Lifestyle and behavioral risk factors, such as tobacco use, diet and exercise habits, and misuse of alcohol are responsible for premature deaths, disability and substantial health care expenditures. A recent 1996 Utah Health Status Survey report presented data on four lifestyle factors: exercise, consumption of fruits or vegetables—5 a Day, alcohol consumption, and cigarette smoking. This Health Status Update reviews highlights of that report.

Physical Activity
- The percentage of Utahns reporting regular vigorous exercise increased from 38% in 1986 to 46% in 1996.
- Many who reported regular exercise had been doing so for 5 or more years suggesting it was a well-established lifestyle pattern in those people.
- At most, half of people reported this important health behavior in all the demographic subgroups examined.

Fruit and Vegetable Consumption - 5 a Day
- 5 a Day is a health initiative to promote eating an appropriate amount of fruits and vegetables, which provide direct nutritional benefits as well as indirect benefits if they are substituted for less healthy foods—especially foods that are high in fat.
- Only about one in seven Utahns (13%) reported 5 servings a day of fruits and vegetables. More than half of Utah adults reported less than 3 servings a day.
- The percentage of adults eating 5 a Day increased somewhat with age, but fewer than one in 5 Utahns reported eating 5 a Day in all age groups.
- 5 a Day was somewhat more common for females (15.2% vs. 10.4%), and those with more education or higher income levels.

Eating Fruits and Vegetables - 5 a Day
Percentage of adults (age 18 or over) by number of servings of fruits and vegetables eaten on a typical day, Utah 1996.

<table>
<thead>
<tr>
<th>Number of Servings of Fruits or Vegetables per Day</th>
<th>Percentage of Adults</th>
</tr>
</thead>
<tbody>
<tr>
<td>&lt;1</td>
<td>6.1%</td>
</tr>
<tr>
<td>1 to &lt;2</td>
<td>26.9%</td>
</tr>
<tr>
<td>2 to &lt;3</td>
<td>24.0%</td>
</tr>
<tr>
<td>3 to &lt;4</td>
<td>18.1%</td>
</tr>
<tr>
<td>4 to &lt;5</td>
<td>11.4%</td>
</tr>
<tr>
<td>5 to &lt;6</td>
<td>6.2%</td>
</tr>
<tr>
<td>6 or More</td>
<td>6.7%</td>
</tr>
</tbody>
</table>

Source: 1996 Utah Health Status Survey

Alcohol Consumption
- The percentage of Utah adults reporting heavy alcohol consumption remained unchanged at 2.1%, or about 28,000 adults in 1996.
- The percentage of Utah adults reporting binge drinking (5 or more drinks on one occasion in the past month) increased from 6.5% in 1991 to 8.5% in 1996 (about 114,000 adults in 1996).
- Driving within one hour after four or more drinks decreased substantially between 1986 and 1991, but remained stable from 1991 to 1996 at 1.1% (about 15,000 adults).

Binge Drinking by Age and Sex
Percentage of adults (age 18 or over) who reported drinking 5 or more drinks on one occasion in past month, Utah 1996.

Alcohol Consumption Trends
Percentage of adults (age 18 or over) reporting heavy drinking 1, binge drinking 2, or driving after drinking 3, Utah, 1986, 1991, 1996.

<table>
<thead>
<tr>
<th>Year</th>
<th>Heavy Drinking</th>
<th>Binge Drinking</th>
<th>Driving after Drinking</th>
</tr>
</thead>
<tbody>
<tr>
<td>1986</td>
<td>2.1%</td>
<td>4.1%</td>
<td>3.6%</td>
</tr>
<tr>
<td>1991</td>
<td>2.1%</td>
<td>2.1%</td>
<td>1.1%</td>
</tr>
<tr>
<td>1996</td>
<td>2.1%</td>
<td>2.1%</td>
<td>1.1%</td>
</tr>
</tbody>
</table>

1 consumed, on average, more than 60 drinks per month
2 5 or more drinks on one occasion in past month
3 drove within one hour after drinking 4 or more drinks in past month

Utah Health Status Update:
Lifestyle and Behavioral Risk Factors
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Additional information about this topic are available from the Office of Public Health Data, Utah Department of Health, P O Box 142101, Salt Lake City, Utah 84114-2101, (801) 538-6108, FAX (801) 536-0947, email: phdata@doh.state.ut.us. The complete report, Lifestyle Factors in Utah: Exercise, 5 a Day, Alcohol, and Tobacco, and other health data and reports can be obtained on the Internet at URL http://hlunix.hl.state.ut.us/action2000. Please send any comments on this report to the Office of Public Health Data.

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