Hispanic Health in Utah
A Survey Report

Utah Department of Health
Bureau of Health Promotion

June 2002

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Executive Summary

Overview

Despite the numerous interventions developed specifically to address health issues for all under-served populations, ethnic disparity continues to be a compelling public health problem. Health differences between Hispanic and non-Hispanic adults are particularly striking for certain health conditions and risk behaviors, often impacted by socio-economic barriers. Gaps in disease status and access to care cannot be accurately identified without sufficient information.

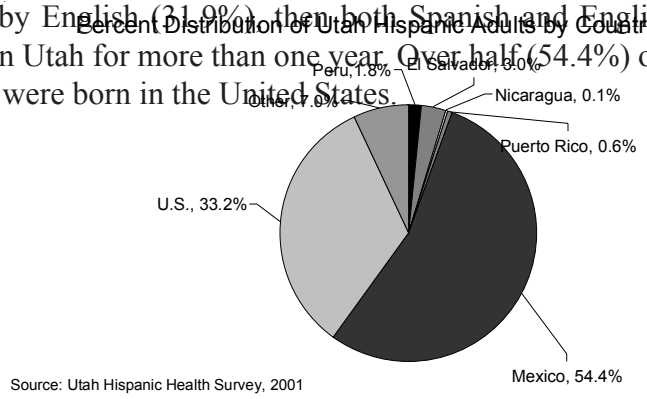
Hispanic persons are the largest minority group in Utah. In 2000, there were over 200,000 Hispanic residents, comprising just over nine percent of the state population.[1] Because general population surveys typically sample a proportionate number of Hispanic persons, only 9% of the survey samples will typically be persons who identify themselves as Hispanic. Information gained from those surveys on the Hispanic population tends to be imprecise, allowing only broad statements about the health status and risk behaviors of Utah's Hispanic residents. This imprecision makes it difficult to appropriately define health care policies and target interventions. A better understanding of this population will improve the development, implementation, and evaluation of interventions, and allow for more appropriate allocation of resources.

The Bureau of Health Promotion (BHP) in the Utah Department of Health (UDOH) conducted the 2001 Utah Hispanic Health Survey to obtain baseline data for the Hispanic population. Survey results will be disseminated to Utah health care professionals and policy makers to more effectively address the health care needs of this population.

This document presents an overview of health status, health care access, activity limitation, chronic disease prevalence, health behavior, and injuries among the Utah Hispanic adult population, aged 18 and over. Where possible, comparisons are included with the total Utah adult population, drawing from the statewide Behavioral Risk Factor Surveillance System (BRFSS).[2] Comparisons have been made only where question wording was identical; however the two surveys presented questions to respondents in somewhat different order – so some differences observed between Utahns in the Hispanic Survey and those in the general population BRFSS survey may be at least partially related to method differences between the two questionnaires.

The sample is representative of all Utah Hispanic adults. It is comprised of 939 Utah adults aged 18 and over who identified themselves as Hispanic or Latino. Telephone interviews were conducted in both English and Spanish by a contracted research agency; 42% of interviews were conducted in Spanish.

The majority of the respondents (55.7%) reported that the language most often spoken at home was Spanish, followed by English (31.9%), then both Spanish and English (12.2%). Most respondents (97.4%) had lived in Utah for more than one year. Over half (54.4%) of the respondents were born in Mexico and 33.2% were born in the United States.



Source: Utah Hispanic Health Survey, 2001

Executive Summary

The sample included slightly more male than female respondents (54.6% and 45.4%, respectively). Almost one of five (19.7%) respondents lived in households with an annual household income of less than $20,000. Two fifths (40.3%) had less than a high school education, compared to 6.1% in the general population.[3] The vast majority of respondents (85.0%) lived along the Wasatch Front. Over half of the sample (58.5%) was between the ages of 18 and 34, while only 3.9% were age 65 and over.

Access to Care

Health insurance coverage plays a vital role in accessing and utilizing preventive health services.

- Only 56.0% of Utah Hispanic adults had health insurance coverage as compared to 90.4% of all adults in the state.[4]
- More than three of five (62.0%) Utah Hispanic adults with health insurance coverage reported having an annual physical exam compared to 47.4% of those without coverage.
- Nearly two of five (39.4%) Utah Hispanic adults who had never had health insurance coverage also had never had a regular physical exam.
- A majority (52.1%) of Utah Hispanic adults had never had a blood cholesterol test.
- Hispanic adults with diabetes and chronic joint symptoms were not getting the care they need to prevent complications.

General Health Status

Self-reported health is a reliable indicator of health status, quality of life, and overall well-being.

- Nearly one of four (24.4%) Utah Hispanic adults reported being in fair or poor health compared to 9.5% of non-Hispanic adults.[3]

Higher Risk Behaviors/Conditions

- Nearly one of five (19.2%) Hispanic adults age 65 and over had been diagnosed with diabetes compared to 11.8% of non-Hispanic adults.[3]
- Of Utah Hispanic adults, 15.3% experienced an injury within the past 12 months severe enough to limit their activities for at least one day and/or require medical attention.
- Three of five (60.7%) Utah Hispanic adults were overweight or obese compared to 52.6% of all Utah adults.[3]
- Utah Hispanic adults were slightly less likely to participate in regular physical activity than non-Hispanic adults (47.2% and 52.1%, respectively).[3]
- Nationally, Hispanic adults are slightly less likely to report that they smoke than non-Hispanic adults.[5] In Utah, the trend is reversed. Nearly one of five (19.3%) Utah Hispanic adults smoked compared to 13.3% of non-Hispanic adults.
- Males accounted for the difference in smoking rates. One of four (25.7%) Utah Hispanic adult males reported being a current smoker compared to 14.4% of non-Hispanic adult males. However, there was no difference in smoking rates among females, with nearly 12% of both Hispanic and non-Hispanic adult females reporting being current smokers.
- Only 46.2% of Utah Hispanic adults reported changing their behavior to lower their risk of heart disease or stroke.

Lower Risk Behaviors/Conditions

- Utah Hispanic adults had slightly lower rates of asthma than non-Hispanic adults (4.2% vs. 5.0%).[3]
- Nearly one of five (18.1%) Utah Hispanic adults had arthritis compared to one of three (31.4%) non-Hispanic adults.[3]
- Only 4.0% of Utah Hispanic adults reported that they had seriously considered taking their own lives. Most of these individuals were between the ages of 18 and 34.

Summary

This document highlights important differences in health status measures and risk behaviors among the Hispanic adult population, non-Hispanic adult population, and the general adult population in Utah.

Historically, the Hispanic population has experienced an excess risk of developing some chronic conditions, such as obesity and diabetes. In addition, this population is likely to have limited access to health care, lower income, and lower education levels than the general population. Lower rates of other chronic diseases among Utah Hispanic adults may be due to the youthfulness of this population. Over half (58.5%) of Utah Hispanic adults are between the ages of 18 and 34, and only 3.9% are aged 65 or over. As this population ages, this advantage may diminish or disappear. Implementing effective interventions now, particularly those that incorporate preventive measures, may reduce the frequency and severity of serious health problems facing Hispanic Utahns in the future.

The size of the Utah Hispanic population more than doubled during the 1990s, growing by 138%, and this trend is projected to continue.[6] The rapid increase in the Hispanic population makes health disparities for this group an urgent public health issue. Disseminating and marketing the findings in this document are intended to engage and assist the Hispanic community and others in planning, implementing, and evaluating interventions designed to improve Hispanic health status. **¡Saludos a todos!**

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Introduction

Hispanic persons make up the largest minority group in Utah, comprising just over nine percent of the state population in 2000.[1] Because general population surveys typically sample a proportionate number of Hispanic persons, only 9% of the survey samples will typically be persons who identify themselves as Hispanic. Information gained from those surveys on the Hispanic population tends to be imprecise, allowing only broad statements about the health status and risk behaviors of Utah's Hispanic residents. This imprecision makes it difficult to appropriately define health care policies and target interventions. The Bureau of Health Promotion, Utah Department of Health, developed the 2001 Utah Hispanic Health Survey, using a modified version of the Behavioral Risk Factor Survey System (BRFSS) questionnaire. The survey was designed to address the important health issues among Utah's adult Hispanic population, including health status, health care access, injuries, preventive care, and lifestyle behaviors.

In addition to the BRFSS questions, several questions were included to measure acculturation, access to health care, and specific issues related to injury. The questionnaire was administered both in English and Spanish. Questions from the statewide BRFSS had already been translated into Spanish by the Centers for Disease Control and Prevention. The supplemental questions developed by the bureau were translated by Passports to Languages and by Clearwater Research, Inc.

Every effort was made to keep the survey as consistent as possible with the statewide BRFSS. However, because the survey was designed to target only the Utah Hispanic population, a different sampling scheme was used. The sample was drawn from an Hispanic surname list obtained from Genesys Sampling Systems. Clearwater Research, Inc. conducted the telephone survey in 2001. Direct comparisons between this survey and Hispanic surveys using different sampling methods should be avoided. A total of 939 respondents completed interviews. Over 42 percent of the respondents completed the interview in Spanish.

Several interested parties reviewed the questionnaire for content and cultural relevance. The Utah State Ethnic Board and Las Mujeres de Espanol offered helpful suggestions that were incorporated into the questionnaire. Faculty from the University of Utah and members of the Hispanic community were also involved in the review process.

The report is designed to help the reader easily understand the data. The percentage distribution for the responses to the questions is provided across social and demographic characteristics in a table. Key findings are highlighted on a separate page with graphical representations and text (see page xii for instructions on reading the graphs and tables). In some instances, comparisons were made between the findings for the 2001 Utah Hispanic Health Survey and preliminary data from the statewide 2001 Utah BRFSS. Where appropriate, the *Healthy People 2010* goals for each topic are stated, along with relevant baseline information.

Significant differences in some health status measures and risk behaviors were identified between Utah's adult Hispanic population and the general population. Some of these differences are attributable to the younger age distribution of Utah's Hispanic population. As this population ages it will likely experience an increase in most chronic diseases. Dissemination of the important findings of this report is a first step in identifying and implementing strategies that engage the Hispanic community and others in improving the health of this important group of Utah citizens.

Guide to This Report

Two pages are devoted to each measure. This "Guide" describes what is covered on each page.

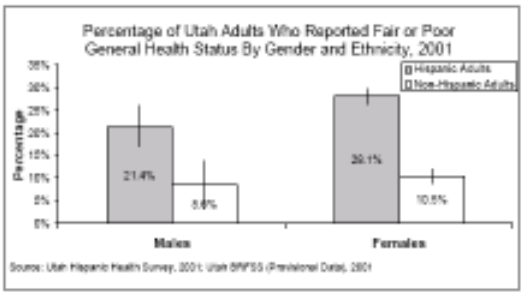
This text labels the health issue being addressed in English.

This text describes the definition and relevance of the health issue.

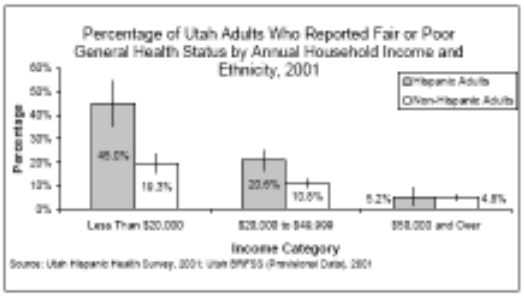
General Health Status

Healthy People 2010's two overarching goals are to increase quality and years of life, and to eliminate health disparities.[7] General health status is considered to be a reliable indicator of a person's health, quality of life, and general well being. For this report, the percentage of Utah Hispanic adults who reported fair or poor general health status was examined and compared to non-Hispanic respondents from the 2001 Utah BRFSS.

Among Hispanic Utahns, 24.4% described their health status as fair or poor while only 9.5% of non-Hispanic Utahns reported fair or poor health status.[5] The difference in health status between Hispanic and non-Hispanic adults is similar for males and females. The likelihood of fair/poor health status increased with age.



Hispanic Utahns who reported lower levels of income and education were more likely to report fair or poor general health status. Hispanic Utahns in the lowest income category were more than twice as likely to report fair or poor health status than non-Hispanic Utahns in this same income category. However, in the highest income category, Hispanic Utahns were only slightly more likely to report fair or poor health status than non-Hispanic Utahns. Those living in rural or frontier areas of the state were more likely to report fair or poor health status than those living in urban areas.



The relationship between income and health status is complex. Persons in low income groups are less able to afford needed medical care, and persons in poor health are less able to earn high incomes. Hispanic adults in Utah, among whom only one in ten has a college degree, may be more likely to have jobs that are more physically demanding, where one's physical health is key to one's earning power.

Healthy People 2010 Objective: Increasing quality and years of healthy life are overarching goals.
U.S. Baseline (All Adults): 14.9% report fair or poor health status, BRFSS, 1999
Utah Objective: No objective listed
Utah Baseline (All Adults): 10.0% reported fair or poor health status, BRFSS, 1999
Utah Baseline (Hispanic Adults): 23.6%, BRFSS, 1999

This text box contains a list of objectives and indicators, including any relevant Healthy People 2010 health objectives for the nation.

This text contains the question(s) asked from the Hispanic Survey that were used to calculate the survey estimates (see Appendix B).

This text labels the health issue being addressed in Spanish.

ESTADO DE SALUD GENERAL

Survey Question(s): Would you say that in general, your health is excellent, very good, good, fair, or poor?

Percentage of Persons Who Reported Fair or Poor General Health Status by Selected Demographic Characteristics, Utah Hispanic Health Survey 2001

	Utah Adult Hispanic Population		Survey Estimates of Respondents Who Reported Fair or Poor General Health Status				
				95% Confidence Intervals			
Demographic Subgroup	Distribution	Number of Persons[1]	Percentage of Persons Who Reported Fair or Poor Health Status[2]	Lower	Upper	Number of Persons[1,3]	Distribution of Persons Who Reported Fair or Poor Health Status by Demographic Subgroup
General Health Status							
Excellent	15.8%	19,500					
Very Good	20.1%	24,800					
Good	39.6%	48,900					
Fair	21.9%	27,100					
Poor	2.5%	3,100					
Total, All Hispanic Adults	100.0%	123,400					
Sex							
Males	54.6%	67,400	21.4%	16.8%	26.0%	14,400	47.8%
Females	45.4%	56,000	28.1%	22.8%	33.4%	15,700	52.2%
Total, All Hispanic Adults	100.0%	123,400	24.4%	21.0%	27.9%	30,100	100.0%
Age Group							
18 to 34	58.5%	72,200	20.8%	16.0%	25.7%	15,000	49.8%
35 to 49	26.9%	33,200	25.7%	19.9%	31.5%	8,500	28.2%
50 to 64	10.7%	13,300	36.3%	25.8%	46.7%	4,800	15.9%
65 and Over	3.9%	4,800	37.3%	24.5%	50.2%	1,800	6.0%
Total, All Hispanic Adults	100.0%	123,400	24.4%	21.0%	27.9%	30,100	100.0%
Income							
Less Than $20,000	19.7%	24,400	45.0%	35.2%	54.7%	11,000	38.7%
$20,000 to $49,999	64.4%	79,500	20.6%	16.3%	25.0%	16,400	57.7%
$50,000 and Over	15.8%	19,500	5.2%	1.8%	8.6%	1,000	3.5%
Total, All Hispanic Adults	100.0%	123,400	24.4%	21.0%	27.9%	30,100	100.0%
Education							
Less Than High School	40.3%	49,800	38.8%	32.2%	45.4%	19,300	64.5%
H.S. Grad or G.E.D.	31.6%	39,000	17.0%	11.6%	22.4%	6,600	22.1%
Some Post High School	17.5%	21,700	13.4%	7.9%	18.9%	2,900	9.7%
College Graduate	10.5%	13,000	8.8%	3.3%	14.4%	1,100	3.7%
Total, All Hispanic Adults	100.0%	123,400	24.4%	21.0%	27.9%	30,100	100.0%
Area[4]							
Urban (100+ persons/mi^2)	85.0%	104,900	23.3%	19.4%	27.3%	24,500	81.1%
Rural (6 to 99 persons/mi^2)	9.7%	12,000	30.9%	20.2%	39.5%	3,700	12.3%
Frontier (<6 persons/mi^2)	5.2%	6,500	30.3%	19.0%	41.6%	2,000	6.6%
Total, All Hispanic Adults	100.0%	123,400	24.4%	21.0%	27.9%	30,100	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 of missing values on the grouping variables.
4 Urban counties include Davis, Salt Lake, Utah, and Weber; Rural counties include Box Elder, Cache, Carbon, Morgan, Sanpete, Sevier, Summit, Wasatch, and Washington; All other counties were classified as frontier.

This table presents data for demographic subgroups. The shaded columns show the percentage of persons who reported the measure.The response category row(s) is/are also shaded

The first column is the rate for the measure for each demographic subgroup. The next two columns are the 95% confidence interval for the measure.

General Health Status

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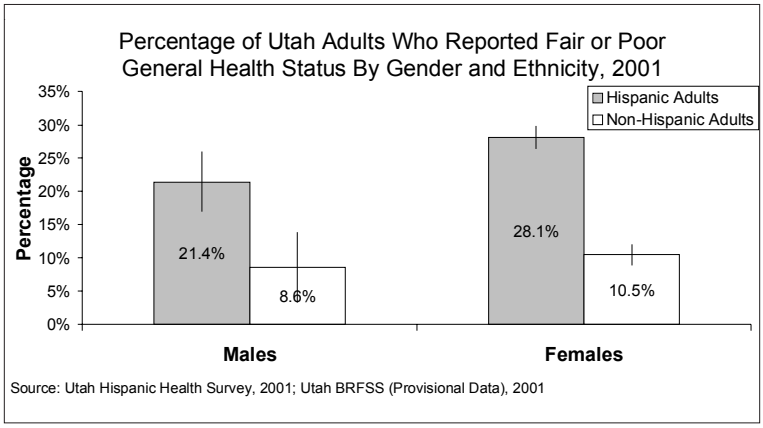

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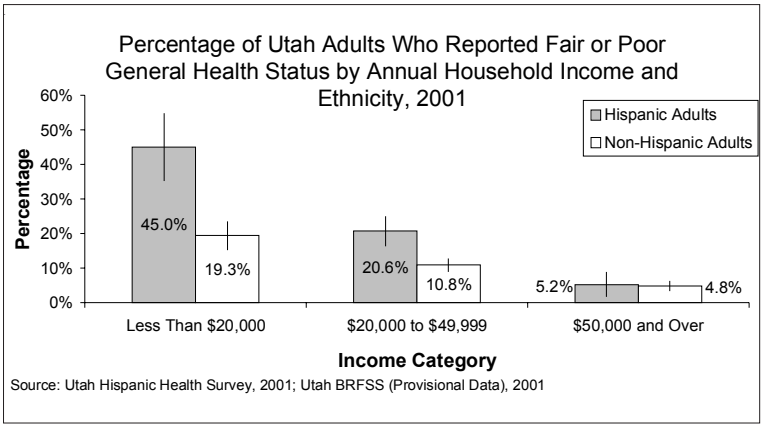

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Estado de Salud General

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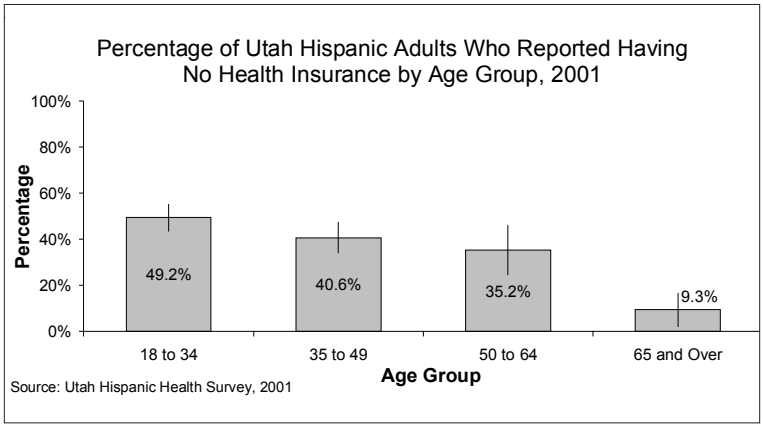
4 Urban counties include Davis, Salt Lake, Utah, and Weber; Rural counties include Box Elder, Cache, Carbon, Morgan, Sanpete, Sevier, Summit, Wasatch, and Washington; All other counties were classified as frontier.

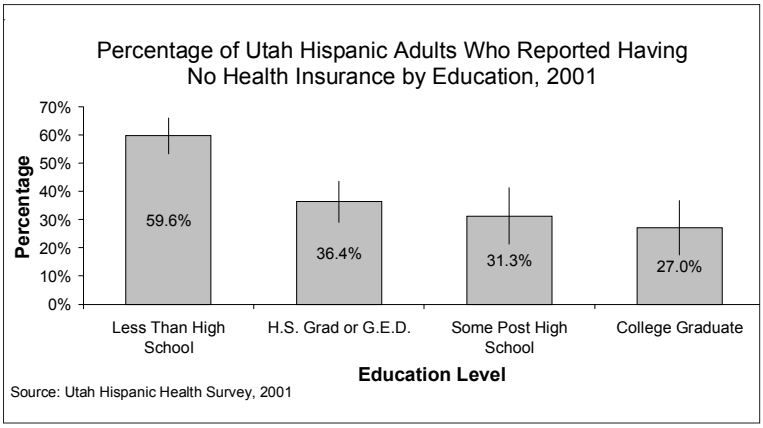
Insurance Status

Health insurance coverage encourages individuals to seek and obtain needed 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.

Nationally, about 17% of all Americans under age 65 do not have health insurance coverage.[8] When comparing different U.S. race/ethnic groups, 14% of non-Hispanic persons do not have health insurance, while 34% of Hispanic persons do not have health insurance.[8]



The percent uninsured is much higher for the Hispanic population than for other race/ethnic groups. In Utah, 12.8% of adults aged 18 to 64 reported not having any health insurance.[9] Among Utah Hispanic adults, 43.8% reported that they did not have any health insurance coverage. Compared with national data, Utah has a lower proportion of the population without health insurance, but a higher proportion of Hispanic Utahns lacked health insurance.[9]



Among Utah Hispanic adults, persons aged 18 to 34 were more likely to not have health insurance than those age 35 and over. Hispanic persons with less than a high school education were more likely to not have health insurance coverage than those with a high school diploma or more education. Additionally, Hispanic persons living in rural areas were more likely to not have health insurance than those living in other areas of Utah.

Healthy People 2010 Objective: Increase the proportion of persons with health insurance to 100%.
U.S. Baseline (All Adults <65): 83%, HP 2010, 1997
U.S. Baseline (Hispanic adults <65): 66%, HP 2010, 1997
Utah Objective: Same as HP 2010 Objective
Utah Baseline (All Adults 18-64): 87%, BRFSS, 2000

The main reasons for not having health insurance included: (1) could not afford to pay the premiums (41.0%), (2) do not need it (17.1%), and (3) employer stopped offering the coverage (17.0%). One third of the Hispanic persons without health insurance had been without coverage for at least three years. More persons without health insurance reported fair or poor overall health status than those with health insurance (29.7% vs. 20.3%). Hispanic persons with no insurance were less likely to have one particular place (clinic, health center, or doctor's office) that they usually went to when they were sick or needed medical advice.

For persons without insurance, legal U.S. residency or citizenship status is required to receive a full coverage of public health care assistance program such as Medicaid or CHIP. This may, in part, explain the lower rate of health insurance coverage for Hispanic adults.

Although a similar proportion of Hispanic and non-Hispanic adults were reported as employed (73.7% and 74.6% respectively),[3] more Hispanic employed adults live without health insurance (39.9%) than their non-Hispanic employed counterparts (14.3%).[3] More attention is needed to address why such contributing, tax-paying members of our society are not getting benefits from their working status.

ASEGURANZA MÉDICA

Survey Question(s): Do you now have any kind of health care coverage, including health insurance, prepaid plans such as HMOs, or government plans such as Medicare or Medicaid?

Percentage of Persons Who Reported Having No Health Insurance
by Selected Demographic Characteristics, Utah Hispanic Health Survey 2001

	Utah Adult Hispanic Population		Survey Estimates of Respondents Who Had No Health Insurance				
Demographic Subgroup	Distribution	Number of Persons[1]	Percentage of Persons Who Had No Health Insurance[2]	95% Confidence Intervals Lower	95% Confidence Intervals Upper	Number of Persons[1, 3]	Distribution of Persons Who Had No Health Insurance by Demographic Subgroup
Had Health Insurance							
Yes	56.2%	69,300					
No	43.9%	54,100					
Total, All Hispanic Adults	100.0%	123,400					
Sex							
Males	54.6%	67,400	43.9%	39.7%	48.0%	29,600	51.7%
Females	45.4%	56,000	49.2%	43.3%	55.2%	27,600	48.3%
Total, All Hispanic Adults	100.0%	123,400	43.9%	39.7%	48.0%	54,100	100.0%
Age Group							
18 to 34	58.5%	72,200	49.2%	43.3%	55.2%	35,600	65.7%
35 to 49	26.9%	33,200	40.6%	33.8%	47.5%	13,500	24.9%
50 to 64	10.7%	13,300	35.2%	24.4%	46.0%	4,700	8.7%
65 and Over	3.9%	4,800	9.3%	2.0%	16.6%	400	0.7%
Total, All Hispanic Adults	100.0%	123,400	43.9%	39.7%	48.0%	54,100	100.0%
Income							
Less Than $20,000	19.7%	24,400	65.7%	57.1%	74.4%	16,000	30.8%
$20,000 to $49,999	64.4%	79,500	40.8%	34.9%	46.6%	32,400	62.4%
$50,000 and Over	15.8%	19,500	17.9%	9.7%	26.1%	3,500	6.7%
Total, All Hispanic Adults	100.0%	123,400	42.1%	37.6%	46.6%	51,900	100.0%
Education							
Less Than High School	40.3%	49,800	59.6%	53.1%	66.2%	29,700	54.8%
H.S. Grad or G.E.D.	31.6%	39,000	36.4%	29.0%	43.7%	14,200	26.2%
Some Post High School	17.5%	21,700	31.3%	21.1%	41.5%	6,800	12.5%
College Graduate	10.5%	13,000	27.0%	17.3%	36.8%	3,500	6.5%
Total, All Hispanic Adults	100.0%	123,400	43.8%	39.6%	48.0%	54,100	100.0%
Area[4]							
Urban (100+ persons/mi^2)	85.0%	104,900	42.3%	37.5%	47.1%	44,300	81.9%
Rural (6 to 99 persons/mi^2)	9.7%	12,000	57.3%	49.0%	65.5%	6,900	12.8%
Frontier (<6 persons/mi^2)	5.2%	6,500	44.5%	32.8%	56.2%	2,900	5.4%
Total, All Hispanic Adults	100.0%	123,400	43.9%	39.7%	48.0%	54,100	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 of missing values on the grouping variables.
4 Urban counties include Davis, Salt Lake, Utah, and Weber; Rural counties include Box Elder, Cache, Carbon, Morgan, Sanpete, Sevier, Summit, Wasatch, and Washington; All other counties were classified as frontier.

Note: Other surveys, such as the Utah Health Status Survey, which use different methodologies to measure insurance status are not comparable to measures presented here.

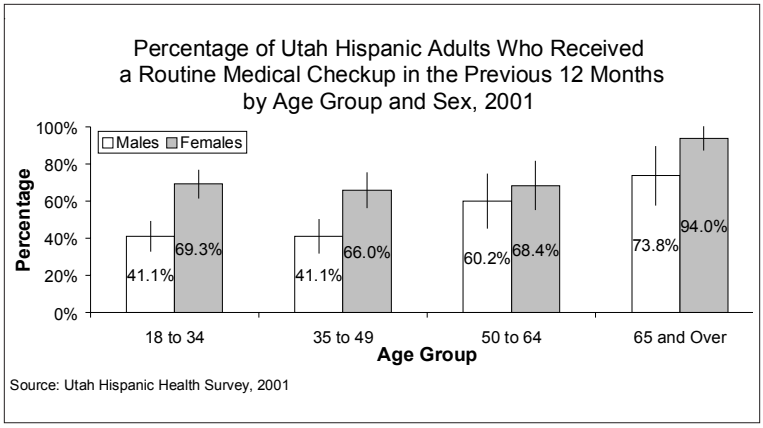
Routine Checkup

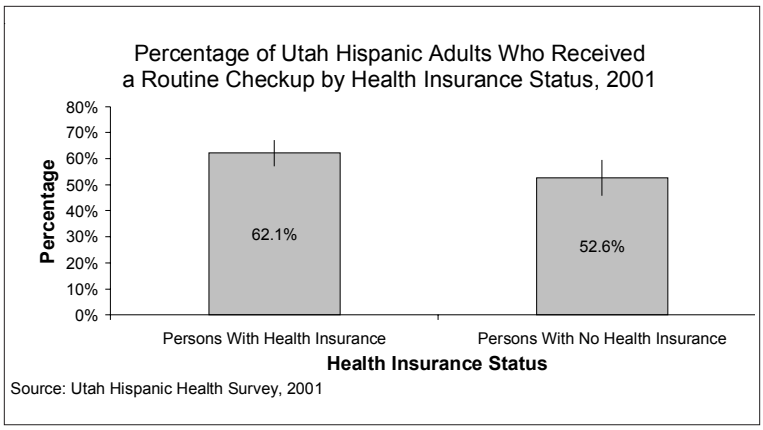
Routine medical checkups allow for screening for diseases such as cancer and heart disease. They also provide an opportunity to educate patients about changing their personal health behaviors before disease symptoms develop. Overall, 55.7% of Hispanic adults in Utah had a routine checkup in the previous 12 months. Among those 65 and older, 84.3% had a routine checkup in the previous 12 months. Among all age groups, Hispanic women were more likely to have had a routine medical checkup in the previous year, as compared to Hispanic men.

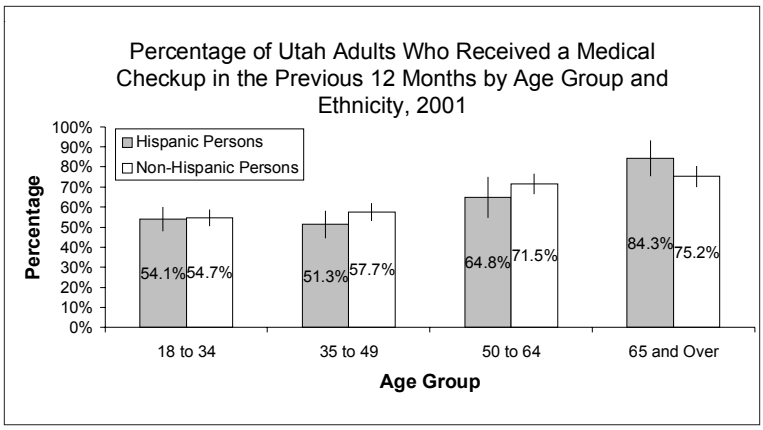
Financial barriers can limit access to health care. Financial barriers include not having health insurance, not having enough health insurance to pay for needed services, or not having money to cover services not covered by an insurance plan. Among Utah Hispanic adults who reported not having health insurance, only 52.6% reported having received an annual checkup.

The percentage of Utah adults who had a routine checkup in the past 12 months did not differ between Hispanic and non-Hispanic adults.[3]

Insurance coverage for preventive services improved during the 1990s. In 1988, among employers who offered health insurance, only 26% of their employees were covered for routine adult physical examinations and 43% for preventive screening tests.[10] In contrast, a 1997 national survey of over 3,000 employers found that 88% of employer-sponsored plans covered routine adult physical examinations, 89% covered Pap tests, and 91% covered mammograms.[11]







Healthy People 2010 Objective: Increase the proportion of persons appropriately counseled about health behaviors.
U.S. Baseline: Not available
Utah Objective: Same as HP 2010 Objective
Utah Baseline: 61.9% of all Utah adults reported having a routine checkup during the past year, BRFSS, 2000

EXAMINACIONES DE RUTINA

Survey Question(s): About how long has it been since you last visited a doctor for a routine checkup or general physical exam?

Percentage of Persons Who Reported Visiting a Doctor for a Routine Checkup in the Past Year
by Selected Demographic Characteristics, Utah Hispanic Health Survey 2001

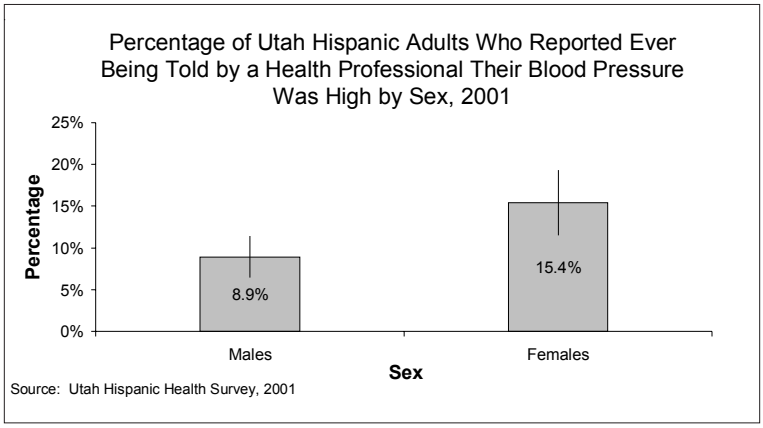
	Utah Adult Hispanic Population		Survey Estimates of Respondents Who Had a Routine Checkup in the Past Year				
Demographic Subgroup	Distribution	Number of Persons[1]	Percentage of Persons Who Had a Routine Checkup in the Past Year[2]	95% Confidence Intervals Lower	95% Confidence Intervals Upper	Number of Persons[1, 3]	Distribution of Persons Who Had a Routine Checkup in the Past Year by Demographic Subgroup
Routine Checkup							
Within the Past Year	55.7%	68,700					
Within the Past 2 Years	17.7%	21,800					
Within the Past 5 Years	11.6%	14,300					
5 or More Years Ago	8.8%	10,900					
Never	6.2%	7,700					
Total, All Hispanic Adults	100.0%	123,400					
Sex							
Males	54.6%	67,400	44.0%	38.2%	49.7%	29,600	43.2%
Females	45.4%	56,000	69.5%	64.0%	74.9%	38,900	56.8%
Total, All Hispanic Adults	100.0%	123,400	55.7%	51.5%	59.8%	68,700	100.0%
Age Group							
18 to 34	58.5%	72,200	54.1%	48.1%	60.1%	39,000	56.9%
35 to 49	26.9%	33,200	51.3%	44.4%	58.2%	17,000	24.8%
50 to 64	10.7%	13,300	64.8%	54.6%	75.0%	8,600	12.5%
65 and Over	3.9%	4,800	84.3%	75.2%	93.4%	4,000	5.8%
Total, All Hispanic Adults	100.0%	123,400	55.7%	51.5%	59.8%	68,700	100.0%
Income							
Less Than $20,000	19.7%	24,400	50.7%	40.8%	60.5%	12,400	18.0%
$20,000 to $49,999	64.4%	79,500	57.4%	51.6%	63.1%	45,600	66.1%
$50,000 and Over	15.8%	19,500	56.4%	46.7%	66.1%	11,000	15.9%
Total, All Hispanic Adults	100.0%	123,400	55.7%	51.5%	59.8%	68,700	100.0%
Education							
Less Than High School	40.3%	49,800	49.7%	42.8%	56.6%	24,800	36.1%
H.S. Grad or G.E.D.	31.6%	39,000	58.7%	51.3%	66.0%	22,900	33.3%
Some Post High School	17.5%	21,700	61.9%	52.9%	71.0%	13,400	19.5%
College Graduate	10.5%	13,000	58.5%	48.2%	68.9%	7,600	11.1%
Total, All Hispanic Adults	100.0%	123,400	55.7%	51.5%	59.8%	68,700	100.0%
Area[4]							
Urban (100+ persons/mi^2)	85.0%	104,900	56.2%	51.5%	60.9%	59,000	85.9%
Rural (6 to 99 persons/mi^2)	9.7%	12,000	54.4%	45.7%	63.1%	6,500	9.5%
Frontier (<6 persons/mi^2)	5.2%	6,500	49.8%	38.2%	61.5%	3,200	4.7%
Total, All Hispanic Adults	100.0%	123,400	55.7%	51.5%	59.8%	68,700	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 of missing values on the grouping variables.
4 Urban counties include Davis, Salt Lake, Utah, and Weber; Rural counties include Box Elder, Cache, Carbon, Morgan, Sanpete, Sevier, Summit, Wasatch, and Washington; All other counties were classified as frontier.

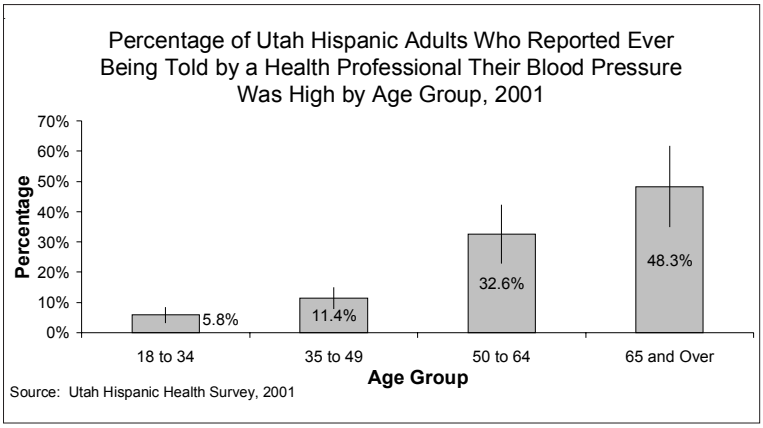
High Blood Pressure Awareness

One in four adults has high blood pressure.[12] Certain lifestyle factors such as lack of physical activity, diets high in sodium, excess body weight, and excessive alcohol intake put a person at greater risk for developing high blood pressure.[13] High blood pressure is more common among older persons, with those in Utah aged 65 and older at greatest risk.

Many adults with high blood pressure are unaware that they have it.[13] Uncontrolled high blood pressure or hypertension is a major risk factor for heart attack, stroke, congestive heart failure, and kidney failure. Early detection of high blood pressure and subsequent treatment can help prevent these conditions. In 1999, 92.4% of Utahns reported having their blood pressure checked in the last two years.[14]



National data indicate that 24.2% of Hispanic men and 22.4% of Hispanic women aged 20 to 74 have high blood pressure.[15] In 1999, 18.6%* of Hispanic adults in the U.S. reported being told by a health professional that they had high blood pressure.[15] According to data collected by the Utah Hispanic Health Survey, 11.8% of Utah Hispanic adults reported being told by a health professional that they had high blood pressure. More women than men were aware they had high blood pressure (15.4% compared to 8.9%).



Healthy People 2010 Objective: Reduce the proportion of adults with high blood pressure to 16%.
U.S. Baseline (All Adults): 28%, HP 2010, 1988-94
Utah Objective: Same as HP 2010 Objective
Utah Baseline (All Adults): 21.3%, BRFSS, 1999

The percentage of Hispanic adults who reported being told they had high blood pressure increased with increasing age. Of Hispanic persons aged 65 years or older, 48.3% were aware that they had hypertension compared to only 5.8% of Hispanic persons aged 18 to 34.

* Note: This value is the median or middle value of the 52 estimates reported for the states and territories surveyed in the 1999 U.S. BRFSS.

ALERTA: ALTA PRESIÓN DE LA SANGRE

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

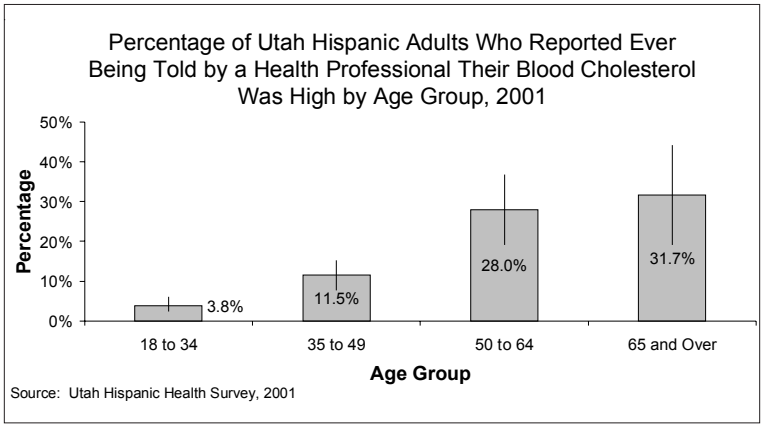
Percentage of Persons Who Reported Ever Being Told by a Health Professional Their Blood Pressure Was High
by Selected Demographic Characteristics, Utah Hispanic Health Survey 2001

	Utah Adult Hispanic Population		Survey Estimates of Respondents Who Reported Ever Being Told by a Health Professional Their Blood Pressure Was High				
Demographic Subgroup	Distribution	Number of Persons[1]	Percentage of Persons Who Reported Ever Being Told by a Health Professional Their Blood Pressure Was High[2]	95% Confidence Intervals Lower	95% Confidence Intervals Upper	Number of Persons[1, 3]	Distribution of Persons Who Reported Ever Being Told by a Health Professional Their Blood Pressure Was High by Demographic Subgroup
Told Blood Pressure High							
Told High	11.8%	14,600					
Not Told High	88.2%	108,800					
Total, All Hispanic Adults	100.0%	123,400					
Sex							
Males	54.6%	67,400	8.9%	6.4%	11.4%	6,000	41.1%
Females	45.4%	56,000	15.4%	11.5%	19.3%	8,600	58.9%
Total, All Hispanic Adults	100.0%	123,400	11.8%	9.6%	14.1%	14,600	100.0%
Age Group							
18 to 34	58.5%	72,200	5.8%	3.2%	8.4%	4,200	28.8%
35 to 49	26.9%	33,200	11.4%	7.8%	15.0%	3,800	26.0%
50 to 64	10.7%	13,300	32.6%	22.9%	42.2%	4,300	29.5%
65 and Over	3.9%	4,800	48.3%	34.8%	61.7%	2,300	15.8%
Total, All Hispanic Adults	100.0%	123,400	11.8%	9.6%	14.1%	14,600	100.0%
Income							
Less Than $20,000	19.7%	24,400	14.8%	9.2%	20.4%	3,600	27.1%
$20,000 to $49,999	64.4%	79,500	9.5%	6.7%	12.4%	7,600	57.1%
$50,000 and Over	15.8%	19,500	11.0%	6.0%	16.0%	2,100	15.8%
Total, All Hispanic Adults	100.0%	123,400	11.8%	9.6%	14.1%	14,600	100.0%
Education							
Less Than High School	40.3%	49,800	11.5%	7.7%	15.3%	5,700	39.0%
H.S. Grad or G.E.D.	31.6%	39,000	13.1%	8.8%	17.5%	5,100	34.9%
Some Post High School	17.5%	21,700	12.3%	7.6%	17.0%	2,700	18.5%
College Graduate	10.5%	13,000	8.3%	3.9%	12.7%	1,100	7.5%
Total, All Hispanic Adults	100.0%	123,400	11.8%	9.6%	14.1%	14,600	100.0%
Area[4]							
Urban (100+ persons/mi^2)	85.0%	104,900	11.6%	9.0%	14.2%	12,200	83.6%
Rural (6 to 99 persons/mi^2)	9.7%	12,000	15.1%	10.2%	20.1%	1,800	12.3%
Frontier (<6 persons/mi^2)	5.2%	6,500	9.1%	3.8%	14.5%	600	4.1%
Total, All Hispanic Adults	100.0%	123,400	11.8%	9.6%	14.1%	14,600	100.0%

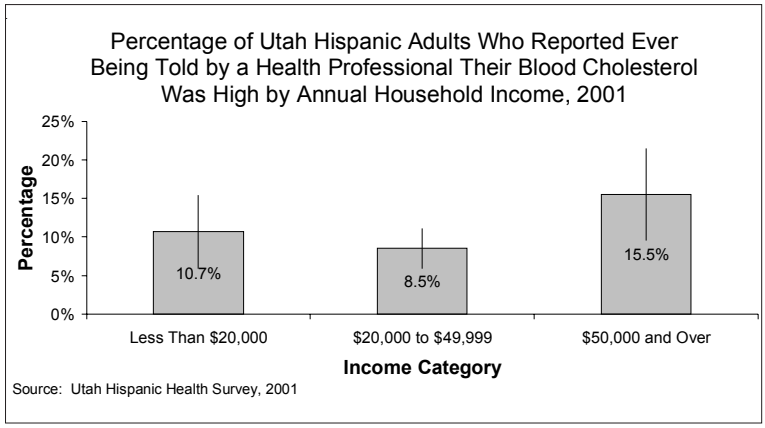
1 Rounded to the nearest 100 persons.
2 Plus or minus 95% confidence interval
3 Figures in these columns may not sum to the total because of missing values on the grouping variables.
4 Urban counties include Davis, Salt Lake, Utah, and Weber; Rural counties include Box Elder, Cache, Carbon, Morgan, Sanpete, Sevier, Summit, Wasatch, and Washington; All other counties were classified as frontier.

High Cholesterol Awareness

High blood cholesterol is a major risk factor for coronary heart disease and one that can be modified. The National Heart, Lung, and Blood Institute defines "high" blood cholesterol as greater than or equal to 240 mg/dl and "borderline" cholesterol as 200 to 239 mg/dl.[16] In 1999, 48.2 million adult men and 53.8 million adult women in the U.S. had total blood cholesterol levels of 200 mg/dl or higher.[15] High cholesterol levels can be lowered with changes in behaviors and/or medication. Behaviors that prevent or lower high cholesterol include eating a diet low in saturated fat and cholesterol, increasing physical activity, and maintaining a healthy weight. In addition, medication may be effective in treating high cholesterol.



Approximately 10% of Utah Hispanic adults reported being told by a health professional that they had high blood cholesterol. Of note, 52.1% of Hispanic adults have never been tested. 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 cholesterol levels.



The percentage of Utah Hispanic adults who reported that they had high blood cholesterol increased with increasing age. Of Hispanic persons 65 and older, 31.7% were aware they had high blood cholesterol compared to 3.8% of Hispanic persons age 18 to 34.

Healthy People 2010 Objective: Reduce the proportion of adults with high total blood cholesterol levels to 17%.
U.S. Baseline (All Adults 20+): 21%, HP 2010, 1988-94
Utah Objective: Same as HP 2010 Objective
Utah Baseline (All Adults 18+): 28.4%, BRFSS, 1999*

The percentage of Utah Hispanic adults who reported being told that they had high blood cholesterol was highest for those with annual incomes of $50,000 or more. Persons in this group were also more likely to have had a routine physical exam in the last year (see p. 6-7).

* Note: In 1999, only 63.6% of Utahns reported having had their blood cholesterol levels checked in the last five years.[14]

ALERTA: ALTO COLESTEROL

Survey Question(s): Blood cholesterol is a fatty substance found in the blood. Have you ever been told by a doctor, nurse, or other health professional that your blood cholesterol is high?

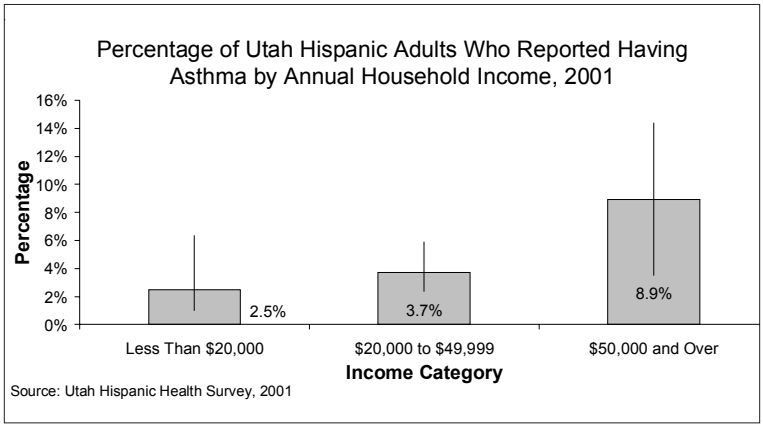
Percentage of Persons Who Reported Ever Being Told by a Health Professional Their Blood Cholesterol Was High
by Selected Demographic Characteristics, Utah Hispanic Health Survey 2001

	Utah Adult Hispanic Population		Survey Estimates of Respondents Who Reported Ever Being Told by a Health Professional Their Blood Cholesterol Was High				
Demographic Subgroup	Distribution	Number of Persons[1]	Percentage of Persons Who Reported Ever Being Told by a Health Professional Their Blood Cholesterol Was High[2]	95% Confidence Intervals Lower	95% Confidence Intervals Upper	Number of Persons[1, 3]	Distribution of Persons Who Reported Ever Being Told by a Health Professional Their Blood Cholesterol Was High by Demographic Subgroup
Told Cholesterol High							
Told High	9.6%	11,800					
Not Told High	38.3%	47,300					
Never Tested	52.1%	64,300					
Total, All Hispanic Adults	100.0%	123,400					
Sex							
Males	54.6%	67,400	9.5%	7.0%	12.0%	6,400	54.2%
Females	45.4%	56,000	9.6%	6.7%	12.6%	5,400	45.8%
Total, All Hispanic Adults	100.0%	123,400	9.6%	7.7%	11.5%	11,800	100.0%
Age Group							
18 to 34	58.5%	72,200	3.8%	2.4%	6.1%	2,800	23.7%
35 to 49	26.9%	33,200	11.5%	7.7%	15.3%	3,800	32.2%
50 to 64	10.7%	13,300	28.0%	19.1%	36.9%	3,700	31.4%
65 and Over	3.9%	4,800	31.7%	19.2%	44.3%	1,500	12.7%
Total, All Hispanic Adults	100.0%	123,400	9.6%	7.7%	11.5%	11,800	100.0%
Income							
Less Than $20,000	19.7%	24,400	10.7%	5.9%	15.4%	2,600	21.0%
$20,000 to $49,999	64.4%	79,500	8.5%	5.9%	11.1%	6,800	54.8%
$50,000 and Over	15.8%	19,500	15.5%	9.5%	21.5%	3,000	24.2%
Total, All Hispanic Adults	100.0%	123,400	9.6%	7.7%	11.5%	11,800	100.0%
Education							
Less Than High School	40.3%	49,800	8.2%	5.3%	11.2%	4,100	34.5%
H.S. Grad or G.E.D.	31.6%	39,000	10.5%	6.8%	14.2%	4,100	34.5%
Some Post High School	17.5%	21,700	11.0%	6.6%	15.4%	2,400	20.2%
College Graduate	10.5%	13,000	9.9%	5.0%	14.9%	1,300	10.9%
Total, All Hispanic Adults	100.0%	123,400	9.6%	7.7%	11.5%	11,800	100.0%
Area[4]							
Urban (100+ persons/mi^2)	85.0%	104,900	9.3%	7.1%	11.4%	9,700	82.2%
Rural (6 to 99 persons/mi^2)	9.7%	12,000	9.1%	5.7%	12.6%	1,100	9.3%
Frontier (<6 persons/mi^2)	5.2%	6,500	15.0%	7.5%	22.4%	1,000	8.5%
Total, All Hispanic Adults	100.0%	123,400	9.6%	7.7%	11.5%	11,800	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 of missing values on the grouping variables.
4 Urban counties include Davis, Salt Lake, Utah, and Weber; Rural counties include Box Elder, Cache, Carbon, Morgan, Sanpete, Sevier, Summit, Wasatch, and Washington; All other counties were classified as frontier.

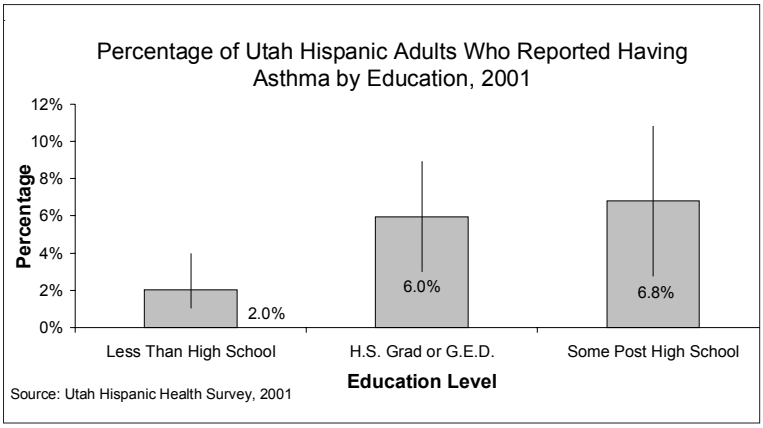
Asthma

Asthma is a chronic lung disease caused by airway inflammation which causes reversible airflow obstruction. Approximately 15 million people in the United States have asthma.[17] Asthma is responsible for 500,000 hospitalizations and 5,000 deaths each year in the U.S.[17] Asthma also influences quality of life by restricting activities of people with asthma for 134 million person-days a year.[17] Although not much is known about how to prevent asthma, effective asthma management by patients and their health care providers can reduce or prevent many problems caused by the disease.



In Utah, about 5% of the population was estimated to have asthma (115,000 Utahns) and there were 5,300 visits to an emergency department because of asthma during 1998.[4, 18]

Nationally, the current asthma prevalence rate was lower for Hispanic persons (5.2 per 100) than for any other race or ethnicity groups (White non-Hispanic: 7.4; Black non-Hispanic: 8.5; other non-Hispanic: 6.6) during the year 2000.[9]



The 2001 Utah Hispanic Health Survey shows that 4.2 of every 100 Hispanic adults have asthma. This is a slightly lower than for the non-Hispanic population (5.5 per 100).[9] Utah's Hispanic adults with higher incomes ($50,000 or more/year) were more likely to report asthma than those with lower incomes (less than $20,000 a year). The survey also found that Utah's Hispanic adults with higher educations (at least high school graduate or G.E.D) were more likely to report asthma currently than were those with lower (less than high school) educations.

Healthy People 2010 Objective: Reduce asthma deaths for adults aged 65+ to 60 deaths per million.
U.S. Baseline (All Adults 65+): 86.3 per million, HP 2010, 1998
Utah Objective: Same as HP 2010 Objective
Utah Baseline (All Adults 65+): 110 per million, Utah Death Certificate Data, 1999

Percentage of Utah Hispanic Adults by Days of Limited Activities, 2001

	With Asthma	Without Asthma
Average number of days when physical health was not good during past 30 days*	12.6	11.1
Average number of days when poor physical health kept persons from usual activities*	10.5	8.5

* differences are statistically significant at 95% confidence level.

More persons with asthma reported being limited in their regular activities because of their poor physical health than those without asthma. The average monthly days that people's usual activities were limited because of their poor physical health were longer (10.5 days) for persons with asthma than for those without asthma (8.5).

ASMA

Survey Question(s): Have you ever been told by a doctor, nurse, or other health professional that you had asthma? Do you still have asthma?

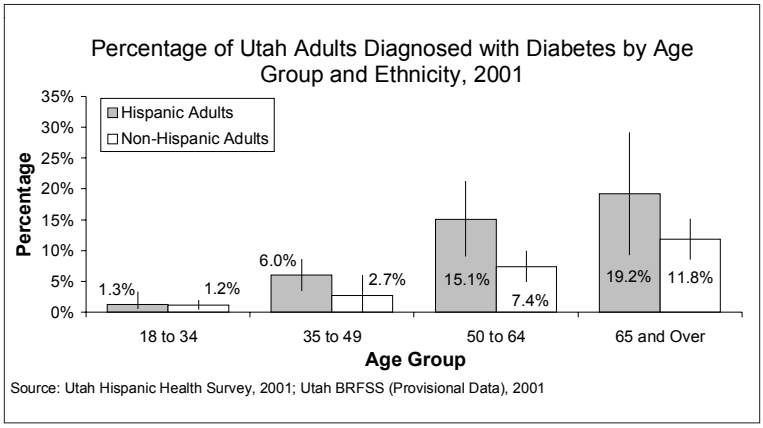
Percentage of Persons Who Reported Ever Being Told by a Health Professional That They Have Asthma
by Selected Demographic Characteristics, Utah Hispanic Health Survey 2001

	Utah Adult Hispanic Population		Survey Estimates of Respondents Who Reported Ever Being Told by a Health Professional That They Have Asthma				
Demographic Subgroup	Distribution	Number of Persons[1]	Percentage of Persons Reported Ever Being Told by a Health Professional That They Have Asthma[2]	95% Confidence Intervals Lower	95% Confidence Intervals Upper	Number of Persons[1, 3]	Distribution of Persons Who Reported Ever Being Told by a Health Professional That They Have Asthma by Demographic Subgroup
Told Have Asthma							
Yes	4.2%	5,200					
No	95.8%	118,200					
Total, All Hispanic Adults	100.0%	123,400					
Sex							
Males	54.6%	67,400	3.4%	2.1%	5.7%	2,300	44.2%
Females	45.4%	56,000	5.1%	3.0%	7.3%	2,900	55.8%
Total, All Hispanic Adults	100.0%	123,400	4.2%	3.0%	5.8%	5,200	100.0%
Age Group							
18 to 34	58.5%	72,200	3.5%	2.1%	5.8%	2,500	48.1%
35 to 49	26.9%	33,200	4.2%	2.3%	7.8%	1,400	26.9%
50 to 64	10.7%	13,300	6.2%	2.4%	9.9%	800	15.4%
65 and Over	3.9%	4,800	***	***	***	***	***
Total, All Hispanic Adults	100.0%	123,400	4.2%	3.0%	5.8%	5,200	100.0%
Income							
Less Than $20,000	19.7%	24,400	2.5%	1.0%	6.3%	600	11.3%
$20,000 to $49,999	64.4%	79,500	3.7%	2.4%	5.9%	3,000	56.6%
$50,000 and Over	15.8%	19,500	8.9%	3.5%	14.4%	1,700	32.1%
Total, All Hispanic Adults	100.0%	123,400	4.2%	3.0%	5.8%	5,200	100.0%
Education							
Less Than High School	40.3%	49,800	2.0%	1.0%	4.0%	1,000	19.2%
H.S. Grad or G.E.D.	31.6%	39,000	6.0%	3.0%	8.9%	2,300	44.2%
Some Post High School	17.5%	21,700	6.8%	2.8%	10.8%	1,500	28.8%
College Graduate	10.5%	13,000	***	***	***	***	***
Total, All Hispanic Adults	100.0%	123,400	4.2%	3.1%	5.8%	5,200	100.0%
Area[4]							
Urban (100+ persons/mi^2)	85.0%	104,900	4.4%	3.1%	6.2%	4,600	88.5%
Rural (6 to 99 persons/mi^2)	9.7%	12,000	***	***	***	***	***
Frontier (<6 persons/mi^2)	5.2%	6,500	***	***	***	***	***
Total, All Hispanic Adults	100.0%	123,400	4.2%	3.0%	5.8%	5,200	100.0%

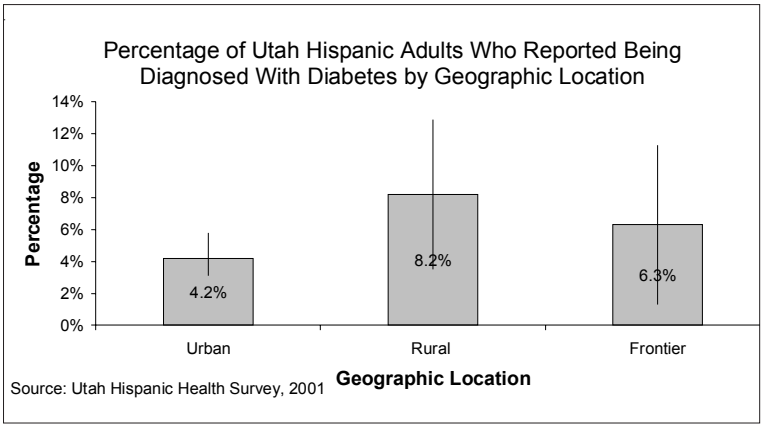
1 Rounded to the nearest 100 persons.
2 Plus or minus 95% confidence interval
3 Figures in these columns may not sum to the total because of missing values on the grouping variables.
4 Urban counties include Davis, Salt Lake, Utah, and Weber; Rural counties include Box Elder, Cache, Carbon, Morgan, Sanpete, Sevier, Summit, Wasatch, and Washington; All other counties were classified as frontier.
*** Insufficient sample size for calculation of estimates.

DIABETES

Diabetes is a chronic metabolic disease and is the seventh leading cause of death in the U.S.[19] It takes two forms: type 1 and type 2. Type 1 occurs when the pancreas does not produce any insulin. Type 2 occurs when the body cannot effectively use insulin to process glucose for energy and is strongly related to family history, lack of exercise, and being overweight. There has been a significant increase in the rate of diabetes in Utah and the U.S. since 1989.[20]



Nationally and in Utah, Hispanic adults are more likely to have diabetes than those who are not of Hispanic or Latino descent across every age category.[21, 3] The differences are particularly pronounced for those 50 and above. Among Hispanic Utahns 50 to 64 years of age, diabetes prevalence rates are more than triple the rates observed for the Hispanic population as a whole (15.1% vs. 7.4%).[3] Among those 65 years of age and older, the rates are nearly twice as high (19.2% vs. 11.8%).



The Utah Hispanic Health Survey, in fact, highlights a number of subgroups within the Hispanic adult population with diabetes prevalence rates that are more pronounced than for the Hispanic adult population as a whole. These subgroups should be especially targeted for appropriate intervention strategies. For example, over eight percent (8.2%) of Hispanic adults in rural areas and over six percent (6.3%) of Hispanic adults in frontier areas report being diagnosed, compared to only four percent (4.2%) of their urban counterparts. The higher rates in the rural and frontier areas suggest the need to ensure that diabetes services are available in the less urban areas.

Healthy People 2010 Objective: Decrease the overall rate of diabetes that is clinically diagnosed.
U.S. Baseline (All Adults): 4.0%, HP 2010, 2000
U.S. Baseline (Hispanic Adults): 6.1%, HP 2010, 2000
Utah Objective: Same as HP 2010 Objective
Utah Baseline (All Adults): 5.4%, BRFSS, 2000

Although it is difficult to isolate the precise reason for higher diabetes prevalence rates among Hispanic adults, relatively higher rates of obesity among Hispanic adults looms as an important risk factor.[22] In particular, as noted on pages 30-31 of this report, the prevalence of overweight and obesity is greater among Hispanic than among non-Hispanic adults (60.7% vs. 53.0%).[3] These data suggest that interventions which encourage screening among Hispanic adults are needed to reduce the complications from diabetes.

DIABETES

Survey Question(s): Have you ever been told by a doctor, nurse, or other health professional that you have diabetes? (The percentages below do not include females who had gestational diabetes only)

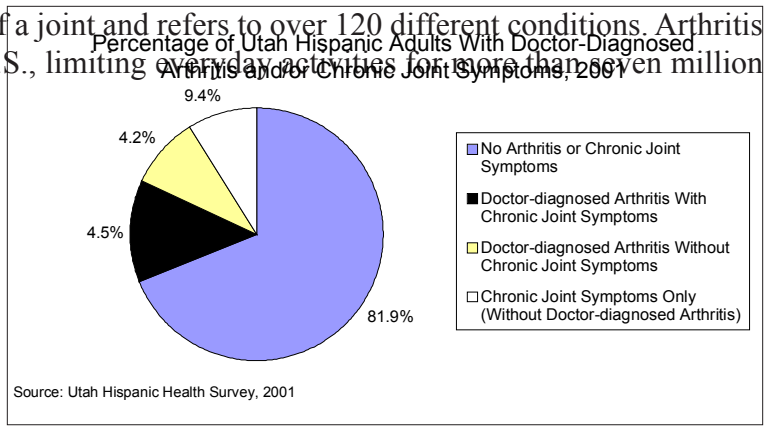
Diabetes: Percentage of Persons Who Reported Ever Being Told by a Doctor That They Have Diabetes
by Selected Demographic Characteristics, Utah Hispanic Health Survey 2001

	Utah Adult Hispanic Population		Survey Estimates of Respondents Who Had Diabetes				
Demographic Subgroup	Distribution	Number of Persons[1]	Percentage of Persons Who Had Diabetes[2]	95% Confidence Intervals Lower	95% Confidence Intervals Upper	Number of Persons[1, 3]	Distribution of Persons Who Had Diabetes by Demographic Subgroup
Diagnosed With Diabetes							
Yes	4.7%	5,800					
Yes - During Pregnancy	0.9%	1,200					
No	94.4%	116,400					
Total, All Hispanic Adults	100.0%	123,400					
Sex							
Males	54.6%	67,400	5.0%	3.4%	7.2%	3,300	56.9%
Females	45.4%	56,000	4.4%	3.0%	6.6%	2,500	43.1%
Total, All Hispanic Adults	100.0%	123,400	4.7%	3.6%	6.2%	5,800	100.0%
Age Group							
18 to 34	58.5%	72,200	1.3%	0.5%	3.3%	900	15.5%
35 to 49	26.9%	33,200	6.0%	3.4%	8.6%	2,000	34.5%
50 to 64	10.7%	13,300	15.1%	9.0%	21.3%	2,000	34.5%
65 and Over	3.9%	4,800	19.2%	9.3%	29.2%	900	15.5%
Total, All Hispanic Adults	100.0%	123,400	4.7%	3.6%	6.2%	5,800	100.0%
Income							
Less Than $20,000	19.7%	24,400	6.0%	2.5%	9.4%	1,500	25.0%
$20,000 to $49,999	64.4%	79,500	3.7%	2.5%	5.5%	2,900	48.3%
$50,000 and Over	15.8%	19,500	8.2%	3.2%	13.1%	1,600	26.7%
Total, All Hispanic Adults	100.0%	123,400	4.7%	3.6%	6.2%	5,800	100.0%
Education							
Less Than High School	40.3%	49,800	4.3%	2.7%	6.6%	2,100	36.8%
H.S. Grad or G.E.D.	31.6%	39,000	6.0%	3.3%	8.8%	2,300	40.4%
Some Post High School	17.5%	21,700	3.4%	1.8%	6.4%	700	12.3%
College Graduate	10.5%	13,000	4.9%	2.3%	10.4%	600	10.5%
Total, All Hispanic Adults	100.0%	123,400	4.7%	3.6%	6.2%	5,800	100.0%
Area[4]							
Urban (100+ persons/mi^2)	85.0%	104,900	4.2%	3.1%	5.8%	4,400	75.9%
Rural (6 to 99 persons/mi^2)	9.7%	12,000	8.2%	3.5%	12.9%	1,000	17.2%
Frontier (<6 persons/mi^2)	5.2%	6,500	6.3%	1.3%	11.3%	400	6.9%
Total, All Hispanic Adults	100.0%	123,400	4.7%	3.6%	6.2%	5,800	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 of missing values on the grouping variables.
4 Urban counties include Davis, Salt Lake, Utah, and Weber; Rural counties include Box Elder, Cache, Carbon, Morgan, Sanpete, Sevier, Summit, Wasatch, and Washington; All other counties were classified as frontier.

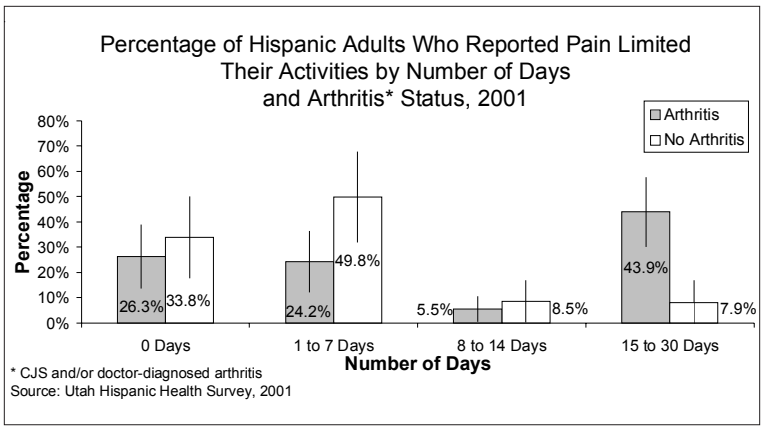
ARTHRITIS

The word *arthritis* means inflammation of a joint and refers to over 120 different conditions. Arthritis is the leading cause of disability in the U.S., limiting everyday activities for more than seven million Americans.[23]

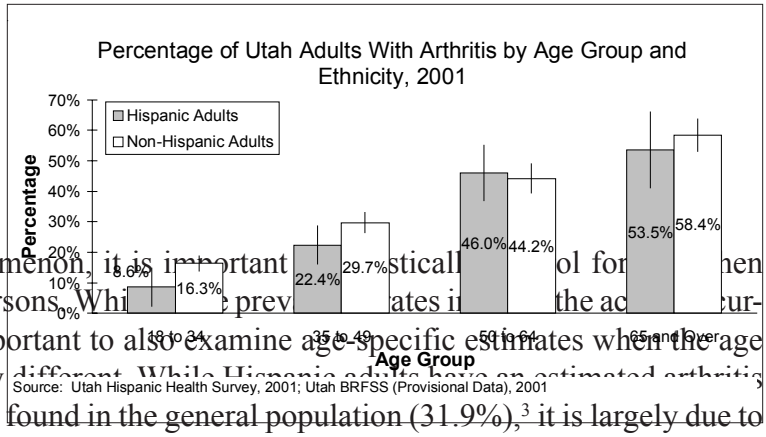


The 2001 Utah Hispanic Health Survey showed that 18.1% of Utah Hispanic adults reported having arthritis. Only about half of the Hispanic adults with arthritis had had their arthritis diagnosed by a doctor.

In Utah, only 48.1% of Hispanic adults with chronic joint symptoms (CJS) had seen a health care provider. Results from the 2000 BRFSS survey showed that 71.0% of all Utah adults with CJS had seen a health care provider.[9]



In this survey, 43.9% of Hispanic adults with arthritis reported that pain limited their activities for 15-30 days during the past month. That represents a substantial number (about 10,000) of Hispanic people in Utah who may benefit from self-management programs such as weight control, physical activity, physical therapy, or medical care including joint replacement surgery to minimize pain associated with arthritis.



Because arthritis is an age-related phenomenon, it is important statistical control for age when comparing Hispanic and non-Hispanic persons. While prevalence rates in the adult occurrence of arthritis in a population, it is important to also examine age-specific estimates when the age structures of the populations are markedly different. While Hispanic adults have an estimated arthritis prevalence (18.1%), much lower than that found in the general population (31.9%),[3] it is largely due to the fact that the Hispanic population is younger. Age-specific estimates are very similar in both non-Hispanic and Hispanic persons when comparing persons over age 50.[3] However, when comparing the estimates among persons less than 50 years of age, the estimates differ significantly.[3]

Healthy People 2010 Objective: Increase the proportion of adults who have seen a health care provider for their chronic joint symptoms (CJS).
U.S. Baseline: Not available
Utah Objective: Same as HP 2010 Objective
Utah Baseline: 9.0% of all adults with CJS have not been diagnosed with arthritis by a doctor, BRFSS, 2000

ARTRITIS

Survey Question(s): 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?

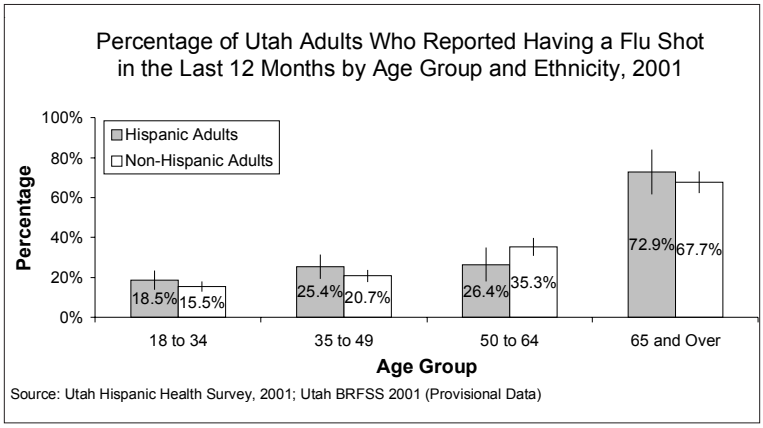
Percentage of Persons Who Reported Having Arthritis*
by Selected Demographic Characteristics, Utah Hispanic Health Survey 2001

	Utah Adult Hispanic Population		Survey Estimates of Respondents Who Reported Having Arthritis				
Demographic Subgroup	Distribution	Number of Persons[1]	Percentage of Persons Who Reported Having Arthritis[2]	95% Confidence Intervals Lower	95% Confidence Intervals Upper	Number of Persons[1, 3]	Distribution of Persons Who Reported Having Arthritis by Demographic Subgroup
Persons Having Arthritis							
Chronic Joint Symptoms Only (w/o Doctor-diagnosed Arthritis)	9.4%	11,600					
Doctor-diagnosed Arthritis	8.7%	10,700					
No Arthritis or Chronic Joint Symptoms	81.9%	101,100					
Total, All Hispanic Adults	100.0%	123,400					
Sex							
Males	54.6%	67,400	14.6%	11.3%	17.9%	9,800	43.9%
Females	45.4%	56,000	22.3%	17.8%	26.8%	12,500	56.1%
Total, All Hispanic Adults	100.0%	123,400	18.1%	15.3%	20.8%	22,300	100.0%
Age Group							
18 to 34	58.5%	72,200	8.6%	5.7%	11.6%	6,200	27.8%
35 to 49	26.9%	33,200	22.4%	17.0%	27.8%	7,400	33.2%
50 to 64	10.7%	13,300	46.0%	35.6%	56.5%	6,100	27.4%
65 and Over	3.9%	4,800	53.5%	40.2%	66.8%	2,600	11.7%
Total, All Hispanic Adults	100.0%	123,400	18.1%	15.3%	20.8%	22,300	100.0%
Income							
Less Than $20,000	19.7%	24,400	20.1%	12.9%	27.2%	4,900	22.1%
$20,000 to $49,999	64.4%	79,500	16.1%	12.5%	19.7%	12,800	57.7%
$50,000 and Over	15.8%	19,500	23.2%	15.8%	30.5%	4,500	20.3%
Total, All Hispanic Adults	100.0%	123,400	18.1%	15.3%	20.8%	22,300	100.0%
Education							
Less Than High School	40.3%	49,800	17.2%	12.7%	21.7%	8,600	38.4%
H.S. Grad or G.E.D.	31.6%	39,000	18.3%	13.3%	23.3%	7,100	31.7%
Some Post High School	17.5%	21,700	18.9%	12.7%	25.1%	4,100	18.3%
College Graduate	10.5%	13,000	19.7%	11.9%	27.5%	2,600	11.6%
Total, All Hispanic Adults	100.0%	123,400	18.1%	15.3%	20.9%	22,300	100.0%
Area[4]							
Urban (100+ persons/mi^2)	85.0%	104,900	17.6%	14.5%	20.7%	18,400	82.5%
Rural (6 to 99 persons/mi^2)	9.7%	12,000	17.4%	11.2%	23.6%	2,100	9.4%
Frontier (<6 persons/mi^2)	5.2%	6,500	27.8%	17.9%	37.6%	1,800	8.1%
Total, All Hispanic Adults	100.0%	123,400	18.1%	15.3%	20.8%	22,300	100.0%

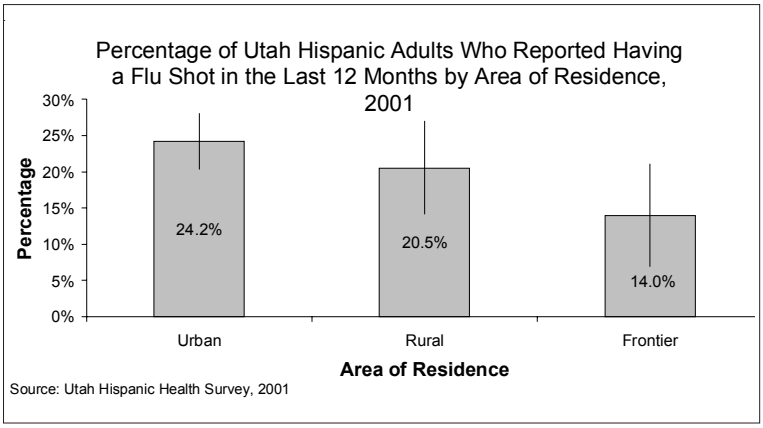
1 Rounded to the nearest 100 persons.
2 Plus or minus 95% confidence interval
3 Figures in these columns may not sum to the total because of missing values on the grouping variables.
4 Urban counties include Davis, Salt Lake, Utah, and Weber; Rural counties include Box Elder, Cache, Carbon, Morgan, Sanpete, Sevier, Summit, Wasatch, and Washington; All other counties were classified as frontier.
* Persons were considered to have arthritis if they had joint symptoms most days of the month during the past 12 months, or if they were told by a doctor that they have arthritis.

Flu Shot

Influenza is a highly contagious viral infection of the nose, throat, and lungs that is one of the most severe illnesses of the winter season. Each year there are an average of 142,000 influenza-related hospitalizations in the U.S.[24] In Utah, pneumonia and influenza together are the seventh leading cause of death, and the fifth leading cause of death among adults 65 and older.[25] Influenza vaccine can prevent 50% to 60% of hospitalizations and up to 80% of deaths from influenza-related complications among the elderly.[24] Flu vaccination is recommended for anyone age 50 and over, and persons with certain health conditions.



The flu vaccination rates for the Utah Hispanic adult population aged 65 and above were not different than the vaccination rates for the general population.[3] Public health services, such as a flu shot, are provided in the community at a lower cost than a typical doctor visit to improve utilization.



Flu vaccination rates varied between areas of residence in the state. Utah Hispanic adults living in frontier areas of the state were less likely to report having a flu vaccine than Hispanic adults living in rural or urban areas.

Education level for the Hispanic population was also a factor for low flu vaccination rates. Of the Hispanic population, 40% had less than a high school education and a vaccine coverage rate of only 19.4%. Better access to vaccine providers and improved understanding of the need to vaccinate is necessary for improving vaccine coverage rates in this population.

Healthy People 2010 Objective: Increase the proportion of adults who are vaccinated annually against influenza to 90% for non-institutionalized adults aged 65+.
U.S. Baseline (All Adults): 31.3%, 1999 BRFSS
U.S. Baseline (Hispanic Adults): 24%, 1999 BRFSS
Utah Objective: Identify, refer and provide immunization services to high-risk and/or underserved populations
Utah Objective: Identify and implement outreach efforts to improve coverage levels in under-immunized children and adults.
Utah Baseline (All Adults): 33.8%, 1999 BRFSS
Utah Baseline (All Hispanic Adults): 26.9%, 1999 BRFSS

VACUNA PARA LA INFLUENZA (GRIPE)

Survey Question(s): During the past 12 months, have you had a flu shot?

Percentage of Persons Who Reported Having a Flu Shot in the Last 12 Months
by Selected Demographic Characteristics, Utah Hispanic Health Survey 2001

	Utah Adult Hispanic Population		Survey Estimates of Respondents Who Reported Having a Flu Shot in the Last 12 Months				
Demographic Subgroup	Distribution	Number of Persons[1]	Percentage of Persons Who Reported Having a Flu Shot in the Last 12 Months[2]	95% Confidence Intervals Lower	95% Confidence Intervals Upper	Number of Persons[1, 3]	Distribution of Persons Who Reported Having a Flu Shot in the Last 12 Months by Demographic Subgroup
Had Flu Shot in Past 12 Months							
Yes	23.3%	28,800					
No	76.7%	94,600					
Total, All Hispanic Adults	100.0%	123,400					
Sex							
Males	54.6%	67,400	25.7%	20.8%	30.6%	17,300	60.1%
Females	45.4%	56,000	20.5%	15.7%	25.2%	11,500	39.9%
Total, All Hispanic Adults	100.0%	123,400	23.3%	19.9%	26.7%	28,800	100.0%
Age Group							
18 to 34	58.5%	72,200	18.5%	13.7%	23.3%	13,300	46.3%
35 to 49	26.9%	33,200	25.4%	19.3%	31.5%	8,400	29.3%
50 to 64	10.7%	13,300	26.4%	17.9%	35.0%	3,500	12.2%
65 and Over	3.9%	4,800	72.9%	61.7%	84.1%	3,500	12.2%
Total, All Hispanic Adults	100.0%	123,400	23.3%	19.9%	26.7%	28,800	100.0%
Income							
Less Than $20,000	19.7%	24,400	17.9%	11.2%	24.5%	4,400	15.3%
$20,000 to $49,999	64.4%	79,500	24.6%	19.6%	29.7%	19,600	68.3%
$50,000 and Over	15.8%	19,500	24.3%	16.2%	32.5%	4,700	16.4%
Total, All Hispanic Adults	100.0%	123,400	23.3%	19.9%	26.7%	28,800	100.0%
Education							
Less Than High School	40.3%	49,800	19.4%	14.1%	24.7%	9,700	33.8%
H.S. Grad or G.E.D.	31.6%	39,000	28.1%	21.3%	34.9%	11,000	38.3%
Some Post High School	17.5%	21,700	19.8%	12.9%	26.8%	4,300	15.0%
College Graduate	10.5%	13,000	28.3%	19.1%	37.5%	3,700	12.9%
Total, All Hispanic Adults	100.0%	123,400	23.3%	19.9%	26.7%	28,800	100.0%
Area[4]							
Urban (100+ persons/mi^2)	85.0%	104,900	24.2%	20.3%	28.1%	25,400	88.2%
Rural (6 to 99 persons/mi^2)	9.7%	12,000	20.5%	14.0%	26.9%	2,500	8.7%
Frontier (<6 persons/mi^2)	5.2%	6,500	14.0%	6.9%	21.1%	900	3.1%
Total, All Hispanic Adults	100.0%	123,400	23.3%	19.9%	26.7%	28,800	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 of missing values on the grouping variables.
4 Urban counties include Davis, Salt Lake, Utah, and Weber; Rural counties include Box Elder, Cache, Carbon, Morgan, Sanpete, Sevier, Summit, Wasatch, and Washington; All other counties were classified as frontier.

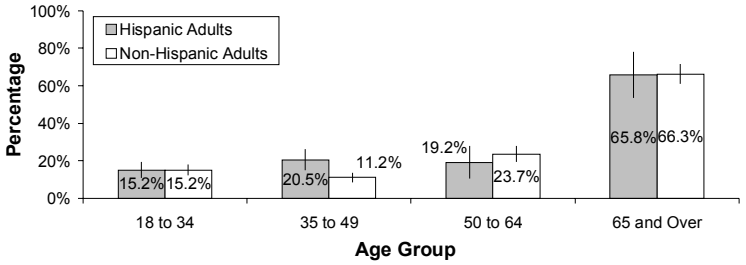
Pneumonia Vaccination

Pneumococcal disease (caused by the bacterium streptococcus pneumoniae) is an important cause of morbidity and mortality. The elderly and persons with certain chronic medical conditions are at particular risk of death from pneumococcal pneumonia. In 1999, 70% of deaths reported for persons 65 and older in Utah were due to pneumonia.[25] Vaccination against pneumococcal disease can prevent pneumonia and deaths from pneumonia. Despite its effectiveness, pneumococcal vaccine is underutilized.

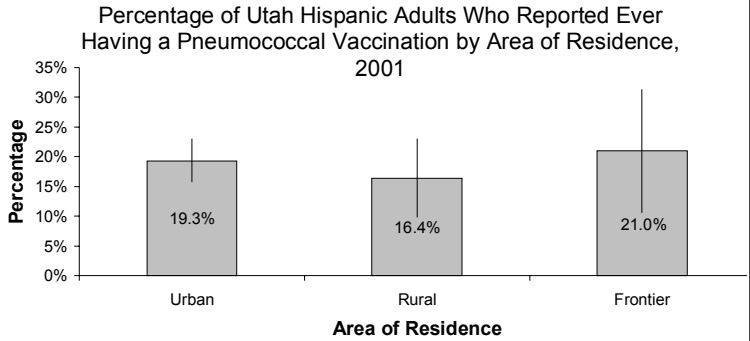
Pneumococcal vaccination rates among Hispanic adults in all age categories did not differ significantly from rates of the non-Hispanic population.[3]

Of the Hispanic population, 85.0% resided in urban areas of the state. The pneumococcal vaccination rate for Hispanic adults in urban areas was 19.3%. Of the Hispanic population residing in rural areas, 16.4% reported ever having a pneumococcal vaccination. The frontier area of the state had the smallest Hispanic population at 5.2%, but their pneumococcal vaccination rate was the highest at 21.0%.

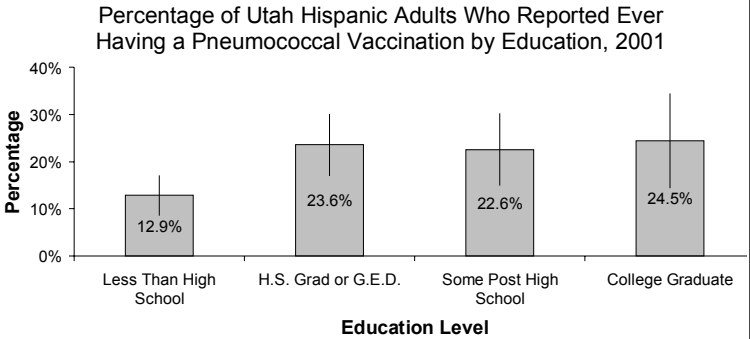
There was disparity by education level for pneumonia vaccination rates among the Hispanic population. For those with less than a high school diploma, pneumococcal vaccination rates were 12.9%, which was lower than the rates for all other education levels. Unfortunately, 40.3% of the Hispanic population surveyed were in this education group.



Source: Utah Hispanic Health Survey, 2001; Utah BRFSS 2001 (Provisional Data)



Source: Utah Hispanic Health Survey, 2001



Source: Utah Hispanic Health Survey, 2001

Healthy People 2010 Objective: Increase the proportion of adults who are ever vaccinated against pneumococcal disease to 90% for non-institutionalized adults aged 65+.
U.S. Baseline (All Adults): 18.4%, 1999 BRFSS
U.S. Baseline (Hispanic Adults): 11.8%, 1999 BRFSS
Utah Objective: Identify, refer and provide immunization services to high-risk and/or underserved populations
Utah Objective: Identify and implement outreach efforts to improve coverage levels in under-immunized children and adults.
Utah Baseline (All Adults): 16.8%, 1999 BRFSS
Utah Baseline (Hispanic Adults): 14.4%, 1999 BRFSS

VACUNA PARA LA NEUMONÍA

Survey Question(s): 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.

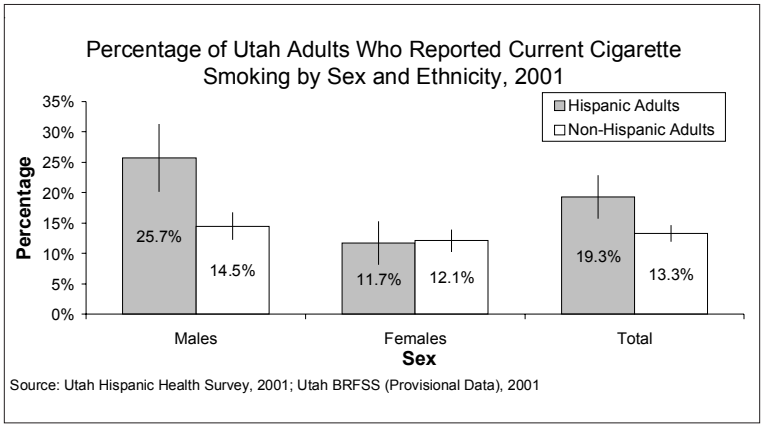
Percentage of Persons Who Reported Ever Having a Pneumonia Vaccination
by Selected Demographic Characteristics, Utah Hispanic Health Survey 2001

	Utah Adult Hispanic Population		Survey Estimates of Respondents Who Ever Having a Pneumonia Vaccination				
Demographic Subgroup	Distribution	Number of Persons[1]	Percentage of Persons Who Reported Ever Having a Pneumonia Vaccination[2]	95% Confidence Intervals Lower	95% Confidence Intervals Upper	Number of Persons[1, 3]	Distribution of Persons Who Reported Ever Having a Pneumonia Vaccination by Demographic Subgroup
Ever Had Pneumonia Vaccination							
Yes	19.1%	23,500					
No	80.9%	99,900					
Total, All Hispanic Adults	100.0%	123,400					
Sex							
Males	54.6%	67,400	22.3%	17.5%	27.1%	15,000	63.6%
Females	45.4%	56,000	15.4%	11.2%	19.5%	8,600	36.4%
Total, All Hispanic Adults	100.0%	123,400	19.1%	15.9%	22.3%	23,500	100.0%
Age Group							
18 to 34	58.5%	72,200	15.2%	10.8%	19.6%	11,000	46.6%
35 to 49	26.9%	33,200	20.5%	14.8%	26.1%	6,800	28.8%
50 to 64	10.7%	13,300	19.2%	10.5%	27.9%	2,600	11.0%
65 and Over	3.9%	4,800	65.8%	53.5%	78.2%	3,200	13.6%
Total, All Hispanic Adults	100.0%	123,400	19.1%	15.9%	22.3%	23,500	100.0%
Income							
Less Than $20,000	19.7%	24,400	15.5%	9.5%	21.6%	3,800	17.6%
$20,000 to $49,999	64.4%	79,500	16.2%	12.2%	20.3%	12,900	59.7%
$50,000 and Over	15.8%	19,500	24.9%	15.8%	34.1%	4,900	22.7%
Total, All Hispanic Adults	100.0%	123,400	19.1%	15.9%	22.3%	23,500	100.0%
Education							
Less Than High School	40.3%	49,800	12.9%	8.7%	17.2%	6,400	27.0%
H.S. Grad or G.E.D.	31.6%	39,000	23.6%	17.0%	30.2%	9,200	38.8%
Some Post High School	17.5%	21,700	22.6%	14.9%	30.3%	4,900	20.7%
College Graduate	10.5%	13,000	24.5%	14.5%	34.6%	3,200	13.5%
Total, All Hispanic Adults	100.0%	123,400	19.1%	15.9%	22.3%	23,500	100.0%
Area[4]							
Urban (100+ persons/mi^2)	85.0%	104,900	19.3%	15.6%	22.9%	20,200	85.6%
Rural (6 to 99 persons/mi^2)	9.7%	12,000	16.4%	9.7%	23.0%	2,000	8.5%
Frontier (<6 persons/mi^2)	5.2%	6,500	21.0%	10.7%	31.4%	1,400	5.9%
Total, All Hispanic Adults	100.0%	123,400	19.1%	15.9%	22.3%	23,500	100.0%

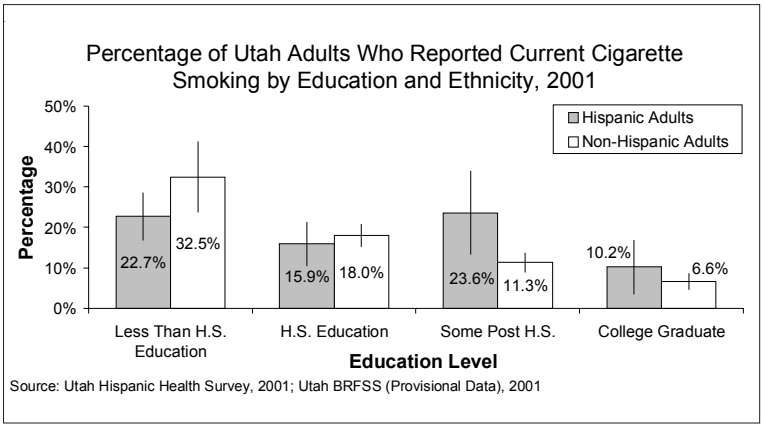
1 Rounded to the nearest 100 persons.
2 Plus or minus 95% confidence interval
3 Figures in these columns may not sum to the total because of missing values on the grouping variables.
4 Urban counties include Davis, Salt Lake, Utah, and Weber; Rural counties include Box Elder, Cache, Carbon, Morgan, Sanpete, Sevier, Summit, Wasatch, and Washington; All other counties were classified as frontier.

Current Cigarette Smoking

Tobacco use, particularly cigarette smoking, is the leading cause of preventable illness and death in the U.S.[26] Smoking increases the risk for chronic lung disease, coronary heart disease, stroke, and cancers of the lungs, larynx, esophagus, mouth, and bladder. Additionally, smoking contributes to cancer of the cervix, pancreas, and kidneys.[26] Environmental tobacco smoke has been shown to increase the risk for heart disease and lung cancer among non-smokers.[27] In the U.S., tobacco-related deaths number more than 430,000 per year.[26] The overall success in improving the health status of the U.S. population depends greatly on reducing tobacco use rates among all population groups.



The 2000 U.S. BRFSS shows that overall current smoking prevalence among U.S. Hispanic adults was 21.9%, compared with 23.3% for non-Hispanic adults.[9] In Utah, this association is reversed. According to the 2001 Utah Hispanic Survey, the overall current smoking prevalence among Hispanic Utahns was 19.3% compared with 13.3% for non-Hispanic Utahns.[3] The difference in smoking rates was particularly striking for males: 25.7% of Utah Hispanic males reported current smoking, compared to 14.4% of non-Hispanic males.[3] For females, the difference between Hispanic smoking prevalence (11.7%) and non-Hispanic smoking prevalence (12.1%) was not significant.[3]



Healthy People 2010 Objective: Reduce cigarette smoking by adults to 12%.
U.S. Baseline (All Adults): 24%, NHIS, 1998
U.S. Baseline (Hispanic Adults): 19%, NHIS, 1998
Utah Objective: Reduce cigarette smoking by adults to 11%.
Utah Baseline (All Adults): 13.9%, BRFSS, 1999

National research indicates that smoking rates differ based on years of education. Current U.S. smoking prevalence was found to be highest among persons with 9-11 years of education and lowest among persons with 16 or more years of education.[28] In Utah, non-Hispanic persons with a college degree were significantly less likely to smoke than those with lower education levels.[3] Hispanic Utahns with less than a high school education were more likely to be smokers than Hispanic Utahns who completed high school. However, Hispanic Utahns who completed one to three years of school after high school were just as likely to smoke as those who did not complete high school.

El Hábito de Fumar

Survey Question(s): Have you smoked at least 100 cigarettes in your entire life? Do you currently smoke cigarettes every day, some days, or not at all?

Percentage of Persons Who Reported Current Cigarette Smoking*
by Selected Demographic Characteristics, Utah Hispanic Health Survey 2001

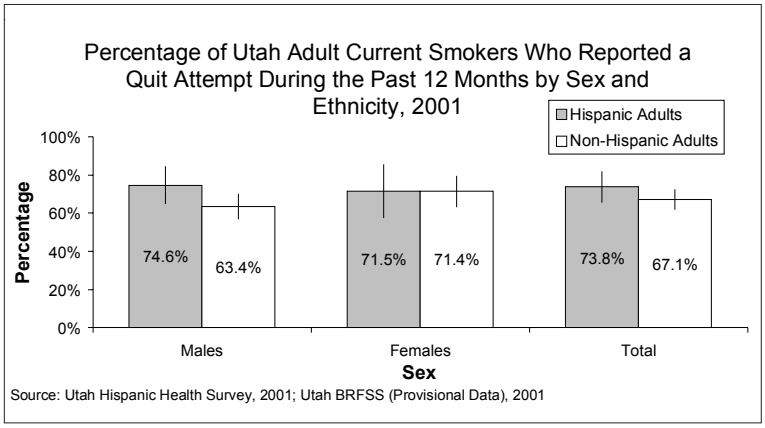
	Utah Adult Hispanic Population		Survey Estimates of Respondents Who Reported Current Cigarette Smoking				
Demographic Subgroup	Distribution	Number of Persons[1]	Percentage of Persons Who Reported Current Cigarette Smoking[2]	95% Confidence Intervals Lower	95% Confidence Intervals Upper	Number of Persons[1, 3]	Distribution of Persons Who Reported Current Cigarette Smoking by Demographic Subgroup
Current Cigarette Smoking							
Current	19.3%	23,800					
Former	14.2%	17,500					
Never	66.5%	82,100					
Total, All Hispanic Adults	100.0%	123,400					
Sex							
Males	54.6%	67,400	25.7%	20.1%	31.3%	17,300	72.7%
Females	45.4%	56,000	11.7%	8.1%	15.2%	6,500	27.3%
Total, All Hispanic Adults	100.0%	123,400	19.3%	15.7%	22.9%	23,800	100.0%
Age Group							
18 to 34	58.5%	72,200	16.9%	11.8%	22.1%	12,200	51.3%
35 to 49	26.9%	33,200	19.3%	13.8%	24.9%	6,400	26.9%
50 to 64	10.7%	13,300	33.7%	23.3%	44.1%	4,500	18.9%
65 and Over	3.9%	4,800	14.7%	4.3%	25.0%	700	2.9%
Total, All Hispanic Adults	100.0%	123,400	19.3%	15.7%	22.9%	23,800	100.0%
Income							
Less Than $20,000	19.7%	24,400	21.0%	12.6%	29.5%	5,100	20.6%
$20,000 to $49,999	64.4%	79,500	20.6%	15.4%	25.9%	16,400	66.1%
$50,000 and Over	15.8%	19,500	16.9%	10.1%	23.7%	3,300	13.3%
Total, All Hispanic Adults	100.0%	123,400	19.3%	15.7%	22.9%	23,800	100.0%
Education							
Less Than High School	40.3%	49,800	22.7%	16.7%	28.7%	11,300	47.3%
H.S. Grad or G.E.D.	31.6%	39,000	15.9%	10.5%	21.3%	6,200	25.9%
Some Post High School	17.5%	21,700	23.6%	13.2%	33.9%	5,100	21.3%
College Graduate	10.5%	13,000	10.2%	3.5%	16.9%	1,300	5.4%
Total, All Hispanic Adults	100.0%	123,400	19.3%	15.7%	22.9%	23,800	100.0%
Area[4]							
Urban (100+ persons/mi^2)	85.0%	104,900	19.4%	15.3%	23.5%	20,300	85.3%
Rural (6 to 99 persons/mi^2)	9.7%	12,000	17.3%	10.9%	23.7%	2,100	8.8%
Frontier (<6 persons/mi^2)	5.2%	6,500	21.7%	11.9%	31.4%	1,400	5.9%
Total, All Hispanic Adults	100.0%	123,400	19.3%	15.7%	22.9%	23,800	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 of missing values on the grouping variables.
4 Urban counties include Davis, Salt Lake, Utah, and Weber; Rural counties include Box Elder, Cache, Carbon, Morgan, Sanpete, Sevier, Summit, Wasatch, and Washington; All other counties were classified as frontier.
* Current cigarette smoking is defined as anyone who has smoked 100 cigarettes or more and currently smokes everyday or somedays.

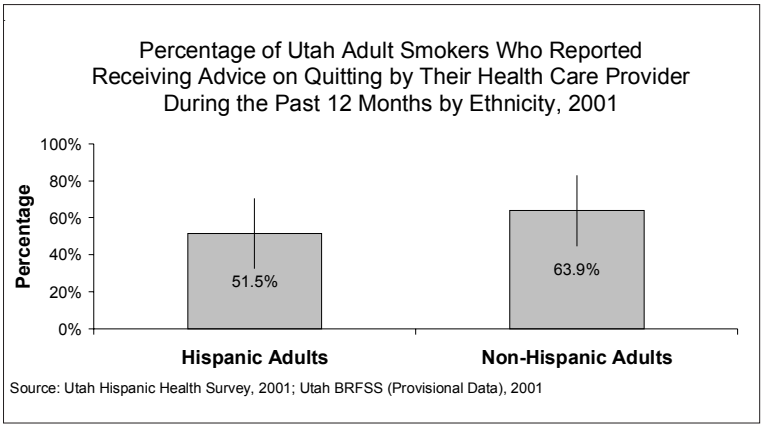
Quit Smoking Attempt

The 1990 Surgeon General's Report "The Health Benefits of Smoking Cessation" cites the following health outcomes for people who quit smoking compared with those who continue to smoke:

- Smoking cessation has major and immediate health benefits for men and women of all ages. Benefits apply to persons with and without smoking-related diseases.
- Former smokers live longer than continuing smokers. For example, persons who quit smoking before age 50 have half the risk of dying in the next 15 years compared with continuing smokers.
- Smoking cessation decreases the risk of lung cancer, other cancers, heart attack, stroke, and chronic lung disease.[29]



The 1993 National Health Interview Survey (NHIS) found that 70% of current adult smokers were interested in quitting.[8] About half of all current smokers reported having stopped smoking for one day or longer in the past year because they were trying to quit.[9]



According to the Utah Hispanic Health Survey and BRFSS data, approximately 70% of Utah adult current smokers reported making a quit attempt during the past year.[3] Differences between Hispanic adults and non-Hispanic adults and males and females were not statistically significant.

Healthy People 2010 Objective: Increase smoking cessation attempts by adult smokers to 75%.
U.S. Baseline (All Adults): 43%, NHIS, 1997
U.S. Baseline (Hispanic Adults): 46%, NHIS, 1997
Utah Objective: Same as HP 2010 Objective
Utah Baseline (All Adults): 52%, BRFSS, 1999

Due to the addictive power of nicotine, quitting smoking is often a lengthy, demanding, and frustrating process. Studies show that although millions of people report that they would like to quit smoking, only six percent are successful for more than one month at any given time.[30] Cessation programs and pharmacological interventions can improve the success rate.

Health care providers' repeated advice to quit smoking has been found to be effective in increasing smokers' motivation to quit. Since more than 70% of smokers see a health care provider each year,[30] cessation assistance from clinicians is of particular importance. The Utah Hispanic Health Survey and BRFSS data show that almost half of Utah smokers who report having seen a health care provider in the past 12 months do not receive advice on quitting smoking during these visits.[3]

Atentos para Dejar de Fumar

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

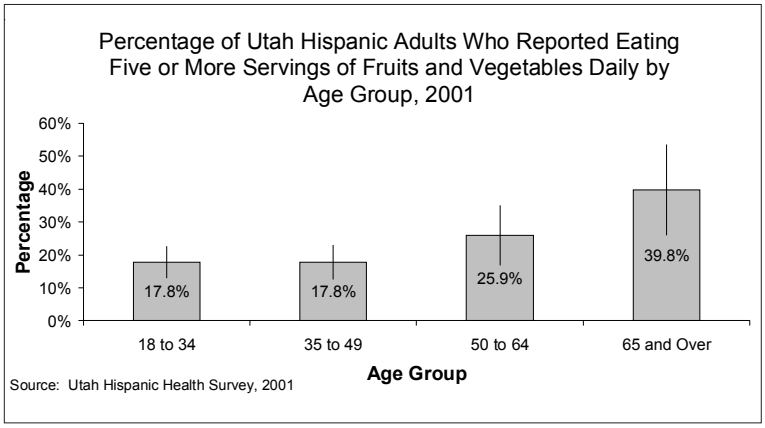
Percentage of Current Smokers Who Reported a Quit Attempt* in the Past 12 Months
by Selected Demographic Characteristics, Utah Hispanic Health Survey 2001

	Utah Adult Hispanic Population		Survey Estimates of Current Smokers Who Reported a Quit Attempt in the Past 12 Months				
Demographic Subgroup	Distribution	Number of Current Smokers[1]	Percentage of Current Smokers Who Reported a Quit Attempt in the Past 12 Months[2]	95% Confidence Intervals Lower	95% Confidence Intervals Upper	Number of Current Smokers[1, 3]	Distribution of Current Smokers Who Reported a Quit Attempt in the Past 12 Months by Demographic Subgroup
Quit Attempt							
Yes	73.8%	17,600					
No	26.3%	6,200					
Total, All Hispanic Adult Current Smokers	100.0%	23,800					
Sex							
Males	72.7%	17,300	74.6%	64.7%	84.5%	12,900	73.7%
Females	27.3%	6,500	71.5%	57.5%	85.5%	4,600	26.3%
Total, All Hispanic Adult Current Smokers	100.0%	23,800	73.8%	65.6%	81.9%	17,600	100.0%
Age Group							
18 to 34	51.3%	12,200	78.1%	66.4%	89.7%	9,500	54.0%
35 to 49	26.9%	6,400	68.0%	53.6%	82.4%	4,400	25.0%
50 to 64	18.9%	4,500	70.6%	52.6%	88.6%	3,200	18.2%
65 and Over	2.9%	700	70.7%	30.3%	100.0%	500	2.8%
Total, All Hispanic Adult Current Smokers	100.0%	23,800	73.8%	65.6%	81.9%	17,600	100.0%
Income							
Less Than $20,000	20.6%	4,900	67.5%	46.6%	88.5%	3,300	19.2%
$20,000 to $49,999	66.1%	15,700	80.3%	70.7%	89.9%	12,600	73.3%
$50,000 and Over	13.3%	3,200	41.8%	20.7%	62.9%	1,300	7.6%
Total, All Hispanic Adult Current Smokers	100.0%	23,800	73.8%	65.6%	81.9%	17,600	100.0%
Education							
Less Than High School	47.3%	11,300	78.6%	67.0%	90.1%	8,900	50.6%
H.S. Grad or G.E.D.	25.9%	6,200	68.4%	52.5%	84.3%	4,200	23.9%
Some Post High School	21.3%	5,100	73.4%	54.9%	91.9%	3,700	21.0%
College Graduate	5.4%	1,300	58.8%	23.1%	94.5%	800	4.5%
Total, All Hispanic Adult Current Smokers	100.0%	23,800	73.8%	65.6%	81.9%	17,600	100.0%
Area[4]							
Urban (100+ persons/mi^2)	85.3%	20,300	74.8%	65.7%	84.0%	15,200	86.4%
Rural (6 to 99 persons/mi^2)	8.8%	2,100	71.3%	53.7%	88.9%	1,500	8.5%
Frontier (<6 persons/mi^2)	5.9%	1,400	61.7%	36.5%	86.9%	900	5.1%
Total, All Hispanic Adult Current Smokers	100.0%	23,800	73.8%	65.6%	81.9%	17,600	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 of missing values on the grouping variables.
4 Urban counties include Davis, Salt Lake, Utah, and Weber; Rural counties include Box Elder, Cache, Carbon, Morgan, Sanpete, Sevier, Summit, Wasatch, and Washington; All other counties were classified as frontier.
* Quit attempt is defined as quitting smoking for at least 1 day in the past year.

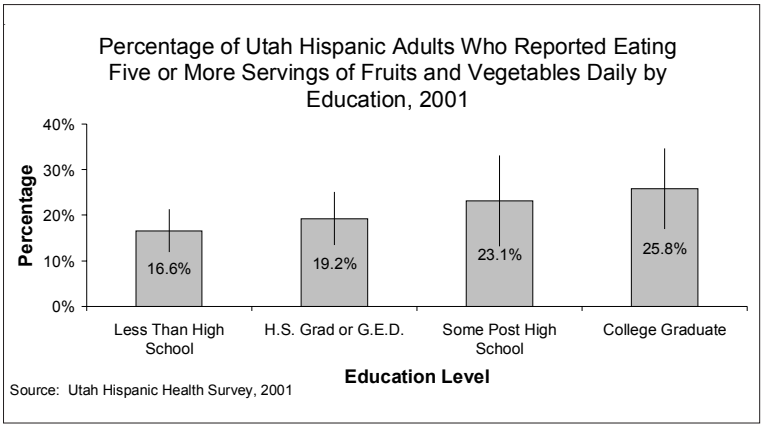
5 A Day

Good nutrition, including at least five or more servings of fruits and vegetables each day, is associated with a reduced risk for some types of cancer, heart disease, stroke, diabetes, and osteoporosis.[31] Fruits and vegetables are low in calories and fat and high in vitamins, minerals, and fiber. Unfortunately, a large gap remains between recommended dietary patterns and the diet followed by most Americans. In fact, only about one fourth of U.S. adults eat five or more servings of fruits and vegetables each day.[31] Dietary habits established during youth may extend into adulthood and affect the prevalence and burden of future chronic diseases.



According to the Utah Hispanic Health Survey, 19.5% of Utah Hispanic adults reported eating five or more servings of fruits and vegetables each day. More women than men reported eating 5 a Day (22.2% compared to 17.3%).

The percentage of Utah Hispanic adults who reported eating 5 a Day increased with increasing age. About 39.8% of individuals aged 65 and older reported eating five or more servings of fruits and vegetables daily compared to 17.8% of Hispanic persons aged 18 to 34.



The percentage of Hispanic adults who reported eating 5 a Day increased with increasing level of education.

In 2000, 20.8% of Utah non-Hispanic adults reported eating five or more servings of fruits and vegetables daily. This is similar to Utah Hispanic adults (19.5%).[9] However, Hispanic adults who did not eat 5 or more servings of fruits and vegetables daily were more likely than non-Hispanic adults to eat two or fewer servings (47.4% vs. 40.5%, respectively).[9]

Healthy People 2010 Objective: Increase the proportion of persons aged 2+ who consume at least 2 daily servings of fruit to 75%.
U.S. Baseline (All Adults): 28%, HP 2010, 1994-96
U.S. Baseline (Hispanic Adults): 32%, HP 2010, 1994-96
Utah Objective: Same as HP 2010 Objective
Utah Baseline (All Adults): 24.5% of adults 18+ ate 5+ servings of fruits or vegetables daily, BRFSS, 1999

Healthy People 2010 Objective: Increase the proportion of persons aged 2+ who consume at least 3 daily servings of vegetables, with at least 1/3 being dark green or orange vegetables to 50%.
U.S. Baseline (All Adults): 3%, HP 2010, 1994-96
U.S. Baseline (Hispanic Adults): Not available
Utah Objective: Same as HP 2010
Utah Baseline (All Adults): 24.5% of adults 18+ ate 5+ servings of fruits or vegetables daily, BRFSS, 1999

NUTRICIÓN: "CINCO AL DÍA"

Survey Question(s): How often do you drink fruit juices, eat fruit, green salad, potatoes, carrots, or other vegetables? (This measure is based on a group of questions about an individual's eating habits.)

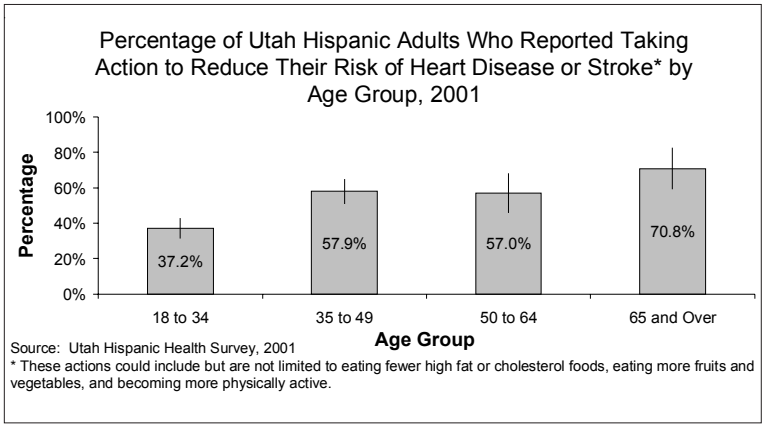
Percentage of Persons Who Reported Eating Five or More Servings of Fruits and Vegetables Daily
by Selected Demographic Characteristics, Utah Hispanic Health Survey 2001

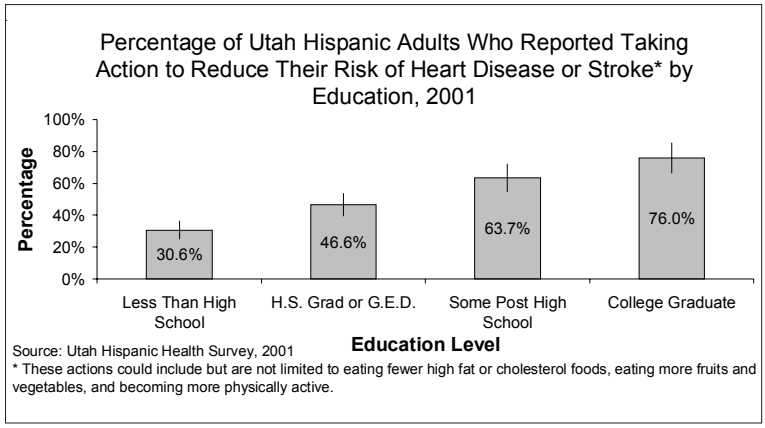
	Utah Adult Hispanic Population		Survey Estimates of Respondents Who Reported Eating Five or More Servings of Fruits and Vegetables Daily				
Demographic Subgroup	Distribution	Number of Persons[1]	Percentage of Persons Who Reported Eating Five or More Servings of Fruits and Vegetables Daily[2]	95% Confidence Intervals Lower	95% Confidence Intervals Upper	Number of Persons[1, 3]	Distribution of Persons Who Reported Eating Five or More Servings of Fruits and Vegetables Daily by Demographic Subgroup
Fruit and Vegetable Servings							
Less Than 1 per Day	7.4%	9,100					
1-2 Servings per Day	40.0%	49,400					
3-4 Servings per Day	33.1%	40,800					
5 or More Servings per Day	19.5%	24,100					
Total, All Hispanic Adults	100.0%	123,400					
Sex							
Males	54.6%	67,400	17.3%	12.6%	22.0%	11,600	48.3%
Females	45.4%	56,000	22.2%	17.5%	26.9%	12,400	51.7%
Total, All Hispanic Adults	100.0%	123,400	19.5%	16.2%	22.9%	24,100	100.0%
Age Group							
18 to 34	58.5%	72,200	17.8%	13.0%	22.6%	12,900	53.3%
35 to 49	26.9%	33,200	17.8%	12.6%	23.0%	5,900	24.4%
50 to 64	10.7%	13,300	25.9%	16.8%	35.1%	3,500	14.5%
65 and Over	3.9%	4,800	39.8%	26.0%	53.6%	1,900	7.9%
Total, All Hispanic Adults	100.0%	123,400	19.5%	16.2%	22.9%	24,100	100.0%
Income							
Less Than $20,000	19.7%	24,400	23.2%	15.1%	31.3%	5,700	25.2%
$20,000 to $49,999	64.4%	79,500	16.7%	12.2%	21.2%	13,300	58.8%
$50,000 and Over	15.8%	19,500	18.5%	11.7%	25.4%	3,600	15.9%
Total, All Hispanic Adults	100.0%	123,400	19.5%	16.2%	22.9%	24,100	100.0%
Education							
Less Than High School	40.3%	49,800	16.6%	11.9%	21.3%	8,300	34.3%
H.S. Grad or G.E.D.	31.6%	39,000	19.2%	13.4%	25.1%	7,500	31.0%
Some Post High School	17.5%	21,700	23.1%	13.2%	33.1%	5,000	20.7%
College Graduate	10.5%	13,000	25.8%	16.9%	34.7%	3,400	14.0%
Total, All Hispanic Adults	100.0%	123,400	19.5%	16.2%	22.9%	24,100	100.0%
Area[4]							
Urban (100+ persons/mi^2)	85.0%	104,900	19.0%	15.3%	22.8%	20,000	83.0%
Rural (6 to 99 persons/mi^2)	9.7%	12,000	23.7%	16.3%	31.1%	2,800	11.6%
Frontier (<6 persons/mi^2)	5.2%	6,500	19.8%	11.4%	28.2%	1,300	5.4%
Total, All Hispanic Adults	100.0%	123,400	19.5%	16.2%	22.9%	24,100	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 of missing values on the grouping variables.
4 Urban counties include Davis, Salt Lake, Utah, and Weber; Rural counties include Box Elder, Cache, Carbon, Morgan, Sanpete, Sevier, Summit, Wasatch, and Washington; All other counties were classified as frontier.

Taking Action To Lower Risk of CVD

Cardiovascular disease (CVD) includes those diseases and conditions that affect the heart and blood vessels such as high blood pressure, heart disease, and stroke. Cardiovascular disease is the leading killer of both men and women and across all racial and ethnic groups in the U.S.[32] Heart disease is also a leading cause of disability in the U.S.[33] Coronary heart disease is the largest component of cardiovascular disease and is responsive to risk reduction and treatment. Individuals who smoke, have high blood pressure, elevated cholesterol, diabetes, poor nutrition or a family history of heart disease, or who are overweight or physically inactive are at greater risk of developing coronary heart disease. A diet low in fat and rich in fruits and vegetables is associated with a reduced risk of heart disease. Physical activity provides many health benefits including decreased risk of death from heart disease, prevention of high blood pressure, weight control, and lowered risk of developing diabetes.[34]





According to the Utah Hispanic Health Survey, 46.2% of Utah Hispanic adults reported implementing behavior changes to reduce the risk of heart disease or stroke. Of all Utah Hispanic adults, 37.2% reported eating fewer high fat/high cholesterol foods and 42.6% reported eating more fruits and vegetables. In addition, 41.7% reported increasing their level of physical activity in an effort to reduce their risk of heart disease or stroke.

Hispanic persons aged 65 and older were more likely than younger persons to report taking action to reduce their risk of heart disease or stroke.

The percentage of Hispanic persons who reported taking action to reduce their risk of heart disease or stroke increased with increasing years of education.

Healthy People 2010 Objective: Increase the proportion of persons aged 2+ who consume <10% of calories from saturated fat to 75%.
U.S. Baseline (All Adults): 36%, HP 2010, 1994-96
U.S. Baseline (Hispanic Adults): 39%, HP 2010, 1994-96
Utah Objective: Same as HP 2010 Objective
Utah Baseline (All Adults): Not available

Healthy People 2010 Objective: Increase the proportion of adults who engage regularly, preferably daily, in moderate physical activity for at least 30 minutes per day to 30%.
U.S. Baseline (All Adults): 15%, HP 2010, 1997
U.S. Baseline (Hispanic Adults): 11%, HP 2010, 1997
Utah Objective: Same as HP 2010 Objective
Utah Baseline (All Adults): 27%, BRFSS, 1999

Tomando Acción para Bajar el Riesgo Cardiovascular

Survey Question(s): To lower your risk of developing heart disease or stroke, are you eating fewer high fat or high cholesterol foods? Eating more fruits and vegetables? More physically active?

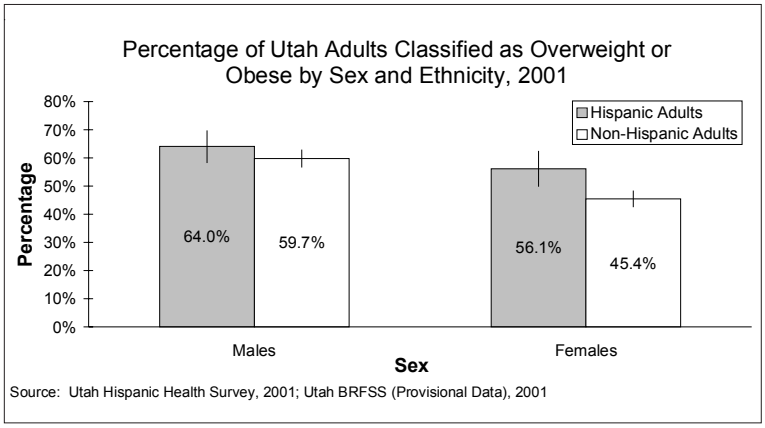
Percentage of Persons Who Reported Taking Action to Reduce Their Risk of Heart Disease or Stroke*
by Selected Demographic Characteristics, Utah Hispanic Health Survey 2001

	Utah Adult Hispanic Population		Survey Estimates of Respondents Who Reported Taking Action to Reduce Their Risk of Heart Disease or Stroke				
Demographic Subgroup	Distribution	Number of Persons[1]	Percentage of Persons Who Reported Taking Action to Reduce Their Risk of Heart Disease or Stroke[2]	95% Confidence Intervals Lower	95% Confidence Intervals Upper	Number of Persons[1, 3]	Distribution of Persons Who Reported Taking Action to Reduce Their Risk of Heart Disease or Stroke by Demographic Subgroup
Taking Action							
Yes	46.2%	57,000					
No	53.8%	66,400					
Total, All Hispanic Adults	100.0%	123,400					
Sex							
Males	54.6%	67,400	49.8%	43.9%	55.6%	33,500	58.9%
Females	45.4%	56,000	41.8%	36.1%	47.5%	23,400	41.1%
Total, All Hispanic Adults	100.0%	123,400	46.2%	42.1%	50.3%	57,000	100.0%
Age Group							
18 to 34	58.5%	72,200	37.2%	31.5%	42.9%	26,900	47.1%
35 to 49	26.9%	33,200	57.9%	50.8%	64.9%	19,200	33.6%
50 to 64	10.7%	13,300	57.0%	45.8%	68.1%	7,600	13.3%
65 and Over	3.9%	4,800	70.8%	59.1%	82.5%	3,400	6.0%
Total, All Hispanic Adults	100.0%	123,400	46.2%	42.1%	50.3%	57,000	100.0%
Income							
Less Than $20,000	19.7%	24,400	31.7%	23.3%	40.1%	7,700	13.3%
$20,000 to $49,999	64.4%	79,500	45.9%	40.1%	51.6%	36,500	63.3%
$50,000 and Over	15.8%	19,500	69.3%	60.1%	78.6%	13,500	23.4%
Total, All Hispanic Adults	100.0%	123,400	46.2%	42.1%	50.3%	57,000	100.0%
Education							
Less Than High School	40.3%	49,800	30.6%	24.7%	36.5%	15,200	26.6%
H.S. Grad or G.E.D.	31.6%	39,000	46.6%	39.2%	54.0%	18,200	31.9%
Some Post High School	17.5%	21,700	63.7%	54.8%	72.6%	13,800	24.2%
College Graduate	10.5%	13,000	76.0%	66.5%	85.6%	9,900	17.3%
Total, All Hispanic Adults	100.0%	123,400	46.2%	42.1%	50.3%	57,000	100.0%
Area[4]							
Urban (100+ persons/mi^2)	85.0%	104,900	45.7%	41.0%	50.4%	47,900	84.0%
Rural (6 to 99 persons/mi^2)	9.7%	12,000	47.2%	38.6%	55.8%	5,700	10.0%
Frontier (<6 persons/mi^2)	5.2%	6,500	52.3%	40.6%	63.9%	3,400	6.0%
Total, All Hispanic Adults	100.0%	123,400	46.2%	42.1%	50.3%	57,000	100.0%

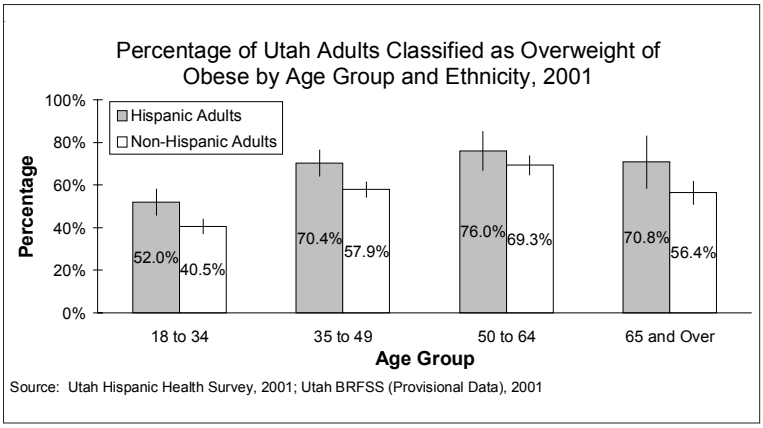
1 Rounded to the nearest 100 persons.
2 Plus or minus 95% confidence interval
3 Figures in these columns may not sum to the total because of missing values on the grouping variables.
4 Urban counties include Davis, Salt Lake, Utah, and Weber; Rural counties include Box Elder, Cache, Carbon, Morgan, Sanpete, Sevier, Summit, Wasatch, and Washington; All other counties were classified as frontier.
* Although adults may take other actions to reduce risk of heart disease or stroke, the questions used for this report include only eating fewer high fat or cholesterol foods, eating more fruits and vegetables, andbecoming more physically active.

Overweight/Obese

Obesity is the second leading cause of preventable death in the United States.[35] Only smoking exceeds obesity in contributing to total U.S. mortality rates.[36] The number and percentage of obese persons in Utah and the U.S. has increased dramatically over the past 10 years.[20] Adults who are overweight or obese are at increased risk for morbidity from hypertension, high LDL cholesterol, type 2 diabetes, coronary heart disease, stroke, osteoarthritis, sleep apnea, respiratory problems, and endometrial, breast, prostrate, and colon cancers.[37]



This report used self-reported weight and height to calculate the Body Mass Index (BMI), which is defined as weight in kilograms divided by the square of height in meters. Overweight or obese, for analysis purposes, was defined as a BMI of 25 or greater. Because people tend to overestimate height and underestimate weight, the true prevalence of obesity is probably even higher than reported.



Men were more likely to be classified as overweight or obese than women in both the Hispanic and non-Hispanic adult populations. Prevalence of overweight/obesity was greater for Hispanic adults than non-Hispanic adults, and the difference by ethnicity was larger for women than for men.[3]

Healthy People 2010 Objective: Reduce the proportion of adults who are obese (BMI $\geq$ 30) to 15%.
U.S. Baseline (All Adults): 23.0%, adults 20+, HP 2010, 1988-94
U.S. Baseline (Hispanic Adults): Not available
Utah Objective: Same as HP 2010 Objective
Utah Baseline (All Adults): 18.5%, BRFSS, 2000

The prevalence of overweight or obese increased with age up to age 65. This trend is similar in Hispanic and non-Hispanic adults. Hispanic adults were more likely to be overweight/obese than non-Hispanic Utah adults at all ages.[3] This difference was greatest among persons under age 50. An understanding of factors unique to the Hispanic population will be necessary to implement interventions to reduce obesity in this population.

Sobrepeso/Obesidad

Survey Question(s): About how much do you weigh without shoes? About how tall are you? (Overweight and obesity are calculated measures based on the above questions.)

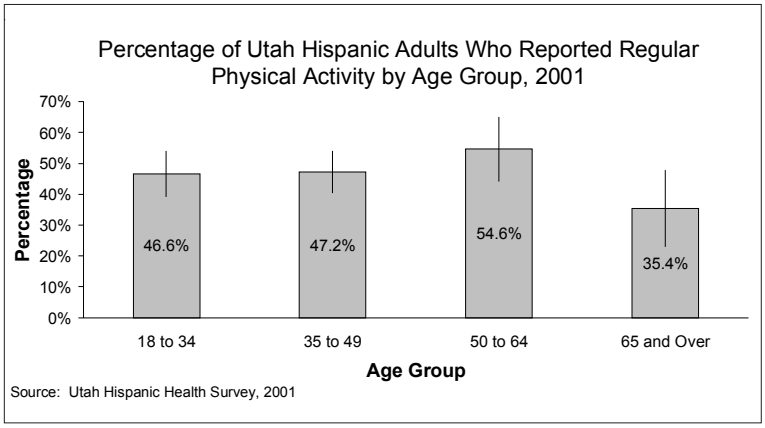
Percentage of Persons Classified as Overweight* or Obese**
by Selected Demographic Characteristics, Utah Hispanic Health Survey 2001

	Utah Adult Hispanic Population		Survey Estimates of Respondents Classified as Overweight or Obese				
Demographic Subgroup	Distribution	Number of Persons[1]	Percentage of Persons Classified as Overweight or Obese[2]	95% Confidence Intervals Lower	95% Confidence Intervals Upper	Number of Persons[1, 3]	Distribution of Persons Classified as Overweight or Obese by Demographic Subgroup
Overweight or Obese							
Not Overweight or Obese	39.3%	48,500					
Overweight but Not Obese	38.8%	47,900					
Obese	21.9%	27,000					
Total, All Hispanic Adults	100.0%	123,400					
Sex							
Males	54.6%	67,400	64.0%	58.2%	69.8%	43,100	57.9%
Females	45.4%	56,000	56.1%	49.7%	62.5%	31,400	42.1%
Total, All Hispanic Adults	100.0%	123,400	60.7%	56.3%	65.0%	74,900	100.0%
Age Group							
18 to 34	58.5%	72,200	52.0%	45.6%	58.4%	37,600	50.5%
35 to 49	26.9%	33,200	70.4%	64.0%	76.9%	23,400	31.4%
50 to 64	10.7%	13,300	76.0%	66.7%	85.3%	10,100	13.6%
65 and Over	3.9%	4,800	70.8%	58.2%	83.4%	3,400	4.6%
Total, All Hispanic Adults	100.0%	123,400	60.7%	56.3%	65.0%	74,900	100.0%
Income							
Less Than $20,000	19.7%	24,400	63.6%	53.2%	74.0%	15,500	21.0%
$20,000 to $49,999	64.4%	79,500	59.2%	53.3%	65.2%	47,100	63.8%
$50,000 and Over	15.8%	19,500	57.2%	47.2%	67.2%	11,200	15.2%
Total, All Hispanic Adults	100.0%	123,400	60.7%	56.3%	65.0%	74,900	100.0%
Education							
Less Than High School	40.3%	49,800	65.3%	57.6%	73.1%	32,500	43.0%
H.S. Grad or G.E.D.	31.6%	39,000	56.0%	48.4%	63.6%	21,800	28.9%
Some Post High School	17.5%	21,700	62.9%	53.7%	72.1%	13,700	18.1%
College Graduate	10.5%	13,000	57.8%	47.1%	68.6%	7,500	9.9%
Total, All Hispanic Adults	100.0%	123,400	60.7%	56.3%	65.0%	74,900	100.0%
Area[4]							
Urban (100+ persons/mi^2)	85.0%	104,900	59.7%	54.7%	64.6%	62,600	83.6%
Rural (6 to 99 persons/mi^2)	9.7%	12,000	64.6%	56.0%	73.3%	7,800	10.4%
Frontier (<6 persons/mi^2)	5.2%	6,500	69.2%	57.8%	80.5%	4,500	6.0%
Total, All Hispanic Adults	100.0%	123,400	60.7%	56.3%	65.0%	74,900	100.0%

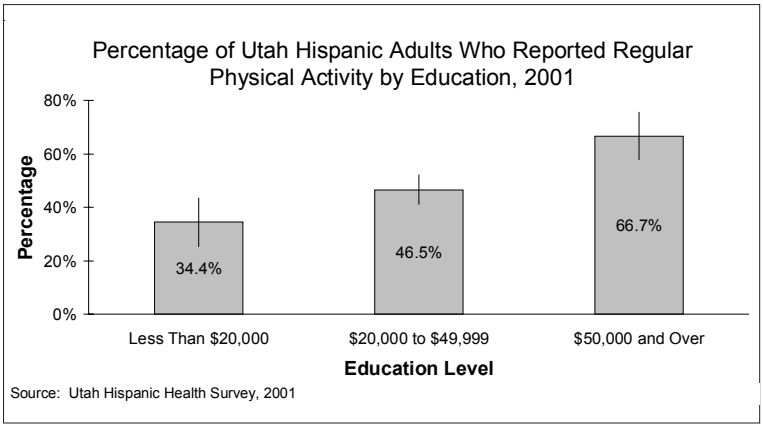
1 Rounded to the nearest 100 persons.
2 Plus or minus 95% confidence interval
3 Figures in these columns may not sum to the total because of missing values on the grouping variables.
4 Urban counties include Davis, Salt Lake, Utah, and Weber; Rural counties include Box Elder, Cache, Carbon, Morgan, Sanpete, Sevier, Summit, Wasatch, and Washington; All other counties were classified as frontier.
* Overweight, but not obese, is defined as BMI 25-29.
** Obese is defined as a BMI of 30 or more.

Regular Physical Activity

For this report, regular physical activity was defined as five or more sessions per week of 30 minutes or more duration per session, in any combination of moderate and vigorous activity. Physical activity is widely believed to reduce all-cause mortality and improve health outcomes.[38] Regular physical activity provides benefits even at moderate levels of intensity.[39] Some of these benefits include a decreased risk of death from heart disease, prevention of high blood pressure, weight control, and lowered risk of developing diabetes.[34] Physical activity is also associated with a decreased risk for some cancers, lower rates of affective disorders such as depression and anxiety, and increased quality of life and independent living among the elderly.[38]



Approximately 47.2% of Utah Hispanic adults reported engaging in regular physical activity. Hispanic persons aged 50 to 64 reported the highest level of physical activity.



Utah Hispanic adults with at least a high school education were more likely to report engaging in regular physical activity than persons with fewer years of education.

Utah Hispanic adults with an annual household income of $50,000 or more were more likely to report regular physical activity than those with a household income less than $50,000. This trend was similar to that seen for all Utah adults in a recent statewide survey.[20]

Healthy People 2010 Objective: Increase the proportion of adults who engage regularly, preferably daily, in moderate physical activity for at least 30 min. per day to 30%.
U.S. Baseline (All Adults): 15%, HP 2010, 1997
U.S. Baseline (Hispanic Adults): 11%, HP 2010, 1997
Utah Objective: Same as HP 2010 Objective
Utah Baseline (All Adults): 27.0%, BRFSS, 1999

Comparable data on non-Hispanic Utah adults are not available because a new measure of physical activity was used for this survey.

Actividad Física Regular

Survey Question(s): The respondent is asked a group of questions about moderate and vigorous physical activity in a usual week. The questions include work-related physical activity. The duration and frequency of these activities are assessed to create a composite measure for regular physical activity.
Note: this measure is not consistent with reported BRFSS measures prior to 2001.

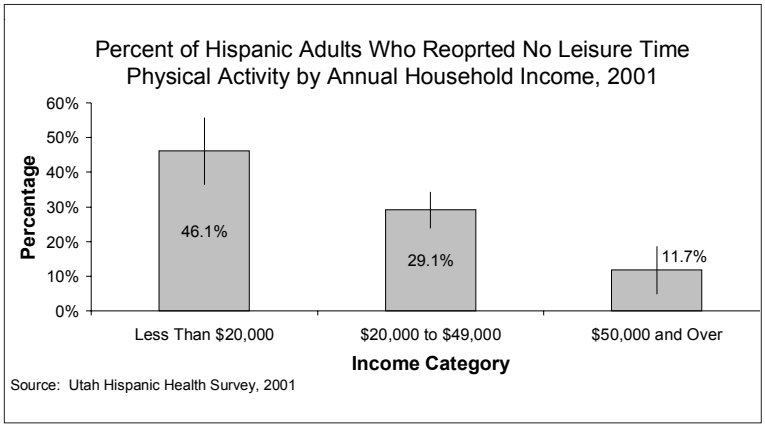
Percentage of Persons Who Reported Regular Physical Activity*
by Selected Demographic Characteristics, Utah Hispanic Health Survey 2001

	Utah Adult Hispanic Population		Survey Estimates of Respondents Who Reported Regular Physical Activity				
Demographic Subgroup	Distribution	Number of Persons[1]	Percentage of Persons Who Reported Regular Physical Activity[2]	95% Confidence Intervals Lower	95% Confidence Intervals Upper	Number of Persons[1, 3]	Distribution of Persons Who Reported Regular Physical Activity by Demographic Subgroup
Regular Physical Activity							
Yes	47.2%	58,200					
No	52.8%	65,200					
Total, All Hispanic Adults	100.0%	123,400					
Sex							
Males	54.6%	67,400	49.2%	43.5%	55.0%	33,200	56.9%
Females	45.4%	56,000	44.7%	38.9%	50.6%	25,100	43.1%
Total, All Hispanic Adults	100.0%	123,400	47.2%	43.1%	51.3%	58,200	100.0%
Age Group							
18 to 34	58.5%	72,200	46.6%	40.8%	52.5%	33,600	57.6%
35 to 49	26.9%	33,200	47.2%	40.3%	54.0%	15,700	26.9%
50 to 64	10.7%	13,300	54.6%	44.1%	65.1%	7,300	12.5%
65 and Over	3.9%	4,800	35.4%	22.9%	47.9%	1,700	2.9%
Total, All Hispanic Adults	100.0%	123,400	47.2%	43.1%	51.3%	58,200	100.0%
Income							
Less Than $20,000	19.7%	24,400	34.4%	25.1%	43.7%	8,400	14.4%
$20,000 to $49,999	64.4%	79,500	46.5%	40.9%	52.2%	37,000	63.4%
$50,000 and Over	15.8%	19,500	66.7%	57.7%	75.7%	13,000	22.3%
Total, All Hispanic Adults	100.0%	123,400	47.2%	43.1%	51.3%	58,200	100.0%
Education							
Less Than High School	40.3%	49,800	38.4%	31.9%	45.0%	19,100	32.7%
H.S. Grad or G.E.D.	31.6%	39,000	52.3%	45.0%	59.7%	20,400	34.9%
Some Post High School	17.5%	21,700	53.6%	43.8%	63.4%	11,600	19.9%
College Graduate	10.5%	13,000	56.5%	46.2%	66.7%	7,300	12.5%
Total, All Hispanic Adults	100.0%	123,400	47.2%	43.1%	51.3%	58,200	100.0%
Area[4]							
Urban (100+ persons/mi^2)	85.0%	104,900	47.9%	43.3%	52.6%	50,300	86.3%
Rural (6 to 99 persons/mi^2)	9.7%	12,000	40.0%	31.7%	48.3%	4,800	8.2%
Frontier (<6 persons/mi^2)	5.2%	6,500	48.6%	36.9%	60.2%	3,200	5.5%
Total, All Hispanic Adults	100.0%	123,400	47.2%	43.1%	51.3%	58,200	100.0%

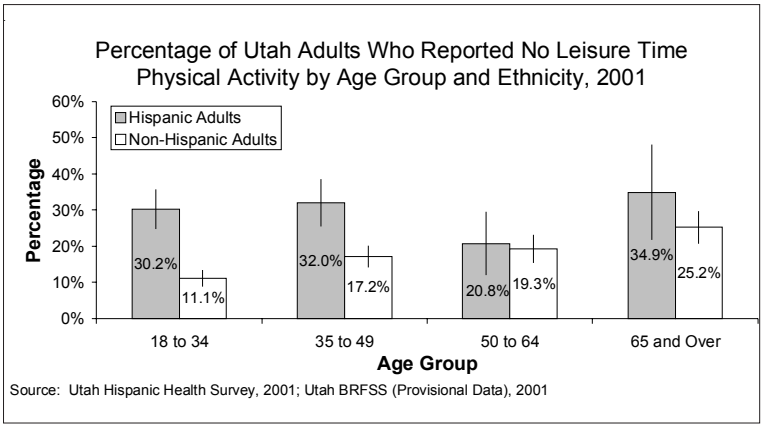
1 Rounded to the nearest 100 persons.
2 Plus or minus 95% confidence interval
3 Figures in these columns may not sum to the total because of missing values on the grouping variables.
4 Urban counties include Davis, Salt Lake, Utah, and Weber; Rural counties include Box Elder, Cache, Carbon, Morgan, Sanpete, Sevier, Summit, Wasatch, and Washington; All other counties were classified as frontier.
* Regular Physical Activity is defined as 5+ times/week, 30+ minutes/session, regardless of intensity
This measure has changed from previous BRFSS measures.

Sedentary Lifestyle

Sedentary lifestyle has been defined as no leisure time physical activity, which does not include activity encountered during work. Over one quarter of U.S. adults in 1999 reported engaging in no leisure time physical activity. This proportion has not changed since 1989.[40] Those reporting no leisure time physical activity were more likely to be women, older adults, African American, and Hispanic. Generally, persons with lower levels of income and education report less leisure time physical activity.[7]



The risk associated with physical inactivity is nearly as high as other well-known coronary heart disease risk factors, such as cigarette smoking, high blood pressure, and high blood cholesterol. Physically inactive people are almost twice as likely to develop coronary heart disease as those who are physically active on a regular basis.[7] Physical inactivity is also linked to other adverse health effects, including diabetes, osteoporosis, and some cancers.[39]



Similar to national trends, Utah Hispanic women were more likely than Utah Hispanic men to report no leisure time physical activity.

According to data collected by the Utah Hispanic Health Survey, 46.1% of Utah Hispanic adults with an annual income of less than $20,000 reported no leisure time physical activity compared to 11.7% with an annual income of $50,000 or greater. The percentage of Utah Hispanic adults reporting no leisure time physical activity decreased as education increased with 40.1% of persons with less than a high school education reporting no leisure time physical activity compared to 14.3% of college graduates.

Healthy People 2010 Objective: Reduce the proportion of adults who engage in no leisure time physical activity to 20%.
U.S. Baseline (All Adults): 40%, HP 2010, 1997
U.S. Baseline (Hispanic Adults): 54%, HP 2010, 1997
Utah Objective: Reduce the proportion of adults who engage in no leisure time physical activity to 15%.
Utah Baseline (All Adults): 17.4%, BRFSS, 1999

Hispanic adults were more likely to report no leisure time physical activity than non-Hispanic Utah adults at all ages.[3] This difference was greatest among persons aged 18-49. This age group may be more likely to be physically active at work, which was not included in this measure.

VIDA SEDENTARIA

Survey Question(s): During the past month, did you participate in any physical activities or exercises such as running, calisthenics, golf, gardening, or walking for exercise?

Percentage of Persons Who Reported No Leisure Time Physical Activity
by Selected Demographic Characteristics, Utah Hispanic Health Survey 2001

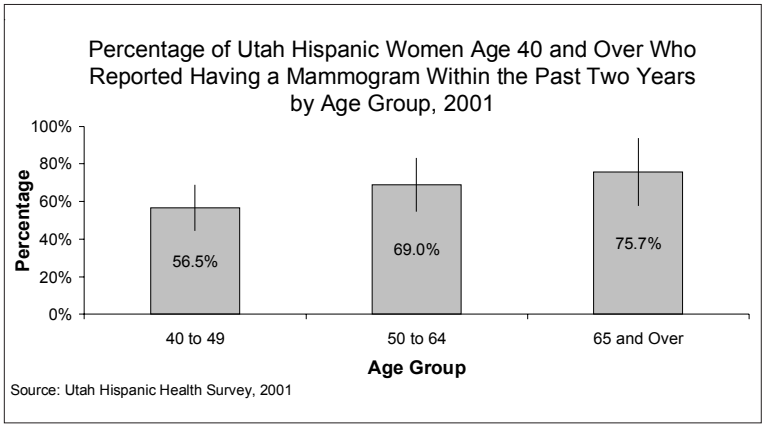
	Utah Adult Hispanic Population		Survey Estimates of Respondents Who Reported No Leisure Time Physical Activity				
Demographic Subgroup	Distribution	Number of Persons[1]	Percentage of Persons Who Reported Reported No Leisure Time Physical Activity[2]	95% Confidence Intervals Lower	95% Confidence Intervals Upper	Number of Persons[1, 3]	Distribution of Persons Who Reported No Leisure Time Physical Activity by Demographic Subgroup
Physical Activity Pattern							
Inactive	29.9%	36,800					
Irregular Activity Pattern	23.0%	28,300					
Regularly Active*	47.2%	58,200					
Total, All Hispanic Adults	100.0%	123,400					
Sex							
Males	54.6%	67,400	24.8%	19.7%	29.8%	16,700	45.3%
Females	45.4%	56,000	36.0%	30.3%	41.7%	20,200	54.7%
Total, All Hispanic Adults	100.0%	123,400	29.9%	26.0%	33.7%	36,800	100.0%
Age Group							
18 to 34	58.5%	72,200	30.2%	24.7%	35.7%	21,800	59.1%
35 to 49	26.9%	33,200	32.0%	25.5%	38.6%	10,600	28.7%
50 to 64	10.7%	13,300	20.8%	12.0%	29.5%	2,800	7.6%
65 and Over	3.9%	4,800	34.9%	21.8%	48.0%	1,700	4.6%
Total, All Hispanic Adults	100.0%	123,400	29.9%	26.0%	33.7%	36,800	100.0%
Income							
Less Than $20,000	19.7%	24,400	46.1%	36.3%	55.8%	11,200	30.5%
$20,000 to $49,999	64.4%	79,500	29.1%	23.8%	34.4%	23,200	63.2%
$50,000 and Over	15.8%	19,500	11.7%	4.7%	18.7%	2,300	6.3%
Total, All Hispanic Adults	100.0%	123,400	29.9%	26.0%	33.7%	36,800	100.0%
Education							
Less Than High School	40.3%	49,800	40.1%	33.4%	46.9%	20,000	54.3%
H.S. Grad or G.E.D.	31.6%	39,000	30.6%	23.7%	37.5%	11,900	32.3%
Some Post High School	17.5%	21,700	13.8%	7.7%	19.9%	3,000	8.2%
College Graduate	10.5%	13,000	14.3%	7.7%	21.0%	1,900	5.2%
Total, All Hispanic Adults	100.0%	123,400	29.9%	26.0%	33.7%	36,800	100.0%
Area[4]							
Urban (100+ persons/mi^2)	85.0%	104,900	29.5%	25.1%	33.8%	30,900	84.0%
Rural (6 to 99 persons/mi^2)	9.7%	12,000	36.1%	27.7%	44.5%	4,300	11.7%
Frontier (<6 persons/mi^2)	5.2%	6,500	24.9%	14.8%	35.0%	1,600	4.3%
Total, All Hispanic Adults	100.0%	123,400	29.9%	26.0%	33.7%	36,800	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 of missing values on the grouping variables.
4 Urban counties include Davis, Salt Lake, Utah, and Weber; Rural counties include Box Elder, Cache, Carbon, Morgan, Sanpete, Sevier, Summit, Wasatch, and Washington; All other counties were classified as frontier.
* Regular Physical Activity is defined as 5+ times/week, 30+ minutes/session, regardless of intensity
The definition of this measure has changed from previous BRFSS surveys.

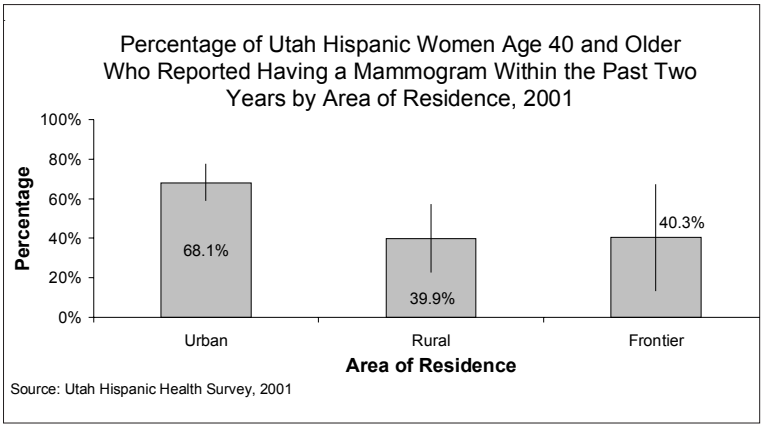
Mammography

An estimated 203,500 new cases of breast cancer are expected to be detected in the U.S. during 2002, including 1,100 new cases among Utahns.[41] Breast cancer is the most common cancer among U.S. women and a leading cause of female cancer death in both Utah and the U.S. Breast cancer deaths comprised about 16% of cancer deaths among U.S. women and about 17% of cancer deaths among Utah women in 1999.[42, 25]

Nationally, breast cancer incidence is lower in Hispanic women than in the general population. From 1992 to 1998, the incidence rate for breast cancer among Hispanic women was 68.5 per 100,000 women compared to 111.2 per 100,000 women in the general population. Breast cancer mortality was lower for Hispanic women as well, with a death rate of 14.8 per 100,000 women compared to 24.7 per 100,000 women in the general population.[43]



Deaths from breast cancer can be substantially reduced if the tumor is discovered early. Mammography is currently the best method for early detection of malignancies. Clinical trials have demonstrated that routine screening with mammography can reduce breast cancer deaths.[44] Nationally, Hispanic women were less likely than non-Hispanic women to report having had a mammogram in the past year.[45]



Overall, 64.0% of Utah Hispanic women age 40 and over reported having had a mammogram in the past two years, compared with 73.1% of non-Hispanic women.[9]

Healthy People 2010 Objective: Increase the proportion of women aged 40+ who have recieved a mammogram within the preceding 2 years to 70%.
U.S. Baseline (Women 40+): 67%, HP 2010, 1998
U.S. Baseline (Hispanic Women 40+): 61%, HP 2010, 1998
Utah Objective: Same as HP 2010 Objective
Utah Baseline (Women 40+): 67.1%, BRFSS, 1999

The National Cancer Institute recommends women aged 40 and over get a mammogram every 1 to 2 years. Utah Hispanic women age 40 to 49 were less likely than those age 50 and older to report having a mammogram in the past two years.

Utah Hispanic women living in urban areas of the state were substantially more likely to report having a mammogram in the past two years than Hispanic women living in rural or frontier areas.

MAMOGRAFÍA

Survey Question(s): 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?

Percentage of Women Age 40 and Over Who Reported Having a Mammogram Within the Past Two Years
by Selected Demographic Characteristics, Utah Hispanic Health Survey 2001

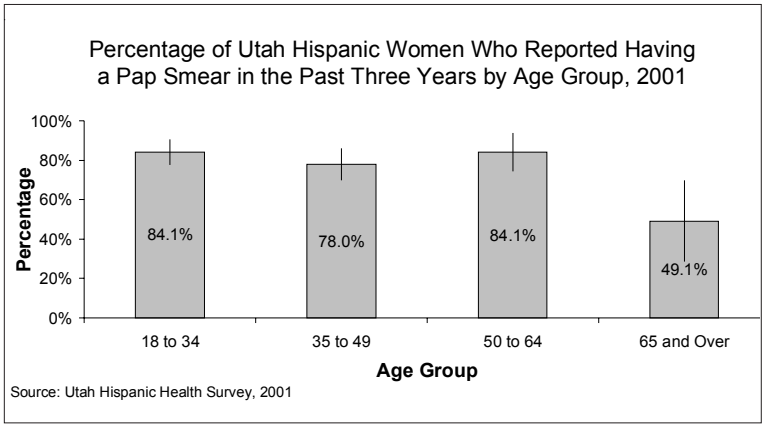
	Utah Adult Hispanic Population		Survey Estimates of Women Aged 40+ Who Reported Having a Screening Mammogram Within the Past 2 Years				
Demographic Subgroup	Distribution	Number of Women Aged 40+[1]	Percentage of Women Aged 40+ Who Reported Having a Mammogram Within the Past 2 Years[2]	95% Confidence Intervals Lower	95% Confidence Intervals Upper	Number of Women Aged 40+[1, 3]	Distribution of Women Aged 40+ Who Reported Having a Mammogram Within the Past 2 Years by Demographic Subgroup
Had Mammogram							
Withing the Past Year	45.4%	8,500					
1 to 2 Years Ago	18.5%	3,500					
2 to 3 Years Ago	4.6%	900					
3 to 5 Years Ago	10.2%	1,900					
5+ Years Ago	6.1%	1,100					
Never	15.1%	2,800					
Total, All Hispanic Women Age 40+	100.0%	18,700					
Age Group							
40 to 49	47.0%	8,800	56.5%	44.3%	68.8%	5,000	41.7%
50 to 64	39.8%	7,400	69.0%	54.7%	83.3%	5,100	42.5%
65 and Over	13.3%	2,500	75.7%	57.6%	93.8%	1,900	15.8%
Total, All Hispanic Women Age 40+	100.0%	18,700	64.0%	55.5%	72.4%	12,000	100.0%
Income							
Less Than $20,000	25.2%	4,700	68.1%	51.6%	84.5%	3,200	26.7%
$20,000 to $49,999	64.9%	12,100	64.6%	52.5%	76.6%	7,800	65.0%
$50,000 and Over	10.0%	1,900	77.9%	54.9%	100.0%	1,500	12.5%
Total, All Hispanic Women Age 40+	100.0%	18,700	64.0%	55.5%	72.4%	12,000	100.0%
Education							
Less Than High School	48.4%	9,100	62.0%	49.2%	74.8%	5,600	47.5%
H.S. Grad or G.E.D.	29.5%	5,500	62.3%	47.3%	77.4%	3,400	28.8%
Some Post High School	14.0%	2,600	82.7%	66.0%	99.4%	2,200	18.6%
College Graduate	8.1%	1,500	43.1%	17.8%	68.5%	600	5.1%
Total, All Hispanic Women Age 40+	100.0%	18,700	64.0%	55.5%	72.4%	12,000	100.0%
Area[4]							
Urban (100+ persons/mi^2)	84.3%	15,800	68.1%	58.8%	77.5%	10,800	90.0%
Rural (6 to 99 persons/mi^2)	9.9%	1,900	39.9%	22.7%	57.2%	800	6.7%
Frontier (<6 persons/mi^2)	5.8%	1,100	40.3%	13.3%	67.4%	400	3.3%
Total, All Hispanic Women Age 40+	100.0%	18,700	64.0%	55.5%	72.4%	12,000	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 of missing values on the grouping variables.
4 Urban counties include Davis, Salt Lake, Utah, and Weber; Rural counties include Box Elder, Cache, Carbon, Morgan, Sanpete, Sevier, Summit, Wasatch, and Washington; All other counties were classified as frontier.

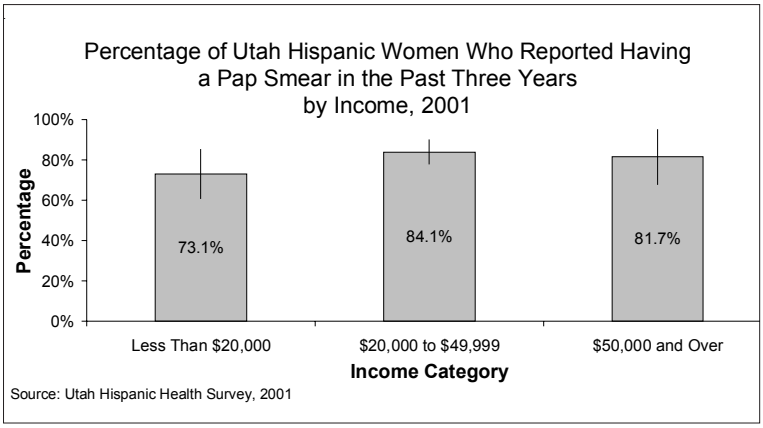
Pap Smear

An estimated 13,000 new cases of invasive cervical cancer are expected to be detected in the U.S. during 2002, including 40 new cases among Utahns.[41] Deaths from cervical cancer comprised about 1.6% of cancer deaths among U.S. women and 1.5 % among Utah women in 1999.[42, 25]

Nationally, cervical cancer incidence is higher for Hispanic women than for other ethnic groups. From 1992-1998, the incidence rate for cervical cancer among Hispanic women was 14.4 per 100,000 women compared to 8.8 per 100,000 women in the general population.[43] Cervical cancer mortality was also higher for Hispanic women, with a death rate of 3.3 per 100,000 women compared to 2.7 per 100,000 women in the general population.[43]



Deaths from cervical cancer can be substantially reduced when precancerous lesions are detected with the Pap smear. The incidence of cervical cancer has declined significantly in the U.S. over the last 40 years. This decrease was due in part to early detection programs and widespread use of the Pap smear.[44] Nationally, Hispanic women were less likely than non-Hispanic women to report having had a Pap smear in the past three years.[45]



Overall, 81.2% of Utah Hispanic women reported having had a Pap smear in the past three years. This is similar to 79.3% among non-Hispanic women.[9]

Healthy People 2010 Objective: Increase the proportion of women aged 18+ who received a Pap test within the preceding 3 years to 90%.
U.S. Baseline (Women 18+): 79%, HP 2010, 1998
U.S. Baseline (Hispanic Women 18+): 74%, HP 2010, 1998
Utah Objective: Same as HP 2010 Objective
Utah Baseline (Women 18+): 80.7%, BRFSS, 1999

Women age 60 and older are less likely to get regular Pap smears. Because of this, they are more likely to be diagnosed with cervical cancer at a later stage. In Utah, Hispanic women aged 65 and older were significantly less likely than younger women to report having had a Pap smear within the past three years.

Utah Hispanic women with annual household incomes less than $20,000 were less likely to report having had a Pap smear in the past three years compared to Hispanic women in higher income groups.

Prueba Pap: Prueba del Papanicolau

Survey Question(s): 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?

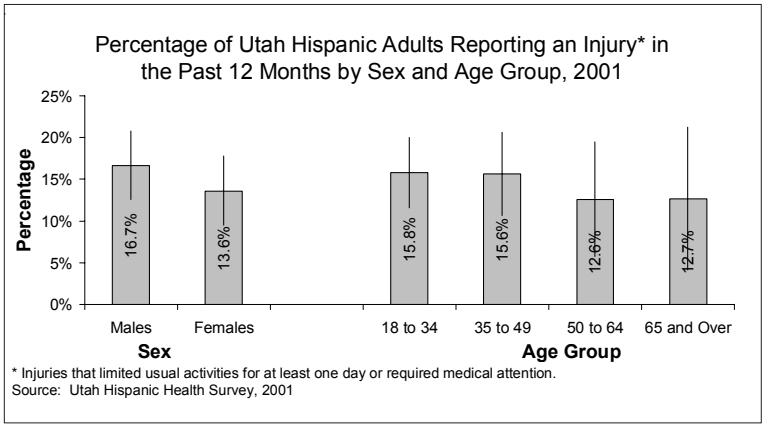
Percentage of Women Who Reported Having a Pap Smear Within the Past Three Years
by Selected Demographic Characteristics, Utah Hispanic Health Survey 2001

	Utah Adult Hispanic Population		Survey Estimates of Women Who Reported Having a Pap Smear Within the Past 3 Years				
Demographic Subgroup	Distribution	Number of Women[1]	Percentage of Women Who Reported Having a Pap Smear Within the Past 3 Years[2]	95% Confidence Intervals Lower	95% Confidence Intervals Upper	Number of Women[1, 3]	Distribution of Women Who Reported Having a Pap Smear Within the Past 3 Years by Demographic Subgroup
Had Pap Smear							
Withing the Past Year	66.0%	37,000					
1 to 2 Years Ago	10.8%	6,100					
2 to 3 Years Ago	4.3%	2,400					
3 to 5 Years Ago	4.7%	2,600					
5+ Years Ago	4.1%	2,300					
Never	10.1%	5,600					
Total, All Hispanic Women Age 18+	100.0%	56,000					
Age Group							
18 to 34	57.9%	32,400	84.1%	77.7%	90.6%	27,300	61.8%
35 to 49	24.3%	13,600	78.0%	69.9%	86.1%	10,600	58.6%
50 to 64	13.3%	7,500	84.1%	74.4%	93.9%	6,300	34.8%
65 and Over	4.4%	2,500	49.1%	28.5%	69.8%	1,200	6.6%
Total, All Hispanic Women Age 18+	42.1%	56,000	81.2%	76.6%	85.8%	45,400	100.0%
Income							
Less Than $20,000	21.9%	12,200	73.1%	60.7%	85.5%	8,900	19.6%
$20,000 to $49,999	67.2%	37,600	84.1%	77.9%	90.2%	31,600	69.6%
$50,000 and Over	10.9%	6,100	81.7%	67.9%	95.4%	5,000	11.0%
Total, All Hispanic Women Age 18+	100.0%	56,000	81.2%	76.2%	86.6%	45,400	100.0%
Education							
Less Than High School	45.7%	25,600	87.3%	81.6%	93.1%	22,400	49.3%
H.S. Grad or G.E.D.	30.7%	17,200	72.9%	63.6%	82.1%	12,500	27.5%
Some Post High School	14.7%	8,200	78.7%	65.5%	91.9%	6,500	14.3%
College Graduate	8.9%	5,000	80.5%	65.8%	95.2%	4,000	8.8%
Total, All Hispanic Women Age 18+	100.0%	56,000	81.2%	76.4%	85.6%	45,400	100.0%
Area[4]							
Urban (100+ persons/mi^2)	85.5%	47,900	81.8%	76.7%	87.0%	39,200	86.2%
Rural (6 to 99 persons/mi^2)	9.6%	5,400	75.6%	64.4%	86.8%	4,100	9.0%
Frontier (<6 persons/mi^2)	4.9%	2,700	80.5%	67.9%	93.1%	2,200	4.8%
Total, All Hispanic Women Age 18+	100.0%	56,000	81.2%	76.6%	85.8%	45,400	100.0%

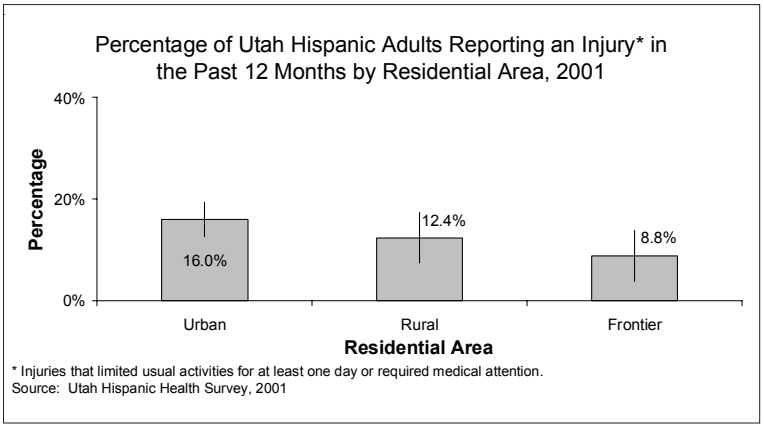
1 Rounded to the nearest 100 persons.
2 Plus or minus 95% confidence interval
3 Figures in these columns may not sum to the total because of missing values on the grouping variables.
4 Urban counties include Davis, Salt Lake, Utah, and Weber; Rural counties include Box Elder, Cache, Carbon, Morgan, Sanpete, Sevier, Summit, Wasatch, and Washington; All other counties were classified as frontier.

INJURY

Injuries are the 4th leading cause of death in Utah and the leading cause of death for Utahns under the age of 45.[46] Injuries also result in substantial morbidity, disability and health care expenditures. Many interventions have been shown effective at preventing injuries, including seat belts, bicycle helmets, appropriate firearm use and storage, smoke detectors, and safe storage of potential poisons. Much of what we know about the epidemiology of injuries comes from mortality data; data such as these on self-reported injuries are important for understanding and preventing non-fatal injuries.



In this survey, 15% of Hispanic adults (about 19,000 Hispanic persons) in Utah reported experiencing at least one injury in the past 12 months that was serious enough to limit usual activities for a day or more or require medical attention. Comparable data are not available for non-Hispanic adults in Utah.



Self-reported injury was somewhat more common for men than women and for adults under age 50 than those age 50 or older. Somewhat surprisingly, self-reported injury was substantially more common at higher income levels. Injury was also reported more often by those living in urban areas.

Falls were the most common cause of injury reported, followed by motor vehicle-related and sports injuries. These injuries among Hispanic adults most commonly occurred at work (39%), in the home (21%), on a street/highway (15%), a place for sport or recreation (9%), a public building (5%), or school (4%).

Healthy People 2010 Objective: (Developmental) Reduce nonfatal unintentional injuries.
U.S. Baseline (All Persons): None listed.
Utah Objective: Reduce unintentional injury hospitalizations to 400 per 100,000
Utah Baseline (All Persons): 586 per 100,000, 1999

Other data suggest that Hispanic persons in Utah are at substantially higher risk of death from homicide and motor vehicle crash than are non-Hispanic persons, but have similar risk of other unintentional injuries or suicide.[47] The 1996 Utah Health Status Survey found that Hispanic persons (all ages) reported somewhat lower rates of injury in the past 12 months than did non-Hispanic persons.[48]

LESIÓN

Survey Question(s): Have you had an injury during the last 12 months that limited your usual activities for a day or longer or caused them to require medical attention?

Percentage of Persons Who Reported Having an Injury in the Past 12 Months That Limited Their Activities or Required Medical Attention
by Selected Demographic Characteristics, Utah Hispanic Health Survey 2001

	Utah Adult Hispanic Population		Survey Estimates of Respondents Who Reported Having an Injury in the Past 12 Months				
Demographic Subgroup	Distribution	Number of Persons[1]	Percentage of Persons Who Reported Having an Injury in the Past 12 Months[2]	95% Confidence Intervals Lower	95% Confidence Intervals Upper	Number of Persons[1, 3]	Distribution of Persons Who Reported Having an Injury in the Past 12 Months by Demographic Subgroup
Injured in Past 12 Months							
Yes	15.3%	18,800					
No	84.7%	104,600					
Total, All Hispanic Adults	84.7%	123,400					
Sex							
Males	54.6%	67,400	16.7%	12.5%	20.8%	11,200	59.6%
Females	45.4%	56,000	13.6%	9.5%	17.8%	7,600	40.4%
Total, All Hispanic Adults	100.0%	123,400	15.3%	12.4%	18.2%	18,800	100.0%
Age Group							
18 to 34	58.5%	72,200	15.8%	11.5%	20.0%	11,400	60.3%
35 to 49	26.9%	33,200	15.6%	10.6%	20.6%	5,200	27.5%
50 to 64	10.7%	13,300	12.6%	5.7%	19.5%	1,700	9.0%
65 and Over	3.9%	4,800	12.7%	4.1%	21.2%	600	3.2%
Total, All Hispanic Adults	100.0%	123,400	15.3%	12.4%	18.2%	18,800	100.0%
Income							
Less Than $20,000	19.7%	24,400	9.4%	5.0%	13.8%	2,300	11.6%
$20,000 to $49,999	64.4%	79,500	16.5%	12.2%	20.9%	13,100	66.2%
$50,000 and Over	15.8%	19,500	22.8%	14.8%	30.8%	4,400	22.2%
Total, All Hispanic Adults	100.0%	123,400	15.3%	12.4%	18.2%	18,800	100.0%
Education							
Less Than High School	40.3%	49,800	15.7%	10.5%	21.0%	7,800	41.5%
H.S. Grad or G.E.D.	31.6%	39,000	15.2%	10.2%	20.2%	5,900	31.4%
Some Post High School	17.5%	21,700	14.9%	8.7%	21.0%	3,200	17.0%
College Graduate	10.5%	13,000	15.0%	8.5%	21.5%	1,900	10.1%
Total, All Hispanic Adults	100.0%	123,400	15.3%	12.4%	18.2%	18,800	100.0%
Area[4]							
Urban (100+ persons/mi^2)	85.0%	104,900	16.0%	12.6%	19.4%	16,800	88.9%
Rural (6 to 99 persons/mi^2)	9.7%	12,000	12.4%	7.4%	17.4%	1,500	7.9%
Frontier (<6 persons/mi^2)	5.2%	6,500	8.8%	3.8%	13.9%	600	3.2%
Total, All Hispanic Adults	100.0%	123,400	15.3%	12.4%	18.2%	18,800	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 of missing values on the grouping variables.
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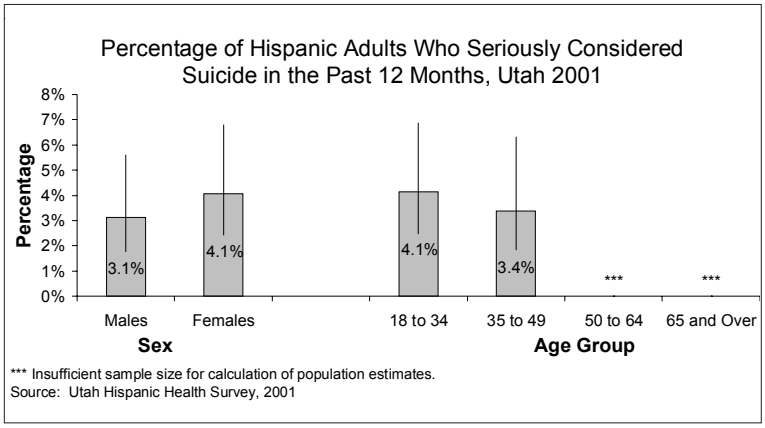
Suicide Contemplation

Suicide is the 9th leading cause of death in Utah and the 2nd leading cause of death among younger adults (age 18-44 years).[25] Suicide death rates in Utah and other Western states have been among the highest in the U.S.[49]

Suicide rates in Utah have been similar for Hispanic and non-Hispanic persons.[47] Prior suicide attempt is an important risk factor for suicide and even non-fatal attempts carry substantial morbidity. Suicide death rates are substantially more common for males, but attempts are more common for females.[49]



In this survey, 3.6% of Hispanic adults (4,400 persons) reported seriously considering taking their own life in the past 12 months. Suicide contemplation was similarly common for males and females. Most of those reporting suicide contemplation were adults age 18 to 50 years. Rates appeared to differ by income, education and urban/rural status but due to limited precision these differences should be interpreted with caution. Comparable data are not available for Utah's general population, but an Oregon study found a similar rate (2.8%) among adults in Oregon.[50] Oregon's suicide death rate is similar to that in Utah.

One challenge for preventing suicide is the difficulty identifying those who are at risk. While most people who think about or attempt suicide will not die of suicide, an attempt or contemplation of suicide indicates substantial mental or emotional distress that may benefit from mental health treatment or other interventions. Additional studies are needed to better understand the predictive importance of suicide contemplation.

Healthy People 2010 Objective: Reduce the suicide rate to 5.0 suicides per 100,000 population.
U.S. Baseline (All Persons): 11.3 suicides per 100,000, 1998
Utah Objective: Reduce adolescent (age 13-21) suicide deaths to 12 per 100,000
Utah Baseline (All Adolescents): 15.6 deaths per 100,000, 1998

Ideación Suicida: Pensamiento de Suicidio

Survey Question(s): During the past 12 months, have you seriously considered taking your own life, even if you would not really do it?

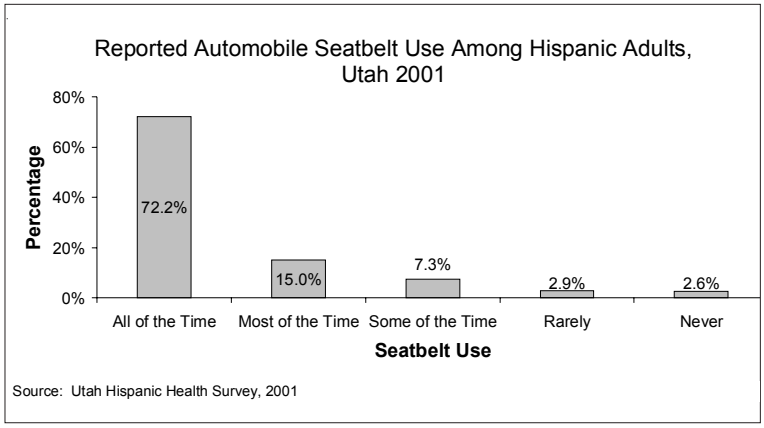
Percentage of Persons Who Reported That They Seriously Considered Taking Their Own Life
by Selected Demographic Characteristics, Utah Hispanic Health Survey 2001

	Utah Adult Hispanic Population		Survey Estimates of Respondents Who Reported That They Seriously Considered Taking Their Own Life				
Demographic Subgroup	Distribution	Number of Persons[1]	Percentage of Persons Who Reported That They Seriously Considered Taking Their Own Life[2]	95% Confidence Intervals Lower	95% Confidence Intervals Upper	Number of Persons[1, 3]	Distribution of Persons Who Reported That They Seriously Considered Taking Their Own Life by Demographic Subgroup
Considered Taking Their Life							
Yes	3.6%	4,400					
No	96.4%	119,000					
Total, All Hispanic Adults	100.0%	123,400					
Sex							
Males	54.6%	67,400	3.1%	1.8%	5.6%	2,100	47.7%
Females	45.4%	56,000	4.1%	2.4%	6.8%	2,300	52.3%
Total, All Hispanic Adults	100.0%	123,400	3.6%	2.4%	5.3%	4,400	100.0%
Age Group							
18 to 34	58.5%	72,200	4.1%	2.5%	6.9%	3,000	68.2%
35 to 49	26.9%	33,200	3.4%	1.8%	6.3%	1,100	25.0%
50 to 64	10.7%	13,300	***	***	***	***	***
65 and Over	3.9%	4,800	***	***	***	***	***
Total, All Hispanic Adults	100.0%	123,400	3.6%	2.4%	5.3%	4,400	100.0%
Income							
Less Than $20,000	19.7%	24,400	4.2%	1.7%	10.2%	1,000	22.7%
$20,000 to $49,999	64.4%	79,500	2.8%	1.6%	5.0%	2,200	50.0%
$50,000 and Over	15.8%	19,500	5.9%	1.2%	10.6%	1,200	27.3%
Total, All Hispanic Adults	100.0%	123,400	3.6%	2.4%	5.3%	4,400	100.0%
Education							
Less Than High School	40.3%	49,800	3.8%	2.0%	7.4%	1,900	43.2%
H.S. Grad or G.E.D.	31.6%	39,000	2.5%	1.2%	5.2%	1,000	22.7%
Some Post High School	17.5%	21,700	5.9%	1.8%	10.0%	1,300	29.5%
College Graduate	10.5%	13,000	***	***	***	***	***
Total, All Hispanic Adults	100.0%	123,400	3.6%	2.4%	5.3%	4,400	100.0%
Area[4]							
Urban (100+ persons/mi^2)	85.0%	104,900	3.4%	2.2%	5.2%	3,500	79.5%
Rural (6 to 99 persons/mi^2)	9.7%	12,000	6.7%	1.3%	12.2%	800	18.2%
Frontier (<6 persons/mi^2)	5.2%	6,500	***	***	***	***	***
Total, All Hispanic Adults	100.0%	123,400	3.6%	2.4%	5.3%	4,400	100.0%

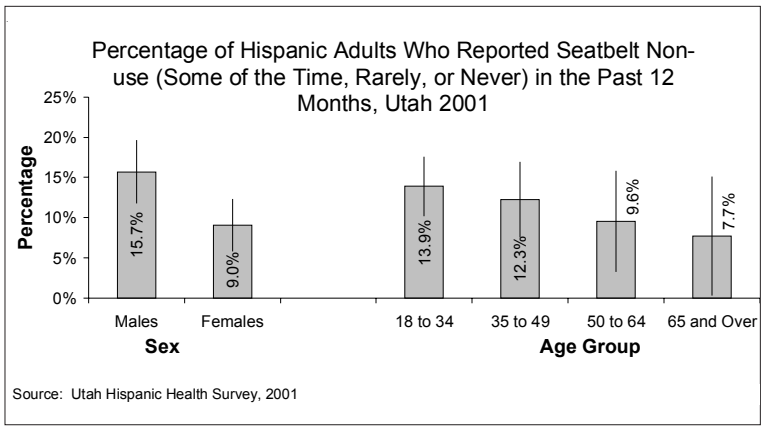
1 Rounded to the nearest 100 persons.
2 Plus or minus 95% confidence interval
3 Figures in these columns may not sum to the total because of missing values on the grouping variables.
4 Urban counties include Davis, Salt Lake, Utah, and Weber; Rural counties include Box Elder, Cache, Carbon, Morgan, Sanpete, Sevier, Summit, Wasatch, and Washington; All other counties were classified as frontier.
*** Insufficient sample size for calculation of estimates.

Seatbelt Use

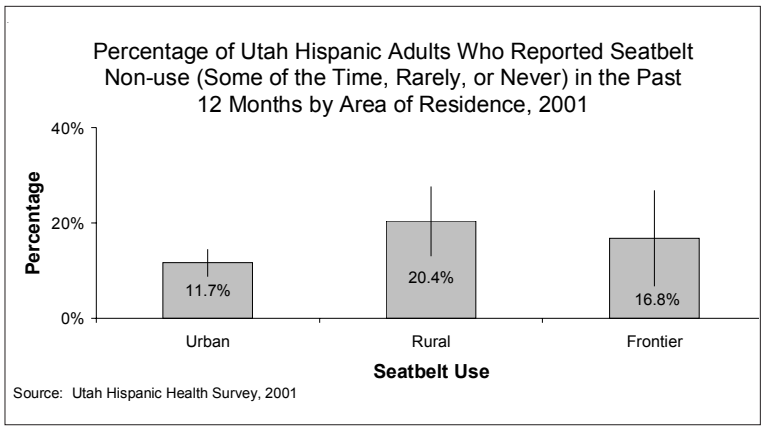
Motor vehicle crash is the most common cause of unintentional injury death, accounting for about 350 Utah deaths each year.[25] Motor vehicle crash death rates in Utah have been higher among Hispanic persons than for non-Hispanic persons.[47] Improving motor vehicle safety through automobile improvements that included seat belts was cited as a 20th Century public health achievement.[51] Yet the full potential of seat belts to reduce deaths and morbidity from motor vehicle crash has not been achieved.



In this survey, 72% of Hispanic adults in Utah reported using a seat belt all the time. However, 12.8% of Hispanic adults reported wearing a seat belt sometimes, rarely or never (seat belt non-use). Seat belt non-use was most common for males and younger people. Seat belt non-use was less common for those who had completed a college education.



Motor vehicle crash death rates are higher in Utah's more rural areas.[25] That finding is partly due to the tendency to drive more miles at higher speeds in those areas, but these data found that seat belt non-use was also more common in rural and frontier areas of the state.



Comparable data on seat-belt use were not available for Utah's non-Hispanic population (these data were last collected in 1997, when results for the overall population were similar to those found here for the Hispanic population). A previous study based on data from 1992 to 1997 found that seat belt use among Hispanic adults was similar to that among other Utahns.[47]

Healthy People 2010 Objective: Increase use of safety belts to 92%.
U.S. Baseline (All Persons): 69%, 1998
Utah Objective: 85%
Utah Baseline (All Persons): 67% in 1999, HSO Survey

Individuals report higher rates of seat belt use than have been detected in observational studies.[52] Therefore, the actual rate of seat belt non-use is probably higher than reported in these data.

Uso del Cinturón de Seguridad

Survey Question(s): When you are driving, would you say that you use a seatbelt all of the time, most of the time, some of the time, rarely, never?

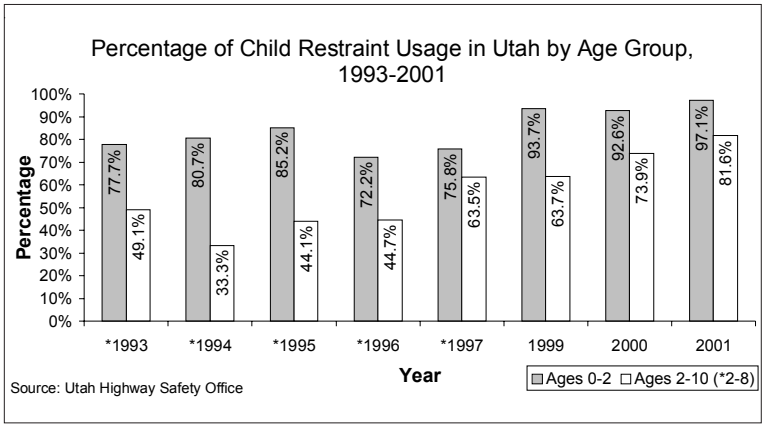
Percentage of Persons Who Reported Wearing a Seatbelt Sometimes, Rarely, or Never
by Selected Demographic Characteristics, Utah Hispanic Health Survey 2001

	Utah Adult Hispanic Population		Survey Estimates of Respondents Who Reported Wearing a Seatbelt Sometimes, Rarely, or Never				
Demographic Subgroup	Distribution	Number of Persons[1]	Percentage of Persons Who Reported Wearing a Seatbelt Sometimes, Rarely or Never[2]	95% Confidence Intervals Lower	95% Confidence Intervals Upper	Number of Persons[1, 3]	Distribution of Persons Who Reported Wearing a Seatbelt Sometimes, Rarely, or Never by Demographic Subgroup
How Often Wear Seatbelt							
All of the Time	72.2%	89,100					
Most of the Time	15.0%	18,500					
Some of the Time	7.3%	9,000					
Rarely	2.9%	3,600					
Never	2.6%	3,200					
Total, All Hispanic Adults	100.0%	123,400					
Sex							
Males	54.6%	67,400	15.7%	11.8%	19.6%	10,600	67.5%
Females	45.4%	56,000	9.0%	5.8%	12.3%	5,100	32.5%
Total, All Hispanic Adults	100.0%	123,400	12.8%	10.1%	15.4%	15,700	100.0%
Age Group							
18 to 34	58.5%	72,200	13.9%	10.2%	17.6%	10,000	63.3%
35 to 49	26.9%	33,200	12.3%	7.5%	17.0%	4,100	25.9%
50 to 64	10.7%	13,300	9.6%	3.3%	15.8%	1,300	8.2%
65 and Over	3.9%	4,800	7.7%	0.3%	15.1%	400	2.5%
Total, All Hispanic Adults	100.0%	123,400	12.8%	10.1%	15.4%	15,700	100.0%
Income							
Less Than $20,000	19.7%	24,400	15.8%	8.4%	23.2%	3,900	21.8%
$20,000 to $49,999	64.4%	79,500	13.8%	10.1%	17.4%	11,000	61.5%
$50,000 and Over	15.8%	19,500	15.3%	8.1%	22.4%	3,000	16.8%
Total, All Hispanic Adults	100.0%	123,400	14.4%	11.4%	17.4%	17,800	100.0%
Education							
Less Than High School	40.3%	49,800	10.3%	6.4%	14.1%	5,100	32.5%
H.S. Grad or G.E.D.	31.6%	39,000	17.0%	11.5%	22.5%	6,600	42.0%
Some Post High School	17.5%	21,700	14.2%	8.1%	20.3%	3,100	19.7%
College Graduate	10.5%	13,000	7.3%	2.5%	12.1%	900	5.7%
Total, All Hispanic Adults	100.0%	123,400	12.8%	10.2%	15.4%	15,800	100.0%
Area[4]							
Urban (100+ persons/mi^2)	85.0%	104,900	11.7%	8.8%	14.6%	12,300	77.8%
Rural (6 to 99 persons/mi^2)	9.7%	12,000	20.4%	13.1%	27.7%	2,400	15.2%
Frontier (<6 persons/mi^2)	5.2%	6,500	16.8%	6.7%	26.8%	1,100	7.0%
Total, All Hispanic Adults	100.0%	123,400	12.8%	10.1%	15.4%	15,700	100.0%

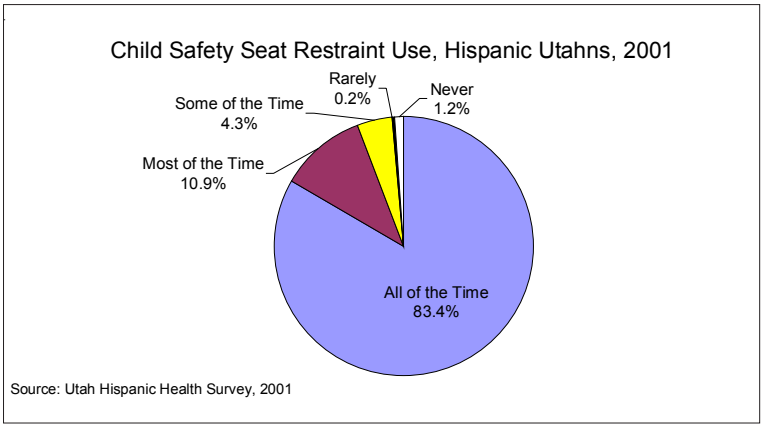
1 Rounded to the nearest 100 persons.
2 Plus or minus 95% confidence interval
3 Figures in these columns may not sum to the total because of missing values on the grouping variables.
4 Urban counties include Davis, Salt Lake, Utah, and Weber; Rural counties include Box Elder, Cache, Carbon, Morgan, Sanpete, Sevier, Summit, Wasatch, and Washington; All other counties were classified as frontier.

Child Safety Seat

Motor vehicle crash injury is the leading cause of death among children, teens, and young adults. Among Utah children ages 1 to 19 years, motor vehicle traffic crashes resulted in 280 deaths, 1,578 hospitalizations, and more than 23,000 emergency room visits during 1996 to 1998. Motor vehicle traffic crashes were the leading cause of injury death in Utah among those aged 0 to 24 in 1996 to 1998.[46] Nationally, in 1999, nearly half of children under five who were killed in motor vehicle crashes were riding unrestrained. Child safety seats would have saved many of them. Child safety seats reduce the risk of death by about 70% for infants and by about 55% for toddlers ages 1 to 4.[53] In addition, every child safety seat saves $85 in direct medical costs and $1,275 in other costs.[54]



The Utah Highway Safety Office has conducted child restraint observational studies since 1984. In 1991, methodology changed to include children up to age eight and in 1997 methodology changed to include children up to age ten. Unfortunately, child restraint usage was not studied in 1998 due to time constraints.



Car restraint usage for children under age 15 was reported by 83.4% Hispanic Utahns to be in use all of the time, 10.9% most of the time, 4.4% some of the time, and less than 1% reported using a car restraint for children under age 15 rarely or never. Data from the Hispanic population was similar to data of the general population in this category.[3]

Healthy People 2010 Objective: Increase use of child restraints to 100%.
U.S. Baseline (All Children ≤4): 92%, 1998
Utah Objective: 90%
Utah Baseline (All Children ≤4): 79% in 1999, HSO Survey

Of Utah Hispanic Health Survey respondents reporting that they only sometimes, rarely, or never use a car restraint for children under age 15, 60.0% were males, 64.8% were aged 18 to 34, 78.9% resided in urban areas, 83.1% had a high school eduction or less, and the large majority (84.7%) were in the $20,000 to $49,000 income category.

Utah law holds the driver responsible for all unrestrained occupants in the vehicle under age 16. In addition, the driver may be stopped and cited if anyone under age 19 is not restrained. The greatest risk factor for adolescents being killed or injured from a motor vehicle crash is riding unrestrained.

Asiento de Seguridad para el Niño

Survey Question(s): When you are driving and children age 15 and under are riding with you, would you say that they are in a car restraint all of the time, most of the time, some of the time, rarely, never?

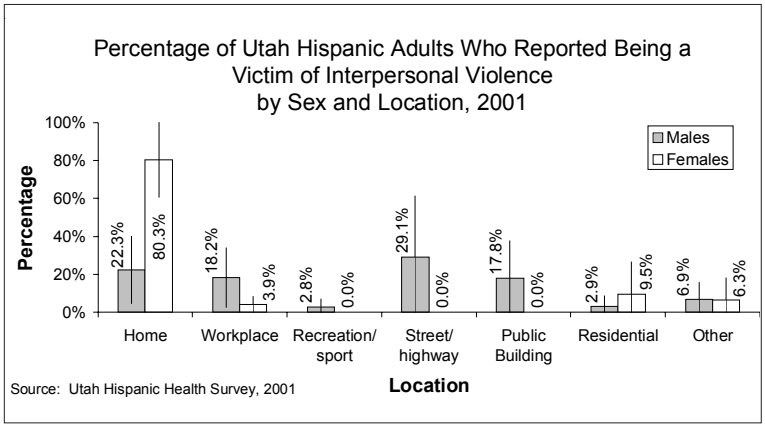
Percentage of Persons Who Sometimes, Rarely or Never Use a Car Restraint For Children Age 15 and Under Riding in the Car
by Selected Demographic Characteristics, Utah Hispanic Health Survey 2001

	Utah Adult Hispanic Population		Survey Estimates of Respondents Who Sometimes, Rarely or Never Use a Car Restraint For Children Age 15 and Under Riding in the Car				
Demographic Subgroup	Distribution	Number of Persons[1]	Percentage of Persons Who Sometimes, Rarely or Never Use a Car Restraint For Children Age 15 and Under Riding in the Car[2]	95% Confidence Intervals Lower	95% Confidence Intervals Upper	Number of Persons[1, 3]	Distribution of Persons Who Sometimes, Rarely or Never Use a Car Restraint For Children Age 15 and Under Riding in the Car by Demographic Subgroup
How Often Use Car Restraint							
All of the Time	83.4%	102,900					
Most of the Time	10.9%	13,400					
Some of the Time	4.4%	5,400					
Rarely	0.2%	200					
Never	1.2%	1,500					
Total, All Hispanic Adults	100.0%	123,400					
Sex							
Males	54.6%	67,400	6.3%	2.6%	10.0%	4,200	60.0%
Females	45.4%	56,000	5.0%	2.2%	7.9%	2,800	40.0%
Total, All Hispanic Adults	100.0%	123,400	5.7%	3.3%	8.1%	7,100	100.0%
Age Group							
18 to 34	58.5%	72,200	6.4%	2.8%	9.9%	4,600	64.8%
35 to 49	26.9%	33,200	5.8%	2.2%	9.4%	1,900	26.8%
50 to 64	10.7%	13,300	***	***	***	***	***
65 and Over	3.9%	4,800	***	***	***	***	***
Total, All Hispanic Adults	100.0%	123,400	5.7%	3.3%	8.1%	7,100	100.0%
Income							
Less Than $20,000	19.7%	24,400	4.5%	2.1%	9.8%	1,100	15.3%
$20,000 to $49,999	64.4%	79,500	7.7%	3.8%	11.6%	6,100	84.7%
$50,000 and Over	15.8%	19,500	***	***	***	***	***
Total, All Hispanic Adults	100.0%	123,400	5.7%	3.3%	8.1%	7,100	100.0%
Education							
Less Than High School	40.3%	49,800	6.7%	2.4%	11.1%	3,300	46.5%
H.S. Grad or G.E.D.	31.6%	39,000	6.7%	2.0%	11.4%	2,600	36.6%
Some Post High School	17.5%	21,700	2.6%	1.0%	6.9%	600	8.5%
College Graduate	10.5%	13,000	***	***	***	***	***
Total, All Hispanic Adults	100.0%	123,400	5.7%	3.3%	8.1%	7,100	100.0%
Area[4]							
Urban (100+ persons/mi^2)	85.0%	104,900	5.4%	2.6%	8.1%	5,600	78.9%
Rural (6 to 99 persons/mi^2)	9.7%	12,000	7.4%	2.2%	12.5%	900	12.7%
Frontier (<6 persons/mi^2)	5.2%	6,500	8.6%	2.1%	15.0%	600	8.5%
Total, All Hispanic Adults	100.0%	123,400	5.7%	3.3%	8.1%	7,100	100.0%

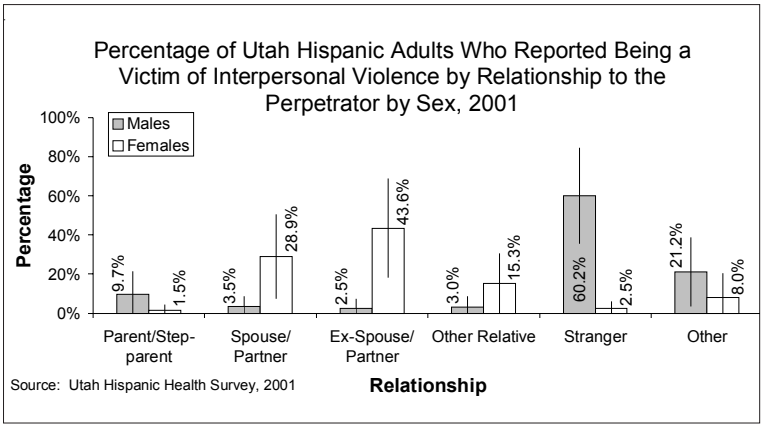
1 Rounded to the nearest 100 persons.
2 Plus or minus 95% confidence interval
3 Figures in these columns may not sum to the total because of missing values on the grouping variables.
4 Urban counties include Davis, Salt Lake, Utah, and Weber; Rural counties include Box Elder, Cache, Carbon, Morgan, Sanpete, Sevier, Summit, Wasatch, and Washington; All other counties were classified as frontier.
*** Insufficient sample size for calculation of estimates.

Interpersonal Violence

Approximately, 6.7% of Utah Hispanic adults reported being a victim of interpersonal violence in the last 12 months. Among males, 29.1% of incidents occurred on streets or highways, 22.3% occurred at home, 18.2% occurred at work, 17.8% occurred in public buildings, and 12.6% occurred at places for sport or recreation, residential settings and other locations. Among Hispanic females, 80.3% of incidents occurred at home, 3.9% occurred at work, 9.5% occurred in residential settings, and 6.3% occurred at other locations.



Hispanic survey participants were asked to describe their relationship to the perpetrator. Among males, 4.1% of the incidents were perpetrated by fathers, 1.5% by mothers, 4.1% by step-fathers, 3.5% by spouses or partners, 2.5% by ex-spouses, 3.0% by other relatives, and 60.2% by strangers. Among females, 1.5% were perpetrated by mothers, 27.9% by spouses or partners, 21.7% by ex-spouses, 1.0% by boyfriends or girlfriends, 21.8% by ex-boyfriends or ex-girlfriends, 4.0% by children, 11.3% by siblings, 2.0% by non-relatives, 2.5% by strangers, and 6.0% by other perpetrators.



Hispanic survey participants were asked the sex of their perpetrator. Males reported 91.2% of interpersonal violence perpetrated by males, and 8.8% of interpersonal violence perpetrated by females. Females reported 85.4% of interpersonal violence perpetrated by males, and 14.7% of interpersonal violence perpetrated by females.

Hispanic survey participants who sustained an injury as a result of interpersonal violence were asked if that injury limited their activity for one or more days, or required medical attention. Of those injured, 41.3% of males and 40.0% of females reported sustaining an injury as a result of interpersonal violence that limited their activity for one or more days or that required medical attention. Of those respondents, 70.1% of males and 71.8% of females were examined by a medical doctor or healthcare professional. When asked if the doctor or healthcare professional referred them for violence services or counseling, no males received referrals, and 45.7% of females received referrals. The incident of interpersonal violence was reported to the police by 51.6% of males and 56.6% of females.

VIOLENCIA INTERPERSONAL

Survey Question(s): The next few questions ask whether you have been a victim of interpersonal violence. This includes any time when you may have been intentionally hit, slapped, pushed, or kicked by someone, or had a weapon used against you, or you were otherwise hurt by another person. And it includes being hurt by other household members, as well as other people outside your household. Was there ever a time during the last 12 months that you were a victim of interpersonal violence as I have just described it?

Percentage of Persons Aged 18 to 64 Who Reported Being a Victim of Interpersonal Violence During the Past 12 Months*
by Selected Demographic Characteristics, Utah Hispanic Health Survey 2001

	Utah Adult Hispanic Population		Survey Estimates of Respondents Who Reported Being a Victim of Interpersonal Violence During the Past 12 Months				
Demographic Subgroup	Distribution	Number of Persons[1]	Percentage of Respondents Who Reported Being a Victim of Interpersonal Violence During the Past 12 Months[2]	95% Confidence Intervals Lower	95% Confidence Intervals Upper	Number of Persons[1, 3]	Distribution of Respondents Who Reported Being a Victim of Interpersonal Violence During the Past 12 Months by Demographic Subgroup
Victim of Interpersonal Violence							
Yes	6.7%	8,200					
No	93.4%	115,200					
Total, All Hispanic Adults	100.0%	123,400					
Sex							
Males	54.6%	67,400	7.6%	3.6%	11.6%	5,100	62.2%
Females	45.4%	56,000	5.5%	2.9%	8.2%	3,100	37.8%
Total, All Hispanic Adults	100.0%	123,400	6.7%	4.2%	9.1%	8,200	100.0%
Age Group							
18 to 34	58.5%	72,200	9.5%	5.5%	13.6%	6,900	84.1%
35 to 49	26.9%	33,200	2.7%	1.4%	5.5%	900	11.0%
50 to 64	10.7%	13,300	***	***	***	***	***
65 and Over	3.9%	4,800	***	***	***	***	***
Total, All Hispanic Adults	100.0%	123,400	6.7%	4.2%	9.1%	8,200	100.0%
Income							
Less Than $20,000	19.7%	24,400	4.6%	2.2%	9.7%	1,100	12.4%
$20,000 to $49,999	64.4%	79,500	8.2%	4.1%	12.2%	6,500	73.0%
$50,000 and Over	15.8%	19,500	6.7%	1.7%	11.8%	1,300	14.6%
Total, All Hispanic Adults	100.0%	123,400	7.2%	4.4%	10.1%	8,900	100.0%
Education							
Less Than High School	40.3%	49,800	3.8%	2.0%	7.2%	1,900	22.9%
H.S. Grad or G.E.D.	31.6%	39,000	7.0%	3.2%	10.8%	2,700	32.5%
Some Post High School	17.5%	21,700	11.8%	1.9%	21.7%	2,600	31.3%
College Graduate	10.5%	13,000	8.2%	1.5%	14.9%	1,100	13.3%
Total, All Hispanic Adults	100.0%	123,400	6.7%	4.2%	9.2%	8,200	100.0%
Area[4]							
Urban (100+ persons/mi^2)	85.0%	104,900	7.0%	4.1%	9.8%	7,300	89.0%
Rural (6 to 99 persons/mi^2)	9.7%	12,000	5.8%	0.5%	11.1%	700	8.5%
Frontier (<6 persons/mi^2)	5.2%	6,500	3.0%	1.1%	7.8%	200	2.4%
Total, All Hispanic Adults	100.0%	123,400	6.7%	4.2%	9.1%	8,200	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 of missing values on the grouping variables.
4 Urban counties include Davis, Salt Lake, Utah, and Weber; Rural counties include Box Elder, Cache, Carbon, Morgan, Sanpete, Sevier, Summit, Wasatch, and Washington; All other counties were classified as frontier.
* Interpersonal violence includes any time the respondent may have been intentionally hit, slapped, pushed, or kicked by someone.
*** Insufficient sample size for calculation of estimates.

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Appendix A - Methods

The 2001 Utah Hispanic Health Survey was a telephone survey of adults aged 18 and over with Hispanic surnames. A list of individuals with Hispanic surnames was purchased from Genesys Sampling Systems. The list was stratified into rural and urban areas according to an urbanization scale for Utah based on county data developed by Stinner and Lee.[55] Thirty-nine percent of 6141 individuals from the rural stratum were sampled and 26 percent of 27,333 individuals from the urban stratum were sampled. The final response rate was approximately 55%. Of the 939 completed interviews, 42%were conducted in Spanish and 58% in English. The survey was administered by Clearwater Research, Inc. in Boise, Idaho.

It cannot be assumed that the survey sample is fully representative of all Hispanic Utahns. Only those with a Hispanic surname identified on a purchased list had an opportunity to be selected for participation. This is an acceptable practice, one that is commonly used to reach Hispanic U.S. residents. However, direct comparisons between this survey and Hispanic surveys using different sampling methods should be avoided. Hispanic households are also known to have lower rates of telephone ownership than the general population.[56] Only those persons with telephones had the opportunity to be included in the survey. Since telephone ownership is related to income and education, it is likely that the survey sample under-represents Hispanics with lower socioeconomic status.

Nearly all of the questions used in the survey were obtained from the pool of questions used in the BRFSS developed by the Centers for Disease Control and Prevention. A few questions were adapted from other sources, including four questions related to acculturation. For administration, questions were organized into topical modules and ordered as follows: health status (5 questions), health care access coverage and utilization (22), hypertension awareness (2), cholesterol awareness (3), asthma (2), diabetes (15), arthritis (3), immunization (4), tobacco use (10), fruit and vegetables consumption (6), heart attack and stroke (4), cardiovascular disease (11), demographics (24), exercise and physical activity (9), women's cancer (6), disability (2), quality of life and care giving (3), alcohol consumption (1), violence and injury (18).

The survey data were weighted to adjust for probabilities of selection and to ensure that the survey sample represented the age, sex and geographic distribution of Utah's Hispanic population. Three categories of county levels (Rural and Frontier, Low Metropolitan, and High Metropolitan), two sex groups and three age categories (18 to 29, 30 to 44, and 45 years and over) were used for the post-stratification adjustment. Population estimates were obtained from the U.S. Bureau of the Census. All analysis of the data was done at the Utah Department of Health, Bureau of Health Promotion using primarily SAS software. Standard errors were calculated using SUDAAN statistical software.

Appendix B - Questionnaire

Core 1: Health Status

C01Q01 - **EVERYBODY**
Would you say that in general your health is excellent, very good, good, fair, or poor?
1. Excellent
2. Very good
3. Good
4. Fair
5. Poor
7. Don't Know/Not Sure
9. Refused

C01Q02 - **EVERYBODY**
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

C01Q03 - **EVERYBODY**
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 **SKIP TO C02Q01 IF C01Q02 = 88**
77. Don't Know/Not Sure **SKIP TO C02Q01 IF C01Q02**
99. Refused **SKIP TO C02Q01 IF C01Q02**

C01Q04 - **ONLY GET IF C01Q02 = 88, 77, 99**
During the past 30 days, for about how many days did poor physical health keep you from doing your usual activities, such as self-care, work, or recreation?
_ _ Number of days
88. None
77. Don't Know/Not Sure
99. Refused

C01Q05 - **ONLY GET IF C01Q03 = 88, 77, 99**
During the past 30 days, for about how many days did poor mental health keep you from doing your usual activities, such as self-care, work, or recreation?
_ _ Number of days
88. None
77. Don't Know/Not Sure
99. Refused

Core 2: Health Care Access Coverage and Utilization

C02Q01 **- EVERYBODY**
I am going to ask you a question that applies to everyone in your household.
In the past 12 months, which of the following programs or methods have been used to pay for the health care of any household members including yourself?

NOTE: HOUSEHOLD MEMBERS REFERS TO PEOPLE WHO USUALLY LIVE IN YOUR HOME
Read if Necessary - Select all that apply
11. Medicaid or Medi-Cal
12. Emergency Medicaid
13. Medicare
14. UMAP
15. Private insurance through employer
16. Private insurance through personal plan
17. Self-Pay (PAYMENT PLAN OR OUT-OF-POCKET)
18. Chip
19. Didn't need to see a doctor
20. Did not pay net
21. Other
22. None/No Others
77. Don't Know/Not Sure
99. Refused

The next questions refer only to you and your own health care coverage.

CO2Q02 - **EVERYBODY**
Do you now have any kind of health care coverage, including health insurance, prepaid plans such as HMOs, or government plans such as Medicare or Medicaid?
1. Yes
2. No **SKIP TO C02Q04A**
7. Don't Know/Not Sure **SKIP TO C02Q04A**
9. Refused **SKIP TO C02Q04A**

C02Q03 - **ONLY GET IF C02Q02 = 1**
During the past 12 months, was there any time that you did not have any health insurance or coverage?
1. Yes **SKIP TO CO2Q05**
2. No **SKIP TO C02Q08**
7. Don't Know/Not Sure **SKIP TO C02Q08**
9. Refused **SKIP TO C02Q08**

CO2Q04 - **ONLY GET IF C02Q02 > 1**
There are some types of insurance coverage you may not have considered. I am going to ask you about different types of health insurance plans. Please tell me whether or not you have this type of coverage:
C02Q04.1 A plan through a current or former employer or union?
INTERVIEWER NOTE: This type of insurance includes 'COBRA'
CO2Q04.2 A health insurance plan that you purchase directly from an insurance company and not through an employer or union?

INTERVIEWER NOTE: e.g., self-employed, not employed; If plan is purchased BY someone else FOR them, answer "YES" to this question.
CO2Q04.3 The health plan of someone who does not live in your household?
COSQ04.4 Medicare?
CO2Q04.5 Medicaid or Medi-Cal?
CO2Q04.6 Any other government plan, such as Indian Health Service, Military, Champus, or Tri-care.
CO2Q04.7 Do you have health insurance that covers ONLY certain specific medical conditions, such as for diabetes or breast cancer?
INTERVIEWER NOTE: This insurance would not cover anything else, just the specific condition.
CO2Q04.8 Does anyone in your household have coverage through CHIP (The Utah Children's Health Insurance Program)?

1. Yes
2. No
7. Don't Know/Not Sure
9. Refused

C02Q05 - **ONLY IF C02Q03 = 1**
What is the main reason you were without health care coverage during the past 12 months?
Read only if necessary

___ Reason code
01. Lost job or changed employers
02. Spouse or parent lost job or changed employers [includes any person who had been providing insurance prior to job loss or change
03. Became divorced or separated
04. Spouse or parent died
05. Became ineligible because of age or because left school
06. Employer doesn't offer or stopped offering coverage
07. Cut back to part time or became temporary employee
08. Benefits from employer or former employer ran out
09. Couldn't afford to pay the premiums
10. Insurance company refused coverage due to pre-existing condition
11. Lost Medicaid or Medical Assistance eligibility
12. Insurance available through employer but didn't want
87. Other, list: _____
77. Don't Know/Not Sure
99. Refused

CO2Q06 - **If CO2Q02 > 2**
What is the main reason you are without health care coverage?
Read only if necessary

__ Reason code
01. Lost job or changed employers
02. Spouse or parent lost job or changed employers [includes any person who had been providing insurance prior to job loss or change]
03. Became divorced or separated
04. Spouse or parent died
05. Became ineligible because of age or because left school
06. Employer doesn't offer or stopped offering coverage
07. Cut back to part time or became temporary employee
08. Benefits from employer or former employer ran out
09. Couldn't afford to pay the premiums
10. Insurance company refused coverage due to pre-existing condition
11. Lost Medicaid or Medical Assistance eligibility
12. Insurance available through employer but didn't want
13. Don't need it
14. Other priorities
87. Other, list: _____
77. Don't Know/Not Sure
99. Refused

C02Q07 - **ONLY GET IF C02Q02 < 2**
About how long has it been since you had health care coverage?
Read only if necessary

1. Within The Past 6 Months (1 To 6 Months)
2. Within The Past Year (6 To 12 Months)
3. Within The Past 2 Years (1 To 2 Years)
4. Within The Past 5 Years (2 To 5 Years)
5. 5 Or More Years Ago
7. Don't Know/Not Sure
8. Never
9. Refused

C02Q08 - **EVERYBODY**
In the past 12 months, has there been a time when you did not see a physician when you felt that you needed medical care?

1. Yes
2. No
7. Don't Know/Not Sure
9. Refused

The next few questions ask about some reasons people might DELAY OR HAVE PROBLEMS getting medical, dental, mental health or other care.
INTERVIEWER: DELAY means not getting care at the time that it was needed.

CO2Q09 - **EVERYBODY**
In the past 12 months, did you have problems, or did you delay seeking care, because the service was not covered by your insurance?

1. Yes
2. No **SKIP TO C02Q11**
3. Person Uninsured **SKIP TO C02Q11**
7. Don't Know/Not Sure **SKIP TO C02Q11**

9. Refused **SKIP TO C02Q11**

CO2Q10 - **ONLY GET IF C02Q09 = 1**
Was this problem for any of the following services?
CO2Q10.1 With a medical doctor?
CO2Q10.2 With a dentist?
CO2Q10.3 With a mental health provider?
1. Yes
2. No
7. Don't Know/Not Sure
9. Refused

CO2Q10.4 With some other type of health services?
1. Yes (list ___)
2. No
7. Don't Know/Not Sure
9. Refused

CO2Q11 - **EVERYBODY**
In the past 12 months, did you have problems, or did you delay seeking care because you could not find the services in your area?
1. Yes
2. No **SKIP TO C02Q13**
3. Respondent Uninsured **SKIP TO C02Q13**
7. Don't Know/Not Sure **SKIP TO C02Q13**
9. Refused **SKIP TO C02Q13**

CO2Q12 - **ONLY GET IF C02Q11 = 1**
For what types of services did you have this problem in the last 12 months?
CO2Q12.1 With a medical doctor?
CO2Q12.2 With a dentist?
CO2Q12.3 With a mental health provider?
CO2Q12.4 With some other type of health services?
1. Yes
2. No
7. Don't Know/Not Sure
9. Refused

CO2Q13 - **EVERYONE**
In the past 12 months, did you have problems, or did you delay, getting care because you could not afford the services?
1. Yes
2. No **SKIP TO C02Q15**
3. Respondent Uninsured **SKIP TO C02Q15**
7. Don't Know/Not Sure **SKIP TO C02Q15**
9. Refused **SKIP TO C02Q15**

CO2Q14 - **ONLY GET IF C02Q13 = 1**
For what types of services did you have this problem in the last 12 months?
CO2Q14.1 With a medical doctor?
CO2Q14.2 With a dentist?
CO2Q14.3 With a mental health provider?
CO2Q14.4 With some other type of health services?
1. Yes
2. No
7. Don't Know/Not Sure
9. Refused

CO2Q15 - **EVERYBODY**
Are there any other reasons when you did not see a physician when you felt that you needed medical care?
1. Yes (List _____)
2. No
7. Don't Know/Not Sure
9. Refused

CO2Q16 - **EVERYBODY**
Was there a time during the last 12 months when you needed to use PRESCRIPTION MEDICINE, but could not get it because of the cost?
1. Yes
2. No
7. Don't Know/Not Sure
9. Refused

CO2Q17 - **EVERYBODY**
Can you tell me where you usually get your prescription medicines?
Read if necessary
1. Local Pharmacy
2. Mexico or Other Country through Friends
3. Get Them Myself in Mexico or Other Country
4. Hospital
5. Doctor's Office
6. Community Outreach
7. Mail-Order
8. Internet Order
9. Never Use Prescriptions
10. Other (list _____)
77. Don't Know
99. Refused

C02Q18 **- EVERYBODY**
Do you have one person you think of as your personal doctor or health care provider?
INTERVIEWER: If 'No', ask 'Is there more than one or is there no person who you think of?
1. Yes, only one
2. More than one
3. No
7. Don't Know/Not Sure
9. Refused

C02Q19 **- EVERYBODY**
Is there one particular clinic, health center, doctor's office,

or other place that you usually go to if you are sick or need advice about your health?
1. Yes
2. No **SKIP TO C02Q21**
7. Don't Know/Not Sure **SKIP TO C02Q21**
9. Refused **SKIP TO C02Q21**

C02Q20 - **ONLY GET IF C02Q19 = 1**
What kind of place is it?
Please read:
1. A doctor's office or HMO
2. A clinic or health center
3. A hospital outpatient department
4. A hospital emergency room
5. An urgent care center
6. Community health center
8. Other (list _____)
7. Don't Know/Not Sure
9. Refused

C02Q21 **- EVERYBODY**
About how long has it been since you last visited a doctor for a routine checkup or general physical exam?
Read only if necessary
1. Within the past year (1 to 12 Months Ago)
2. Within the past years (1 to 2 Years Ago)
3. Within the past 5 years (2 to 5 Years Ago)
4. 5 or more years ago
8. Never
7. Don't Know/Not Sure
9. Refused

C02Q22 **- EVERYBODY**
Have you ever not seen a Doctor because you didn't speak the language?
1. Yes
2. No
7. Don't Know/Not Sure
9. Refused

Core 3: Exercise and Physical Activity

C03Q01 - **EVERYBODY**
During the past 30 days, other than your regular job, did you participate in any physical activities or exercise such as running, calisthenics, golf, gardening, or walking for exercise?
1. Yes
2. No
7. Don't Know/Not Sure
9. Refused

C03Q02 **- GET ONLY IF C14Q12 < 3, OTHERWISE GO TO C03Q03**
When you are at work, which of the following best describes what you do? Would you say:
INTERVIEWER: Please Read. If a respondent has multiple jobs, include all jobs.
1. Mostly sitting or standing
2. Mostly walking
3. Mostly heavy labor or physically demanding work
INTERVIEWER: Do not read these responses.
7. Don't Know/Not Sure
9. Refused

C03Q03 - **EVERYBODY**
We are interested in two types of physical activity: vigorous and moderate. Vigorous activities cause large increases in breathing or heart rate while moderate activities cause small increases in breathing or heart rate.

Now, thinking about the moderate physical activities you do **[fill in (when you are not working) if "employed" or "self-employed" to core C14Q12]** in a usual week, do you do moderate activities for at least 10 minutes at a time, such as brisk walking, bicycling, vacuuming, gardening, or anything else that causes small increases in breathing or heart rate?
1. Yes
2. No - **SKIP TO CO3Q07**
7. Don't Know/Not Sure **SKIP TO CO3Q07**
9. Refused **SKIP TO CO3Q07**

C03Q04 - **ONLY GET IF CO3Q03 = 1**
How many days per week do you do these moderate activities for at least 10 minutes at a time?
__ __ Days per week
88. Do not exercise at least 10 minutes weekly - **GO TO C03Q07**
77. Don't Know/Not Sure
99. Refused

C03Q06 - **C03Q03 = 1**
On days when you do moderate activities for at least 10 minutes at a time, how much total time per day do you spend doing these activities?
__:__ __ Hours and minutes per day
777. Don't Know/Not Sure
999. Refused

C03Q07 - **EVERYBODY**
Now thinking about the vigorous physical activities you do **[fill in (when you are not working) if "employed" or "self-employed" to core C14Q12]** in a usual week, do you do vigorous activities for at least 10 minutes at a time, such as running, aerobics, heavy yard work, or anything else that causes large increases in breathing or heart rate?
1. Yes
2. No **- SKIP TO C15Q01**
7. Don't Know/Not Sure **SKIP TO C15Q01**
9. Refused - **SKIP TO C15Q01**

C03Q08 - **GET ONLY IF C03Q07 = 1**

How many days per week do you do these vigorous activities for at least 10 minutes at a time? (151-152)

_____Days per week

88. Do not exercise at least 10 minutes weekly **SKIP TO C15Q01**
77. Don't Know/Not Sure **SKIP TO C15Q01**
99. Refused **SKIP TO C15Q01**

C03Q09 - **GET ONLY IF C03Q08 = 88**
On days when you do vigorous activities for at least 10 minutes at a time, how much total time per day do you spend doing these activities?

__:__ __ Hours and minutes per day
777. Don't Know/Not Sure
999. Refused

Core 4: Hypertension Awareness

C04Q01 **- EVERYBODY**
Have you ever been told by a doctor, nurse, or other health professional that you have high blood pressure?

1. Yes
2. No **SKIP TO C05Q01**
7. Don't Know/Not Sure **SKIP TO C05Q01**
9. Refused **SKIP TO C05Q01**

C04Q02 - **ONLY GET IF C04Q01 = 1**
Are you currently taking medicine for high blood pressure?

1. Yes
2. No
7. Don't Know/Not Sure
9. Refused

Core 5: Cholesterol Awareness

C05Q01 **- EVERYBODY**
Blood cholesterol is a fatty substance found in the blood. Have you ever had your blood cholesterol checked?

1. Yes
2. No **SKIP TO C06Q01**
7. Don't Know/Not Sure **SKIP TO C06Q01**
9. Refused **SKIP TO C06Q01**

C05Q02 - **ONLY GET IF C05Q01 = 1**
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

C05Q03 - **ONLY GET IF C05Q01 = 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

Core 6: Asthma

C06Q01 **- EVERYBODY**
Have you ever been told by a doctor, nurse, or other health professional that you had asthma?

1. Yes
2. No **SKIP TO C07Q01**
7. Don't Know/Not Sure **SKIP TO C07Q01**
9. Refused **SKIP TO C07Q01**

C06Q02 - **ONLY GET IF C06Q01 = 1**
Do you still have asthma?

1. Yes
2. No
7. Don't Know/Not Sure
9. Refused

Core 7: Diabetes

C07Q01 **- EVERYBODY**
Have you ever been told by a doctor, nurse, or other health professional that you have diabetes?

If A Yes and female, ask Was this only when you were pregnant?

1. Yes
2. Yes, but female told only during pregnancy **SKIP TO C08Q01**
3. No **SKIP TO C08Q01**
7. Don't Know/Not Sure **SKIP TO C08Q01**
9. Refused

Module 1: Diabetes

M01Q01 - **ONLY GET IF C07Q01 = 1**
How old were you when you were told you have diabetes? Enter > 97 for 97 years old or older

___ Code age in years
98. Don't Know/Not Sure
99. Refused

M01Q02 - **ONLY GET IF C07Q01 = 1**
Are you now taking insulin?

1. Yes
2. No
7. Don't Know/Not/Sure
9. Refused

M01Q03 - **ONLY GET IF C07Q01 = 1**
Are you now taking oral diabetes pills?

1. Yes

2. No
7. Don't Know/Not Sure
9. Refused

M01Q04 - **ONLY GET IF C07Q01 = 1**
About how often do you check your blood for glucose or sugar? Include times when checked by a family member or friend, but do not include times when checked by a health professional.
101-109 = time per day
301-399 = times per month
201-263 = times per week
401-499 = times per year
___ Enter times per day, week, month or year
888. Never
777. Don't Know/Not sure
999. Refused

M01Q05 - **ONLY GET IF C07Q01 = 1**
About how often do you check your feet for any sores or irritations? Include times when checked by a family member or friend, but do not include times when checked by a health professional.
101-109 = time per day
301-399 = times per month
201-263 = times per week
401-499 = times per year
___ Enter times per day, week, month or year
888. Never
555. No Feet **SKIP TO M01Q07**
777. Don't Know/Not Sure
999. Refused

M01Q06 - **ONLY GET IF M01Q05 = 555 AND C07Q01 = 1**
Have you ever had any sores or irritations on your feet that took more than four weeks to heal?
1. Yes
2. No
7. Don't Know/Not Sure
9. Refused

M01Q07 - **ONLY GET IF C07Q01 = 1**
About how many times in the past 12 months have you seen a doctor, nurse, or other health professional for your diabetes?
___ Number of times (76 = 76 or more)
88. None
77. Don't Know/Not Sure
99. Refused

M01Q08 - **ONLY GET IF C07Q01 = 1**
A test for hemoglobin "A one C" measures the average level of blood sugar over the past three months. About how many times in the past 12 months has a doctor, nurse, or other health professional checked you for hemoglobin "A one C"?
___ Number of times (76 = 76 or more)
88. None
98. Never Heard of Hemoglobin "A one C" Test
77. Don't Know/Not Sure
99. Refused

M01Q09 - **ONLY GET IF M01Q05 = 555**
About how many times in the past 12 months has a health professional checked your feet for any sores or irritations?
___ Number of times (76 = 76 or more)
88. None
77. Don't Know/Not Sure
99. Refused

M01Q10 - **ONLY GET IF C07Q01 = 1**
When was the last time you had an eye exam in which the pupils were dilated? This would have made you temporarily sensitive to bright light.
Read only if necessary
1. Within the past month (Anytime less than 1 month ago)
2. Within the past year (1 month but less than 1 year ago)
3. Within the past 2 years (1 year but less than 2 years ago)
4. 2 or more years ago
8. Never
7. Don't Know/Not Sure
9. Refused

M01Q11 - **ONLY GET IF C07Q01 = 1**
Has a doctor ever told you that diabetes has affected your eyes or that you had retinopathy?
1. Yes
2. No
7. Don't Know/Not Sure
9. Refused

M01Q12 - **ONLY GET IF C07Q01 = 1**
Have you ever taken a course or class in how to manage your diabetes yourself?
1. Yes
2. No
7. Don't Know/Not Sure
9. Refused

M01Q13 - **ONLY GET IF C07Q01 = 1**
Where have you obtained information about diabetes?
01. Nurse or nurse practitioner
02. Dietician or nutritionist
03. Diabetes educator
04. Diabetes class
05. Doctor
06. Relative or friend
07. Health Department
08. American Diabetes Association or Utah Diabetes Association
09. Library
10. Newspaper or magazine
11. Television
12. Internet
13. Other: (Specify) _____
14. Nowhere

77. Don't Know/Not Sure
99. Refused

M01Q14 - **ONLY GET IF C07Q01 = 1**
When was the last time you received information on how to take care of your diabetes in a course or class from a dietitian or diabetes educator?
1. Within the past 6 months (0 to less than 6 months)
2. Within the past year (6 months to less than 1 year)
3. Within the past 2 years (1 one year to less than 2 years)
4. 2-3 years ago (two years to less than 3 years ago)
5. 3-5 years ago (3 to less than 5 years ago)
6. 5 or more years ago
7. Don't Know/Not Sure
9. Refused

Core 8: Arthritis

C08Q01 - **EVERYBODY**
During the past 12 months, have you had pain, aching, stiffness or swelling in or around a joint?
1. Yes
2. No **SKIP TO C08Q03**
7. Don't Know/Not Sure **SKIP TO C08Q03**
9. Refused **SKIP TO C08Q03**

C08Q02 - **ONLY GET IF C08Q01 = 1**
Were these symptoms present on most days for at least one month?
1. Yes
2. No
7. Don't Know/Not Sure
9. Refused

C08Q03 - **EVERYBODY**
Have you ever been told by a doctor that you have arthritis?
1. Yes
2. No **SKIP TO C09Q01**
7. Don't Know/Not Sure **SKIP TO C09Q01**
9. Refused **SKIP TO C09Q01**

Core 9: Immunization

C09Q01 - **EVERYBODY**
During the past 12 months, have you had a flu shot?
1. Yes
2. No
7. Don't Know/Not Sure
9. Refused

C09Q02 - **EVERYBODY**
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 [new-mo-COCK-uhl] vaccine.
1. Yes
2. No
7. Don't Know/Not Sure
9. Refused

C09Q03 - **EVERYBODY**
How many children live in your household who are less than 6 years old?
01-06 = Code number of children
08. 7 or more children
10. None **SKIP TO C10Q01**
77. Don't Know/Not Sure **SKIP TO C10Q01**
99. Refused **SKIP TO C10Q01**

C09Q04 - **ONLY GET IF C09Q03 = 07, 09, 10**
If your child is five or under (or all of your children are five or under) is/are not up-to-date on immunizations, what would you say is the most important reason your child (children) is not up-to-date on immunizations? (If an explanation is necessary for "not up-to-date", use the words "your child (children) has not had all the shots he/she should have for their age)
(Do not read responses)
01. Child is always sick
02. Too expensive
03. Don't know Immunization schedule (When shots are supposed to be given)
04. Clinic or Physician located too far away
05. Attitude of staff at Physician/Clinic Office
06. Don't Believe in Immunizations
07. Afraid of Vaccines (Fear of Reaction)
08. Child is Under 2 Months-of-age
09. Transportation is difficult to find
10. Other
11. Not applicable, child is up-to-date
77. Don't Know/Not Sure
99. Refused

Core 10: Tobacco Use

C10Q01 - **EVERYBODY**
Have you smoked at least 100 cigarettes in your entire life?
5 packs = 100 cigarettes
1. Yes
2. No **SKIP TO C11Q01**
7. Don't Know/Not Sure **SKIP TO C11Q01**
9. Refused **SKIP TO C11Q01**

C10Q02 - **ONLY GET IF C10Q01 = 1**
Do you currently smoke cigarettes every day, some days, or not at all?
1. Every day
2. Some days
3. Not at all **SKIP TO C11Q01**
9. Refused **SKIP TO C11Q01**

C10Q03 - **ONLY GET IF C10Q02 < 3**
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

Module 2: Tobacco Indicators

M02Q01 - **ONLY GET IF C10Q01 = 1 (HAVE SMOKED AT LEAST 100 CIGARETTES IN LIFE)**
How old were you the first time you smoked a cigarette, even one or two puffs?
_ _ Code age in years (76 = 76 years old or older)
77. Don't Know/Not Sure
99. Refused

M02Q02 - **ONLY GET IF C10Q01 = 1 (HAVE SMOKED AT LEAST 100 CIGARETTES IN LIFE)**
How old were you when you first started smoking cigarettes regularly?
_ _ Code age in years (76 = 76 years old or older)
88. Never smoked regularly **SKIP TO M02Q06**
77. Don't Know/Not Sure
99. Refused

M02Q03 - **ONLY GET IF M03Q02 ? 88 AND C10Q02 = 3**
About how long has it been since you last smoked cigarettes regularly?
Read only if necessary
01. Within the past month (Anytime less than 1 month ago)
02. Within the past 3 months (1 month but less than 3 months ago)
03. Within the past 6 months (3 months but less than 6 months ago)
04. Within the past year (6 months but less than 1 year ago)
05. Within the past 5 years (1 year but less than 5 years ago) **SKIP TO M02Q06**
06. Within the past 10 years (5 years but less than 10 years ago) **SKIP TO M02Q06**
07. 10 or more years ago **SKIP TO M02Q06**
77. Don't Know/Not Sure **SKIP TO M02Q06**
99. Refused **SKIP TO M02Q06**

M02Q04 - **ONLY GET IF C10Q02 < 3 OR M02Q03 < 5**
In the past 12 months, have you seen a doctor, nurse, or other health professional to get any kind of health care for yourself?
1. Yes
2. No **SKIP TO M02Q06**
7. Don't Know/Not Sure **SKIP TO M02Q06**
9. Refused **SKIP TO M02Q06**

M02Q05 - **ONLY GET IF M02Q04 = 1**
In the past 12 months, has a doctor, nurse, or other health professional advised you to quit smoking?
1. Yes
2. No
7. Don't Know/Not Sure
9. Refused

M02Q06 - **EVERYBODY**
Which statement best describes the rules about smoking inside your home?
Would you say smoking is not allowed anywhere inside your home, smoking is allowed in some places or at some times, smoking is allowed anywhere inside the home, or there are no rules about smoking inside the home?
1. Smoking is not allowed anywhere inside your home
2. Smoking is allowed in some places or at some times
3. Smoking is allowed anywhere inside the home
4. There are no rules about smoking inside the home
7. Don't Know/Not Sure
9. Refused

M02Q07 - **EVERYBODY**
In the past twelve months, how often have you seen or heard anti-smoking messages on the TV or radio?
1. At least once a week
2. At least once a month
3. Less than once a month
4. Never
7. Don't Know/Not Sure
9. Refused

Core 11: Fruits and Vegetables

Please tell me how often you eat or drink each one, for example, twice a week, three times a month, and so forth. Remember that I am only interested in the foods you eat. Include all foods you eat, both at home and away from home.

C11Q01 - **EVERYBODY**
How often do you drink fruit juices such as orange, grapefruit, or tomato?
1. __ __ Per day 3. __ __ Per month
2. __ __ Per week 4. __ __ Per year
555. Never
777. Don't Know/Not Sure
999. Refused

C11Q02 - **EVERYBODY**
Not counting juice, how often do you eat fruit?
1. __ __ Per day 3. __ __ Per month
2. __ __ Per week 4. __ __ Per year
555. Never
777. Don't Know/Not Sure
999. Refused

C11Q03 - **EVERYBODY**
How often do you eat green salad?
1. __ __ Per day 3. __ __ Per month
2. __ __ Per week 4. __ __ Per year
555. Never
777. Don't Know/Not Sure
999. Refused

C11Q04 - **EVERYBODY**
How often do you eat potatoes not including French fries, fried potatoes, or potato chips?
1. __ __ Per day 3. __ __ Per month
2. __ __ Per week 4. __ __ Per year
555. Never
777. Don't Know/Not Sure
999. Refused

C11Q05 - **EVERYBODY**
How often do you eat carrots?
1. __ __ Per day 3. __ __ Per month
2. __ __ Per week 4. __ __ Per year
555. Never
777. Don't Know/Not Sure
999. Refused

C11Q06 - **EVERYBODY**
Not counting carrots, potatoes, or salad, how many servings of vegetables do you usually eat?
1. __ __ Per day 3. __ __ Per month
2. __ __ Per week 4. __ __ Per year
555. Never
777. Don't Know/Not Sure
999. Refused

Core 12: Heart Attack and Stroke

C12Q01 - **EVERYBODY**
Now I would like to ask you about your knowledge of the signs and symptoms of a heart attack and stroke.
Which of the following do you think is a symptom of a heart attack. For each, tell me yes, no, or you're not sure.
C12Q01.1 Pain or discomfort in the jaw, neck, or back?
C12Q01.2 Feeling weak, lightheaded, or faint?
C12Q01.3 Chest pain or discomfort?
C12Q01.4 Sudden trouble seeing in one or both eyes?
C12Q01.5 Pain or discomfort in the arms or shoulder?
C12Q01.6 Shortness of breath?
1. Yes
2. No
7. Don't Know/Not Sure
9. Refused

C12Q02 - **EVERYBODY**
Which of the following do you think is a symptom of a stroke. For each, tell me yes, no, or you're not sure.
C12Q02.1 Sudden confusion or trouble speaking?
C12Q02.2 Sudden numbness or weakness of face, arm, or leg, especially on one side?
C12Q02.3 Sudden trouble seeing in one or both eyes?
C12Q02.4 Sudden chest pain or discomfort?
C12Q02.5 Sudden trouble walking, dizziness, or loss of balance?
C12Q02.6 Severe headache with no known cause?
1. Yes
2. No
7. Don't Know/Not Sure
9. Refused

C12Q03 - **EVERYBODY**
If you thought someone was having a heart attack or a stroke, what is the first thing you would do?
Would you take them to the hospital, tell them to call their doctor, Call 911, Call their spouse or a family member, or Do something else?
1. Take them to the hospital
2. Tell them to call their doctor
3. Call 911
4. Call their spouse or a family member
5. Do something else
7. Don't Know/Not Sure
9. Refused

Core 13: Cardiovascular Disease

C13Q01 - **EVERYBODY**
Are you doing anything to lower your risk of developing heart disease or stroke?
1. Yes
2. No **SKIP TO C13Q03**
7. Don't Know/Not Sure **SKIP TO C13Q03**
9. Refused **SKIP TO C13Q03**

C13Q02 - **C13Q01 = 1**
To lower your risk of developing heart disease or stroke, are you....
C13Q02.1 Eating fewer high fat or high cholesterol foods?
C13Q02.2 Eating more fruits and vegetables?
C13Q02.3 More physically active?
1. Yes
2. No
7. Don't Know/Not Sure
9. Refused

C13Q03 - **EVERYBODY**
Within the past 12 months, has a doctor, nurse, or other health professional told you to...
C13Q03.1 Eat fewer high fat or high cholesterol foods?
C13Q03.2 Eat more fruits and vegetables?
C13Q03.3 Be more physically active?
1. Yes
2. No
7. Don't Know/Not Sure
9. Refused

C13Q04 - **EVERYBODY**
Has a doctor, nurse, or other health professional ever told you that you had any of the following?
C13Q04.a A heart attack, also called a myocardial infarction
C13Q04.b Angina or coronary heart disease
C13Q04.c A stroke
1. Yes
2. No

7. Don't Know/Not Sure
9. Refused

C13Q05 - **ONLY GET IF C13Q04a = 1 (HAD A HEART ATTACK)**
At what age did you have your first heart attack?
___ Code age in years
07. Don't Know/Not Sure
09. Refused

C13Q06 - **ONLY GET IF C13Q04c = 1 (HAD A STROKE)**
At what age did you have your first stroke?
___ Code age in years
07. Don't Know/Not Sure
09. Refused

C13Q07 - **ONLY GET IF C13Q04a = 1 or C13Q04c = 1 (HAD A HEART ATTACK OR STROKE)**
After you left the hospital following your **[fill in (heart attack) if "YES" to C13Q04a or to C13Q04a and C13Q04c; fill in (stroke) if "YES" to C13Q04c and "NO" to C13Q04a]**, did you go to any kind of outpatient rehabilitation? This is sometimes called "rehab."
1. Yes
2. No
7. Don't Know/Not Sure
9. Refused

C13Q08 **- EVERYBODY**
Do you take aspirin daily or every other day?
1. Yes **SKIP TO C13Q11**
2. No
7. Don't Know/Not Sure **SKIP TO C14Q01**
9. Refused **SKIP TO C14Q01**

C13Q09 - **ONLY GET IF C13Q08 = 1**
Do you have a health problem or condition that makes taking aspirin unsafe for you?
INTERVIEWER: If 'Yes,' ask 'Is this a stomach condition?' Code upset stomachs as stomach problems
1. Yes, not stomach related
2. Yes, stomach problems
3. No **SKIP TO C14Q01**
7. Don't Know/Not Sure **SKIP TO C14Q01**
9. Refused **SKIP TO C14Q01**

C13Q10 - **ONLY GET IF C13Q08 = 1**
Do you have a different health problem or condition that makes taking aspirin unsafe for you?
1. Yes **SKIP TO C14Q01**
2. No **SKIP TO C14Q01**
7. Don't Know/Not Sure **SKIP TO C14Q01**
9. Refused **SKIP TO C14Q01**

C13Q11 - **ONLY GET IF C13Q08 = 1**
Why do you take aspirin?
C13Q11.1 To relieve pain?
C13Q11.2 To reduce the chance of a heart attack?
C13Q11.3 To reduce the chance of a stroke?
1. Yes
2. No
7. Don't Know/Not Sure
9. Refused

<u>Core 14: Demographics</u>

C14Q01 **- EVERYBODY**
What is your age today?
__ __ Code age in years
07. Don't Know/Not Sure
09. Refused

C14Q02 **- EVERYBODY**
How long have you lived in Utah?
1. Less than 6 months **SKIP TO C14Q04**
2. 6 months to less than one year **SKIP TO C14Q04**
3. More than one year
7. Don't Know/Not Sure **SKIP TO C14Q04**
9. Refused **SKIP TO C14Q04**

C14Q03 - **ONLY GET IF C14Q02 = 3**
How many years?
____ Number of years
7. Don't Know/Not Sure
9. Refused

C14Q04 **- EVERYBODY**
How long have you lived in the United States?
1. Less than 6 months **SKIP TO C14Q06**
2. 6 months to less than one year **SKIP TO C14Q06**
3. More than one year
7. Don't Know/Not Sure **SKIP TO C14Q06**
9. Refused **SKIP TO C14Q06**

C14Q05 - **ONLY GET IF C14Q04 = 3**
How many years?
____ Number of years
7. Don't Know/Not Sure
9. Refused

C14Q06 **- EVERYBODY**
In which country were you born? (Open-ended: do not state _____)
01. Cuba
02. El Salvador
03. Mexico
04. Nicaragua
05. Peru
06. Puerto Rico
07. U.S.
08. Other (list _____)
77. Don't Know/Not Sure
99. Refused

C14Q07 - **EVERYBODY**
Which one or more of the following would you say is your race?
INTERVIEWER: Mark all that apply. Please Read.
1. White
2. Black or African American
3. Asian
4. Native Hawaiian or Other Pacific Islander
5. American Indian, Alaska Native
6. Other **[specify]** _____
8. No additional choices
INTERVIEWER: Do not read these responses.
7. Don't Know/Not Sure
9. Refused

C14Q08 - **ONLY GET IF MORE THAN ONE RESPONSE GIVEN FOR C14Q07**
Which one of these groups would you say best represents your race?
1. White
2. Black or African American
3. Asian
4. Native Hawaiian or Other Pacific Islander
5. American Indian, Alaska Native
6. Other **[specify]** _____
7. Don't Know/Not Sure
9. Refused

C14Q09 - **EVERYBODY**
Are you: married, divorced, widowed, separated, never married, or a member of an unmarried couple?
1. Married
2. Divorced
3. Widowed
4. Separated
5. Never married
6. A member of an unmarried couple
9. Refused

C14Q10 - **EVERYBODY**
How many children less than 18 years of age live in your household?
__ __ Number of children
88. None
99. Refused

C14Q11 - **EVERYBODY**
What is the highest grade or year of school you completed?
Read only if necessary
1. Never attended school
2. Grades 1 through 8 (Elementary)
3. Grades 9 through 11 (Some high school)
4. Grade 12 or GED (High school graduate)
5. College 1 year to 3 years (Some college or technical school)
6. College 4 years or more (College graduate)
100. Post-graduate/professional degree
9. Refused

C14Q12 - **EVERYBODY**
What is your current employment status?
Read only if necessary
01. Employed for wages
02. Self-employed
03. Out of work for more than 1 year
04. Out of work for less than 1 year
05. A Homemaker
06. A Student
08. Retired
10. Unable to work
09. Refused

C14Q13 - **EVERYBODY**
The next question asks about your TOTAL combined HOUSEHOLD income during calendar year 2000. Please include income from all wage earners, and money from ALL SOURCES, not just wages and salaries, and use income BEFORE TAXES AND OTHER DEDUCTIONS. Is your household income from all sources:
15. Less than $25,000 If no ask 06 If yes ask 04 ($20,000-$24,999)
14. Less than $20,000 If no code 05 if yes ask 03 ($15,000 - $19,999)
13. Less than $15,000 If no code 04 if yes ask 02 ($10,000 - $14,999)
12. Less than $10,000 If yes code 03 if no ask 01 ($5,000 - $9,999)
11. Less than $5,000 If no code as 02
16. Less than $30,000 If no ask 07 ($25,000-$29,999)
17. Less than $35,000 if no ask 08 ($30,000-$34,999)
18. Less than $40,000 If no ask 09 ($35,000-$39,999)
19. Less than $45,000 If no ask 10 ($40,000-$44,999)
20. Less than $50,000 if no ask 11 ($45,000- $49,999)
21. Less than $55,000 if no ask 12 ($50,000-$54,999)
22. Less than $60,000 if no ask 13 ($55,000-$59,999)
23. Less than $65,000 if no ask 14 ($60,000-$64,999)
24. Less than $70,000 if no ask 15 ($65,000-$69,999)
25. Less than $75,000 if no ask 16 ($65,000-$69,999)
26. $75,000 or more
77. Don't Know/Not Sure
99. Refused

C14Q14 - **EVERYBODY**
Is your income steady, or does it change from month to month?
1. Steady **SKIP TO C14Q16**
2. Changes every month
7. Don't Know/Not Sure
9. Refused

C14Q15 - **ONLY GET IF C14Q14 < 1**
The next question asks about your TOTAL combined HOUSEHOLD income during the past month. What was your total combined household income last month. Please

include income from all wage earners, and money from ALL SOURCES, not just wages and salaries, and use income BEFORE taxes and other deductions

01. Less than $416
02. $417 - $833
03. $834 - $1,249
04. $1,250 - $1,666
05. $1,667 - $2,083
06. $2,084 - $2,416
07. $2,417 - $2,916
08. $2,917 - $3,333
09. $3,334 - $3,750
10. $3,751 - $4,166
11. $4,167 - $4,583
12. $4,584 - $5,000
13. $5,001 - $5,416
14. $5,417 or more
77. Don't Know/Not Sure
99. Refused

C14Q16 - **EVERYBODY**
About how much do you weigh without shoes?
Round fractions up

__ __ __ Weight pounds
777. Don't Know/Not Sure
999. Refused

C14Q17 - **EVERYBODY**
About how tall are you without shoes?
Round fractions down

__ __ __ Height ft/inches (Ex. 5 ft 9 in = 509)
777. Don't Know/Not Sure
999. Refused

C14Q18 - **EVERYBODY**
What county do you live in?

__ __ __ FIPS county code
777. Don't Know/Not Sure
999. Refused

C14Q19 - **EVERYBODY**
What is your zip code?

__ __ __ __ __ Zip Code
77777. Don't Know/Not Sure
99999. Refused

C14Q20 - **EVERYBODY**
Do you have more than one telephone number in your household? Do not include cell phones or numbers that are only used by a computer or fax machine.

1. Yes
2. No **SKIP TO C14Q22**
7. Don't Know/Not Sure **SKIP TO C14Q22**
9. Refused **SKIP TO C14Q22**

C14Q21 - **ONLY GET IF C14Q20 = 1**
How many of these are residential numbers?

1-5. ___ Residential telephone numbers
6. 6 or more
7. Don't Know/Not Sure
9. Refused

C14Q22 - **EVERYBODY**
How many adult members of your household currently use a cell phone for any purpose?

___ Number of adults
77. Don't Know/Not Sure
88. None
99. Refused

C14Q23 - **EVERYBODY**
Indicate sex of respondent. Ask only if necessary.

1. Male **SKIP TO C03Q01**
2. Female

C14Q24 - **ONLY GET IF C14Q23 = 2 AND C14Q01 <45 (FEMALE UNDER 45 YEARS OLD)**
To your knowledge, are you now pregnant?

1. Yes
2. No
7. Don't Know/Not Sure
9. Refused

Core 15: Women's Cancer

C15Q01 - **ONLY GET IF C14Q24 = 2 (FEMALE)**
A mammogram is a x-ray of each breast to look for breast cancer. Have you ever had a mammogram?

1. Yes
2. No **SKIP TO AR02Q01**
7. Don't Know/Not Sure **SKIP TO AR02Q01**
9. Refused **SKIP TO AR02Q01**

C15Q02 - **ONLY GET IF C15Q01 = 1, Otherwise SKIP TO C16Q01**
How long has it been since you had your last mammogram?
Read only if necessary

1. Within the past year (Any time 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
6. Never
7. Don't Know/Not Sure
9. Refused

C15Q03 - **ONLY GET IF C15Q02 > 2**
What is the most important reason you have not had a mammogram within the last two years?
01. Not recommended by doctor/doctor never said it was needed
02. Not needed/No breast problems/No family history of breast cancer
03. Cost/not covered by insurance
04. Too old
05. Too young
06. No time
07. Services not available/Not convenient/lack of transportation
08. Fear/uncomfortable/painful
09. Embarrassing
10. Afraid of what they might find
77. Don't Know/Not Sure
99. Refused

C15Q04 - **ONLY GET IF C14Q23 = 2 (FEMALE)**
A Pap smear is a test for cancer of the cervix. Have you ever had a Pap smear?
1. Yes
2. No **SKIP TO M05Q10**
7. Don't Know/Not Sure **SKIP TO M05Q10**
9. Refused **SKIP TO M05Q10**

C15Q05 - **ONLY GET IF C15Q04 = 1**
How long has it been since you had your last Pap smear?
Read only if necessary
1. Within the past year (Any time 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
6. Never
7. Don't Know/Not Sure
9. Refused

C15Q06 - **ONLY GET IF C15Q05 > 3**
What is the most important reason you have not had a Pap smear in the last three years?
01. Not recommended by doctor/doctor never said it was needed
02. Not needed/No breast problems/No family history of breast cancer
03. Cost/not covered by insurance
04. Too old
05. Too young
06. No time
07. Services not available/Not convenient/lack of transportation
08. Fear/uncomfortable/painful
09. Embarrassing
10. Afraid of what they might find
77. Don't Know/Not Sure
99. Refused

Core 16: Disability

The following questions are about health problems or impairments you may have.
C16Q01 - **EVERYBODY**
Are you limited in any way in any activities because of physical, mental, or emotional problems?
1. Yes
2. No
7. Don't Know/Not Sure
9. Refused

C16Q02 - **EVERYBODY**
Do you now have any health problem that requires you to use special equipment, such as a cane, a wheelchair, a special bed, or a special telephone?

INCLUDE OCCASIONAL USE OR USE IN CERTAIN CIRCUMSTANCES.
1. Yes
2. No
7. Don't Know/Not Sure
9. Refused

Module 3: Quality of Life and Care-giving

M03Q01 - **ONLY GET IF C16Q01 = 1 OR C16Q02 = 1**
What is your major impairment or health problem?
Read only if necessary
___ Reason Code
01. Arthritis/Rheumatism
02. Back or Neck Problem
03. Fractures, Bone/Joint Injury
04. Walking Problem
05. Lung/Breathing Problem
06. Hearing Problem
07. Eye/Vision Problem
08. Heart Problem
09. Stroke Problem
10. Hypertension/High Blood Pressure
11. Diabetes
12. Cancer
13. Depression/Anxiety/Emotional Problem
14. Other Impairment/Problem
77. Don't Know/Not Sure **SKIP TO C17Q01**
99. Refused **SKIP TO C17Q01**

M03Q02 - **ONLY GET IF M03Q01 < 77**
For how long have your activities been limited because of your major impairment or health problem?
1. __ __ Days 3. __ __ Months

2. __ __ Weeks4. __ __ Years
777. Don't Know/Not Sure
999. Refused

M03Q03 - **ONLY GET IF M03Q01 < 77**
During the past 30 days, for about how many days did pain make it hard for you to do your usual activities, such as self-care, work or recreation?
__ __ Number of Days
88. None
77. Don't Know/Not Sure
99. Refused

Core 17: Alcohol Consumption

C017Q01 - **EVERYBODY**
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 **SKIP TO CO17Q01S**
777. Don't Know/Not Sure **SKIP TO CO17Q01**
999. Refused **SKIP TO CO17Q01**

Core 18: Violence and Injury

The next few questions ask about injuries you may have had. By injury I mean any accidental or intentional injury to a person as a result of a fall, burn, poisoning, overdose, motor vehicle accident, sports injury, bite, gunshot, drowning, suicide attempt, or any other cause.

C18Q01 - **EVERYBODY**
Have you had an injury during the last 12 months that limited your usual activities for a day or longer or caused them to require medical attention?
1. Yes
2. No **SKIP TO C18Q02**
7. Don't Know/Not Sure **SKIP TO C18Q02**
9. Refused **SKIP TO C18Q02**

C18Q01A - **ONLY GET IF C18Q01 = 1**
Where did the most recent injury happen?
Read only if necessary
01. Home/Yard
02. Farm
03. Work Place and Premises
04. Place for Recreation and Sport
05. Street/Highway
06. Public Building (Other than School)
07. School Building/Grounds
08. Residential Institution
09. Other
77. Don't Know/Not Sure
99. Refused

C18Q01 - **ONLY GET IF C18Q01 = 1**
What was the primary cause of the most recent injury?
01. Fall
02. Motor Vehicle Accident
03. Pedestrian Injury
04. Off-Highway Motorized Vehicle
05. Poisoning or Overdose
06. Injury Caused by Animals
07. Watercraft and Water Injury
08. Near Drowning
09. Choking/Near Suffocation
10. Bicycle Accident
11. Rollerblade Injury
12. Ski Injury
13. Other Sports Injury
14. Firearms/Assault with a Firearm
15. Physical Violence (Hit, Kicked etc)
16. Fire/Flames
77. Don't Know/Not Sure
99. Refused

C18Q02A - **EVERYBODY**
The next two questions deal with suicide. Many people feel that this subject is personal, but we would appreciate your trying to answer these questions. Remember that you don't have to answer any questions that you don't want to answer.

During the past 12 months, have you seriously considered taking your own life, even if you would not really do it?
1. Yes
2. No
7. Don't Know/Not Sure
9. Refused

C18Q02B - **C18Q02A = 1**
During the past 12 months, how many times have you made an attempt to take your own life:
1. ____ Times
7. Don't Know/Not Sure
9. Refused

For any respondents who answer A Yes or = Don't Know/ Not Sure or refuses to answer either question, read the following statement:
I have the toll-free phone number for the National Crisis Hotline here. If you have a pencil and paper, I can give you that toll-free number now. If respondent indicates he or she wants the number: the number is 1-888-784-2433.

C18Q03 - **EVERYBODY**
When you are driving, would you say that you use a seatbelt?
1. All of the time (99-100%)
2. Most of the time (80-98%)
3. Some of the time (30-79%)
4. Rarely (1-29%)
5. Never (0%)
9. Refused

C18Q04 - **EVERYBODY**
When you are driving and children age 15 and under are riding with you, would you say that they are in a car restraint all of the time, most of the time, some of the time, rarely, never?
1. All of the time (99-100%)
2. Most of the time (80-98%)
3. Some of the time (30-79%)
4. Rarely (1-29%)
5. Never (0%)
8. Never have child ride in car with me
7. Don't Know/Not Sure
9. Refused

The next few questions ask whether you have been a victim of interpersonal violence. This includes any time when you may have been intentionally hit, slapped, pushed, or kicked by someone, or had a weapon used against you, or you were otherwise hurt by another person. And it includes being hurt by other household members, as well as other people outside you household.

C18Q05
Was there ever a time during the last 12 months that you were a victim of interpersonal violence as I have just described it?
1. Yes
2. No **SKIP TO CLOSING**
7. Don't Know/Not Sure **SKIP TO CLOSING**
9. Refused **SKIP TO CLOSING**

C18Q05A - **ONLY GET IF C18Q05 = 1**
Thinking of all the incidents that may have happened to you, how many times during the past year were you a victim of interpersonal violence?
__ __ Number of times
88. None
77. Don't Know/Not Sure
99. Refused

C18Q05B - **ONLY GET IF C18Q05 = 1**
If C17Q05A=1 then, Thinking about that incident, where did it occur?
If C17Q05A>1 then, Thinking about the times that the incidents happen, where does it most often occur?
01. Home/Yard
02. Farm
03. Work Place and Premises
04. Place for Recreation and Sport
05. Street/Highway
06. Public Building (Other than School)
07. School Building/Grounds
08. Residential Institution
09. Other
77. Don't Know/Not Sure
99. Refused

C18Q05C - **ONLY GET IF C18Q05 = 1**
Which of the following best describes the person who hurts you the most often?
01. Father
02. Mother
03. Stepfather
04. Stepmother
05. Spouse or Partner
06. Ex-Spouse or Partner
07. Boyfriend/Girlfriend
08. Ex-Boyfriend/Girlfriend
09. Child
10. Sibling (Brother/Sister)
11. Other Relative
12. Non-Relative (Friend/Acquaintance)
13. Stranger
14. Other (List _____)
77. Don't Know/Not Sure
99. Refused

C18Q05D - **ONLY GET IF C18Q05 = 1**
Which of the following best describes the age of this person who hurts you the most often?
1. Under Age 12
2. Between age 13 to 17
3. Age 18 or older
7. Don't Know/Not Sure
9. Refused

C18Q05E - **ONLY GET IF C18Q05 = 1**
Was this person a member of your household?
1. Yes
2. No
7. Don't Know/Not Sure
9. Refused

C18Q05F - **ONLY GET IF C18Q05 = 1**
Was this person male or female?
1. Male

2. Female
7. Don't Know/Not Sure
9. Refused

For any respondents who answer A Yes or "Don't Know/ Not Sure or refuses to answer C18Q01, read the following statement:
I have the toll-free phone number for the toll-free NATIONAL DOMESTIC VIOLENCE HOTLINE (Linea Nacional sobre la Violencia Domestica no dineros?) here. If you have a pencil and paper, I can give you that number now. If respondent indicates he or she wants the number: the number is 1-800-799-SAFE (7233) 1-800-787-3224 (TTY)

C18Q05G - **ONLY GET IF C18Q05 = 1**
Thinking about the most recent occasion, did you sustain an injury that caused you to limit your usual activities for a day or longer or cause you to require medical attention?
1. Yes
2. No **SKIP TO C18Q05J**
7. Don't Know/Not Sure **SKIP TO C18Q05J**
9. Refused **SKIP TO C18Q05J**

C18Q05H - **ONLY GET IF C18Q05G = 1**
Were you examined by a doctor or other health care provider?
1. Yes
2. No **SKIP TO C18Q05J**
7. Don't Know/Not Sure **SKIP TO C18Q05J**
9. Refused **SKIP TO C18Q05J**

C18Q05I - **ONLY GET IF C18Q05H = 1**
Did the doctor refer you to violence services or counseling?
1. Yes
2. No
7. Don't Know/Not Sure
9. Refused

C18Q05J - **ONLY GET IF C18Q05 = 1**
Was the incident reported to the police or other authorities? Read only if necessary
1. Yes
2. No
7. Don't Know/Not Sure
9. Refused

Closing Statement
That's my last question. Your answers will be combined with others to give us information about the health practices of people in this state. Thank you very much for your time and cooperation.

INTERVIEWER NOTE: IF THIS INTERVIEW HAS RAISED QUESTIONS TO SOME REGARDING THEIR HEALTH AND THEY WOULD LIKE INFORMATION ON RESOURCES AVAILABLE TO THEM THE CHECK-YOUR-HEALTH HOTLINE IS AVAILABLE

THE TOLL-FREE NUMBER IS 888-222-2542

YOU MAY ALSO CALL THIS NUMBER TO VERIFY THE RESULTS OF THE SURVEY.