

# A Guide To This Report



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

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

## General Health Status

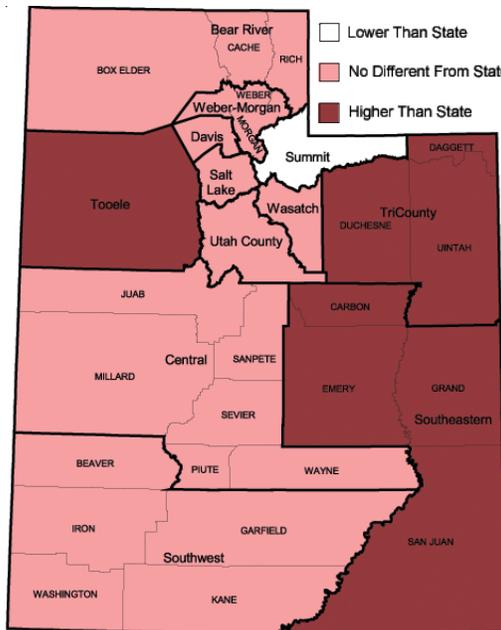


**Question:** *Would you say that in general your health is: excellent, very good, good, fair, or poor?*

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

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

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



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

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

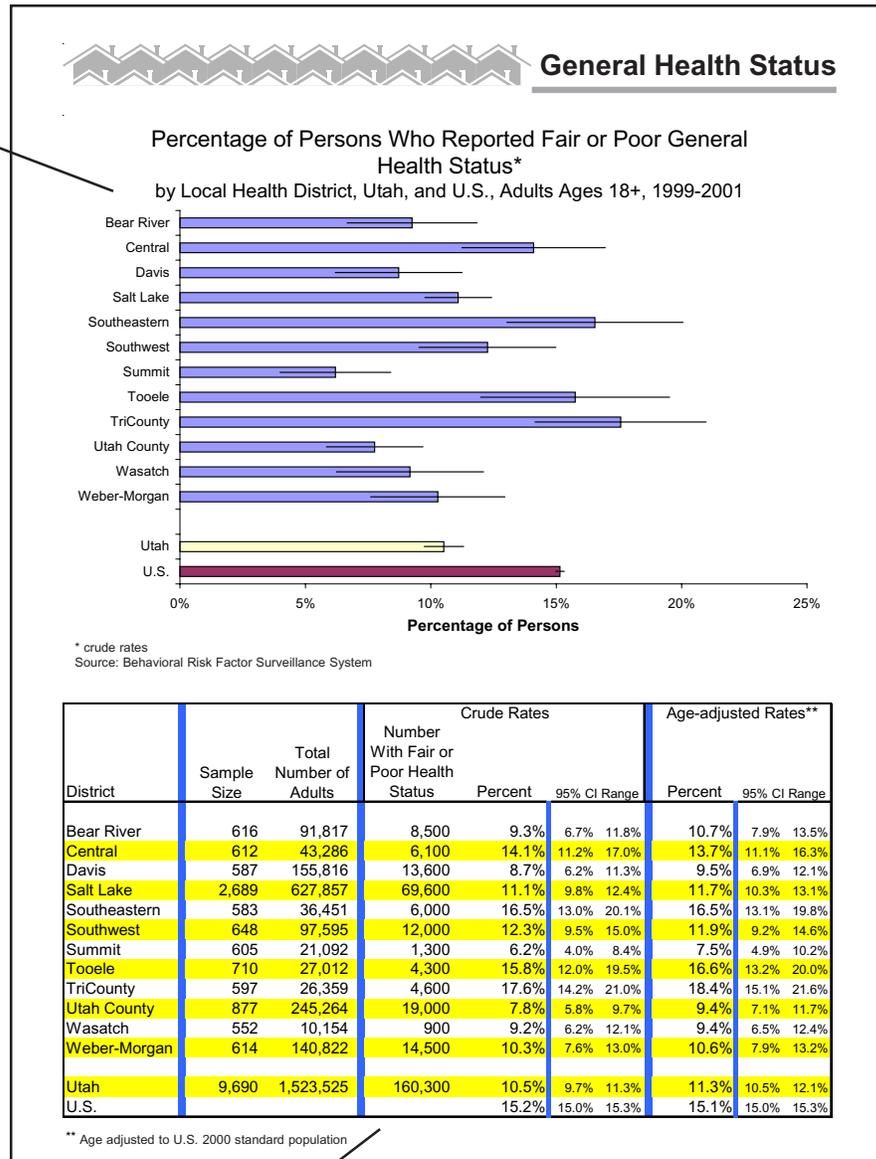
This text further defines and describes the measure being addressed.

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

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



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



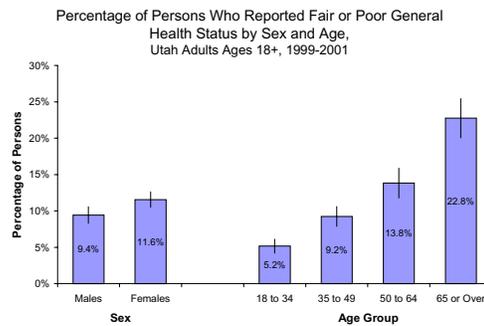
This table contains the data used to create the map and graph. It also includes the sample size, total number of adults in the relevant population, and the estimated number of those adults who obtained a positive (or negative) score on the measure.



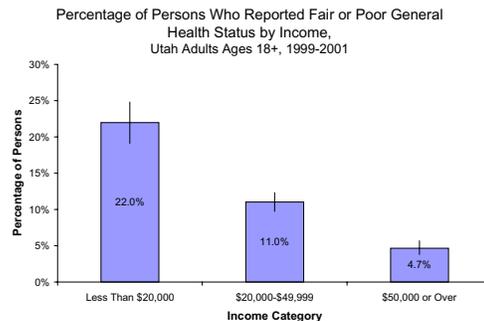
## General Health Status



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



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



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

**Utah Objective:** No objective listed.

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

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

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

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

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



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

		Utah Population		Survey Estimates				
Demographic Subgroup	Distribution	Number of Persons <sup>1</sup>	Percentage of Persons Who Reported Fair or Poor Health Status <sup>2</sup>			Number of Persons <sup>1,3</sup>	Distribution of Persons Who Reported Fair or Poor Health Status by Category	
			95% Confidence Intervals					
			Lower	Upper				
<b>General Health Status</b>								
<b>Percentage of Persons Who Reported Fair or Poor General Health Status by Selected Demographic Characteristics, Utah Adults Ages 18+, 1999 - 2001.</b>								
General Health Status								
Excellent	25.0%	381,300						
Very Good	36.5%	556,200						
Good	27.9%	425,700						
Fair	7.9%	121,000						
Poor	2.6%	39,300						
Total, All Adults	100.0%	1,523,500						
<b>Sex</b>								
Males	49.5%	753,700	9.4%	8.3%	10.6%	71,100	44.4%	
Females	50.5%	769,800	11.6%	10.5%	12.6%	89,000	56.6%	
Total, All Adults	100.0%	1,523,500	10.5%	9.7%	11.3%	160,300	100.0%	
<b>Age Group</b>								
18 to 34	42.6%	648,500	5.2%	4.2%	6.1%	33,500	22.1%	
35 to 49	28.5%	433,700	9.2%	7.9%	10.6%	40,000	26.4%	
50 to 64	16.4%	250,000	13.8%	11.8%	15.9%	34,600	22.8%	
65 or Over	12.6%	191,300	22.8%	20.1%	25.5%	43,500	28.7%	
Total, All Adults	100.0%	1,523,500	10.5%	9.7%	11.3%	160,300	100.0%	
<b>Race/Ethnicity</b>								
White, Non-Hispanic	88.4%	1,346,000	10.5%	9.7%	11.3%	141,600	88.5%	
Hispanic	8.3%	126,000	9.7%	6.9%	12.6%	12,300	7.7%	
Non-White, Non-Hispanic	3.4%	51,500	11.9%	7.1%	16.7%	6,100	3.8%	
Total, All Adults	100.0%	1,523,500	10.5%	9.7%	11.3%	160,300	100.0%	
<b>Income</b>								
Less Than \$20,000	13.6%	207,700	22.0%	19.1%	24.8%	45,600	29.8%	
\$20,000-\$49,999	47.8%	727,500	11.0%	9.7%	12.3%	80,200	52.3%	
\$50,000 or Over	38.6%	588,400	4.7%	3.8%	5.7%	27,400	17.9%	
Total, All Adults	100.0%	1,523,500	10.5%	9.7%	11.3%	160,300	100.0%	
<b>Education</b>								
Less Than High School	6.0%	91,700	24.5%	19.6%	29.5%	22,500	14.1%	
H.S. Grad or G.E.D.	30.1%	458,100	13.9%	12.4%	15.5%	63,900	39.9%	
Some Post High School	35.1%	534,100	8.9%	7.7%	10.2%	47,700	29.8%	
College Graduate	28.9%	439,500	5.9%	4.8%	7.0%	25,900	16.2%	
Total, All Adults	100.0%	1,523,500	10.5%	9.7%	11.3%	160,300	100.0%	

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