15.2%	17.7%	250,300	100.0%
Age Group							
18 to 34	42.6%	648,500	13.9%	11.9%	15.9%	90,100	36.6%
35 to 49	28.5%	433,700	15.2%	13.0%	17.5%	66,000	26.8%
50 to 64	16.4%	250,000	17.4%	14.6%	20.2%	43,600	17.7%
65 or Over	12.6%	191,300	24.4%	20.9%	27.9%	46,600	18.9%
Total, All Adults	100.0%	1,523,500	16.4%	15.2%	17.7%	250,300	100.0%
Race/Ethnicity							
White, Non-Hispanic	88.4%	1,346,000	16.2%	14.9%	17.4%	217,400	85.7%
Hispanic	8.3%	126,000	22.6%	16.6%	28.7%	28,500	11.2%
Non-White, Non-Hispanic	3.4%	51,500	15.4%	7.2%	23.7%	7,900	3.1%
Total, All Adults	100.0%	1,523,500	16.4%	15.2%	17.7%	250,300	100.0%
Income							
Less Than \$20,000	13.6%	207,700	25.6%	21.6%	29.6%	53,200	21.7%
\$20,000-\$49,999	47.8%	727,500	16.3%	14.5%	18.1%	118,500	48.3%
\$50,000 or Over	38.6%	588,400	12.5%	10.3%	14.6%	73,400	29.9%
Total, All Adults	100.0%	1,523,500	16.4%	15.2%	17.7%	250,300	100.0%
Education							
Less Than High School	6.0%	91,700	29.9%	23.2%	36.6%	27,400	11.0%
H.S. Grad or G.E.D.	30.1%	458,100	21.8%	19.4%	24.2%	99,800	39.9%
Some Post High School	35.1%	534,100	13.8%	11.8%	15.8%	73,700	29.5%
College Graduate	28.9%	439,500	11.2%	9.1%	13.3%	49,100	19.6%
Total, All Adults	100.0%	1,523,500	16.4%	15.2%	17.7%	250,300	100.0%

1 Rounded to the nearest 100 persons.

2 Plus or minus 95% confidence interval.

3 Figures in these columns may not sum to the total because some surveyed individuals had missing values on the grouping variables.

* No leisure time physical activity

** Some activity, but <3 times/week or <20 minutes/session.

*** 3+ times/week, 20+ minutes/session, <50% of capacity.

**** 3+ times/week, 20+ minutes/session, 50+% of capacity.

Population counts for age, sex, and total population were the 2000 estimates provided by the Governor's Office of Planning and Budget. Population count estimates for race/ethnicity, income, and education populations were derived from averaging three years of the BRFSS surveys from 1999-2001.

Regular Physical Activity



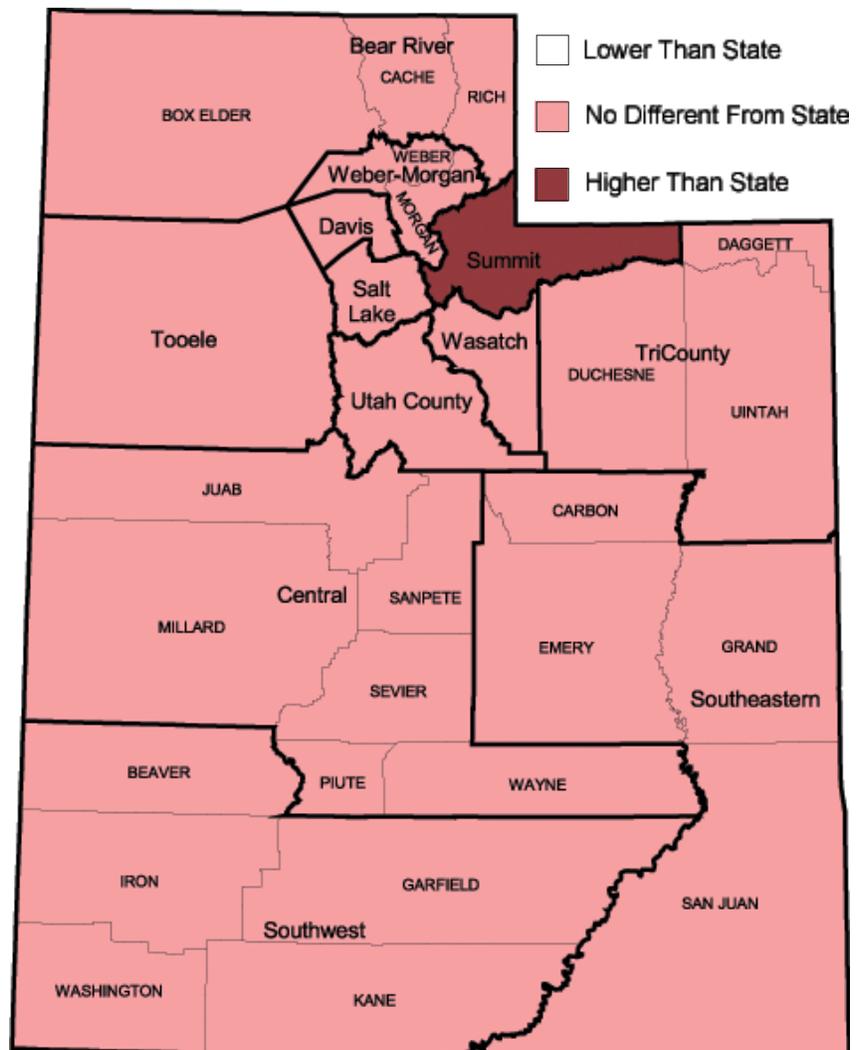
Questions: *What type of physical activity or exercise did you spend the most time doing during the past month? What other type of physical activity gave you the next most exercise during the past month? (This measure is based on a group of questions.)*

Physical activity can substantially reduce the risk of developing heart disease, diabetes, colon cancer, and high blood pressure.²¹ Physical activity is also important for people who have joint or bone problems such as arthritis and has been shown to improve muscle function.²³ Regular physical activity is also known to improve affective disorders such as depression and anxiety, and increase quality of life and independent living among the elderly.²⁴ For this report, regular physical activity was defined as five or more sessions per week of 30 minutes or more duration per session regardless of intensity.

The BRFSS module used to measure regular physical activity was changed in 2001. Future data will not be comparable with the rates presented in this report.

- Persons in Summit County Health District reported significantly higher rates of regular physical activity than persons residing in the rest of the state.
- About 26.5% of adults reported engaging in regular physical activity in Utah, which is well below the HP2010 objective of 30%. This was similar to the rate of 26.3% in 1989. The rate of regular physical activity has remained relatively constant over the past twelve years.²²
- Adults in Utah were significantly more likely to get regular physical activity than in the U.S. (26.3% and 21.5% respectively, age-adjusted rates).

Regular Physical Activity by Whether the Local Health District Percentage Differed From the State, Utah Adults Ages 18+, 1999-2000

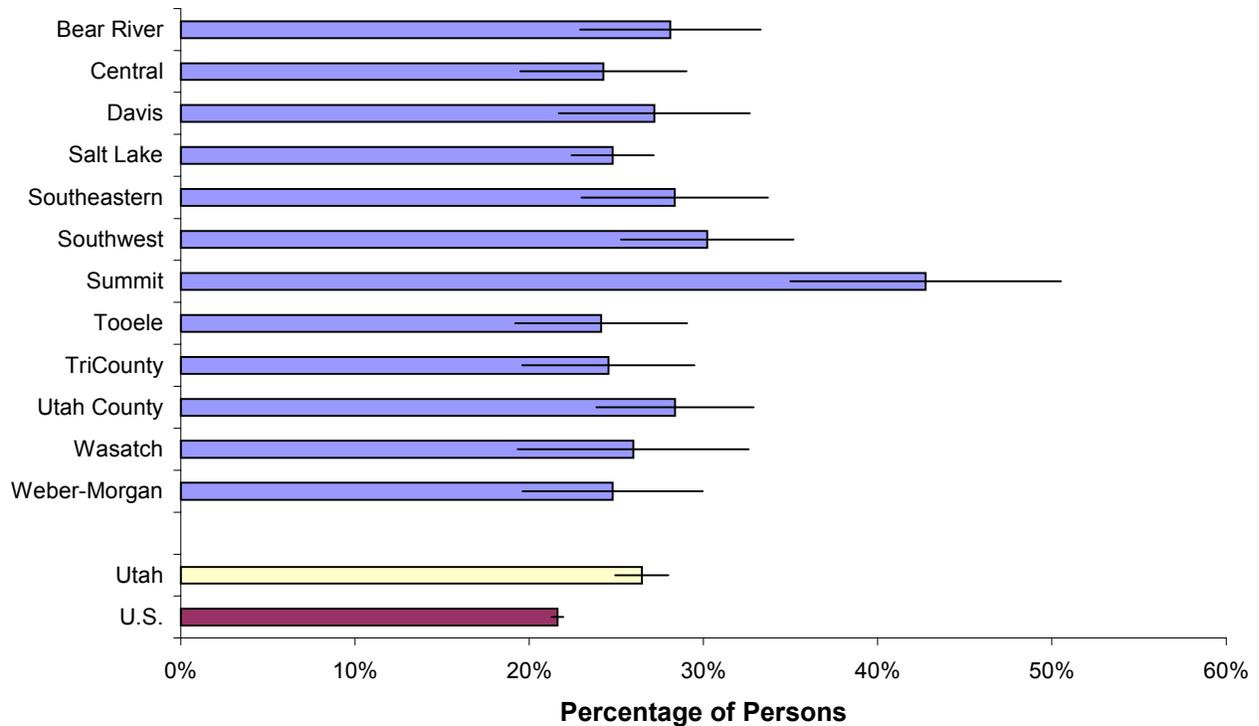


Age adjusted to the U.S. 2000 standard population. Percentage for a local health district was considered different from the state percentage if its 95% confidence interval did not include the state percentage. Note: Regular physical activity is defined as 5+ times/week, 30+ minutes/session, regardless of intensity. Source: Behavioral Risk Factor Surveillance System



Regular Physical Activity

Percentage of Persons Reporting Regular Physical Activity*
by Local Health District, Utah, and U.S., Adults Ages 18+, 1999-2000



* crude rates

Note: Regular physical activity is defined as 5+ times/week, 30+ minutes/session, regardless of intensity.

Source: Behavioral Risk Factor Surveillance System

District	Sample Size	Total Number of Adults	Crude Rates			Age-adjusted Rates**		
			Number Regularly Physically Active	Percent	95% CI Range	Percent	95% CI Range	
Bear River	379	91,817	25,800	28.1%	22.9% 33.3%	28.9%	23.7% 34.1%	
Central	389	43,286	10,500	24.3%	19.5% 29.0%	23.8%	19.3% 28.4%	
Davis	370	155,816	42,400	27.2%	21.7% 32.7%	27.1%	21.7% 32.4%	
Salt Lake	1,669	627,857	155,600	24.8%	22.4% 27.2%	24.8%	22.4% 27.1%	
Southeastern	359	36,451	10,300	28.4%	23.0% 33.7%	28.2%	22.9% 33.4%	
Southwest	412	97,595	29,500	30.2%	25.3% 35.2%	29.2%	24.3% 34.0%	
Summit	391	21,092	9,000	42.8%	35.0% 50.5%	40.9%	34.2% 47.6%	
Tooele	480	27,012	6,500	24.1%	19.2% 29.1%	23.6%	19.1% 28.2%	
TriCounty	369	26,359	6,500	24.6%	19.6% 29.5%	24.0%	19.2% 28.8%	
Utah County	531	245,264	69,600	28.4%	23.9% 32.9%	27.8%	23.4% 32.3%	
Wasatch	327	10,154	2,600	26.0%	19.4% 32.6%	25.9%	19.7% 32.1%	
Weber-Morgan	374	140,822	34,900	24.8%	19.6% 30.0%	25.3%	20.3% 30.2%	
Utah	6,050	1,523,525	403,100	26.5%	24.9% 28.0%	26.3%	24.8% 27.9%	
U.S.				21.6%	21.3% 22.0%	21.5%	21.2% 21.9%	

** Age adjusted to U.S. 2000 standard population

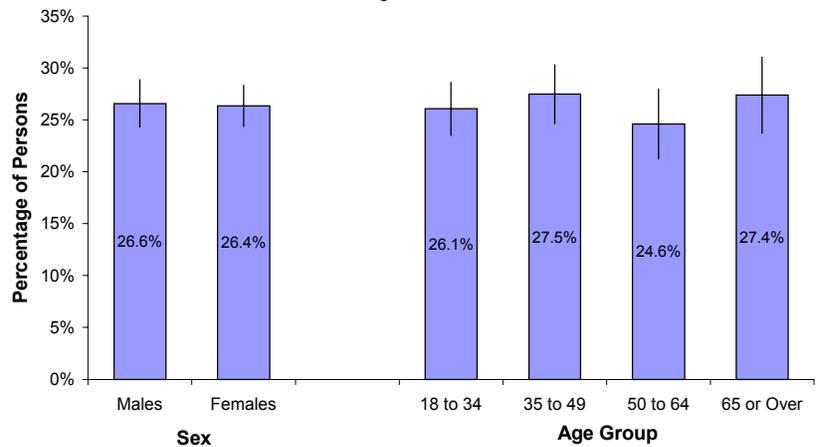
U.S. rate includes only year 2000.

Regular Physical Activity



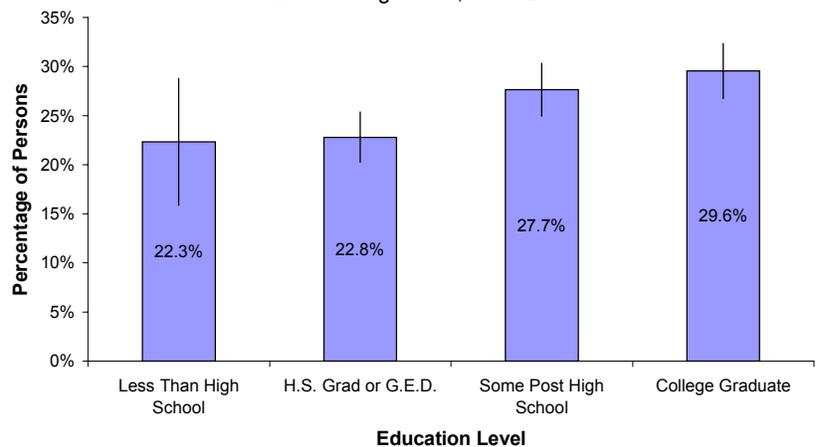
- Rates of regular physical activity did not differ by age or sex.

Percentage of Persons Who Reported Regular Physical Activity* by Sex and Age, Utah Adults Ages 18+, 1999-2000



- Utah adults with an annual household income of greater than \$50,000 (not graphed) or education beyond high school were more likely to get regular physical activity than persons with less income or education.

Percentage of Persons Who Reported Regular Physical Activity* by Education, Utah Adults Ages 18+, 1999-2000



* Regular physical activity is defined as 5+ times/week, 30+ minutes/session, regardless of intensity.

The Utah Cardiovascular Health Program is implementing strategies to address physical activity issues in schools, communities, worksites, and among health care professionals.

Utah Objective: Same as HP2010 Objective.

HP2010 Objective 22-2: Increase the proportion of adults who engage regularly, preferably daily, in moderate physical activity for at least 30 minutes per day to 30% (age adjusted to the U.S. 2000 standard population).



Regular Physical Activity

Percentage of Persons Who Reported Regular Physical Activity* by Selected Demographic Characteristics, Utah Adults Ages 18+, 1999 - 2000.

Demographic Subgroup	Utah Population		Survey Estimates				
	Distribution	Number of Persons ¹	Percentage of Persons Who Reported Regular Physical Activity ²			Number of Persons ^{1,3}	Distribution of Persons Who Reported Regular Physical Activity by Category
			95% Confidence Intervals	Lower	Upper		
Regular Physical Activity							
Yes	26.5%	403,100					
No	73.5%	1,120,400					
Total, All Adults	100.0%	1,523,500					
Sex							
Males	49.5%	753,700	26.6%	24.3%	28.9%	200,300	49.7%
Females	50.5%	769,800	26.4%	24.4%	28.4%	202,800	50.3%
Total, All Adults	100.0%	1,523,500	26.5%	24.9%	28.0%	403,100	100.0%
Age Group							
18 to 34	42.6%	648,500	26.1%	23.5%	28.6%	169,000	42.0%
35 to 49	28.5%	433,700	27.5%	24.6%	30.3%	119,100	29.6%
50 to 64	16.4%	250,000	24.6%	21.2%	28.0%	61,500	15.3%
65 or Over	12.6%	191,300	27.4%	23.7%	31.0%	52,400	13.0%
Total, All Adults	100.0%	1,523,500	26.5%	24.9%	28.0%	403,100	100.0%
Race/Ethnicity							
White, Non-Hispanic	88.4%	1,346,000	26.9%	25.3%	28.5%	361,500	90.4%
Hispanic	8.3%	126,000	20.4%	14.8%	26.0%	25,700	6.4%
Non-White, Non-Hispanic	3.4%	51,500	24.8%	16.4%	33.2%	12,800	3.2%
Total, All Adults	100.0%	1,523,500	26.5%	24.9%	28.0%	403,100	100.0%
Income							
Less Than \$20,000	13.6%	207,700	24.6%	20.7%	28.6%	51,200	12.8%
\$20,000-\$49,999	47.8%	727,500	24.1%	22.0%	26.2%	175,200	43.9%
\$50,000 or Over	38.6%	588,400	29.4%	26.5%	32.2%	172,700	43.3%
Total, All Adults	100.0%	1,523,500	26.5%	24.9%	28.0%	403,100	100.0%
Education							
Less Than High School	6.0%	91,700	22.3%	15.9%	28.8%	20,500	5.1%
H.S. Grad or G.E.D.	30.1%	458,100	22.8%	20.3%	25.4%	104,500	26.0%
Some Post High School	35.1%	534,100	27.7%	25.0%	30.3%	147,700	36.7%
College Graduate	28.9%	439,500	29.6%	26.7%	32.4%	129,900	32.3%
Total, All Adults	100.0%	1,523,500	26.5%	24.9%	28.0%	403,100	100.0%

1 Rounded to the nearest 100 persons.

2 Plus or minus 95% confidence interval.

3 Figures in these columns may not sum to the total because some surveyed individuals had missing values on the grouping variables.

* Regular physical activity is defined as 5+ times/week, 30+ minutes/session, regardless of intensity.

Population counts for age, sex, and total population were the 2000 estimates provided by the Governor's Office of Planning and Budget. Population count estimates for race/ethnicity, income, and education populations were derived from averaging three years of the BRFSS surveys from 1999-2001.

Overweight or Obese

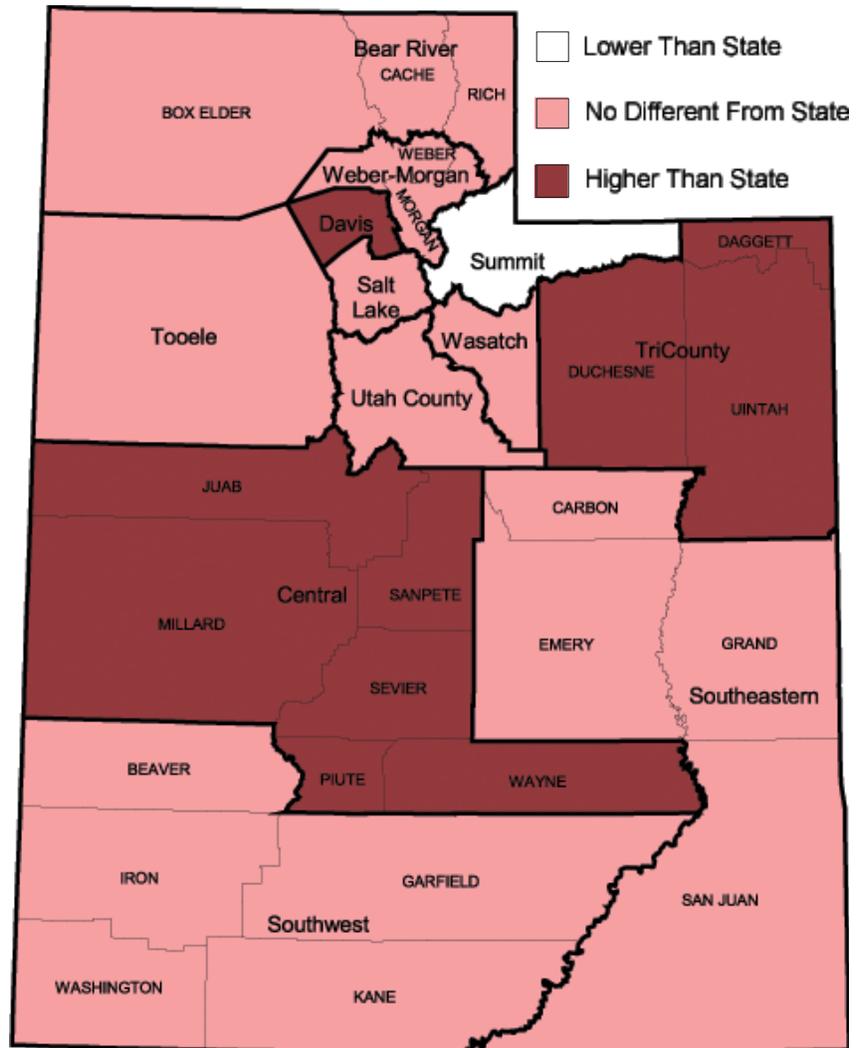


Questions: *About how much do you weigh without shoes? About how tall are you without shoes?*

Many diseases are associated with overweight and obesity. Persons who are overweight or obese are at increased risk for high blood pressure, diabetes, heart disease, stroke, gallbladder disease, osteoarthritis, sleep apnea, respiratory problems, and some types of cancer.^{20,25-26} The percentage of overweight and obese persons in Utah and the U.S. has increased dramatically in recent years.^{22,27} Obesity may have surpassed smoking as the leading cause of preventable death in the U.S. Studies have shown that weight loss will likely reduce the risk for heart disease and stroke and can improve the quality of life for persons with arthritis.²⁸ This report used self-reported height and weight to calculate Body Mass Index (BMI), which is defined as weight in kilograms divided by height in meters squared. Overweight or obese was defined as a BMI of 25 or greater.

- An astonishing 18.4% of Utah's adults were obese and another 35.0% were overweight. This combined rate of 53.4% is up from 35.9% in 1989. This amounts to an average increase of about 1½% per year, or an additional 23,000 adults in Utah becoming overweight or obese each year, or 64 persons every day.

Overweight or Obese by Whether the Local Health District Percentage Differed From the State, Utah Adults Ages 18+, 1999-2001



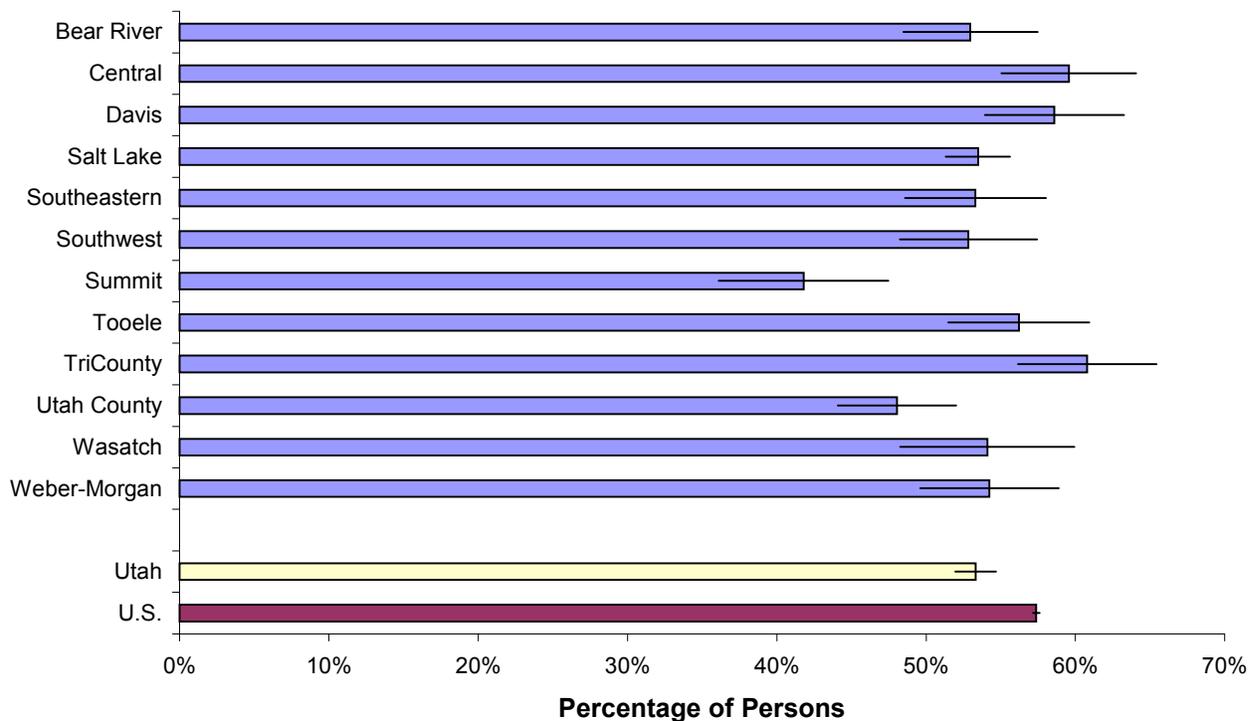
Age adjusted to the U.S. 2000 standard population. Percentage for a local health district was considered different from the state percentage if its 95% confidence interval did not include the state percentage. Note: Overweight, but not obese, is defined as BMI 25-29; obese is defined as BMI of 30 or more. Source: Behavioral Risk Factor Surveillance System

- Davis County, Central Utah, and TriCounty Health Districts all had higher rates of overweight or obese than the state. Summit County Health District had a lower rate than the state.
- Utah's rate of overweight or obese was only slightly better than the U.S. (54.1% and 57.1% respectively, age-adjusted rates). The U.S. experienced a similar trend of rapidly increasing obesity rates over time.²²



Overweight or Obese

Percentage of Persons Classified as Overweight or Obese*
by Local Health District, Utah, and U.S., Adults Ages 18+, 1999-2001



* crude rates

Note: Overweight, but not obese, is defined as BMI 25-29; obese is defined as BMI of 30 or more.

Source: Behavioral Risk Factor Surveillance System

District	Sample Size	Total Number of Adults	Crude Rates			Age-adjusted Rates**		
			Number Overweight or Obese	Percent	95% CI Range	Percent	95% CI Range	
Bear River	588	91,817	48,600	53.0%	48.5% 57.5%	55.6%	51.1% 60.0%	
Central	596	43,286	25,800	59.6%	55.0% 64.1%	60.3%	56.1% 64.5%	
Davis	561	155,816	91,300	58.6%	53.9% 63.3%	58.9%	54.5% 63.4%	
Salt Lake	2,597	627,857	335,700	53.5%	51.3% 55.6%	53.8%	51.7% 55.9%	
Southeastern	573	36,451	19,400	53.3%	48.6% 58.0%	52.9%	48.4% 57.4%	
Southwest	630	97,595	51,600	52.8%	48.2% 57.4%	53.5%	49.0% 58.0%	
Summit	590	21,092	8,800	41.8%	36.1% 47.5%	42.0%	37.1% 47.0%	
Tooele	691	27,012	15,200	56.2%	51.5% 60.9%	55.4%	51.0% 59.8%	
TriCounty	582	26,359	16,000	60.8%	56.2% 65.4%	60.3%	55.6% 64.9%	
Utah County	853	245,264	117,800	48.1%	44.1% 52.0%	52.1%	48.3% 55.9%	
Wasatch	537	10,154	5,500	54.1%	48.3% 59.9%	53.4%	47.9% 58.9%	
Weber-Morgan	597	140,822	76,400	54.2%	49.6% 58.9%	53.7%	49.3% 58.1%	
Utah	9,395	1,523,525	812,200	53.3%	52.0% 54.7%	54.1%	52.8% 55.4%	
U.S.				57.4%	57.1% 57.6%	57.0%	56.8% 57.3%	

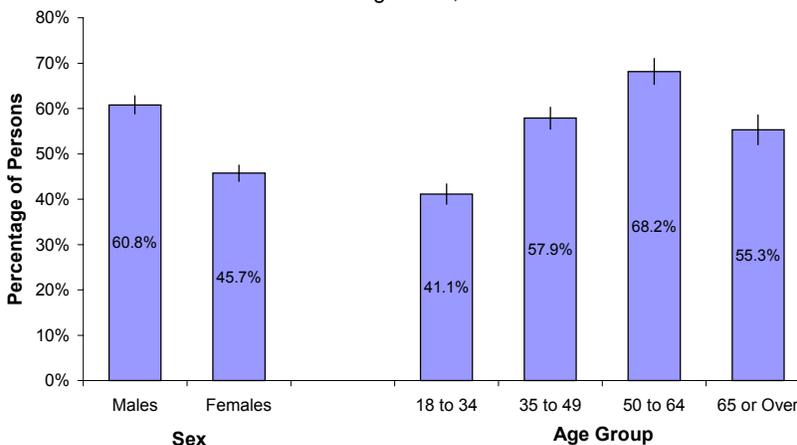
** Age adjusted to U.S. 2000 standard population

Overweight or Obese



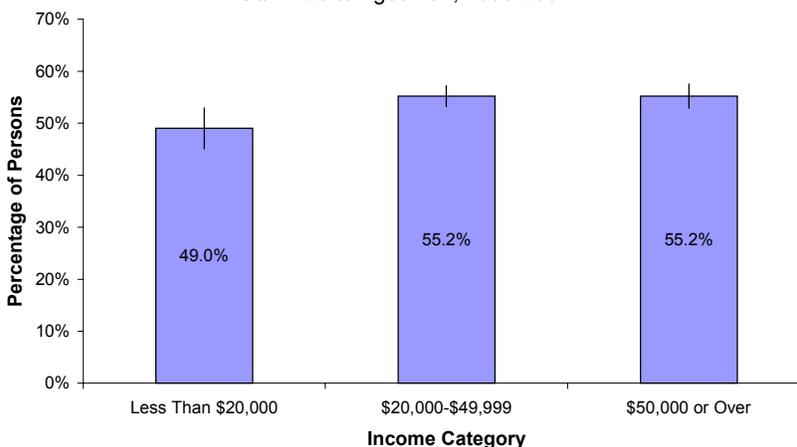
- Significantly more males were overweight or obese in Utah than females, a pattern that was different than that found in the U.S.
- The rate of overweight or obese increased according to age until about age 65, when it declined slightly.

Percentage of Persons Classified as Overweight or Obese by Sex and Age, Utah Adults Ages 18+, 1999-2001



- Adults of Hispanic ethnicity were more likely to be overweight (not graphed).
- Adults with annual household incomes of less than \$20,000 were less likely to be overweight than adults with higher incomes.

Percentage of Persons Classified as Overweight or Obese by Income, Utah Adults Ages 18+, 1999-2001



* Overweight, but not obese, is defined as a BMI 25-29.
 ** Obese is defined as a BMI of 30 or more.

The Utah Cardiovascular Health Program is implementing strategies to address overweight issues in schools, communities, worksites, and among health care professionals.

Utah Objective: Same as HP2010 Objective.

HP2010 Objective 19-2: Reduce the proportion of adults who are obese (BMI > 30) to 15% (age adjusted to the U.S. 2000 standard population).



Overweight or Obese

Percentage of Persons Classified as Overweight* or Obese** by Selected Demographic Characteristics, Utah Adults Ages 18+, 1999 - 2001.

Demographic Subgroup	Utah Population		Survey Estimates				
	Distribution	Number of Persons ¹	Percentage of Persons Classified as Overweight or Obese ²			Number of Persons ^{1,3}	Distribution of Persons Classified as Overweight or Obese by Category
			95% Confidence Intervals	Lower	Upper		
Overweight or Obese							
Not Overweight or Obese	46.7%	711,300					
Overweight but Not Obese	35.0%	532,600					
Obese	18.4%	279,600					
Total, All Adults	100.0%	1,523,500					
Sex							
Males	49.5%	753,700	60.8%	58.8%	62.8%	458,300	56.6%
Females	50.5%	769,800	45.7%	43.9%	47.6%	352,100	43.4%
Total, All Adults	100.0%	1,523,500	53.3%	52.0%	54.7%	812,200	100.0%
Age Group							
18 to 34	42.6%	648,500	41.1%	38.9%	43.4%	266,700	33.6%
35 to 49	28.5%	433,700	57.9%	55.5%	60.3%	251,000	31.6%
50 to 64	16.4%	250,000	68.2%	65.3%	71.1%	170,500	21.5%
65 or Over	12.6%	191,300	55.3%	52.0%	58.6%	105,800	13.3%
Total, All Adults	100.0%	1,523,500	53.3%	52.0%	54.7%	812,200	100.0%
Race/Ethnicity							
White, Non-Hispanic	88.4%	1,346,000	53.0%	51.6%	54.4%	713,500	87.7%
Hispanic	8.3%	126,000	57.8%	51.9%	63.8%	72,800	8.9%
Non-White, Non-Hispanic	3.4%	51,500	53.6%	46.1%	61.0%	27,600	3.4%
Total, All Adults	100.0%	1,523,500	53.3%	52.0%	54.7%	812,200	100.0%
Income							
Less Than \$20,000	13.6%	207,700	49.0%	45.1%	53.0%	101,800	12.3%
\$20,000-\$49,999	47.8%	727,500	55.2%	53.2%	57.2%	401,700	48.5%
\$50,000 or Over	38.6%	588,400	55.2%	52.9%	57.6%	324,900	39.2%
Total, All Adults	100.0%	1,523,500	53.3%	52.0%	54.7%	812,200	100.0%
Education							
Less Than High School	6.0%	91,700	50.4%	44.1%	56.8%	46,200	5.7%
H.S. Grad or G.E.D.	30.1%	458,100	52.9%	50.5%	55.3%	242,200	29.8%
Some Post High School	35.1%	534,100	53.5%	51.2%	55.9%	286,000	35.2%
College Graduate	28.9%	439,500	54.1%	51.6%	56.6%	237,900	29.3%
Total, All Adults	100.0%	1,523,500	53.3%	52.0%	54.7%	812,200	100.0%

1 Rounded to the nearest 100 persons.

2 Plus or minus 95% confidence interval.

3 Figures in these columns may not sum to the total because some surveyed individuals had missing values on the grouping variables.

* Overweight, but not obese, is defined as a BMI 25-29.

** Obese is defined as a BMI of 30 or more.

Population counts for age, sex, and total population were the 2000 estimates provided by the Governor's Office of Planning and Budget. Population count estimates for race/ethnicity, income, and education populations were derived from averaging three years of the BRFSS surveys from 1999-2001.

Appendix A: Methodology





Questionnaire

The BRFSS questionnaire is modified each year by the Centers for Disease Control and Prevention (CDC) in collaboration with participating states and territories. The questionnaire has three parts. The first part is a core set of questions that is asked by all states and territories. The second part consists of a series of topical modules developed by the CDC. States have the option of adding CDC topical modules as they wish, and Utah has used several of them. The final part of the questionnaire consists of questions designed and administered by individual states to address issues of local concern.

Sampling Design

In the years 1999-2001, the Utah BRFSS telephone sample was stratified by Utah's 12 health districts. Within each health district the BRFSS used a disproportionate stratified sampling design (DSS). In the DSS design, all the telephone numbers in each health district were disproportionately stratified by telephone blocks. A block consists of 100 phone numbers that differ only by their last two digits (e.g. 801-538-1100 to 801-538-1199). "One-plus blocks" (high-density stratum) are computer-generated listings of 100 consecutive telephone numbers containing at least one published household telephone number. "Zero blocks" (low-density stratum) are listings of 100 consecutive telephone numbers containing no published household telephone numbers. To ensure total coverage, both one-plus and zero blocks were randomly sampled from each health district, but at a disproportionate rate of 4 to 1. The monthly number of telephone numbers sampled from each health district was designed to ensure a certain number of completed interviews each month in each district. Once a residence was successfully contacted, individual respondents were randomly selected from all adults ages 18 or over living in the household. The selected adult, if willing, was then interviewed in accordance with the BRFSS protocol.

Data Collection

Interviews were conducted monthly from the Utah Department of Health (UDOH) Survey Center by professional interviewers employed by the UDOH. The Survey Center uses a Computer-Assisted Telephone Interviewing (CATI) system to administer the appropriate questions and record respondent answers to the survey directly to a computerized database. The system is programmed to help ensure accurate data entry. The interviews were conducted during daytime and evening hours on weekdays and during daytime hours on Saturday to ensure that selected respondents had ample opportunity to complete the survey. Fifteen attempts were made at different times of the day and on the weekend to reach a phone number. Selected respondents were given the opportunity to schedule a time to be called in order to complete the interview. Interviews are routinely monitored to ensure adherence to strict BRFSS protocol. Monitoring is done electronically so that both the interviewer and respondent can be heard, and the computer screen can be observed to make sure responses are entered correctly without the interviewer being aware that he or she is being monitored.

Data Analysis

Weighting. Data were weighted to account for differences in the probability of selection (e.g. the number of adults in a household). Post-stratification weighting based upon population estimates of adults by age categories and sex in Utah for 1999, 2000, and 2001 was used to ensure that the results more closely reflected the adult population of Utah.

Prevalence Estimates. Respondents who indicated "Don't know/Not sure" or "Refused" were excluded from the calculation of the estimates. The SAS® statistical package with SAS-Callable SUDAAN®

Appendix A: Methodology



computer software was used to compute prevalence estimates (both crude and age-adjusted) and associated 95 percent confidence intervals (calculated as 1.96 times the standard error of the statistic) using sample weights provided by CDC. SUDAAN software takes into account the complex BRFSS sample design in calculating unbiased standard errors for the confidence interval calculations.

Age-adjusted Data. Many of the BRFSS measures vary by age. Therefore, the data were age adjusted to the 2000 U.S. standard population to control for differences in the measures that are due to differences in the age composition of the populations being compared. This adjustment allows for comparison of rates between health districts, the state, and the U.S. It also allows comparison to the Healthy People 2010 objectives that utilize age-adjusted rates. Percentages for the local health districts were considered different from the state percentage if their 95 percent confidence intervals did not include the state percentage. In the report, these differences are represented on the map of Utah's 12 health districts for each measure. (These age-adjusted rates are useful for comparison purposes only, not to measure absolute magnitude. The actual numerical value of an age-adjusted rate is dependent on the standard population used and, therefore, has no intrinsic meaning. To compare absolute magnitude, actual numbers and crude rates should be used.)

Population Count Estimates. Crude percentage estimates were applied to population counts to derive an estimate for the total number of persons in Utah, in each of Utah's 12 health districts, and in selected demographic subgroups in Utah to whom the measure probably applied. The total population estimates for the state and the local health districts were taken from the Governor's Office of Planning and Budget (GOPB) for year 2000. The demographic subgroup estimates for race/ethnicity, income, and education were derived from the BRFSS surveys using combined 1999-2001 data also using total population estimates from the GOPB.

Sampling Error. The BRFSS data were gathered from a random sample of the Utah adult population. Sampling error refers to random variation that occurs because only a subset of the entire population is sampled and used to estimate the finding for the entire population. It is often called "margin of error" in popular use. In this report, sampling error has been expressed as **confidence interval bounds**. The 95 percent confidence interval (calculated as 1.96 times the standard error of a statistic) indicates the range of values within which the statistic would fall 95 percent of the time if the researcher were to calculate the statistic from an infinite number of samples of the same size drawn from the same base population. The bar graphs of the crude prevalence estimates in this report include a line showing the estimated confidence intervals around the percentage estimates. Confidence intervals have also been reported for all estimates presented in the tables.

Non-sampling Error. Sources of non-sampling error include idiosyncratic interpretation of survey questions by respondents, variations in interviewer technique, household non-response to questions, and coding errors. Respondents may have the tendency to under-report behaviors that are undesirable, unhealthy, or illegal (e.g. drinking and driving). They may over-report desirable behaviors. The accuracy of self-reported information also is affected by the ability of respondents to fully recall past behaviors or health screening results.

For a detailed description of BRFSS methodology, see the BRFSS Surveillance Guide, an online version of the BRFSS Users Guide at: <http://www.cdc.gov/brfss/training.htm>.

Appendix B: BRFSS Questions Used in This Report

The data for this report came from different questionnaires used from 1999-2001. The following question text includes questions from those years.





Appendix B: BRFSS Questions Used in This Report

1. GENERAL HEALTH STATUS:

1.1 Would you say that in general your health is:

Please Read

- 1 Excellent
- 2 Very good
- 3 Good
- 4 Fair
- or
- 5 Poor

Do not read these responses 7 Don't know/Not sure
9 Refused

2. PHYSICAL HEALTH PAST 30 DAYS:

2.1 Now thinking about your physical health, which includes physical illness and injury, for how many days during the past 30 days was your physical health not good?

- _____ Number of days
- 88 None
- 77 Don't know/Not sure
- 99 Refused

3. MENTAL HEALTH PAST 30 DAYS:

3.1 Now thinking about your mental health, which includes stress, depression, and problems with emotions, for how many days during the past 30 days was your mental health not good?

- _____ Number of days
- 88 None
- 77 Don't know/Not sure
- 99 Refused

4. DIABETES:

4.1 Have you ever been told by a doctor that you have diabetes?

- If "Yes" and female, ask "Was this only when you were pregnant?"**
- 1 Yes
 - 2 Yes, but female told only during pregnancy
 - 3 No
 - 7 Don't know/Not sure
 - 9 Refused

5. ASTHMA:

5.1 Have you ever been told by a doctor, nurse, or other health professional that you had asthma?

- 1 Yes
- 2 No **Go to next section**
- 7 Don't know/Not sure **Go to next section**
- 9 Refused **Go to next section**

5.2 Do you still have asthma?

- 1 Yes
- 2 No
- 7 Don't know/Not sure
- 9 Refused

6. ARTHRITIS:

6.1 During the past 12 months, have you had pain, aching, stiffness or swelling in or around a joint?

- 1 Yes
- 2 No **Go to Q6.3**
- 7 Don't know/Not sure **Go to Q6.3**
- 9 Refused **Go to Q6.3**

6.2 Were these symptoms present on most days for at least one month?

- 1 Yes
- 2 No
- 7 Don't know/Not sure
- 9 Refused

6.3 Have you ever been told by a doctor that you have arthritis?

- 1 Yes
- 2 No **Go to next section**
- 7 Don't know/Not sure **Go to next section**
- 9 Refused **Go to next section**

7. HIGH CHOLESTEROL AWARENESS:

7.1. Have you ever been told by a doctor, nurse, or other health professional that your blood cholesterol is high?

- 1 Yes
- 2 No
- 7 Don't know/Not sure
- 9 Refused

Appendix B: BRFSS Questions Used in This Report



8. HIGH BLOOD PRESSURE AWARENESS:

8.1 Have you ever been told by a doctor, nurse, or other health professional that you have high blood pressure?

- 1 Yes
- 2 No
- 7 Don't know/Not sure
- 9 Refused

9. HEALTH CARE COVERAGE:

9.1 Do you have any kind of health care coverage, including health insurance, prepaid plans such as HMOs, or government plans such as Medicare?

- 1 Yes
- 2 No
- 7 Don't know/Not sure
- 9 Refused

10. UNABLE TO GET NEEDED CARE DUE TO COST:

10.1 Was there a time during the last 12 months when you needed to see a doctor, but could not because of the cost?

- 1 Yes
- 2 No
- 7 Don't know/Not sure
- 9 Refused

11. DENTAL CARE COVERAGE:

11.1 Do you have any kind of insurance coverage that pays for some or all of your routine dental care, including dental insurance, prepaid plans such as HMOs, or government plans such as Medicaid?

- 1 Yes
- 2 No
- 7 Don't know/Not sure
- 9 Refused

12. ROUTINE DENTAL CARE:

12.1 How long has it been since you last visited a dentist or a dental clinic for any reason?

- Read Only if Necessary**
- Include visits to dental specialists, such as orthodontists** 1 Within the past year (Anytime less than 12 months ago)
 - 2 Within the past 2 years (1 year to less than 2 years ago)
 - 3 Within the past 5 years (2 years to less than 5 years ago)
 - 4 5 or more years ago
 - 7 Don't know/Not sure
 - 8 Never
 - 9 Refused

13. MAMMOGRAPHY (asked only of women):

13.1 A mammogram is an x-ray of each breast to look for breast cancer. Have you ever had a mammogram?

- 1 Yes
- 2 No
- 7 Don't know/Not sure
- 9 Refused

13.2 How long has it been since you had your last mammogram?

- Read only if Necessary**
- 1 Within the past year (1 to 12 months ago)
 - 2 Within the past 2 years (1 to 2 years ago)
 - 3 Within the past 3 years (2 to 3 years ago)
 - 4 Within the past 5 years (3 to 5 years ago)
 - 5 5 or more years ago
 - 7 Don't know/Not sure
 - 9 Refused

13.3 Was your last mammogram done as part of a routine checkup, because of a breast problem other than cancer, or because you've already had breast cancer?

- 1 Routine checkup
- 2 Breast problem other than cancer
- 3 Had breast cancer
- 7 Don't know/Not sure
- 9 Refused



Appendix B: BRFSS Questions Used in This Report

14. PAP TEST (asked only of women):

14.1 A Pap smear is a test for cancer of the cervix. Have you ever had a Pap smear?

- 1 Yes
- 2 No **Go to next section**
- 7 Don't know/Not sure **Go to next section**
- 9 Refused **Go to next section**

14.2 How long has it been since you had your last Pap smear?

Read Only if Necessary

- 1 Within the past year (1 to 12 months ago)
- 2 Within the past 2 years (1 to 2 years ago)
- 3 Within the past 3 years (2 to 3 years ago)
- 4 Within the past 5 years (3 to 5 years ago)
- 5 5 or more years ago
- 7 Don't know/Not sure
- 9 Refused

14.3 Was your last Pap smear done as part of a routine exam, or to check a current or previous problem?

- 1 Routine exam
- 2 Check current or previous problem
- 3 Other
- 7 Don't know/Not sure
- 9 Refused

14.4 Have you had a hysterectomy?

A hysterectomy is an operation to remove the uterus (womb)

- 1 Yes
- 2 No
- 7 Don't know/Not sure
- 9 Refused

15. PROSTATE-SPECIFIC ANTIGEN SCREENING (asked only of men ages 40 and older):

15.1 A Prostate-Specific Antigen test, also called a PSA test, is a blood test used to check men for prostate cancer. Have you ever had a PSA test?

- 1 Yes
- 2 No **Go to next section**
- 7 Don't Know/not Sure **Go to next section**
- 9 Refused **Go to next section**

15.2 How long has it been since you had your last PSA test?

Read Only if Necessary

- 1 Within the past year (Anytime less than 12 months ago)
- 2 Within the past 2 years (1 year but less than 2 years ago)
- 3 Within the past 3 years (2 years but less than 3 years ago)
- 4 Within the past 5 years (3 years but less than 5 years ago)
- 5 5 or more years ago
- 7 Don't know/Not sure
- 9 Refused

16. SIGMOIDOSCOPY OR COLONOSCOPY (asked only of adults ages 50 and older):

16.1 Sigmoidoscopy and colonoscopy are exams in which a tube is inserted in the rectum to view the bowel for signs of cancer or other health problems. Have you ever had either of these exams?

- 1 Yes
- 2 No
- 7 Don't know/Not sure
- 9 Refused

16.2 How long has it been since you had your last sigmoidoscopy or colonoscopy?

Read Only if Necessary

- 1 Within the past year (Anytime less than 12 months ago)
- 2 Within the past 2 years (1 year but less than 2 years ago)
- 3 Within the past 5 years (2 years but less than 5 years ago)
- 4 Within the past 10 years (5 years but less than 10 years ago)
- 5 10 or more years ago
- 7 Don't know/Not sure
- 9 Refused

17. CHOLESTEROL SCREENING:

17.1 Blood cholesterol is a fatty substance found in the blood. Have you ever had your blood cholesterol checked?

- 1 Yes
- 2 No **Go to next section**
- 7 Don't know/Not sure **Go to next section**
- 9 Refused **Go to next section**

Appendix B: BRFSS Questions Used in This Report



17.2 About how long has it been since you last had your blood cholesterol checked?

Read Only if Necessary

- 1 Within the past year (Anytime less than 12 months ago)
- 2 Within the past 2 years (1 year but less than 2 years ago)
- 3 Within the past 5 years (2 years but less than 5 years ago)
- 4 5 or more years ago
- 7 Don't know/Not sure
- 9 Refused

18. SUNSCREEN USE:

18.1 The next questions are about what you do to protect your skin when you go outside. When you go outside on a sunny summer day for more than one hour, how often do you use sunscreen or sunblock?

Would you say: **Please read**

- | | | |
|-------------------------|---|---|
| Summer means | 1 | Always |
| June, July, | 2 | Nearly always |
| and August. | 3 | Sometimes |
| Sunny is what | 4 | Seldom |
| respondent | 5 | Never Go to next section |
| considers sunny. | | |
| Do not | 8 | Don't stay out more than an hour |
| read | | Go to next section |
| these | 7 | Don't know/Not sure Go to next section |
| responses | 9 | Refused Go to next section |

18.2 What is the Sun Protection Factor or SPF of the sunscreen you use most often?

- | | |
|-----|---------------------|
| ___ | Number |
| 77 | Don't know/Not sure |
| 99 | Refused |

19. INFLUENZA VACCINATION:

19.1 During the past 12 months, have you had a flu shot?

- 1 Yes
- 2 No
- 7 Don't know/Not sure
- 9 Refused

20. PNEUMOCOCCAL VACCINATION:

20.1 Have you ever had a pneumonia shot? This shot is usually given only once or twice in a person's lifetime and is different from the flu shot. It is also called the pneumococcal vaccine.

- 1 Yes
- 2 No
- 7 Don't know/Not sure
- 9 Refused

21. FOLIC ACID CONSUMPTION (asked only of women ages 18-44):

21.1 Do you currently take any vitamin pills or supplements?

- | | | |
|--------------------|---|---|
| Include | 1 | Yes |
| liquid | 2 | No Go to next section |
| supplements | 7 | Don't know/Not sure Go to next section |
| | 9 | Refused Go to next section |

21.2 Are any of these a multivitamin?

- 1 Yes **Go to Q21.4**
- 2 No
- 7 Don't know/Not sure
- 9 Refused

21.3 Do any of the vitamin pills or supplements you take contain folic acid?

- 1 Yes
- 2 No **Go to next section**
- 7 Don't know/Not sure **Go to next section**
- 9 Refused **Go to next section**

21.4 How often do you take this vitamin pill or supplement?

- 1 ___ Times per day
- 2 ___ Times per week
- 3 ___ Times per month
- 777 Don't know/Not sure
- 999 Refused



Appendix B: BRFSS Questions Used in This Report

22. HIV TEST (asked only of adults ages 18-64):

22.1 As far as you know, have you ever been tested for HIV? Do not count tests you may have had as part of a blood donation.

- Include** 1 Yes
saliva 2 No **Go to next section**
tests 7 Don't know/Not sure **Go to next section**
 9 Refused **Go to next section**

23. CURRENT CIGARETTE SMOKING:

23.1 Have you smoked at least 100 cigarettes in your entire life?

- 5 packs** 1 Yes
= 100 2 No **Go to next section**
cigarettes 7 Don't know/Not sure **Go to next section**
 9 Refused **Go to next section**

23.2 Do you now smoke cigarettes every day, some days, or not at all?

- 1 Every day
 2 Some days
 3 Not at all
 9 Refused

24. QUIT SMOKING ATTEMPT (asked only of current smokers):

24.1 During the past 12 months, have you stopped smoking for one day or longer because you were trying to quit smoking?

- 1 Yes
 2 No
 7 Don't know/Not sure
 9 Refused

25. CHRONIC DRINKING:

25.1 A drink of alcohol is 1 can or bottle of beer, 1 glass of wine, 1 can or bottle of wine cooler, 1 cocktail, or 1 shot of liquor. During the past 30 days, how often have you had at least one drink of any alcoholic beverage?

- 1 ___ Days per week
 2 ___ Days in past 30
 888 No drinks in past 30 days **Go to next section**
 777 Don't know/Not sure **Go to next section**
 999 Refused **Go to next section**

25.2 On the days when you drank, about how many drinks did you drink on the average?

- ___ Number of drinks
 77 Don't know/Not sure
 99 Refused

26. BINGE DRINKING:

26.1 Considering all types of alcoholic beverages, how many times during the past 30 days did you have 5 or more drinks on an occasion?

- ___ Number of times
 88 None
 77 Don't know/Not sure
 99 Refused

27. DAILY VEGETABLE CONSUMPTION:

27.1 How often do you eat green salad?

- 1 ___ Per day
 2 ___ Per week
 3 ___ Per month
 4 ___ Per year
 555 Never
 777 Don't know/Not sure
 999 Refused

27.2 How often do you eat potatoes not including french fries, fried potatoes, or potato chips?

- 1 ___ Per day
 2 ___ Per week
 3 ___ Per month
 4 ___ Per year
 555 Never
 777 Don't know/Not sure
 999 Refused

27.3 How often do you eat carrots?

- 1 ___ Per day
 2 ___ Per week
 3 ___ Per month
 4 ___ Per year
 555 Never
 777 Don't know/Not sure
 999 Refused

Appendix B: BRFSS Questions Used in This Report



27.4 Not counting carrots, potatoes, or salad, how many servings of vegetables do you usually eat? (Example: a serving of vegetables at both lunch and dinner would be two servings)

- 1 ___ Per day
- 2 ___ Per week
- 3 ___ Per month
- 4 ___ Per year
- 555 Never
- 777 Don't know/Not sure
- 999 Refused

28. DAILY FRUIT CONSUMPTION:

28.1 How often do you drink fruit juices such as orange, grapefruit, or tomato?

- 1 ___ Per day
- 2 ___ Per week
- 3 ___ Per month
- 4 ___ Per year
- 555 Never
- 777 Don't know/Not sure
- 999 Refused

28.2 Not counting juice, how often do you eat fruit?

- 1 ___ Per day
- 2 ___ Per week
- 3 ___ Per month
- 4 ___ Per year
- 555 Never
- 777 Don't know/Not sure
- 999 Refused

29. PHYSICAL INACTIVITY:

29.1 The next few questions are about exercise, recreation, or physical activities other than your regular job duties. During the past month, did you participate in any physical activities or exercises such as running, calisthenics, golf, gardening, or walking for exercise?

- 1 Yes
- 2 No
- 7 Don't know/Not sure
- 9 Refused

30. REGULAR PHYSICAL ACTIVITY:

30.1 What type of physical activity or exercise did you spend the most time doing during the past month?

Activity [specify]: _____
See coding list A
 99 Refused

30.2 How far did you usually walk/run/jog/swim? (This question is only asked of respondents who answered running, jogging, walking or swimming to the previous question)

See coding list B if response is not in miles and tenths
 Miles and tenths ___:___
 777 Don't know/Not sure
 999 Refused

30.3 How many times per week or per month did you take part in this activity during the past month?

- 1 ___ Times per week
- 2 ___ Times per month
- 777 Don't know/Not sure
- 999 Refused

30.4 And when you took part in this activity, for how many minutes or hours did you usually keep at it?

Hours and minutes: __:___
 777 Don't know/Not sure
 999 Refused

30.5 Was there another physical activity or exercise that you participated in during the last month?

- 1 Yes
- 2 No
- 7 Don't know/Not sure
- 9 Refused

30.6 What other type of physical activity gave you the next most exercise during the past month?

Activity [specify]: _____
See coding list A
 99 Refused

30.7 How far did you usually walk/run/jog/swim? (Only ask if respondent answered running, jogging, walking or swimming to previous question)

See coding list B if response is not in miles and tenths
 Miles and tenths ___:___
 777 Don't know/Not sure
 999 Refused



Appendix B: BRFSS Questions Used in This Report

30.8 How many times per week or per month did you take part in this activity?

- 1 ___ Times per week
- 2 ___ Times per month
- 777 Don't know/Not sure
- 999 Refused

30.9 And when you took part in this activity, for how many minutes or hours did you usually keep at it?

- Hours and minutes: ___ : ___
- 777 Don't know/Not sure
- 999 Refused

31. OVERWEIGHT OR OBESE:

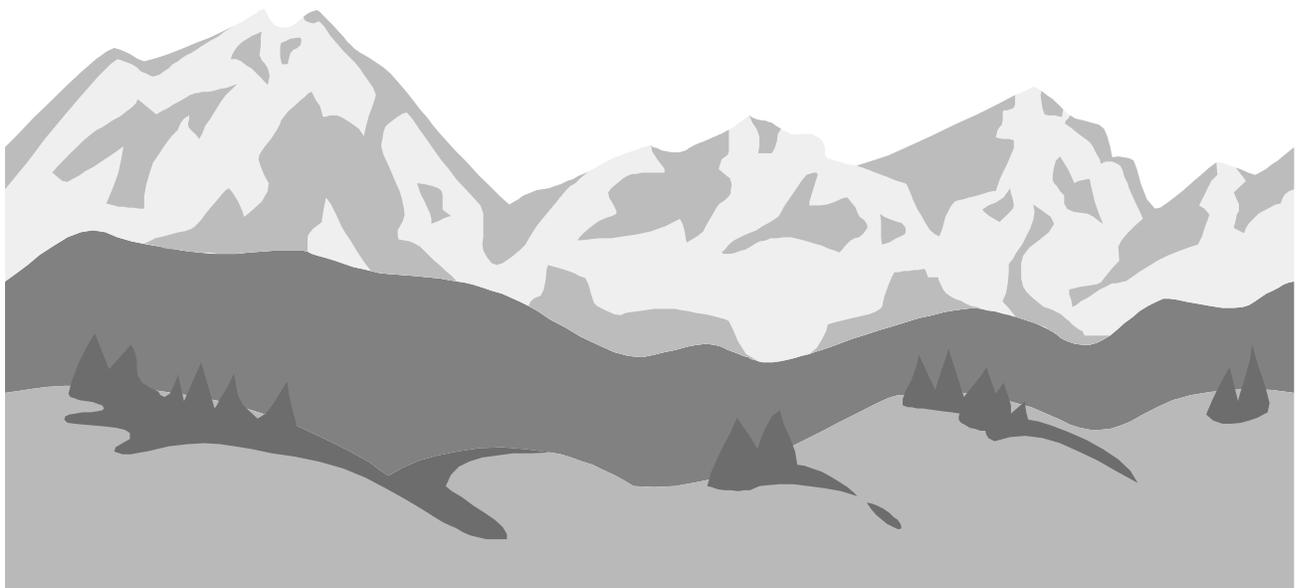
31.1 About how much do you weigh without shoes?

- Round** ___ ___ ___ Weight
- fractions up** pounds
- 7 7 7 Don't know/Not sure
- 9 9 9 Refused

31.2. About how tall are you without shoes?

- Round** ___ / ___ ___ Height
- fractions** ft/inches
- down** 7 7 7 Don't know/Not sure
- 9 9 9 Refused

Appendix C: Local Health District and State Demographic Profiles





Bear River Health District

Counties:

Box Elder
Cache
Rich

Population Estimates by Selected Demographic Characteristics
Utah Adults Ages 18 or Over, 2000

Bear River	Number in Each Category	Percentage of Population
Sex		
Male	44,827	48.8%
Female	46,990	51.2%
Total	91,817	100.0%
Age		
18-34	43,661	47.6%
35-49	23,585	25.7%
50-64	13,265	14.4%
65 or Over	11,306	12.3%
Total	91,817	100.0%
Race		
<i>Only One Race Selected</i>		
White	85,632	93.3%
Black	269	0.3%
American Indian	556	0.6%
Asian	1,749	1.9%
Pacific Islander	148	0.2%
Some Other Race	2,645	2.9%
<i>Two or More Races</i>	819	0.9%
Total	91,817	100.0%
Hispanic Origin		
Hispanic	5,101	5.6%
Non-Hispanic	86,716	94.4%
Total	91,817	100.0%

Source: Estimates for the average population counts for age, sex, and total population were provided by the Governor's Office of Planning and Budget. Estimates for the population distribution by race and Hispanic origin were estimated by the U.S. Census Bureau Data Set: Census 2000 Summary File 1 (SF 1) 100-Percent Data Table P12.



Bear River Health District (cont'd)

Population Estimates by Selected Demographic Characteristics
Utah Adults Ages 18 or Over, 1999-2001

Bear River	Number in Each Category	Percentage of Population	95% Confidence Intervals	
			Lower	Upper
<i>Income</i>				
Less Than \$20,000	14,654	16.0%	12.5%	19.4%
\$20,000-\$49,999	47,644	51.9%	47.1%	56.7%
\$50,000 or Over	29,528	32.2%	27.7%	36.6%
Total	91,817	100.0%		
<i>Education</i>				
Less Than High School	2,525	2.8%	1.7%	4.4%
H.S. Grad or G.E.D.	26,333	28.7%	24.6%	32.8%
Some Post High School	36,966	40.3%	35.8%	44.7%
College Graduate	25,993	28.3%	24.4%	32.3%
Total	91,817	100.0%		
<i>Employment Status</i>				
Employed	60,875	66.3%	62.3%	70.4%
Unemployed	4,049	4.4%	2.9%	6.7%
Homemaker	10,816	11.8%	9.0%	14.6%
Student	5,188	5.7%	3.5%	7.8%
Retired	10,880	11.9%	9.2%	14.5%
Total	91,817	100.0%		
<i>Marital Status</i>				
Married	67,834	73.9%	69.9%	77.9%
Divorced	5,693	6.2%	4.2%	8.2%
Widowed	3,544	3.9%	2.7%	5.4%
Separated	1,093	1.2%	0.6%	2.4%
Never Married	12,955	14.1%	10.6%	17.6%
Living as Married	707	0.8%	0.3%	1.9%
Total	91,817	100.0%		

Source: Estimates for the population distribution for income, education, employment status, and marital status were derived from the BRFSS surveys from 1999-2001. Estimates for the average population count from 1999-2001 were provided by the Governor's Office of Planning and Budget.



Central Utah Health District

Counties:

- Juab
- Millard
- Piute
- Sanpete
- Sevier
- Wayne

Population Estimates by Selected Demographic Characteristics
Utah Adults Ages 18 or Over, 2000

Central	Number in Each Category	Percentage of Population
Sex		
Male	21,606	49.9%
Female	21,680	50.1%
Total	43,286	100.0%
Age		
18-34	14,638	33.8%
35-49	12,204	28.2%
50-64	8,574	19.8%
65 or Over	7,870	18.2%
Total	43,286	100.0%
Race		
<i>Only One Race Selected</i>		
White	41,178	95.1%
Black	93	0.2%
American Indian	479	1.1%
Asian	178	0.4%
Pacific Islander	74	0.2%
Some Other Race	886	2.0%
<i>Two or More Races</i>	397	0.9%
Total	43,286	100.0%
Hispanic Origin		
Hispanic	1,871	4.3%
Non-Hispanic	41,415	95.7%
Total	43,286	100.0%

Source: Estimates for the average population counts for age, sex, and total population were provided by the Governor's Office of Planning and Budget. Estimates for the population distribution by race and Hispanic origin were estimated by the U.S. Census Bureau Data Set: Census 2000 Summary File 1 (SF 1) 100-Percent Data Table P12.



Central Utah Health District (cont'd)

Population Estimates by Selected Demographic Characteristics
Utah Adults Ages 18 or Over, 1999-2001

Central	Number in Each Category	Percentage of Population	95% Confidence Intervals	
			Lower	Upper
<i>Income</i>				
Less Than \$20,000	10,964	25.3%	21.1%	29.6%
\$20,000-\$49,999	22,413	51.8%	47.0%	56.6%
\$50,000 or Over	9,908	22.9%	18.9%	26.9%
Total	43,286	100.0%		
<i>Education</i>				
Less Than High School	2,653	6.1%	4.0%	8.2%
H.S. Grad or G.E.D.	15,877	36.7%	32.3%	41.1%
Some Post High School	15,605	36.1%	31.8%	40.3%
College Graduate	9,151	21.1%	17.3%	25.0%
Total	43,286	100.0%		
<i>Employment Status</i>				
Employed	26,331	60.8%	56.5%	65.2%
Unemployed	2,203	5.1%	3.3%	6.9%
Homemaker	6,203	14.3%	11.4%	17.3%
Student	1,519	3.5%	2.0%	6.4%
Retired	7,025	16.2%	13.0%	19.5%
Total	43,286	100.0%		
<i>Marital Status</i>				
Married	31,616	73.0%	68.9%	77.2%
Divorced	2,576	6.0%	4.3%	7.7%
Widowed	2,671	6.2%	4.5%	7.9%
Separated	255	0.6%	0.3%	1.3%
Never Married	5,277	12.2%	8.6%	15.8%
Living as Married	892	2.1%	0.9%	4.8%
Total	43,286	100.0%		

Source: Estimates for the population distribution for income, education, employment status, and marital status were derived from the BRFSS surveys from 1999-2001. Estimates for the average population count from 1999-2001 were provided by the Governor's Office of Planning and Budget.



Davis County Health District

Counties:

Davis

Population Estimates by Selected Demographic Characteristics
Utah Adults Ages 18 or Over, 2000

Davis	Number in Each Category	Percentage of Population
Sex		
Male	77,323	49.6%
Female	78,493	50.4%
Total	155,816	100.0%
Age		
18-34	62,857	40.3%
35-49	48,829	31.3%
50-64	26,501	17.0%
65 or Over	17,629	11.3%
Total	155,816	100.0%
Race		
<i>Only One Race Selected</i>		
White	144,572	92.8%
Black	1,734	1.1%
American Indian	896	0.6%
Asian	2,766	1.8%
Pacific Islander	378	0.2%
Some Other Race	3,513	2.3%
<i>Two or More Races</i>	1,958	1.3%
Total	155,816	100.0%
Hispanic Origin		
Hispanic	8,144	5.2%
Non-Hispanic	147,672	94.8%
Total	155,816	100.0%

Source: Estimates for the average population counts for age, sex, and total population were provided by the Governor's Office of Planning and Budget. Estimates for the population distribution by race and Hispanic origin were estimated by the U.S. Census Bureau Data Set: Census 2000 Summary File 1 (SF 1) 100-Percent Data Table P12.



Davis County Health District (cont'd)

Population Estimates by Selected Demographic Characteristics
Utah Adults Ages 18 or Over, 1999-2001

Davis	Number in Each Category	Percentage of Population	95% Confidence Intervals	
			Lower	Upper
Income				
Less Than \$20,000	10,440	6.7%	4.5%	8.9%
\$20,000-\$49,999	71,099	45.6%	40.8%	50.5%
\$50,000 or Over	74,277	47.7%	42.8%	52.6%
Total	155,816	100.0%		
Education				
Less Than High School	5,017	3.2%	1.9%	5.5%
H.S. Grad or G.E.D.	41,650	26.7%	22.7%	30.8%
Some Post High School	59,724	38.3%	33.7%	42.9%
College Graduate	49,425	31.7%	27.3%	36.1%
Total	155,816	100.0%		
Employment Status				
Employed	108,136	69.4%	65.1%	73.7%
Unemployed	4,737	3.0%	1.8%	5.1%
Homemaker	20,131	12.9%	9.8%	16.0%
Student	6,030	3.9%	2.3%	6.6%
Retired	16,766	10.8%	8.0%	13.5%
Total	155,816	100.0%		
Marital Status				
Married	117,470	75.4%	71.4%	79.4%
Divorced	13,681	8.8%	6.3%	11.3%
Widowed	4,051	2.6%	1.6%	4.2%
Separated	639	0.4%	0.2%	1.1%
Never Married	18,184	11.7%	8.6%	14.8%
Living as Married	1,792	1.2%	0.5%	2.8%
Total	155,816	100.0%		

Source: Estimates for the population distribution for income, education, employment status, and marital status were derived from the BRFSS surveys from 1999-2001. Estimates for the average population count from 1999-2001 were provided by the Governor's Office of Planning and Budget.



Salt Lake Valley Health District

Counties:

Salt Lake

Population Estimates by Selected Demographic Characteristics
Utah Adults Ages 18 or Over, 2000

Salt Lake	Number in Each Category	Percentage of Population
Sex		
Male	313,470	49.9%
Female	314,387	50.1%
Total	627,857	100.0%
Age		
18-34	261,552	41.7%
35-49	188,770	30.1%
50-64	104,499	16.6%
65 or Over	73,036	11.6%
Total	627,857	100.0%
Race		
<i>Only One Race Selected</i>		
White	550,463	87.7%
Black	6,208	1.0%
American Indian	5,202	0.8%
Asian	17,191	2.7%
Pacific Islander	6,197	1.0%
Some Other Race	31,052	4.9%
<i>Two or More Races</i>	11,544	1.8%
Total	627,857	100.0%
Hispanic Origin		
Hispanic	71,749	11.4%
Non-Hispanic	556,108	88.6%
Total	627,857	100.0%

Source: Estimates for the average population counts for age, sex, and total population were provided by the Governor's Office of Planning and Budget. Estimates for the population distribution by race and Hispanic origin were estimated by the U.S. Census Bureau Data Set: Census 2000 Summary File 1 (SF 1) 100-Percent Data Table P12.



Salt Lake Valley Health District (cont'd)

Population Estimates by Selected Demographic Characteristics
Utah Adults Ages 18 or Over, 1999-2001

Salt Lake	Number in Each Category	Percentage of Population	95% Confidence Intervals	
			Lower	Upper
<i>Income</i>				
Less Than \$20,000	75,029	12.0%	10.6%	13.3%
\$20,000-\$49,999	290,949	46.3%	44.1%	48.6%
\$50,000 or Over	261,879	41.7%	39.5%	44.0%
Total	627,857	100.0%		
<i>Education</i>				
Less Than High School	39,178	6.2%	5.1%	7.3%
H.S. Grad or G.E.D.	189,864	30.2%	28.3%	32.2%
Some Post High School	200,098	31.9%	29.9%	33.9%
College Graduate	198,717	31.7%	29.7%	33.6%
Total	627,857	100.0%		
<i>Employment Status</i>				
Employed	436,047	69.5%	67.5%	71.4%
Unemployed	36,730	5.9%	4.9%	6.9%
Homemaker	62,221	9.9%	8.7%	11.1%
Student	17,768	2.8%	2.2%	3.7%
Retired	75,092	12.0%	10.6%	13.4%
Total	627,857	100.0%		
<i>Marital Status</i>				
Married	414,951	66.1%	64.1%	68.1%
Divorced	56,821	9.1%	8.0%	10.1%
Widowed	33,276	5.3%	4.5%	6.1%
Separated	10,171	1.6%	1.2%	2.2%
Never Married	96,690	15.4%	13.9%	17.0%
Living as Married	15,948	2.5%	2.0%	3.3%
Total	627,857	100.0%		

Source: Estimates for the population distribution for income, education, employment status, and marital status were derived from the BRFSS surveys from 1999-2001. Estimates for the average population count from 1999-2001 were provided by the Governor's Office of Planning and Budget.



Southeastern Utah Health District

Counties:

Carbon
Emery
Grand
San Juan

Population Estimates by Selected Demographic Characteristics
Utah Adults Ages 18 or Over, 2000

Southeastern	Number in Each Category	Percentage of Population
Sex		
Male	17,728	48.6%
Female	18,723	51.4%
Total	36,451	100.0%
Age		
18-34	11,649	32.0%
35-49	11,374	31.2%
50-64	7,364	20.2%
65 or Over	6,064	16.6%
Total	36,451	100.0%
Race		
<i>Only One Race Selected</i>		
White	29,814	81.8%
Black	66	0.2%
American Indian	4,885	13.4%
Asian	113	0.3%
Pacific Islander	15	0.0%
Some Other Race	1,028	2.8%
<i>Two or More Races</i>	530	1.5%
Total	36,451	100.0%
Hispanic Origin		
Hispanic	2,656	7.3%
Non-Hispanic	33,795	92.7%
Total	36,451	100.0%

Source: Estimates for the average population counts for age, sex, and total population were provided by the Governor's Office of Planning and Budget. Estimates for the population distribution by race and Hispanic origin were estimated by the U.S. Census Bureau Data Set: Census 2000 Summary File 1 (SF 1) 100-Percent Data Table P12.



Southeastern Utah Health District (cont'd)

Population Estimates by Selected Demographic Characteristics
Utah Adults Ages 18 or Over, 1999-2001

Southeastern	Number in Each Category	Percentage of Population	95% Confidence Intervals	
			Lower	Upper
<i>Income</i>				
Less Than \$20,000	7,768	21.3%	17.5%	25.2%
\$20,000-\$49,999	19,592	53.8%	48.9%	58.6%
\$50,000 or Over	9,091	24.9%	20.5%	29.4%
Total	36,451	100.0%		
<i>Education</i>				
Less Than High School	4,013	11.0%	8.2%	13.8%
H.S. Grad or G.E.D.	13,906	38.2%	33.6%	42.7%
Some Post High School	11,584	31.8%	27.6%	35.9%
College Graduate	6,948	19.1%	15.1%	23.0%
Total	36,451	100.0%		
<i>Employment Status</i>				
Employed	22,829	62.6%	58.1%	67.1%
Unemployed	3,004	8.2%	5.8%	10.7%
Homemaker	4,144	11.4%	8.3%	14.4%
Student	981	2.7%	1.5%	4.7%
Retired	5,493	15.1%	11.9%	18.2%
Total	36,451	100.0%		
<i>Marital Status</i>				
Married	24,645	67.6%	63.5%	71.7%
Divorced	4,006	11.0%	8.3%	13.7%
Widowed	2,209	6.1%	4.2%	7.9%
Separated	485	1.3%	0.7%	2.6%
Never Married	4,640	12.7%	9.7%	15.8%
Living as Married	467	1.3%	0.7%	2.4%
Total	36,451	100.0%		

Source: Estimates for the population distribution for income, education, employment status, and marital status were derived from the BRFSS surveys from 1999-2001. Estimates for the average population count from 1999-2001 were provided by the Governor's Office of Planning and Budget.



Southwest Utah Health District

Counties:

- Beaver
- Garfield
- Iron
- Kane
- Washington

Population Estimates by Selected Demographic Characteristics
Utah Adults Ages 18 or Over, 2000

Southwest	Number in Each Category	Percentage of Population
Sex		
Male	47,514	48.7%
Female	50,081	51.3%
Total	97,595	100.0%
Age		
18-34	35,219	36.1%
35-49	23,568	24.1%
50-64	17,904	18.3%
65 or Over	20,904	21.4%
Total	97,595	100.0%
Race		
<i>Only One Race Selected</i>		
White	92,251	94.5%
Black	221	0.2%
American Indian	1,321	1.4%
Asian	582	0.6%
Pacific Islander	347	0.4%
Some Other Race	1,807	1.9%
<i>Two or More Races</i>	1,066	1.1%
Total	97,595	100.0%
Hispanic Origin		
Hispanic	4,154	4.3%
Non-Hispanic	93,441	95.7%
Total	97,595	100.0%

Source: Estimates for the average population counts for age, sex, and total population were provided by the Governor's Office of Planning and Budget. Estimates for the population distribution by race and Hispanic origin were estimated by the U.S. Census Bureau Data Set: Census 2000 Summary File 1 (SF 1) 100-Percent Data Table P12.



Southwest Utah Health District (cont'd)

Population Estimates by Selected Demographic Characteristics
Utah Adults Ages 18 or Over, 1999-2001

Southwest	Number in Each Category	Percentage of Population	95% Confidence Intervals	
			Lower	Upper
<i>Income</i>				
Less Than \$20,000	21,852	22.4%	18.1%	26.7%
\$20,000-\$49,999	51,228	52.5%	47.8%	57.2%
\$50,000 or Over	24,516	25.1%	21.1%	29.1%
Total	97,595	100.0%		
<i>Education</i>				
Less Than High School	6,890	7.1%	4.9%	9.2%
H.S. Grad or G.E.D.	31,094	31.9%	27.8%	35.9%
Some Post High School	36,686	37.6%	33.3%	41.9%
College Graduate	22,935	23.5%	19.9%	27.1%
Total	97,595	100.0%		
<i>Employment Status</i>				
Employed	56,332	57.7%	53.5%	61.9%
Unemployed	5,387	5.5%	3.6%	7.4%
Homemaker	9,750	10.0%	7.5%	12.5%
Student	4,646	4.8%	3.2%	7.0%
Retired	21,481	22.0%	18.6%	25.4%
Total	97,595	100.0%		
<i>Marital Status</i>				
Married	68,375	70.1%	66.0%	74.1%
Divorced	6,305	6.5%	4.7%	8.2%
Widowed	6,217	6.4%	4.7%	8.1%
Separated	1,035	1.1%	0.5%	2.4%
Never Married	14,395	14.8%	11.2%	18.3%
Living as Married	1,278	1.3%	0.6%	2.8%
Total	97,595	100.0%		

Source: Estimates for the population distribution for income, education, employment status, and marital status were derived from the BRFSS surveys from 1999-2001. Estimates for the average population count from 1999-2001 were provided by the Governor's Office of Planning and Budget.



Summit County Health District

Counties:

Summit

Population Estimates by Selected Demographic Characteristics
Utah Adults Ages 18 or Over, 2000

Summit	Number in Each Category	Percentage of Population
Sex		
Male	10,967	52.0%
Female	10,125	48.0%
Total	21,092	100.0%
Age		
18-34	6,864	32.5%
35-49	8,540	40.5%
50-64	4,227	20.0%
65 or Over	1,461	6.9%
Total	21,092	100.0%
Race		
<i>Only One Race Selected</i>		
White	19,456	92.2%
Black	38	0.2%
American Indian	66	0.3%
Asian	227	1.1%
Pacific Islander	9	0.0%
Some Other Race	1,100	5.2%
<i>Two or More Races</i>	195	0.9%
Total	21,092	100.0%
Hispanic Origin		
Hispanic	1,647	7.8%
Non-Hispanic	19,445	92.2%
Total	21,092	100.0%

Source: Estimates for the average population counts for age, sex, and total population were provided by the Governor's Office of Planning and Budget. Estimates for the population distribution by race and Hispanic origin were estimated by the U.S. Census Bureau Data Set: Census 2000 Summary File 1 (SF 1) 100-Percent Data Table P12.



Summit County Health District (cont'd)

Population Estimates by Selected Demographic Characteristics
Utah Adults Ages 18 or Over, 1999-2001

Summit	Number in Each Category	Percentage of Population	95% Confidence Intervals	
			Lower	Upper
<i>Income</i>				
Less Than \$20,000	1,036	4.9%	3.3%	7.4%
\$20,000-\$49,999	7,869	37.3%	31.6%	43.0%
\$50,000 or Over	12,187	57.8%	52.0%	63.6%
Total	21,092	100.0%		
<i>Education</i>				
Less Than High School	930	4.4%	2.8%	7.0%
H.S. Grad or G.E.D.	4,891	23.2%	18.8%	27.6%
Some Post High School	5,807	27.5%	22.0%	33.0%
College Graduate	9,464	44.9%	39.7%	50.1%
Total	21,092	100.0%		
<i>Employment Status</i>				
Employed	15,138	71.8%	67.1%	76.5%
Unemployed	903	4.3%	2.3%	7.9%
Homemaker	2,023	9.6%	6.7%	12.5%
Student	702	3.3%	1.8%	6.1%
Retired	2,324	11.0%	7.6%	14.4%
Total	21,092	100.0%		
<i>Marital Status</i>				
Married	14,674	69.6%	64.4%	74.7%
Divorced	1,405	6.7%	4.7%	8.6%
Widowed	555	2.6%	1.7%	4.0%
Separated	264	1.3%	0.7%	2.4%
Never Married	3,341	15.8%	11.6%	20.1%
Living as Married	854	4.1%	2.1%	7.9%
Total	21,092	100.0%		

Source: Estimates for the population distribution for income, education, employment status, and marital status were derived from the BRFSS surveys from 1999-2001. Estimates for the average population count from 1999-2001 were provided by the Governor's Office of Planning and Budget.



Tooele County Health District

Counties:

Tooele

Population Estimates by Selected Demographic Characteristics
Utah Adults Ages 18 or Over, 2000

Tooele	Number in Each Category	Percentage of Population
Sex		
Male	13,187	48.8%
Female	13,825	51.2%
Total	27,012	100.0%
Age		
18-34	11,285	41.8%
35-49	8,145	30.2%
50-64	4,548	16.8%
65 or Over	3,034	11.2%
Total	27,012	100.0%
Race		
<i>Only One Race Selected</i>		
White	24,385	90.3%
Black	344	1.3%
American Indian	473	1.8%
Asian	174	0.6%
Pacific Islander	45	0.2%
Some Other Race	1,110	4.1%
<i>Two or More Races</i>	480	1.8%
Total	27,012	100.0%
Hispanic Origin		
Hispanic	2,613	9.7%
Non-Hispanic	24,399	90.3%
Total	27,012	100.0%

Source: Estimates for the average population counts for age, sex, and total population were provided by the Governor's Office of Planning and Budget. Estimates for the population distribution by race and Hispanic origin were estimated by the U.S. Census Bureau Data Set: Census 2000 Summary File 1 (SF 1) 100-Percent Data Table P12.



Tooele County Health District (cont'd)

Population Estimates by Selected Demographic Characteristics
Utah Adults Ages 18 or Over, 1999-2001

Tooele	Number in Each Category	Percentage of Population	95% Confidence Intervals	
			Lower	Upper
<i>Income</i>				
Less Than \$20,000	3,295	12.2%	9.0%	15.4%
\$20,000-\$49,999	13,438	49.8%	44.9%	54.7%
\$50,000 or Over	10,278	38.1%	33.2%	42.9%
Total	27,012	100.0%		
<i>Education</i>				
Less Than High School	2,561	9.5%	6.7%	12.2%
H.S. Grad or G.E.D.	11,321	41.9%	37.1%	46.8%
Some Post High School	7,860	29.1%	25.2%	33.0%
College Graduate	5,270	19.5%	16.0%	23.0%
Total	27,012	100.0%		
<i>Employment Status</i>				
Employed	18,085	67.0%	62.5%	71.4%
Unemployed	1,745	6.5%	3.8%	9.1%
Homemaker	2,561	9.5%	7.0%	11.9%
Student	167	0.6%	0.3%	1.5%
Retired	4,457	16.5%	12.9%	20.1%
Total	27,012	100.0%		
<i>Marital Status</i>				
Married	19,559	72.4%	67.9%	77.0%
Divorced	2,439	9.0%	6.2%	11.9%
Widowed	1,205	4.5%	3.2%	6.2%
Separated	791	2.9%	1.5%	5.7%
Never Married	2,409	8.9%	5.6%	12.3%
Living as Married	608	2.3%	1.3%	3.9%
Total	27,012	100.0%		

Source: Estimates for the population distribution for income, education, employment status, and marital status were derived from the BRFSS surveys from 1999-2001. Estimates for the average population count from 1999-2001 were provided by the Governor's Office of Planning and Budget.



TriCounty Health District

Counties:

Daggett
Duchesne
Uintah

Population Estimates by Selected Demographic Characteristics
Utah Adults Ages 18 or Over, 2000

TriCounty	Number in Each Category	Percentage of Population
Sex		
Male	13,059	49.5%
Female	13,300	50.5%
Total	26,359	100.0%
Age		
18-34	8,640	32.8%
35-49	8,349	31.7%
50-64	5,380	20.4%
65 or Over	3,990	15.1%
Total	26,359	100.0%
Race		
<i>Only One Race Selected</i>		
White	23,700	89.9%
Black	28	0.1%
American Indian	1,885	7.2%
Asian	69	0.3%
Pacific Islander	20	0.1%
Some Other Race	324	1.2%
<i>Two or More Races</i>	333	1.3%
Total	26,359	100.0%
Hispanic Origin		
Hispanic	878	3.3%
Non-Hispanic	25,481	96.7%
Total	26,359	100.0%

Source: Estimates for the average population counts for age, sex, and total population were provided by the Governor's Office of Planning and Budget. Estimates for the population distribution by race and Hispanic origin were estimated by the U.S. Census Bureau Data Set: Census 2000 Summary File 1 (SF 1) 100-Percent Data Table P12.



TriCounty Health District (cont'd)

Population Estimates by Selected Demographic Characteristics
Utah Adults Ages 18 or Over, 1999-2001

TriCounty	Number in Each Category	Percentage of Population	95% Confidence Intervals	
			Lower	Upper
<i>Income</i>				
Less Than \$20,000	6,461	24.5%	20.3%	28.7%
\$20,000-\$49,999	14,181	53.8%	49.0%	58.6%
\$50,000 or Over	5,717	21.7%	17.5%	25.9%
Total	26,359	100.0%		
<i>Education</i>				
Less Than High School	3,453	13.1%	10.0%	16.2%
H.S. Grad or G.E.D.	12,241	46.4%	41.8%	51.0%
Some Post High School	7,143	27.1%	23.0%	31.2%
College Graduate	3,522	13.4%	10.3%	16.5%
Total	26,359	100.0%		
<i>Employment Status</i>				
Employed	15,966	60.6%	56.1%	65.1%
Unemployed	2,976	11.3%	8.2%	14.3%
Homemaker	3,885	14.7%	11.6%	17.9%
Student	448	1.7%	0.7%	3.9%
Retired	3,084	11.7%	9.1%	14.3%
Total	26,359	100.0%		
<i>Marital Status</i>				
Married	19,142	72.6%	68.5%	76.7%
Divorced	2,227	8.5%	5.9%	11.0%
Widowed	1,595	6.1%	4.0%	8.1%
Separated	253	1.0%	0.5%	1.9%
Never Married	2,686	10.2%	7.3%	13.1%
Living as Married	459	1.7%	0.9%	3.4%
Total	26,359	100.0%		

Source: Estimates for the population distribution for income, education, employment status, and marital status were derived from the BRFSS surveys from 1999-2001. Estimates for the average population count from 1999-2001 were provided by the Governor's Office of Planning and Budget.



Utah County Health District

Counties:

Utah

Population Estimates by Selected Demographic Characteristics
Utah Adults Ages 18 or Over, 2000

Utah County	Number in Each Category	Percentage of Population
Sex		
Male	119,187	48.6%
Female	126,077	51.4%
Total	245,264	100.0%
Age		
18-34	134,742	54.9%
35-49	55,742	22.7%
50-64	31,063	12.7%
65 or Over	23,717	9.7%
Total	245,264	100.0%
Race		
<i>Only One Race Selected</i>		
White	228,045	93.0%
Black	601	0.2%
American Indian	1,339	0.5%
Asian	3,068	1.3%
Pacific Islander	1,329	0.5%
Some Other Race	7,681	3.1%
<i>Two or More Races</i>	3,200	1.3%
Total	245,264	100.0%
Hispanic Origin		
Hispanic	16,532	6.7%
Non-Hispanic	228,732	93.3%
Total	245,264	100.0%

Source: Estimates for the average population counts for age, sex, and total population were provided by the Governor's Office of Planning and Budget. Estimates for the population distribution by race and Hispanic origin were estimated by the U.S. Census Bureau Data Set: Census 2000 Summary File 1 (SF 1) 100-Percent Data Table P12.



Utah County Health District (cont'd)

Population Estimates by Selected Demographic Characteristics
Utah Adults Ages 18 or Over, 1999-2001

Utah County	Number in Each Category	Percentage of Population	95% Confidence Intervals	
			Lower	Upper
<i>Income</i>				
Less Than \$20,000	35,490	14.5%	10.8%	18.1%
\$20,000-\$49,999	114,097	46.5%	42.3%	50.7%
\$50,000 or Over	95,702	39.0%	35.1%	43.0%
Total	245,264	100.0%		
<i>Education</i>				
Less Than High School	14,274	5.8%	3.0%	8.6%
H.S. Grad or G.E.D.	58,226	23.7%	20.6%	26.9%
Some Post High School	98,449	40.1%	36.4%	43.9%
College Graduate	74,340	30.3%	26.9%	33.7%
Total	245,264	100.0%		
<i>Employment Status</i>				
Employed	152,873	62.3%	58.4%	66.3%
Unemployed	8,854	3.6%	2.5%	5.2%
Homemaker	36,005	14.7%	12.2%	17.2%
Student	23,104	9.4%	6.6%	12.3%
Retired	24,404	10.0%	7.8%	12.2%
Total	245,264	100.0%		
<i>Marital Status</i>				
Married	168,864	68.9%	65.0%	72.7%
Divorced	14,642	6.0%	4.3%	7.6%
Widowed	8,903	3.6%	2.6%	5.0%
Separated	2,109	0.9%	0.4%	2.1%
Never Married	49,028	20.0%	16.3%	23.7%
Living as Married	1,717	0.7%	0.3%	1.5%
Total	245,264	100.0%		

Source: Estimates for the population distribution for income, education, employment status, and marital status were derived from the BRFSS surveys from 1999-2001. Estimates for the average population count from 1999-2001 were provided by the Governor's Office of Planning and Budget.



Wasatch County Health District

Counties:

Wasatch

Population Estimates by Selected Demographic Characteristics
Utah Adults Ages 18 or Over, 2000

Wasatch	Number in Each Category	Percentage of Population
Sex		
Male	5,065	49.9%
Female	5,089	50.1%
Total	10,154	100.0%
Age		
18-34	3,650	35.9%
35-49	3,344	32.9%
50-64	1,857	18.3%
65 or Over	1,303	12.8%
Total	10,154	100.0%
Race		
<i>Only One Race Selected</i>		
White	9,756	96.1%
Black	13	0.1%
American Indian	49	0.5%
Asian	33	0.3%
Pacific Islander	11	0.1%
Some Other Race	182	1.8%
<i>Two or More Races</i>		
	110	1.1%
Total	10,154	100.0%
Hispanic Origin		
Hispanic	465	4.6%
Non-Hispanic	9,689	95.4%
Total	10,154	100.0%

Source: Estimates for the average population counts for age, sex, and total population were provided by the Governor's Office of Planning and Budget. Estimates for the population distribution by race and Hispanic origin were estimated by the U.S. Census Bureau Data Set: Census 2000 Summary File 1 (SF 1) 100-Percent Data Table P12.



Wasatch County Health District (cont'd)

Population Estimates by Selected Demographic Characteristics
Utah Adults Ages 18 or Over, 1999-2001

Wasatch	Number in Each Category	Percentage of Population	95% Confidence Intervals	
			Lower	Upper
<i>Income</i>				
Less Than \$20,000	1,042	10.3%	6.5%	14.0%
\$20,000-\$49,999	4,889	48.2%	42.2%	54.1%
\$50,000 or Over	4,223	41.6%	35.6%	47.5%
Total	10,154	100.0%		
<i>Education</i>				
Less Than High School	558	5.5%	3.1%	7.9%
H.S. Grad or G.E.D.	3,416	33.6%	27.3%	40.0%
Some Post High School	3,075	30.3%	24.9%	35.7%
College Graduate	3,105	30.6%	25.5%	35.7%
Total	10,154	100.0%		
<i>Employment Status</i>				
Employed	7,000	68.9%	63.2%	74.7%
Unemployed	515	5.1%	2.4%	7.7%
Homemaker	1,273	12.5%	7.7%	17.4%
Student	116	1.1%	0.3%	5.3%
Retired	1,249	12.3%	9.0%	15.7%
Total	10,154	100.0%		
<i>Marital Status</i>				
Married	8,278	81.5%	77.7%	85.4%
Divorced	488	4.8%	3.4%	6.8%
Widowed	303	3.0%	2.1%	4.3%
Separated	45	0.4%	0.2%	1.2%
Never Married	861	8.5%	5.5%	11.5%
Living as Married	180	1.8%	0.9%	3.6%
Total	10,154	100.0%		

Source: Estimates for the population distribution for income, education, employment status, and marital status were derived from the BRFSS surveys from 1999-2001. Estimates for the average population count from 1999-2001 were provided by the Governor's Office of Planning and Budget.



Weber-Morgan Health District

Counties:

Weber
Morgan

Population Estimates by Selected Demographic Characteristics
Utah Adults Ages 18 or Over, 2000

Weber-Morgan	Number in Each Category	Percentage of Population
Sex		
Male	69,773	49.5%
Female	71,049	50.5%
Total	140,822	100.0%
Age		
18-34	53,726	38.2%
35-49	41,274	29.3%
50-64	24,813	17.6%
65 or Over	21,009	14.9%
Total	140,822	100.0%
Race		
<i>Only One Race Selected</i>		
White	125,917	89.4%
Black	1,864	1.3%
American Indian	985	0.7%
Asian	1,963	1.4%
Pacific Islander	206	0.1%
Some Other Race	7,888	5.6%
<i>Two or More Races</i>	1,999	1.4%
Total	140,822	100.0%
Hispanic Origin		
Hispanic	15,539	11.0%
Non-Hispanic	125,283	89.0%
Total	140,822	100.0%

Source: Estimates for the average population counts for age, sex, and total population were provided by the Governor's Office of Planning and Budget. Estimates for the population distribution by race and Hispanic origin were estimated by the U.S. Census Bureau Data Set: Census 2000 Summary File 1 (SF 1) 100-Percent Data Table P12.



Weber-Morgan Health District (cont'd)

Population Estimates by Selected Demographic Characteristics
Utah Adults Ages 18 or Over, 1999-2001

Weber-Morgan	Number in Each Category	Percentage of Population	95% Confidence Intervals	
			Lower	Upper
<i>Income</i>				
Less Than \$20,000	19,729	14.0%	10.8%	17.2%
\$20,000-\$49,999	70,003	49.7%	44.9%	54.5%
\$50,000 or Over	51,090	36.3%	31.6%	41.0%
Total	140,822	100.0%		
<i>Education</i>				
Less Than High School	9,843	7.0%	4.6%	9.4%
H.S. Grad or G.E.D.	49,527	35.2%	30.8%	39.6%
Some Post High School	50,907	36.2%	31.7%	40.6%
College Graduate	30,530	21.7%	18.0%	25.4%
Total	140,822	100.0%		
<i>Employment Status</i>				
Employed	92,027	65.4%	61.1%	69.6%
Unemployed	7,661	5.4%	3.4%	7.5%
Homemaker	14,068	10.0%	7.3%	12.6%
Student	3,732	2.7%	1.4%	5.1%
Retired	23,334	16.6%	13.5%	19.7%
Total	140,822	100.0%		
<i>Marital Status</i>				
Married	96,590	68.6%	64.3%	72.9%
Divorced	14,153	10.1%	7.4%	12.7%
Widowed	6,576	4.7%	3.4%	6.5%
Separated	1,817	1.3%	0.7%	2.4%
Never Married	19,462	13.8%	10.4%	17.2%
Living as Married	2,225	1.6%	0.8%	3.1%
Total	140,822	100.0%		

Source: Estimates for the population distribution for income, education, employment status, and marital status were derived from the BRFSS surveys from 1999-2001. Estimates for the average population count from 1999-2001 were provided by the Governor's Office of Planning and Budget.



State of Utah

Population Estimates by Selected Demographic Characteristics
Utah Adults Ages 18 or Over, 2000

State of Utah	Number in Each Category	Percentage of Population
Sex		
Male	753,706	49.5%
Female	769,819	50.5%
Total	1,523,525	100.0%
Age		
18-34	648,483	42.6%
35-49	433,724	28.5%
50-64	249,995	16.4%
65 or Over	191,323	12.6%
Total	1,523,525	100.0%
Race		
<i>Only One Race Selected</i>		
White	1,375,103	90.3%
Black	11,483	0.8%
American Indian	18,174	1.2%
Asian	28,126	1.8%
Pacific Islander	8,781	0.6%
Some Other Race	59,224	3.9%
<i>Two or More Races</i>	22,634	1.5%
Total	1,523,525	100.0%
Hispanic Origin		
Hispanic	130,924	8.6%
Non-Hispanic	1,392,601	91.4%
Total	1,523,525	100.0%

Source: Estimates for the average population counts for age, sex, and total population were provided by the Governor's Office of Planning and Budget. Estimates for the population distribution by race and Hispanic origin were estimated by the U.S. Census Bureau Data Set: Census 2000 Summary File 1 (SF 1) 100-Percent Data Table P12.



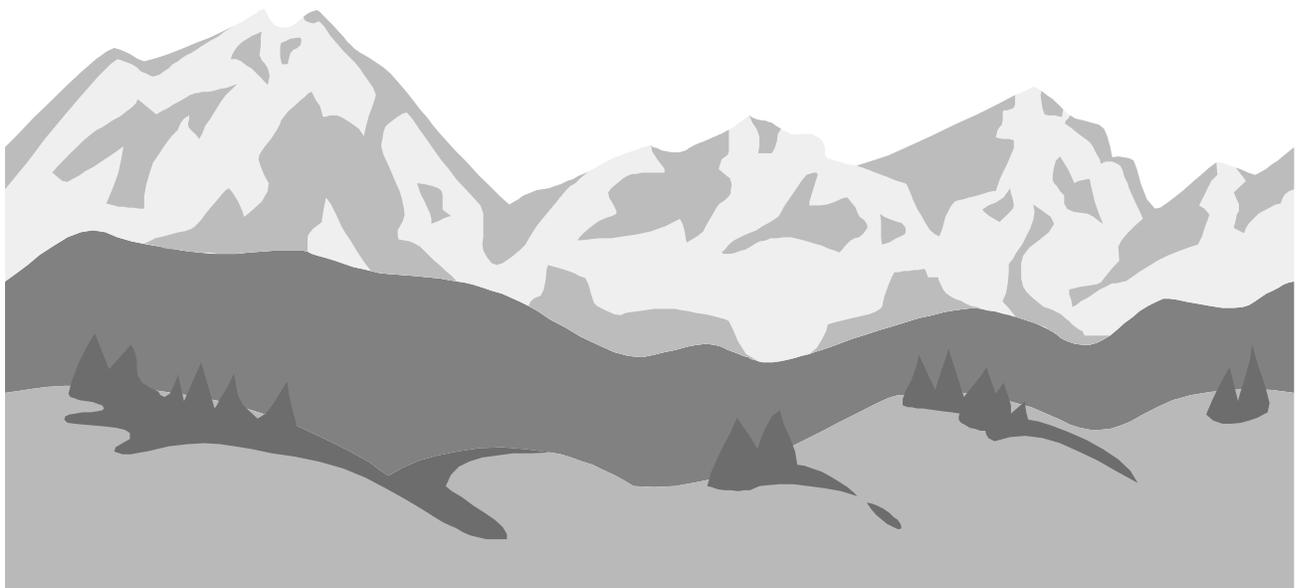
State of Utah

Population Estimates by Selected Demographic Characteristics
Utah Adults Ages 18 or Over, 1999-2001

State of Utah	Number in Each Category	Percentage of Population	95% Confidence Intervals	
			Lower	Upper
<i>Income</i>				
Less Than \$20,000	207,656	13.6%	12.6%	14.6%
\$20,000-\$49,999	727,483	47.8%	46.3%	49.2%
\$50,000 or Over	588,385	38.6%	37.2%	40.0%
Total	1,523,525	100.0%		
<i>Education</i>				
Less Than High School	91,716	6.0%	5.3%	6.8%
H.S. Grad or G.E.D.	458,124	30.1%	28.9%	31.3%
Some Post High School	534,148	35.1%	33.8%	36.3%
College Graduate	439,537	28.9%	27.7%	30.0%
Total	1,523,525	100.0%		
<i>Employment Status</i>				
Employed	1,011,925	66.4%	65.2%	67.7%
Unemployed	78,766	5.2%	4.6%	5.7%
Homemaker	173,225	11.4%	10.6%	12.2%
Student	64,445	4.2%	3.6%	4.9%
Retired	195,316	12.8%	12.0%	13.7%
Total	1,523,525	100.0%		
<i>Marital Status</i>				
Married	1,052,299	69.1%	67.8%	70.3%
Divorced	124,624	8.2%	7.5%	8.8%
Widowed	70,996	4.7%	4.2%	5.1%
Separated	18,892	1.2%	1.0%	1.5%
Never Married	229,748	15.1%	14.0%	16.1%
Living as Married	27,119	1.8%	1.5%	2.2%
Total	1,523,525	100.0%		

Source: Estimates for the population distribution for income, education, employment status, and marital status were derived from the BRFSS surveys from 1999-2001. Estimates for the average population count from 1999-2001 were provided by the Governor's Office of Planning and Budget.

Appendix D: 1995-1998 and 1999-2001 Comparison





Appendix D: 1995-1998 and 1999-2001 Comparison

	Bear River		Central		Davis		Salt Lake		Southeastern	
	1995-1998	1999-2001	1995-1998	1999-2001	1995-1998	1999-2001	1995-1998	1999-2001	1995-1998	1999-2001
General Health Status	9.3%	9.3%	14.4%	14.1%	9.8%	8.7%	10.8%	11.1%	15.6%	16.5%
Diabetes	2.7%	3.2%	5.4%	5.5%	3.4%	3.6%	3.8%	4.6%	4.8%	4.8%
High Cholesterol Awareness	17.0%	22.6%	13.0%	20.6%	15.0%	24.5% *	17.7%	20.5%	17.1%	16.3%
High Blood Pressure Awareness	19.9%	24.2%	20.0%	26.4%	19.9%	22.1%	20.9%	22.6%	22.4%	25.5%
Unable to Get Needed Care Due to Cost	10.1%	11.9%	11.6%	8.5%	6.0%	7.2%	11.0%	10.5%	14.2%	16.0%
Dental Care Coverage	60.8%	64.4%	47.6%	55.0%	73.3%	74.2%	64.9%	66.8%	52.6%	51.7%
Routine Dental Care	73.8%	74.9%	62.2%	69.8%	78.5%	79.0%	70.8%	75.3% *	59.5%	66.4%
Cholesterol Screening	74.2%	62.8% *	68.9%	61.5%	77.5%	71.6%	76.3%	67.1% *	64.7%	60.1%
Current Cigarette Smoking	11.3%	8.5%	14.3%	12.4%	10.1%	13.1%	17.3%	16.1%	20.3%	19.0%
Quit Smoking Attempt	58.9%	58.2%	47.3%	46.4%	46.6%	53.2%	45.8%	54.6%	38.0%	54.4%
Binge Drinking	5.8%	6.5%	6.0%	9.0%	6.6%	5.3%	10.8%	13.4%	12.6%	12.8%
Physical Inactivity	19.1%	12.8%	22.9%	19.1%	14.8%	16.9%	18.2%	16.6%	21.0%	18.4%
Regular Physical Activity	26.1%	28.1%	29.5%	24.3%	25.1%	27.2%	27.3%	24.8%	28.9%	28.4%
Overweight or Obese	49.5%	53.0%	49.5%	59.6%	51.2%	58.6%	49.4%	53.5%	49.0%	53.3%

* statistically significant

	Summit		Tooele		TriCounty		Utah County		Wasatch	
	1995-1998	1999-2001	1995-1998	1999-2001	1995-1998	1999-2001	1995-1998	1999-2001	1995-1998	1999-2001
General Health Status	5.2%	6.2%	11.5%	15.8%	13.6%	17.6%	10.1%	7.8%	9.5%	9.2%
Diabetes	2.5%	2.5%	4.9%	8.1%	2.7%	6.0%	3.2%	4.5%	3.4%	5.0%
High Cholesterol Awareness	13.2%	19.2%	20.0%	26.4%	12.8%	18.6%	14.7%	18.0%	15.1%	19.6%
High Blood Pressure Awareness	11.6%	14.6%	21.0%	29.2%	22.5%	24.4%	17.5%	16.4%	19.2%	24.3%
Unable to Get Needed Care Due to Cost	9.2%	8.1%	8.9%	7.9%	16.7%	19.7%	11.2%	8.4%	8.0%	9.1%
Dental Care Coverage	57.8%	64.9%	75.0%	75.6%	45.6%	45.9%	62.3%	66.6%	53.4%	62.0%
Routine Dental Care	73.7%	84.3% *	63.8%	69.3%	59.9%	58.8%	70.6%	76.2%	71.9%	79.1%
Cholesterol Screening	73.5%	69.7%	76.8%	69.8%	68.7%	58.4%	76.4%	62.7% *	67.2%	64.6%
Current Cigarette Smoking	13.4%	8.4%	20.1%	18.4%	18.6%	19.3%	6.7%	5.8%	13.4%	9.7%
Quit Smoking Attempt	53.1%	45.8%	36.8%	47.4%	43.1%	53.2%	61.0%	66.3%	45.9%	61.4%
Binge Drinking	19.4%	20.7%	9.4%	12.1%	9.8%	10.9%	4.9%	5.3%	6.8%	7.2%
Physical Inactivity	11.7%	10.1%	27.6%	20.2%	20.1%	22.5%	13.0%	14.3%	14.9%	19.5%
Regular Physical Activity	36.8%	42.8%	23.2%	24.1%	28.2%	24.6%	26.4%	28.4%	26.1%	26.0%
Overweight or Obese	37.4%	41.8%	55.6%	56.2%	51.9%	60.8% *	45.9%	48.1%	48.5%	54.1%

* statistically significant

Note: Crude rates have been reported here because data for 1995-1998 were not age-adjusted.



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**Utah Behavioral Risk Factor Surveillance System Local Health District Report, 1999-2001
Feedback Form**

We welcome your opinions of this report. Please help us by completing this page and returning it to:

*Office of Public Health Assessment, Utah Department of Health
P O Box 142101, Salt Lake City, UT 84114-2101
phone: (801) 538-6108 fax: (801) 538-9346 e-mail: phdata@utah.gov*

1. Why were you interested in this report? *(CHECK ALL THAT APPLY)*
 - POLICY SETTING AND STRATEGIC PLANNING (ALLOCATION OF RESOURCES, SETTING PRIORITIES, ETC.)
 - PROGRAM PLANNING AND MONITORING (TRACKING PROGRESS ON PROGRAM OBJECTIVES, ETC.)
 - BACKGROUND INFORMATION FOR RESEARCH, FUNDING PROPOSALS, ETC.
 - ADVOCACY FOR SPECIAL POPULATION GROUP(S)
 - SATISFYING REQUESTS FOR INFORMATION FROM OTHERS WHO CONTACT YOU
 - OTHER (SPECIFY): _____

2. For what specific activities did you use the information in this report?

3. Which information in this report did you find most useful?

4. What could we have done to make the information more useful?

5.

a. Was the purpose clearly stated?	<input type="radio"/> YES	<input type="radio"/> NO	
b. Was it organized so that you could find information easily?	<input type="radio"/> YES	<input type="radio"/> NO	
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i. Please clarify your answers to Questions #5a-h if necessary:

6. What other topics would you like to see covered in future reports?

7. Is there anything else you can tell us that could help us with future reports of this type?

Thank you. If you'd like, you may provide your name, address and phone number. We may want to call to discuss your ideas with you further. (OPTIONAL):

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