Milwaukee County Community Health Survey Report 2018

Commissioned by:

Ascension

Aurora Health Care

Children's Hospital of Wisconsin

Froedtert Health

In Partnership with: Center for Urban Population Health

Prepared by: **JKV Research, LLC**

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Purpose

The purpose of this project is to provide Milwaukee County with information for an assessment of the health status of residents. Primary objectives are to:

- 1. Gather specific data on behavioral and lifestyle habits of the adult population. Select information will also be collected about the respondent's household.
- 2. Gather data on the prevalence of risk factors and disease conditions existing within the adult population.
- 3. Compare, where appropriate, health data of residents to previous health studies.
- 4. Compare, where appropriate and available, health data of residents to state and national measurements along with Healthy People 2020 goals.

This report was commissioned by Ascension, Aurora Health Care, Children's Hospital of Wisconsin and Froedtert Health in partnership with the Center for Urban Population Health.

The survey was conducted by JKV Research, LLC. For technical information about survey methodology, contact Janet Kempf Vande Hey, M.S. at (920) 439-1399 or janet.vandehey@jkvresearch.com. For further information about the survey, contact any health department in Milwaukee County.

Methodology

Data Collection

Respondents were scientifically selected so the survey would be representative of all adults 18 years old and older in the county. The sampling strategy was two-fold. 1) A random-digit-dial landline sample of telephone numbers which included listed and unlisted numbers. The respondent within each household was randomly selected by computer and based on the number of adults in the household (n=647). 2) A cell phone-only sample where the person answering the phone was selected as the respondent (n=665). At least 8 attempts were made to contact a respondent in both samples. Screener questions verifying location were included. Data collection was conducted by Management Decisions Incorporated. A total of 1,312 telephone interviews were completed between February 20 and May 12, 2018.

Weighting of Data

For the landline sample, weighting was based on the number of adults in the household and the number of residential phone numbers, excluding fax and computer lines, to take into account the probability of selection. For the cellphone only sample, it was assumed the respondent, if an adult, was the primary cell phone user. Combined, post-stratification was conducted by sex and age to reflect the 2010 census proportion of these characteristics in the county.

Margin of Error

With a sample size of 1,312, we can be 95% sure that the sample percentage reported would not vary by more than ± 3 percent from what would have been obtained by interviewing all persons 18 years old and older with telephones in the county. This margin of error provides us with confidence in the data; 95 times out of 100, the true value will likely be somewhere between the lower and upper bound. The margin of error for smaller subgroups will be larger than ± 3 percent, since fewer respondents are in that category (e.g., adults 65 years old or older who were asked if they ever received a pneumonia vaccination).

In 2015, the Census Bureau estimated 721,561 adult residents in Milwaukee County. Thus, in this report, one percentage point equals approximately 7,220 adults. So, when 24% of respondents reported they had high blood cholesterol, this roughly equals 173,280 residents $\pm 21,660$ individuals. Therefore, from 151,620 to 194,940 residents likely have high blood cholesterol. Because the margin of error is $\pm 3\%$, events or health risks that are small will include zero.

In 2015, the Census Bureau estimated 382,778 occupied housing units in Milwaukee County. In certain questions of the Community Health Survey, respondents were asked to report information about their household. Using the 2015 household estimate, each percentage point for household-level data represents approximately 3,830 households.

Statistical Significance

The use of statistics is to determine whether a true difference between two percentages is likely to exist. If a difference is statistically significant, it is unlikely that the difference between the two percentages is due to chance. Conversely, if a difference is not statistically significant, it is likely there is no real difference. For example, the difference between the percentage of adults reporting in 2006 being told or treated for high blood cholesterol in the past three years (22%) and the percentage of adults reporting this in 2018 (24%) is not statistically significant and so it is likely not a real difference; it is within the margin of error of the survey.

Data Interpretation

Data that has been found "statistically significant" and "not statistically significant" are both important for stakeholders to better understand county residents as they work on action plans. Additionally, demographic crosstabulations provide information on whether or not there are statistically significant differences within the demographic categories (gender, age, education, household income level and marital status). Demographic data is broken down for race and ethnicity when there are enough cases for statistical analysis. Finally, Healthy People 2020 goals as well as Wisconsin and national percentages are included to provide another perspective of the health issues.

Throughout the report, some totals may be more or less than 100% due to rounding and response category distribution. Percentages occasionally may differ by one or two percentage points from previous reports or the Appendix as a result of rounding, recoding variables or response category distribution.

Definitions

Certain variables were recoded for better analysis and are listed below.

Marital status: Married respondents were classified as those who reported married and those who reported a member of an unmarried couple. All others were classified as not married.

Household income: It is difficult to compare household income data throughout the years as the real dollar value changes. Each year, the Census Bureau classifies household income into five equal brackets, rounded to the nearest dollar. It is not possible to exactly match the survey income categories to the Census Bureau brackets since the survey categories are in increments of \$10,000 or more; however, it is the best way to track household income. This report looks at the Census Bureau's bottom 40%, middle 20% and top 40% household income brackets each survey year. In 2006, the bottom 40% income bracket included survey categories less than \$30,001, the middle 20% income bracket was \$30,001 to \$50,000 and the top 40% income bracket was at least \$50,001. In 2009, 2012, 2015 and 2018, the bottom 40% income bracket included survey categories less than \$40,001, the middle 20% income bracket was \$40,001 to \$60,000 and the top 40% income bracket was at least \$60,001.

The 2008 recommended amount of physical activity by the Centers for Disease Control is moderate activity for at least 30 minutes on five or more days of the week or vigorous activity for at least 20 minutes on three or more days of the week. Moderate physical activity includes walking briskly, bicycling, vacuuming, gardening or anything else that causes small increases in breathing or heart rate. Vigorous physical activity includes running, aerobics, heavy yard work, or anything else that causes large increases in breathing or heart rate. Insufficient physical activity includes participation in either activity, but not for the duration or the frequency recommended. Inactive respondents reported no moderate or vigorous physical activity in a typical week.

Overweight status was calculated using the Center for Disease Control's Body Mass Index (BMI). Body Mass Index is calculated by using kilograms/meter². A BMI of 25.0 to 29.9 is considered overweight and 30.0 or more as obese. In this report "overweight" includes both overweight and obese respondents.

Current smoker is defined as someone who smoked a tobacco cigarette at least some days.

The definition for binge drinking varies. Currently, the Centers for Disease Control (CDC) defines binge drinking as four or more drinks per occasion for females and five or more drinks per occasion for males to account for weight and metabolism differences. Previously, the CDC defined binge drinking as five or more drinks at one time, regardless of gender. In 2012, 2015 and 2018, the Milwaukee County Health Survey defined binge drinking as four or more drinks per occasion for females and five or more drinks per occasion for males to account for weight and metabolism differences. In 2006 and 2009, the definition was five or more drinks, regardless of gender.

Demographic Profile

The following table includes the weighted demographic breakdown of respondents in the county.

Table 1. Weighted Demographic Variables of Community Health Survey Respondents for 2018[®]

Table 1. Weighted Demographic Variable	Survey Results
TOTAL	100%
Gender	
Male	48%
Female	52
Age	
18 to 24	15%
25 to 34	21
35 to 44	17
45 to 54	18
55 to 64	14
65 and Older	15
Race ¹	
White	55%
African American	32
Other	13
Hispanic Origin	
Hispanic	10%
Non-Hispanic	90
Education	
High School Graduate or Less	32%
Some Post High School	34
College Graduate	34
Household Income	
Bottom 40 Percent Bracket	42%
Middle 20 Percent Bracket	17
Top 40 Percent Bracket	29
Not Sure/No Answer	12
Married	35%

[®]Percentages occasionally may differ by 1 or 2 percentage points from the Appendix as a result of rounding, recoding variables and response category distribution.

¹Other includes the following: Asian, American Indian, Alaska Native, Native Hawaiian or other Pacific Islander, another race or multiple races

Summary

This research provides valuable behavioral data, lifestyle habits, and the prevalence of risk factors and disease conditions of Milwaukee County residents. The following data are highlights of the comprehensive study.

Health Care Coverage						Health Conditions in Past 3 Years					
Milwaukee County	2006	2009	2012	2015	2018	Milwaukee County	2006	2009	2012	2015	2018
Personally Not Currently Covered						High Blood Pressure	27%	29%	30%	29%	28%
18 and Older	11%	12%	14%	4%	9%	High Blood Cholesterol	22%	22%	21%	20%	
18 to 64 Years Old		15%	16%	5%	11%	Mental Health Condition		13%	14%	18%	
At Least One Household Member Not						Diabetes	8%	9%	10%	11%	
Covered in Past Year	26%	25%	21%	14%	8%	Heart Disease/Condition	8%	9%	8%	9%	8%
						Asthma (Current)	10%	12%	12%	14%	12%
Other Research: (2016)				WI	U.S.						
Personally Not Covered (Currently)					10%	Physical Health and Nutrition					
						Milwaukee County	2006	2009	2012	2015	2018
Unmet Care in Past Year						Physical Activity/Week					
Milwaukee County			2012	2015	2018	Moderate Activity (5 Times/30 Min)	33%	31%	35%	39%	36%
Someone in Household in Past Year						Vigorous Activity (3 Times/20 Min)	22%	19%	24%	31%	35%
Prescription Drug Not Taken Due to Cost			11%	11%	12%	Recommended Moderate or Vigorous	45%	41%	47%	49%	48%
Unmet Medical Care Need			11%	12%	8%	Overweight Status					
Unmet Dental Care Need			19%	18%	15%	Overweight (BMI 25.0+)	63%	66%	66%	69%	64%
Unmet Mental Health Care Need			4%	4%	3%	Obese (BMI 30.0+)	28%	32%	33%	38%	
						Fruit Intake (2+ Servings/Day)	61%	58%	62%	62%	56%
Health Information and Services						Vegetable Intake (3+ Servings/Day)	24%	21%	26%	28%	
Milwaukee County	2006	2009	<u>2012</u>	<u>2015</u>	2018	At Least 5 Fruit/Vegetables/Day	35%	31%	35%	38%	37%
Have a Primary Care Physician	-			86%	82%						
Primary Health Services						Other Research: (2016)				WI	<u>U.S.</u>
Doctor/Nurse Practitioner's Office	77%	73%	70%	65%	62%	Overweight (BMI 25.0+)				67%	65%
Urgent Care Center	3%	6%	7%	12%	18%	Obese (BMI 30.0+)				31%	30%
Hospital Emergency Room	6%	7%	7%	11%	6%						
Public Health Clinic/Com. Health Center	5%	7%	6%	4%	2%	Women's Health					
Hospital Outpatient	3%	2%	3%	2%	2%	Milwaukee County	2006	2009	2012	2015	2018
No Usual Place	5%	4%	6%	5%	8%	Mammogram (50+; Within Past 2 Years)	78%	78%	77%	81%	77%
Advance Care Plan	32%	31%	29%	31%	36%	Bone Density Scan (65 and Older)	67%	73%	71%	82%	83%
Dental Checkup (Past Year)	63%	60%	56%	62%	63%				-		
Flu Vaccination (Past Year)						Other Research: (2016)				<u>WI</u>	<u>U.S.</u>
18 and Older	36%	40%	38%	48%	47%	Mammogram (50 - 74; Within Past 2 Years	s)			80%	78%
65 and Older	71%	69%	63%	76%	75%						
		_		_		Colorectal Cancer Screenings (50 and O	lder)		_		
Other Research: (2016)				<u>WI</u>	<u>U.S.</u>	Milwaukee County	<u>2006</u>	<u>2009</u>	2012	2015	2018
Flu Vaccination (65 and Older, Past Year)				50%	59%	Blood Stool Test (Within Past Year)	23%		14%	14%	13%
Dental Checkup (Past Year)				73%	66%	Sigmoidoscopy (Within Past 5 Years)		10%	10%	11%	7%
						Colonoscopy (Within Past 10 Years)		58%	61%	67%	67%
Tobacco Use in Past Month						Screening in Recommended Time Frame		61%	67%	72%	72%
Milwaukee County	2006	2009	2012	2015	2018				_		
Cigarette Smokers	26%	25%	24%	19%	16%	Other Research: (2016)				<u>WI</u>	<u>U.S.</u>
Cigars, Cigarillos or Little Cigars				5%	6%	Screening in Recommended Time Frame				74%	68%
Electronic Cigarettes				6%	4%						
						Mental Health Status					
Other Research: (2016)				WI	<i>U.S.</i>	Milwaukee County	2006	2009	2012	2015	2018
Cigarette Smokers				17%	17%	Felt Sad, Blue or Depressed					
Electronic Cigarettes				5%	5%	Always/Nearly Always (Past Month)	8%	8%	7%	7%	8%
						Considered Suicide (Past Year)	6%	5%	5%	6%	6%
Smoking Policy at Home						. ,					
Milwaukee County		2009	2012	2015	2018	Alcohol Use in Past Month					
Not Allowed Anywhere		64%	74%	75%	78%	Milwaukee County	2006	2009	2012	2015	2018
Allowed in Some Places/at Some Times		14%	10%	10%	10%	Binge Drinker	19%	20%			32%
Allowed Anywhere		4%	4%	2%	2%						
No Rules Inside Home		18%	12%	13%	10%	Other Research: (2016)				WI	U.S.
						Binge Drinker					17%

Household Problems in Past Year						Personal Safety in Past Year			
	006	2009	2012	2015	2018	Milwaukee County 2006 2009	2012	2015	2018
·	3%	3%	2%	2%	2%	Afraid for Their Safety 10% 9%	7%	6%	9%
Marijuana			2%	2%	1%	Pushed, Kicked, Slapped, or Hit 5% 6%	4%	3%	9%
Cocaine, Heroin or Other Street Drugs			<1%	<1%	2%	At Least One of the Safety Issues 13% 12%	9%	8%	14%
Misuse of Prescription or OTC Drugs			<1%	2%	1%	•			
Gambling			1%	1%	<1%	Children in Household			
						Milwaukee County	2012	2015	<u>2018</u>
Top Community Health Issues						Personal Health Doctor/Nurse Who			
Milwaukee County					<u>2018</u>	Knows Child Well and Familiar with History	89%	91%	95%
Chronic Disease or Cancer					34%	Visited Personal Doctor/Nurse for			
Illegal Drug Use or Prescription/OTC Drug A	buse				27%	Preventive Care (Past Year)	93%	92%	93%
Access to Health Care					20%	Did Not Receive Care Needed (Past Year)			
Infectious Diseases	tious Diseases 17% Medical Care			2%	2%	3%			
Violence or Crime					16%	Dental Care	8%	9%	6%
Overweight or Obesity					15%	Specialist	2%	1%	5%
Mental Health or Depression					15%	Current Asthma	11%	11%	17%
Alcohol Use or Abuse					9%	Safe in Community/Neighborhood (Seldom/Never)	4%	5%	9%
Access to Affordable Healthy Food					6%	Screen Time (2 or Fewer Hours per Day)			38%
Tobacco Use					5%	Soda Consumption (0 in Past Week)			61%
Environmental Issues					5%	Children 2 or Younger			
Affordable Health Care					4%	As Infant, Slept in Bed with Respondent/Other Person	8%	7%	11%
Lack of Physical Activity					4%	Children 5 to 17 Years Old			
Lead Poisoning					3%	Physical Activity (60 Min./5 or More Days/Week)	66%	69%	58%
Driving Problems/Aggressive Driving/Drunk	Drivi	ing			3%	Unhappy, Sad or Depressed in Past 6 Months			
						Always/Nearly Always	7%	3%	5%
		-		-		Experienced Some Form of Bullying (Past Year)	22%	18%	16%
						Verbally Bullied	18%	16%	13%
						Physically Bullied	10%	5%	6%
						Cyber Bullied	2%	2%	3%

Overall Health and Health Care Key Findings

In 2018, 9% of respondents reported they were not currently covered by health care insurance; respondents who were male, 18 to 24 years old, African American, Hispanic, with a high school education or less, in the bottom 40 percent household income bracket or unmarried were more likely to report this. Eight percent of respondents reported someone in their household was not covered at least part of the time in the past year; respondents who were in the bottom 40 percent household income bracket or unmarried were more likely to report this. From 2006 to 2018, the overall percent statistically remained the same for respondents 18 and older or 18 to 64 years old who reported no current personal health care coverage while from 2015 to 2018, there was a noted increase. From 2006 to 2018, the overall percent statistically decreased for respondents who reported someone in the household was not covered at least part of the time in the past year, as well as from 2015 to 2018.

In 2018, 12% of respondents reported that someone in their household had not taken their prescribed medication due to prescription costs in the past year; respondents in the middle 20 percent household income bracket or in households with children were more likely to report this. Eight percent of respondents reported in the past year someone in the household did not receive the medical care needed; respondents in the bottom 40 percent household income bracket or in households with children were more likely to report this. Fifteen percent of respondents reported in the past year someone in the household did not receive the dental care needed; respondents in the bottom 60 percent household income bracket or in households without children were more likely to report this. Three percent of respondents reported in the past year someone in the household did not receive the mental health care needed. From 2012 to 2018, the overall percent statistically remained the same for respondents who reported someone in their household had not taken their prescribed medication due to prescription costs or a household member did not receive the mental health care needed, as well as from 2015 to 2018. From 2012 to 2018, the overall percent statistically decreased for respondents who reported someone in their household did not receive the medical care needed or a household member did not receive the dental care needed, as well as from 2015 to 2018.

In 2018, 82% of respondents reported they have a primary care physician they regularly see for check-ups and when they are sick; respondents who were female, 65 and older, non-white and non-African American, non-Hispanic, with at least some post high school education, in the top 40 percent household income bracket or married respondents were more likely to report a primary care physician. Sixty-two percent of respondents reported their primary place for health services when they are sick was from a doctor's or nurse practitioner's office while 18% reported urgent care center. Respondents who were female, 65 and older, white, non-Hispanic, with a college education, in the top 40 percent household income bracket or married respondents were more likely to report a doctor's or nurse practitioner's office as their primary health care when they are sick. Respondents who were female, 25 to 44 years old, African American or non-Hispanic were more likely to report urgent care as their primary health care. Six percent of respondents reported hospital emergency room as their primary health care; respondents who were 35 to 44 years old, non-white and non-African American, with some post high school education or less or in the bottom 40 percent household income bracket were more likely to report this. Two percent of respondents each reported their primary place for health services when they are sick was a public health clinic/community health center or a hospital outpatient department. Thirty-six percent of respondents had an advance care plan; respondents who were female, 65 and older, white or non-Hispanic were more likely to report an advance care plan. From 2015 to 2018, there was a statistical decrease in the overall percent of respondents reporting they have a primary care doctor, nurse practitioner, physician assistant or primary care clinic they regularly go to for checkups and when they are sick. From 2006 to 2018, there was a statistical decrease in the overall percent of respondents reporting their primary place for health services when they are sick was a doctor's or nurse practitioner's office while from 2015 to 2018, there was no statistical change. From 2006 to 2018, there was a statistical increase in the overall percent of respondents reporting their primary place was an urgent care center, as well as from 2015 to 2018. From 2006 to 2018, there was no statistical change in the overall percent of respondents reporting their primary place was a hospital emergency room while from 2015 to 2018, there was a statistical decrease. From 2006 to 2018, there was a statistical decrease in the overall percent of respondents reporting their primary place was a public health clinic or community health center, as well as from 2015 to 2018. From 2006 to 2018, there was no statistical change in the overall percent of respondents reporting their primary place was a hospital outpatient department, as well as from 2015 to 2018. From 2006 to 2018, there was a statistical increase in the overall percent of respondents who reported having an advance care plan, as well as from 2015 to 2018.

In 2018, 63% of respondents reported a visit to the dentist in the past year. Respondents who were 35 to 44 years old, white, non-Hispanic, with a college education, in the top 40 percent household income bracket or married respondents were more likely to report a dental checkup in the past year. From 2006 to 2018, there was no statistical change in the overall percent of respondents reporting a dental checkup in the past year, as well as from 2015 to 2018.

In 2018, 47% of respondents had a flu vaccination in the past year. Respondents who were female, 65 and older, white, non-Hispanic, with a college education or married respondents were more likely to report a flu vaccination. From 2006 to 2018, there was a statistical increase in the overall percent of respondents 18 and older who reported a flu vaccination in the past year while from 2015 to 2018, there was no statistical change. From 2006 to 2018, there was no statistical change in the overall percent of respondents 65 and older who reported a flu vaccination in the past year, as well as from 2015 to 2018.

Health Risk Factors Key Findings

In 2018, out of six health conditions listed, the most often mentioned in the past three years was high blood pressure (28%), high blood cholesterol (24%) or a mental health condition (23%). Respondents who were 65 and older, white, non-Hispanic, with some post high school education, in the bottom 40 percent household income bracket, who were overweight or inactive were more likely to report high blood pressure. Respondents who were female, 65 and older, African American, non-Hispanic, with a high school education or less, in the bottom 40 percent household income bracket, who were overweight or inactive were more likely to report high blood cholesterol. Respondents who were female, 18 to 24 years old, African American, Hispanic, with a high school education or less, in the bottom 40 percent household income bracket, who were unmarried, not overweight, inactive, met the recommended amount of physical activity or smokers were more likely to report a mental health condition. Ten percent of respondents reported diabetes; respondents who were 65 and older, in the bottom 40 percent household income bracket, overweight, inactive or nonsmokers were more likely to report this. Eight percent reported they were treated for, or told they had heart disease/condition in the past three years; respondents who were 65 and older, white, non-Hispanic, with some post high school education, in the bottom 60 percent household income bracket, who were overweight or inactive were more likely

to report this. Twelve percent reported current asthma; respondents who were female, 25 to 64 years old, non-Hispanic, in the bottom 40 percent household income bracket or unmarried were more likely to report this. From 2006 to 2018, there was no statistical change in the overall percent of respondents who reported high blood pressure, diabetes, heart disease/condition or current asthma, as well as from 2015 to 2018. From 2006 to 2018, there was no statistical change in the overall percent of respondents who reported high blood cholesterol while from 2015 to 2018, there was a noted increase. From 2009 to 2018, there was a statistical increase in the overall percent of respondents who reported a mental health condition, as well as from 2015 to 2018.

In 2018, 8% of respondents reported they always or nearly always felt sad, blue or depressed in the past month; respondents who were 25 to 64 years old, non-white and non-African American, with a high school education or less, in the bottom 40 percent household income bracket or in households without children were more likely to report this. Six percent of respondents felt so overwhelmed they considered suicide in the past year; respondents who were 18 to 44 years old, African American, non-Hispanic, with a high school education or less, in the bottom 40 percent household income bracket or unmarried respondents were more likely to report this. From 2006 to 2018, there was no statistical change in the overall percent of respondents who reported they always or nearly always felt sad/blue/depressed in the past month or they considered suicide in the past year, as well as from 2015 to 2018.

Behavioral Risk Factors Key Findings

In 2018, 36% of respondents did moderate physical activity five times a week for 30 minutes. Thirty-five percent of respondents did vigorous activity three times a week for 20 minutes. Combined, 48% met the recommended amount of physical activity; respondents who were male, 18 to 24 years old, African American, Hispanic, with a high school education or less or who were not overweight were more likely to report this. From 2006 to 2018, there was no statistical change in the overall percent of respondents who reported moderate physical activity five times a week for at least 30 minutes, as well as from 2015 to 2018. From 2006 to 2018, there was a statistical increase in the overall percent of respondents who reported vigorous physical activity three times a week for at least 20 minutes, as well as from 2015 to 2018. From 2006 to 2018, there was no statistical change in the overall percent of respondents who met the recommended amount of physical activity, as well as from 2015 to 2018.

In 2018, 64% of respondents were classified as at least overweight while 38% were obese. Respondents who were 45 to 54 years old, non-white and non-African American, non-Hispanic, with some post high school education, in the top 40 percent household income bracket, who were married or inactive were more likely to be classified as at least overweight. Respondents who were female, 45 to 54 years old, non-white and non-African American, non-Hispanic, with some post high school education or inactive respondents were more likely to be obese. From 2006 to 2018, there was no statistical change in the overall percent of respondents being at least overweight while from 2015 to 2018, there was a statistical increase in the overall percent of respondents being obese while from 2015 to 2018, there was no statistical change.

In 2018, 56% of respondents reported two or more servings of fruit while 30% reported three or more servings of vegetables on an average day. Respondents who were female, 18 to 24 years old, white, Hispanic, not overweight or who met the recommended amount of physical activity were more likely to report at least two servings of fruit. Respondents who were female, 18 to 24 years old, Hispanic, with a college education, not overweight or who met the recommended amount of physical activity were more likely to report at least three servings of vegetables on an average day. Thirty-seven percent of respondents reported five or more servings of fruit/vegetables on an average day; respondents who were female, 18 to 24 years old, African American, Hispanic, with a college education, not overweight or who met the recommended amount of physical activity were more likely to report this. From 2006 to 2018, there was a statistical decrease in the overall percent of respondents who reported at least two servings of fruit, as well as from 2015 to 2018. From 2006 to 2018, there was a statistical increase in the overall percent of respondents who reported at least three servings of vegetables while from 2015 to 2018, there was no statistical change. From 2006 to 2018, there was no statistical change in the overall percent of respondents who reported at least five servings of fruit/vegetables, as well as from 2015 to 2018.

In 2018, 77% of female respondents 50 and older reported a mammogram within the past two years; married respondents were more likely to report this. Eighty-three percent of female respondents 65 and older had a bone density scan. *From 2006 to 2018, there was no statistical change in the overall percent of respondents 50 and older who reported having a*

mammogram within the past two years, as well as from 2015 to 2018. From 2006 to 2018, there was a statistical increase in the overall percent of respondents 65 and older who reported a bone density scan while from 2015 to 2018, there was no statistical change.

In 2018, 13% of respondents 50 and older reported a blood stool test within the past year. Seven percent of respondents 50 and older reported a sigmoidoscopy within the past five years while 67% reported a colonoscopy within the past ten years. This results in 72% of respondents meeting the current colorectal cancer screening recommendations. Respondents in the top 60 percent household income bracket or married respondents were more likely to meet the recommendation. From 2006 to 2018, there was a statistical decrease in the overall percent of respondents who reported a blood stool test within the past year while from 2015 to 2018, there was no statistical change. From 2009 to 2018, there was no statistical change in the overall percent of respondents who reported a sigmoidoscopy in the past five years while from 2015 to 2018, there was a statistical decrease. From 2009 to 2018, there was a statistical increase in the overall percent of respondents who reported a colonoscopy within the past ten years while from 2015 to 2018, there was no statistical change. From 2009 to 2018, there was a statistical increase in the overall percent of respondents who reported they had at least one of these tests in the recommended time frame while from 2015 to 2018, there was no statistical change.

In 2018, 16% of respondents were current tobacco cigarette smokers; respondents who were 35 to 44 years old, non-Hispanic, with a high school education or less, in the bottom 40 percent household income bracket or unmarried respondents were more likely to be a smoker. From 2006 to 2018, there was a statistical <u>decrease</u> in the overall percent of respondents who were current tobacco cigarette smokers, as well as from 2015 to 2018.

In 2018, 78% of respondents reported smoking is not allowed anywhere inside the home. Respondents who were in the top 40 percent household income bracket, married, nonsmokers or in households with children were more likely to report smoking is not allowed anywhere inside the home. From 2009 to 2018, there was a statistical increase in the overall percent of respondents who reported smoking is not allowed anywhere inside the home, as well as from 2015 to 2018.

In 2018, 6% of respondents used cigars, cigarillos or little cigars in the past month; respondents who were male, 25 to 54 years old, African American, with some post high school education or less or unmarried respondents were more likely to report this. Four percent of respondents used electronic cigarettes in the past month; respondents who were male, 25 to 34 years old, Hispanic, with some post high school education or unmarried respondents were more likely to report this. From 2015 to 2018, there was no statistical change in the overall percent of respondents who reported in the past month they used cigars/cigarillos/little cigars. From 2015 to 2018, there was a statistical decrease in the overall percent of respondents who reported in the past month they used electronic cigarettes.

In 2018, 32% of respondents were binge drinkers in the past month. Respondents 25 to 34 years old, with some post high school education, in the top 40 percent household income bracket or unmarried respondents were more likely to have binged at least once in the past month. From 2006 to 2018, there was a statistical increase in the overall percent of respondents who reported binge drinking in the past month while from 2015 to 2018, there was no statistical change. Please note: binge drinking definition was 5+ drinks in 2006 and 2009 while it was 4+ drinks for females and 5+ drinks for males since 2012.

In 2018, 2% of respondents reported someone in their household experienced a problem, such as legal, social, personal or physical in connection with drinking alcohol in the past year. Two percent of respondents reported someone in their household experienced a problem in connection with cocaine/heroin/other street drugs. One percent of respondents each reported someone in their household experienced a problem in connection with marijuana or with the misuse of prescription drugs/over-the-counter drugs. Less than one percent of respondents reported someone in their household experienced a problem in connection with gambling. From 2006 to 2018, there was no statistical change in the overall percent of respondents reporting a household problem in connection with drinking alcohol, as well as from 2015 to 2018. From 2012 to 2018, there was a statistical increase in the overall percent of respondents reporting a household problem with cocaine/heroin/other street drugs, as well as from 2015 to 2018. From 2012 to 2018, there was no statistical change in the overall percent of respondents reporting a household problem with marijuana, the misuse of prescription drugs/over-the-counter drugs or gambling, as well as from 2015 to 2018.

In 2018, 9% of respondents reported someone made them afraid for their personal safety in the past year; respondents who were male, 18 to 24 years old, African American, Hispanic, with a high school education or less, in the bottom 40 percent household income bracket or unmarried respondents were more likely to report this. Nine percent of respondents reported they had been pushed, kicked, slapped or hit in the past year; respondents who were male, 18 to 24 years old, non-white and non-African American, Hispanic, with a high school education or less, in the bottom 40 percent household income bracket or unmarried respondents were more likely to report this. A total of 14% reported at least one of these two situations; respondents who were male, 18 to 24 years old, non-white and non-African American, Hispanic, with some post high school education or less, in the bottom 40 percent household income bracket or unmarried respondents were more likely to report this. From 2006 to 2018, there was no statistical change in the overall percent of respondents reporting they were afraid for their personal safety while from 2015 to 2018, there was a statistical increase in the overall percent of respondents reporting they were pushed, kicked, slapped or hit, as well as from 2015 to 2018. From 2006 to 2018, there was no statistical change in the overall percent of respondents reporting at least one of the two personal safety issues while from 2015 to 2018, there was a statistical increase.

Children in Household Key Findings

In 2018, a random child was selected for the respondent to talk about the child's health and behavior. Ninety-five percent of respondents reported they have one or more persons they think of as their child's personal doctor or nurse, with 93% reporting their child visited their personal doctor or nurse for preventive care during the past year. Six percent reported there was a time in the past year their child did not receive the dental care needed while 5% percent reported their child was not able to visit a specialist they needed to see. Three percent reported their child did not receive the medical care needed. Seventeen percent of respondents reported their child currently had asthma. Nine percent of respondents reported their child was seldom or never safe in their community. Eleven percent of respondents with a child who was 2 years old or younger reported when their child was an infant, he/she slept in bed with them or another person. Thirtyeight percent of respondents reported their child has two or fewer hours of screen time on an average school/week day. Sixty-one percent of respondents reported their child did not drink soda or pop in the past week, excluding diet soda. Fifty-eight percent of respondents reported their 5 to 17 year old child was physically active five times a week for 60 minutes. Five percent of respondents reported their 5 to 17 year old child always or nearly always felt unhappy, sad or depressed in the past six months. Sixteen percent reported their 5 to 17 year old child experienced some form of bullying in the past year; 13% reported verbal bullying, 6% reported physical bullying and 3% reported cyber bullying. From 2012 to 2018, there was a statistical increase in the overall percent of respondents reporting their child has a personal doctor or nurse, as well as from 2015 to 2018. From 2012 to 2018, there was no statistical change in the overall percent of respondents reporting their child visited their personal doctor/nurse for preventive care, as well as from 2015 to 2018. From 2012 to 2018, there was no statistical change in the overall percent of respondents reporting their child had an unmet medical need or unmet dental need, as well as from 2015 to 2018. From 2012 to 2018, there was a statistical increase in the overall percent of respondents reporting their child was unable to see a specialist when needed, as well as from 2015 to 2018. From 2012 to 2018, there was a statistical increase in the overall percent of respondents who reported their child had asthma or their child was seldom/never safe in their community, as well as from 2015 to 2018. From 2012 to 2018, there was no statistical change in the overall percent of respondents who reported when their child was an infant, he/she slept in bed with them or another person, as well as from 2015 to 2018. From 2012 to 2018, there was a statistical decrease in the overall percent of respondents who reported their 5 to 17 year old child was physically active five times a week for at least 60 minutes, as well as from 2015 to 2018. From 2012 to 2018, there was no statistical change in the overall percent of respondents who reported their 5 to 17 year old child always or nearly always felt unhappy/sad/depressed, as well as from 2015 to 2018. From 2012 to 2018, there was no statistical change in the overall percent of respondents who reported their child was bullied or in the type of bullying, as well as from 2015 to 2018.

Top Community Health Issues Key Findings

In 2018, respondents were asked to list the top three community health issues. The most often cited was chronic diseases or cancer (34%) followed by illegal drug use or prescription/over-the-counter drug abuse (27%). Respondents who were 18 to 24 years old, African American, Hispanic, with a high school education or less, in the bottom 40 percent household income bracket or unmarried respondents were more likely to report chronic diseases or cancer as a top community health issue. Respondents who were 55 to 64 years old, non-African American, non-Hispanic, with at least some post high school education or in the top 40 percent household income bracket were more likely to report illegal drug use or

prescription/over-the-counter drug abuse. Twenty percent of respondents reported access to health care as a top community health issue; respondents who were female, non-African American, with at least some post high school education or in the top 40 percent household income bracket were more likely to report this. Seventeen percent of respondents reported infectious diseases. Respondents who were male, 18 to 24 years old, African American, Hispanic, with a high school education or less, in the bottom 40 percent household income bracket or unmarried respondents were more likely to report infectious diseases. Sixteen percent reported violence or crime as a top community health issue. Respondents who were 18 to 24 years old. African American, Hispanic or with a high school education or less were more likely to report violence or crime. Fifteen percent reported overweight or obesity as a top community health issue. Respondents who were female, 18 to 24 years old, non-Hispanic or with a college education were more likely to report overweight or obesity. Fifteen percent of respondents reported mental health or depression; respondents who were 25 to 34 years old, 45 to 64 years old, white, with a college education or in the middle 20 percent household income bracket were more likely to report this. Nine percent of respondents reported alcohol use or abuse as a top community health issue; respondents who were male, 25 to 34 years old, non-African American, non-Hispanic or with a college education were more likely to report this. Six percent of respondents reported access to affordable healthy food as a top community health issue. Respondents who were non-Hispanic, with a college education or married respondents were more likely to report access to affordable healthy food. Five percent of respondents reported tobacco use as a top community health issue. Respondents who were male, 25 to 34 years old, non-white and non-African American, Hispanic or in the top 40 percent household income bracket were more likely to report tobacco use. Five percent of respondents reported environmental issues; respondents 55 to 64 years old or in the middle 20 percent household income bracket were more likely to report this. Four percent of respondents reported affordable health care; respondents who were 35 to 44 years old, white, Hispanic, with a college education, in the top 40 percent household income bracket or married respondents were more likely to report this. Four percent of respondents reported lack of physical activity as a top community health issue. Respondents who were non-white and non-African American, non-Hispanic or with a college education were more likely to report lack of physical activity. Three percent of respondents reported lead poisoning; respondents who were 35 to 44 years old, white, Hispanic, with a college education or married were more likely to report this. Three percent of respondents reported driving problems/aggressive driving/drunk driving; respondents with a college education, in the middle 20 percent household income bracket or married respondents were more likely to report this.

Key Findings

Health Care Coverage (Figures 1 & 2; Tables 2 & 3)

KEY FINDINGS: In 2018, 9% of respondents reported they were not currently covered by health care insurance; respondents who were male, 18 to 24 years old, African American, Hispanic, with a high school education or less, in the bottom 40 percent household income bracket or unmarried were more likely to report this. Eight percent of respondents reported someone in their household was not covered at least part of the time in the past year; respondents who were in the bottom 40 percent household income bracket or unmarried were more likely to report this.

> From 2006 to 2018, the overall percent statistically remained the same for respondents 18 and older or 18 to 64 years old who reported no current personal health care coverage while from 2015 to 2018, there was a noted increase. From 2006 to 2018, the overall percent statistically decreased for respondents who reported someone in the household was not covered at least part of the time in the past year, as well as from 2015 to 2018.

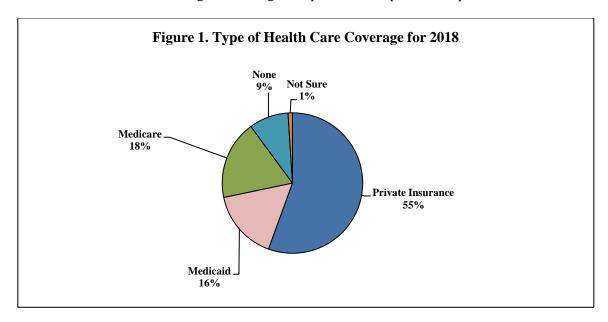
Personally Not Currently Covered

The Healthy People 2020 goal for all persons having medical insurance is 100%. (Objective AHS-1.1)

In 2016, 9% of Wisconsin respondents 18 and older reported they personally did not have health care coverage. Ten percent of U.S. respondents reported this. Ten percent of Wisconsin respondents 18 to 64 years old did not have health care coverage while 12% of U.S. respondents 18 to 64 years old reported this (2016 Behavioral Risk Factor Surveillance).

2018 Findings

Nine percent of respondents reported they were not currently covered by any health care insurance. Fifty-five percent reported private insurance through an employer while 16% reported Medicaid, including medical assistance, Title 19 or Badger Care. Eighteen percent of respondents reported Medicare.



Male respondents were more likely to report no current personal health care coverage (16%) compared to female respondents (4%).

- Thirty-seven percent of respondents 18 to 24 years old reported no current personal health care coverage compared to 3% of those 45 to 64 years old or less than one percent of respondents 65 and older.
- African American respondents were more likely to report no current personal health care coverage (20%) compared to respondents who were non-white and non-African American (12%) or white respondents (2%).
- Hispanic respondents were more likely to report no current personal health care coverage (35%) compared to non-Hispanic respondents (7%).
- Twenty-three percent of respondents with a high school education or less reported no current personal health care coverage compared to 5% of those with some post high school education or 2% of respondents with a college education.
- Sixteen percent of respondents in the bottom 40 percent household income bracket reported no current personal health care coverage compared to 3% of those in the middle 20 percent income bracket or 2% of respondents in the top 40 percent household income bracket.
- Unmarried respondents were more likely to report no current personal health care coverage compared to married respondents (13% and 3%, respectively).

- From 2006 to 2018, there was no statistical change in the overall percent of respondents 18 and older as well as for respondents 18 to 64 years old who reported no current personal health care coverage.
- In 2006 and 2018, male respondents were more likely to report no current personal health care coverage. From 2006 to 2018, there was a noted <u>decrease</u> in the percent of female respondents reporting no current personal health care coverage.
- In 2006 and 2018, respondents 18 to 24 years old were more likely to report no current personal health care coverage. From 2006 to 2018, there was a noted increase in the percent of respondents 18 to 24 years old and a noted decrease in the percent of respondents 25 to 34 years old or 45 to 64 years old reporting no current personal health care coverage.
- In 2006, respondents who were non-white and non-African American were more likely to report no current personal health care coverage. In 2018, African American respondents were more likely to report no current personal health care coverage, with a noted increase since 2006. From 2006 to 2018, there was a noted decrease in the percent of non-African American respondents reporting no current personal health care coverage.
- In 2006 and 2018, Hispanic respondents were more likely to report no current personal health care coverage. From 2006 to 2018, there was a noted increase in the percent of Hispanic respondents and a noted <u>decrease</u> in the percent of non-Hispanic respondents reporting no current personal health care coverage.
- In 2006 and 2018, respondents with a high school education or less were more likely to report no current personal health care coverage. From 2006 to 2018, there was a noted increase in the percent of respondents with a high school education or less and a noted <u>decrease</u> in the percent of respondents with at least some post high school education reporting no current personal health care coverage.
- In 2006 and 2018, respondents in the bottom 40 percent household income bracket were more likely to report no current personal health care coverage. From 2006 to 2018, there was a noted <u>decrease</u> in the percent of respondents in the top 40 percent household income bracket reporting no current personal health care coverage.
- In 2006 and 2018, unmarried respondents were more likely to report no current personal health care coverage.

- From 2015 to 2018, there was a statistical increase in the overall percent of respondents 18 and older as well as for respondents 18 to 64 years old who reported no current personal health care coverage.
- In 2015, gender was not a significant variable. In 2018, male respondents were more likely to report no current personal health care coverage, with a noted increase since 2015.
- In 2015 and 2018, respondents 18 to 24 years old were more likely to report no current personal health care coverage. From 2015 to 2018, there was a noted increase in the percent of respondents 18 to 34 years old and a noted decrease in the percent of respondents 45 to 54 years old reporting no current personal health care coverage.
- In 2015, respondents who were non-white and non-African American were more likely to report no current personal health care coverage. In 2018, African American respondents were more likely to report no current personal health care coverage, with a noted increase since 2015.
- In 2015 and 2018, Hispanic respondents were more likely to report no current personal health care coverage. From 2015 to 2018, there was a noted increase in the percent of respondents across Hispanic origin reporting no current personal health care coverage.
- In 2015, respondents with some post high school education were more likely to report no current personal health care coverage. In 2018, respondents with a high school education or less were more likely to report no current personal health care coverage, with a noted increase since 2015.
- In 2015 and 2018, respondents in the bottom 40 percent household income bracket were more likely to report no current personal health care coverage. From 2015 to 2018, there was a noted increase in the percent of respondents in the bottom 40 percent household income bracket reporting no current personal health care coverage.
- In 2015 and 2018, unmarried respondents were more likely to report no current personal health care coverage. From 2015 to 2018, there was a noted increase in the percent of unmarried respondents reporting no current personal health care coverage.

Table 2. Personally No Health Care Coverage by Demographic Variables for Each Survey Year[®]

Table 2. Personally No Health Care Cove	2006	ograpnic vari	2012	2015	2018
TOTAL	2000	2007	2012	2013	2010
All Respondents ^b	11%	12%	14%	4%	9%
Respondents 18 to 64 Years Old ^b	13	15	16	5	11
-					
Gender ^{1,2,3,5}					
Male ^b	15	18	18	5	16
Female ^a	7	7	11	4	4
Age ^{1,2,3,4,5}					
18 to 24 ^{a,b}	22	22	30	9	37
25 to 34 ^{a,b}	16	18	19	2	7
35 to 44	10	13	6	4	7
45 to 54 ^{a,b}	10	11	14	8	3
55 to 64 ^a	7	6	14	4	3
65 and Older	<1	<1	<1	0	<1
Race ^{1,2,3,4,5}					
White ^a	9	8	9	2	2
African American ^{a,b}	14	16	20	7	20
Other ^a	23	22	18	14	12
Hispanic Origin ^{1,2,3,4,5}					
Hispanic ^{a,b}	21	31	20	9	35
Non-Hispanic ^{a,b}	10	11	13	4	33 7
Non-Trispanic	10	11	13	4	1
Education ^{1,2,3,4,5}					
High School or Less ^{a,b}	14	16	22	4	23
Some Post High School ^a	12	13	13	7	5
College Graduate ^a	5	7	5	3	2
Household Income ^{1,2,3,4,5}					
Bottom 40 Percent Bracket ^b	16	17	21	8	16
Middle 20 Percent Bracket	5	6	4	5	3
Top 40 Percent Bracket ^a	4	3	3	1	2
Marital Status ^{1,2,3,4,5}					
Married	5	7	7	2	3
Not Married ^b	15	16	18	6	13

[®]Percentages occasionally may differ by 1 or 2 percentage points from previous reports or the Appendix as a result of rounding, recoding variables and response category distribution.

Someone in Household Not Covered in Past Year

2018 Findings

• Eight percent of all respondents indicated someone in their household was not covered by insurance at least part of the time in the past year.

¹demographic difference at p≤0.05 in 2006; ²demographic difference at p≤0.05 in 2009; ³demographic difference at p≤0.05 in 2012; ⁴demographic difference at p≤0.05 in 2018

^ayear difference at p≤0.05 from 2006 to 2018; ^byear difference at p≤0.05 from 2015 to 2018

- Twelve percent of respondents in the bottom 40 percent household income bracket reported someone in their household was not covered by insurance at least part of the time in the past year compared to 8% of those in the middle 20 percent income bracket or 3% of respondents in the top 40 percent household income bracket.
- Unmarried respondents were more likely to report someone in their household was not covered by insurance at least part of the time in the past year compared to married respondents (10% and 5%, respectively).

- From 2006 to 2018, the overall percent statistically <u>decreased</u> for respondents who reported someone in their household was not covered at least part of the time in the past year.
- In 2006 and 2018, respondents in the bottom 40 percent household income bracket were more likely to report someone in their household was not covered in the past year. From 2006 to 2018, there was a noted <u>decrease</u> in the percent of respondents across household income reporting someone in their household was not covered in the past year.
- In 2006 and 2018, unmarried respondents were more likely to report someone in their household was not covered in the past year. From 2006 to 2018, there was a noted <u>decrease</u> in the percent of respondents across marital status reporting someone in their household was not covered in the past year.
- In 2006, respondents in households with children were more likely to report someone in their household was not covered in the past year. In 2018, the presence of children in the household was not a significant variable. From 2006 to 2018, there was a noted <u>decrease</u> in the percent of respondents with or without children in the household reporting someone in their household was not covered in the past year.

- From 2015 to 2018, the overall percent statistically <u>decreased</u> for respondents who reported someone in their household was not covered at least part of the time in the past year.
- In 2015 and 2018, respondents in the bottom 40 percent household income bracket were more likely to report someone in their household was not covered in the past year. From 2015 to 2018, there was a noted <u>decrease</u> in the percent of respondents in the bottom 40 percent household income bracket or in the top 40 percent household income bracket reporting someone in their household was not covered in the past year.
- In 2015 and 2018, unmarried respondents were more likely to report someone in their household was not covered in the past year. From 2015 to 2018, there was a noted <u>decrease</u> in the percent of respondents across marital status reporting someone in their household was not covered in the past year.
- In 2015 and 2018, the presence of children in the household was not a significant variable. From 2015 to 2018, there was a noted <u>decrease</u> in the percent of respondents with or without children in the household reporting someone in their household was not covered in the past year.

Table 3. Someone in Household Not Covered by Health Insurance in Past Year by Demographic Variables for Each Survey Year[®]

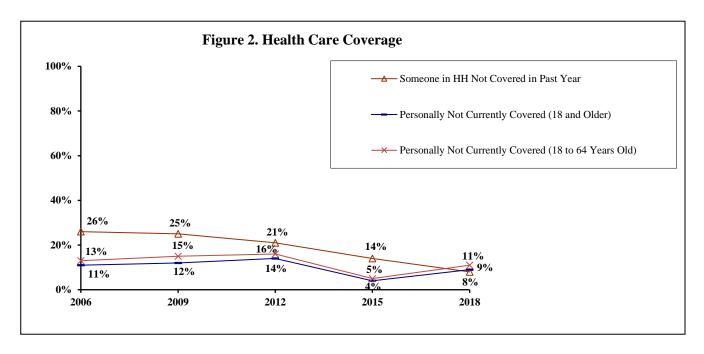
	2006	2009	2012	2015	2018
TOTAL ^{a,b}	26%	25%	21%	14%	8%
Household Income ^{1,2,3,4,5}					
Bottom 40 Percent Bracket ^{a,b}	37	34	31	22	12
Middle 20 Percent Bracket ^a	18	15	13	12	8
Top 40 Percent Bracket ^{a,b}	12	9	5	6	3
Marital Status ^{1,2,3,4,5}					
Married ^{a,b}	19	17	14	9	5
Not Married ^{a,b}	32	31	25	16	10
Children in Household ^{1,2}					
$\mathrm{Yes}^{\mathrm{a,b}}$	29	22	22	15	8
$No^{a,b}$	24	27	20	13	7

[®]Percentages occasionally may differ by 1 or 2 percentage points from previous reports or the Appendix as a result of rounding, recoding variables and response category distribution.

Health Care Coverage Overall

Year Comparisons

• From 2006 to 2018, the overall percent statistically remained the same for respondents 18 and older or 18 to 64 years old who reported no current personal health care coverage while from 2015 to 2018, there was a noted increase. From 2006 to 2018, the overall percent statistically <u>decreased</u> for respondents who reported someone in the household was not covered at least part of the time in the past year, as well as from 2015 to 2018.



 $^{^{1}}$ <u>demographic</u> difference at p≤0.05 in 2006; 2 <u>demographic</u> difference at p≤0.05 in 2009; 3 <u>demographic</u> difference at p≤0.05 in 2012; 4 <u>demographic</u> difference at p≤0.05 in 2018

^a<u>year</u> difference at p≤0.05 from 2006 to 2018; ^b<u>year</u> difference at p≤0.05 from 2015 to 2018

Health Care Needed (Figure 3; Tables 4 - 7)

KEY FINDINGS: In 2018, 12% of respondents reported that someone in their household had not taken their prescribed medication due to prescription costs in the past year; respondents in the middle 20 percent household income bracket or in households with children were more likely to report this. Eight percent of respondents reported in the past year someone in the household did not receive the medical care needed; respondents in the bottom 40 percent household income bracket or in households with children were more likely to report this. Fifteen percent of respondents reported in the past year someone in the household did not receive the dental care needed; respondents in the bottom 60 percent household income bracket or in households without children were more likely to report this. Three percent of respondents reported in the past year someone in the household did not receive the mental health care needed.

> From 2012 to 2018, the overall percent statistically remained the same for respondents who reported someone in their household had not taken their prescribed medication due to prescription costs or a household member did not receive the mental health care needed, as well as from 2015 to 2018. From 2012 to 2018, the overall percent statistically decreased for respondents who reported someone in their household did not receive the medical care needed or a household member did not receive the dental care needed, as well as from 2015 to 2018.

Financial Burden of Prescription Medications

The Healthy People 2020 goal for a family member unable to obtain or having to delay needed prescription medicines in the past 12 months is 3%. (Objective AHS-6.4)

2018 Findings

- Twelve percent of respondents reported in the past year someone in their household had not taken their prescribed medication due to prescription costs.
- Seventeen percent of respondents in the middle 20 percent household income bracket reported someone in their household had not taken their medication due to prescription costs compared to 10% of those in the bottom 40 percent income bracket or 9% of respondents in the top 40 percent household income bracket.
- Respondents in households with children were more likely to report someone in their household had not taken their medication due to prescription costs (17%) compared to respondents in households without children (8%).

- From 2012 to 2018, the overall percent statistically remained the same for respondents who reported in the past year someone in their household had not taken their medication due to prescription costs.
- In 2012, respondents in the bottom 40 percent household income bracket were more likely to report someone in their household had not taken their prescribed medication. In 2018, respondents in the middle 20 percent household income bracket were more likely to report someone in their household had not taken their prescribed medication. From 2012 to 2018, there was a noted decrease in the percent of respondents in the bottom 40 percent household income bracket reporting someone in their household had not taken their prescribed medication.
- In 2012 and 2018, marital status was not a significant variable. From 2012 to 2018, there was a noted increase in the percent of married respondents reporting someone in their household had not taken their prescribed medication.

• In 2012, the presence of children in the household was not a significant variable. In 2018, respondents in households with children were more likely to report someone in their household had not taken their prescribed medication, with a noted increase since 2012. From 2012 to 2018, there was a noted decrease in the percent of respondents in households without children reporting someone in their household had not taken their prescribed medication.

2015 to 2018 Year Comparisons

- From 2015 to 2018, the overall percent statistically remained the same for respondents who reported in the past year someone in their household had not taken their medication due to prescription costs.
- In 2015, respondents in the bottom 40 percent household income bracket were more likely to report someone in their household had not taken their prescribed medication. In 2018, respondents in the middle 20 percent household income bracket were more likely to report someone in their household had not taken their prescribed medication, with a noted increase since 2015. From 2015 to 2018, there was a noted decrease in the percent of respondents in the bottom 40 percent household income bracket reporting someone in their household had not taken their prescribed medication.
- In 2015, the presence of children in the household was not a significant variable. In 2018, respondents in households with children were more likely to report someone in their household had not taken their prescribed medication, with a noted increase since 2015.

Table 4. Prescription Medication Not Taken Due to Cost in Past Year by Demographic Variables for Each Survey Year (Household Member)[©]

Tear (Household Wellber)			
	2012	2015	2018
TOTAL	11%	11%	12%
Household Income ^{1,2,3}			
Bottom 40 Percent Bracket ^{a,b}	15	14	10
Middle 20 Percent Bracket ^b	12	9	17
Top 40 Percent Bracket	6	9	9
Marital Status			
Married ^a	10	11	14
Not Married	12	11	10
Children in Household ³			
$\mathrm{Yes^{a,b}}$	12	12	17
No ^a	11	10	8

[®]Percentages occasionally may differ by 1 or 2 percentage points from previous reports or the Appendix as a result of rounding, recoding variables and response category distribution.

Unmet Medical Care

The Healthy People 2020 goal for a family member unable to obtain or having to delay medical care, tests or treatments they or a doctor believed necessary in the past 12 months is 4%. (Objective AHS-6.2)

¹demographic difference at p≤0.05 in 2012; ²demographic difference at p≤0.05 in 2015

³demographic difference at p≤0.05 in 2018

^a<u>year</u> difference at p≤0.05 from 2012 to 2018; ^b<u>year</u> difference at p≤0.05 from 2015 to 2018

2018 Findings

- Eight percent of respondents reported in the past year someone in their household did not receive the medical care needed.
- Ten percent of respondents in the bottom 40 percent household income bracket reported in the past year a household member did not receive the medical care needed compared to 8% of those in the middle 20 percent income bracket or 4% of respondents in the top 40 percent household income bracket.
- Respondents in households with children were more likely to report someone in their household did not receive the medical care needed (10%) compared to respondents in households without children (5%).
 - Of the 100 respondents who reported an unmet medical care need, 38% each reported they were uninsured or they cannot afford to pay as the reason for the unmet need.

2012 to 2018 Year Comparisons

- From 2012 to 2018, the overall percent <u>decreased</u> for respondents who reported in the past year someone in their household did not receive the medical care needed.
- In 2012 and 2018, respondents in the bottom 40 percent household income bracket were more likely to report in the past year a household member did not receive the medical care needed. From 2012 to 2018, there was a noted decrease in the percent of respondents in the bottom 40 percent household income bracket reporting a household member did not receive the medical care needed.
- In 2012, unmarried respondents were more likely to report in the past year a household member did not receive the medical care needed. In 2018, marital status was not a significant variable. From 2012 to 2018, there was a noted <u>decrease</u> in the percent of unmarried respondents reporting a household member did not receive the medical care needed.
- In 2012, respondents in households without children were more likely to report in the past year a household member did not receive the medical care needed. In 2018, respondents in households with children were more likely to report in the past year a household member did not receive the medical care needed. From 2012 to 2018, there was a noted <u>decrease</u> in the percent of respondents in households without children reporting a household member did not receive the medical care needed.

- From 2015 to 2018, the overall percent statistically <u>decreased</u> for respondents who reported in the past year someone in their household did not receive the medical care needed.
- In 2015 and 2018, respondents in the bottom 40 percent household income bracket were more likely to report in the past year a household member did not receive the medical care needed. From 2015 to 2018, there was a noted <u>decrease</u> in the percent of respondents in the bottom 40 percent household income bracket and in the top 40 percent household income bracket reporting a household member did not receive the medical care needed.
- In 2015 and 2018, marital status was not a significant variable. From 2015 to 2018, there was a noted <u>decrease</u> in the percent of respondents across marital status reporting in the past year a household member did not receive the medical care needed.

In 2015, the presence of children in the household was not a significant variable. In 2018, respondents in households with children in the household were more likely to report in the past year someone in their household did not receive the medical care need. From 2015 to 2018, there was a noted <u>decrease</u> in the percent of respondents in households without children reporting a household member did not receive the medical care needed.

Table 5. Unmet Medical Care in Past Year by Demographic Variables for Each Survey Year (Household Member)[®]

	2012	2015	2018
TOTAL ^{a,b}	11%	12%	8%
Household Income ^{1,2,3}			
Bottom 40 Percent Bracket ^{a,b}	17	16	10
Middle 20 Percent Bracket	7	10	8
Top 40 Percent Bracket ^b	4	11	4
Marital Status ¹			
Married ^b	7	11	7
Not Married ^{a,b}	13	13	8
Children in Household ^{1,3}			
Yes	9	13	10
No ^{a,b}	13	12	5

[®]Percentages occasionally may differ by 1 or 2 percentage points from previous reports or the Appendix as a result of rounding, recoding variables and response category distribution.

Unmet Dental Care

The Healthy People 2020 goal for a family member unable to obtain or having to delay dental care, tests or treatments they or a doctor believed necessary in the past 12 months is 5%. (Objective AHS-6.3)

2018 Findings

- Fifteen percent of respondents reported in the past year someone in their household did not receive the dental care needed.
- Twenty percent of respondents in the top 40 percent household income bracket and 19% of those in the middle 20 percent income bracket reported a household member did not receive the dental care needed compared to 6% of respondents in the top 40 percent household income bracket.
- Respondents in households without children were more likely to report someone in their household did not receive the dental care needed (17%) compared to respondents in households with children (12%).
 - Of the 196 respondents who reported a household member not receiving the dental care needed, 47% reported they were uninsured while 34% reported they cannot afford to pay as the reason for the unmet need.

2012 to 2018 Year Comparisons

• From 2012 to 2018, the overall percent statistically <u>decreased</u> for respondents who reported in the past year someone in their household did not receive the dental care needed.

¹demographic difference at p≤0.05 in 2012; ²demographic difference at p≤0.05 in 2015

³demographic difference at p≤0.05 in 2018

^ayear difference at p≤0.05 from 2012 to 2018; ^byear difference at p≤0.05 from 2015 to 2018

- In 2012, respondents in the bottom 40 percent household income bracket were more likely to report in the past year a household member did not receive the dental care needed. In 2018, respondents in the bottom 60 percent household income bracket were more likely to report a household member did not receive the dental care needed. From 2012 to 2018, there was a noted decrease in the percent of respondents in the bottom 40 percent household income bracket and a noted increase in the percent of respondents in the middle 20 percent household income bracket reporting a household member did not receive the dental care needed.
- In 2012, unmarried respondents were more likely to report in the past year someone in the household did not receive the dental care needed. In 2018, marital status was not a significant variable. From 2012 to 2018, there was a noted <u>decrease</u> in the percent unmarried respondents reporting a household member did not receive the dental care needed.
- In 2012, the presence of children in the household was not a significant variable. In 2018, respondents in households without children were more likely to report in the past year someone in the household did not receive the dental care needed. From 2012 to 2018, there was a noted <u>decrease</u> in the percent of respondents in households with children reporting a household member did not receive the dental care needed.

- From 2015 to 2018, the overall percent statistically <u>decreased</u> for respondents who reported in the past year someone in the household did not receive the dental care needed.
- In 2015, respondents in the bottom 40 percent household income bracket were more likely to report in the past year a household member did not receive the dental care needed. In 2018, respondents in the bottom 60 percent household income bracket were more likely to report a household member did not receive the dental care needed. From 2015 to 2018, there was a noted decrease in the percent of respondents in the bottom 40 percent household income bracket and a noted increase in the percent of respondents in the middle 20 percent household income bracket reporting a household member did not receive the dental care needed.
- In 2015, unmarried respondents were more likely to report in the past year someone in the household did not receive the dental care needed. In 2018, marital status was not a significant variable. From 2015 to 2018, there was a noted <u>decrease</u> in the percent unmarried respondents reporting a household member did not receive the dental care needed.
- In 2015, the presence of children in the household was not a significant variable. In 2018, respondents in households without children were more likely to report in the past year someone in the household did not receive the dental care needed. From 2015 to 2018, there was a noted decrease in the percent of respondents in households with children reporting a household member did not receive the dental care needed.

Table 6. Unmet Dental Care in Past Year by Demographic Variables for Each Survey Year (Household Member)[®]

	2012	2015	2018
TOTAL ^{a,b}	19%	18%	15%
Household Income ^{1,2,3}			
Bottom 40 Percent Bracket ^{a,b}	26	27	20
Middle 20 Percent Bracket ^{a,b}	12	12	19
Top 40 Percent Bracket	8	9	6
Marital Status ^{1,2}			
Married	14	14	14
Not Married ^{a,b}	21	19	16
Children in Household ³			
Yes ^{a,b}	19	19	12
No	18	16	17

[®]Percentages occasionally may differ by 1 or 2 percentage points from previous reports or the Appendix as a result of rounding, recoding variables and response category distribution.

Unmet Mental Health Care

2018 Findings

- Three percent of respondents reported in the past year someone in their household did not receive the mental health care needed.
- There were no statistically significant differences between demographic variables and responses of in the past year someone in their household did not receive the mental health care needed.
 - Of the 43 respondents who reported someone in the household did not receive the mental health care needed, 30% reported insurance did not cover it as the reason for the unmet need while 24% reported unable to get appointment.

- From 2012 to 2018, the overall percent statistically remained the same for respondents who reported in the past year someone in their household did not receive the mental health care needed.
- In 2012, respondents in the bottom 40 percent household income bracket were more likely to report in the past year someone in their household did not receive the mental health care needed. In 2018, household income was not a significant variable. From 2012 to 2018, there was a noted <u>decrease</u> in the percent of respondents in the bottom 40 percent household income bracket and a noted increase in the percent of respondents in the middle 20 percent household income bracket reporting someone in their household did not receive the mental health care needed.
- In 2012, respondents in households without children were more likely to report in the past year someone in their household did not receive the mental health care needed. In 2018, the presence of children in the household was not a significant variable. From 2012 to 2018, there was a noted decrease in the percent of respondents in households without children reporting someone in their household did not receive the mental health care needed.

¹<u>demographic</u> difference at p≤0.05 in 2012; ²<u>demographic</u> difference at p≤0.05 in 2015

³demographic difference at p≤0.05 in 2018

ayear difference at p≤0.05 from 2012 to 2018; byear difference at p≤0.05 from 2015 to 2018

- From 2015 to 2018, the overall percent statistically remained the same for respondents who reported in the past year someone in their household did not receive the mental health care needed.
- In 2015, unmarried respondents were more likely to report someone in their household did not receive the mental health care needed. In 2018, marital status was not a significant variable.

Table 7. Unmet Mental Health Care in Past Year by Demographic Variables for Each Survey Year (Household Member)[©]

	2012	2015	2018
TOTAL	4%	4%	3%
Household Income ¹			
Bottom 40 Percent Bracket ^a	7	6	4
Middle 20 Percent Bracket ^a	<1	4	4
Top 40 Percent Bracket	2	3	3
Marital Status ²			
Married	3	2	3
Not Married	5	5	3
Children in Household ¹			
Yes	3	3	4
$\mathrm{No^{a}}$	5	4	3

[®]Percentages occasionally may differ by 1 or 2 percentage points from previous reports or the Appendix as a result of rounding, recoding variables and response category distribution.

¹demographic difference at p≤0.05 in 2012; ²demographic difference at p≤0.05 in 2015

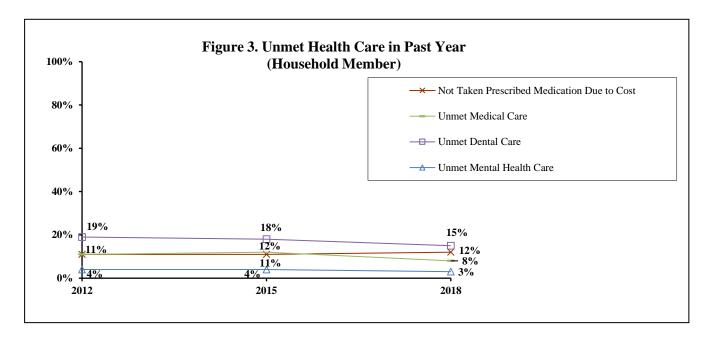
³demographic difference at p≤0.05 in 2018

^ayear difference at p≤0.05 from 2012 to 2018; ^byear difference at p≤0.05 from 2015 to 2018

Health Care Needed Overall

Year Comparisons

From 2012 to 2018, the overall percent statistically remained the same for respondents who reported someone in their household had not taken their prescribed medication due to prescription costs or a household member did not receive the mental health care needed, as well as from 2015 to 2018. From 2012 to 2018, the overall percent statistically decreased for respondents who reported someone in their household did not receive the medical care needed or a household member did not receive the dental care needed, as well as from 2015 to 2018.



Health Information and Services (Figure 4; Tables 8 - 14)

KEY FINDINGS: In 2018, 82% of respondents reported they have a primary care physician they regularly see for check-ups and when they are sick; respondents who were female, 65 and older, non-white and non-African American, non-Hispanic, with at least some post high school education, in the top 40 percent household income bracket or married respondents were more likely to report a primary care physician. Sixty-two percent of respondents reported their primary place for health services when they are sick was from a doctor's or nurse practitioner's office while 18% reported urgent care center. Respondents who were female, 65 and older, white, non-Hispanic, with a college education, in the top 40 percent household income bracket or married respondents were more likely to report a doctor's or nurse practitioner's office as their primary health care when they are sick. Respondents who were female, 25 to 44 years old, African American or non-Hispanic were more likely to report urgent care as their primary health care. Six percent of respondents reported hospital emergency room as their primary health care; respondents who were 35 to 44 years old, non-white and non-African American, with some post high school education or less or in the bottom 40 percent household income bracket were more likely to report this. Two percent of respondents each reported their primary place for health services when they are sick was a public health clinic/community health center or a hospital outpatient department. Thirty-six percent of respondents had an advance care plan; respondents who were female, 65 and older, white or non-Hispanic were more likely to report an advance care plan.

From 2015 to 2018, there was a statistical <u>decrease</u> in the overall percent of respondents reporting they have a primary care doctor, nurse practitioner, physician assistant or primary care clinic they regularly go to for checkups and when they are sick, From 2006 to 2018, there was a statistical decrease in the overall percent of respondents reporting their primary place for health services when they are sick was a doctor's or nurse practitioner's office while from 2015 to 2018, there was no statistical change. From 2006 to 2018, there was a statistical increase in the overall percent of respondents reporting their primary place was an urgent care center, as well as from 2015 to 2018. From 2006 to 2018, there was no statistical change in the overall percent of respondents reporting their primary place was a hospital emergency room while from 2015 to 2018, there was a statistical decrease. From 2006 to 2018, there was a statistical decrease in the overall percent of respondents reporting their primary place was a public health clinic or community health center, as well as from 2015 to 2018. From 2006 to 2018, there was no statistical change in the overall percent of respondents reporting their primary place was a hospital outpatient department, as well as from 2015 to 2018. From 2006 to 2018, there was a statistical increase in the overall percent of respondents who reported having an advance care plan, as well as from 2015 to 2018.

Primary Care Physician

2018 Findings

- Eighty-two percent of respondents reported they have a primary care doctor, nurse practitioner, physician assistant or primary care clinic they regularly go to for checkups and when they are sick.
- Female respondents were more likely to report a primary care physician (90%) compared to male respondents (74%).
- Ninety-seven percent of respondents 65 and older reported a primary care physician compared to 72% of those 25 to 34 years old or 58% of respondents 18 to 24 years old.
- Respondents who were non-white and non-African American were more likely to report a primary care physician (95%) compared to white respondents (82%) or African American respondents (80%).
- Non-Hispanic respondents were more likely to report a primary care physician (85%) compared to Hispanic respondents (54%).
- Eighty-seven percent of respondents with some post high school education and 86% of those with a college education reported a primary care physician compared to 74% of respondents with a high school education or less.
- Eighty-six percent of respondents in the top 40 percent household income bracket reported a primary care physician compared to 81% of those in the bottom 40 percent income bracket or 76% of respondents in the middle 20 percent household income bracket.
- Married respondents were more likely to report a primary care physician compared to unmarried respondents (89% and 79%, respectively).

2015 to 2018 Year Comparisons

• From 2015 to 2018, there was a statistical <u>decrease</u> in the overall percent of respondents reporting they have a primary care doctor, nurse practitioner, physician assistant or primary care clinic they regularly go to for checkups and when they are sick.

- In 2015 and 2018, female respondents were more likely to report a primary care physician. From 2015 to 2018, there was a noted decrease in the percent of male respondents reporting a primary care physician.
- In 2015 and 2018, respondents 65 and older were more likely to report a primary care physician. From 2015 to 2018, there was a noted <u>decrease</u> in the percent of respondents 18 to 34 years old reporting a primary care physician.
- In 2015, white respondents were more likely to report a primary care physician. In 2018, respondents who were non-white and non-African American were more likely to report a primary care physician, with a noted increase since 2015. From 2015 to 2018, there was a noted <u>decrease</u> in the percent of white respondents reporting a primary care physician.
- In 2015 and 2018, non-Hispanic respondents were more likely to report a primary care physician. From 2015 to 2018, there was a noted decrease in the percent of Hispanic respondents reporting a primary care physician.
- In 2015, education was not a significant variable. In 2018, respondents with at least some post high school education were more likely to report a primary care physician. From 2015 to 2018, there was a noted <u>decrease</u> in the percent of respondents with a high school education or less reporting a primary care physician.
- In 2015, household income was not a significant variable. In 2018, respondents in the top 40 percent household income bracket were more likely to report a primary care physician. From 2015 to 2018, there was a noted decrease in the percent of respondents in the middle 20 percent household income bracket reporting a primary care physician.
- In 2015 and 2018, married respondents were more likely to report a primary care physician. From 2015 to 2018, there was a noted <u>decrease</u> in the percent of unmarried respondents reporting a primary care physician.

Table 8. Have a Primary Care Physician by Demographic Variables for Each Survey Year[®]

Table 8. Have a Primary Care Physi	ble 8. Have a Primary Care Physician by Demographic Vai				
	2015	2018			
TOTAL ^a	86%	82%			
Gender ^{1,2}					
Male ^a	81	74			
Female	90	90			
Age ^{1,2}					
18 to 24 ^a	78	58			
25 to 34 ^a	79	72			
35 to 44	86	86			
45 to 54	86	90			
55 to 64	92	93			
65 and Older	97	97			
os una oraci	<i>,</i>	,			
Race ^{1,2}					
White ^a	88	82			
African American	84	80			
Other ^a	76	95			
Hispanic Origin ^{1,2}					
Hispanic ^a	75	54			
Non-Hispanic	87	85			
Education ²					
High School or Less ^a	87	74			
Some Post High School	86	87			
College Graduate	84	86			
Household Income ²					
Bottom 40 Percent Bracket	83	81			
Middle 20 Percent Bracket ^a	85	76			
Top 40 Percent Bracket	87	86			
Top 40 I electic Diacket	07	00			
Marital Status ^{1,2}					
Married	91	89			
Not Married ^a	83	79			

[®]Percentages occasionally may differ by 1 or 2 percentage points from the Appendix as a result of rounding, recoding variables and response category distribution.

Primary Health Care Services

2018 Findings

• Sixty-two percent of respondents reported they go to a doctor's or nurse practitioner's office when they are sick. Eighteen percent reported urgent care center while 6% reported hospital emergency room and 2% each reported public health clinic/community health center or hospital outpatient department. Eight percent reported no usual place.

¹demographic difference at p≤0.05 in 2015; ²demographic difference at p≤0.05 in 2018

^a<u>year</u> difference at p≤0.05 from 2015 to 2018

Doctor's or Nurse Practitioner's Office as Primary Health Care Services

2018 Findings

- Sixty-two percent of respondents reported they go to a doctor's or nurse practitioner's office when they are sick.
- Female respondents were more likely to report a doctor's or nurse practitioner's office (69%) compared to male respondents (55%).
- Eighty-six percent of respondents 65 and older reported a doctor's or nurse practitioner's office compared to 51% of those 35 to 44 years old or 38% of respondents 18 to 24 years old.
- White respondents were more likely to report a doctor's or nurse practitioner's office (71%) compared to respondents who were non-white and non-African American (63%) or African American respondents (47%).
- Non-Hispanic respondents were more likely to report a doctor's or nurse practitioner's office (64%) compared to Hispanic respondents (43%).
- Seventy-one percent of respondents with a college education reported a doctor's or nurse practitioner's office compared to 64% of those with some post high school education or 51% of respondents with a high school education or less.
- Seventy-two percent of respondents in the top 40 percent household income bracket reported a doctor's or nurse practitioner's office compared to 64% of those in the middle 20 percent income bracket or 54% of respondents in the bottom 40 percent household income bracket.
- Married respondents were more likely to report a doctor's or nurse practitioner's office compared to unmarried respondents (67% and 59%, respectively).

- From 2006 to 2018, there was a statistical <u>decrease</u> in the overall percent of respondents reporting their primary place when they are sick was a doctor's or nurse practitioner's office.
- In 2006 and 2018, female respondents were more likely to report a doctor's or nurse practitioner's office. From 2006 to 2018, there was a noted <u>decrease</u> in the percent of respondents across gender reporting a doctor's or nurse practitioner's office.
- In 2006 and 2018, respondents 65 and older were more likely to report a doctor's or nurse practitioner's office. From 2006 to 2018, there was a noted <u>decrease</u> in the percent of respondents 18 to 64 years old reporting a doctor's or nurse practitioner's office.
- In 2006 and 2018, white respondents were more likely to report a doctor's or nurse practitioner's office. From 2006 to 2018, there was a noted <u>decrease</u> in the percent of respondents who were white or African American reporting a doctor's or nurse practitioner's office.
- In 2006 and 2018, non-Hispanic respondents were more likely to report a doctor's or nurse practitioner's office. From 2006 to 2018, there was a noted <u>decrease</u> in the percent of respondents across Hispanic origin reporting a doctor's or nurse practitioner's office.

- In 2006 and 2018, respondents with a college education were more likely to report a doctor's or nurse practitioner's office. From 2006 to 2018, there was a noted <u>decrease</u> in the percent of respondents across education reporting a doctor's or nurse practitioner's office.
- In 2006, respondents in the top 60 percent household income bracket were more likely to report a doctor's or nurse practitioner's office. In 2018, respondents in the top 40 percent household income bracket were more likely to report a doctor's or nurse practitioner's office. From 2006 to 2018, there was a noted <u>decrease</u> in the percent of respondents across household income reporting a doctor's or nurse practitioner's office.
- In 2006 and 2018, married respondents were more likely to report a doctor's or nurse practitioner's office. From 2006 to 2018, there was a noted <u>decrease</u> in the percent of respondents across marital status reporting a doctor's or nurse practitioner's office.

- From 2015 to 2018, there was no statistical change in the overall percent of respondents reporting their primary place when they are sick was a doctor's or nurse practitioner's office.
- In 2015 and 2018, female respondents were more likely to report a doctor's or nurse practitioner's office. From 2015 to 2018, there was a noted <u>decrease</u> in the percent of male respondents reporting a doctor's or nurse practitioner's office.
- In 2015 and 2018, respondents 65 and older were more likely to report a doctor's or nurse practitioner's office. From 2015 to 2018, there was a noted <u>decrease</u> in the percent of respondents 35 to 44 years old reporting a doctor's or nurse practitioner's office.
- In 2015 and 2018, white respondents were more likely to report a doctor's or nurse practitioner's office. From 2015 to 2018, there was a noted increase in the percent of respondents who were non-white and non-African American reporting a doctor's or nurse practitioner's office.
- In 2015 and 2018, non-Hispanic respondents were more likely to report a doctor's or nurse practitioner's office.
- In 2015 and 2018, respondents with a college education were more likely to report a doctor's or nurse practitioner's office. From 2015 to 2018, there was a noted <u>decrease</u> in the percent of respondents with a high school education or less reporting a doctor's or nurse practitioner's office.
- In 2015, respondents in the top 60 percent household income bracket were more likely to report a doctor's or nurse practitioner's office. In 2018, respondents in the top 40 percent household income bracket were more likely to report a doctor's or nurse practitioner's office. From 2015 to 2018, there was a noted decrease in the percent of respondents in the middle 20 percent household income bracket reporting a doctor's or nurse practitioner's office.
- In 2015 and 2018, married respondents were more likely to report a doctor's or nurse practitioner's office. From 2015 to 2018, there was a noted <u>decrease</u> in the percent of married respondents reporting a doctor's or nurse practitioner's office.

Table 9. Doctor's or Nurse Practitioner's Office as Primary Health Care Service by Demographic Variables for

Each Survey Year[®]

Each Survey Year [⊕]					
	2006	2009	2012	2015	2018
TOTAL ^a	77%	73%	70%	65%	62%
Gender ^{1,2,3,4,5}					
Male ^{a,b}	72	65	65	62	55
Female ^a	82	79	75	68	69
Age ^{1,2,3,4,5}					
18 to 24 ^a	61	58	49	41	38
25 to 34 ^a	70	60	62	59	55
35 to 44 ^{a,b}	79	75	78	60	51
45 to 54 ^a	79	76	72	74	72
55 to 64 ^a	84	83	75	74	76
65 and Older	90	88	87	82	86
Race ^{1,2,3,4,5}					
White ^a	83	83	79	74	71
African American ^a	64	64	60	51	47
Other ^b	65	42	57	48	63
Hispanic Origin ^{1,2,3,4,5}					
Hispanic ^a	66	50	57	49	43
Non-Hispanic ^a	78	74	72	67	64
Education ^{1,2,3,4,5}					
High School or Less ^{a,b}	72	67	64	60	51
Some Post High School ^a	76	71	70	66	64
College Graduate ^a	86	83	79	69	71
Household Income ^{1,2,3,4,5}					
Bottom 40 Percent Bracket ^a	71	65	62	59	54
Middle 20 Percent Bracket ^{a,b}	83	81	75	72	64
Top 40 Percent Bracket ^a	85	87	83	73	72
Marital Status ^{1,2,3,4,5}					
Married ^{a,b}	84	81	80	77	67
Not Married ^a	72	68	65	59	59

[®]Percentages occasionally may differ by 1 or 2 percentage points from previous reports or the Appendix as a result of rounding, recoding variables and response category distribution.

Urgent Care Center as Primary Health Care Services

2018 Findings

- Eighteen percent of respondents reported they go to an urgent care center when they are sick.
- Female respondents were more likely to report urgent care center (20%) compared to male respondents (15%).

 $^{^{1}}$ <u>demographic</u> difference at p≤0.05 in 2006; 2 <u>demographic</u> difference at p≤0.05 in 2009; 3 <u>demographic</u> difference at p≤0.05 in 2012; 4 <u>demographic</u> difference at p≤0.05 in 2018

^a<u>year</u> difference at p≤0.05 from 2006 to 2018; ^b<u>year</u> difference at p≤0.05 from 2015 to 2018

- Respondents 25 to 44 years old were more likely to report urgent care center (28%) compared to those 55 to 64 years old (9%) or respondents 65 and older (3%).
- African American respondents were more likely to report urgent care center (25%) compared to white respondents (16%) or respondents of another race (8%).
- Twenty percent of non-Hispanic respondents reported urgent care center compared to less than one percent of Hispanic respondents.

- From 2006 to 2018, there was a statistical increase in the overall percent of respondents reporting their primary place when they are sick was an urgent care center.
- In 2006, male respondents were more likely to report urgent care center. In 2018, female respondents were more likely to report an urgent care center. From 2006 to 2018, there was a noted increase in the percent of respondents across gender reporting urgent care center.
- In 2006, respondents 25 to 34 years old were more likely to report urgent care center. In 2018, respondents 25 to 44 years old were more likely to report urgent care center. From 2006 to 2018, there was a noted increase in the percent of respondents across age reporting urgent care center.
- In 2006, race was not a significant variable. In 2018, African American respondents were more likely to report urgent care center. From 2006 to 2018, there was a noted increase in the percent of respondents across race reporting urgent care center.
- In 2006 and 2018, non-Hispanic respondents were more likely to report urgent care center. From 2006 to 2018, there was a noted increase in the percent of non-Hispanic respondents reporting urgent care center.
- In 2006, respondents with a college education were more likely to report urgent care center. In 2018, education was not a significant variable. From 2006 to 2018, there was a noted increase in the percent of respondents across education reporting urgent care center.
- In 2006, respondents in the top 60 percent household income bracket were more likely to report urgent care center. In 2018, household income was not a significant variable. From 2006 to 2018, there was a noted increase in the percent of respondents across household income reporting urgent care center.
- In 2006 and 2018, marital status was not a significant variable. From 2006 to 2018, there was a noted increase in the percent of respondents across marital status reporting urgent care center.

- From 2015 to 2018, there was a statistical increase in the overall percent of respondents reporting their primary place when they are sick was an urgent care center.
- In 2015, gender was not a significant variable. In 2018, female respondents were more likely to report urgent care center, with a noted increase since 2015.
- In 2015 and 2018, respondents 25 to 44 years old were more likely to report urgent care center. From 2015 to 2018, there was a noted increase in the percent of respondents 18 to 44 years old reporting urgent care center.

- In 2015, race was not a significant variable. In 2018, African American respondents were more likely to report urgent care center. From 2015 to 2018, there was a noted increase in the percent of respondents who were white or African American reporting urgent care center.
- In 2015, Hispanic origin was not a significant variable. In 2018, non-Hispanic respondents were more likely to report urgent care center, with a noted increase since 2015. From 2015 to 2018, there was a noted <u>decrease</u> in the percent of Hispanic respondents reporting urgent care center.
- In 2015, respondents with a college education were more likely to report urgent care center. In 2018, education was not a significant variable. From 2015 to 2018, there was a noted increase in the percent of respondents with some post high school education or less reporting urgent care center.
- In 2015 and 2018, household income was not a significant variable. From 2015 to 2018, there was a noted increase in the percent of respondents in the bottom 40 percent household income bracket reporting urgent care center.
- In 2015 and 2018, marital status was not a significant variable. From 2015 to 2018, there was a noted increase in the percent of respondents across marital status reporting urgent care center.

Table 10. Urgent Care Center as Primary Health Care Service by Demographic Variables for Each Survey Year[®]

Table 10. Urgent Care Center as Prim	2006	2009	2012	2015	2018
TOTAL ^{a,b}	3%	6%	7%	12%	18%
Gender ^{1,2,5}					
Male ^a	4	8	7	12	15
Female ^{a,b}	2	5	7	13	20
Age ^{1,2,3,4,5}					
18 to 24 ^{a,b}	2	9	11	12	22
25 to 34 ^{a,b}	5	11	11	20	28
35 to 44 ^{a,b}	4	6	6	19	28
45 to 54 ^a	3	7	4	9	13
55 to 64 ^a	2	2	4	8	9
65 and Older ^a	<1	1	2	4	3
Race ^{3,5}					
White ^{a,b}	4	6	5	12	16
African American ^{a,b}	2	6	10	14	25
Other ^a	1	8	8	12	8
Hispanic Origin ^{1,3,5}					
Hispanic ^b	<1	4	10	13	<1
Non-Hispanic ^{a,b}	3	6	6	12	20
Education ^{1,2,4}					
High School or Less ^{a,b}	2	5	7	9	18
Some Post High School ^{a,b}	3	8	7	11	19
College Graduate ^a	5	7	5	17	16
Household Income ^{1,3}					
Bottom 40 Percent Bracket ^{a,b}	2	6	7	12	20
Middle 20 Percent Bracket ^a	4	8	11	14	19
Top 40 Percent Bracket ^a	5	6	5	16	19
Marital Status ³					
Married ^{a,b}	3	7	5	14	18
Not Married ^{a,b}	3	6	8	12	17

[®]Percentages occasionally may differ by 1 or 2 percentage points from previous reports or the Appendix as a result of rounding, recoding variables and response category distribution.

Hospital Emergency Room as Primary Health Care Services

2018 Findings

- Six percent of respondents reported they go to a hospital emergency room when they are sick.
- Eleven percent of respondents 35 to 44 years old reported hospital emergency room compared to 3% of respondents 18 to 24 years old or 65 and older.

¹demographic difference at p≤0.05 in 2006; ²demographic difference at p≤0.05 in 2009; ³demographic difference at p≤0.05 in 2012; ⁴demographic difference at p≤0.05 in 2018; ⁵demographic difference at p≤0.05 in 2018

^ayear difference at p≤0.05 from 2006 to 2018; ^byear difference at p≤0.05 from 2015 to 2018

- Respondents who were non-white and non-African American were more likely to report hospital emergency room (13%) compared to African American respondents (8%) or white respondents (4%).
- Nine percent of respondents with some post high school education or less reported hospital emergency room compared to less than one percent of respondents with a college education.
- Eleven percent of respondents in the bottom 40 percent household income bracket reported hospital emergency room compared to 7% of those in the middle 20 percent income bracket or less than one percent of respondents in the top 40 percent household income bracket.

- From 2006 to 2018, there was no statistical change in the overall percent of respondents reporting their primary place when they are sick was a hospital emergency room.
- In 2006, respondents 18 to 24 years old were more likely to report hospital emergency room. In 2018, respondents 35 to 44 years old were more likely to report hospital emergency room, with a noted increase since 2006. From 2006 to 2018, there was a noted <u>decrease</u> in the percent of respondents 18 to 24 years old reporting hospital emergency room.
- In 2006, African American respondents were more likely to report hospital emergency room. In 2018, respondents who were non-white and non-African American were more likely to report hospital emergency room, with a noted increase since 2006. From 2006 to 2018, there was a noted decrease in the percent of African American respondents reporting hospital emergency room.
- In 2006, respondents with a high school education or less were more likely to report hospital emergency room. In 2018, respondents with some post high school education or less were more likely to report hospital emergency room. From 2006 to 2018, there was a noted increase in the percent of respondents with some post high school education reporting hospital emergency room.
- In 2006 and 2018, respondents in the bottom 40 percent household income bracket were more likely to report hospital emergency room. From 2006 to 2018, there was a noted increase in the percent of respondents in the middle 20 percent household income bracket reporting hospital emergency room.
- In 2006, unmarried respondents were more likely to report hospital emergency room. In 2018, marital status was not a significant variable. From 2006 to 2018, there was a noted increase in the percent of married respondents reporting hospital emergency room.

- From 2015 to 2018, there was a statistical <u>decrease</u> in the overall percent of respondents reporting their primary place when they are sick was a hospital emergency room.
- In 2015 and 2018, gender was not a significant variable. From 2015 to 2018, there was a noted <u>decrease</u> in the percent of respondents across gender reporting hospital emergency room.
- In 2015, respondents 18 to 24 years old were more likely to report hospital emergency room. In 2018, respondents 35 to 44 years old were more likely to report hospital emergency room. From 2015 to 2018, there was a noted <u>decrease</u> in the percent of respondents 18 to 24 years old reporting hospital emergency room.

- In 2015, respondents who were non-white were more likely to report hospital emergency room. In 2018, respondents who were non-white and non-African American were more likely to report hospital emergency room. From 2015 to 2018, there was a noted <u>decrease</u> in the percent of non-white respondents reporting hospital emergency room.
- In 2015 and 2018, Hispanic origin was not a significant variable. From 2015 to 2018, there was a noted decrease in the percent of respondents across Hispanic origin reporting hospital emergency room.
- In 2015, respondents with a high school education or less were more likely to report hospital emergency room. In 2018, respondents with some post high school education or less were more likely to report hospital emergency room. From 2015 to 2018, there was a noted <u>decrease</u> in the percent of respondents with a high school education or less or with a college education reporting hospital emergency room.
- In 2015 and 2018, respondents in the bottom 40 percent household income bracket were more likely to report hospital emergency room. From 2015 to 2018, there was a noted <u>decrease</u> in the percent of respondents in the bottom 40 percent household income bracket reporting hospital emergency room.
- In 2015, unmarried respondents were more likely to report hospital emergency room. In 2018, marital status was not a significant variable. From 2015 to 2018, there was a noted <u>decrease</u> in the percent of unmarried respondents reporting hospital emergency room.

Table 11. Hospital Emergency Room as Primary Health Care Service by Demographic Variables for Each Survey Year[®]

i eai	2006	2009	2012	2015	2018
TOTAL ^b	6%	7%	7%	11%	6%
Gender ²					
Male ^b	5	10	7	11	7
Female ^b	6	5	7	11	6
Age ^{1,2,3,4,5}					
18 to 24 ^{a,b}	15	14	13	22	3
25 to 34	5	11	8	11	8
35 to 44 ^a	6	6	5	14	11
45 to 54	5	4	7	6	6
55 to 64	2	4	5	7	5
65 and Older	2	3	3	6	3
Race ^{1,2,3,4,5}					
White	2	2	3	3	4
African American ^{a,b}	16	12	12	25	8
Other ^{a,b}	6	18	13	28	13
Hispanic Origin ²					
Hispanic ^b	7	22	7	11	3
Non-Hispanic ^b	6	6	7	11	7
Education ^{1,2,3,4,5}					
High School or Less ^b	10	12	11	20	9
Some Post High School ^a	5	6	5	10	9
College Graduate ^b	1	1	3	3	<1
Household Income ^{1,2,3,4,5}					
Bottom 40 Percent Bracket ^b	9	11	12	17	11
Middle 20 Percent Bracket ^a	1	1	<1	5	7
Top 40 Percent Bracket	<1	<1	<1	1	<1
Marital Status ^{1,2,3,4}					
Married ^a	3	2	4	4	6
Not Married ^b	8	10	8	15	7

[®]Percentages occasionally may differ by 1 or 2 percentage points from previous reports or the Appendix as a result of rounding, recoding variables and response category distribution.

Public Health Clinic or Community Health Center as Primary Health Care Services

2018 Findings

• Two percent of respondents reported they go to a public health clinic or community health center when they are sick.

 $^{^{1}}$ <u>demographic</u> difference at p≤0.05 in 2006; 2 <u>demographic</u> difference at p≤0.05 in 2009; 3 <u>demographic</u> difference at p≤0.05 in 2012; 4 <u>demographic</u> difference at p≤0.05 in 2018

^a<u>year</u> difference at p≤0.05 from 2006 to 2018; ^b<u>year</u> difference at p≤0.05 from 2015 to 2018

• No demographic comparisons were conducted as a result of the low percent of respondents who reported their primary place when they are sick was a public health clinic or community health center when they are sick.

2006 to 2018 Year Comparisons

- From 2006 to 2018, there was a statistical <u>decrease</u> in the overall percent of respondents reporting their primary place when they are sick was a public health clinic or community health center.
- In 2006, respondents who were non-white and non-African American, Hispanic, with a high school education or less, in the bottom 40 percent household income bracket or unmarried respondents were more likely to report public health clinic or community health center.

- From 2015 to 2018, there was a statistical <u>decrease</u> in the overall percent of respondents reporting their primary place when they are sick was a public health clinic or community health center.
- In 2015, respondents who were male, 18 to 24 years old, Hispanic, with some post high school education or less, in the bottom 60 percent household income bracket or unmarried respondents were more likely to report public health clinic or community health center.

Table 12. Public Health Clinic or Community Health Center as Primary Health Care Service by Demographic Variables for Each Survey Year[®]

Hospital Outpatient Department as Primary Health Care Services

2018 Findings

• Two percent of respondents reported they go to a hospital outpatient department when they are sick.

[®]Percentages occasionally may differ by 1 or 2 percentage points from previous reports or the Appendix as a result of rounding, recoding variables and response category distribution.

[®]Data is not shown as a result of insufficient statistical reliability due to the low percentage reporting this.

 $^{^{1}}$ <u>demographic</u> difference at p≤0.05 in 2006; 2 <u>demographic</u> difference at p≤0.05 in 2009; 3 <u>demographic</u> difference at p≤0.05 in 2012; 4 <u>demographic</u> difference at p≤0.05 in 2018

^ayear difference at p≤0.05 from 2006 to 2018; ^byear difference at p≤0.05 from 2015 to 2018

• No demographic comparisons were conducted as a result of the low percent of respondents who reported their primary place when they are sick was a hospital outpatient department.

2006 to 2018 Year Comparisons

- From 2006 to 2018, there was no statistical change in the overall percent of respondents reporting their primary place when they are sick was a hospital outpatient department.
- In 2006, respondents who were male, 18 to 24 years old, African American, with some post high school education or in the bottom 60 percent household income bracket were more likely to report hospital outpatient department.

- From 2015 to 2018, there was no statistical change in the overall percent of respondents reporting their primary place when they are sick was a hospital outpatient department.
- No demographic comparisons across years were conducted as a result of the low percent of respondents who reported their primary place when they are sick was a hospital outpatient department in both study years.

Table 13. Hospital Outpatient Department as Primary Health Care Service by Demographic Variables for Each

Survey Year[®]

	2006	2009◎	2012	2015 [©]	2018 [©]
TOTAL	3%	2%	3%	2%	2%
Gender ^{1,3}					
Male	5		4		
Female	2		2		
Age ¹					
18 to 24	5		4		
25 to 34	4		1		
35 to 44	3		3		
45 to 54	3		2		
55 to 64	2		3		
65 and Older	2		4		
Race ¹					
White	2		2		
African American	7		4		
Other	6		3		
Hispanic Origin					
Hispanic	5		3		
Non-Hispanic	3		3		
Education ¹					
High School or Less	3		3		
Some Post High School	5		2		
College Graduate	1		3		
Household Income ¹					
Bottom 40 Percent Bracket	4		3		
Middle 20 Percent Bracket	4		2		
Top 40 Percent Bracket	1		2		
Marital Status					
Married	3		2		
Not Married	3		3		

[®]Percentages occasionally may differ by 1 or 2 percentage points from previous reports or the Appendix as a result of rounding, recoding variables and response category distribution.

Advance Care Plan

2018 Findings

• Thirty-six percent of respondents reported they had an advance care plan, living will or health care power of attorney stating their end of life health care wishes.

[®]Data is not shown as a result of insufficient statistical reliability due to the low percentage reporting this.

 $^{^{1}}$ <u>demographic</u> difference at p≤0.05 in 2006; 2 <u>demographic</u> difference at p≤0.05 in 2009; 3 <u>demographic</u> difference at p≤0.05 in 2012; 4 <u>demographic</u> difference at p≤0.05 in 2018

^ayear difference at p≤0.05 from 2006 to 2018; ^byear difference at p≤0.05 from 2015 to 2018

- Female respondents were more likely to report they had an advance care plan (40%) compared to male respondents (32%).
- Seventy-one percent of respondents 65 and older reported they had an advance care plan compared to 24% of those 18 to 24 years old or 21% of respondents 25 to 34 years old.
- White respondents were more likely to report they had an advance care plan (41%) compared to African American respondents (31%) or respondent of another race (30%).
- Non-Hispanic respondents were more likely to report they had an advance care plan (39%) compared to Hispanic respondents (13%).

- From 2006 to 2018, there was a statistical increase in the overall percent of respondents having an advance care plan.
- In 2006, gender was not a significant variable. In 2018, female respondents were more likely to report having an advance care plan, with a noted increase since 2006.
- In 2006 and 2018, respondents 65 and older were more likely to report having an advance care plan. From 2006 to 2018, there was a noted increase in the percent of respondents 18 to 24 years old reporting an advance care plan.
- In 2006 and 2018, white respondents were more likely to report having an advance care plan. From 2006 to 2018, there was a noted increase in the percent of non-white respondents reporting an advance care plan.
- In 2006 and 2018, non-Hispanic respondents were more likely to report having an advance care plan. From 2006 to 2018, there was a noted increase in the percent of non-Hispanic respondents reporting an advance care plan.
- In 2006, respondents with a college education were more likely to report having an advance care plan. In 2018, education was not a significant variable. From 2006 to 2018, there was a noted increase in the percent of respondents with a high school education or less reporting an advance care plan.
- In 2006, respondents in the top 40 percent household income bracket were more likely to report having an advance care plan. In 2018, household income was not a significant variable. From 2006 to 2018, there was a noted increase in the percent of respondents in the bottom 40 percent household income bracket reporting an advance care plan.
- In 2006, married respondents were more likely to report having an advance care plan. In 2018, marital status was not a significant variable. From 2006 to 2018, there was a noted increase in the percent of unmarried respondents reporting an advance care plan.

- From 2015 to 2018, there was a statistical increase in the overall percent of respondents having an advance care plan.
- In 2015, gender was not a significant variable. In 2018, female respondents were more likely to report having an advance care plan, with a noted increase since 2015.

- In 2015 and 2018, respondents 65 and older were more likely to report having an advance care plan. From 2015 to 2018, there was a noted increase in the percent of respondents 18 to 34 years old reporting an advance care plan.
- In 2015 and 2018, white respondents were more likely to report having an advance care plan. From 2015 to 2018, there was a noted increase in the percent of non-white respondents reporting an advance care plan.
- In 2015 and 2018, non-Hispanic respondents were more likely to report having an advance care plan. From 2015 to 2018, there was a noted increase in the percent of non-Hispanic respondents reporting an advance care plan.
- In 2015 and 2018, education was not a significant variable. From 2015 to 2018, there was a noted increase in the percent of respondents with a high school education or less reporting an advance care plan.
- In 2015, respondents in the top 40 percent household income bracket were more likely to report having an advance care plan. In 2018, household income was not a significant variable. From 2015 to 2018, there was a noted increase in the percent of respondents in the bottom 40 percent household income bracket reporting an advance care plan.
- In 2015, married respondents were more likely to report they had an advance care plan. In 2018, marital status was not a significant variable. From 2015 to 2018, there was a noted increase in the percent of unmarried respondents reporting an advance care plan.

Table 14. Advance Care Plan by Demographic Variables for Each Survey Year[®]

	2006	2009	2012	2015	2018
TOTAL ^{a,b}	32%	31%	29%	31%	36%
Gender ⁵					
Male	30	30	27	30	32
Female ^{a,b}	34	32	31	33	40
Age ^{1,2,3,4,5}					
18 to 24 ^{a,b}	6	12	7	7	24
25 to 34 ^b	18	21	17	14	21
35 to 44	26	26	23	28	31
45 to 54	33	23	30	34	32
55 to 64	43	38	36	42	42
65 and Older	69	66	66	70	71
Race ^{1,2,3,4,5}					
White	37	39	35	37	41
African American ^{a,b}	23	24	22	24	31
Other ^{a,b}	17	12	17	13	30
Hispanic Origin ^{1,2,3,4,5}					
Hispanic	18	18	12	14	13
Non-Hispanic ^{a,b}	33	32	31	33	39
Education ^{1,2,3}					
High School or Less ^{a,b}	27	27	25	29	38
Some Post High School	33	30	29	31	34
College Graduate	39	38	35	33	37
Household Income ^{1,2,3,4}					
Bottom 40 Percent Bracket ^{a,b}	27	26	24	28	35
Middle 20 Percent Bracket	34	37	26	33	34
Top 40 Percent Bracket	36	36	37	38	38
Marital Status ^{1,2,3,4}					
Married	38	35	35	39	38
Not Married ^{a,b}	28	28	26	27	35

[®]Percentages occasionally may differ by 1 or 2 percentage points from previous reports or the Appendix as a result of rounding, recoding variables and response category distribution.

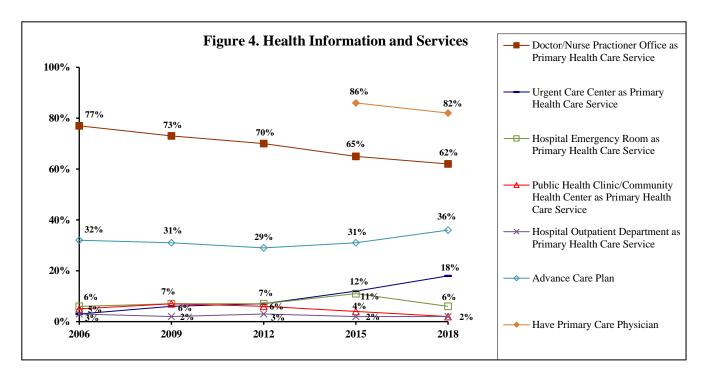
¹demographic difference at p≤0.05 in 2006; ²demographic difference at p≤0.05 in 2009; ³demographic difference at p≤0.05 in 2012; ⁴demographic difference at p≤0.05 in 2018; ⁵demographic difference at p≤0.05 in 2018

^a<u>year</u> difference at p≤0.05 from 2006 to 2018; ^b<u>year</u> difference at p≤0.05 from 2015 to 2018

Health Information and Services Overall

Year Comparisons

From 2015 to 2018, there was a statistical decrease in the overall percent of respondents reporting they have a primary care doctor, nurse practitioner, physician assistant or primary care clinic they regularly go to for checkups and when they are sick. From 2006 to 2018, there was a statistical decrease in the overall percent of respondents reporting their primary place for health services when they are sick was a doctor's or nurse practitioner's office while from 2015 to 2018, there was no statistical change. From 2006 to 2018, there was a statistical increase in the overall percent of respondents reporting their primary place was an urgent care center, as well as from 2015 to 2018. From 2006 to 2018, there was no statistical change in the overall percent of respondents reporting their primary place was a hospital emergency room while from 2015 to 2018, there was a statistical decrease. From 2006 to 2018, there was a statistical decrease in the overall percent of respondents reporting their primary place was a public health clinic or community health center, as well as from 2015 to 2018. From 2006 to 2018, there was no statistical change in the overall percent of respondents reporting their primary place was a hospital outpatient department, as well as from 2015 to 2018. From 2006 to 2018, there was a statistical increase in the overall percent of respondents who reported having an advance care plan, as well as from 2015 to 2018.



Dental Checkup (Figure 5; Table 15)

KEY FINDINGS: In 2018, 63% of respondents reported a visit to the dentist in the past year. Respondents who were 35 to 44 years old, white, non-Hispanic, with a college education, in the top 40 percent household income bracket or married respondents were more likely to report a dental checkup in the past year.

> From 2006 to 2018, there was no statistical change in the overall percent of respondents reporting a dental checkup in the past year, as well as from 2015 to 2018.

Dental Checkup

Counseling patients to visit a dental care provider on a regular basis as well as floss, use fluoride properly, et cetera is recommended.¹

The Healthy People 2020 goal for an oral health care system visit in the past 12 months is 49%. (Objective OH-7)

In 2016, 73% of Wisconsin respondents and 66% of U.S. respondents reported they visited the dentist or dental clinic within the past year for any reason (2016 Behavioral Risk Factor Surveillance).

2018 Findings

- Sixty-three percent of respondents reported a dental visit in the past year. An additional 19% had a visit in the past one to two years.
- Seventy-three percent of respondents 35 to 44 years old reported a dental checkup in the past year compared to 58% of those 25 to 34 years old or 49% of respondents 18 to 24 years old.
- White respondents were more likely to report a dental checkup in the past year (67%) compared to African American respondents (60%) or respondents of another race (52%).
- Non-Hispanic respondents were more likely to report a dental checkup in the past year (65%) compared to Hispanic respondents (51%).
- Eighty percent of respondents with a college education reported a dental checkup in the past year compared to 56% of those with some post high school education or 53% of respondents with a high school education or less.
- Seventy-nine percent of respondents in the top 40 percent household income bracket reported a dental checkup in the past year compared to 62% of those in the middle 20 percent income bracket or 55% of respondents in the bottom 40 percent household income bracket.
- Married respondents were more likely to report a dental checkup in the past year compared to unmarried respondents (70% and 59%, respectively).

- From 2006 to 2018, there was no statistical change in the overall percent of respondents who reported having a dental checkup in the past year.
- In 2006, female respondents were more likely to report a dental checkup in the past year. In 2018, gender was not a significant variable.
- In 2006, respondents 35 to 64 years old were more likely to report a dental checkup in the past year. In 2018, respondents 35 to 44 years old were more likely to report a dental checkup in the past year, with a noted increase since 2006. From 2006 to 2018, there was a noted decrease in the percent of respondents 18 to 24 years old reporting a dental checkup in the past year.
- In 2006 and 2018, white respondents were more likely to report a dental checkup in the past year.
- In 2006 and 2018, non-Hispanic respondents were more likely to report a dental checkup in the past year.

¹ "Chapter 61: Counseling to Prevent Dental and Periodontal Diseases." <u>U.S. Preventive Services Task Force: Guide to Clinical</u> Preventive Services. 2nd ed. Baltimore: Williams & Wilkins, 1996. Page 711.

- In 2006 and 2018, respondents with a college education were more likely to report a dental checkup in the past year. From 2006 to 2018, there was a noted <u>decrease</u> in the percent of respondents with some post high school education and a noted increase in the percent of respondents with a college education reporting a dental checkup in the past year.
- In 2006 and 2018, respondents in the top 40 percent household income bracket were more likely to report a dental checkup in the past year. From 2006 to 2018, there was a noted <u>decrease</u> in the percent of respondents in the middle 20 percent household income bracket reporting a dental checkup in the past year.
- In 2006 and 2018, married respondents were more likely to report a dental checkup in the past year.

- From 2015 to 2018, there was no statistical change in the overall percent of respondents who reported having a dental checkup in the past year.
- In 2015, female respondents were more likely to report a dental checkup in the past year. In 2018, gender was not a significant variable.
- In 2015, respondents 18 to 24 years old were more likely to report a dental checkup in the past year. In 2018, respondents 35 to 44 years old were more likely to report a dental checkup in the past year, with a noted increase since 2015. From 2015 to 2018, there was a noted decrease in the percent of respondents 18 to 24 years old reporting a dental checkup in the past year.
- In 2015 and 2018, white respondents were more likely to report a dental checkup in the past year. From 2015 to 2018, there was a noted increase in the percent of African American respondents reporting a dental checkup in the past year.
- In 2015, Hispanic origin was not a significant variable. In 2018, non-Hispanic respondents were more likely to report a dental checkup in the past year. From 2015 to 2018, there was a noted <u>decrease</u> in the percent of Hispanic respondents reporting a dental checkup in the past year.
- In 2015, education was not a significant variable. In 2018, respondents with a college education were more likely to report a dental checkup in the past year, with a noted increase since 2015. From 2015 to 2018, there was a noted <u>decrease</u> in the percent of respondents with a high school education or less reporting a dental checkup in the past year.
- In 2015, respondents in the middle 20 percent household income bracket were more likely to report a dental checkup in the past year. In 2018, respondents in the top 40 percent household income bracket were more likely to report a dental checkup in the past year, with a noted increase since 2015. From 2015 to 2018, there was a noted increase in the percent of respondents in the bottom 40 percent household income bracket and a noted decrease in the percent of respondents in the middle 20 percent household income bracket reporting a dental checkup in the past year.
- In 2015 and 2018, married respondents were more likely to report a dental checkup in the past year.

Table 15. Dental Checkup Less than One Year Ago by Demographic Variables for Each Survey Year[®]

Table 15. Dental Checkup Less than	2006	2009	2012	2015	2018
TOTAL	63%	60%	56%	62%	63%
Gender ^{1,2,3,4}					
Male	60	56	53	58	60
Female	65	63	59	65	66
Age ^{1,2,3,4,5}					
18 to 24 ^{a,b}	61	42	41	71	49
25 to 34	54	58	46	52	58
35 to 44 ^{a,b}	66	68	63	56	73
45 to 54	68	66	66	63	64
55 to 64	67	62	58	68	68
65 and Older	63	58	62	65	67
Race ^{1,2,3,4,5}					
White	68	67	62	67	67
African American ^b	55	52	46	52	60
Other	47	47	51	54	52
Hispanic Origin ^{1,2,3,5}					
Hispanic ^b	49	45	48	63	51
Non-Hispanic	64	61	57	61	65
Education ^{1,2,3,5}					
High School or Less ^b	54	50	46	59	53
Some Post High School ^a	64	58	53	60	56
College Graduate ^{a,b}	74	76	71	65	80
Household Income ^{1,2,3,4,5}					
Bottom 40 Percent Bracket ^b	52	48	44	49	55
Middle 20 Percent Bracket ^{a,b}	72	66	62	72	62
Top 40 Percent Bracket ^b	80	86	78	69	79
Marital Status ^{1,2,3,4,5}					
Married	73	71	67	69	70
Not Married	56	53	50	58	59

[®]Percentages occasionally may differ by 1 or 2 percentage points from previous reports or the Appendix as a result of rounding, recoding variables and response category distribution.

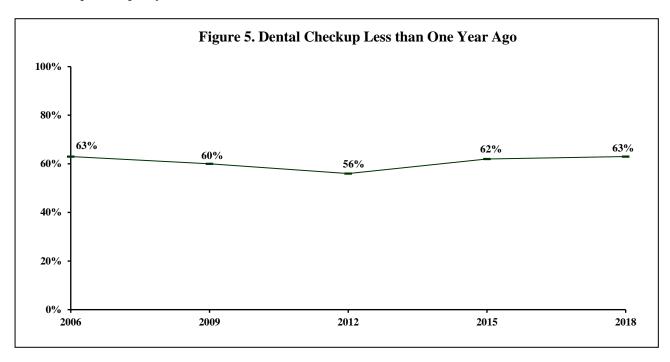
¹demographic difference at p≤0.05 in 2006; ²demographic difference at p≤0.05 in 2009; ³demographic difference at p≤0.05 in 2012; ⁴demographic difference at p≤0.05 in 2015; ⁵demographic difference at p≤0.05 in 2018

^a<u>year</u> difference at p≤0.05 from 2006 to 2018; ^b<u>year</u> difference at p≤0.05 from 2015 to 2018

Dental Checkup Overall

Year Comparisons

• From 2006 to 2018, there was no statistical change in the overall percent of respondents reporting a dental checkup in the past year, as well as from 2015 to 2018.



Flu Vaccination (Figure 6; Table 16)

KEY FINDINGS: In 2018, 47% of respondents had a flu vaccination in the past year. Respondents who were female, 65 and older, white, non-Hispanic, with a college education or married respondents were more likely to report a flu vaccination.

From 2006 to 2018, there was a statistical increase in the overall percent of respondents 18 and older who reported a flu vaccination in the past year while from 2015 to 2018, there was no statistical change. From 2006 to 2018, there was no statistical change in the overall percent of respondents 65 and older who reported a flu vaccination in the past year, as well as from 2015 to 2018.

Flu Vaccination

The Healthy People 2020 goal for adults 18 and older having an annual influenza vaccination is 70%. (Objectives IID-12.8)

In 2016, 50% of Wisconsin respondents and 59% of U.S. respondents 65 and older reported they received a flu vaccination in the past year (2016 Behavioral Risk Factor Surveillance).

2018 Findings

• Forty-seven percent of respondents had a flu vaccination in the past year.

- Female respondents were more likely to report receiving a flu vaccination (55%) compared to male respondents (38%).
- Respondents 65 and older were more likely to report receiving a flu vaccination (75%) compared to those 35 to 54 years old (39%) or respondents 18 to 24 years old (24%).
- White respondents were more likely to report receiving a flu vaccination (52%) compared to African American respondents (40%) or respondents of another race (38%).
- Non-Hispanic respondents were more likely to report receiving a flu vaccination (48%) compared to Hispanic respondents (32%).
- Fifty-four percent of respondents with a college education reported receiving a flu vaccination compared to 47% of those with some post high school education or 39% of respondents with a high school education or less.
- Married respondents were more likely to report receiving a flu vaccination compared to unmarried respondents (53% and 43%, respectively).

- From 2006 to 2018, there was a statistical increase in the overall percent of respondents who reported a flu vaccination in the past year.
- In 2006 and 2018, female respondents were more likely to report a flu vaccination. From 2006 to 2018, there was a noted increase in the percent of respondents across gender reporting a flu vaccination.
- In 2006 and 2018, respondents 65 and older were more likely to report a flu vaccination. From 2006 to 2018, there was a noted increase in the percent of respondents 25 to 44 years old reporting a flu vaccination.
- In 2006 and 2018, white respondents were more likely to report a flu vaccination. From 2006 to 2018, there was a noted increase in the percent of respondents who were white or African American reporting a flu vaccination.
- In 2006, Hispanic origin was not a significant variable. In 2018, non-Hispanic respondents were more likely to report a flu vaccination, with a noted increase since 2006.
- In 2006, education was not a significant variable. In 2018, respondents with a college education were more likely to report a flu vaccination. From 2006 to 2018, there was a noted increase in the percent of respondents with at least some post high school education reporting a flu vaccination.
- In 2006 and 2018, household income was not a significant variable. From 2006 to 2018, there was a noted increase in the percent of respondents across household income reporting a flu vaccination.
- In 2006, marital status was not a significant variable. In 2018, married respondents were more likely to report a flu vaccination. From 2006 to 2018, there was a noted increase in the percent of respondents across marital status reporting a flu vaccination.

- From 2015 to 2018, there was no statistical change in the overall percent of respondents who reported a flu vaccination in the past year.
- In 2015 and 2018, female respondents were more likely to report a flu vaccination.

- In 2015 and 2018, respondents 65 and older were more likely to report a flu vaccination. From 2015 to 2018, there was a noted <u>decrease</u> in the percent of respondents 18 to 24 years old a noted increase in the percent of respondents 25 to 34 years old reporting a flu vaccination.
- In 2015 and 2018, white respondents were more likely to report a flu vaccination.
- In 2015 and 2018, non-Hispanic respondents were more likely to report a flu vaccination.
- In 2015, respondents with a high school education or less were more likely to report a flu vaccination. In 2018, respondents with a college education were more likely to report a flu vaccination, with a noted increase since 2015. From 2015 to 2018, there was a noted <u>decrease</u> in the percent of respondents with a high school education or less reporting a flu vaccination.
- In 2015, respondents in the bottom 40 percent household income bracket or in the top 40 percent household income bracket were more likely to report a flu vaccination. In 2018, household income was not a significant variable. From 2015 to 2018, there was a noted <u>decrease</u> in the percent of respondents in the bottom 40 percent household income bracket and a noted increase in the percent of respondents in the middle 20 percent household income bracket reporting a flu vaccination.
- In 2015, marital status was not a significant variable. In 2018, married respondents were more likely to report a flu vaccination.

Table 16. Flu Vaccination in Past Year by Demographic Variables for Each Survey Year[®]

Γable 16. Flu Vaccination in Past Year	2006	2009	2012	2015	2018
TOTAL ^a	36%	40%	38%	48%	47%
Gender ^{1,2,3,4,5}					
Male ^a	31	36	34	43	38
Female ^a	39	45	40	52	55
Age ^{1,2,3,4,5}					
18 to 24 ^b	22	31	31	42	24
25 to 34 ^{a,b}	21	33	29	36	50
35 to 44 ^a	26	27	32	38	39
45 to 54	33	39	35	45	39
55 to 64	47	49	42	54	55
65 and Older	71	69	63	76	75
Race ^{1,2,4,5}					
White ^a	38	45	39	51	52
African American ^a	29	35	36	43	40
Other	31	29	33	46	38
Hispanic Origin ^{4,5}					
Hispanic	30	33	41	25	32
Non-Hispanic ^a	36	41	37	50	48
Education ^{2,4,5}					
High School or Less ^b	35	39	39	52	39
Some Post High School ^a	37	36	35	46	47
College Graduate ^{a,b}	35	47	38	45	54
Household Income ^{2,4}					
Bottom 40 Percent Bracket ^{a,b}	35	38	37	48	43
Middle 20 Percent Bracket ^{a,b}	36	40	31	40	48
Top 40 Percent Bracket ^a	33	45	38	47	47
Marital Status ^{3,5}					
Married ^a	37	42	42	51	53
Not Married ^a	34	39	35	46	43

[®]Percentages occasionally may differ by 1 or 2 percentage points from previous reports or the Appendix as a result of rounding, recoding variables and response category distribution.

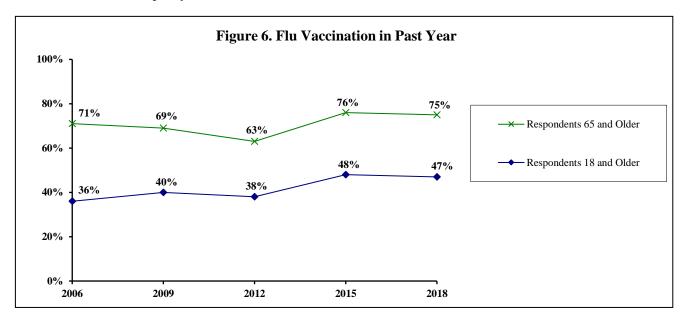
¹demographic difference at p≤0.05 in 2006; ²demographic difference at p≤0.05 in 2009; ³demographic difference at p≤0.05 in 2012; ⁴demographic difference at p≤0.05 in 2015; ⁵demographic difference at p≤0.05 in 2018

^a<u>year</u> difference at p≤0.05 from 2006 to 2018; ^b<u>year</u> difference at p≤0.05 from 2015 to 2018

Flu Vaccination Overall

Year Comparisons

From 2006 to 2018, there was a statistical increase in the overall percent of respondents 18 and older who reported a flu vaccination in the past year while from 2015 to 2018, there was no statistical change. From 2006 to 2018, there was no statistical change in the overall percent of respondents 65 and older who reported a flu vaccination in the past year, as well as from 2015 to 2018.



Prevalence of Select Health Conditions (Figures 7 & 8; Tables 17 - 22)

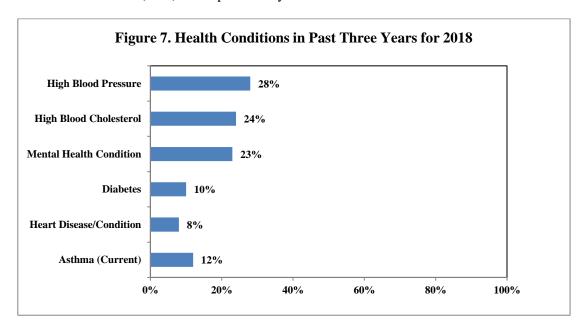
Respondents were asked a series of questions regarding if they had certain health conditions in the past three years. Current diagnosis of asthma was asked.

KEY FINDINGS: In 2018, out of six health conditions listed, the most often mentioned in the past three years was high blood pressure (28%), high blood cholesterol (24%) or a mental health condition (23%). Respondents who were 65 and older, white, non-Hispanic, with some post high school education, in the bottom 40 percent household income bracket, who were overweight or inactive were more likely to report high blood pressure. Respondents who were female, 65 and older, African American, non-Hispanic, with a high school education or less, in the bottom 40 percent household income bracket, who were overweight or inactive were more likely to report high blood cholesterol. Respondents who were female, 18 to 24 years old, African American, Hispanic, with a high school education or less, in the bottom 40 percent household income bracket, who were unmarried, not overweight, inactive, met the recommended amount of physical activity or smokers were more likely to report a mental health condition. Ten percent of respondents reported diabetes; respondents who were 65 and older, in the bottom 40 percent household income bracket, overweight, inactive or nonsmokers were more likely to report this. Eight percent reported they were treated for, or told they had heart disease/condition in the past three years; respondents who were 65 and older, white, non-Hispanic, with some post high school education, in the bottom 60 percent household income bracket, who were overweight or inactive were more likely to report this. Twelve percent reported current asthma; respondents who were female, 25 to 64 years old, non-Hispanic, in the bottom 40 percent household income bracket or unmarried were more likely to report this.

From 2006 to 2018, there was no statistical change in the overall percent of respondents who reported high blood pressure, diabetes, heart disease/condition or current asthma, as well as from 2015 to 2018. From 2006 to 2018, there was no statistical change in the overall percent of respondents who reported high blood cholesterol while from 2015 to 2018, there was a noted increase. From 2009 to 2018, there was a statistical increase in the overall percent of respondents who reported a mental health condition, as well as from 2015 to 2018.

2018 Findings

• Respondents were more likely to report high blood pressure (28%), high blood cholesterol (24%) or a mental health condition (23%) in the past three years out of six health conditions listed.



High Blood Pressure

2018 Findings

- Twenty-eight percent of respondents reported high blood pressure in the past three years.
- Respondents 65 and older were more likely to report high blood pressure in the past three years (65%) compared to those 25 to 34 years old (9%) or respondents 18 to 24 years old (0%).
- White respondents were more likely to report high blood pressure (30%) compared to African American respondents (28%) or respondents of another race (20%).
- Non-Hispanic respondents were more likely to report high blood pressure (30%) compared to Hispanic respondents (10%).
- Respondents with some post high school education were more likely to report high blood pressure (32%) compared to those with a high school education or less (30%) or respondents with a college education (23%).
- Thirty-one percent of respondents in the bottom 40 percent household income bracket reported high blood pressure compared to 29% of those in the middle 20 percent income bracket or 23% of respondents in the top 40 percent household income bracket.

- Overweight respondents were more likely to report high blood pressure (38%) compared to respondents who were not overweight (11%).
- Forty-five percent of inactive respondents reported high blood pressure compared to 29% of those who did an insufficient amount of physical activity or 22% of respondents who did the recommended amount of physical activity.

- From 2006 to 2018, there was no statistical change in the overall percent of respondents who reported high blood pressure.
- In 2006, female respondents were more likely to report high blood pressure. In 2018, gender was not a significant variable.
- In 2006 and 2018, respondents 65 and older were more likely to report high blood pressure. From 2006 to 2018, there was a noted <u>decrease</u> in the percent of respondents 18 to 24 years old and a noted increase in the percent of respondents 35 to 44 years old reporting high blood pressure.
- In 2006, African American respondents were more likely to report high blood pressure. In 2018, white respondents were more likely to report high blood pressure.
- In 2006 and 2018, non-Hispanic respondents were more likely to report high blood pressure.
- In 2006, respondents with a high school education or less were more likely to report high blood pressure. In 2018, respondents with some post high school education were more likely to report high blood pressure.
- In 2006 and 2018, respondents in the bottom 40 percent household income bracket were more likely to report high blood pressure.
- In 2006 and 2018, overweight respondents were more likely to report high blood pressure. From 2006 to 2018, there was a noted <u>decrease</u> in the percent of respondents who were not overweight and a noted increase in the percent of overweight respondents reporting high blood pressure.
- In 2006 and 2018, inactive respondents were more likely to report high blood pressure.
- In 2006, nonsmokers were more likely to report high blood pressure. In 2018, smoking status was not a significant variable.

- From 2015 to 2018, there was no statistical change in the overall percent of respondents who reported high blood pressure.
- In 2015 and 2018, respondents 65 and older were more likely to report high blood pressure. From 2015 to 2018, there was a noted decrease in the percent of respondents 18 to 24 years old reporting high blood pressure.
- In 2015, African American respondents were more likely to report high blood pressure. In 2018, white respondents were more likely to report high blood pressure. From 2015 to 2018, there was a noted <u>decrease</u> in the percent of African American respondents reporting high blood pressure.
- In 2015 and 2018, non-Hispanic respondents were more likely to report high blood pressure.

- In 2015, respondents with a high school education or less were more likely to report high blood pressure. In 2018, respondents with some post high school education were more likely to report high blood pressure. From 2015 to 2018, there was a noted <u>decrease</u> in the percent of respondents with a high school education or less reporting high blood pressure.
- In 2015 and 2018, respondents in the bottom 40 percent household income bracket were more likely to report high blood pressure.
- In 2015 and 2018, overweight respondents were more likely to report high blood pressure.
- In 2015 and 2018, inactive respondents were more likely to report high blood pressure.

Table 17. High Blood Pressure in Past Three Years by Demographic Variables for Each Survey Year[®]

Table 17. High Blood Pressure in Pas	2006	2009	2012	2015	2018
TOTAL	27%	29%	30%	29%	28%
Gender ^{1,2,3}					
Male	24	25	27	27	27
Female	30	33	32	31	29
$Age^{1,2,3,4,5}$					
18 to 24 ^{a,b}	11	6	8	4	0
25 to 34	13	8	13	13	9
35 to 44 ^a	17	21	18	24	29
45 to 54	29	33	32	32	30
55 to 64	43	53	50	46	41
65 and Older	58	64	62	61	65
Race ^{1,2,3,4,5}					
White	27	29	29	28	30
African American ^b	32	32	36	38	28
Other	15	18	17	16	20
Hispanic Origin ^{1,3,4,5}					
Hispanic	16	22	13	15	10
Non-Hispanic	28	30	31	30	30
Education ^{1,2,3,4,5}					
High School or Less ^b	33	35	36	37	30
Some Post High School	28	27	28	29	32
College Graduate	20	22	24	21	23
Household Income ^{1,2,3,4,5}					
Bottom 40 Percent Bracket	31	32	36	36	31
Middle 20 Percent Bracket	24	23	25	28	29
Top 40 Percent Bracket	19	22	19	21	23
Marital Status ³					
Married	26	28	27	29	29
Not Married	28	30	31	29	27
Overweight Status ^{1,2,3,4,5}					
Not Overweight ^a	17	17	16	14	11
Overweight ^a	33	35	36	36	38
Physical Activity ^{1,2,3,4,5}					
Inactive	38	41	40	48	45
Insufficient	28	31	30	29	29
Recommended	23	23	26	24	22
Smoking Status ^{1,2}					
Nonsmoker	29	30	30	28	29
Smoker	23	26	28	32	25

[®]Percentages occasionally may differ by 1 or 2 percentage points from previous reports or the Appendix as a result of rounding, recoding variables and response category distribution.

 $^{^{1}}$ <u>demographic</u> difference at p≤0.05 in 2006; 2 <u>demographic</u> difference at p≤0.05 in 2009; 3 <u>demographic</u> difference at p≤0.05 in 2012; 4 <u>demographic</u> difference at p≤0.05 in 2015; 5 <u>demographic</u> difference at p≤0.05 in 2018

^a<u>year</u> difference at p≤0.05 from 2006 to 2018; ^b<u>year</u> difference at p≤0.05 from 2015 to 2018

High Blood Cholesterol

2018 Findings

- Twenty-four percent of respondents reported high blood cholesterol in the past three years.
- Female respondents were more likely to report high blood cholesterol in the past three years (27%) compared to male respondents (20%).
- Respondents 65 and older were more likely to report high blood cholesterol (44%) compared to those 35 to 44 years old (14%) or respondents 25 to 34 years old (8%).
- African American respondents were more likely to report high blood cholesterol (30%) compared to white respondents (23%) or respondents of another race (12%).
- Non-Hispanic respondents were more likely to report high blood cholesterol (25%) compared to Hispanic respondents (7%).
- Thirty percent of respondents with a high school education or less reported high blood cholesterol compared to 23% of those with some post high school education or 18% of respondents with a college education.
- Thirty percent of respondents in the bottom 40 percent household income bracket reported high blood cholesterol compared to 19% of respondents in the top 60 percent household income bracket.
- Overweight respondents were more likely to report high blood cholesterol (28%) compared to respondents who were not overweight (17%).
- Thirty-five percent of inactive respondents reported high blood cholesterol compared to 23% of those who met the recommended amount of physical activity or 21% of respondents who did an insufficient amount of physical activity.

- From 2006 to 2018, there was no statistical change in the overall percent of respondents who reported high blood cholesterol.
- In 2006, gender was not a significant variable. In 2018, female respondents were more likely to report high blood cholesterol, with a noted increase since 2006.
- In 2006 and 2018, respondents 65 and older were more likely to report high blood cholesterol. From 2006 to 2018, there was a noted increase in the percent of respondents 18 to 24 years old reporting high blood cholesterol.
- In 2006, white respondents were more likely to report high blood cholesterol. In 2018, African American respondents were more likely to report high blood cholesterol, with a noted increase since 2006.
- In 2006 and 2018, non-Hispanic respondents were more likely to report high blood cholesterol.
- In 2006, respondents with some post high school education were more likely to report high blood cholesterol. In 2018, respondents with a high school education or less were more likely to report high blood cholesterol, with a noted increase since 2006.

- In 2006, household income was not a significant variable. In 2018, respondents in the bottom 40 percent household income bracket were more likely to report high blood cholesterol, with a noted increase since 2006.
- In 2006, married respondents were more likely to report high blood cholesterol. In 2018, marital status was not a significant variable.
- In 2006 and 2018, overweight respondents were more likely to report high blood cholesterol.
- In 2006 and 2018, inactive respondents were more likely to report high blood cholesterol. From 2006 to 2018, there was a noted increase in the percent of inactive respondents reporting high blood cholesterol.

- From 2015 to 2018, there was a statistical increase in the overall percent of respondents who reported high blood cholesterol.
- In 2015, gender was not a significant variable. In 2018, female respondents were more likely to report high blood cholesterol, with a noted increase since 2015.
- In 2015 and 2018, respondents 65 and older were more likely to report high blood cholesterol. From 2015 to 2018, there was a noted increase in the percent of respondents 18 to 24 years old reporting high blood cholesterol.
- In 2015, respondents who were white or African American were more likely to report high blood cholesterol. In 2018, African American respondents were more likely to report high blood cholesterol, with a noted increase since 2015.
- In 2015 and 2018, non-Hispanic respondents were more likely to report high blood cholesterol. From 2015 to 2018, there was a noted increase in the percent of non-Hispanic respondents reporting high blood cholesterol.
- In 2015 and 2018, respondents with a high school education or less were more likely to report high blood cholesterol. From 2015 to 2018, there was a noted increase in the percent of respondents with some post high school education or less reporting high blood cholesterol.
- In 2015, household income was not a significant variable. In 2018, respondents in the bottom 40 percent household income bracket were more likely to report high blood cholesterol, with a noted increase since 2015.
- In 2015, married respondents were more likely to report high blood cholesterol. In 2018, marital status was not a significant variable. From 2015 to 2018, there was a noted increase in the percent of unmarried respondents reporting high blood cholesterol.
- In 2015 and 2018, overweight respondents were more likely to report high blood cholesterol. From 2015 to 2018, there was a noted increase in the percent of respondents across overweight status reporting high blood cholesterol.
- In 2015 and 2018, inactive respondents were more likely to report high blood cholesterol. From 2015 to 2018, there was a noted increase in the percent of respondents who met the recommended amount of physical activity reporting high blood cholesterol.
- In 2015 and 2018, smoking status was not a significant variable. From 2015 to 2018, there was a noted increase in the percent of nonsmokers reporting high blood cholesterol.

Table 18. High Blood Cholesterol in Past Three Years by Demographic Variables for Each Survey Year®							
mom ex h	2006	2009	2012	2015	2018		
TOTAL ^b	22%	22%	21%	20%	24%		
Gender ⁵							
Male	22	22	22	21	20		
Female ^{a,b}	22	23	21	18	27		
Age ^{1,2,3,4,5}							
18 to 24 ^{a,b}	7	2	1	0	19		
25 to 34	6	8	4	4	8		
35 to 44	16	22	22	14	14		
45 to 54	29	22	30	27	30		
55 to 64	40	41	37	34	34		
65 and Older	43	44	39	44	44		
Race ^{1,2,3,4,5}							
White	25	24	25	21	23		
African American ^{a,b}	18	20	17	21	30		
Other	11	15	16	8	12		
Hispanic Origin ^{1,3,4,5}							
Hispanic	12	16	15	8	7		
Non-Hispanic ^b	23	22	22	21	25		
-							
Education ^{1,2,3,4,5}							
High School or Less ^{a,b}	22	25	25	23	30		
Some Post High School ^b	25	18	18	17	23		
College Graduate	20	23	20	18	18		
Household Income ⁵							
Bottom 40 Percent Bracketa,b	22	23	22	21	30		
Middle 20 Percent Bracket	23	19	23	21	19		
Top 40 Percent Bracket	22	21	20	18	19		
Marital Status ^{1,3,4}							
Married	24	22	24	23	24		
Not Married ^b	21	22	20	18	23		
Overweight Status ^{1,2,3,4,5}							
Not Overweight ^b	17	13	11	11	17		
Overweight ^b	25	27	27	23	28		
Physical Activity ^{1,2,3,4,5}							
Inactive ^a	27	30	31	35	35		
Insufficient	23	24	25	18	21		
Recommended ^b	19	16	16	17	23		
Smoking Status							
Nonsmoker ^b	23	23	22	20	24		
Smoker	20	21	21	20	23		

[®]Percentages occasionally may differ by 1 or 2 percentage points from previous reports or the Appendix as a result of rounding, recoding variables and response category distribution.

 $^{^{1}}$ <u>demographic</u> difference at p≤0.05 in 2006; 2 <u>demographic</u> difference at p≤0.05 in 2009; 3 <u>demographic</u> difference at p≤0.05 in 2012; 4 <u>demographic</u> difference at p≤0.05 in 2015; 5 <u>demographic</u> difference at p≤0.05 in 2018

^ayear difference at p \le 0.05 from 2006 to 2018; ^byear difference at p \le 0.05 from 2015 to 2018

Mental Health Condition

2018 Findings

- Twenty-three percent of respondents reported a mental health condition, such as an anxiety disorder, obsessive-compulsive disorder, panic disorder, post-traumatic stress disorder or depression in the past three years.
- Female respondents were more likely to report a mental health condition in the past three years (27%) compared to male respondents (19%).
- Respondents 18 to 24 years old were more likely to report a mental health condition (49%) compared to those 35 to 44 years old (15%) or respondents 65 and older (12%).
- African American respondents were more likely to report a mental health condition (33%) compared to respondents who were non-white and non-African American (29%) or white respondents (17%).
- Hispanic respondents were more likely to report a mental health condition (45%) compared to non-Hispanic respondents (21%).
- Thirty-eight percent of respondents with a high school education or less reported a mental health condition compared to 18% of those with a college education or 15% of respondents with some post high school education.
- Thirty-six percent of respondents in the bottom 40 percent household income bracket reported a mental health condition compared to 16% of those in the middle 20 percent income bracket or 10% of respondents in the top 40 percent household income bracket.
- Unmarried respondents were more likely to report a mental health condition compared to married respondents (28% and 14%, respectively).
- Respondents who were not overweight were more likely to report a mental health condition (29%) compared to overweight respondents (20%).
- Twenty-eight percent of inactive respondents and 27% of those who met the recommended amount of physical activity reported a mental health condition compared to 18% of respondents who did an insufficient amount of physical activity.
- Smokers were more likely to report a mental health condition (29%) compared to nonsmokers (22%).

- From 2009 to 2018, there was a statistical increase in the overall percent of respondents reporting a mental health condition.
- In 2009 and 2018, female respondents were more likely to report a mental health condition. From 2009 to 2018, there was a noted increase in the percent of respondents across gender reporting a mental health condition.
- In 2009, respondents 55 to 64 years old were more likely to report a mental health condition. In 2018, respondents 18 to 24 years old were more likely to report a mental health condition. From 2009 to 2018, there was a noted increase in the percent of respondents 18 to 34 years old reporting a mental health condition.

- In 2009, race was not a significant variable. In 2018, African American respondents were more likely to report a mental health condition. From 2009 to 2018, there was a noted increase in the percent of respondents across race reporting a mental health condition.
- In 2009 and 2018, Hispanic respondents were more likely to report a mental health condition. From 2009 to 2018, there was a noted increase in the percent of respondents across Hispanic origin reporting a mental health condition.
- In 2009, respondents with some post high school education or less were more likely to report a mental health condition. In 2018, respondents with a high school education or less were more likely to report a mental health condition, with a noted increase since 2009. From 2009 to 2018, there was a noted increase in the percent of respondents with a college education reporting a mental health condition.
- In 2009 and 2018, respondents in the bottom 40 percent household income bracket were more likely to report a mental health condition. From 2009 to 2018, there was a noted increase in the percent of respondents in the bottom 40 percent household income bracket reporting a mental health condition.
- In 2009 and 2018, unmarried respondents were more likely to report a mental health condition. From 2009 to 2018, there was a noted increase in the percent of respondents across marital status reporting a mental health condition.
- In 2009, overweight respondents were more likely to report a mental health condition. In 2018, respondents who were not overweight were more likely to report a mental health condition. From 2009 to 2018, there was a noted increase in the percent of respondents across overweight status reporting a mental health condition.
- In 2009, inactive respondents were more likely to report a mental health condition. In 2018, respondents who were inactive or who met the recommended amount of physical activity were more likely to report a mental health condition. From 2009 to 2018, there was a noted increase of respondents across physical activity reporting a mental health condition.
- In 2009 and 2018, smokers were more likely to report a mental health condition. From 2009 to 2018, there was a noted increase in the percent of nonsmokers reporting a mental health condition.

- From 2015 to 2018, there was a statistical increase in the overall percent of respondents reporting a mental health condition.
- In 2015 and 2018, female respondents were more likely to report a mental health condition. From 2015 to 2018, there was a noted increase in the percent of female respondents reporting a mental health condition.
- In 2015, respondents 35 to 54 years old were more likely to report a mental health condition. In 2018, respondents 18 to 24 years old were more likely to report a mental health condition. From 2015 to 2018, there was a noted increase in the percent of respondents 18 to 34 years old and a noted decrease in the percent of respondents 35 to 44 years old reporting a mental health condition.
- In 2015, race was not a significant variable. In 2018, African American respondents were more likely to report a mental health condition, with a noted increase since 2015.
- In 2015, Hispanic origin was not a significant variable. In 2018, Hispanic respondents were more likely to report a mental health condition, with a noted increase since 2015.

- In 2015 and 2018, respondents with a high school education or less were more likely to report a mental health condition. From 2015 to 2018, there was a noted increase in the percent of respondents with a high school education or less reporting a mental health condition.
- In 2015 and 2018, respondents in the bottom 40 percent household income bracket were more likely to report a mental health condition. From 2015 to 2018, there was a noted increase in the percent of respondents in the bottom 40 percent household income bracket reporting a mental health condition.
- In 2015 and 2018, unmarried respondents were more likely to report a mental health condition. From 2015 to 2018, there was a noted increase in the percent of unmarried respondents reporting a mental health condition.
- In 2015, overweight status was not a significant variable. In 2018, respondents who were not overweight were more likely to report a mental health condition, with a noted increase since 2015.
- In 2015, inactive respondents were more likely to report a mental health condition. In 2018, respondents who were inactive or who met the recommended amount of physical activity were more likely to report a mental health condition. From 2015 to 2018, there was a noted increase in the percent of respondents who met the recommended amount of physical activity reporting a mental health condition.
- In 2015 and 2018, smokers were more likely to report a mental health condition. From 2015 to 2018, there was a noted increase in the percent of nonsmokers reporting a mental health condition.

Table 19. Mental Health Condition in Past Three Years by Demographic Variables for Each Survey Year[®]

Table 19. Mental Health Condition in	2009	2012	2015	2018
TOTAL ^{a,b}	13%	14%	18%	23%
Gender ^{1,2,3,4}				
Male ^a	11	11	15	19
Female ^{a,b}	16	17	20	27
Age ^{1,2,3,4}				
18 to 24 ^{a,b}	10	14	15	49
25 to 34 ^{a,b}	11	12	17	26
35 to 44 ^b	16	14	21	15
45 to 54	17	21	21	21
55 to 64	20	17	19	19
65 and Older	9	9	13	12
Race ⁴				
White ^a	13	14	18	17
African American ^{a,b}	14	15	19	33
Other ^a	11	13	22	29
Hispanic Origin ^{1,4}				
Hispanic ^{a,b}	21	12	16	45
Non-Hispanic ^a	13	14	18	21
Education ^{1,2,3,4}				
High School or Less ^{a,b}	15	15	24	38
Some Post High School	14	18	17	15
College Graduate ^a	10	9	14	18
Household Income ^{1,2,3,4}				
Bottom 40 Percent Bracket ^{a,b}	17	21	25	36
Middle 20 Percent Bracket	10	7	12	16
Top 40 Percent Bracket	7	8	12	10
Marital Status ^{1,2,3,4}				
Marrieda	9	10	14	14
Not Married ^{a,b}	16	16	20	28
Overweight Status ^{1,2,4}				
Not Overweight ^{a,b}	10	11	16	29
Overweight ^a	15	16	19	20
Physical Activity ^{1,2,3,4}				
Inactive ^a	18	20	35	28
Insufficient ^a	13	15	14	18
Recommended ^{a,b}	12	12	17	27
Smoking Status ^{1,2,3,4}				
Nonsmoker ^{a,b}	10	12	16	22
Smoker	23	21	27	29

[®]Percentages occasionally may differ by 1 or 2 percentage points from previous reports or the Appendix as a result of rounding, recoding variables and response category distribution.

¹<u>demographic</u> difference at p≤0.05 in 2009; ²<u>demographic</u> difference at p≤0.05 in 2012

 $[\]frac{3}{\text{demographic}}$ difference at p≤0.05 in 2015; $\frac{4}{\text{demographic}}$ difference at p≤0.05 in 2018

^a<u>year</u> difference at p≤0.05 from 2009 to 2018; ^b<u>year</u> difference at p≤0.05 from 2015 to 2018

Diabetes

2018 Findings

- Ten percent of respondents reported diabetes in the past three years.
- Respondents 65 and older were more likely to report diabetes in the past three years (22%) compared to those 25 to 34 years old (2%) or respondents 18 to 24 years old (0%).
- Thirteen percent of respondents in the bottom 40 percent household income bracket reported diabetes compared to 7% of those in the top 40 percent income bracket or 6% of respondents in the middle 20 percent household income bracket.
- Fourteen percent of overweight respondents reported diabetes compared to 2% of respondents who were not overweight.
- Eighteen percent of inactive respondents reported diabetes compared to 10% of those who did an insufficient amount of physical activity or 6% of respondents who met the recommended amount of physical activity.
- Nonsmokers were more likely to report diabetes (11%) compared to smokers (5%).

2006 to 2018 Year Comparisons

- From 2006 to 2018, there was no statistical change in the overall percent of respondents who reported diabetes.
- In 2006, respondents 55 and older were more likely to report diabetes. In 2018, respondents 65 and older were more likely to report diabetes.
- In 2006 and 2018, Hispanic origin was not a significant variable. From 2006 to 2018, there was a noted increase in the percent of non-Hispanic respondents reporting diabetes.
- In 2006 and 2018, respondents in the bottom 40 percent household income bracket were more likely to report diabetes. From 2006 to 2018, there was a noted increase in the percent of respondents in the bottom 40 percent household income bracket reporting diabetes.
- In 2006 and 2018, overweight respondents were more likely to report diabetes. From 2006 to 2018, there was a noted increase in the percent of overweight respondents reporting diabetes.
- In 2006 and 2018, inactive respondents were more likely to report diabetes.
- In 2006, smoking status was not a significant variable. In 2018, nonsmokers were more likely to report diabetes.

- From 2015 to 2018, there was no statistical change in the overall percent of respondents who reported diabetes.
- In 2015 and 2018, respondents 65 and older were more likely to report diabetes. From 2015 to 2018, there was a noted <u>decrease</u> in the percent of respondents 35 to 44 years old reporting diabetes.
- In 2015, African American respondents were more likely to report diabetes. In 2018, race was not a significant variable. From 2015 to 2018, there was a noted <u>decrease</u> in the percent of African American respondents reporting diabetes.

- In 2015, non-Hispanic respondents were more likely to report diabetes. In 2018, Hispanic origin was not a significant variable.
- In 2015, respondents with a high school education or less were more likely to report diabetes. In 2018, education was not a significant variable. From 2015 to 2018, there was a noted <u>decrease</u> in the percent of respondents with a high school education or less reporting diabetes.
- In 2015 and 2018, respondents in the bottom 40 percent household income bracket were more likely to report diabetes.
- In 2015 and 2018, overweight respondents were more likely to report diabetes.
- In 2015 and 2018, inactive respondents were more likely to report diabetes. From 2015 to 2018, there was a noted <u>decrease</u> in the percent of respondents who met the recommended amount of physical activity reporting diabetes.
- In 2015, smoking status was not a significant variable. In 2018, nonsmokers were more likely to report diabetes.

Table 20. Dishetes in Pact Three Vears by Demographic Variables for Each Survey Vear®

Table 20. Diabetes in Past Three Year	s by Demogra 2006	phic Variables 2009	for Each Surv 2012	ey Year [⊕] 2015	2018
TOTAL	8%	9%	10%	11%	10%
Gender					
Male	8	8	12	11	10
Female	8	10	9	11	9
Age ^{1,2,3,4,5}					
18 to 24	<1	<1	2	0	0
25 to 34	1	<1	1	4	
35 to 44 ^b	5	6	6	7	2 3
45 to 54	12	10	13	16	15
55 to 64	15	19	19	17	20
65 and Older	16	23	21	23	22
Race ^{3,4}					
White	8	9	9	10	10
African American ^b	9	10	14	15	9
Other	8	4	9	9	11
Hispanic Origin ⁴					
Hispanic	8	7	11	6	6
Non-Hispanic ^a	8	9	10	11	10
Education ^{2,3,4}					
High School or Less ^b	9	12	14	16	11
Some Post High School	8	8	9	11	10
College Graduate	6	6	6	6	8
Household Income ^{1,2,3,4,5}					
Bottom 40 Percent Bracket ^a	10	11	13	15	13
Middle 20 Percent Bracket	7	7	8	7	6
Top 40 Percent Bracket	5	5	5	7	7
Marital Status					
Married	8	8	9	11	11
Not Married	8	10	11	11	9
Overweight Status ^{1,2,3,4,5}					
Not Overweight	3	3	4	4	2
Overweight ^a	11	12	14	14	14
Physical Activity ^{1,2,3,4,5}					
Inactive	15	17	16	21	18
Insufficient	10	9	12	10	10
Recommended ^b	5	6	7	9	6
Smoking Status ^{2,5}					
Nonsmoker	9	10	10	11	11
Smoker	7	7	11	9	5

[®]Percentages occasionally may differ by 1 or 2 percentage points from previous reports or the Appendix as a result of rounding, recoding variables and response category distribution.

 $^{^{1}}$ <u>demographic</u> difference at p≤0.05 in 2006; 2 <u>demographic</u> difference at p≤0.05 in 2009; 3 <u>demographic</u> difference at p≤0.05 in 2012; $\frac{1}{4 \text{demographic}}$ difference at p≤0.05 in 2015; $\frac{1}{4 \text{demographic}}$ difference at p≤0.05 in 2018

^a<u>year</u> difference at p≤0.05 from 2006 to 2018; ^b<u>year</u> difference at p≤0.05 from 2015 to 2018

Heart Disease/Condition

2018 Findings

- Eight percent of respondents reported heart disease or condition in the past three years.
- Twenty-seven percent of respondents 65 and older reported heart disease/condition in the past three years compared to 4% of those 35 to 44 years old or 0% of respondents 18 to 24 years old.
- White respondents were more likely to report heart disease/condition (10%) compared to African American respondents (7%) or respondents of another race (5%).
- Non-Hispanic respondents were more likely to report heart disease/condition (9%) compared to Hispanic respondents (2%).
- Respondents with some post high school education were more likely to report heart disease/condition (12%) compared to those with a high school education or less (9%) or respondents with a college education (5%).
- Ten percent of respondents in the bottom 40 percent household income bracket and 9% of those in the middle 20 percent income bracket reported heart disease/condition compared to 5% of respondents in the top 40 percent household income bracket.
- Overweight respondents were more likely to report heart disease/condition (11%) compared to respondents who were not overweight (5%).
- Sixteen percent of inactive respondents reported heart disease/condition compared to 7% of respondents who did at least some physical activity.

- From 2006 to 2018, there was no statistical change in the overall percent of respondents who reported heart disease/condition.
- In 2006 and 2018, respondents 65 and older were more likely to report heart disease/condition.
- In 2006 and 2018, white respondents were more likely to report heart disease/condition.
- In 2006 and 2018, non-Hispanic respondents were more likely to report heart disease/condition.
- In 2006, respondents with a high school education or less were more likely to report heart disease/condition. In 2018, respondents with some post high school education were more likely to report heart disease/condition.
- In 2006, respondents in the bottom 40 percent household income bracket were more likely to report heart disease/condition. In 2018, respondents in the bottom 60 percent household income bracket were more likely to report heart disease/condition.
- In 2006, overweight status was not a significant variable. In 2018, overweight respondents were more likely to report heart disease/condition.
- In 2006 and 2018, inactive respondents were more likely to report heart disease/condition. In 2018, physical activity was not a significant variable.

- From 2015 to 2018, there was no statistical change in the overall percent of respondents who reported heart disease/condition.
- In 2015 and 2018, respondents 65 and older were more likely to report heart disease/condition.
- In 2015, respondents who were white or African American were more likely to report heart disease/condition. In 2018, white respondents were more likely to report heart disease/condition.
- In 2015 and 2018, non-Hispanic respondents were more likely to report heart disease/condition.
- In 2015, respondents with some post high school education or less were more likely to report heart disease/condition. In 2018, respondents with some post high school education were more likely to report heart disease/condition.
- In 2015, respondents in the bottom 40 percent household income bracket were more likely to report heart disease/condition. In 2018, respondents in the bottom 60 percent household income bracket were more likely to report heart disease/condition.
- In 2015 and 2018, overweight respondents were more likely to report heart disease/condition.
- In 2015 and 2018, inactive respondents were more likely to report heart disease/condition.

Table 21. Heart Disease/Condition in					
TOTAL	2006	2009 9%	2012 8%	2015 9%	2018
IOIAL	8%	9%	8%	9%	8%
Gender					
Male	9	9	9	8	8
Female	8	8	7	10	9
Age ^{1,2,3,4,5}					
18 to 24	1	1	1	0	0
25 to 34	3	3	3	2	5
35 to 44	3	5	2	4	4
45 to 54	8	7	12	8	6
55 to 64	6 14	11	12	13	11
65 and Older	23	26	22	28	27
os and Order	23	20	22	20	21
Race ^{1,4,5}					
White	9	10	9	10	10
African American	7	8	9	9	7
Other	3	6	4	3	5
Hispanic Origin ^{1,3,4,5}					
Hispanic	3	9	2	2	2
Non-Hispanic	9	9	9	9	9
Tion Hispanie			,		
Education ^{1,2,3,4,5}					
High School or Less	9	10	11	11	9
Some Post High School	8	11	9	10	12
College Graduate	6	5	5	6	5
Household Income ^{1,2,3,4,5}					
Bottom 40 Percent Bracket	9	11	11	11	10
Middle 20 Percent Bracket	6	2	6	5	9
	5	4	2	<i>7</i>	5
Top 40 Percent Bracket	3	4	2	,	3
Marital Status ²					
Married	8	6	7	8	10
Not Married	9	10	9	9	8
Overweight Status ^{2,3,4,5}					
Not Overweight	7	7	5	6	5
Overweight	9	10	10	10	11
o ver weight		10	10	10	11
Physical Activity ^{1,2,3,4,5}					
Inactive	13	13	15	16	16
Insufficient	7	8	9	8	7
Recommended	7	8	5	7	7
Smoking Status					
Nonsmoker	8	8	8	9	8
Smoker	7	10	9	8	9

[®]Percentages occasionally may differ by 1 or 2 percentage points from previous reports or the Appendix as a result of rounding, recoding variables and response category distribution.

 $^{^{1}}$ <u>demographic</u> difference at p≤0.05 in 2006; 2 <u>demographic</u> difference at p≤0.05 in 2009; 3 <u>demographic</u> difference at p≤0.05 in 2012; 4 <u>demographic</u> difference at p≤0.05 in 2015; 5 <u>demographic</u> difference at p≤0.05 in 2018

^ayear difference at p \le 0.05 from 2006 to 2018; ^byear difference at p \le 0.05 from 2015 to 2018

Current Asthma

In 2016, 9% of Wisconsin respondents and 9% of U.S. respondents reported they were told they currently have asthma (2016 Behavioral Risk Factor Surveillance).

2018 Findings

- Twelve percent of respondents reported they currently have asthma.
- Female respondents were more likely to report current asthma (17%) compared to male respondents (6%).
- Fifteen percent of respondents 25 to 34 years old, 14% of those 45 to 64 years old and 13% of respondents 35 to 44 years old reported current asthma compared to 5% of respondents 18 to 24 years old.
- Non-Hispanic respondents were more likely to report current asthma (12%) compared to Hispanic respondents (5%).
- Sixteen percent of respondents in the bottom 40 percent household income bracket reported current asthma compared to 12% of those in the middle 20 percent income bracket or 7% of respondents in the top 40 percent household income bracket.
- Unmarried respondents were more likely to report current asthma compared to married respondents (13% and 9%, respectively).

- From 2006 to 2018, there was no statistical change in the overall percent of respondents reporting current asthma.
- In 2006 and 2018, female respondents were more likely to report current asthma. From 2006 to 2018, there was a noted increase in the percent of female respondents reporting current asthma.
- In 2006, respondents 18 to 34 years old or 55 to 64 years old were more likely to report current asthma. In 2018, respondents 25 to 64 years old were more likely to report current asthma. From 2006 to 2018, there was a noted decrease in the percent of respondents 18 to 24 years old and a noted increase in the percent of respondents 45 to 54 years old reporting current asthma.
- In 2006, non-white respondents were more likely to report current asthma. In 2018, race was not a significant variable.
- In 2006, Hispanic origin was not a significant variable. In 2018, non-Hispanic respondents were more likely to report current asthma, with a noted increase since 2006.
- In 2006, respondents with some post high school education or less were more likely to report current asthma. In 2018, education was not a significant variable. From 2006 to 2018, there was a noted increase in the percent of respondents with some post high school education reporting current asthma.
- In 2006 and 2018, respondents in the bottom 40 percent household income bracket were more likely to report current asthma.
- In 2006 and 2018, unmarried respondents were more likely to report current asthma.

- From 2015 to 2018, there was no statistical change in the overall percent of respondents who reported current asthma.
- In 2015 and 2018, female respondents were more likely to report current asthma. From 2015 to 2018, there was a noted <u>decrease</u> in the percent of male respondents reporting current asthma.
- In 2015, age was not a significant variable. In 2018, respondents 25 to 64 years old were more likely to report current asthma. From 2015 to 2018, there was a noted <u>decrease</u> in the percent of respondents 18 to 24 years old reporting current asthma.
- In 2015, African American respondents were more likely to report current asthma. In 2018, race was not a significant variable. From 2015 to 2018, there was a noted <u>decrease</u> in the percent of African American respondents reporting current asthma.
- In 2015, Hispanic origin was not a significant variable. In 2018, non-Hispanic respondents were more likely to report current asthma. From 2015 to 2018, there was a noted <u>decrease</u> in the percent of Hispanic respondents reporting current asthma.
- In 2015, respondents with some post high school education or less were more likely to report current asthma. In 2018, education was not a significant variable. From 2015 to 2018, there was a noted <u>decrease</u> in the percent of respondents with a high school education or less reporting current asthma.
- In 2015 and 2018, respondents in the bottom 40 percent household income bracket were more likely to report current asthma. From 2015 to 2018, there was a noted <u>decrease</u> in the percent of respondents in the bottom 40 percent household income bracket reporting current asthma.
- In 2015 and 2018, unmarried respondents were more likely to report current asthma. From 2015 to 2018, there was a noted decrease in the percent of unmarried respondents reporting current asthma.

Table 22. Current Asthma by Demographic Variables for Each Survey Year[®]

	2006	2009	2012	2015	2018
TOTAL	10%	12%	12%	14%	12%
Gender ^{1,2,3,4,5}					
Male ^b	8	10	8	10	6
Female ^a	13	13	16	17	17
$Age^{1,3,5}$					
18 to 24 ^{a,b}	14	14	16	15	5
25 to 34	13	10	8	15	15
35 to 44	9	13	15	15	13
45 to 54 ^a	8	12	14	16	14
55 to 64	13	10	12	12	14
65 and Older	7	10	8	10	10
Race ^{1,2,3,4}					
White	9	8	9	10	11
African American ^b	13	16	16	22	13
Other	13	12	18	17	12
Hispanic Origin ^{3,5}					
Hispanic ^b	11	15	17	15	5
Non-Hispanic ^a	10	11	12	14	12
Education ^{1,2,3,4}					
High School or Less ^b	12	14	13	15	11
Some Post High School ^a	10	12	15	16	14
College Graduate	8	8	8	11	10
Household Income ^{1,2,3,4,5}					
Bottom 40 Percent Bracket ^b	13	14	17	21	16
Middle 20 Percent Bracket	8	6	5	8	12
Top 40 Percent Bracket	7	9	8	8	7
Marital Status ^{1,2,3,4,5}					
Married	7	10	8	9	9
Not Married ^b	12	13	14	16	13

[®]Percentages occasionally may differ by 1 or 2 percentage points from previous reports or the Appendix as a result of rounding, recoding variables and response category distribution.

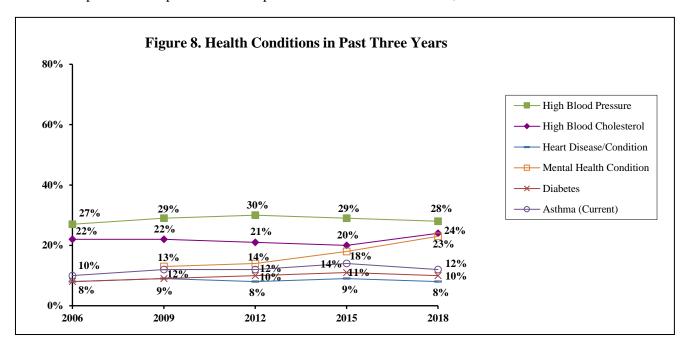
¹demographic difference at p≤0.05 in 2006; ²demographic difference at p≤0.05 in 2009; ³demographic difference at p≤0.05 in 2012; ⁴demographic difference at p≤0.05 in 2015; ⁵demographic difference at p≤0.05 in 2018

^a<u>year</u> difference at p≤0.05 from 2006 to 2018; ^b<u>year</u> difference at p≤0.05 from 2015 to 2018

Health Conditions Overall

Year Comparisons

From 2006 to 2018, there was no statistical change in the overall percent of respondents who reported high blood pressure, diabetes, heart disease/condition or current asthma, as well as from 2015 to 2018. From 2006 to 2018, there was no statistical change in the overall percent of respondents who reported high blood cholesterol while from 2015 to 2018, there was a noted increase. From 2009 to 2018, there was a statistical increase in the overall percent of respondents who reported a mental health condition, as well as from 2015 to 2018.



Physical Activity (Figures 9 & 10; Tables 23 - 25)

KEY FINDINGS: In 2018, 36% of respondents did moderate physical activity five times a week for 30 minutes. Thirty-five percent of respondents did vigorous activity three times a week for 20 minutes. Combined, 48% met the recommended amount of physical activity; respondents who were male, 18 to 24 years old, African American, Hispanic, with a high school education or less or who were not overweight were more likely to report this.

> From 2006 to 2018, there was no statistical change in the overall percent of respondents who reported moderate physical activity five times a week for at least 30 minutes, as well as from 2015 to 2018. From 2006 to 2018, there was a statistical increase in the overall percent of respondents who reported vigorous physical activity three times a week for at least 20 minutes, as well as from 2015 to 2018. From 2006 to 2018, there was no statistical change in the overall percent of respondents who met the recommended amount of physical activity, as well as from 2015 to 2018.

Moderate Physical Activity in Usual Week

Moderate physical activity includes walking briskly, bicycling, vacuuming, gardening or anything else that causes small increases in breathing or heart rate.

In 2005, 42% of Wisconsin respondents and 33% of U.S. respondents did moderate physical activity at least five times a week for 30 or more minutes (2005 Behavioral Risk Factor Surveillance).

2018 Findings

- Thirty-six percent of all respondents did moderate physical activity at least five times a week for 30 minutes or more. Forty-six percent did some moderate activity, while 17% did not do any moderate physical activity.
- Sixty-two percent of respondents 18 to 24 years old met the recommended amount of moderate physical activity compared to 27% of respondents 45 to 54 years old.
- Thirty-nine percent of African American respondents and 37% of white respondents met the recommended amount of moderate physical activity compared to 22% of respondents of another race.
- Hispanic respondents were more likely to meet the recommended amount of moderate physical activity (51%) compared to non-Hispanic respondents (34%).
- Forty-four percent of respondents with a high school education or less met the recommended amount of
 moderate physical activity compared to 33% of those with some post high school education or 31% of
 respondents with a college education.
- Forty-one percent of respondents in the bottom 40 percent household income bracket met the recommended amount of moderate physical activity compared to 35% of those in the top 40 percent income bracket or 30% of respondents in the middle 20 percent household income bracket.
- Respondents who were not overweight were more likely to meet the recommended amount of moderate physical activity (47%) compared to overweight respondents (30%).

- From 2006 to 2018, there was no statistical change in the overall percent of respondents who met the recommended amount of moderate physical activity in a week.
- In 2006 and 2018, gender was not a significant variable. From 2006 to 2018, there was a noted increase in the percent of male respondents meeting the recommended amount of moderate physical activity.
- In 2006, respondents 35 to 44 years old were more likely to meet the recommended amount of moderate physical activity. In 2018, respondents 18 to 24 years old were more likely to meet the recommended amount of moderate physical activity, with a noted increase since 2006. From 2006 to 2018, there was a noted decrease in the percent of respondents 35 to 54 years old meeting the recommended amount of moderate physical activity.
- In 2006, race was not a significant variable. In 2018, respondents who were white or African American were more likely to meet the recommended amount of moderate physical activity. From 2006 to 2018, there was a noted increase in the percent of African American respondents meeting the recommended amount of moderate physical activity.
- In 2006, non-Hispanic respondents were more likely to meet the recommended amount of moderate physical activity. In 2018, Hispanic respondents were more likely to meet the recommended amount of moderate physical activity, with a noted increase since 2006.

- In 2006, respondents with a college education were more likely to meet the recommended amount of moderate physical activity. In 2018, respondents with a high school education or less were more likely to meet the recommended amount of moderate physical activity, with a noted increase since 2006. From 2006 to 2018, there was a noted decrease in the percent of respondents with a college education meeting the recommended amount of moderate physical activity.
- In 2006, respondents in the top 40 percent household income bracket were more likely to meet the recommended amount of moderate physical activity. In 2018, respondents in the bottom 40 percent household income bracket were more likely to meet the recommended amount of moderate physical activity, with a noted increase since 2006.
- In 2006, married respondents were more likely to meet the recommended amount of moderate physical activity. In 2018, marital status was not a significant variable. From 2006 to 2018, there was a noted increase in the percent of unmarried respondents meeting the recommended amount of moderate physical activity.
- In 2006 and 2018, respondents who were not overweight were more likely to meet the recommended amount of moderate physical activity. From 2006 to 2018, there was a noted increase in the percent of respondents who were not overweight meeting the recommended amount of moderate physical activity.

- From 2015 to 2018, there was no statistical change in the overall percent of respondents who met the recommended amount of moderate physical activity in a week.
- In 2015, respondents 25 to 34 years old were more likely to meet the recommended amount of moderate physical activity. In 2018, respondents 18 to 24 years old were more likely to meet the recommended amount of moderate physical activity, with a noted increase since 2015. From 2015 to 2018, there was a noted decrease in the percent of respondents 25 to 34 years old or 45 to 54 years old meeting the recommended amount of moderate physical activity.
- In 2015 respondents were non-white and non-African American were more likely to meet the recommended amount of moderate physical activity. In 2018, respondents who were white or African American were more likely to meet the recommended amount of moderate physical activity. From 2015 to 2018, there was a noted increase in the percent of African American respondents and a noted decrease in the percent of respondents who were non-white and non-African American meeting the recommended amount of moderate physical activity.
- In 2015, Hispanic origin was not a significant variable. In 2018, Hispanic respondents were more likely to meet the recommended amount of moderate physical activity, with a noted increase since 2015. From 2015 to 2018, there was a noted decrease in the percent of non-Hispanic respondents meeting the recommended amount of moderate physical activity.
- In 2015, education was not a significant variable. In 2018, respondents with a high school education or less were more likely to meet the recommended amount of moderate physical activity, with a noted increase since 2015. From 2015 to 2018, there was a noted <u>decrease</u> in the percent of respondents with a college education meeting the recommended amount of moderate physical activity.
- In 2015, household income was not a significant variable. In 2018, respondents in the bottom 40 percent household income bracket were more likely to meet the recommended amount of moderate physical activity. From 2015 to 2018, there was a noted <u>decrease</u> in the percent of respondents in the middle 20 percent household income bracket meeting the recommended amount of moderate physical activity.
- In 2015 and 2018, marital status was not a significant variable. From 2015 to 2018, there was a noted <u>decrease</u> in the percent of married respondents meeting the recommended amount of moderate physical activity.

• In 2015 and 2018, respondents who were not overweight were more likely to meet the recommended amount of moderate physical activity. From 2015 to 2018, there was a noted <u>decrease</u> in the percent of overweight respondents meeting the recommended amount of moderate physical activity.

Table 23. Recommended Moderate Physical Activity by Demographic Variables for Each Survey Year^{©,©}

Table 23. Recommended Moderate I	2006	2009	2012	2015	2018
TOTAL	33%	31%	35%	39%	36%
Gender					
Male ^a	32	32	34	41	38
Female	34	30	64	37	35
Age ^{1,3,4,5}					
18 to 24 ^{a,b}	32	33	38	39	62
25 to 34 ^b	32	34	42	47	31
35 to 44 ^a	39	33	34	37	31
45 to 54 ^{a,b}	35	28	32	36	27
55 to 64	31	29	32	36	38
65 and Older	29	29	32	34	31
Race ^{3,4,5}					
White	34	32	38	38	37
African American ^{a,b}	32	30	29	31	39
Other ^b	29	37	43	55	22
Hispanic Origin ^{1,5}					
Hispanic ^{a,b}	26	34	40	34	51
Non-Hispanic ^b	34	31	35	39	34
Education ^{1,3,5}					
High School or Less ^{a,b}	30	31	32	37	44
Some Post High School	35	31	38	38	33
College Graduate ^{a,b}	37	33	37	40	31
Household Income ^{1,5}					
Bottom 40 Percent Bracket ^a	29	31	35	38	41
Middle 20 Percent Bracket ^b	36	31	36	46	30
Top 40 Percent Bracket	41	32	38	38	35
Marital Status ¹					
Married ^b	35	30	34	40	33
Not Married ^a	32	32	36	38	38
Overweight Status ^{1,2,3,4,5}					
Not Overweight ^a	38	37	41	48	47
Overweight ^b	31	29	33	35	30

[®]Percentages occasionally may differ by 1 or 2 percentage points from previous reports or the Appendix as a result of rounding, recoding variables and response category distribution.

[®]Recommended moderate physical activity is 5 times/30+ minutes in a week.

 $^{^{1}}$ <u>demographic</u> difference at p≤0.05 in 2006; 2 <u>demographic</u> difference at p≤0.05 in 2009; 3 <u>demographic</u> difference at p≤0.05 in 2012; 4 <u>demographic</u> difference at p≤0.05 in 2018

^a<u>year</u> difference at p≤0.05 from 2006 to 2018; ^b<u>year</u> difference at p≤0.05 from 2015 to 2018

Vigorous Physical Activity in Usual Week

Vigorous physical activity includes running, aerobics, heavy yard work, or anything else that causes large increases in breathing or heart rate.

In 2009, 31% of Wisconsin respondents and 29% of U.S. respondents did vigorous physical activity at least three times a week for 20 or more minutes (2009 Behavioral Risk Factor Surveillance).

2018 Findings

- Thirty-five percent of respondents reported they did vigorous physical activity at least three times a week for 20 minutes or more. Twenty-five percent did some vigorous physical activity while 39% did not do any vigorous physical activity.
- Male respondents were more likely to meet the recommended amount of vigorous physical activity (40%) compared to female respondents (31%).
- Respondents 18 to 24 years old were more likely to meet the recommended amount of vigorous physical activity (67%) compared to those 55 to 64 years old (24%) or respondents 65 and older (15%).
- Forty-six percent of African American respondents met the recommended amount of vigorous physical activity compared to 30% of respondents who were white or of another race.
- Hispanic respondents were more likely to meet the recommended amount of vigorous physical activity (60%) compared to non-Hispanic respondents (33%).
- Forty-three percent of respondents with a high school education or less met the recommended amount of vigorous physical activity compared to 34% of those with a college education or 30% of respondents with some post high school education.
- Unmarried respondents were more likely to meet the recommended amount of vigorous physical activity compared to married respondents (38% and 31%, respectively).
- Respondents who were not overweight were more likely to meet the recommended amount of vigorous physical activity (53%) compared to overweight respondents (26%).

- From 2006 to 2018, there was a statistical increase in the overall percent of respondents who met the recommended amount of vigorous physical activity in a week.
- In 2006 and 2018, male respondents were more likely to meet the recommended amount of vigorous physical activity. From 2006 to 2018, there was a noted increase in the percent of respondents across gender meeting the recommended amount of vigorous physical activity.
- In 2006 and 2018, respondents 18 to 24 years old were more likely to meet the recommended amount of vigorous physical activity. From 2006 to 2018, there was a noted increase in the percent of respondents 18 to 34 years old or 45 to 54 years old meeting the recommended amount of vigorous physical activity.
- In 2006, non-African American respondents were more likely to meet the recommended amount of vigorous physical activity. In 2018, African American respondents were more likely to meet the recommended amount of vigorous physical activity, with a noted increase since 2006. From 2006 to 2018, there was a noted increase in the percent of white respondents meeting the recommended amount of vigorous physical activity.

- In 2006, Hispanic origin was not a significant variable. In 2018, Hispanic respondents were more likely to meet the recommended amount of vigorous physical activity. From 2006 to 2018, there was a noted increase in the percent of respondents across Hispanic origin meeting the recommended amount of physical activity.
- In 2006, respondents with a college education were more likely to meet the recommended amount of vigorous
 physical activity. In 2018, respondents with a high school education or less were more likely to meet the
 recommended amount of vigorous physical activity. From 2006 to 2018, there was a noted increase in the
 percent of respondents with some post high school education or less meeting the recommended amount of
 vigorous physical activity.
- In 2006, respondents in the top 40 percent household income bracket were more likely to meet the recommended amount of vigorous physical activity. In 2018, household income was not a significant variable. From 2006 to 2018, there was a noted increase in the percent of respondents in the bottom 60 percent household income bracket meeting the recommended amount of vigorous physical activity.
- In 2006, marital status was not a significant variable. In 2018, unmarried respondents were more likely to meet the recommended amount of vigorous physical activity. From 2006 to 2018, there was a noted increase in the percent of respondents across marital status meeting the recommended amount of vigorous physical activity.
- In 2006 and 2018, respondents who were not overweight were more likely to meet the recommended amount of vigorous physical activity. From 2006 to 2018, there was a noted increase in the percent of respondents across overweight status meeting the recommended amount of vigorous physical activity.

- From 2015 to 2018, there was a statistical increase in the overall percent of respondents who met the recommended amount of vigorous physical activity in a week.
- In 2015 and 2018, male respondents were more likely to meet the recommended amount of vigorous physical activity. From 2015 to 2018, there was a noted increase in the percent of male respondents meeting the recommended amount of vigorous physical activity.
- In 2015 and 2018, respondents 18 to 24 years old were more likely to meet the recommended amount of vigorous physical activity. From 2015 to 2018, there was a noted increase in the percent of respondents 18 to 34 years old meeting the recommended amount of vigorous physical activity.
- In 2015, respondents who were non-white and non-African American were more likely to meet the recommended amount of vigorous physical activity. In 2018, African American respondents were more likely to meet the recommended amount of vigorous physical activity, with a noted increase since 2015. From 2015 to 2018, there was a noted decrease in the percent of respondents who were non-white and non-African American meeting the recommended amount of vigorous physical activity.
- In 2015, Hispanic origin was not a significant variable. In 2018, Hispanic respondents were more likely to meet the recommended amount of vigorous physical activity, with a noted increase since 2015.
- In 2015, respondents with a college education were more likely to meet the recommended amount of vigorous physical activity. In 2018, respondents with a high school education or less were more likely to meet the recommended amount of vigorous physical activity, with a noted increase since 2015.
- In 2015, respondents in the top 40 percent household income bracket were more likely to meet the recommended amount of vigorous physical activity. In 2018, household income was not a significant variable. From 2015 to 2018, there was a noted increase in the percent of respondents in the bottom 40 percent household income bracket meeting the recommended amount of vigorous physical activity.

- In 2015, marital status was not a significant variable. In 2018, unmarried respondents were more likely to meet the recommended amount of vigorous physical activity, with a noted increase since 2015.
- In 2015 and 2018, respondents who were not overweight were more likely to meet the recommended amount of vigorous physical activity. From 2015 to 2018, there was a noted increase in the percent of respondents who were not overweight meeting the recommended amount of vigorous physical activity.

Table 24. Recommended Vigorous Physical Activity by Demographic Variables for Each Survey Year^{©,©}

Table 24. Recommended Vigorous P	2006	2009	2012	2015	2018
$TOTAL^{a,b}$	22%	19%	24%	31%	35%
Gender ^{1,2,3,4,5}					
Male ^{a,b}	27	26	28	33	40
Female ^a	18	13	21	28	31
Age ^{1,2,3,4,5}					
18 to 24 ^{a,b}	34	25	39	41	67
25 to 34 ^{a,b}	26	29	36	37	47
35 to 44	26	19	27	34	29
45 to 54 ^a	19	19	18	28	27
55 to 64	18	13	14	24	24
65 and Older	10	8	9	16	15
Race ^{1,2,3,4,5}					
White ^a	24	21	24	31	30
African American ^{a,b}	16	17	23	24	46
Other ^b	23	24	32	50	30
Hispanic Origin ^{3,5}					
Hispanic ^{a,b}	23	21	33	29	60
Non-Hispanic ^a	22	19	24	31	33
Education ^{1,2,3,4,5}					
High School or Less ^{a,b}	16	14	17	28	43
Some Post High School ^a	22	21	26	29	30
College Graduate	31	26	31	35	34
Household Income ^{1,2,3,4}					
Bottom 40 Percent Bracket ^{a,b}	16	16	22	25	36
Middle 20 Percent Bracket ^a	24	21	24	34	34
Top 40 Percent Bracket	35	27	31	38	36
Marital Status ⁵					
Marrieda	23	21	23	31	31
Not Married ^{a,b}	21	18	25	31	38
Overweight Status ^{1,2,3,4,5}					
Not Overweight ^{a,b}	27	23	28	40	53
Overweight ^a	20	18	23	26	26

[®]Percentages occasionally may differ by 1 or 2 percentage points from previous reports or the Appendix as a result of rounding, recoding variables and response category distribution.

[®]Recommended vigorous physical activity is 3 times/20+ minutes in a week.

 $^{^{1}}$ <u>demographic</u> difference at p≤0.05 in 2006; 2 <u>demographic</u> difference at p≤0.05 in 2009; 3 <u>demographic</u> difference at p≤0.05 in 2012; 4 <u>demographic</u> difference at p≤0.05 in 2018

^ayear difference at p≤0.05 from 2006 to 2018; ^byear difference at p≤0.05 from 2015 to 2018

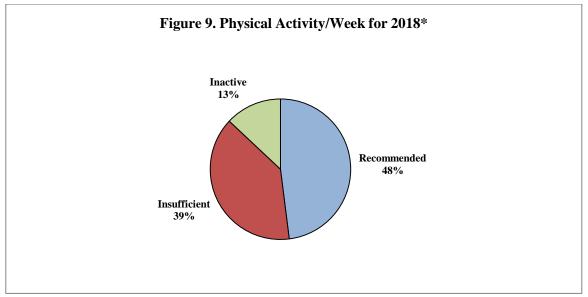
Combined Recommended Amount of Physical Activity in Typical Week

The recommended amount of physical activity by the Centers for Disease Control is moderate physical activity for at least 30 minutes on five or more days of the week or vigorous physical activity for at least 20 minutes on three or more days of the week. Moderate physical activity includes walking briskly, vacuuming, gardening or anything else that causes small increases in breathing or heart rate. Vigorous physical activity includes running, aerobics, heavy yard work, or anything else that causes large increases in breathing or heart rate. Insufficient physical activity includes participation in either activity, but not for the duration or the frequency recommended. Inactive respondents reported no moderate or vigorous physical activity in a typical week.

In 2009, 53% of Wisconsin respondents and 51% of U.S. respondents met the recommended amount of physical activity (30+ minutes of moderate physical activity five days per week or 20+ minutes of vigorous physical activity three days per week) (2009 Behavioral Risk Factor Surveillance).

2018 Findings

• Forty-eight percent of respondents met the recommended amount of physical activity in a typical week (moderate activity 5 times/week for 30 minutes <u>or</u> vigorous activity 3 times/week for 20 minutes). Thirty-nine percent did an insufficient amount of physical activity while 13% did no physical activity in a typical week.



^{*}Recommended physical activity is moderate activity 5 times/30+ minutes in a week or vigorous activity 3 times/20+ minutes in a week.

- Male respondents were more likely to meet the recommended amount of physical activity (52%) compared to female respondents (44%).
- Seventy percent of respondents 18 to 24 years old met the recommended amount of physical activity compared to 40% of those 35 to 44 years old or 37% of respondents 65 and older.
- African American respondents were more likely to meet the recommended amount of physical activity (53%) compared to white respondents (48%) or respondents of another race (36%).
- Hispanic respondents were more likely to meet the recommended amount of physical activity (63%) compared to non-Hispanic respondents (46%).

- Fifty-five percent of respondents with a high school education or less met the recommended amount of physical activity compared to 46% of those with a college education or 43% of respondents with some post high school education.
- Respondents who were not overweight were more likely to meet the recommended amount of physical activity (62%) compared to overweight respondents (40%).

- From 2006 to 2018, there was no statistical change in the overall percent of respondents who met the recommended amount of physical activity in a week.
- In 2006 and 2018, male respondents were more likely to meet the recommended amount of physical activity.
- In 2006, respondents 18 to 24 years old or 35 to 44 years old were more likely to meet the recommended amount of physical activity. In 2018, respondents 18 to 24 years old were more likely to meet the recommended amount of physical activity. From 2006 to 2018, there was a noted increase in the percent of respondents 18 to 34 years old and a noted decrease in the percent of respondents 35 to 44 years old meeting the recommended amount of physical activity.
- In 2006, white respondents were more likely to meet the recommended amount of physical activity. In 2018, African American respondents were more likely to meet the recommended amount of physical activity, with a noted increase since 2006.
- In 2006, Hispanic origin was not a significant variable. In 2018, Hispanic respondents were more likely to meet the recommended amount of physical activity, with a noted increase since 2006.
- In 2006, respondents with a college education were more likely to meet the recommended amount of physical activity. In 2018, respondents with a high school education or less were more likely to meet the recommended amount of physical activity, with a noted increase since 2006. From 2006 to 2018, there was a noted decrease in the percent of respondents with a college education meeting the recommended amount of physical activity.
- In 2006, respondents in the top 40 percent household income bracket were more likely to meet the recommended amount of physical activity. In 2018, household income was not a significant variable. From 2006 to 2018, there was a noted increase in the percent of respondents in the bottom 40 percent household income bracket and a noted decrease in the percent of respondents in the top 40 percent household income bracket meeting the recommended amount of physical activity.
- In 2006 and 2018, marital status was not a significant variable. From 2006 to 2018, there was a noted increase in the percent of unmarried respondents meeting the recommended amount of physical activity.
- In 2006 and 2018, respondents who were not overweight were more likely to meet the recommended amount of physical activity. From 2006 to 2018, there was a noted increase in the percent of respondents who were not overweight meeting the recommended amount of physical activity.

- From 2015 to 2018, there was no statistical change in the overall percent of respondents who met the recommended amount of physical activity in a week.
- In 2015 and 2018, male respondents were more likely to meet the recommended amount of physical activity.

- In 2015, respondents 25 to 34 years old were more likely to meet the recommended amount of physical activity. In 2018, respondents 18 to 24 years old were more likely to meet the recommended amount of physical activity, with a noted increase since 2015. From 2015 to 2018, there was a noted <u>decrease</u> in the percent of respondents 35 to 44 years old meeting the recommended amount of physical activity.
- In 2015, respondents who were non-white and non-African American were more likely to meet the recommended amount of physical activity. In 2018, African American respondents were more likely to meet the recommended amount of physical activity, with a noted increase since 2015. From 2015 to 2018, there was a noted decrease in the percent of respondents who were non-white and non-African American meeting the recommended amount of physical activity.
- In 2015, Hispanic origin was not a significant variable. In 2018, Hispanic respondents were more likely to meet the recommended amount of physical activity, with a noted increase since 2015.
- In 2015, education was not a significant variable. In 2018, respondents with a high school education or less were more likely to meet the recommended amount of physical activity, with a noted increase since 2015. From 2015 to 2018, there was a noted decrease in the percent of respondents with a college education meeting the recommended amount of physical activity.
- In 2015, respondents in the middle 20 percent household income bracket were more likely to meet the recommended amount of physical activity. In 2018, household income was not a significant variable. From 2015 to 2018, there was a noted decrease in the percent of respondents in the middle 20 percent household income bracket meeting the recommended amount of physical activity.
- In 2015 and 2018, respondents who were not overweight were more likely to meet the recommended amount of physical activity. From 2015 to 2018, there was a noted <u>decrease</u> in the percent of overweight respondents meeting the recommended amount of physical activity.

Table 25. Recommended Moderate or Vigorous Physical Activity by Demographic Variables for Each Survey Year^{©,©}

Y ear s, s	2006	2009	2012	2015	2018
TOTAL	45%	41%	47%	49%	48%
Gender ^{1,2,4,5}					
Male	48	45	49	52	52
Female	42	38	45	47	44
Age ^{1,2,3,4,5}					
18 to 24 ^{a,b}	52	46	57	53	70
25 to 34 ^a	44	48	58	58	55
35 to 44 ^{a,b}	52	43	45	51	40
45 to 54	44	37	41	46	41
55 to 64	42	37	39	45	43
65 and Older	36	34	37	41	37
Race ^{1,2,3,4,5}					
White	47	41	49	50	48
African American ^{a,b}	40	39	42	43	53
Other ^b	40	50	54	64	36
Hispanic Origin ^{3,5}					
Hispanic ^{a,b}	39	42	56	48	63
Non-Hispanic	46	41	46	50	46
Education ^{1,2,3,5}					
High School or Less ^{a,b}	38	38	40	47	55
Some Post High School	46	41	51	48	43
College Graduate ^{a,b}	55	46	52	53	46
Household Income ^{1,2,4}					
Bottom 40 Percent Bracket ^a	38	39	45	47	50
Middle 20 Percent Bracket ^b	49	45	47	59	48
Top 40 Percent Bracket ^a	59	46	50	52	46
Marital Status					
Married	47	41	45	51	46
Not Married ^a	44	41	48	49	49
Overweight Status ^{1,2,3,4,5}					
Not Overweight ^a	52	46	53	58	62
Overweight ^b	42	39	44	46	40

[®]Percentages occasionally may differ by 1 or 2 percentage points from previous reports or the Appendix as a result of rounding, recoding variables and response category distribution.

[®]Recommended moderate physical activity is 5 times/30+ minutes in a week and recommended vigorous physical activity is 3 times/20+ minutes in a week.

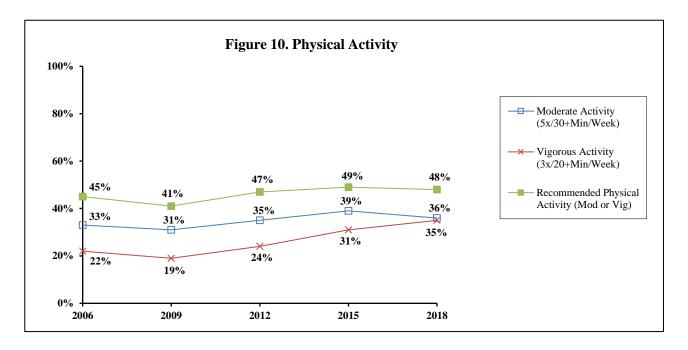
 $[\]frac{{}^{1}\underline{demographic}}{2012}, \frac{{}^{4}\underline{demographic}}{2012}, \frac{{}^{4}\underline{demographic}}{2012}$

^a<u>year</u> difference at p≤0.05 from 2006 to 2018; ^b<u>year</u> difference at p≤0.05 from 2015 to 2018

Physical Activity Overall

Year Comparisons

• From 2006 to 2018, there was no statistical change in the overall percent of respondents who reported moderate physical activity five times a week for at least 30 minutes, as well as from 2015 to 2018. From 2006 to 2018, there was a statistical increase in the overall percent of respondents who reported vigorous physical activity three times a week for at least 20 minutes, as well as from 2015 to 2018. From 2006 to 2018, there was no statistical change in the overall percent of respondents who met the recommended amount of physical activity, as well as from 2015 to 2018.



Body Weight (Figures 11 & 12; Tables 26 & 27)

KEY FINDINGS: In 2018, 64% of respondents were classified as at least overweight while 38% were obese. Respondents who were 45 to 54 years old, non-white and non-African American, non-Hispanic, with some post high school education, in the top 40 percent household income bracket, who were married or inactive were more likely to be classified as at least overweight. Respondents who were female, 45 to 54 years old, non-white and non-African American, non-Hispanic, with

From 2006 to 2018, there was no statistical change in the overall percent of respondents being at least overweight while from 2015 to 2018, there was a statistical decrease. From 2006 to 2018, there was a statistical increase in the overall percent of respondents being obese while from 2015 to 2018, there was no statistical change.

some post high school education or inactive respondents were more likely to be obese.

At Least Overweight

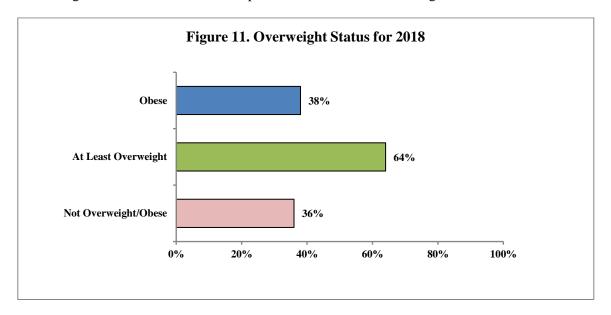
Being overweight contributes to many health problems. One nationally used definition of overweight status developed by the CDC is when a person's body mass index (BMI) is greater than or equal to 25.0. A BMI of 30.0 or more is considered obese. Body Mass Index is calculated by using kilograms/meter².

The Healthy People 2020 goal for healthy weight is 34%. As a result, the unhealthy weight goal is 66%. (Objective NWS-8)

In 2016, 67% of Wisconsin respondents were classified as at least overweight (36% overweight, 31% obese). In the U.S., 65% were classified as at least overweight (35% overweight and 30% obese) (2016 Behavioral Risk Factor Surveillance).

2018 Findings

• According to the definition, 64% of respondents were at least overweight.



- Respondents 45 to 54 years old were more likely to be at least overweight (84%) compared to those 25 to 34 years old (57%) or respondents 18 to 24 years old (21%).
- Respondents who were non-white and non-African American were more likely to be at least overweight (73%) compared to white respondents (63%) or African American respondents (61%).
- Non-Hispanic respondents were more likely to be at least overweight (66%) compared to Hispanic respondents (49%).
- Seventy-five percent of respondents with some post high school education were at least overweight compared to 62% of those with a college education or 54% of respondents with a high school education or less.
- Seventy percent of respondents in the top 40 percent household income bracket were at least overweight compared to 61% of those in the middle 20 percent income bracket or 59% of respondents in the bottom 40 percent household income bracket.
- Married respondents were more likely to be at least overweight compared to unmarried respondents (73% and 59%, respectively).
- Seventy-seven percent of inactive respondents were at least overweight compared to 73% of those who did an insufficient amount of physical activity or 53% of respondents who met the recommended amount of physical activity.

- From 2006 to 2018, there was no statistical change in the overall percent of respondents being overweight.
- In 2006, respondents 55 to 64 years old were more likely to be overweight. In 2018, respondents 45 to 54 years old were more likely to be overweight. From 2006 to 2018, there was a noted <u>decrease</u> in the percent of respondents 18 to 34 years old and a noted increase in the percent of respondents 35 to 54 years old or 65 and older being overweight.
- In 2006 and 2018, respondents who were non-white and non-African American were more likely to be overweight. From 2006 to 2018, there was a noted <u>decrease</u> in the percent of African American respondents being overweight.
- In 2006, Hispanic respondents were more likely to be overweight. In 2018, non-Hispanic respondents were more likely to be overweight, with a noted increase since 2006. From 2006 to 2018, there was a noted <u>decrease</u> in the percent of Hispanic respondents being overweight.
- In 2006, respondents with a high school education or less were more likely to be overweight. In 2018, respondents with some post high school education were more likely to be overweight. From 2006 to 2018, there was a noted <u>decrease</u> in the percent of respondents with a high school education or less and a noted increase in the percent of respondents with at least some post high school education being overweight.
- In 2006, respondents in the bottom 60 percent household income bracket were more likely to be overweight. In 2018, respondents in the top 40 percent household income bracket were more likely to be overweight, with a noted increase since 2006. From 2006 to 2018, there was a noted decrease in the percent of respondents in the bottom 40 percent household income bracket being overweight.
- In 2006, marital status was not a significant variable. In 2018, married respondents were more likely to be overweight, with a noted increase since 2006. From 2006 to 2018, there was a noted <u>decrease</u> in the percent of unmarried respondents being overweight.
- In 2006, respondents who did not meet the recommended amount of physical activity were more likely to be overweight. In 2018, inactive respondents were more likely to be overweight. From 2006 to 2018, there was a noted increase in the percent of respondents who did not meet the recommended amount of physical activity and a noted <u>decrease</u> in the percent of respondents who met the recommended amount of physical activity being overweight.

- From 2015 to 2018, there was a statistical <u>decrease</u> in the overall percent of respondents being overweight.
- In 2015, male respondents were more likely to be overweight. In 2018, gender was not a significant variable. From 2015 to 2018, there as a noted <u>decrease</u> in the percent of male respondents being overweight.
- In 2015 and 2018, respondents 45 to 54 years old were more likely to be overweight. From 2015 to 2018, there was a noted decrease in the percent of respondents 18 to 34 years old being overweight.
- In 2015, African American respondents were more likely to be overweight. In 2018, respondents who were non-white and non-African American were more likely to be overweight. From 2015 to 2018, there was a noted decrease in the percent of African American respondents being overweight.

- In 2015, Hispanic origin was not a significant variable. In 2018, non-Hispanic respondents were more likely to be overweight. From 2015 to 2018, there was a noted <u>decrease</u> in the percent of Hispanic respondents being overweight.
- In 2015, education was not a significant variable. In 2018, respondents with some post high school education were more likely to be overweight. From 2015 to 2018, there was a noted <u>decrease</u> in the percent of respondents with a high school education or less being overweight.
- In 2015, household income was not a significant variable. In 2018, respondents in the top 40 percent household income bracket were more likely to be overweight. From 2015 to 2018, there was a noted <u>decrease</u> in the percent of respondents in the bottom 60 percent household income bracket being overweight.
- In 2015 and 2018, married respondents were more likely to be overweight. From 2015 to 2018, there was a noted decrease in the percent of unmarried respondents being overweight.
- In 2015, respondents who did an insufficient amount of physical activity were more likely to be classified as
 overweight. In 2018, inactive respondents were more likely to be overweight. From 2015 to 2018, there was a
 noted decrease in the percent of respondents who met the recommended amount of physical activity being
 overweight.

Table 26. Overweight (BMI 25.0 or Higher) by Demographic Variables for Each Survey Year[®]

	2006	2009	2012	2015	2018
TOTAL ^b	63%	66%	66%	69%	64%
Gender ⁴					
Male ^b	64	67	67	71	63
Female	62	64	64	67	64
Age ^{1,2,3,4,5}					
18 to 24 ^{a,b}	51	50	47	52	21
25 to 34 ^{a,b}	64	58	62	65	57
35 to 44 ^a	64	76	70	73	74
45 to 54 ^a	68	68	75	79	84
55 to 64	71	75	74	76	78
65 and Older ^a	61	68	66	68	70
Race ^{1,2,3,4,5}					
White	59	61	61	65	63
African American ^{a,b}	69	73	72	78	61
Other	77	70	70	64	73
Hispanic Origin ^{1,3,5}					
Hispanic ^{a,b}	74	65	73	74	49
Non-Hispanic ^a	62	66	65	68	66
Education ^{1,3,5}					
High School or Less ^{a,b}	68	66	68	69	54
Some Post High School ^a	63	67	67	71	75
College Graduate ^a	56	64	62	66	62
Household Income ^{1,5}					
Bottom 40 Percent Bracket ^{a,b}	67	68	66	72	59
Middle 20 Percent Bracket ^b	68	67	70	76	61
Top 40 Percent Bracket ^a	57	63	66	71	70
Marital Status ^{4,5}					
Marrieda	63	64	66	73	73
Not Married ^{a,b}	63	67	65	66	59
Physical Activity ^{1,2,3,4,5}					
Inactive ^a	67	74	74	71	77
Insufficient ^a	68	66	68	75	73
Recommended ^{a,b}	58	62	61	63	53

[®]Percentages occasionally may differ by 1 or 2 percentage points from previous reports or the Appendix as a result of rounding, recoding variables and response category distribution.

 $^{^{1}}$ <u>demographic</u> difference at p≤0.05 in 2006; 2 <u>demographic</u> difference at p≤0.05 in 2009; 3 <u>demographic</u> difference at p≤0.05 in 2012; 4 <u>demographic</u> difference at p≤0.05 in 2018

^a<u>year</u> difference at p≤0.05 from 2006 to 2018; ^b<u>year</u> difference at p≤0.05 from 2015 to 2018

Obesity

The Healthy People 2020 goal for obesity is 31%. (Objective NWS-9)

In 2016, 31% of Wisconsin respondents were classified as overweight. In the U.S., 30% were classified as obese (2016 Behavioral Risk Factor Surveillance).

2018 Findings

- Thirty-eight percent of respondents were classified as obese (BMI 30.0 or higher).
- Female respondents were more likely to be obese (44%) compared to male respondents (31%).
- Fifty-three percent of respondents 45 to 54 years old were obese compared to 31% of those 25 to 34 years old or 17% of respondents 18 to 24 years old.
- Respondents who were non-white and non-African American were more likely to be obese (52%) compared to African American respondents (42%) or white respondents (33%).
- Non-Hispanic respondents were more likely to be obese (40%) compared to Hispanic respondents (18%).
- Respondents with some post high school education were more likely to be obese (44%) compared to those with a high school education or less (36%) or respondents with a college education (32%).
- Fifty-three percent of inactive respondents were obese compared to 50% of those who did an insufficient amount of physical activity or 23% of respondents who met the recommended amount of physical activity.

- From 2006 to 2018, there was a statistical increase in the overall percent of respondents being obese.
- In 2006 and 2018, female respondents were more likely to be obese. From 2006 to 2018, there was a noted increase in the percent of respondents across gender being obese.
- In 2006, respondents 45 to 64 years old were more likely to be obese. In 2018, respondents 45 to 54 years old were more likely to be obese. From 2006 to 2018, there was a noted <u>decrease</u> in the percent of respondents 18 to 24 years old and a noted increase in the percent of respondents 35 and older being obese.
- In 2006, African American respondents were more likely to be obese. In 2018, respondents who were non-white and non-African American were more likely to be obese, with a noted increase since 2006. From 2006 to 2018, there was a noted increase in the percent of white respondents being obese.
- In 2006, Hispanic respondents were more likely to be obese. In 2018, non-Hispanic respondents were more likely to be obese, with a noted increase since 2006. From 2006 to 2018, there was a noted <u>decrease</u> in the percent of Hispanic respondents being obese.
- In 2006, respondents with a high school education or less were more likely to be obese. In 2018, respondents with some post high school education were more likely to be obese. From 2006 to 2018, there was a noted increase in the percent of respondents with at least some post high school education being obese.

- In 2006, respondents in the bottom 40 percent household income bracket were more likely to be obese. In 2018, household income was not a significant variable. From 2006 to 2018, there was a noted increase in the percent of respondents in the bottom 40 percent household income bracket or in the top 40 percent household income bracket being obese.
- In 2006, unmarried respondents were more likely to be obese. In 2018, marital status was not a significant variable. From 2006 to 2018, there was a noted increase in the percent of respondents across marital status being obese.
- In 2006 and 2018, inactive respondents were more likely to be obese. From 2006 to 2018, there was a noted increase in the percent of respondents who did not meet the recommended amount of physical activity being obese.

- From 2015 to 2018, there was no statistical change in the overall percent of respondents being obese.
- In 2015 and 2018, female respondents were more likely to be obese.
- In 2015, respondents 35 to 54 years old were more likely to be obese. In 2018, respondents 45 to 54 years old were more likely to be obese, with a noted increase since 2015. From 2015 to 2018, there was a noted <u>decrease</u> in the percent of respondents 18 to 24 years old being obese.
- In 2015, African American respondents were more likely to be obese. In 2018, respondents who were non-white and non-African American were more likely to be obese, with a noted increase since 2015. From 2015 to 2018, there was a noted decrease in the percent of African American respondents being obese.
- In 2015, Hispanic origin was not a significant variable. In 2018, non-Hispanic respondents were more likely to be obese. From 2015 to 2018, there was a noted <u>decrease</u> in the percent of Hispanic respondents being obese.
- In 2015, respondents with a high school education or less were more likely to be obese. In 2018, respondents with some post high school education were more likely to be obese.
- In 2015, respondents in the bottom 40 percent household income bracket were more likely to be obese. In 2018, household income was not a significant variable.
- In 2015, respondents who did not meet the recommended amount of physical activity were more likely to be obese. In 2018, inactive respondents were more likely to be obese. From 2015 to 2018, there was a noted decrease in the percent of respondents who met the recommended amount of physical activity being obese.

Table 27. Obese (BMI 30.0 or Higher) by Demographic Variables for Each Survey Year[®]

	2006	2009	2012	2015	2018
TOTAL ^a	28%	32%	33%	38%	38%
Gender ^{1,2,3,4,5}					
Male ^a	25	27	28	35	31
Female ^a	30	36	38	40	44
Age ^{1,2,3,4,5}					
18 to 24 ^{a,b}	26	23	20	34	17
25 to 34	26	27	30	34	31
35 to 44 ^a	28	39	42	45	47
45 to 54 ^{a,b}	32	37	42	43	53
55 to 64 ^a	31	39	38	40	42
65 and Older ^a	24	27	30	31	36
Race ^{1,2,3,4,5}					
White ^a	23	25	27	32	33
African American ^b	40	43	45	51	42
Other ^{a,b}	34	33	37	36	52
Hispanic Origin ^{1,5}					
Hispanic ^{a,b}	38	32	34	44	18
Non-Hispanic ^a	27	32	33	37	40
Education ^{1,2,3,4,5}					
High School or Less	33	35	38	42	36
Some Post High School ^a	29	32	34	39	44
College Graduate ^a	20	27	28	33	32
Household Income ^{1,2,3,4}					
Bottom 40 Percent Bracket ^a	33	36	38	43	39
Middle 20 Percent Bracket	28	30	30	40	36
Top 40 Percent Bracket ^a	18	26	30	34	35
Marital Status ^{1,2}					
Married ^a	24	29	31	39	40
Not Married ^a	30	34	35	37	37
Physical Activity ^{1,2,3,4,5}					
Inactive ^a	35	44	42	44	53
Insufficient ^a	33	35	39	45	50
Recommended ^b	21	24	27	30	23

[®]Percentages occasionally may differ by 1 or 2 percentage points from previous reports or the Appendix as a result of rounding, recoding variables and response category distribution.

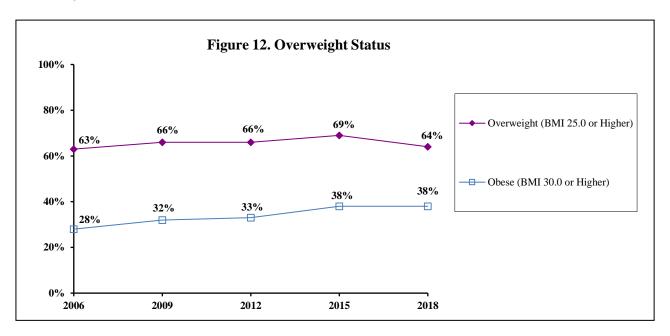
 $[\]frac{^{1}demographic}{2012}, \frac{^{4}demographic}{2012}, \frac{^{4}demographi$

^ayear difference at p≤0.05 from 2006 to 2018; ^byear difference at p≤0.05 from 2015 to 2018

Body Weight Overall

Year Comparisons

From 2006 to 2018, there was no statistical change in the overall percent of respondents being at least overweight while from 2015 to 2018, there was a statistical decrease. From 2006 to 2018, there was a statistical increase in the overall percent of respondents being obese while from 2015 to 2018, there was no statistical change.



Nutrition (Figure 13; Tables 28 - 30)

KEY FINDINGS: In 2018, 56% of respondents reported two or more servings of fruit while 30% reported three or more servings of vegetables on an average day. Respondents who were female, 18 to 24 years old, white, Hispanic, not overweight or who met the recommended amount of physical activity were more likely to report at least two servings of fruit. Respondents who were female, 18 to 24 years old, Hispanic, with a college education, not overweight or who met the recommended amount of physical activity were more likely to report at least three servings of vegetables on an average day. Thirty-seven percent of respondents reported five or more servings of fruit/vegetables on an average day; respondents who were female, 18 to 24 years old, African American, Hispanic, with a college education, not overweight or who met the recommended amount of physical activity were more likely to report this.

> From 2006 to 2018, there was a statistical decrease in the overall percent of respondents who reported at least two servings of fruit, as well as from 2015 to 2018. From 2006 to 2018, there was a statistical increase in the overall percent of respondents who reported at least three servings of vegetables while from 2015 to 2018, there was no statistical change. From 2006 to 2018, there was no statistical change in the overall percent of respondents who reported at least five servings of fruit/vegetables, as well as from 2015 to 2018.

Fruit Consumption

Based on the USDA dietary guidelines, at a minimum, adults should have two servings of fruit each day. Age, gender and activity level may increase the recommended number of servings.

2018 Findings

- Fifty-six percent of respondents reported at least two servings of fruit on an average day.
- Female respondents were more likely to report at least two servings of fruit a day (61%) compared to male respondents (51%).
- Seventy-three percent of respondents 18 to 24 years old reported at least two servings of fruit a day compared to 53% of those 45 to 54 years old or 49% of respondents 25 to 34 years old.
- White respondents were more likely to report at least two servings of fruit a day (59%) compared to African American respondents (56%) or respondents of another race (41%).
- Hispanic respondents were more likely to report at least two servings of fruit a day (67%) compared to non-Hispanic respondents (55%).
- Respondents who were not overweight were more likely to report at least two servings of fruit a day (66%) compared to overweight respondents (51%).
- Sixty-seven percent of respondents who met the recommended amount of physical activity reported at least two servings of fruit a day compared to 50% of those who did an insufficient amount of physical activity or 39% of inactive respondents.

- From 2006 to 2018, there was a statistical <u>decrease</u> in the overall percent of respondents who reported two or more servings of fruit on an average day.
- In 2006 and 2018, female respondents were more likely to report at least two servings of fruit per day. From 2006 to 2018, there was a noted <u>decrease</u> in the percent of female respondents reporting at least two servings of fruit per day.
- In 2006 and 2018, respondents 18 to 24 years old were more likely to report at least two servings of fruit per day. From 2006 to 2018, there was a noted <u>decrease</u> in the percent of respondents 25 to 34 years old or 65 and older reporting at least two servings of fruit per day.
- In 2006, non-African American respondents were more likely to report at least two servings of fruit per day. In 2018, white respondents were more likely to report at least two servings of fruit per day. From 2006 to 2018, there was a noted decrease in the percent of non-African American respondents reporting at least two servings of fruit per day.
- In 2006, Hispanic origin was not a significant variable. In 2018, Hispanic respondents were more likely to report at least two servings of fruit per day. From 2006 to 2018, there was a noted <u>decrease</u> in the percent of non-Hispanic respondents reporting at least two servings of fruit per day.
- In 2006, respondents with a college education were more likely to report at least two servings of fruit per day. In 2018, education was not a significant variable. From 2006 to 2018, there was a noted <u>decrease</u> in the percent of respondents with at least some post high school education reporting at least two servings of fruit per day.

- In 2006, respondents in the top 40 percent household income bracket were more likely to report at least two servings of fruit per day. In 2018, household income was not a significant variable. From 2006 to 2018, there was a noted <u>decrease</u> in the percent of respondents in the top 40 percent household income bracket reporting at least two servings of fruit per day.
- In 2006, married respondents were more likely to report at least two servings of fruit per day. In 2018, marital status was not a significant variable. From 2006 to 2018, there was a noted <u>decrease</u> in the percent of respondents across marital status reporting at least two servings of fruit per day.
- In 2006 and 2018, respondents who were not overweight were more likely to report at least two servings of fruit per day. From 2006 to 2018, there was a noted <u>decrease</u> in the percent of overweight respondents reporting at least two servings of fruit per day.
- In 2006 and 2018, respondents who met the recommended amount of physical activity were more likely to report at least two servings of fruit per day. From 2006 to 2018, there was a noted <u>decrease</u> in the percent of respondents who did an insufficient amount of physical activity reporting at least two servings of fruit per day.

- From 2015 to 2018, there was a statistical <u>decrease</u> in the overall percent of respondents who reported two or more servings of fruit on an average day.
- In 2015, gender was not a significant variable. In 2018, female respondents were more likely to report at least two servings of fruit per day. From 2015 to 2018, there was a noted <u>decrease</u> in the percent of male respondents reporting at least two servings of fruit per day.
- In 2015, respondents 35 to 44 years old were more likely to report two or more servings of fruit per day. In 2018, respondents 18 to 24 years old were more likely to report two or more servings of fruit per day, with a noted increase since 2015. From 2015 to 2018, there was a noted decrease in the percent of respondents 25 to 54 years old reporting at least two servings of fruit per day.
- In 2015, respondents who were non-white and non-African American were more likely to report two or more servings of fruit per day. In 2018, white respondents were more likely to report two or more servings of fruit per day. From 2015 to 2018, there was a noted <u>decrease</u> in the percent of respondents who were non-white and non-African American reporting at least two servings of fruit per day.
- In 2015 and 2018, Hispanic respondents were more likely to report two or more servings of fruit per day. From 2015 to 2018, there was a noted <u>decrease</u> in the percent of non-Hispanic respondents reporting at least two servings of fruit per day.
- In 2015, respondents with a college education were more likely to report two or more servings of fruit per day. In 2018, education was not a significant variable. From 2015 to 2018, there was a noted <u>decrease</u> in the percent of respondents with at least some post high school education reporting at least two servings of fruit per day.
- In 2015, respondents in the top 40 percent household income bracket were more likely to report two or more servings of fruit. In 2018, household income was not a significant variable. From 2015 to 2018, there was a noted decrease in the percent of respondents in the top 60 percent household income bracket reporting at least two servings of fruit per day.
- In 2015, married respondents were more likely to report at least two servings of fruit per day. In 2018, marital status was not a significant variable. From 2015 to 2018, there was a noted <u>decrease</u> in the percent of married respondents reporting at least two servings of fruit per day.

- In 2015 and 2018, respondents who were not overweight were more likely to report at least two servings of fruit per day. From 2015 to 2018, there was a noted <u>decrease</u> in the percent of overweight respondents reporting at least two servings of fruit per day.
- In 2015 and 2018, respondents who met the recommended amount of physical activity were more likely to report two or more servings of fruit per day. From 2015 to 2018, there was a noted <u>decrease</u> in the percent of respondents who did at least some physical activity reporting two or more servings of fruit per day.

Table 28. Two or More Servings of Fruit on Average Day by Demographic Variables for Each Survey Year[®]

Table 28. Two or More Servings of	2006	2009	2012	2015	2018
TOTAL ^{a,b}	61%	58%	62%	62%	56%
Gender ^{1,2,3,5}					
Male ^b	54	53	55	61	51
Female ^a	67	63	68	64	61
Age ^{1,2,4,5}					
18 to 24 ^b	69	57	63	55	73
25 to 34 ^{a,b}	57	65	65	67	49
35 to 44 ^b	60	57	63	70	54
45 to 54 ^b	58	52	57	64	53
55 to 64	60	56	60	56	55
65 and Older ^a	67	61	61	59	57
Race ^{1,2,3,4,5}					
White ^a	64	60	65	62	59
African American	52	58	56	58	56
Other ^{a,b}	64	45	65	73	41
Hispanic Origin ^{4,5}					
Hispanic	59	53	64	70	67
Non-Hispanic ^{a,b}	62	59	62	62	55
Education ^{1,2,3,4}					
High School or Less	55	49	57	56	56
Some Post High School ^{a,b}	61	60	64	62	52
College Graduate ^{a,b}	71	70	67	68	60
Household Income ^{1,2,3,4}					
Bottom 40 Percent Bracket	57	54	59	55	54
Middle 20 Percent Bracket ^b	61	66	64	65	55
Top 40 Percent Bracket ^{a,b}	68	64	68	72	61
Marital Status ^{1,2,4}					
Married ^{a,b}	63	61	65	70	58
Not Married ^a	60	56	61	58	55
Overweight Status ^{1,3,4,5}					
Not Overweight	64	60	66	67	66
Overweight ^{a,b}	60	57	60	61	51
Physical Activity ^{1,2,3,4,5}					
Inactive	46	46	52	44	39
Insufficient ^{a,b}	62	55	60	57	50
Recommended ^b	67	65	67	71	67

[®]Percentages occasionally may differ by 1 or 2 percentage points from previous reports or the Appendix as a result of rounding, recoding variables and response category distribution.

¹demographic difference at p≤0.05 in 2006; ²demographic difference at p≤0.05 in 2009; ³demographic difference at p≤0.05 in 2012; ⁴demographic difference at p≤0.05 in 2018; ⁵demographic difference at p≤0.05 in 2018 apear difference at p≤0.05 from 2015 to 2018

Vegetable Consumption

Based on the USDA dietary guidelines, at a minimum, adults should have three servings of vegetables each day. Age, gender and activity level may increase the recommended number of servings.

2018 Findings

- Thirty percent of respondents reported three or more servings of vegetables on an average day.
- Female respondents were more likely to report three or more servings of vegetables a day (35%) compared to male respondents (25%).
- Fifty-two percent of respondents 18 to 24 years old reported at least three servings of vegetables a day compared to 25% of those 35 to 44 years old or 19% of respondents 65 and older.
- Hispanic respondents were more likely to report at least three servings of vegetables a day (44%) compared to non-Hispanic respondents (29%).
- Respondents with a college education were more likely to report at least three servings of vegetables a day (40%) compared to those with a high school education or less (29%) or respondents with some post high school education (22%).
- Respondents who were not overweight were more likely to report at least three servings of vegetables a day (41%) compared to overweight respondents (24%).
- Forty-three percent of respondents who met the recommended amount of physical activity reported at least three servings of vegetables a day compared to 21% of those who did an insufficient amount of physical activity or 14% of inactive respondents.

- From 2006 to 2018, there was a statistical increase in the overall percent of respondents who reported three or more servings of vegetables on an average day.
- In 2006 and 2018, female respondents were more likely to report at least three vegetable servings per day. From 2006 to 2018, there was a noted increase in the percent of respondents across gender reporting at least three servings of vegetables per day.
- In 2006, age was not a significant variable. In 2018, respondents 18 to 24 years old were more likely to report at least three servings of vegetables per day, with a noted increase since 2006.
- In 2006, white respondents were more likely to report at least three servings of vegetables per day. In 2018, race was not a significant variable. From 2006 to 2018, there was a noted increase in the percent of respondents who were white or African American reporting at least three servings of vegetables per day.
- In 2006, Hispanic origin was not a significant variable. In 2018, Hispanic respondents were more likely to report at least three servings of vegetables per day. From 2006 to 2018, there was a noted increase in the percent of respondents across Hispanic origin reporting at least three servings of vegetables per day.
- In 2006 and 2018, respondents with a college education were more likely to report at least three servings of vegetables per day. From 2006 to 2018, there was a noted increase in the percent of respondents with a high school education or less reporting at least three servings of vegetables per day.

- In 2006, respondents in the top 40 percent household income bracket were more likely to report at least three servings of vegetables per day. In 2018, household income was not a significant variable. From 2006 to 2018, there was a noted increase in the percent of respondents in the bottom 40 percent household income bracket reporting at least three servings of vegetables per day.
- In 2006, married respondents were more likely to report at least three servings of vegetables per day. In 2018, marital status was not a significant variable. From 2006 to 2018, there was a noted increase in the percent of unmarried respondents reporting at least three servings of vegetables per day.
- In 2006, overweight status was not a significant variable. In 2018, respondents who were not overweight were more likely to report at least three servings of vegetables per day, with a noted increase since 2006.
- In 2006 and 2018, respondents who met the recommended amount of physical activity were more likely to report at least three servings of vegetables per day. From 2006 to 2018, there was a noted increase in the percent of respondents who met the recommended amount of physical activity reporting at least three servings of vegetables per day.

- From 2015 to 2018, there was no statistical change in the overall percent of respondents who reported three or more servings of vegetables on an average day.
- In 2015 and 2018, female respondents were more likely to report at least three vegetable servings per day.
- In 2015, respondents 25 to 34 years old were more likely to report at least three vegetable servings per day. In 2018, respondents 18 to 24 years old were more likely to report at least three vegetable servings per day, with a noted increase since 2015. From 2015 to 2018, there was a noted decrease in the percent of respondents 35 to 44 years old and a noted increase in the percent of respondents 55 to 64 years old reporting at least three vegetable servings per day.
- In 2015, respondents who were non-white and non-African American were more likely to report at least three vegetable servings per day. In 2018, race was not a significant variable. From 2015 to 2018, there was a noted increase in the percent of African American respondents and a noted decrease in the percent of respondents who were non-white and non-African reporting at least three vegetable servings per day.
- In 2015, Hispanic origin was not a significant variable. In 2018, Hispanic respondents were more likely to report at least three vegetable servings per day, with a noted increase since 2015.
- In 2015 and 2018, respondents with a college education were more likely to report at least three servings of vegetables per day. From 2015 to 2018, there was a noted increase in the percent of respondents with a high school education or less reporting at least three servings of vegetables per day.
- In 2015, respondents in the top 60 percent household income bracket were more likely to report at least three servings of vegetables per day. In 2018, household income was not a significant variable.
- In 2015, overweight status was not a significant variable. In 2018, respondents who were not overweight were more likely to report at least three servings of vegetables per day, with a noted increase since 2015. From 2015 to 2018, there was a noted <u>decrease</u> in the percent of overweight respondents reporting at least three servings of vegetables per day.
- In 2015 and 2018, respondents who met the recommended amount of physical activity were more likely to report at least three servings of vegetables per day. From 2015 to 2018, there was a noted increase in the percent of respondents who met the recommended amount of physical activity reporting at least three servings of vegetables per day.

Table 29. Three or More Servings of Vegetables on Average Day by Demographic Variables for

Each Survey Year[®]

Each Survey Year [®]					
	2006	2009	2012	2015	2018
TOTAL ^a	24%	21%	26%	28%	30%
Gender ^{1,2,3,4,5}					
Male ^a	18	18	21	25	25
Female ^a	30	24	30	31	35
$Age^{3,4,5}$					
18 to 24 ^{a,b}	23	18	17	21	52
25 to 34	25	23	29	37	30
35 to 44 ^b	26	25	36	33	25
45 to 54	26	22	28	33	27
55 to 64 ^b	24	23	22	22	31
65 and Older	22	16	20	21	19
Race ^{1,2,3,4}					
White ^a	27	25	28	30	32
African American ^{a,b}	19	19	23	24	31
Other ^b	20	8	21	35	23
Hispanic Origin ^{2,3,5}					
Hispanic ^{a,b}	21	10	14	32	44
Non-Hispanic ^a	25	22	27	28	29
Education ^{1,2,3,4,5}					
High School or Less ^{a,b}	16	16	16	20	29
Some Post High School	25	20	27	28	22
College Graduate	35	30	37	37	40
Household Income ^{1,2,3,4}					
Bottom 40 Percent Bracket ^a	20	19	22	27	29
Middle 20 Percent Bracket	27	19	23	34	33
Top 40 Percent Bracket	34	29	38	34	33
Marital Status ^{1,2,3}					
Married	27	25	30	31	32
Not Married ^a	23	19	23	27	30
Overweight Status ^{2,5}					
Not Overweight ^{a,b}	25	24	25	29	41
Overweight ^b	24	20	26	28	24
Physical Activity ^{1,2,3,4,5}					
Inactive	15	13	23	16	14
Insufficient	22	19	23	21	21
Recommended ^{a,b}	30	27	30	37	43

[®]Percentages occasionally may differ by 1 or 2 percentage points from previous reports or the Appendix as a result of rounding, recoding variables and response category distribution.

 $^{^{1}}$ <u>demographic</u> difference at p≤0.05 in 2006; 2 <u>demographic</u> difference at p≤0.05 in 2009; 3 <u>demographic</u> difference at p≤0.05 in 2012; 4 <u>demographic</u> difference at p≤0.05 in 2015; 5 <u>demographic</u> difference at p≤0.05 in 2018

^ayear difference at p≤0.05 from 2006 to 2018; ^byear difference at p≤0.05 from 2015 to 2018

Five or More Fruit or Vegetables per Day

In 2009, 23% of Wisconsin respondents and 23% of U.S. respondents reported they are at least five fruit or vegetables per day (2009 Behavioral Risk Factor Surveillance).

2018 Findings

- Thirty-seven percent of respondents reported five or more servings of fruit/vegetables on an average day.
- Female respondents were more likely to report at least five servings of fruit/vegetables a day (42%) compared to male respondents (31%).
- Fifty-five percent of respondents 18 to 24 years old reported at least five servings of fruit/vegetables a day compared to 31% of those 25 to 34 years old or 29% of respondents 65 and older.
- African American respondents were more likely to report at least five servings of fruit/vegetables a day (42%) compared to white respondents (39%) or respondents of another race (14%).
- Hispanic respondents were more likely to report at least five servings of fruit/vegetables a day (48%) compared to non-Hispanic respondents (35%).
- Respondents with a college education were more likely to report at least five servings of fruit/vegetables a day (41%) compared to those with a high school education or less (39%) or respondents with some post high school education (30%).
- Respondents who were not overweight were more likely to report at least five servings of fruit/vegetables a day (49%) compared to overweight respondents (30%).
- Forty-nine percent of respondents who met the recommended amount of physical activity reported at least five servings of fruit/vegetables a day compared to 27% of those who did an insufficient amount of physical activity or 23% of inactive respondents.

- From 2006 to 2018, there was no statistical change in the overall percent of respondents who reported five or more servings of fruit/vegetables on an average day.
- In 2006 and 2018, female respondents were more likely to report at least five fruit/vegetable servings per day.
- In 2006, age was not a significant variable. In 2018, respondents 18 to 24 years old were more likely to report at least five fruit/vegetable servings per day, with a noted increase since 2006.
- In 2006, white respondents were more likely to report at least five fruit/vegetable servings per day. In 2018, African American respondents were more likely to report at least five fruit/vegetable servings per day, with a noted increase since 2006. From 2006 to 2018, there was a noted decrease in the percent of respondents who were non-white and non-African American reporting at least five servings of fruit/vegetables per day.
- In 2006, Hispanic origin was not a significant variable. In 2018, Hispanic respondents were more likely to report at least five fruit/vegetable servings per day, with a noted increase since 2006.

- In 2006 and 2018, respondents with a college education were more likely to report at least five fruit/vegetable servings per day. From 2006 to 2018, there was a noted increase in the percent of respondents with a high school education or less and a noted decrease in the percent of respondents with at least some post high school education reporting at least five servings of fruit/vegetables per day.
- In 2006, respondents in the top 40 percent household income bracket were more likely to report at least five fruit/vegetable servings per day. In 2018, household income was not a significant variable. From 2006 to 2018, there was a noted increase in the percent of respondents in the bottom 40 percent household income bracket and a noted decrease in the percent of respondents in the top 40 percent household income bracket reporting at least five servings of fruit/vegetables per day.
- In 2006, married respondents were more likely to report at least five fruit/vegetable servings per day. In 2018, marital status was not a significant variable. From 2006 to 2018, there was a noted increase in the percent of unmarried respondents reporting at least five fruit/vegetable servings per day.
- In 2006, overweight status was not a significant variable. In 2018, respondents who were not overweight were more likely to report at least five fruit/vegetable servings per day, with a noted increase since 2006. From 2006 to 2018, there was a noted <u>decrease</u> in the percent of overweight respondents reporting at least five fruit/vegetable servings per day.
- In 2006 and 2018, respondents who met the recommended amount of physical activity were more likely to report at least five fruit/vegetable servings per day. From 2006 to 2018, there was a noted <u>decrease</u> in the percent of respondents who did an insufficient amount of physical activity and a noted increase in the percent of respondents who met the recommended amount of physical activity reporting at least five servings of fruit/vegetables per day.

- From 2015 to 2018, there was no statistical change in the overall percent of respondents who reported five or more servings of fruit/vegetables on an average day.
- In 2015, gender was not a significant variable. In 2018, female respondents were more likely to report at least five fruit/vegetable servings per day. From 2015 to 2018, there was a noted <u>decrease</u> in the percent of male respondents reporting at least five servings of fruit/vegetables per day.
- In 2015, respondents 25 to 34 years old were more likely to report at least five fruit/vegetable servings per day. In 2018, respondents 18 to 24 years old were more likely to report at least five fruit/vegetable servings per day, with a noted increase since 2015. From 2015 to 2018, there was a noted <u>decrease</u> in the percent of respondents 25 to 34 years old or 45 to 54 years old and a noted increase in the percent of respondents 55 to 64 years old reporting at least five servings of fruit/vegetables per day.
- In 2015, race was not a significant variable. In 2018, African American respondents were more likely to report at least five fruit/vegetable servings per day, with a noted increase since 2015. From 2015 to 2018, there was a noted decrease in the percent of respondents who were non-white and non-African American reporting at least five servings of fruit/vegetables per day.
- In 2015, Hispanic origin was not a significant variable. In 2018, Hispanic respondents were more likely to report at least five fruit/vegetable servings per day, with a noted increase since 2015.
- In 2015 and 2018, respondents with a college education were more likely to report at least five fruit/vegetable servings per day. From 2015 to 2018, there was a noted increase in the percent of respondents with a high school education or less and a noted decrease in the percent of respondents with at least some post high school education reporting at least five servings of fruit/vegetables per day.

- In 2015, respondents in the top 60 percent household income bracket were more likely to report at least five fruit/vegetable servings per day. In 2018, household income was not a significant variable. From 2015 to 2018, there was a noted <u>decrease</u> in the percent of respondents in the top 40 percent household income bracket reporting at least five servings of fruit/vegetables per day.
- In 2015, married respondents were more likely to report at least five fruit/vegetable servings per day. In 2018, marital status was not a significant variable. From 2015 to 2018, there was a noted <u>decrease</u> in the percent of married respondents reporting at least five servings of fruit/vegetables per day.
- In 2015, overweight status was not a significant variable. In 2018, respondents who were not overweight were more likely to report at least five fruit/vegetable servings per day, with a noted increase since 2015. From 2015 to 2018, there was a noted <u>decrease</u> in the percent of overweight respondents reporting at least five servings of fruit/vegetables per day.
- In 2015 and 2018, respondents who met the recommended amount of physical activity were more likely to report at least five servings of fruit/vegetables per day.

Table 30. Five or More Servings of Fruit or Vegetables on Average Day by Demographic Variables for

Each Survey Year[®]

Each Survey Year [®]					
	2006	2009	2012	2015	2018
TOTAL	35%	31%	35%	38%	37%
Gender ^{1,2,3,5}					
Male ^b	27	27	29	36	31
Female	42	35	40	40	42
Age ^{3,4,5}					
18 to 24 ^{a,b}	35	31	28	28	55
25 to 34 ^b	31	33	39	51	31
35 to 44	36	35	43	43	38
45 to 54 ^b	36	30	35	41	33
55 to 64 ^b	36	30	35	28	37
65 and Older	35	27	29	30	29
Race ^{1,2,3,5}					
White	39	34	40	39	39
African American ^{a,b}	26	30	30	35	42
Other ^{a,b}	30	19	27	43	14
Hispanic Origin ^{3,5}					
Hispanic ^{a,b}	29	24	23	33	48
Non-Hispanic	35	32	36	38	35
Education ^{1,2,3,4,5}					
High School or Less ^{a,b}	26	25	24	27	39
Some Post High School ^{a,b}	35	31	37	38	30
College Graduate ^{a,b}	47	41	47	48	41
Household Income ^{1,2,3,4}					
Bottom 40 Percent Bracket ^a	30	27	30	35	37
Middle 20 Percent Bracket	37	33	34	46	38
Top 40 Percent Bracket ^{a,b}	45	41	48	45	38
Marital Status ^{1,2,3,4}					
Married ^b	39	37	40	43	36
Not Married ^a	32	28	32	35	38
Overweight Status ^{2,5}					
Not Overweight ^{a,b}	35	35	37	40	49
Overweight ^{a,b}	35	30	34	37	30
Physical Activity ^{1,2,3,4,5}					
Inactive	23	22	25	23	23
Insufficient ^a	33	28	32	29	27
Recommended ^a	41	39	41	49	49

[®]Percentages occasionally may differ by 1 or 2 percentage points from previous reports or the Appendix as a result of rounding, recoding variables and response category distribution.

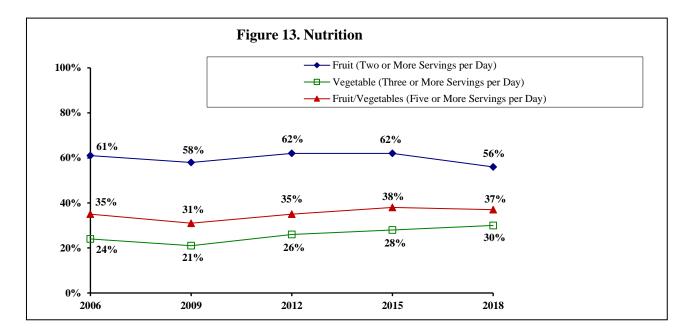
¹demographic difference at p≤0.05 in 2006; ²demographic difference at p≤0.05 in 2009; ³demographic difference at p≤0.05 in 2012; ⁴demographic difference at p≤0.05 in 2018

^ayear difference at p≤0.05 from 2006 to 2018; ^byear difference at p≤0.05 from 2015 to 2018

Nutrition Overall

Year Comparisons

• From 2006 to 2018, there was a statistical <u>decrease</u> in the overall percent of respondents who reported at least two servings of fruit, as well as from 2015 to 2018. From 2006 to 2018, there was a statistical increase in the overall percent of respondents who reported at least three servings of vegetables while from 2015 to 2018, there was no statistical change. From 2006 to 2018, there was no statistical change in the overall percent of respondents who reported at least five servings of fruit/vegetables, as well as from 2015 to 2018.



Women's Health (Figure 14; Tables 31 & 32)

KEY FINDINGS: In 2018, 77% of female respondents 50 and older reported a mammogram within the past two years; married respondents were more likely to report this. Eighty-three percent of female respondents 65 and older had a bone density scan.

From 2006 to 2018, there was no statistical change in the overall percent of respondents 50 and older who reported having a mammogram within the past two years, as well as from 2015 to 2018. From 2006 to 2018, there was a statistical increase in the overall percent of respondents 65 and older who reported a bone density scan while from 2015 to 2018, there was no statistical change.

Mammogram

Routine screening for breast cancer every one to two years with mammography is recommended for women 50 to 74 years old.²

In 2016, 80% of Wisconsin women and 78% of U.S. women 50 to 74 years old reported a mammogram within the past two years (2016 Behavioral Risk Factor Surveillance).

²"Screening for Breast Cancer." <u>U.S. Preventive Services Task Force: The Guide to Clinical Preventive Services, 2009</u>. Agency for Healthcare Research and Quality, 2009.

2018 Findings

- Seventy-seven percent of female respondents 50 and older had a mammogram within the past two years.
- Married respondents were more likely to report a mammogram within the past two years compared to unmarried respondents (85% and 73%, respectively).

2006 to 2018 Year Comparisons

- From 2006 to 2018, there was no statistical change in the overall percent of respondents who reported having a mammogram within the past two years.
- In 2006, respondents in the top 60 percent household income bracket were more likely to report a mammogram within the past two years. In 2018, household income was not a significant variable.
- In 2006 and 2018, married respondents were more likely to report a mammogram within the past two years.

2015 to 2018 Year Comparisons

- From 2015 to 2018, there was no statistical change in the overall percent of respondents who reported having a mammogram within the past two years.
- In 2015, African American respondents were more likely to report a mammogram within the past two years. In 2018, race was not a significant variable.
- In 2015, marital status was not a significant variable. In 2018, married respondents were more likely to report a mammogram within the past two years.

Table 31. Mammogram Within Past Two Years by Demographic Variables for Each Survey Year (Respondents 50 and Older)^{©,©}

	2006	2009	2012	2015	2018
TOTAL	78%	78%	77%	81%	77%
Race ⁴					
White	77	77	75	79	75
African American	83	81	82	89	86
Education ²					
High School or Less	77	73	74	82	73
Some Post High School or More	80	82	80	80	79
Household Income ^{1,2,3}					
Bottom 40 Percent Bracket	73	76	73	79	75
Top 60 Percent Bracket	85	86	85	84	83
Marital Status ^{1,2,3,5}					
Married	84	86	83	86	85
Not Married	75	74	74	78	73

[®]Percentages occasionally may differ by 1 or 2 percentage points from previous reports or the Appendix as a result of rounding, recoding variables and response category distribution.

[®]Other race and Hispanic origin not included as a result of too few cases for statistical reliability.

 $^{^{1}}$ <u>demographic</u> difference at p≤0.05 in 2006; 2 <u>demographic</u> difference at p≤0.05 in 2009; 3 <u>demographic</u> difference at p≤0.05 in 2012; 4 <u>demographic</u> difference at p≤0.05 in 2018

^a<u>year</u> difference at p≤0.05 from 2006 to 2018; ^b<u>year</u> difference at p≤0.05 from 2015 to 2018

Bone Density Scan

2018 Findings

- Eighty-three percent of the 120 female respondents 65 and older had a bone density scan to determine if they are at risk for fractures or are in the early stages of osteoporosis.
- There were no statistically significant differences between demographic variables and responses of a bone density scan.

2006 to 2018 Year Comparisons

- From 2006 to 2018, there was a statistical increase in the overall percent of respondents who reported having a bone density scan.
- In 2006, respondents with at least some post high school were more likely to report having a bone density scan. In 2018, education was not a significant variable.
- In 2006, married respondents were more likely to report having a bone density scan. In 2018, marital status was not a significant variable. From 2006 to 2018, there was a noted increase in the percent of unmarried respondents reporting a bone density scan.

- From 2015 to 2018, there was no statistical change in the overall percent of respondents who reported having a bone density scan.
- From 2015 to 2018, there were no statistically significant differences between and within demographic variables and responses of reporting a bone density scan.

Table 32. Bone Density Scan by Demographic Variables for Each Survey Year (Respondents 65 and Older)^{©,©}

Table 32. Bone Density Scan by Demographic Variables for Each Survey Year (Respondents 65 and Older)							
	2006	2009	2012	2015	2018		
TOTAL ^a	67%	73%	71%	82%	83%		
Education ^{1,2,3}							
High School or Less	59	62	64	77	80		
Some Post High School or More	78	84	79	86	84		
Household Income							
Bottom 40 Percent Bracket	64	73					
Top 60 Percent Bracket	75	77					
Marital Status ¹							
Married	74	72	76	87	83		
Not Married ^a	63	72	69	79	82		

[®]Percentages occasionally may differ by 1 or 2 percentage points from previous reports or the Appendix as a result of rounding, recoding variables and response category distribution.

²Data is not shown as a result of insufficient statistical reliability due to the low number of respondents in at least one of the response categories.

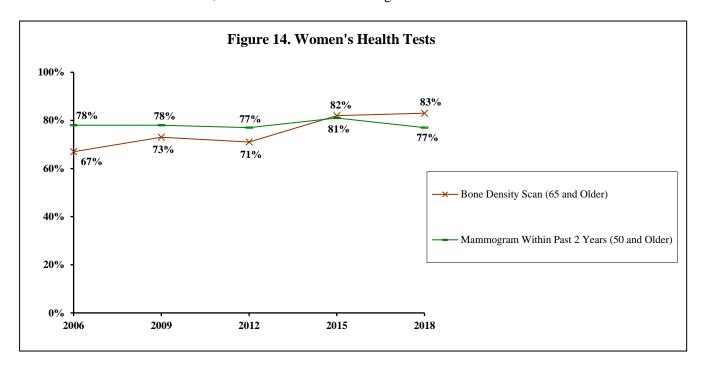
¹demographic difference at p≤0.05 in 2006; ²demographic difference at p≤0.05 in 2009; ³demographic difference at p≤0.05 in 2012; ⁴demographic difference at p≤0.05 in 2018

^ayear difference at p≤0.05 from 2006 to 2018; ^byear difference at p≤0.05 from 2015 to 2018

Women's Health Tests Overall

Year Comparisons

• From 2006 to 2018, there was no statistical change in the overall percent of respondents 50 and older who reported having a mammogram within the past two years, as well as from 2015 to 2018. From 2006 to 2018, there was a statistical increase in the overall percent of respondents 65 and older who reported a bone density scan while from 2015 to 2018, there was no statistical change.



Colorectal Cancer Screening (Figure 15; Tables 33 - 36)

KEY FINDINGS: In 2018, 13% of respondents 50 and older reported a blood stool test within the past year. Seven percent of respondents 50 and older reported a sigmoidoscopy within the past five years while 67% reported a colonoscopy within the past ten years. This results in 72% of respondents meeting the current colorectal cancer screening recommendations. Respondents in the top 60 percent household income bracket or married respondents were more likely to meet the recommendation.

From 2006 to 2018, there was a statistical <u>decrease</u> in the overall percent of respondents who reported a blood stool test within the past year while from 2015 to 2018, there was no statistical change. From 2009 to 2018, there was no statistical change in the overall percent of respondents who reported a sigmoidoscopy in the past five years while from 2015 to 2018, there was a statistical <u>decrease</u>. From 2009 to 2018, there was a statistical increase in the overall percent of respondents who reported a colonoscopy within the past ten years while from 2015 to 2018, there was no statistical change. From 2009 to 2018, there was a statistical increase in the overall percent of respondents who reported they had at least one of these tests in the recommended time frame while from 2015 to 2018, there was no statistical change.

Blood Stool Test

In 2016, 7% of Wisconsin respondents and 8% of U.S. respondents 50 to 75 years old reported a blood stool test within the past year (2016 Behavioral Risk Factor Surveillance).

2018 Findings

- Thirteen percent of respondents 50 and older had a blood stool test within the past year. Fifty-nine percent reported never while 4% were not sure.
- African American respondents were more likely to report a blood stool test within the past year (18%) compared to white respondents (11%).

2006 to 2018 Year Comparisons

- From 2006 to 2018, there was a statistical <u>decrease</u> in the overall percent of respondents who reported a blood stool test within the past year.
- In 2006 and 2018, gender was not a significant variable. From 2006 to 2018, there was a noted <u>decrease</u> in the percent of respondents across gender reporting a blood stool test within the past year.
- In 2006 and 2018, African American respondents were more likely to report a blood stool test within the past year. From 2006 to 2018, there was a noted <u>decrease</u> in the percent of respondents across race reporting a blood stool test within the past year.
- In 2006 and 2018, education was not a significant variable. From 2006 to 2018, there was a noted <u>decrease</u> in the percent of respondents across education reporting a blood stool test within the past year.
- In 2006 and 2018, household income was not a significant variable. From 2006 to 2018, there was a noted decrease in the percent of respondents across household income reporting a blood stool test within the past year.
- In 2006 and 2018, marital status was not a significant variable. From 2006 to 2018, there was a noted <u>decrease</u> in the percent of respondents across marital status reporting a blood stool test within the past year.

- From 2015 to 2018, there was no statistical change in the overall percent of respondents who reported a blood stool test within the past year.
- In 2015 and 2018, African American respondents were more likely to report a blood stool test within the past year.

Table 33. Blood Stool Test Within Past Year by Demographic Variables for Each Survey Year (Respondents 50 and Older)^{①,②}

(Respondents 50 and Olde	er)°,°			
	2006	2012	2015	2018
TOTAL ^a	23%	14%	14%	13%
Gender				
Male ^a	23	13	15	14
Female ^a	23	14	13	12
Race ^{1,2,3,4}				
White ^a	22	12	12	11
African American ^a	29	18	20	18
Education				
High School or Less ^a	24	14	15	15
Some Post High School ^a	21	14	16	13
College Graduate ^a	23	12	10	12
Household Income				
Bottom 40 Percent Bracket ^a	25	15	16	14
Top 60 Percent Bracket ^a	23	11	12	12
Marital Status				
Married ^a	24	11	12	13
Not Married ^a	23	15	15	14

[®]Percentages occasionally may differ by 1 or 2 percentage points from previous reports or the Appendix as a result of rounding, recoding variables and response category distribution.

Sigmoidoscopy

A colonoscopy is recommended every 10 years for persons 50 and older while a flexible sigmoidoscopy is recommended more often.³

In 2016, 3% of Wisconsin respondents and 2% of U.S. respondents 50 to 75 years old reported a sigmoidoscopy within the past five years (2016 Behavioral Risk Factor Surveillance).

2018 Findings

- Seven percent of respondents 50 and older reported their last sigmoidoscopy was within the past five years. Seventy-eight percent reported never.
- There were no statistically significant differences between demographic variables and responses of a sigmoidoscopy within the past five years.

[®]Other race and Hispanic origin not included as a result of too few cases for statistical reliability.

¹demographic difference at p≤0.05 in 2006; 2 demographic difference at p≤0.05 in 2012

³demographic difference at p≤0.05 in 2015; ⁴demographic difference at p≤0.05 in 2018

^a<u>year</u> difference at p≤0.05 from 2006 to 2018; ^b<u>year</u> difference at p≤0.05 from 2015 to 2018

³"Screening for Colorectal Cancer." <u>U.S. Preventive Services Task Force: The Guide to Clinical Preventive Services, 2005</u>. Agency for Healthcare Research and Quality, 2005. Pages 32 - 35.

- From 2009 to 2018, there was no statistical change in the overall percent of respondents 50 and older who reported a sigmoidoscopy within the past five years.
- In 2009, male respondents were more likely to report a sigmoidoscopy within the past five years. In 2018, gender was not a significant variable.
- In 2009 and 2018, race was not a significant variable. From 2009 to 2018, there was a noted <u>decrease</u> in the percent of white respondents reporting a sigmoidoscopy within the past five years.

- From 2015 to 2018, there was a statistical <u>decrease</u> in the overall percent of respondents 50 and older who reported a sigmoidoscopy within the past five years.
- In 2015, male respondents were more likely to report a sigmoidoscopy within the past five years. In 2018, gender was not a significant variable. From 2015 to 2018, there was a noted <u>decrease</u> in the percent of male respondents reporting a sigmoidoscopy within the past five years.
- In 2015, African American respondents were more likely to report a sigmoidoscopy within the past five years. In 2018, race was not a significant variable. From 2015 to 2018, there was a noted <u>decrease</u> in the percent of African American respondents reporting a sigmoidoscopy within the past five years.

Table 34. Sigmoidoscopy Within Past Five Years by Demographic Variables for Each Survey Year (Respondents 50 and Older)[©],[©]

	2009	2012	2015	2018
TOTAL ^b	10%	10%	11%	7%
Gender ^{1,3}				
Male ^b	13	11	16	9
Female	8	9	7	5
Race ^{2,3}				
White ^a	11	8	10	7
African American ^b	9	15	18	8
Education				
High School or Less	11	10	11	7
Some Post High School	9	10	13	8
College Graduate	11	9	10	6
Household Income				
Bottom 40 Percent Bracket	13	11	13	9
Top 60 Percent Bracket	8	10	9	6
Marital Status				
Married	11	7	11	6
Not Married	10	11	11	8

[®]Percentages occasionally may differ by 1 or 2 percentage points from previous reports or the Appendix as a result of rounding, recoding variables and response category distribution.

Colonoscopy

A colonoscopy is recommended every 10 years for persons 50 and older while a flexible sigmoidoscopy is recommended more often.⁴

In 2016, 70% of Wisconsin respondents and 64% of U.S. respondents 50 to 75 years old reported a colonoscopy within the past ten years (2016 Behavioral Risk Factor Surveillance).

2018 Findings

- Sixty-seven percent of respondents 50 and older had a colonoscopy within the past ten years. Twenty-five percent reported never.
- Seventy-four percent of respondents in the top 60 percent household income bracket reported a colonoscopy within the past ten years compared to 62% of respondents in the bottom 40 percent household income bracket.

[®]Other race and Hispanic origin not included as a result of too few cases for statistical reliability.

¹demographic difference at p≤0.05 in 2009; ²demographic difference at p≤0.05 in 2012

³demographic difference at p≤0.05 in 2015; ⁴demographic difference at p≤0.05 in 2018

^a<u>year</u> difference at p≤0.05 from 2009 to 2018; ^b<u>year</u> difference at p≤0.05 from 2015 to 2018

⁴"Screening for Colorectal Cancer." <u>U.S. Preventive Services Task Force: The Guide to Clinical Preventive Services</u>, 2005. Agency for Healthcare Research and Quality, 2005. Pages 32 - 35.

• Married respondents were more likely to report a colonoscopy within the past ten years compared to unmarried respondents (75% and 62%, respectively).

2009 to 2018 Year Comparisons

- From 2009 to 2018, there was a statistical increase in the overall percent of respondents 50 and older who reported a colonoscopy within the past ten years.
- In 2009 and 2018, gender was not a significant variable. From 2009 to 2018, there was a noted increase in the percent of female respondents reporting a colonoscopy within the past ten years.
- In 2009 and 2018, race was not a significant variable. From 2009 to 2018, there was a noted increase in the percent of respondents across race reporting a colonoscopy within the past ten years.
- In 2009 and 2018, respondents in the top 60 percent household income bracket were more likely to report a colonoscopy within the past ten years. From 2009 to 2018, there was a noted increase in the percent of respondents in the top 60 percent household income bracket reporting a colonoscopy within the past ten years.
- In 2009 and 2018, married respondents were more likely to report a colonoscopy within the past ten years. From 2009 to 2018, there was a noted increase in the percent of married respondents reporting a colonoscopy within the past ten years.

- From 2015 to 2018, there was no statistical change in the overall percent of respondents 50 and older who reported a colonoscopy within the past ten years.
- In 2015 and 2018, respondents in the top 60 percent household income bracket were more likely to report a colonoscopy within the past ten years.
- In 2015 and 2018, married respondents were more likely to report a colonoscopy within the past ten years.

Table 35. Colonoscopy Within Past Ten Years by Demographic Variables for Each Survey Year (Respondents 50 and Older)^{©,©}

and Older)				
	2009	2012	2015	2018
TOTAL ^a	58%	61%	67%	67%
Gender				
Male	61	59	67	67
Female ^a	57	63	67	67
Race				
White ^a	61	60	65	68
African American ^a	53	65	73	65
Education ²				
High School or Less	54	55	65	63
Some Post High School	61	65	67	69
College Graduate	63	67	69	70
Household Income ^{1,3,4}				
Bottom 40 Percent Bracket	54	61	62	62
Top 60 Percent Bracket ^a	64	65	73	74
Marital Status ^{1,2,3,4}				
Married ^a	63	66	73	75
Not Married	55	58	63	62

[®]Percentages occasionally may differ by 1 or 2 percentage points from previous reports or the Appendix as a result of rounding, recoding variables and response category distribution.

Colorectal Cancer Screening Recommendation Met

The Healthy People 2020 goal for meeting the colorectal cancer screening recommendation is 71%. (Objective C-16)

In 2016, 74% of Wisconsin respondents and 68% of U.S. respondents 50 to 75 years old reported one of the three tests in the recommended time frame (2016 Behavioral Risk Factor Surveillance).

2018 Findings

- Seventy-two percent of respondents 50 and older had one of the three tests in the time frame recommended (blood stool test within the past year, sigmoidoscopy within the past five years, or colonoscopy within the past 10 years).
- Seventy-eight percent of respondents in the top 60 percent household income bracket reported a colorectal cancer screen in the recommended time frame compared to 67% of respondents in the bottom 40 percent household income bracket.
- Married respondents were more likely to report a colorectal cancer screen in the recommended time frame compared to unmarried respondents (77% and 68%, respectively).

Other race and Hispanic origin not included as a result of too few cases for statistical reliability.

¹demographic difference at p≤0.05 in 2009; ²demographic difference at p≤0.05 in 2012

³demographic difference at p≤0.05 in 2015; ⁴demographic difference at p≤0.05 in 2018

^a<u>year</u> difference at p≤0.05 from 2009 to 2018; ^b<u>year</u> difference at p≤0.05 from 2015 to 2018

- From 2009 to 2018, there was a statistical increase in the overall percent of respondents 50 and older who reported a colorectal cancer screen in the recommended time frame.
- In 2009 and 2018, gender was not a significant variable. From 2009 to 2018, there was a noted increase in the percent of respondents across gender reporting a colorectal cancer screen in the recommended time frame.
- In 2009 and 2018, race was not a significant variable. From 2009 to 2018, there was a noted increase in the percent of respondents across race reporting a colorectal cancer screen in the recommended time frame.
- In 2009 and 2018, education was not a significant variable. From 2009 to 2018, there was a noted increase in the percent of respondents with a high school education or less or with a college education reporting a colorectal cancer screen in the recommended time frame.
- In 2009 and 2018, respondents in the top 60 percent household income bracket were more likely to report a colorectal cancer screen in the recommended time frame. From 2009 to 2018, there was a noted increase in the percent of respondents across household income reporting a colorectal cancer screen in the recommended time frame.
- In 2009 and 2018, married respondents were more likely to report a colorectal cancer screen in the recommended time frame. From 2009 to 2018, there was a noted increase in the percent of respondents across marital status reporting a colorectal cancer screen in the recommended time frame.

- From 2015 to 2018, there was no statistical change in the overall percent of respondents 50 and older who reported a colorectal cancer screen in the recommended time frame.
- In 2015, African American respondents were more likely to report a colorectal cancer screen in the recommended time frame. In 2018, race was not a significant variable.
- In 2015, household income was not a significant variable. In 2018, respondents in the top 60 percent household income bracket were more likely to report a colorectal cancer screen in the recommended time frame.
- In 2015, marital status was not a significant variable. In 2018, married respondents were more likely to report a colorectal cancer screen in the recommended time frame.

Table 36. Colorectal Cancer Screening in Recommended Time Frame by Demographic Variables for Each Survey Year (Respondents 50 and Older)^{①,②,③}

Year (Respondents 50 and	Older) , , , ,			
	2009	2012	2015	2018
TOTAL ^a	61%	67%	72%	72%
Gender				
Male ^a	63	65	72	72
Female ^a	59	68	71	71
Race ³				
White ^a	63	65	70	72
African American ^a	56	70	79	72
Education				
High School or Less ^a	57	62	71	68
Some Post High School	64	70	72	73
College Graduate ^a	65	71	72	74
Household Income ^{1,4}				
Bottom 40 Percent Bracket ^a	57	65	69	67
Top 60 Percent Bracket ^a	66	70	75	78
Marital Status ^{1,4}				
Married ^a	65	70	75	77
Not Married ^a	58	64	69	68

[®]Percentages occasionally may differ by 1 or 2 percentage points from previous reports or the Appendix as a result of rounding, recoding variables and response category distribution.

[©]In 2008, blood stool test was not asked.

[®]Other race and Hispanic origin not included as a result of too few cases for statistical reliability.

¹demographic difference at p≤0.05 in 2009; ²demographic difference at p≤0.05 in 2012

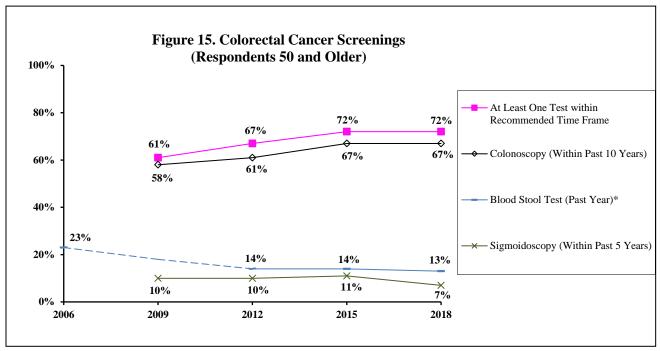
³demographic difference at p≤0.05 in 2015; ⁴demographic difference at p≤0.05 in 2018

^a<u>year</u> difference at p≤0.05 from 2009 to 2018; ^b<u>year</u> difference at p≤0.05 from 2015 to 2018

Colorectal Cancer Screenings Overall

Year Comparisons

• From 2006 to 2018, there was a statistical <u>decrease</u> in the overall percent of respondents who reported a blood stool test within the past year while from 2015 to 2018, there was no statistical change. From 2009 to 2018, there was no statistical change in the overall percent of respondents who reported a sigmoidoscopy in the past five years while from 2015 to 2018, there was a statistical <u>decrease</u>. From 2009 to 2018, there was a statistical increase in the overall percent of respondents who reported a colonoscopy within the past ten years while from 2015 to 2018, there was no statistical change. From 2009 to 2018, there was a statistical increase in the overall percent of respondents who reported they had at least one of these tests in the recommended time frame while from 2015 to 2018, there was no statistical change.



^{*}In 2009, blood stool test was not asked.

Tobacco Cigarette Use (Figure 16; Table 37)

KEY FINDINGS: In 2018, 16% of respondents were current tobacco cigarette smokers; respondents who were 35 to 44 years old, non-Hispanic, with a high school education or less, in the bottom 40 percent household income bracket or unmarried respondents were more likely to be a smoker.

From 2006 to 2018, there was a statistical <u>decrease</u> in the overall percent of respondents who were current tobacco cigarette smokers, as well as from 2015 to 2018.

Current Tobacco Cigarette Smokers

The Healthy People 2020 goal for adult smoking is 12%. (Objective TU-1.1)

In 2016, 17% of Wisconsin respondents and 17% of U.S. respondents were current smokers (2016 Behavioral Risk Factor Surveillance).

2018 Findings

- Sixteen percent of respondents were current tobacco cigarette smokers.
- Twenty-four percent of respondents 35 to 44 years old were current smokers compared to 10% of those 65 and older or 3% of respondents 18 to 24 years old.
- Non-Hispanic respondents were more likely to be current smokers (17%) compared to Hispanic respondents (6%).
- Twenty-two percent of respondents with a high school education or less were current smokers compared to 18% of those with some post high school education or 7% of respondents with a college education.
- Twenty percent of respondents in the bottom 40 percent household income bracket were current smokers compared to 13% of those in the middle 20 percent income bracket or 12% of respondents in the top 40 percent household income bracket.
- Unmarried respondents were more likely to be current smokers compared to married respondents (17% and 13%, respectively).

- From 2006 to 2018, there was a statistical <u>decrease</u> in the overall percent of respondents who were current tobacco cigarette smokers.
- In 2006, male respondents were more likely to be a current smoker. In 2018, gender was not a significant variable. From 2006 to 2018, there was a noted <u>decrease</u> in the percent respondents across gender who were current smokers.
- In 2006, respondents 25 to 54 years old were more likely to be a current smoker. In 2018, respondents 35 to 44 years old were more likely to be a current smoker. From 2006 to 2018, there was a noted <u>decrease</u> in the percent of respondents 18 to 34 years old or 45 to 54 years old who were current smokers.
- In 2006, African American respondents were more likely to be a current smoker. In 2018, race was not a significant variable. From 2006 to 2018, there was a noted <u>decrease</u> in the percent of respondents across race who were current smokers.
- In 2006, Hispanic origin was not a significant variable. In 2018, non-Hispanic respondents were more likely to be a current smoker. From 2006 to 2018, there was a noted <u>decrease</u> in the percent of respondents across Hispanic origin who were current smokers.
- In 2006 and 2018, respondents with a high school education or less were more likely to be a current smoker. From 2006 to 2018, there was a noted <u>decrease</u> in the percent of respondents across education who were current smokers.
- In 2006 and 2018, respondents in the bottom 40 percent household income bracket were more likely to be a current smoker. From 2006 to 2018, there was a noted <u>decrease</u> in the percent of respondents in the bottom 60 percent household income bracket who were current smokers.
- In 2006 and 2018, unmarried respondents were more likely to be a current smoker. From 2006 to 2018, there was a noted decrease in the percent of respondents across marital status who were current smokers.

- From 2015 to 2018, there was a statistical <u>decrease</u> in the overall percent of respondents who were current tobacco cigarette smokers.
- In 2015 and 2018, gender was not a significant variable. From 2015 to 2018, there was a noted <u>decrease</u> in the percent of male respondents who were current smokers.
- In 2015, respondents 55 to 64 years old were more likely to be a current smoker. In 2018, respondents 35 to 44 years old or 55 to 64 years old were more likely to be a current smoker. From 2015 to 2018, there was a noted decrease in the percent of respondents 18 to 24 years old who were current smokers.
- In 2015, respondents who were non-white and non-African American were more likely to be a current smoker. In 2018, race was not a significant variable. From 2015 to 2018, there was a noted <u>decrease</u> in the percent of respondents who were non-white and non-African American who were current smokers.
- In 2015, Hispanic origin was not a significant variable. In 2018, non-Hispanic respondents were more likely to be a current smoker. From 2015 to 2018, there was a noted <u>decrease</u> in the percent of respondents across Hispanic origin who were current smokers.
- In 2015, respondents with some post high school education or less were more likely to be a current smoker. In 2018, respondents with a high school education or less were more likely to be a current smoker. From 2015 to 2018, there was a noted <u>decrease</u> in the percent of respondents with some post high school education who were current smokers.
- In 2015 and 2018, respondents in the bottom 40 percent household income bracket were more likely to be a current smoker. From 2015 to 2018, there was a noted <u>decrease</u> in the percent of respondents in the bottom 40 percent household income bracket who were current smokers.
- In 2015 and 2018, unmarried respondents were more likely to be a current smoker. From 2015 to 2018, there was a noted <u>decrease</u> in the percent of unmarried respondents who were current smokers.

Table 37. Current Tobacco Cigarette Smokers by Demographic Variables for Each Survey Year[®]

Γable 37. Current Tobacco Cigarette	2006	2009	2012	2015	2018
$TOTAL^{a,b}$	26%	25%	24%	19%	16%
Gender ^{1,2,3}					
Male ^{a,b}	29	28	29	21	14
Female ^a	23	23	21	18	17
Age ^{1,2,3,4,5}					
18 to 24 ^{a,b}	32	26	20	13	3
25 to 34 ^a	31	27	32	22	16
35 to 44	29	34	28	23	24
45 to 54 ^a	30	29	25	20	18
55 to 64	21	23	29	28	22
65 and Older	12	12	11	10	10
Race ^{1,2,3,4}					
White ^a	24	21	22	18	15
African American ^a	31	30	31	21	17
Other ^{a,b}	29	35	18	25	11
Hispanic Origin ^{2,5}					
Hispanic ^{a,b}	31	42	20	18	6
Non-Hispanic ^{a,b}	26	24	25	19	17
Education ^{1,2,3,4,5}					
High School or Less ^a	33	36	33	24	22
Some Post High School ^{a,b}	29	25	25	24	18
College Graduate ^a	13	11	14	10	7
Household Income ^{1,2,3,4,5}					
Bottom 40 Percent Bracket ^{a,b}	32	32	33	27	20
Middle 20 Percent Bracket ^a	24	20	20	19	13
Top 40 Percent Bracket	16	13	12	14	12
Marital Status ^{1,2,3,4,5}					
Married ^a	20	18	16	15	13
Not Married ^{a,b}	30	30	29	22	17

[®]Percentages occasionally may differ by 1 or 2 percentage points from previous reports or the Appendix as a result of rounding, recoding variables and response category distribution.

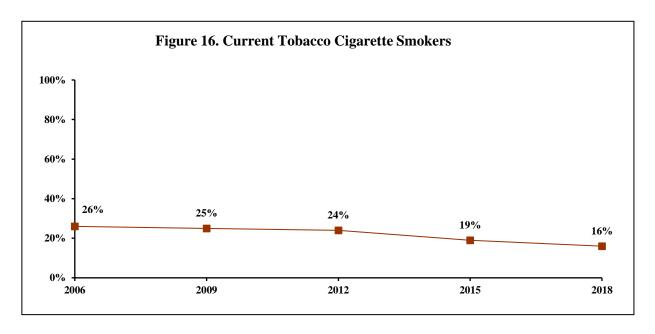
¹demographic difference at p≤0.05 in 2006; ²demographic difference at p≤0.05 in 2009; ³demographic difference at p≤0.05 in 2012; ⁴demographic difference at p≤0.05 in 2015; ⁵demographic difference at p≤0.05 in 2018

^a<u>year</u> difference at p≤0.05 from 2006 to 2018; ^b<u>year</u> difference at p≤0.05 from 2015 to 2018

Tobacco Cigarette Use Overall

Year Comparisons

From 2006 to 2018, there was a statistical decrease in the overall percent of respondents who were current tobacco cigarette smokers, as well as from 2015 to 2018.



Exposure to Cigarette Smoke (Figures 17 & 18; Table 38)

KEY FINDINGS: In 2018, 78% of respondents reported smoking is not allowed anywhere inside the home. Respondents who were in the top 40 percent household income bracket, married, nonsmokers or in households with children were more likely to report smoking is not allowed anywhere inside the home.

> From 2009 to 2018, there was a statistical increase in the overall percent of respondents who reported smoking is not allowed anywhere inside the home, as well as from 2015 to 2018.

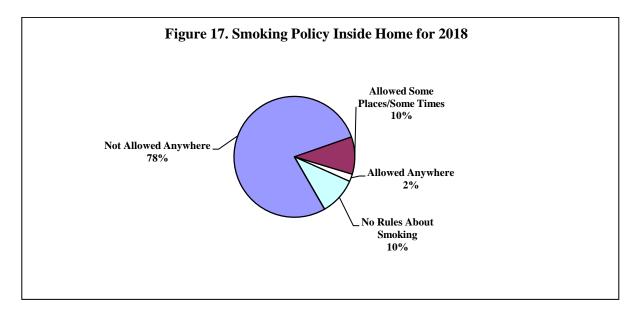
Smoking Policy Inside Home

In 2005, 75% of Wisconsin respondents reported smoking is prohibited in their home (2005 Tobacco Use Supplement to the Current Population Survey). In 2006-2008, 79% of U.S. respondents reported smoking is prohibited in their home (2006-2008 Tobacco Use Supplement to the Current Population Survey).

The Healthy People 2020 goal for smoke-free homes is 87%. (Objective TU-14)

2018 Findings

• Seventy-eight percent of respondents reported smoking is not allowed anywhere inside the home while 10% reported smoking is allowed in some places or at some times. Two percent reported smoking is allowed anywhere inside the home. Ten percent of respondents reported there are no rules about smoking inside the home.



- Eighty-seven percent of respondents in the top 40 percent household income bracket reported smoking is not allowed in the home compared to 84% of those in the middle 20 percent income bracket or 74% of respondents in the bottom 40 percent household income bracket.
- Married respondents were more likely to report smoking is not allowed in the home compared to unmarried respondents (83% and 76%, respectively).
- Eighty-six percent of nonsmokers reported smoking is not allowed in the home compared to 36% of smokers.
- Respondents in households with children were more likely to report smoking is not allowed in the home (88%) compared to respondents in households without children (74%).

- From 2009 to 2018, there was a statistical increase in the overall percent of respondents who reported smoking is not allowed anywhere inside the home.
- In 2009 and 2018, respondents in the top 40 percent household income bracket were more likely to report smoking is not allowed in the home. From 2009 to 2018, there was a noted increase in the percent of respondents across household income reporting smoking is not allowed in the home.
- In 2009 and 2018, married respondents were more likely to report smoking is not allowed in the home. From 2009 to 2018, there was a noted increase in the percent of respondents across marital status reporting smoking is not allowed in the home.
- In 2009 and 2018, nonsmokers were more likely to report smoking is not allowed in the home. From 2009 to 2018, there was a noted increase in the percent of respondents across smoking status reporting smoking is not allowed in the home.

• In 2009 and 2018, respondents in households with children were more likely to report smoking is not allowed in the home. From 2009 to 2018, there was a noted increase in the percent of respondents with or without children reporting smoking is not allowed in the home.

- From 2015 to 2018, there was a statistical increase in the overall percent of respondents who reported smoking is not allowed anywhere inside the home.
- In 2015 and 2018, respondents in the top 40 percent household income bracket were more likely to report smoking is not allowed in the home. From 2015 to 2018, there was a noted increase in the percent of respondents in the middle 20 percent household income bracket reporting smoking is not allowed in the home.
- In 2015 and 2018, married respondents were more likely to report smoking is not allowed in the home.
- In 2015 and 2018, nonsmokers were more likely to report smoking is not allowed in the home. From 2015 to 2018, there was a noted increase in the percent of nonsmokers and a noted <u>decrease</u> in the percent of smokers reporting smoking is not allowed in the home.
- In 2015 and 2018, respondents in households with children were more likely to report smoking is not allowed in the home. From 2015 to 2018, there was a noted increase in the percent of respondents in households with children reporting smoking is not allowed in the home.

Table 38. Smoking Not Allowed in Home by Demographic Variables for Each Survey Year[®]

<u> </u>	J	\mathcal{C} 1		<i>J</i>
	2009	2012	2015	2018
TOTAL ^{a,b}	64%	74%	75%	78%
Household Income ^{1,2,3,4}				
Bottom 40 Percent Bracket ^a	56	66	69	74
Middle 20 Percent Bracket ^{a,b}	73	75	73	84
Top 40 Percent Bracket ^a	81	87	88	87
Marital Status ^{1,2,3,4}				
Married ^a	74	83	81	83
Not Married ^a	58	69	73	76
Smoking Status ^{1,2,3,4}				
Nonsmoker ^{a,b}	77	84	82	86
Smoker ^{a,b}	26	42	47	36
Children in Household ^{1,2,3,4}				
$Yes^{a,b}$	70	80	79	88
No^a	61	70	73	74

[®]Percentages occasionally may differ by 1 or 2 percentage points from previous reports or the Appendix as a result of rounding, recoding variables and response category distribution.

¹demographic difference at p≤0.05 in 2009; ²demographic difference at p≤0.05 in 2012

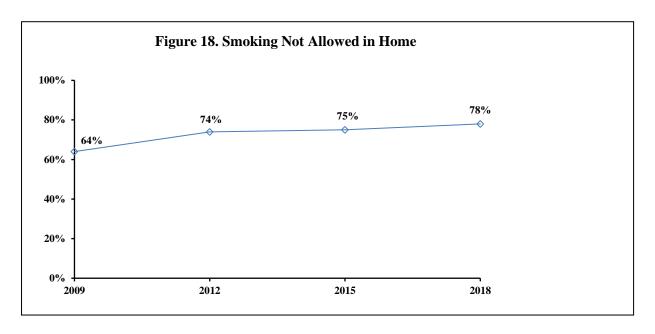
 $[\]frac{3}{\text{demographic}}$ difference at p≤0.05 in 2015; $\frac{4}{\text{demographic}}$ difference at p≤0.05 in 2018

^ayear difference at p≤0.05 from 2009 to 2018; ^byear difference at p≤0.05 from 2015 to 2018

Exposure to Cigarette Smoke Overall

Year Comparisons

• From 2009 to 2018, there was a statistical increase in the overall percent of respondents who reported smoking is not allowed anywhere inside the home, as well as from 2015 to 2018.



Other Tobacco Products (Figure 19; Tables 39 & 40)

KEY FINDINGS: In 2018, 6% of respondents used cigars, cigarillos or little cigars in the past month; respondents who were male, 25 to 54 years old, African American, with some post high school education or less or unmarried respondents were more likely to report this. Four percent of respondents used electronic cigarettes in the past month; respondents who were male, 25 to 34 years old, Hispanic, with some post high school education or unmarried respondents were more likely to report this.

From 2015 to 2018, there was no statistical change in the overall percent of respondents who reported in the past month they used cigars/cigarillos/little cigars. From 2015 to 2018, there was a statistical <u>decrease</u> in the overall percent of respondents who reported in the past month they used electronic cigarettes.

Cigars, Cigarillos or Little Cigars

2018 Findings

- Six percent of respondents used cigars, cigarillos or little cigars in the past month.
- Male respondents were more likely to use cigars, cigarillos or little cigars in the past month (10%) compared to female respondents (2%).
- Eight percent of respondents 25 to 34 years old and 7% of those 35 to 54 years old used cigars, cigarillos or little cigars in the past month compared to 2% of respondents 65 and older.

- African American respondents were more likely to use cigars, cigarillos or little cigars in the past month (9%) compared to respondents who were non-white and non-African American (6%) or white respondents (4%).
- Eight percent of respondents with some post high school education and 7% of those with a high school education or less used cigars, cigarillos or little cigars in the past month compared to 3% of respondents with a college education.
- Unmarried respondents were more likely to use cigars, cigarillos or little cigars compared to married respondents (8% and 2%, respectively).

- From 2015 to 2018, there was no statistical change in the overall percent of respondents who used cigars, cigarillos or little cigars in the past month.
- In 2015 and 2018, male respondents were more likely to use cigars, cigarillos or little cigars in the past month.
- In 2015, respondents 25 to 34 years old were more likely to use cigars, cigarillos or little cigars in the past month. In 2018, respondents 25 to 54 years old were more likely to use cigar, cigarillos or little cigars in the past month. From 2015 to 2018, there was a noted increase in the percent of respondents 35 to 44 years old reporting they used cigars, cigarillos or little cigars in the past month.
- In 2015, respondents who were non-white and non-African American were more likely to use cigars, cigarillos or little cigars in the past month. In 2018, African American respondents were more likely to use cigars, cigarillos or little cigars in the past month, with a noted increase since 2015.
- In 2015, Hispanic respondents were more likely to use cigars, cigarillos or little cigars in the past month. In 2018, Hispanic origin was not a significant variable.
- In 2015, education was not a significant variable. In 2018, respondents with some post high school education or less were more likely to use cigars, cigarillos or little cigars in the past month.
- In 2015, marital status was not a significant variable. In 2018, unmarried respondents were more likely to use cigars, cigarillos or little cigars in the past month, with a noted increase since 2015.

Table 39. Cigars, Cigarillos or Little Cigars in Past Month by Demographic Variables for Each Survey Year[®]

TOTAL 5% 6% Gender ^{1,2} Male 8 10 Female 2 2 Age ^{1,2} 18 to 24 7 5 25 to 34 9 8 35 to 44a 3 7 45 to 54 5 7 55 to 64 3 5 65 and Older 2 2 Race ^{1,2} White 4 4 African Americana 5 9 Other 9 6 Hispanic Origina 3 4 Non-Hispanic 4 6 Educationa 4 6 Educationa 4 6 Educationa 4 6 Educationa 4 7 Some Post High School 6 8 College Graduate 4 3 Household Income 6 6 Bottom 40 Percent Bracket 7 7 Top 40 Percent Bracket 7	Table 39. Cigars, Cigarillos or Little	2015	2018
Gender ^{1,2} Male 8 10 Female 2 2 Age ^{1,2}	ΤΟΤΔΙ		
Male 8 10 Female 2 2 Age ^{1,2} 7 5 18 to 24 7 5 25 to 34 9 8 35 to 44a 3 7 45 to 54 5 7 55 to 64 3 5 65 and Older 2 2 Race ^{1,2} White 4 4 African Americana 5 9 Other 9 6 Hispanic Origin¹ 3 4 Hispanic Origin¹ 4 6 Education² 4 6 Education² 4 6 Education² 4 7 Some Post High School 6 8 College Graduate 4 3 Household Income 8 6 6 Middle 20 Percent Bracket 7 7 Top 40 Percent Bracket 7 7 Top 40 Percent Bracket 4 5 Married 4 2	TOTAL	370	070
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Age ^{1,2} 18 to 24 25 to 34 35 to 44 ^a 35 to 54 55 to 64 65 and Older Race ^{1,2} White African American ^a Other 9 6 Hispanic Origin ¹ Hispanic Non-Hispanic Non-Hispanic Education ² High School or Less Some Post High School College Graduate Household Income Bottom 40 Percent Bracket Middle 20 Percent Bracket Top 40 Percent Bracket Top 40 Percent Bracket Marital Status ² Married A 5 5 5 7 5 5 7 7 7 7 7 7 7 7		8	10
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White 4 4 4 African Americana 5 9 Other 9 6 Hispanic Origin 1 Hispanic 8 4 Non-Hispanic 4 6 Education 2 High School or Less 4 7 Some Post High School 6 8 College Graduate 4 3 Household Income Bottom 40 Percent Bracket 6 Middle 20 Percent Bracket 7 Top 40 Percent Bracket 4 5 Marital Status 2 Married 4 2	Race ^{1,2}		
African Americana 5 9 Other 9 6 Hispanic Origin¹ Hispanic 8 4 Non-Hispanic 4 6 Education² High School or Less 4 7 Some Post High School 6 8 College Graduate 4 3 Household Income Bottom 40 Percent Bracket 6 6 Middle 20 Percent Bracket 7 7 Top 40 Percent Bracket 4 5 Marital Status² Married 4 2		4	4
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High School or Less 4 7 Some Post High School 6 8 College Graduate 4 3 Household Income Bottom 40 Percent Bracket 6 6 Middle 20 Percent Bracket 7 7 Top 40 Percent Bracket 4 5 Marital Status ² Married 4 2	Education ²		
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College Graduate 4 3 Household Income Bottom 40 Percent Bracket 6 6 Middle 20 Percent Bracket 7 7 Top 40 Percent Bracket 4 5 Marital Status ² Married 4 2		6	8
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Marital Status ² Married 4 2	Middle 20 Percent Bracket	7	
Married 4 2	Top 40 Percent Bracket	4	5
Married 4 2	Marital Status ²		
Not Married ^a 5 8	Married	4	2
	Not Married ^a	5	8

[®]Percentages occasionally may differ by 1 or 2 percentage points from previous reports or the Appendix as a result of rounding, recoding variables and response category distribution.

Electronic Cigarettes

In 2016, 5% of Wisconsin respondents and 5% of U.S. respondents used electronic cigarettes in the past month (2016 Behavioral Risk Factor Surveillance).

2018 Findings

• Four percent of respondents used electronic cigarettes in the past month.

¹demographic difference at p≤0.05 in 2015; ²demographic difference at p≤0.05 in 2018

^a<u>vear</u> difference at p≤0.05 from 2015 to 2018

- Male respondents were more likely to use electronic cigarettes in the past month (6%) compared to female respondents (1%).
- Ten percent of respondents 25 to 34 years old used electronic cigarettes in the past month compared to 1% of those 65 and older or 0% percent of respondents 18 to 24 years old.
- Hispanic respondents were more likely to use electronic cigarettes in the past month (9%) compared to non-Hispanic respondents (3%).
- Six percent of respondents with some post high school education used electronic cigarettes in the past month compared to 3% of those with a college education or 2% of respondents with a high school education or less.
- Unmarried respondents were more likely to use electronic cigarettes in the past month compared to married respondents (5% and 1%, respectively).

- From 2015 to 2018, there was a statistical <u>decrease</u> in the overall percent of respondents who used electronic cigarettes in the past month.
- In 2015 and 2018, male respondents were more likely to use electronic cigarettes in the past month. From 2015 to 2018, there was a noted <u>decrease</u> in the percent of female respondents reporting they used electronic cigarettes in the past month.
- In 2015, respondents 18 to 24 years old were more likely to use electronic cigarettes in the past month. In 2018, respondents 25 to 34 years old were more likely to use electronic cigarettes in the past month. From 2015 to 2018, there was a noted decrease in the percent of respondents 18 to 24 years old reporting they used electronic cigarettes in the past month.
- In 2015 and 2018, race was not a significant variable. From 2015 to 2018, there was a noted <u>decrease</u> in the percent of respondents who were white or African American reporting they used electronic cigarettes in the past month.
- In 2015, Hispanic origin was not a significant variable. In 2018, Hispanic respondents were more likely to use electronic cigarettes in the past month. From 2015 to 2018, there was a noted <u>decrease</u> in the percent of non-Hispanic respondents reporting they used electronic cigarettes in the past month.
- In 2015 and 2018, respondents with some post high school education were more likely to use electronic cigarettes in the past month. From 2015 to 2018, there was a noted <u>decrease</u> in the percent of respondents with some post high school education reporting they used electronic cigarettes in the past month.
- In 2015 and 2018, household income was not a significant variable. From 2015 to 2018, there was a noted decrease in the percent of respondents in the bottom 40 percent household income bracket reporting they used electronic cigarettes in the past month.
- In 2015 and 2018, unmarried respondents were more likely to use electronic cigarettes in the past month. From 2015 to 2018, there was a noted <u>decrease</u> in the percent of married respondents reporting they used electronic cigarettes in the past month.

Table 40. Electronic Cigarettes in Past Month by Demographic Variables for Each Survey Year[®]

Table 40. Electronic Cigarettes in I	Past Month by I	Demographic
	2015	2018
TOTAL ^a	6%	4%
G 1 12		
Gender ^{1,2}	0	
Male	8	6
Female ^a	4	1
$Age^{1,2}$		
18 to 24 ^a	10	0
25 to 34	8	10
35 to 44	5	5
45 to 54	5	
55 to 64	4	3 2
65 and Older	2	1
Race		
White ^a	6	4
African American ^a	5	1
Other	9	4
Hispanic Origin ²		
Hispanic	7	9
Non-Hispanic ^a	6	3
Education ^{1,2}		
High School or Less	4	2
Some Post High School ^a	11	6
College Graduate	3	3
YY 1 11Y		
Household Income	0	2
Bottom 40 Percent Bracket ^a	8	2 5
Middle 20 Percent Bracket	7	5
Top 40 Percent Bracket	5	4
Marital Status ^{1,2}		
Married ^a	4	1
Not Married	7	5
D1:cc1	1 2	

[®]Percentages occasionally may differ by 1 or 2 percentage points from previous reports or the Appendix as a result of rounding, recoding variables and response category distribution.

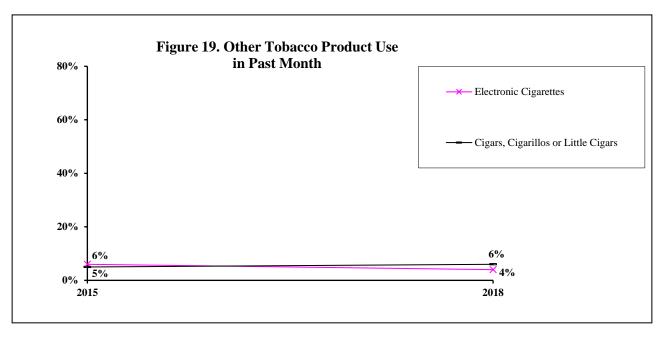
¹demographic difference at p≤0.05 in 2015; ²demographic difference at p≤0.05 in 2018

^a<u>year</u> difference at p≤0.05 from 2015 to 2018

Other Tobacco Products Overall

Year Comparisons

From 2015 to 2018, there was no statistical change in the overall percent of respondents who reported in the past month they used cigars/cigarillos/little cigars. From 2015 to 2018, there was a statistical decrease in the overall percent of respondents who reported in the past month they used electronic cigarettes.



Binge Drinking (Figure 20; Table 41)

KEY FINDINGS: In 2018, 32% of respondents were binge drinkers in the past month. Respondents 25 to 34 years old, with some post high school education, in the top 40 percent household income bracket or unmarried respondents were more likely to have binged at least once in the past month.

> From 2006 to 2018, there was a statistical increase in the overall percent of respondents who reported binge drinking in the past month while from 2015 to 2018, there was no statistical change. Please note: binge drinking definition was 5+ drinks in 2006 and 2009 while it was 4+ *drinks for females and 5+ drinks for males since 2012.*

Binge Drinking in Past Month

Binge drinking definitions vary. Currently, the Centers for Disease Control (CDC) defines binge drinking as four or more drinks per occasion for females and five or more drinks per occasion for males to account for weight and metabolism differences. Previously, the CDC defined binge drinking as five or more drinks at one time, regardless of gender. In 2018, Milwaukee County defined binge drinking as four or more drinks for females and five or more drinks for males.

The Healthy People 2020 goal for adult binge drinking (5 or more drinks) is 24%. (Objective SA-14.3)

In 2016, 25% of Wisconsin respondents reported binge drinking in the past month (females having four or more drinks on one occasion, males having five or more drinks on one occasion). Seventeen percent of U.S. respondents reported binge drinking in the past month (2016 Behavioral Risk Factor Surveillance).

2018 Findings

- Thirty-two percent of all respondents binged in the past month (four or more drinks for females and five or more drinks for males).
- Fifty percent of respondents 25 to 34 years old binged in the past month compared to 24% of those 55 to 64 years old or 11% of respondents 65 and older.
- Respondents with some post high school education were more likely to have binged in the past month (39%) compared to those with a high school education or less (31%) or respondents with a college education (27%).
- Forty-four percent of respondents in the top 40 percent household income bracket binged in the past month compared to 35% of those in the middle 20 percent income bracket or 27% of respondents in the bottom 40 percent household income bracket.
- Unmarried respondents were more likely to have binged in the past month compared to married respondents (35% and 27%, respectively).

2006 to 2018 Year Comparisons

In 2012, 2015 and 2018, the Milwaukee County Health Survey defined binge drinking as four or more drinks per occasion for females and five or more drinks per occasion for males. In 2006 and 2009, the definition was five or more drinks, regardless of gender.

- From 2006 to 2018, there was a statistical increase in the overall percent of respondents who binged.
- In 2006, male respondents were more likely to have binged. In 2018, gender was not a significant variable. From 2006 to 2018, there was a noted increase in the percent of female respondents reporting binge drinking.
- In 2006 and 2018, respondents 25 to 34 years old were more likely to have binged. From 2006 to 2018, there was a noted increase in the percent of respondents across age reporting binge drinking.
- In 2006, respondents who were non-white and non-African American were more likely to have binged. In 2018, race was not a significant variable. From 2006 to 2018, there was a noted increase in the percent of respondents who were white or African American reporting binge drinking.
- In 2006, Hispanic respondents were more likely to have binged. In 2018, Hispanic origin was not a significant variable. From 2006 to 2018, there was a noted increase in the percent of non-Hispanic respondents reporting binge drinking.
- In 2006 and 2018, respondents with some post high school education were more likely to have binged. From 2006 to 2018, there was a noted increase in the percent of respondents across education reporting binge drinking.
- In 2006 and 2018, respondents in the top 40 percent household income bracket were more likely to have binged. From 2006 to 2018, there was a noted increase in the percent of respondents across household income reporting binge drinking.
- In 2006, marital status was not a significant variable. In 2018, unmarried respondents were more likely to have binged. From 2006 to 2018, there was a noted increase in the percent of respondents across marital status reporting binge drinking.

- From 2015 to 2018, there was no statistical change in the overall percent of respondents who binged.
- In 2015, male respondents were more likely to have binged. In 2018, gender was not a significant variable.
- In 2015 and 2018, respondents 25 to 34 years old were more likely to have binged.
- In 2015, respondents with at least some post high school education were more likely to have binged. In 2018, respondents with some post high school education were more likely to have binged. From 2015 to 2018, there was a noted <u>decrease</u> in the percent of respondents with a college education reporting binge drinking.
- In 2015, respondents in the top 60 percent household income bracket were more likely to have binged. In 2018, respondents in the top 40 percent household income bracket were more likely to have binged.
- In 2015, marital status was not a significant variable. In 2018, unmarried respondents were more likely to have binged. From 2015 to 2018, there was a noted <u>decrease</u> in the percent of married respondents reporting binge drinking.

Table 41. Binge Drinking in Past Month by Demographic Variables for Each Survey Year^{©,©}

	2006	2009	2012	2015	2018
TOTAL ^a	19%	20%	31%	32%	32%
Gender ^{1,2,3,4}					
Male	30	28	38	37	33
Female ^a	10	13	25	28	32
Age ^{1,2,3,4,5}					
18 to 24 ^a	22	22	39	35	31
25 to 34 ^a	30	33	47	49	50
35 to 44 ^a	25	24	37	38	41
45 to 54 ^a	18	19	28	30	31
55 to 64 ^a	9	12	22	28	24
65 and Older ^a	4	5	10	8	11
Race ^{1,2}					
White ^a	20	25	33	33	32
African American ^a	14	12	29	30	33
Other	27	22	31	36	30
Hispanic Origin ^{1,2}					
Hispanic	28	28	34	31	28
Non-Hispanic ^a	19	19	31	32	33
Education ^{1,2,4,5}					
High School or Less ^a	15	18	28	26	31
Some Post High School ^a	24	19	34	34	39
College Graduate ^{a,b}	20	24	32	35	27
Household Income ^{1,2,3,4,5}					
Bottom 40 Percent Bracket ^a	16	15	29	31	27
Middle 20 Percent Bracket ^a	21	27	34	40	35
Top 40 Percent Bracket ^a	26	29	39	40	44
Marital Status ⁵					
Married ^{a,b}	19	20	29	33	27
Not Married ^a	20	20	32	32	35

[®]Percentages occasionally may differ by 1 or 2 percentage points from previous reports or the Appendix as a result of rounding, recoding variables and response category distribution.

[®]In 2012, 2015 and 2018, "4 or more drinks on an occasion" for females and "5 or more drinks on an occasion" for males was used; in 2006 and 2009, "5 or more drinks on an occasion" was used for both males and females.

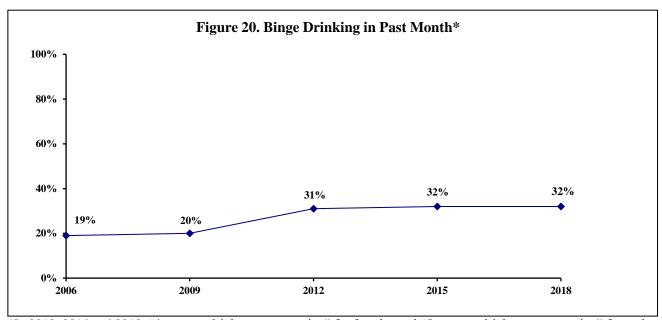
 $[\]frac{^{1}demographic}{2012}, \frac{^{4}demographic}{2012}, \frac{^{4}demographi$

^a<u>year</u> difference at p≤0.05 from 2006 to 2018; ^b<u>year</u> difference at p≤0.05 from 2015 to 2018

Binge Drinking Overall

Year Comparisons

• From 2006 to 2018, there was a statistical increase in the overall percent of respondents who reported binge drinking in the past month while from 2015 to 2018, there was no statistical change. Please note: binge drinking definition was 5+ drinks in 2006 and 2009 while it was 4+ drinks for females and 5+ drinks for males since 2012.



*In 2012, 2015 and 2018, "4 or more drinks on an occasion" for females and "5 or more drinks on an occasion" for males was used; in 2006 and 2009, "5 or more drinks on an occasion" was used for both males and females.

Household Problems (Figure 21; Table 42)

KEY FINDINGS:

In 2018, 2% of respondents reported someone in their household experienced a problem, such as legal, social, personal or physical in connection with drinking alcohol in the past year. Two percent of respondents reported someone in their household experienced a problem in connection with cocaine/heroin/other street drugs. One percent of respondents each reported someone in their household experienced a problem in connection with marijuana or with the misuse of prescription drugs/over-the-counter drugs. Less than one percent of respondents reported someone in their household experienced a problem in connection with gambling.

From 2006 to 2018, there was no statistical change in the overall percent of respondents reporting a household problem in connection with drinking alcohol, as well as from 2015 to 2018. From 2012 to 2018, there was a statistical increase in the overall percent of respondents reporting a household problem with cocaine/heroin/other street drugs, as well as from 2015 to 2018. From 2012 to 2018, there was no statistical change in the overall percent of respondents reporting a household problem with marijuana, the misuse of prescription drugs/over-the-counter drugs or gambling, as well as from 2015 to 2018.

Household Problem Associated with Alcohol in Past Year

2018 Findings

- Two percent of respondents reported they, or someone in their household, experienced some kind of problem, such as legal, social, personal or physical, in connection with drinking alcohol in the past year.
- No demographic comparisons were conducted as a result of the low percent of respondents who reported a household problem with drinking alcohol.

2006 to 2018 Year Comparisons

- From 2006 to 2018, there was no statistical change in the overall percent of respondents reporting they, or someone in their household, experienced some kind of problem, such as legal, social, personal or physical in connection with drinking alcohol in the past year.
- In 2006, there were no statistically significant differences between demographic variables and responses of a household problem with drinking alcohol in the past year.

- From 2015 to 2018, there was no statistical change in the overall percent of respondents reporting a household problem in connection with drinking alcohol in the past year.
- No demographic comparisons across years were conducted as a result of the low percent of respondents who
 reported a household problem with drinking alcohol in both study years.

Table 42. Household Problem Associated with Alcohol in Past Year by Demographic Variables for Each Survey Year[©]

	2006	2009	2012 [©]	2015 [©]	2018 [©]
TOTAL	3%	3%	2%	2%	2%
Household Income ²					
Bottom 40 Percent Bracket	3	3			
Middle 20 Percent Bracket	5	5			
Top 40 Percent Bracket	3	1			
Marital Status					
Married	3	2			
Not Married	4	3			
Children in Household					
Yes	4	3			
No	3	2			

[®]Percentages occasionally may differ by 1 or 2 percentage points from previous reports or the Appendix as a result of rounding, recoding variables and response category distribution.

²Data is not shown as a result of insufficient statistical reliability due to the low percentage reporting this.

¹demographic difference at p≤0.05 in 2006; ²demographic difference at p≤0.05 in 2009; ³demographic difference at p≤0.05 in 2012; ⁴demographic difference at p≤0.05 in 2018

^a<u>year</u> difference at p≤0.05 from 2006 to 2018; ^b<u>year</u> difference at p≤0.05 from 2015 to 2018

Other Household Problems in Past Year

2018 Findings

- Two percent of respondents reported someone in their household experienced a problem in connection with
 cocaine/heroin/other street drugs. One percent of respondents each reported someone in their household
 experienced a problem in connection with marijuana or with the misuse of prescription drugs/over-the-counter
 drugs. Less than one percent of respondents reported someone in their household experienced a problem in
 connection with gambling.
- No demographic comparisons were conducted as a result of the low percent of respondents who reported a problem associated with each of the other household problems in the past year.

2012 to 2018 Year Comparisons

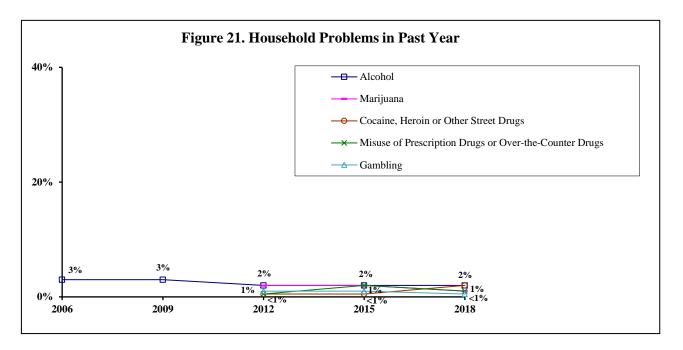
- From 2012 to 2018, there was a statistical increase in the overall percent of respondents reporting they, or someone in their household, experienced some kind of problem, such as legal, social, personal or physical in connection with cocaine/heroin/other street drugs in the past year. From 2012 to 2018, there was no statistical change in the overall percent of respondents reporting a household problem with marijuana, the misuse of prescription drugs/over-the-counter drugs or gambling.
- No demographic comparisons across years were conducted as a result of the low percent of respondents who reported a household problem in connection with each of the other household problems in both study years.

- From 2015 to 2018, there was a statistical increase in the overall percent of respondents reporting they, or someone in their household, experienced some kind of problem in connection with cocaine/heroin/other street drugs in the past year. From 2015 to 2018, there was no statistical change in the overall percent of respondents reporting a household problem in connection with marijuana, the misuse of prescription drugs/over-the-counter drugs or gambling in the past year.
- No demographic comparisons across years were conducted as a result of the low percent of respondents who reported a household problem in connection with each of the other household problems in both study years.

Household Problems Overall

Year Comparisons

• From 2006 to 2018, there was no statistical change in the overall percent of respondents reporting a household problem in connection with drinking alcohol, as well as from 2015 to 2018. From 2012 to 2018, there was a statistical increase in the overall percent of respondents reporting a household problem with cocaine/heroin/other street drugs, as well as from 2015 to 2018. From 2012 to 2018, there was no statistical change in the overall percent of respondents reporting a household problem with marijuana, the misuse of prescription drugs/over-the-counter drugs or gambling, as well as from 2015 to 2018.



Mental Health Status (Figures 22 & 23; Tables 43 & 44)

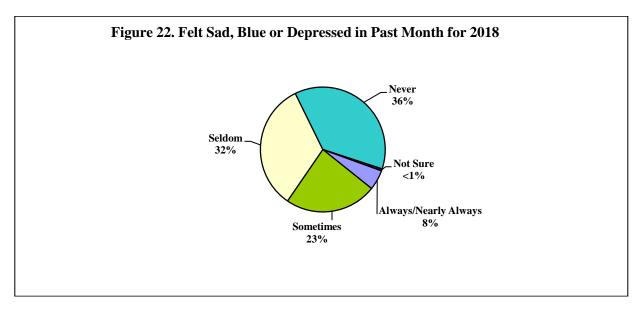
KEY FINDINGS: In 2018, 8% of respondents reported they always or nearly always felt sad, blue or depressed in the past month; respondents who were 25 to 64 years old, non-white and non-African American, with a high school education or less, in the bottom 40 percent household income bracket or in households without children were more likely to report this. Six percent of respondents felt so overwhelmed they considered suicide in the past year; respondents who were 18 to 44 years old, African American, non-Hispanic, with a high school education or less, in the bottom 40 percent household income bracket or unmarried respondents were more likely to report this.

From 2006 to 2018, there was no statistical change in the overall percent of respondents who reported they always or nearly always felt sad/blue/depressed in the past month or they considered suicide in the past year, as well as from 2015 to 2018.

Felt Sad, Blue or Depressed

2018 Findings

• Eight percent of respondents reported they always or nearly always felt sad, blue or depressed in the past month. This represents up to 79,420 residents. Twenty-three percent reported sometimes and the remaining 68% reported seldom or never.



- Twelve percent of respondents 25 to 34 years old, 11% of those 35 to 44 years old, 10% of respondents 45 to 54 years old and 9% of those 55 to 64 years old reported they always or nearly always felt sad, blue or depressed compared to 0% of respondents 18 to 24 years old.
- Respondents who were non-white and non-African American were more likely to report they always or nearly always felt sad, blue or depressed (16%) compared to white respondents (7%) or African American respondents (6%).
- Twelve percent of respondents with a high school education or less reported they always or nearly always felt sad, blue or depressed compared to 9% of those with some post high school education or 4% of respondents with a college education.
- Respondents in households with children were more likely to report they always or nearly always felt sad, blue or depressed (9%) compared to respondents in households without children (6%).

- From 2006 to 2018, there was no statistical change in the overall percent of respondents who reported they always or nearly always felt sad, blue or depressed.
- In 2006, respondents 45 to 54 years old were more likely to report they always or nearly always felt sad, blue or depressed. In 2018, respondents 25 to 64 years old were more likely to report they always or nearly always felt sad, blue or depressed. From 2006 to 2018, there was a noted <u>decrease</u> in the percent of respondents 18 to 24 years old reporting they always or nearly always felt sad, blue or depressed.

- In 2006, African American respondents were more likely to report they always or nearly always felt sad, blue or depressed. In 2018, respondents who were non-white and non-African American were more likely to report they always or nearly always felt sad, blue or depressed. From 2006 to 2018, there was as a noted <u>decrease</u> in the percent of African American respondents reporting they always or nearly always felt sad, blue or depressed.
- In 2006 and 2018, Hispanic origin was not a significant variable. From 2006 to 2018, there was a noted decrease in the percent of Hispanic respondents reporting they always or nearly always felt sad, blue or depressed.
- In 2006 and 2018, respondents with a high school education or less were more likely to report they always or nearly always felt sad, blue or depressed.
- In 2006 and 2018, respondents in the bottom 40 percent household income bracket were more likely to report they always or nearly always felt sad, blue or depressed. From 2006 to 2018, there was a noted increase in the percent of respondents in the middle 20 percent household income bracket reporting they always or nearly always felt sad, blue or depressed.
- In 2006, unmarried respondents were more likely to report they always or nearly always felt sad, blue or depressed. In 2018, marital status was not a significant variable. From 2006 to 2018, there was a noted increase in the percent of married respondents reporting they always or nearly always felt sad, blue or depressed.
- In 2006, respondents in households with children were more likely to report they always or nearly always felt sad, blue or depressed. In 2018, respondents in households without children were more likely to report they always or nearly always felt sad, blue or depressed, with a noted increase since 2006. From 2006 to 2018, there was a noted decrease in the percent of respondents in households with children reporting they always or nearly always felt sad, blue or depressed.

- From 2015 to 2018, there was no statistical change in the overall percent of respondents who reported they always or nearly always felt sad, blue or depressed.
- In 2015, female respondents were more likely to report they always or nearly always felt sad, blue or depressed. In 2018, gender was not a significant variable.
- In 2015, respondents 35 to 64 years old were more likely to report they always or nearly always felt sad, blue or depressed. In 2018, respondents 25 to 64 years old were more likely to report they always or nearly always felt sad, blue or depressed. From 2015 to 2018, there was a noted <u>decrease</u> in the percent of respondents 18 to 24 years old and a noted increase in the percent of respondents 25 to 34 years old reporting they always or nearly always felt sad, blue or depressed.
- In 2015, African American respondents were more likely to report they always or nearly always felt sad, blue
 or depressed. In 2018, respondents who were non-white and non-African American were more likely to report
 they always or nearly always felt sad, blue or depressed, with a noted increase since 2015. From 2015 to 2018,
 there was a noted decrease in the percent of African American respondents reporting they always or nearly
 always felt sad, blue or depressed.
- In 2015, respondent with some post high school education or less were more likely to report they always felt sad, blue or depressed. In 2018, respondents with a high school education or less were more likely to report they always or nearly always felt sad, blue or depressed.
- In 2015 and 2018, respondents in the bottom 40 percent household income bracket were more likely to report they always or nearly always felt sad, blue or depressed.

- In 2015, unmarried respondents were more likely to report they always or nearly always felt sad, blue or depressed. In 2018, marital status was not a significant variable.
- In 2015 and 2018, respondents in households without children were more likely to report they always or nearly always felt sad, blue or depressed.

Table 43. Always/Nearly Always Felt Sad, Blue or Depressed in Past Month by Demographic Variables for Each Survey Year[©]

-	2006	2009	2012	2015	2018
TOTAL	8%	8%	7%	7%	8%
Gender ⁴					
Male	7	8	6	6	7
Female	9	8	8	9	9
Age ^{1,2,3,4,5}					
18 to 24 ^{a,b}	8	10	7	6	0
25 to 34 ^b	9	5	7	3	12
35 to 44	8	9	8	9	11
45 to 54	11	11	11	10	10
55 to 64	7	10	8	11	9
65 and Older	5	3	3	6	5
Race ^{1,2,3,4,5}					
White	6	5	5	7	7
African American ^{a,b}	14	10	10	10	6
Other ^b	10	15	12	6	16
Hispanic Origin ³					
Hispanic ^a	11	12	14	5	5
Non-Hispanic	8	7	7	8	8
Education ^{1,2,3,4,5}					
High School or Less	13	10	13	9	12
Some Post High School	7	8	6	8	9
College Graduate	3	3	2	5	4
Household Income ^{1,2,3,4,5}					
Bottom 40 Percent Bracket	12	12	13	11	12
Middle 20 Percent Bracket ^a	3	6	<1	4	7
Top 40 Percent Bracket	2	<1	2	4	4
Marital Status ^{1,2,3,4}					
Married ^a	5	3	3	5	7
Not Married	10	11	10	9	8
Children in Household ^{1,4,5}					
Yes ^a	9	7	7	6	6
No^a	7	8	8	8	9

[®]Percentages occasionally may differ by 1 or 2 percentage points from previous reports or the Appendix as a result of rounding, recoding variables and response category distribution.

 $^{^{1}}$ <u>demographic</u> difference at p≤0.05 in 2006; 2 <u>demographic</u> difference at p≤0.05 in 2009; 3 <u>demographic</u> difference at p≤0.05 in 2012; 4 <u>demographic</u> difference at p≤0.05 in 2018

^a<u>year</u> difference at p≤0.05 from 2006 to 2018; ^b<u>year</u> difference at p≤0.05 from 2015 to 2018

Considered Suicide

All respondents were asked if they have felt so overwhelmed that they considered suicide in the past year. The survey did not ask how seriously, how often or how recently suicide was considered.

2018 Findings

- Six percent of respondents reported they felt so overwhelmed in the past year that they considered suicide. This represents up to 64,980 residents who may have considered suicide in the past year.
- Nine percent of respondents 18 to 44 years old reported they felt so overwhelmed in the past year they considered suicide compared to 3% of those 55 to 64 years old or 2% of respondents 65 and older.
- African American respondents were more likely to report they considered suicide (9%) compared to respondents who were non-white and non-African American (6%) or white respondents (5%).
- Non-Hispanic respondents were more likely to report they considered suicide (7%) compared to Hispanic respondents (2%).
- Ten percent of respondents with a high school education or less reported they considered suicide compared to 7% of those with some post high school education or 3% of respondents with a college education.
- Ten percent of respondents in the bottom 40 percent household income bracket reported they considered suicide compared to 7% of those in the middle 20 percent income bracket or 2% of respondents in the top 40 percent household income bracket.
- Unmarried respondents were more likely to report they considered suicide compared to married respondents (8% and 4%, respectively).

- From 2006 to 2018, there was no statistical change in the overall percent of respondents who reported they considered suicide in the past year.
- In 2006, female respondents were more likely to report they considered suicide. In 2018, gender was not a significant variable.
- In 2006, respondents 18 to 54 years old were more likely to report they considered suicide. In 2018, respondents 18 to 44 years old were more likely to report they considered suicide.
- In 2006 and 2018, African American respondents were more likely to report they considered suicide.
- In 2006, Hispanic origin was not a significant variable. In 2018, non-Hispanic respondents were more likely to report they considered suicide.
- In 2006 and 2018, respondents with a high school education or less were more likely to report they considered suicide.
- In 2006 and 2018, respondents in the bottom 40 percent household income bracket were more likely to report they considered suicide. From 2006 to 2018, there was a noted increase in the percent of respondents in the middle 20 percent household income bracket reporting they considered suicide.
- In 2006 and 2018, unmarried respondents were more likely to report they considered suicide.

• In 2006, respondents in households with children were more likely to report they considered suicide. In 2018, the presence of children in the household was not a significant variable.

- From 2015 to 2018, there was no statistical change in the overall percent of respondents who reported they considered suicide in the past year.
- In 2015, male respondents were more likely to report they considered suicide. In 2018, gender was not a significant variable.
- In 2015, respondents 18 to 34 years old were more likely to report they considered suicide. In 2018, respondents 18 to 44 years old were more likely to report they considered suicide. From 2015 to 2018, there was a noted increase in the percent of respondents 35 to 44 years old reporting they considered suicide.
- In 2015, race was not a significant variable. In 2018, African American respondents were more likely to report they considered suicide, with a noted increase since 2015.
- In 2015, Hispanic respondents were more likely to report they considered suicide. In 2018, non-Hispanic respondents were more likely to report they considered suicide. From 2015 to 2018, there was a noted <u>decrease</u> in the percent of Hispanic respondents reporting they considered suicide.
- In 2015, education was not a significant variable. In 2018, respondents with a high school education or less were more likely to report they considered suicide, with a noted increase since 2015. From 2015 to 2018, there was a noted <u>decrease</u> in the percent of respondents with a college education reporting they considered suicide.
- In 2015 and 2018, respondents in the bottom 40 percent household income bracket were more likely to report they considered suicide.
- In 2015 and 2018, unmarried respondents were more likely to report they considered suicide.

Table 44. Considered Suicide in Past Year by Demographic Variables for Each Survey Year[®]

Table 44. Considered Suicide in Pasi	2006	2009	2012	2015	2018
TOTAL	6%	5%	5%	6%	6%
Gender ^{1,4}					
Male	5	6	5	8	6
Female	7	5	5	5	7
Age ^{1,2,3,4,5}					
18 to 24	7	8	11	9	9
25 to 34	7	3	4	9	9
35 to 44 ^b	7	6	5	5	9
45 to 54	7	7	6	7	6
55 to 64	4	6	3	6	3
65 and Older	2	2	1	1	2
Race ^{1,2,3,5}					
White	5	3	3	6	5
African American ^b	9	8	6	6	9
Other	7	6	9	8	6
Hispanic Origin ^{4,5}					
Hispanic ^b	7	8	5	11	2
Non-Hispanic	6	5	5	6	7
Education ^{1,2,5}					
High School or Less ^b	7	6	6	6	10
Some Post High School	6	6	5	8	7
College Graduate ^b	4	2	4	5	3
Household Income ^{1,2,3,4,5}					
Bottom 40 Percent Bracket	8	8	8	9	10
Middle 20 Percent Bracket ^a	3	3	<1	7	7
Top 40 Percent Bracket	3	<1	2	4	2
Marital Status ^{1,2,3,4,5}					
Married	4	2	2	4	4
Not Married	7	7	7	8	8
Children in Household ¹					
Yes	7	4	4	6	7
No	5	6	5	7	6

[®]Percentages occasionally may differ by 1 or 2 percentage points from previous reports or the Appendix as a result of rounding, recoding variables and response category distribution.

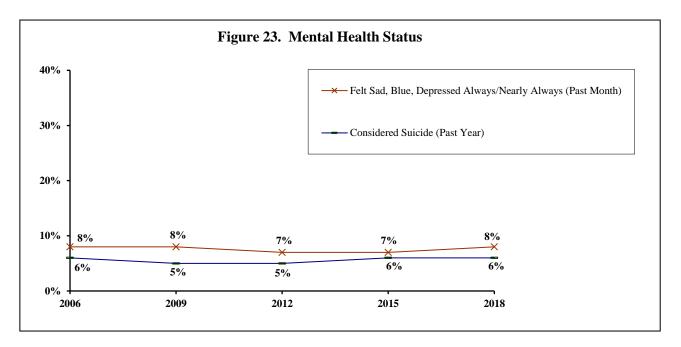
 $^{^{1}}$ <u>demographic</u> difference at p≤0.05 in 2006; 2 <u>demographic</u> difference at p≤0.05 in 2009; 3 <u>demographic</u> difference at p≤0.05 in 2012; 4 <u>demographic</u> difference at p≤0.05 in 2018

^a<u>year</u> difference at p≤0.05 from 2006 to 2018; ^b<u>year</u> difference at p≤0.05 from 2015 to 2018

Mental Health Status Overall

Year Comparisons

From 2006 to 2018, there was no statistical change in the overall percent of respondents who reported they always or nearly always felt sad/blue/depressed in the past month or they considered suicide in the past year, as well as from 2015 to 2018.



Personal Safety Issues (Figure 24; Tables 45 - 47)

KEY FINDINGS: In 2018, 9% of respondents reported someone made them afraid for their personal safety in the past year; respondents who were male, 18 to 24 years old, African American, Hispanic, with a high school education or less, in the bottom 40 percent household income bracket or unmarried respondents were more likely to report this. Nine percent of respondents reported they had been pushed, kicked, slapped or hit in the past year; respondents who were male, 18 to 24 years old, non-white and non-African American, Hispanic, with a high school education or less, in the bottom 40 percent household income bracket or unmarried respondents were more likely to report this. A total of 14% reported at least one of these two situations; respondents who were male, 18 to 24 years old, non-white and non-African American, Hispanic, with some post high school education or less, in the bottom 40 percent household income bracket or unmarried respondents were more likely to report this.

> From 2006 to 2018, there was no statistical change in the overall percent of respondents reporting they were afraid for their personal safety while from 2015 to 2018, there was a statistical increase. From 2006 to 2018, there was a statistical increase in the overall percent of respondents reporting they were pushed, kicked, slapped or hit, as well as from 2015 to 2018. From 2006 to 2018, there was no statistical change in the overall percent of respondents reporting at least one of the two personal safety issues while from 2015 to 2018, there was a statistical increase.

Afraid for Personal Safety

2018 Findings

- Nine percent of respondents reported someone made them afraid for their personal safety in the past year.
- Male respondents were more likely to report someone made them afraid for their personal safety in the past year (12%) compared to female respondents (6%).
- Twenty-one percent of respondents 18 to 24 years old reported someone made them afraid for their personal safety in the past year compared to 6% of those 35 to 44 years old or 3% of respondents 65 and older.
- African American respondents were more likely to report someone made them afraid for their personal safety in the past year (16%) compared to non-African American respondents (6%).
- Hispanic respondents were more likely to report someone made them afraid for their personal safety in the past year (37%) compared to non-Hispanic respondents (6%).
- Thirteen percent of respondents with a high school education or less reported someone made them afraid for their personal safety in the past year compared to 9% of those with some post high school education or 6% of respondents with a college education.
- Thirteen percent of respondents in the bottom 40 percent household income bracket reported someone made them afraid for their personal safety in the past year compared to 8% of those in the middle 20 percent income bracket or 7% of respondents in the top 40 percent household income bracket.
- Unmarried respondents were more likely to report someone made them afraid for their personal safety in the past year compared to married respondents (10% and 7%, respectively).
 - Of the 117 respondents, a friend was the person most often reported who made them afraid (41%) followed by a stranger (33%).

- From 2006 to 2018, there was no statistical change in the overall percent of respondents who reported they were afraid for their personal safety.
- In 2006, gender was not a significant variable. In 2018, male respondents were more likely to report they were afraid for their personal safety. From 2006 to 2018, there was a noted <u>decrease</u> in the percent of female respondents reporting they were afraid for their personal safety.
- In 2006 and 2018, respondents 18 to 24 years old were more likely to report they were afraid for their personal safety. From 2006 to 2018, there was a noted <u>decrease</u> in the percent of respondents 35 to 44 years old reporting they were afraid for their personal safety.
- In 2006, race was not a significant variable. In 2018, African American respondents were more likely to report they were afraid for their personal safety, with a noted increase since 2006. From 2006 to 2018, there was a noted <u>decrease</u> in the percent of non-African American respondents reporting they were afraid for their personal safety.

- In 2006, Hispanic origin was not a significant variable. In 2018, Hispanic respondents were more likely to report they were afraid for their personal safety, with a noted increase since 2006. From 2006 to 2018, there was a noted <u>decrease</u> in the percent of non-Hispanic respondents reporting they were afraid for their personal safety.
- In 2006, education was not a significant variable. In 2018, respondents with a high school education or less were more likely to report they were afraid for their personal safety, with a noted increase since 2006. From 2006 to 2018, there was a noted <u>decrease</u> in the percent of respondents with a college education reporting they were afraid for their personal safety.
- In 2006 and 2018, respondents in the bottom 40 percent household income bracket were more likely to report they were afraid for their personal safety.
- In 2006 and 2018, unmarried respondents were more likely to report they were afraid for their personal safety. From 2006 to 2018, there was a noted <u>decrease</u> in the percent of unmarried respondents reporting they were afraid for their personal safety.

- From 2015 to 2018, there was a statistical increase in the overall percent of respondents who reported they were afraid for their personal safety.
- In 2015, gender was not a significant variable. In 2018, male respondents were more likely to report they were afraid for their personal safety, with a noted increase since 2015.
- In 2015, respondents 25 to 34 years old were more likely to report they were afraid for their personal safety. In 2018, respondents 18 to 24 years old were more likely to report they were afraid for their personal safety, with a noted increase since 2015.
- In 2015, race was not a significant variable. In 2018, African American respondents were more likely to report they were afraid for their personal safety, with a noted increase since 2015.
- In 2015, Hispanic origin was not a significant variable. In 2018, Hispanic respondents were more likely to report they were afraid for their personal safety, with a noted increase since 2015.
- In 2015, respondents with some post high school education were more likely to report they were afraid for their personal safety. In 2018, respondents with a high school education or less were more likely to report they were afraid for their personal safety, with a noted increase since 2015.
- In 2015, household income was not a significant variable. In 2018, respondents in the bottom 40 percent household income bracket were more likely to report they were afraid for their personal safety, with a noted increase since 2015.
- In 2015, marital status was not a significant variable. In 2018, unmarried respondents were more likely to report they were afraid for their personal safety, with a noted increase since 2015.

Table 45. Afraid for Personal Safety in Past Year by Demographic Variables for Each Survey Year[®]

	2006	2009	2012	2015	2018
TOTAL ^b	10%	9%	7%	6%	9%
Gender ⁵					
Male ^b	11	9	6	7	12
Female ^a	9	9	7	6	6
Age ^{1,2,4,5}					
18 to 24 ^b	16	9	6	4	21
25 to 34	10	10	5	10	9
35 to 44 ^a	10	9	9	5	6
45 to 54	13	12	8	7	9
55 to 64	9	11	9	8	8
65 and Older	3	5	4	4	3
Race ⁵					
White ^a	9	9	7	7	6
African American ^{a,b}	11	9	6	5	16
Other ^a	13	6	6	8	6
Hispanic Origin ⁵					
Hispanic ^{a,b}	10	9	4	6	37
Non-Hispanic ^a	10	9	7	6	6
Education ^{3,4,5}					
High School or Less ^{a,b}	9	9	5	3	13
Some Post High School	11	11	9	9	9
College Graduate ^a	11	8	7	7	6
Household Income ^{1,5}					
Bottom 40 Percent Bracket ^b	12	10	8	8	13
Middle 20 Percent Bracket	8	8	7	7	8
Top 40 Percent Bracket	10	7	6	7	7
Marital Status ^{1,2,5}					
Married	6	7	6	6	7
Not Married ^{a,b}	13	11	7	7	10

[®]Percentages occasionally may differ by 1 or 2 percentage points from previous reports or the Appendix as a result of rounding, recoding variables and response category distribution.

Pushed, Kicked, Slapped or Hit

2018 Findings

- Nine percent of respondents reported they were pushed, kicked, slapped or hit in the past year.
- Male respondents were more likely to report they were pushed, kicked, slapped or hit in the past year (12%) compared to female respondents (7%).

¹demographic difference at p≤0.05 in 2006; ²demographic difference at p≤0.05 in 2009; ³demographic difference at p≤0.05 in 2012; ⁴demographic difference at p≤0.05 in 2018

^ayear difference at p≤0.05 from 2006 to 2018; ^byear difference at p≤0.05 from 2015 to 2018

- Thirty-nine percent of respondents 18 to 24 years old reported they were pushed, kicked, slapped or hit in the past year compared to 0% of respondents 65 and older.
- Respondents who were non-white and non-African American were more likely to report they were pushed, kicked, slapped or hit in the past year (34%) compared to African American respondents (12%) or white respondents (2%).
- Hispanic respondents were more likely to report they were pushed, kicked, slapped or hit in the past year (33%) compared to non-Hispanic respondents (7%).
- Fourteen percent of respondents with a high school education or less reported they were pushed, kicked, slapped or hit compared to 11% of those with some post high school education or 3% of respondents with a college education.
- Thirteen percent of respondents in the bottom 40 percent household income bracket reported they were pushed, kicked, slapped or hit compared to 3% of those in the middle 20 percent income bracket or 2% of respondents in the top 40 percent household income bracket.
- Unmarried respondents were more likely to report they were pushed, kicked, slapped or hit compared to married respondents (13% and 2%, respectively).
 - o Of the 123 respondents, 39% reported a stranger was the person most often reported who pushed, kicked, slapped or hit them followed by 36% reporting a friend.

- From 2006 to 2018, there was a statistical increase in the overall percent of respondents who reported they were pushed, kicked, slapped or hit.
- In 2006 and 2018, male respondents were more likely to report they were pushed, kicked, slapped or hit. From 2006 to 2018, there was a noted increase in the percent of respondents across gender reporting they were pushed, kicked, slapped or hit.
- In 2006 and 2018, respondents 18 to 24 years old were more likely to report they were pushed, kicked, slapped or hit. From 2006 to 2018, there was a noted increase in the percent of respondents 18 to 24 years old or 35 to 44 years old reporting they were pushed, kicked, slapped or hit.
- In 2006, non-white respondents were more likely to report they were pushed, kicked, slapped or hit. In 2018, respondents who were non-white and non-African American were more likely to report they were pushed, kicked, slapped or hit, with a noted increase since 2006. From 2006 to 2018, there was a noted decrease in the percent of white respondents reporting they were pushed, kicked, slapped or hit.
- In 2006 and 2018, Hispanic respondents were more likely to report they were pushed, kicked, slapped or hit. From 2006 to 2018, there was a noted increase in the percent of respondents across Hispanic origin reporting they were pushed, kicked, slapped or hit.
- In 2006 and 2018, respondents with a high school education or less were more likely to report they were pushed, kicked, slapped or hit. From 2006 to 2018, there was a noted increase in the percent of respondents with some post high school education or less reporting they were pushed, kicked, slapped or hit.
- In 2006 and 2018, respondents in the bottom 40 percent household income bracket were more likely to report they were pushed, kicked, slapped or hit. From 2006 to 2018, there was a noted increase in the percent of respondents in the bottom 40 percent household income bracket reporting they were pushed, kicked, slapped or hit.

• In 2006 and 2018, unmarried respondents were more likely to report they were pushed, kicked, slapped or hit. From 2006 to 2018, there was a noted increase in the percent of unmarried respondents reporting they were pushed, kicked, slapped or hit.

- From 2015 to 2018, there was a statistical increase in the overall percent of respondents who reported they were pushed, kicked, slapped or hit.
- In 2015 and 2018, male respondents were more likely to report they were pushed, kicked, slapped or hit. From 2015 to 2018, there was a noted increase in the percent of respondents across gender reporting they were pushed, kicked, slapped or hit.
- In 2015, respondents 25 to 34 years old were more likely to report they were pushed, kicked, slapped or hit. In 2018, respondents 18 to 24 years old were more likely to report they were pushed, kicked, slapped or hit, with a noted increase since 2015. From 2015 to 2018, there was a noted increase in the percent of respondents 35 to 44 years old reporting they were pushed, kicked, slapped or hit.
- In 2015 and 2018, respondents who were non-white and non-African American were more likely to report they
 were pushed, kicked, slapped or hit. From 2015 to 2018, there was a noted increase in the percent of non-white
 respondents reporting they were pushed, kicked, slapped or hit.
- In 2015 and 2018, Hispanic respondents were more likely to report they were pushed, kicked, slapped or hit. From 2015 to 2018, there was a noted increase in the percent of respondents across Hispanic origin reporting they were pushed, kicked, slapped or hit.
- In 2015, respondents with a college education were more likely to report they were pushed, kicked, slapped or hit. In 2018, respondents with a high school education or less were more likely to report they were pushed, kicked, slapped or hit. From 2015 to 2018, there was a noted increase in the percent of respondents with some post high school education or less reporting they were pushed, kicked, slapped or hit.
- In 2015, respondents in the top 40 percent household income bracket were more likely to report they were pushed, kicked, slapped or hit. In 2018, respondents in the bottom 40 percent household income bracket were more likely to report they were pushed, kicked, slapped or hit, with a noted increase since 2015. From 2015 to 2018, there was a noted decrease in the percent of respondents in the top 40 percent household income bracket reporting they were pushed, kicked, slapped or hit.
- In 2015, marital status was not a significant variable. In 2018, unmarried respondents were more likely to report they were pushed, kicked, slapped or hit, with a noted increase since 2015.

Table 46. Someone Pushed, Kicked, Slapped or Hit Respondent in Past Year by Demographic Variables for Each

Survey Year[®]

Survey Year [©]					
	2006	2009	2012	2015	2018
TOTAL ^{a,b}	5%	6%	4%	3%	9%
Gender ^{1,2,3,4,5}					
Male ^{a,b}	6	8	6	5	12
Female ^{a,b}	5	4	2	1	7
Age ^{1,2,3,4,5}					
18 to 24 ^{a,b}	15	10	7	3	39
25 to 34	6	7	4	6	3
35 to 44 ^{a,b}	4	6	4	2	11
45 to 54	5	6	3	4	3
55 to 64	2	5	5	3	3
65 and Older	<1	<1	<1	<1	0
Race ^{1,4,5}					
White ^a	4	5	4	3	2
African American ^b	10	6	5	2	12
Other ^{a,b}	10	9	1	10	34
Hispanic Origin ^{1,4,5}					
Hispanic ^{a,b}	9	5	2	10	33
Non-Hispanic ^{a,b}	5	6	4	2	7
Education ^{1,2,4,5}					
High School or Less ^{a,b}	7	8	4	2	14
Some Post High School ^{a,b}	5	6	5	2 3	11
College Graduate	4	2	3	5	3
Household Income ^{1,4,5}					
Bottom 40 Percent Bracket ^{a,b}	7	6	5	3	13
Middle 20 Percent Bracket	3	6	4	3	3
Top 40 Percent Bracket ^b	4	5	3	5	2
Marital Status ^{1,2,3,5}					
Married	3	3	2	3	2
Not Married ^{a,b}	7	7	5	3	13

[®]Percentages occasionally may differ by 1 or 2 percentage points from previous reports or the Appendix as a result of rounding, recoding variables and response category distribution.

Combined Personal Safety Issues

2018 Findings

- A total of 14% of all respondents reported at least one of the two personal safety issues.
- Male respondents were more likely to report at least one of the two personal safety issues (17%) compared to female respondents (12%).

 $^{^{1}}$ <u>demographic</u> difference at p≤0.05 in 2006; 2 <u>demographic</u> difference at p≤0.05 in 2009; 3 <u>demographic</u> difference at p≤0.05 in 2012; 4 <u>demographic</u> difference at p≤0.05 in 2018

^ayear difference at p≤0.05 from 2006 to 2018; ^byear difference at p≤0.05 from 2015 to 2018

- Thirty-nine percent of respondents 18 to 24 years old reported at least one of the two personal safety issues compared to 8% of those 55 to 64 years old or 3% of respondents 65 and older.
- Respondents who were non-white and non-African American were more likely to report at least one of the two personal safety issues (37%) compared to African American respondents (17%) or white respondents (7%).
- Hispanic respondents were more likely to report at least one of the two personal safety issues (37%) compared to non-Hispanic respondents (12%).
- Seventeen percent of respondents with some post high school education or less reported at least one of the two personal safety issues compared to 9% of respondents with some post high school education.
- Eighteen percent of respondents in the bottom 40 percent household income bracket reported at least one of the two personal safety issues compared to 9% of those in the middle 20 percent income bracket or 8% of respondents with a high school education or less.
- Unmarried respondents were more likely to report at least one of the personal safety issues compared to married respondents (17% and 8%, respectively).

2006 to 2018 Year Comparisons

- From 2006 to 2018, there was no statistical change in the overall percent of respondents who reported at least one of the two personal safety issues.
- In 2006 and 2018, male respondents were more likely to report at least one of the personal safety issues.
- In 2006 and 2018, respondents 18 to 24 years old were more likely to report at least one of the personal safety issues. From 2006 to 2018, there was a noted increase in the percent of respondents 18 to 24 years old and a noted decrease in the percent of respondents 45 to 54 years old reporting at least one of the personal safety issues.
- In 2006, non-white respondents were more likely to report at least one of the personal safety issues. In 2018, respondents who were non-white and non-African American were more likely to report at least one of the personal safety issues, with a noted increase since 2006. From 2006 to 2018, there was a noted decrease in the percent of white respondents reporting at least one of the personal safety issues.
- In 2006, Hispanic origin was not a significant variable. In 2018, Hispanic respondents were more likely to report at least one of the personal safety issues, with a noted increase since 2006.
- In 2006, education was not a significant variable. In 2018, respondents with some post high school education or less were more likely to report at least one of the personal safety issues, with a noted increase since 2006. From 2006 to 2018, there was a noted <u>decrease</u> in the percent of respondents with a college education reporting at least one of the personal safety issues.
- In 2006 and 2018, respondents in the bottom 40 percent household income bracket were more likely to report at least one of the personal safety issues.
- In 2006 and 2018, unmarried respondents were more likely to report at least one of the personal safety issues.

2015 to 2018 Year Comparisons

• From 2015 to 2018, there was a statistical increase in the overall percent of respondents who reported at least one of the two personal safety issues.

- In 2015, gender was not a significant variable. In 2018, male respondents were more likely to report at least one of the personal safety issues. From 2015 to 2018, there was a noted increase in the percent of respondents across gender reporting at least one of the personal safety issues.
- In 2015, respondents 25 to 34 years old were more likely to report at least one of the personal safety issues. In 2018, respondents 18 to 24 years old were more likely to report at least one of the personal safety issues, with a noted increase since 2015. From 2015 to 2018, there was a noted increase in the percent of respondents 35 to 44 years old reporting at least one of the personal safety issues.
- In 2015 and 2018, respondents who were non-white and non-African American were more likely to report at least one of the personal safety issues. From 2015 to 2018, there was a noted increase in the percent of non-white respondents reporting at least one of the personal safety issues.
- In 2015, Hispanic origin was not a significant variable. In 2018, Hispanic respondents were more likely to report at least one of the personal safety issues. From 2015 to 2018, there was a noted increase in the percent of respondents across Hispanic origin reporting at least one of the personal safety issues.
- In 2015, respondents with at least some post high school education were more likely to report at least one of the personal safety issues. In 2018, respondents with some post high school education or less were more likely to report at least one of the personal safety issues, with a noted increase since 2015.
- In 2015, household income was not a significant variable. In 2018, respondents in the bottom 40 percent household income bracket were more likely to report at least one of the personal safety issues, with a noted increase since 2015.
- In 2015, marital status was not a significant variable. In 2018, unmarried respondents were more likely to report at least one of the personal safety issues, with a noted increase since 2015.

Table 47. At Least One of the Personal Safety Issues in Past Year by Demographic Variables for Each Survey Year[®]

Table 47. 7tt Least One of the Ferson	2006	2009	2012	2015	2018	
TOTAL ^b	13%	12%	9%	8%	14%	
Gender ^{1,2,5}						
Male ^b	14	14	9	9	17	
Female ^b	11	10	9	7	12	
Age ^{1,2,3,4,5}						
18 to 24 ^{a,b}	23	14	11	4	39	
25 to 34	14	13	8	13	13	
35 to 44 ^b	12	13	10	7	13	
45 to 54 ^a	16	14	9	9	10	
55 to 64	10	13	11	9	8	
65 and Older	3	5	4	4	3	
Race ^{1,4,5}						
White ^a	11	12	9	8	7	
African American ^b	16	12	9	6	17	
Other ^{a,b}	17	14	7	15	37	
Hispanic Origin ⁵						
Hispanic ^{a,b}	16	12	5	11	37	
Non-Hispanic ^b	12	12	9	8	12	
Education ^{3,4,5}						
High School or Less ^{a,b}	12	13	7	4	17	
Some Post High School ^{a,b}	12	13	12	10	17	
College Graduate ^a	13	10	8	10	9	
Household Income ^{1,5}						
Bottom 40 Percent Bracket ^b	15	13	11	9	18	
Middle 20 Percent Bracket	9	12	10	9	9	
Top 40 Percent Bracket	11	9	7	9	8	
Marital Status ^{1,2,3,5}						
Married	7	8	6	8	8	
Not Married ^b	16	14	10	8	17	

[®]Percentages occasionally may differ by 1 or 2 percentage points from previous reports or the Appendix as a result of rounding, recoding variables and response category distribution.

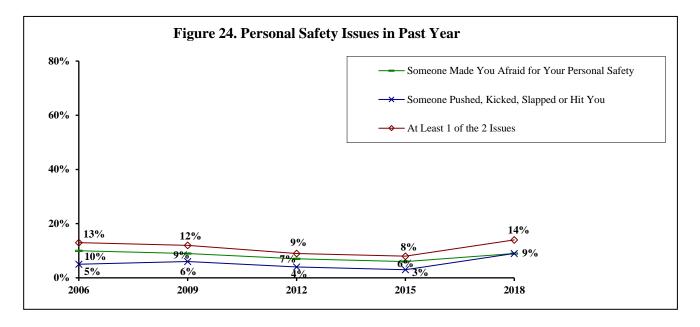
¹demographic difference at p≤0.05 in 2006; ²demographic difference at p≤0.05 in 2009; ³demographic difference at p≤0.05 in 2012; ⁴demographic difference at p≤0.05 in 2018

^ayear difference at p≤0.05 from 2006 to 2018; ^byear difference at p≤0.05 from 2015 to 2018

Personal Safety Issues Overall

Year Comparisons

From 2006 to 2018, there was no statistical change in the overall percent of respondents reporting they were afraid for their personal safety while from 2015 to 2018, there was a statistical increase. From 2006 to 2018, there was a statistical increase in the overall percent of respondents reporting they were pushed, kicked, slapped or hit, as well as from 2015 to 2018. From 2006 to 2018, there was no statistical change in the overall percent of respondents reporting at least one of the two personal safety issues while from 2015 to 2018, there was a statistical increase.



Children in Household (Figures 25 & 26; Tables 48 – 59)

KEY FINDINGS: In 2018, a random child was selected for the respondent to talk about the child's health and behavior. Ninety-five percent of respondents reported they have one or more persons they think of as their child's personal doctor or nurse, with 93% reporting their child visited their personal doctor or nurse for preventive care during the past year. Six percent reported there was a time in the past year their child did not receive the dental care needed while 5% percent reported their child was not able to visit a specialist they needed to see. Three percent reported their child did not receive the medical care needed. Seventeen percent of respondents reported their child currently had asthma. Nine percent of respondents reported their child was seldom or never safe in their community. Eleven percent of respondents with a child who was 2 years old or younger reported when their child was an infant, he/she slept in bed with them or another person. Thirtyeight percent of respondents reported their child has two or fewer hours of screen time on an average school/week day. Sixty-one percent of respondents reported their child did not drink soda or pop in the past week, excluding diet soda. Fifty-eight percent of respondents reported their 5 to 17 year old child was physically active five times a week for 60 minutes. Five percent of respondents reported their 5 to 17 year old child always or nearly always felt unhappy, sad or depressed in the past six months. Sixteen percent reported their 5 to 17 year old child experienced some form of bullying in the past year; 13% reported verbal bullying, 6% reported physical bullying and 3% reported cyber bullying.

> From 2012 to 2018, there was a statistical increase in the overall percent of respondents reporting their child has a personal doctor or nurse, as well as from 2015 to 2018. From 2012

to 2018, there was no statistical change in the overall percent of respondents reporting their child visited their personal doctor/nurse for preventive care, as well as from 2015 to 2018. From 2012 to 2018, there was no statistical change in the overall percent of respondents reporting their child had an unmet medical need or unmet dental need, as well as from 2015 to 2018. From 2012 to 2018, there was a statistical increase in the overall percent of respondents reporting their child was unable to see a specialist when needed, as well as from 2015 to 2018. From 2012 to 2018, there was a statistical increase in the overall percent of respondents who reported their child had asthma or their child was seldom/never safe in their community, as well as from 2015 to 2018. From 2012 to 2018, there was no statistical change in the overall percent of respondents who reported when their child was an infant, he/she slept in bed with them or another person, as well as from 2015 to 2018. From 2012 to 2018, there was a statistical decrease in the overall percent of respondents who reported their 5 to 17 year old child was physically active five times a week for at least 60 minutes, as well as from 2015 to 2018. From 2012 to 2018, there was no statistical change in the overall percent of respondents who reported their 5 to 17 year old child always or nearly always felt unhappy/sad/depressed, as well as from 2015 to 2018. From 2012 to 2018, there was no statistical change in the overall percent of respondents who reported their child was bullied or in the type of bullying, as well as from 2015 to 2018.

Children in Household

2018 Findings

- Thirty-three percent of respondents reported they have a child under the age of 18 living in their household. Seventy-six percent of these respondents reported they make the health care decisions for their child(ren). For this section, a random child was selected to discuss that particular child's health and behavior.
- Sixty-eight percent of the children selected were 12 or younger. Forty-three percent were boys. Of these households, 59% were in the bottom 60 percent household income bracket and 52% were married.

Child's Personal Doctor

2018 Findings

Of the 325 respondents who make health care decisions for their child...

- Ninety-five percent of respondents reported they have one or more persons they think of as their child's personal doctor or nurse who knows their child well and is familiar with their child's health history.
- There were no statistically significant differences between demographic variables and responses of they have one or more persons they think of as their child's personal doctor or nurse.

- From 2012 to 2018, there was a statistical increase in the overall percent of respondents reporting their child had a personal doctor or nurse.
- In 2012 and 2018, child's gender was not a significant variable. From 2012 to 2018, there was a noted increase in the percent of respondents reporting their daughter had a personal doctor or nurse.
- In 2012, respondents were more likely to report their child who was 12 or younger had a personal doctor or nurse. In 2018, child's age was not a significant variable. From 2012 to 2018, there was a noted increase in the percent of respondents across child's age had a personal doctor or nurse.

- In 2012 and 2018, household income was not a significant variable. From 2012 to 2018, there was a noted
 increase in the percent of respondents across household income reporting their child had a personal doctor or
 nurse.
- In 2012 and 2018, marital status was not a significant variable. From 2012 to 2018, there was a noted increase in the percent of respondents across marital status reporting their child had a personal doctor or nurse.

- From 2015 to 2018, there was a statistical increase in the overall percent of respondents reporting their child had a personal doctor or nurse.
- In 2015, respondents were more likely to report their daughter had a personal doctor or nurse. In 2018, child's gender was not a significant variable. From 2015 to 2018, there was a noted increase in the percent of respondents reporting their son had a personal doctor or nurse.
- In 2015 and 2018, child's age was not a significant variable. From 2015 to 2018, there was a noted increase in the percent of respondents reporting their child who was 12 or younger had a personal doctor or nurse.
- In 2015, respondents in the top 60 percent household income bracket were more likely to report their child had a personal doctor or nurse. In 2018, household income was not a significant variable. From 2015 to 2018, there was a noted increase in the percent of respondents in the bottom 40 percent household income bracket reporting their child had a personal doctor or nurse.
- In 2015, married respondents were more likely to report their child had a personal doctor or nurse. In 2018, marital status was not a significant variable. From 2015 to 2018, there was a noted increase in the percent of unmarried respondents reporting their child had a personal doctor or nurse.

Table 48. Child Has Personal Doctor/Nurse by Demographic Variables for Each Survey Year[®]

	2012	2015	2018
TOTAL ^{a,b}	89%	91%	95%
Gender ²			
Boy^b	90	88	94
Girla	89	94	96
Age^1			
12 Years Old or Younger ^{a,b}	91	90	95
13 to 17 Years Old ^a	85	93	95
Household Income ²			
Bottom 40 Percent Bracket ^{a,b}	88	87	94
Top 60 Percent Bracket ^a	92	94	98
Marital Status ²			
Married ^a	90	94	96
Not Married ^{a,b}	88	87	95

[®]Percentages occasionally may differ by 1 or 2 percentage points from previous reports or the Appendix as a result of rounding, recoding variables and response category distribution.

¹demographic difference at p≤0.05 in 2012; 2 demographic difference at p≤0.05 in 2015

³demographic difference at p≤0.05 in 2018

^a<u>year</u> difference at p≤0.05 from 2012 to 2018; ^b<u>year</u> difference at p≤0.05 from 2015 to 2018

Preventive Care with Child's Personal Doctor

2018 Findings

Of the 309 respondents with a child who had a personal doctor...

- Of children who had a personal doctor, 93% reported their child visited their personal doctor/nurse for preventive care during the past year.
- There were no statistically significant differences between demographic variables and responses of their child visited their personal doctor/nurse for preventive care during the past year.

2012 to 2018 Comparisons

- From 2012 to 2018, there was no statistical change in the overall percent of respondents reporting their child saw their personal doctor in the past year for preventive care.
- From 2012 to 2018, there was no statistically significant differences between and within demographic variables and responses of reporting their child saw their personal doctor for preventive care during the past year.

- From 2015 to 2018, there was no statistical change in the overall percent of respondents reporting their child saw their personal doctor in the past year for preventive care.
- From 2015 and 2018, there was no statistically significant differences between and within demographic variables and responses of reporting their child saw their personal doctor for preventive care during the past year.

Table 49. Child Went to Personal Doctor/Nurse for Preventive Care in Past Year by Demographic Variables for Each Survey Year[©]

Each Survey Year [®]			
	2012	2015	2018
TOTAL	93%	92%	93%
Gender			
Boy	94	92	91
Girl	93	92	95
Age			
12 Years Old or Younger	94	92	95
13 to 17 Years Old	92	94	90
Household Income			
Bottom 40 Percent Bracket	95	91	96
Top 60 Percent Bracket	92	94	91
•			
Marital Status			
Married	93	94	92
Not Married	94	90	95

[®]Percentages occasionally may differ by 1 or 2 percentage points from previous reports or the Appendix as a result of rounding, recoding variables and response category distribution.

¹demographic difference at p≤0.05 in 2012; ²demographic difference at p≤0.05 in 2015

³demographic difference at p≤0.05 in 2018

^a<u>year</u> difference at p≤0.05 from 2012 to 2018; ^b<u>year</u> difference at p≤0.05 from 2015 to 2018

Unmet Dental Care

2018 Findings

Of the 323 respondents with a child...

- Six percent of respondents reported there was a time in the past year their child did not receive the dental care needed.
- There were no statistically significant differences between demographic variables and responses of their child had an unmet dental care need in the past year.

2012 to 2018 Comparisons

- From 2012 to 2018, there was no statistical change in the overall percent of respondents reporting in the past year their child had an unmet dental care need.
- In 2012, respondents were more likely to report their daughter did not get the dental care needed. In 2018, child's gender was not a significant variable. From 2012 to 2018, there was a noted <u>decrease</u> in the percent of respondents reporting their daughter did not get the dental care needed.
- In 2012, respondents in the bottom 40 percent household income bracket were more likely to report their child did not get the dental care needed. In 2018, household income was not a significant variable.
- In 2012, unmarried respondents were more likely to report their child did not get the dental care needed. In 2018, marital status was not a significant variable. From 2012 to 2018, there was a noted <u>decrease</u> in the percent of unmarried respondents reporting their child did not get the dental care needed.

- From 2015 to 2018, there was no statistical change in the overall percent of respondents reporting in the past year their child had an unmet dental care need.
- In 2015 and 2018, child's gender was not a significant variable. From 2015 to 2018, there was a noted <u>decrease</u> in the percent of respondents reporting their daughter did not get the dental care needed.
- In 2015 and 2018, child's age was not a significant variable. From 2015 to 2018, there was a noted <u>decrease</u> in the percent of respondents reporting their child who was 12 or younger did not get the dental care needed.
- In 2015, respondents in the bottom 40 percent household income bracket were more likely to report their child did not get the dental care needed. In 2018, household income was not a significant variable. From 2015 to 2018, there was a noted <u>decrease</u> in the percent of respondents in the bottom 40 percent household income bracket reporting their child did not get the dental care needed.
- In 2015, unmarried respondents were more likely to report their child did not get the dental care needed. In 2018, marital status was not a significant variable. From 2015 to 2018, there was a noted <u>decrease</u> in the percent of unmarried respondents reporting their child did not get the dental care needed.

Table 50. Child's Unmet Dental Care in Past Year by Demographic Variables for Each Survey Year[®]

	2012	2015	2018
TOTAL	8%	9%	6%
Gender ¹			
Boy	5	9	8
$\operatorname{Girl}^{\mathrm{a,b}}$	11	9	4
Age			
12 Years Old or Younger ^b	8	10	5
13 to 17 Years Old	9	7	7
Household Income ^{1,2}			
Bottom 40 Percent Bracket ^b	13	17	8
Top 60 Percent Bracket	3	3	4
Marital Status ^{1,2}			
Married	5	5	5
Not Married ^{a,b}	12	14	6

[®]Percentages occasionally may differ by 1 or 2 percentage points from previous reports or the Appendix as a result of rounding, recoding variables and response category distribution.

Unmet Medical Care or Specialist Care

2018 Findings

Of the 323 respondents with a child...

- Five percent of respondents reported there was a time in the past year their child was not able to visit a specialist they needed to see while 3% reported their child did not receive the medical care needed.
- No demographic comparisons were conducted as a result of the low percent of respondents who reported their child had an unmet medical care need or they were unable to see a specialist when needed.

2012 to 2018 Comparisons

- From 2012 to 2018, there was no statistical change in the overall percent of respondents reporting in the past year their child had an unmet medical care need. From 2012 to 2018, there was a statistical increase in the overall percent of respondents reporting their child in the past year was not able to see a specialist when needed.
- No demographic comparisons were conducted between years as a result of the low percent of respondents who reported their child had an unmet need in both study years.

2015 to 2018 Comparisons

• From 2015 to 2018, there was no statistical change in the overall percent of respondents reporting in the past year their child had an unmet medical care need. From 2015 to 2018, there was a statistical increase in the overall percent of respondents reporting their child in the past year was not able to see a specialist when needed.

¹demographic difference at p≤0.05 in 2012; ²demographic difference at p≤0.05 in 2015

³demographic difference at p≤0.05 in 2018

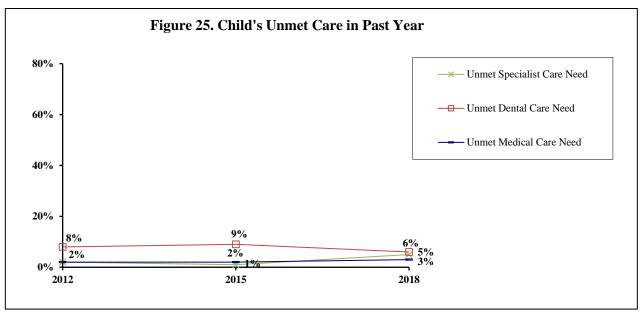
^a<u>year</u> difference at p≤0.05 from 2012 to 2018; ^b<u>year</u> difference at p≤0.05 from 2015 to 2018

• No demographic comparisons were conducted between years as a result of the low percent of respondents who reported their child had an unmet need in both study years.

Child's Unmet Care Overall

Year Comparisons

• From 2012 to 2018, there was no statistical change in the overall percent of respondents reporting their child had an unmet medical need or unmet dental need, as well as from 2015 to 2018. From 2012 to 2018, there was a statistical increase in the overall percent of respondents reporting their child was unable to see a specialist when needed, as well as from 2015 to 2018.



Child's Asthma

2018 Findings

Of the 323 respondents with a child...

- Seventeen percent of respondents reported their child currently had asthma.
- Twenty-four percent of respondents reported their son currently had asthma compared to 11% of respondents speaking on behalf of their daughter.
- Unmarried respondents were more likely to report their child currently had asthma compared to married respondents (26% and 10%, respectively).

- From 2012 to 2018, there was a statistical increase in the overall percent of respondents who reported their child currently had asthma.
- In 2012, child's gender was not a significant variable. In 2018, respondents were more likely to report their son currently had asthma, with a noted increase since 2012.

- In 2012 and 2018, child's age was not a significant variable. From 2012 to 2018, there was a noted increase in the percent of respondents reporting their child who was 12 or younger currently had asthma.
- In 2012, respondents in the bottom 40 percent household income bracket were more likely to report their child currently had asthma. In 2018, household income was not a significant variable. From 2012 to 2018, there was a noted increase in the percent of respondents in the top 60 percent household income bracket reporting their child currently had asthma.
- In 2012 and 2018, unmarried respondents were more likely to report their child currently had asthma. From 2012 to 2018, there was a noted increase in the percent of unmarried respondents reporting their child currently had asthma.

- From 2015 to 2018, there was a statistical increase in the overall percent of respondents who reported their child currently had asthma.
- In 2015, child's gender was not a significant variable. In 2018, respondents were more likely to report their son currently had asthma, with a noted increase since 2015.
- In 2015 and 2018, child's age was not a significant variable. From 2015 to 2018, there was a noted increase in the percent of respondents reporting their child who was 12 or younger currently had asthma.
- In 2015, respondents in the bottom 40 percent household income bracket were more likely to report their child currently had asthma. In 2018, household income was not a significant variable. From 2015 to 2018, there was a noted increase in the percent of respondents in the top 60 percent household income bracket reporting their child currently had asthma.
- In 2015 and 2018, unmarried respondents were more likely to report their child currently had asthma. From 2015 to 2018, there was a noted increase in the percent of unmarried respondents reporting their child currently had asthma.

Table 51. Child's Current Asthma by Demographic Variables for Each Survey Year[®]

	J = 011110 81 41 P1		01 2001 001 0
	2012	2015	2018
$TOTAL^{a,b}$	11%	11%	17%
Gender ³			
$\mathrm{Boy}^{\mathrm{a,b}}$	12	13	24
Girl	10	8	11
Age			
12 Years Old or Younger ^{a,b}	10	11	18
13 to 17 Years Old	14	9	16
Household Income ^{1,2}			
Bottom 40 Percent Bracket	17	16	21
Top 60 Percent Bracket ^{a,b}	7	7	16
Marital Status ^{1,2,3}			
Married	8	6	10
Not Married ^{a,b}	15	15	26

[®]Percentages occasionally may differ by 1 or 2 percentage points from previous reports or the Appendix as a result of rounding, recoding variables and response category distribution.

Child's Safety in Community

2018 Findings

Of the 323 respondents with a child...

- Nine percent of respondents reported their child was seldom/never safe in their community or neighborhood.
- Fourteen percent of respondents in the bottom 40 percent household income bracket were more likely to report their child was seldom/never safe in their community compared to 5% of respondents in the top 60 percent household income bracket.

- From 2012 to 2018, there was a statistical increase in the overall percent of respondents who reported their child was seldom/never safe.
- In 2012 and 2018, child's gender was not a significant variable. From 2012 to 2018, there was a noted increase in the percent of respondents reporting their daughter was seldom/never safe in their community.
- In 2012 and 2018, child's age was not a significant variable. From 2012 to 2018, there was a noted increase in the percent of respondents reporting their child who was 12 or younger was seldom/never safe in their community.
- In 2012 and 2018, respondents in the bottom 40 percent household income bracket were more likely to report their child was seldom/never safe in their community. From 2012 to 2018, there was a noted increase in the percent of respondents across household income reporting their child was seldom/never safe in their community.

¹demographic difference at p≤0.05 in 2012; ²demographic difference at p≤0.05 in 2015

³demographic difference at p≤0.05 in 2018

^a<u>year</u> difference at p≤0.05 from 2012 to 2018; ^b<u>year</u> difference at p≤0.05 from 2015 to 2018

• In 2012, unmarried respondents were more likely to report their child was seldom/never safe in their community. In 2018, marital status was not a significant variable. From 2012 to 2018, there was a noted increase in the percent of respondents across marital status reporting their child was seldom/never safe in their community.

- From 2015 to 2018, there was a statistical increase in the overall percent of respondents who reported their child was seldom/never safe.
- In 2015 and 2018, child's gender was not a significant variable. From 2015 to 2018, there was a noted increase in the percent of respondents reporting their daughter was seldom/never safe in their community.
- In 2015 and 2018, child's age was not a significant variable. From 2015 to 2018, there was a noted increase in the percent of respondents reporting their child who was 12 or younger was seldom/never safe in their community.
- In 2015 and 2018, respondents in the bottom 40 percent household income bracket were more likely to report their child was seldom/never safe in their community. From 2015 to 2018, there was a noted increase in the percent of respondents in the bottom 40 percent household income bracket reporting their child was seldom/never safe in their community.

Table 52. Child Seldom/Never Safe in Community or Neighborhood by Demographic Variables for Each Survey Year [®]

	2012	2015	2018
TOTAL ^{a,b}	4%	5%	9%
Gender			
Boy	5	6	7
$\operatorname{Girl}^{\operatorname{a,b}}$	2	3	10
Age			
12 Years Old or Younger ^{a,b}	3	4	10
13 to 17 Years Old	6	6	7
Household Income ^{1,2,3}			
Bottom 40 Percent Bracket ^{a,b}	6	7	14
Top 60 Percent Bracket ^a	2	3	5
Marital Status ¹			
Married ^a	2	3	6
Not Married ^a	6	6	12
①D : 11 11:00 1			•

[®]Percentages occasionally may differ by 1 or 2 percentage points from previous reports or the Appendix as a result of rounding, recoding variables and response category distribution.

¹demographic difference at p≤0.05 in 2012; ²demographic difference at p≤0.05 in 2015

³demographic difference at p≤0.05 in 2018

^ayear difference at p≤0.05 from 2012 to 2018; ^byear difference at p≤0.05 from 2015 to 2018

Child's Sleeping Arrangement

2018 Findings

Of the 70 respondents with a child two years old or younger...

- Eighty-four percent of respondents reported when their child was a baby, their child usually slept in a crib or bassinette. Eleven percent reported in bed with them or another person.
- No demographic comparisons were conducted as a result of the low percent of respondents who were asked this question.

2012 to 2018 Comparisons

- From 2012 to 2018, there was no statistical change in the overall percent of respondents who reported their child slept in bed with the respondent or another person when the child was a baby (8% and 11%, respectively).
- No demographic comparisons were conducted between years as a result of the low percent of respondents who were asked this question in both study years.

2015 to 2018 Comparisons

- From 2015 to 2018, there was no statistical change in the overall percent of respondents who reported their child slept in bed with the respondent or another person when the child was a baby (7% and 11%, respectively).
- No demographic comparisons were conducted between years as a result of the low percent of respondents who were asked this question in both study years.

Child's Screen Time

The Healthy People 2020 goal for adolescents in grades 9 through 12 who view television, videos, or play video games for no more than 2 hours a day is 73.9%. (Objective PA-8.2.3)

The Healthy People 2020 goal for adolescents in grades 9 through 12 who use computers unrelated to school work for no more than 2 hours a day is 82.6%. (Objective PA-8.3.3)

2018 Findings

Of the 322 respondents with a child...

- Seventy-four percent of respondents reported their child watched TV for two or fewer hours on an average school/week day while 82% of respondents reported two or fewer hours in which they play video/computer games or use a device for something that is not school work. In total, 38% of respondents reported their child has two or fewer hours of screen time on an average school/week day.
- Forty-two percent of respondents reported their child who was 12 or younger had two or fewer hours of screen time on an average school/week day compared to 28% of respondents speaking on behalf of their 13 to 17 year old child.
- Forty-two percent of respondents in the top 60 percent household income bracket reported their child had two or fewer hours of screen time on an average school/week day compared to 31% of respondents in the bottom 40 percent household income bracket.

Table 53. Child's Total Screen Time (Two or Fewer Hours) by Demographic Variables for 2018[®]

uote 33: etitta 5 Total Serecti Tillik	(1 00 01 1 0
	2018
TOTAL	38%
Gender	
Boy	40
Girl	37
Age ¹	
12 Years Old or Younger	42
13 to 17 Years Old	28
Household Income ¹	
Bottom 40 Percent Bracket	31
Top 60 Percent Bracket	42
Marital Status	
Married	42
Not Married	34

[®]Percentages occasionally may differ by 1 or 2 percentage points from the Appendix as a result of rounding, recoding variables and response category distribution.

Child's Soda Consumption

2018 Findings

Of the 323 respondents with a child...

- Sixty-one percent of respondents reported their child did not drink soda or pop in the past week, excluding diet soda. Twenty-nine percent of respondents reported their child drank soda one or more times in the past week, but less than once a day. Six percent reported at least one soda per day.
- Seventy-two percent of respondents reported their child who was 12 or younger did not drink soda or pop in the past week compared to 37% of respondents speaking on behalf of their 13 to 17 year old child.

¹demographic difference at p≤0.05 in 2018

Table 54. Child's Soda Consumption (Zero in Past Week) by Demographic Variables for 2018[®]

	2018
TOTAL	61%
Gender	
Boy	56
Girl	65
Age^1	
12 Years Old or Younger	72
13 to 17 Years Old	37
Household Income	
Bottom 40 Percent Bracket	66
Top 60 Percent Bracket	57
Marital Status	
Married	59
Not Married	63

[®]Percentages occasionally may differ by 1 or 2 percentage points from the Appendix as a result of rounding, recoding variables and response category distribution.

Child's Physical Activity

2018 Findings

Of the 231 respondents with a child 5 to 17 years old...

- Fifty-eight percent of respondents reported their 5 to 17 year old child was physically active five times a week for at least 60 minutes each.
- Sixty-seven percent of respondents reported their 5 to 12 year old child was physically active five times a week for at least 60 minutes compared to 46% of respondents speaking on behalf of their 13 to 17 year old child.
- Sixty-eight percent of respondents in the bottom 40 percent household income bracket reported their child was physically active five times a week compared to 53% of respondents in the top 60 percent household income bracket.
 - Of the 87 respondents who reported their child was not physically active five times a week/60 minutes, 21% each reported child does not like to be physically active or the weather prevented their child from exercising followed by 14% who reported school/homework/other activities while 13% reported the child was sick/ill.

- From 2012 to 2018, there was a statistical <u>decrease</u> in the overall percent of respondents who reported their child was physically active five times a week for at least 60 minutes.
- In 2012 and 2018, respondents were more likely to report their 5 to 12 year old child was physically active five times a week.

¹demographic difference at p≤0.05 in 2018

- In 2012, household income was not a significant variable. In 2018, respondents in the bottom 40 percent household income bracket were more likely to report their child was physically active five times a week.
- In 2012, unmarried respondents were more likely to report their child was physically active five times a week. In 2018, marital status was not a significant variable. From 2012 to 2018, there was a noted <u>decrease</u> in the percent of unmarried respondents reporting their child was physically active five times a week.

- From 2015 to 2018, there was a statistical <u>decrease</u> in the overall percent of respondents who reported their child was physically active five times a week for at least 60 minutes.
- In 2015, respondents were more likely to report their son was physically active five times a week. In 2018, child's gender was not a significant variable. From 2015 to 2018, there was a noted <u>decrease</u> in the percent of respondents reporting their son was physically active five times a week.
- In 2015 and 2018, respondents were more likely to report their 5 to 12 year old child was physically active five times a week. From 2015 to 2018, there was a noted <u>decrease</u> in the percent of respondents reporting their 5 to 12 year old child was physically active five times a week.
- In 2015, household income was not a significant variable. In 2018, respondents in the bottom 40 percent household income bracket were more likely to report their child was physically active five times a week.
- In 2015 and 2018, marital status was not a significant variable. From 2015 to 2018, there was a noted <u>decrease</u> in the percent of unmarried respondents reporting their child was physically active five times a week.

Table 55. Child's Physical Activity (Five or More Times for 60 Minutes/Week) by Demographic Variables for Each Survey Year (Children 5 to 17 Years Old)[©]

	2012	2015	2018
$TOTAL^{a,b}$	66%	69%	58%
Gender ²			
Boy^b	70	76	61
Girl	62	62	54
$Age^{1,2,3}$			
5 to 12 Years Old ^b	75	77	67
13 to 17 Years Old	52	57	
13 to 17 Tears Old	32	37	46
Household Income ³			
Bottom 40 Percent Bracket	70	71	68
Top 60 Percent Bracket	62	64	53
Marital Status ¹			
Married	60	68	59
Not Married ^{a,b}	74	70	55

[®]Percentages occasionally may differ by 1 or 2 percentage points from previous reports or the Appendix as a result of rounding, recoding variables and response category distribution.

¹demographic difference at p≤0.05 in 2012; ²demographic difference at p≤0.05 in 2015

³demographic difference at p≤0.05 in 2018

^a<u>year</u> difference at p≤0.05 from 2012 to 2018; ^b<u>year</u> difference at p≤0.05 from 2015 to 2018

Child's Emotional Well-Being

2018 Findings

Of the 231 respondents with a child 5 to 17 years old...

- Five percent of respondents reported their 5 to 17 year old child always or nearly always felt unhappy, sad or depressed in the past six months.
- No demographic comparisons were conducted as a result of the low percent of respondents who reported their child always or nearly always felt unhappy, sad or depressed in the past six months.

2012 to 2018 Year Comparisons

- From 2012 to 2018, there was no statistical change in the overall percent of respondents who reported their child always or nearly always felt unhappy, sad or depressed in the past six months.
- In 2012, there were no statistically significant differences between demographic variables and responses of their child always or nearly always felt unhappy, sad or depressed.

- From 2015 to 2018, there was no statistical change in the overall percent of respondents who reported their child always or nearly always felt unhappy, sad or depressed in the past six months.
- No demographic comparisons were conducted between years as a result of the low percent of respondents who reported their child always or nearly always felt unhappy, sad or depressed in both study years.

Table 56. Child Always/Nearly Always Felt Unhappy, Sad or Depressed in Past 6 Months by Demographic Variables for Each Survey Year (Children 5 to 17 Years Old)[©]

2012	2015 [©]	2018 [©]
7%	3%	5%
8		
6		
6		
8		
8		
5		
6		
8		
	7% 8 6 8 5	7% 3% 8 6 8 5 6

[®]Percentages occasionally may differ by 1 or 2 percentage points from previous reports or the Appendix as a result of rounding, recoding variables and response category distribution.

[®]Data is not shown as a result of insufficient statistical reliability due to the low percentage reporting this.

¹demographic difference at p≤0.05 in 2012; ²demographic difference at p≤0.05 in 2015

³demographic difference at p≤0.05 in 2018

^ayear difference at p≤0.05 from 2012 to 2018; ^byear difference at p≤0.05 from 2015 to 2018

Child Experienced Bullying in Past Year

2018 Findings

Of the 231 respondents with a child 5 to 17 years old...

- Sixteen percent of respondents reported their 5 to 17 year old child experienced some form of bullying in the past year.
- Twenty-one percent of respondents reported their 5 to 12 year old child experienced some form of bullying in the past year compared to 11% of respondents speaking on behalf of their 13 to 17 year old child.

2012 to 2018 Year Comparisons

- From 2012 to 2018, there was no statistical change in the overall percent of respondents who reported in the past year their child was bullied.
- In 2012 and 2018, child's gender was not a significant variable. From 2012 to 2018, there was a noted <u>decrease</u> in the percent of respondents reporting their daughter was bullied in some way in the past year.
- In 2012, child's age was not a significant variable. In 2018, respondents were more likely to report their 5 to 12 year old child experienced some form of bullying in the past year.

- From 2015 to 2018, there was no statistical change in the overall percent of respondents who reported in the past year their child was bullied.
- In 2015 and 2018, respondents were more likely to report their 5 to 12 year old child was bullied in some way in the past year.
- In 2015, unmarried respondents were more likely to report their child was bullied in some way in the past year. In 2018, marital status was not a significant variable.

Table 57. Child Experienced Bullying in Past Year by Demographic Variables for Each Survey Year (Children 5 to 17 Years Old)[©]

(Cimaren 2 to 17 Tears of	2012	2015	2018
TOTAL	22%	18%	16%
Gender			
Boy	21	17	20
Girla	23	19	13
$Age^{2,3}$			
5 to 12 Years Old	24	27	21
13 to 17 Years Old	19	11	11
Household Income			
Bottom 40 Percent Bracket	25	23	15
Top 60 Percent Bracket	21	15	18
Marital Status ²			
Married	21	12	14
Not Married	23	25	19

[®]Percentages occasionally may differ by 1 or 2 percentage points from previous reports or the Appendix as a result of rounding, recoding variables and response category distribution.

Child Experienced Verbal Bullying in Past Year

2018 Findings

Of the 231 respondents with a child 5 to 17 years old...

- Thirteen percent of respondents reported their 5 to 17 year old child was verbally bullied, for example, mean rumors said or kept out of a group in the past year.
- There were no statistically significant differences between demographic variables and responses of their child was verbally bullied.

2012 to 2018 Year Comparisons

- From 2012 to 2018, there was no statistical change in the overall percent of respondents who reported in the past year their child was verbally bullied.
- From 2012 to 2018, there were no statistically significant differences between and within demographic variables and responses of reporting in the past year their child was verbally bullied.

- From 2015 to 2018 there was no statistical change in the overall percent of respondents who reported in the past year their child was verbally bullied.
- In 2015, respondents were more likely to report their 5 to 12 year old child was verbally bullied. In 2018, child's age was not a significant variable.

¹demographic difference at p≤0.05 in 2012; ²demographic difference at p≤0.05 in 2015

³demographic difference at p≤0.05 in 2018

^ayear difference at p≤0.05 from 2012 to 2018; ^byear difference at p≤0.05 from 2015 to 2018

• In 2015, unmarried respondents were more likely to report their child was verbally bullied. In 2018, marital status was not a significant variable.

Table 58. Child Experienced Verbal Bullying in Past Year by Demographic Variables for Each Survey Year (Children 5 to 17 Years Old)[®]

1)		
2012	2015	2018
18%	16%	13%
16	14	16
19	18	11
20	24	16
15	9	10
19	18	14
18	14	13
15	11	11
20	21	17
	2012 18% 16 19 20 15 19 18	2012 2015 18% 16% 16 14 19 18 20 24 15 9 19 18 18 14 15 11

[®]Percentages occasionally may differ by 1 or 2 percentage points from previous reports or the Appendix as a result of rounding, recoding variables and response category distribution.

Child Experienced Physical Bullying in Past Year

2018 Findings

Of the 231 respondents with a child 5 to 17 years old...

- Six percent of respondents reported their 5 to 17 year old child was physically bullied, for example, being hit or kicked in the past year.
- No demographic comparisons were conducted as a result of the low percent of respondents who reported in the past year their child was physically bullied.

2012 to 2018 Year Comparisons

- From 2012 to 2018, there was no statistical change in the overall percent of respondents who reported in the past year their child was physically bullied.
- In 2012, there were no statistically differences between demographic variables and responses in the past year their child was physically bullied.

2015 to 2018 Year Comparisons

• From 2015 to 2018 there was no statistical change in the overall percent of respondents who reported in the past year their child was physically bullied.

¹demographic difference at p≤0.05 in 2012; ²demographic difference at p≤0.05 in 2015

³demographic difference at p≤0.05 in 2018

^ayear difference at p≤0.05 from 2012 to 2018; ^byear difference at p≤0.05 from 2015 to 2018

• No demographic comparisons were conducted between years as a result of the low percent of respondents who reported their child was physically bullied in both study years.

Table 59. Child Experienced Physical Bullying in Past Year by Demographic Variables for Each Survey Year (Children 5 to 17 Years Old)[®]

`	2012	2015 [©]	2018 [©]
TOTAL	10%	5%	6%
Gender			
Boy	11		
Girl	8		
Age			
5 to 12 Years Old	13		
13 to 17 Years Old	7		
Household Income			
Bottom 40 Percent Bracket	14		
Top 60 Percent Bracket	7		
Marital Status			
Married	10		
Not Married	9		

[®]Percentages occasionally may differ by 1 or 2 percentage points from previous reports or the Appendix as a result of rounding, recoding variables and response category distribution.

Child Experienced Cyber or Electronic Bullying in Past Year

2018 Findings

Of the 231 respondents with a child 5 to 17 years old...

- Three percent of respondents reported their 5 to 17 year old child was cyber or electronically bullied, for example, teased, taunted, humiliated or threatened by email, cell phone, Facebook postings, texts or other electronic methods.
- No demographic comparisons were conducted as a result of the low percent of respondents who reported in the past year their child was cyber bullied.

- From 2012 to 2018, there was no statistical change in the overall percent of respondents who reported in the past year their child was cyber bullied.
- No demographic comparisons were conducted between years as a result of the low percent of respondents who reported their child was cyber bullied in both study years.

[®]Data is not shown as a result of insufficient statistical reliability due to the low percentage reporting this.

¹demographic difference at p≤0.05 in 2012; ²demographic difference at p≤0.05 in 2015

³demographic difference at p≤0.05 in 2018

^ayear difference at p≤0.05 from 2012 to 2018; ^byear difference at p≤0.05 from 2015 to 2018

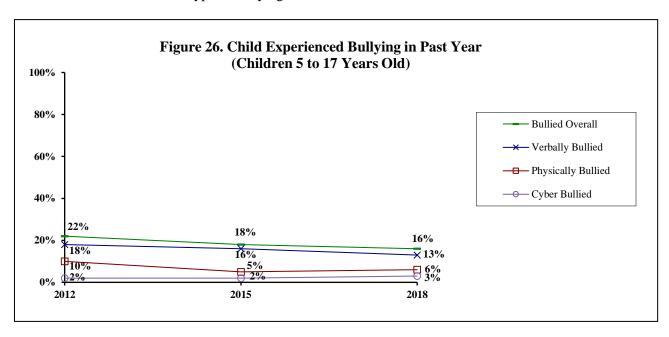
2015 to 2018 Year Comparisons

- From 2015 to 2018, there was no statistical change in the overall percent of respondents who reported in the past year their child was cyber bullied.
- No demographic comparisons were conducted between years as a result of the low percent of respondents who reported their child was cyber bullied in both study years.

Child Experienced Bullying Overall

Year Comparisons

• From 2012 to 2018, there was no statistical change in the overall percent of respondents who reported their child was bullied or in the type of bullying, as well as from 2015 to 2018.

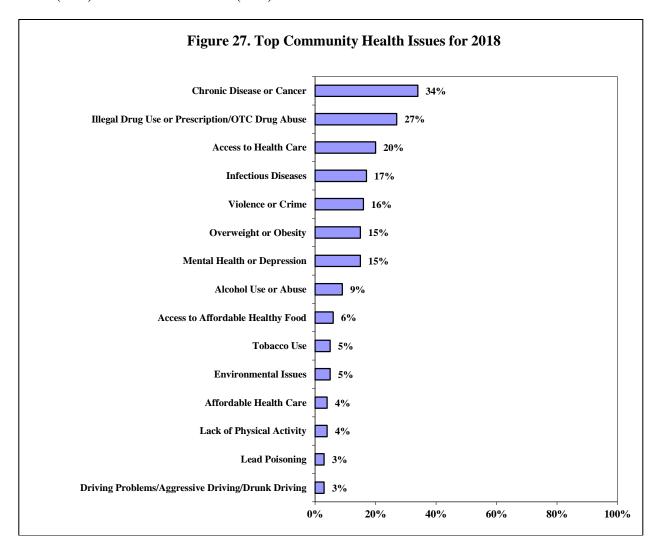


Top Community Health Issues (Figure 27; Tables 60 - 74)

KEY FINDINGS: In 2018, respondents were asked to list the top three community health issues. The most often cited was chronic diseases or cancer (34%) followed by illegal drug use or prescription/overthe-counter drug abuse (27%). Respondents who were 18 to 24 years old, African American, Hispanic, with a high school education or less, in the bottom 40 percent household income bracket or unmarried respondents were more likely to report chronic diseases or cancer as a top community health issue. Respondents who were 55 to 64 years old, non-African American, non-Hispanic, with at least some post high school education or in the top 40 percent household income bracket were more likely to report illegal drug use or prescription/over-the-counter drug abuse. Twenty percent of respondents reported access to health care as a top community health issue; respondents who were female, non-African American, with at least some post high school education or in the top 40 percent household income bracket were more likely to report this. Seventeen percent of respondents reported infectious diseases. Respondents who were male, 18 to 24 years old, African American, Hispanic, with a high school education or less, in the bottom 40 percent household income bracket or unmarried respondents were more likely to report infectious diseases. Sixteen percent reported violence or crime as a top community health issue. Respondents who were 18 to 24 years old, African American, Hispanic or with a high school education or less were more likely to report violence or crime. Fifteen percent reported overweight or obesity as a top community health issue. Respondents who were female, 18 to 24 years old, non-Hispanic or with a college education were more likely to report overweight or obesity. Fifteen percent of respondents reported mental health or depression; respondents who were 25 to 34 years old, 45 to 64 years old, white, with a college education or in the middle 20 percent household income bracket were more likely to report this. Nine percent of respondents reported alcohol use or abuse as a top community health issue; respondents who were male, 25 to 34 years old, non-African American, non-Hispanic or with a college education were more likely to report this. Six percent of respondents reported access to affordable healthy food as a top community health issue. Respondents who were non-Hispanic, with a college education or married respondents were more likely to report access to affordable healthy food. Five percent of respondents reported tobacco use as a top community health issue. Respondents who were male, 25 to 34 years old, non-white and non-African American, Hispanic or in the top 40 percent household income bracket were more likely to report tobacco use. Five percent of respondents reported environmental issues; respondents 55 to 64 years old or in the middle 20 percent household income bracket were more likely to report this. Four percent of respondents reported affordable health care; respondents who were 35 to 44 years old, white, Hispanic, with a college education, in the top 40 percent household income bracket or married respondents were more likely to report this. Four percent of respondents reported lack of physical activity as a top community health issue. Respondents who were non-white and non-African American, non-Hispanic or with a college education were more likely to report lack of physical activity. Three percent of respondents reported lead poisoning; respondents who were 35 to 44 years old, white, Hispanic, with a college education or married were more likely to report this. Three percent of respondents reported driving problems/aggressive driving/drunk driving; respondents with a college education, in the middle 20 percent household income bracket or married respondents were more likely to report this.

2018 Findings

• Respondents were asked to list the three largest community health issues. Respondents were more likely to select chronic diseases or cancer (34%) followed by illegal drug use or prescription/over-the-counter drug abuse (27%) or access to health care (20%).



Chronic Disease or Cancer as a Top Community Health Issue

2018 Findings

- Thirty-four percent of respondents reported chronic diseases, like diabetes or heart disease, or cancer as one of the top three community health issues.
- Fifty-six percent of respondents 18 to 24 years old reported chronic disease or cancer as one of the top community health issues compared to 26% of those 65 and older or 22% of respondents 55 to 64 years old.
- African American respondents were more likely to report chronic disease or cancer as a top issue (55%) compared to respondents who were non-white and non-African American (31%) or white respondents (23%).
- Hispanic respondents were more likely to report chronic disease or cancer (46%) compared to non-Hispanic respondents (33%).

- Forty percent of respondents with a high school education or less reported chronic disease or cancer as a top issue compared to 32% of those with a college education or 31% of respondents with some post high school education.
- Forty-six percent of respondents in the bottom 40 percent household income reported chronic disease or cancer compared to 35% of those in the middle 20 percent income bracket or 23% of respondents in the top 40 percent household income bracket.
- Unmarried respondents were more likely to report chronic disease or cancer as one of the top community health issues compared to married respondents (41% and 22%, respectively).

Table 60. Chronic Disease or Cancer as a Top Community Health Issue by Demographic Variables for 2018[®]

Table 60. Chronic Disease or Cance	
	2018
TOTAL	34%
Gender	
Male	32
Female	36
remate	30
Age ¹	
18 to 24	56
25 to 34	39
35 to 44	30
45 to 54	31
55 to 64	22
65 and Older	26
Race ¹	
White	23
African American	55
Other	31
Hispanic Origin ¹	
Hispanic	46
Non-Hispanic	33
Education ¹	
High School or Less	40
Some Post High School	31
College Graduate	32
conoge cranada	0-
Household Income ¹	
Bottom 40 Percent Bracket	46
Middle 20 Percent Bracket	35
Top 40 Percent Bracket	23
Marital Status ¹	
Married	22
Not Married	41
1101 111111100	7.1

[®]Percentages occasionally may differ by 1 or 2 percentage points from the Appendix as a result of rounding, recoding variables and response category distribution.

¹demographic difference at p≤0.05 in 2018

Illegal Drug Use or Prescription/Over-the-Counter Drug Abuse as a Top Community Health Issue

- Twenty-seven percent of respondents reported illegal drug use or prescription/over-the-counter drug abuse as one of the top three community health issues.
- Thirty-four percent of respondents 55 to 64 years old reported illegal drug use or prescription/over-the-counter drug abuse as one of the top community health issues compared to 23% of those 45 to 54 years old or 21% of respondents 25 to 34 years old.
- Thirty-one percent of white respondents and 30% of non-white and non-African American respondents reported illegal drug use or prescription/over-the-counter drug abuse compared to 20% of African American respondents.
- Non-Hispanic respondents were more likely to report illegal drug use or prescription/over-the-counter drug abuse as a top issue (28%) compared to Hispanic respondents (19%).
- Thirty-one percent of respondents with at least some post high school education reported illegal drug use or prescription/over-the-counter drug abuse compared to 19% of respondents with a high school education or less.
- Respondents in the top 40 percent household income bracket were more likely to report illegal drug use or prescription/over-the-counter drug abuse as a top health issue (30%) compared to those in the bottom 40 percent income bracket (24%) or respondents in the middle 20 percent household income bracket (20%).

Table 61. Illegal Drug Use or Prescription/OTC Drug Abuse as a Top Community Health Issue by Demographic Variables for 2018[®]

Variables for 2018 [⊕]	
	2018
TOTAL	27%
Gender	
Male	28
Female	27
Age ¹	
18 to 24	30
25 to 34	21
35 to 44	27
45 to 54	23
55 to 64	34
65 and Older	29
Race ¹	
White	31
African American	20
Other	30
3 11.0 1	
Hispanic Origin ¹	
Hispanic	19
Non-Hispanic	28
Education ¹	
	19
High School or Less Some Post High School	31
College Graduate	31
Collège Graduate	31
Household Income ¹	
Bottom 40 Percent Bracket	24
Middle 20 Percent Bracket	20
Top 40 Percent Bracket	30
Marital Status	
Married	27
Not Married	27

[®]Percentages occasionally may differ by 1 or 2 percentage points from the Appendix as a result of rounding, recoding variables and response category distribution.

Access to Health Care as a Top Community Health Issue

- Twenty percent of respondents reported access to health care (physical, dental or mental) as one of the top three community health issues.
- Female respondents were more likely to report access to health care as one of the top community health issues (23%) compared to male respondents (16%).

¹demographic difference at p≤0.05 in 2018

- Non-African American respondents were more likely to report access to health care (23%) compared to African American respondents (14%).
- Twenty-five percent of respondents with a college education and 23% of those with some post high school education reported access to health care as a top issue compared to 12% of respondents with a high school education or less.
- Twenty-seven percent of respondents in the top 40 percent household income bracket reported access to health care compared to 17% of those in the middle 20 percent income bracket or 15% of respondents in the bottom 40 percent household income bracket.

Table 62. Access to Health Care as a Top Community Health Issue by Demographic Variables for 2018[®]

Table 62. Access to Health Care as	a Top Comi
	2018
TOTAL	20%
Gender ¹	1.0
Male	16
Female	23
Age	
18 to 24	17
25 to 34	24
35 to 44	21
45 to 54	21
55 to 64	20
65 and Older	15
Race ¹	
White	23
African American	14
Other	23
Hignoria Origin	
Hispanic Origin Hispanic	15
Non-Hispanic	20
Non-Hispanic	20
Education ¹	
High School or Less	12
Some Post High School	23
College Graduate	25
Household Income ¹	
Bottom 40 Percent Bracket	15
Middle 20 Percent Bracket	17
Top 40 Percent Bracket	27
Marital Status	
Married	21
Not Married	19

[®]Percentages occasionally may differ by 1 or 2 percentage points from the Appendix as a result of rounding, recoding variables and response category distribution.

¹demographic difference at p≤0.05 in 2018

Infectious Diseases as a Top Community Health Issue

- Seventeen percent of respondents reported infectious diseases, such as whooping cough, tuberculosis, or sexually transmitted diseases, as one of the top three community health issues.
- Male respondents were more likely to report infectious diseases as one of the top community health issues (19%) compared to female respondents (15%).
- Forty-nine percent of respondents 18 to 24 years old reported infectious diseases compared to 9% of those 65 and older or 8% of respondents 55 to 64 years old.
- African American respondents were more likely to report infectious diseases as a top issue (34%) compared to white respondents (9%) or respondents of another race (8%).
- Hispanic respondents were more likely to report infectious diseases (48%) compared to non-Hispanic respondents (14%).
- Thirty percent of respondents with a high school education or less reported infectious diseases as one of the top community health issues compared to 15% of those with some post high school education or 7% of respondents with a college education.
- Twenty-six percent of respondents in the bottom 40 percent household income bracket reported infectious diseases compared to 13% of those in the top 40 percent income bracket or 11% of respondents in the middle 20 percent household income bracket.
- Unmarried respondents were more likely to report infectious diseases as a top issue compared to married respondents (20% and 12%, respectively).

Table 63. Infectious Diseases as a Top Community Health Issue by Demographic Variables for 2018[®]

Table 63. Infectious Diseases as a T	Гор Commu
	2018
TOTAL	17%
Gender ¹	
Male	19
Female	15
Age^1	
18 to 24	49
25 to 34	13
35 to 44	15
45 to 54	12
55 to 64	8
65 and Older	9
Race ¹	
White	9
African American	34
Other	8
Hispanic Origin ¹	
Hispanic	48
Non-Hispanic	14
Education ¹	
High School or Less	30
Some Post High School	15
College Graduate	7
Household Income ¹	
Bottom 40 Percent Bracket	26
Middle 20 Percent Bracket	11
Top 40 Percent Bracket	13
Marital Status ¹	
Married Married	12
Not Married	20
1 10t Mailiou	20

[®]Percentages occasionally may differ by 1 or 2 percentage points from the Appendix as a result of rounding, recoding variables and response category distribution.

Violence or Crime as a Top Community Health Issue

- Sixteen percent of respondents reported violence or crime as one of the top three community health issues.
- Twenty-five percent of respondents 18 to 24 years old reported violence or crime as one of the top community health issues compared to 14% of those 45 to 54 years old or 10% of respondents 25 to 44 years old.
- African American respondents were more likely to report violence or crime (25%) compared to white respondents (13%) or respondents of another race (9%).

¹demographic difference at p≤0.05 in 2018

- Hispanic respondents were more likely to report violence or crime (39%) compared to non-Hispanic respondents (14%).
- Twenty percent of respondents with a high school education or less reported violence or crime as a top issue compared to 15% of those with a college education or 14% of respondents with some post high school education.

Table 64. Violence or Crime as a Top Community Health Issue by Demographic Variables for 2018[®]

Table 64. Violence of Crime as a	2018
TOTAL	16%
Gender	
Male	18
Female	15
Age ¹	
18 to 24	25
25 to 34	10
35 to 44	10
45 to 54	14
55 to 64	20
65 and Older	21
Race ¹	
White	13
African American	25
Other	9
Hispanic Origin ¹	
Hispanic	39
Non-Hispanic	14
Education ¹	
High School or Less	20
Some Post High School	14
College Graduate	15
Household Income	
Bottom 40 Percent Bracket	18
Middle 20 Percent Bracket	17
Top 40 Percent Bracket	13
Marital Status	
Married	14
Not Married	18

[®]Percentages occasionally may differ by 1 or 2 percentage points from the Appendix as a result of rounding, recoding variables and response category distribution.

¹demographic difference at p≤0.05 in 2018

Overweight or Obesity as a Top Community Health Issue

- Fifteen percent of respondents reported overweight or obesity as one of the top three community health issues.
- Female respondents were more likely to report overweight or obesity as one of the top three health issues (20%) compared to male respondents (11%).
- Respondents 18 to 24 years old were more likely report overweight or obesity (26%) compared to those 55 to 64 years old (10%) or respondents 65 and older (6%).
- Non-Hispanic respondents were more likely to report overweight or obesity as a top issue (16%) compared to Hispanic respondents (7%).
- Respondents with a college education were more likely to report overweight or obesity (19%) compared to those with a high school education or less (16%) or respondents with some post high school education (12%).

Table 65. Overweight or Obesity as a Top Community Health Issue by Demographic Variables for 2018[®]

TOTAL 15% Gender¹ Male	Table 65. Overweight or Obesity a	as a Top Com
Gender¹ Male 11 Female 20 Age¹ 26 18 to 24 26 25 to 34 15 35 to 44 21 45 to 54 14 55 to 64 10 65 and Older 6 Race White 15 African American 16 Other 19 Hispanic Origin¹ 7 Non-Hispanic 7 Non-Hispanic 16 Education¹ 16 Education¹ 16 Some Post High School 12 College Graduate 19		2018
Male 11 Female 20 Age¹ 26 18 to 24 26 25 to 34 15 35 to 44 21 45 to 54 14 55 to 64 10 65 and Older 6 Race White 15 African American 16 Other 19 Hispanic Origin¹ 7 Non-Hispanic 7 Non-Hispanic 16 Education¹ 16 Education¹ 16 Some Post High School 12 College Graduate 19	TOTAL	15%
Male 11 Female 20 Age¹ 26 18 to 24 26 25 to 34 15 35 to 44 21 45 to 54 14 55 to 64 10 65 and Older 6 Race White 15 African American 16 Other 19 Hispanic Origin¹ 7 Non-Hispanic 7 Non-Hispanic 16 Education¹ 16 Education¹ 16 Some Post High School 12 College Graduate 19		
Female 20 Age¹ 26 18 to 24 26 25 to 34 15 35 to 44 21 45 to 54 14 55 to 64 10 65 and Older 6 Race White 15 African American 16 Other 19 Hispanic Origin¹ 7 Non-Hispanic 7 Non-Hispanic 16 Education¹ 16 Education¹ 16 Some Post High School 12 College Graduate 19		
Age¹ 26 25 to 34 15 35 to 44 21 45 to 54 14 55 to 64 10 65 and Older 6 Race White 15 African American 16 Other 19 Hispanic Origin¹ 7 Non-Hispanic 7 Non-Hispanic 16 Education¹ 16 Education¹ 16 Some Post High School 12 College Graduate 19		
18 to 24 26 25 to 34 15 35 to 44 21 45 to 54 14 55 to 64 10 65 and Older 6 Race White 15 African American 16 Other 19 Hispanic Origin¹ 7 Non-Hispanic 7 Non-Hispanic 16 Education¹ 16 Education¹ 16 Some Post High School 12 College Graduate 19	Female	20
18 to 24 26 25 to 34 15 35 to 44 21 45 to 54 14 55 to 64 10 65 and Older 6 Race White 15 African American 16 Other 19 Hispanic Origin¹ 7 Non-Hispanic 7 Non-Hispanic 16 Education¹ 16 Education¹ 16 Some Post High School 12 College Graduate 19	Age ¹	
35 to 44 45 to 54 14 55 to 64 65 and Older Race White African American Other Hispanic Origin¹ Hispanic Non-Hispanic Education¹ High School or Less Some Post High School College Graduate 21 44 55 14 55 16 10 66 Race White 15 46 17 19 Hispanic 16 Fundamental origin² 16 16 Fundamental origin² 16 17 18 18 18 18 18 18 18 18 18 18 18 18 18		26
45 to 54 55 to 64 10 65 and Older Race White African American Other Hispanic Origin¹ Hispanic Non-Hispanic Education¹ High School or Less Some Post High School College Graduate 14 14 15 16 17 18 18 19 19 19 10 11 11 11 11 11 11 11 11 11 11 11 11	25 to 34	15
55 to 64 65 and Older Race White African American Other Hispanic Origin¹ Hispanic Non-Hispanic Education¹ High School or Less Some Post High School College Graduate 10 6 High 65 10 11 15 16 16 17 18 18 18 18 18 18 18 18 18 18 18 18 18	35 to 44	21
Race White 15 African American 16 Other 19 Hispanic Origin¹ Hispanic 7 Non-Hispanic 16 Education¹ High School or Less 16 Some Post High School 12 College Graduate 19	45 to 54	14
Race White 15 African American 16 Other 19 Hispanic Origin¹ Hispanic 7 Non-Hispanic 16 Education¹ High School or Less 16 Some Post High School 12 College Graduate 19	55 to 64	10
White 15 African American 16 Other 19 Hispanic Origin¹ Hispanic 7 Non-Hispanic 16 Education¹ High School or Less 16 Some Post High School 12 College Graduate 19	65 and Older	6
White 15 African American 16 Other 19 Hispanic Origin¹ Hispanic 7 Non-Hispanic 16 Education¹ High School or Less 16 Some Post High School 12 College Graduate 19	Daga	
African American Other 19 Hispanic Origin¹ Hispanic Non-Hispanic Education¹ High School or Less Some Post High School College Graduate 16 16 17 18 19		15
Other 19 Hispanic Origin¹ Hispanic 7 Non-Hispanic 16 Education¹ High School or Less 16 Some Post High School 12 College Graduate 19		_
Hispanic Origin ¹ Hispanic 7 Non-Hispanic 16 Education ¹ High School or Less 16 Some Post High School 12 College Graduate 19		
Hispanic 7 Non-Hispanic 16 Education ¹ High School or Less 16 Some Post High School 12 College Graduate 19	Other	19
Non-Hispanic 16 Education ¹ High School or Less 16 Some Post High School 12 College Graduate 19	Hispanic Origin ¹	
Education ¹ High School or Less Some Post High School College Graduate 19	Hispanic	7
High School or Less 16 Some Post High School 12 College Graduate 19	Non-Hispanic	16
High School or Less 16 Some Post High School 12 College Graduate 19	Education ¹	
Some Post High School 12 College Graduate 19		16
College Graduate 19		12
•		
Household Income	<u> </u>	
Bottom 40 Percent Bracket 17		
Middle 20 Percent Bracket 14	Middle 20 Percent Bracket	
Top 40 Percent Bracket 17	Top 40 Percent Bracket	17
Marital Status	Marital Status	
Married 15		15
Not Married 16	Not Married	

[®]Percentages occasionally may differ by 1 or 2 percentage points from the Appendix as a result of rounding, recoding variables and response category distribution.

Mental Health or Depression as a Top Community Health Issue

- Fifteen percent of respondents reported mental health or depression as one of their top three community health issues.
- Twenty-one percent of respondents 25 to 34 years old, 20% of those 45 to 54 years old and 19% of respondents 55 to 64 years old reported mental health or depression as one of the top community health issues compared to 8% of respondents 18 to 24 years old.

¹demographic difference at p≤0.05 in 2018

- White respondents were more likely to report mental health or depression (18%) compared to respondents who were non-white and non-African American (14%) or African American respondents (11%).
- Twenty-two percent of respondents with a college education reported mental health or depression as a top issue compared to 17% of those with some post high school education or 7% of respondents with a high school education or less.
- Twenty-three percent of respondents in the middle 20 percent household income bracket reported mental health or depression compared to 16% of those in the top 40 percent income bracket or 14% of respondents in the bottom 40 percent household income bracket.

Table 66. Mental Health or Depression as a Top Community Health Issue by Demographic Variables for 2018[®]

Table 66. Mental Health or Depres	2018
TOTAL	15%
Gender	
Male	14
Female	16
Age ¹	
18 to 24	8
25 to 34	21
35 to 44	15
45 to 54	20
55 to 64	19
65 and Older	9
Race ¹	
White	18
African American	11
Other	14
Hispanic Origin	
Hispanic	10
Non-Hispanic	16
Education ¹	
High School or Less	7
Some Post High School	17
College Graduate	22
Household Income ¹	
Bottom 40 Percent Bracket	14
Middle 20 Percent Bracket	23
Top 40 Percent Bracket	16
Marital Status	
Married	15
Not Married	15

[®]Percentages occasionally may differ by 1 or 2 percentage points from the Appendix as a result of rounding, recoding variables and response category distribution.

¹demographic difference at p≤0.05 in 2018

Alcohol Use or Abuse as a Top Community Health Issue

- Nine percent of respondents reported alcohol use or abuse as one of their top three community health issues.
- Male respondents were more likely to report alcohol use or abuse as one of the top community health issues (12%) compared to female respondents (7%).
- Eighteen percent of respondents 25 to 34 years old reported alcohol use or abuse compared to 4% of respondents 45 to 54 years old.
- Twelve percent of respondents who were non-white and non-African American and 11% of white respondents reported alcohol use or abuse as a top issue compared to 5% of African American respondents.
- Non-Hispanic respondents were more likely to report alcohol use or abuse (10%) compared to Hispanic respondents (4%).
- Respondents with a college education were more likely to report alcohol use or abuse as one of the top community health issues (13%) compared to those with a high school education or less (8%) or respondents with some post high school education (6%).

Table 67. Alcohol Use or Abuse as a Top Community Health Issue by Demographic Variables for 2018[®]

Table 67. Alcohol Use of Abuse as	a Top Com
	2018
TOTAL	9%
Gender ¹	
Male	12
Female	7
Age ¹	
18 to 24	7
25 to 34	18
35 to 44	7
45 to 54	4
55 to 64	9
65 and Older	8
Race ¹	
White	11
African American	5
Other	12
Hispanic Origin ¹	
Hispanic	4
Non-Hispanic	10
Education ¹	
High School or Less	8
Some Post High School	6
College Graduate	13
Household Income	
Bottom 40 Percent Bracket	9
Middle 20 Percent Bracket	8
Top 40 Percent Bracket	12
Marital Status	
Married	9
Not Married	9

[®]Percentages occasionally may differ by 1 or 2 percentage points from the Appendix as a result of rounding, recoding variables and response category distribution.

Access to Affordable Healthy Food as a Top Community Health Issue

- Six percent of respondents reported access to affordable healthy food as one of the top three health issues.
- Non-Hispanic respondents were more likely to report access to affordable healthy food as one of the top community health issues (6%) compared to Hispanic respondents (2%).
- Eight percent of respondents with a college education reported access to affordable healthy food compared to 5% of those with some post high school education or 4% of respondents with a high school education or less.

¹demographic difference at p≤0.05 in 2018

• Married respondents were more likely to report access to affordable healthy food as a top issue compared to unmarried respondents (7% and 4%, respectively).

Table 68. Access to Affordable Healthy Food as a Top Community Health Issue by Demographic Variables for 2018°

2018°	
	2018
TOTAL	6%
Gender	
Male	5
Female	6
Age	
18 to 24	5
25 to 34	5
35 to 44	8
45 to 54	9
55 to 64	4
65 and Older	3
Race	
White	6
African American	5
Other	2
Hispanic Origin ¹	
Hispanic	2
Non-Hispanic	6
Ton Hispanic	O
Education ¹	
High School or Less	4
Some Post High School	5
College Graduate	8
C	
Household Income	
Bottom 40 Percent Bracket	5
Middle 20 Percent Bracket	6
Top 40 Percent Bracket	8
Marian Garant	
Marital Status ¹	7
Married	7
Not Married	4

[®]Percentages occasionally may differ by 1 or 2 percentage points from the Appendix as a result of rounding, recoding variables and response category distribution.

¹demographic difference at p≤0.05 in 2018

Tobacco Use as a Top Community Health Issue

- Five percent of respondents reported tobacco use as one of their top three community health issues.
- Male respondents were more likely to report tobacco use as one of the top community health issues (9%) compared to female respondents (2%).
- Eighteen percent of respondents 25 to 34 years old reported tobacco use as a top community health issue compared to 2% of those 35 to 44 years old or 0% of respondents 18 to 24 years old.
- Respondents who were non-white and non-African American were more likely to report tobacco use (13%) compared to white respondents (5%) or African American respondents (4%).
- Hispanic respondents were more likely to report tobacco use (11%) compared to non-Hispanic respondents (5%).
- Eight percent of respondents in the top 40 percent household income bracket reported tobacco use as a top issue compared to 5% of those in the bottom 40 percent income bracket or 2% of respondents in the middle 20 percent household income bracket.

Table 69. Tobacco Use as a Top Community Health Issue by Demographic Variables for 2018[®]

Table 69. Tobacco Use as a Top C	Community H
	2018
TOTAL	5%
Gender ¹	
Male	9
Female	2
Age ¹	
18 to 24	0
25 to 34	18
35 to 44	2
45 to 54	3
55 to 64	3 3 3
65 and Older	3
Race ¹	
White	5
African American	4
Other	13
Hispanic Origin ¹	
Hispanic Hispanic	11
•	5
Non-Hispanic	3
Education	
High School or Less	4
Some Post High School	7
College Graduate	4
Household Income ¹	
Bottom 40 Percent Bracket	5
Middle 20 Percent Bracket	2
Top 40 Percent Bracket	8
Marital Status	
Married	5
Not Married	5
Descentages occasionally may differ	. hr: 1 on 2 mono

[®]Percentages occasionally may differ by 1 or 2 percentage points from the Appendix as a result of rounding, recoding variables and response category distribution.

Environmental Issues as a Top Community Health Issue

- Five percent of respondents reported environmental issues (air, water, wind turbine, animal waste) as one of their top three community health issues.
- Nine percent of respondents 55 to 64 years old reported environmental issues as one of the top community health issues compared to 4% of those 25 to 34 years old or 0% of respondents 18 to 24 years old.

¹demographic difference at p≤0.05 in 2018

• Nine percent of respondents in the middle 20 percent household income bracket reported environmental issues compared to 5% of those in the top 40 percent income bracket or 4% of respondents in the bottom 40 percent household income bracket.

Table 70. Environmental Issues as a Top Community Health Issue by Demographic Variables for 2018[®]

Table 70. Environmental issues as a	2018
TOTAL	5%
TOTAL	3%
Gender	
Male	5
Female	6
remaie	O
Age^1	
18 to 24	0
25 to 34	4
35 to 44	6
45 to 54	6
55 to 64	9
65 and Older	6
03 and Older	O
Race	
White	6
African American	
Other	3 5
	5
Hispanic Origin	
Hispanic	3
Non-Hispanic	3 5
Education	
High School or Less	5
Some Post High School	6
College Graduate	5
Ç	
Household Income ¹	
Bottom 40 Percent Bracket	4
Middle 20 Percent Bracket	9
Top 40 Percent Bracket	5
Marital Status	
Married	7
	4
Not Married	4

[©]Percentages occasionally may differ by 1 or 2 percentage points from the Appendix as a result of rounding, recoding variables and response category distribution. 1 demographic difference at p≤0.05 in 2018

Affordable Health Care as a Top Community Health Issue

- Four percent of respondents reported affordable health care as one of the top three community health issues.
- Seven percent of respondents 35 to 44 years old reported affordable health care as one of the top community health issues compared to 4% of those 45 to 54 years old or 0% of respondents 18 to 24 years old.
- Six percent of white respondents reported affordable health care compared to 5% of respondents who were non-white and non-African American or less than one percent of African American respondents.
- Hispanic respondents were more likely to report affordable health care (11%) compared to non-Hispanic respondents (4%).
- Six percent of respondents with a college education reported affordable health care as a top issue compared to 5% of those with some post high school education or 2% of respondents with a high school education or less.
- Nine percent of respondents in the top 40 percent household income bracket reported affordable health care as one of the top community health issues compared to 3% of those in the middle 20 percent income bracket or 2% of respondents in the bottom 40 percent household income bracket.
- Married respondents were more likely to report affordable health care compared to unmarried respondents (9% and 2%, respectively).

Table 71. Affordable Health Care as a Top Community Health Issue by Demographic Variables for 2018[®]

Table 71. Affordable Health Care	as a Top Con
	2018
TOTAL	4%
Gender	
Male	4
Female	5
Age ¹	
18 to 24	0
25 to 34	5
35 to 44	7
45 to 54	4
55 to 64	6
65 and Older	5
Race ¹	
White	6
African American	<1
Other	5
Hispanic Origin ¹	
Hispanic	11
Non-Hispanic	4
Education ¹	
High School or Less	2
Some Post High School	2 5
College Graduate	6
Household Income ¹	
Bottom 40 Percent Bracket	2
Middle 20 Percent Bracket	3
Top 40 Percent Bracket	2 3 9
Marital Status ¹	
Married	9
Not Married	2
1100 111411104	

[®]Percentages occasionally may differ by 1 or 2 percentage points from the Appendix as a result of rounding, recoding variables and response category distribution.

Lack of Physical Activity as a Top Community Health Issue

- Four percent of respondents reported lack of physical activity as one of the top three community health issues.
- Respondents who were non-white and non-African American were more likely to report lack of physical activity as one of the top community health issues (9%) compared to white respondents (4%) or African American respondents (3%).

¹demographic difference at p≤0.05 in 2018

- Non-Hispanic respondents were more likely to report lack of physical activity (4%) compared to Hispanic respondents (0%).
- Respondents with a college education were more likely to report lack of physical activity as a top issue (6%) compared to those with a high school education or less (5%) or respondents with some post high school education (1%).

Table 72. Lack of Physical Activity as a Top Community Health Issue by Demographic Variables for 2018[®]

Table 72. Lack of Fifysical Activity	2018
TOTAL	4%
Gender	
Male	5
Female	5 3
Age	
18 to 24	5
25 to 34	7
35 to 44	3
45 to 54	3
55 to 64	5 7 3 3 2 2
65 and Older	2
Race ¹	
White	4
African American	3 9
Other	9
Hispanic Origin ¹	
Hispanic	0
Non-Hispanic	4
Education ¹	
High School or Less	5
Some Post High School	1
College Graduate	6
Household Income	
Bottom 40 Percent Bracket	4
Middle 20 Percent Bracket	3
Top 40 Percent Bracket	4
Marital Status	
Married	3
Not Married	4

[®]Percentages occasionally may differ by 1 or 2 percentage points from the Appendix as a result of rounding, recoding variables and response category distribution.

¹demographic difference at p≤0.05 in 2018

Lead Poisoning as a Top Community Health Issue

- Three percent of respondents reported lead poisoning as one of the top three community health issues.
- Six percent or respondents 35 to 44 years old reported lead poisoning as a top community health issue compared to 1% of those 25 to 34 years old or 0% of respondents 18 to 24 years old.
- Four percent of white respondents reported lead poisoning compared to 2% of respondents who were non-white and non-African American or 1% of respondents who were African American.
- Seven percent of Hispanic respondents reported lead poisoning as a top community health issue compared to 2% of non-Hispanic respondents.
- Four percent of respondents with a college education reported lead poisoning as one of the top community health issues compared to 3% of those with some post high school education or less than one percent of respondents with a high school education or less.
- Married respondents were more likely to report lead poisoning as a top issue compared to unmarried respondents (4% and 2%, respectively).

Table 73. Lead Poisoning as a Top Community Health Issue by Demographic Variables for 2018[®]

Table /3. Lead Poisoning as a To	p Community
	2018
TOTAL	3%
Gender	
Male	3
Female	2
Age^1	
18 to 24	0
25 to 34	1
35 to 44	6
45 to 54	
55 to 64	3 2 2
65 and Older	2
Race ¹	
White	4
African American	1
Other	2
o iner	_
Hispanic Origin ¹	
Hispanic	7
Non-Hispanic	2
Education ¹	
High School or Less	<1
Some Post High School	3
College Graduate	4
Household Income	
Bottom 40 Percent Bracket	3
Middle 20 Percent Bracket	<1
Top 40 Percent Bracket	3
Top 40 I electil blacket	3
Marital Status ¹	
Married	4
Not Married	2
Dorgantages occasionally may differ	r by 1 or 2 nora

[®]Percentages occasionally may differ by 1 or 2 percentage points from the Appendix as a result of rounding, recoding variables and response category distribution.

Driving Problems/Aggressive Driving/Drunk Driving as a Top Community Health Issue

- Three percent of respondents reported driving problems/aggressive driving/drunk driving as one of the top three community health issues.
- Four percent of respondents with a college education reported driving problems/aggressive driving/drunk driving as one of the top community health issues compared to 3% of those with some post high school education or less than one percent of respondents with a high school education or less.

¹demographic difference at p≤0.05 in 2018

- Six percent of respondents in the middle 20 percent household income bracket reported driving problems/aggressive driving/drunk driving compared to 2% of respondents in the bottom 40 percent income bracket or in the top 40 percent household income bracket.
- Married respondents were more likely to report driving problems/aggressive driving/drunk driving as a top issue compared to unmarried respondents (4% and 2%, respectively).

Table 74. Driving Problems/Aggressive Driving/Drunk Driving as a Top Community Health Issue by Demographic Variables for 2018[®]

Variables for 2018 ^o	
	2018
TOTAL	3%
Gender	
Male	3
Female	2
Age	
18 to 24	3
25 to 34	<1
35 to 44	
45 to 54	2 3 3 4
55 to 64	3
65 and Older	4
Race	
White	3
African American	2
Other	1
Hispanic Origin	
Hispanic	<1
Non-Hispanic	3
Education ¹	
High School or Less	<1
Some Post High School	3
College Graduate	4
conege cramman	•
Household Income ¹	
Bottom 40 Percent Bracket	2
Middle 20 Percent Bracket	6
Top 40 Percent Bracket	2
1 op 1 o 1 0 1 0 1 0 1 0	_
Marital Status ¹	
Married	4
Not Married	2
On 1100 Marinea	_

[®]Percentages occasionally may differ by 1 or 2 percentage points from the Appendix as a result of rounding, recoding variables and response category distribution.

¹demographic difference at p≤0.05 in 2018

APPENDIX A: QUESTIONNAIRE FREQUENCIES	
ATTENDIA A. QUESTIONNAIRE PREQUENCIES	

Milwaukee County February 20 through May 12, 2018

[Some totals may be more or less than 100% due to rounding and response category distribution. Percentages in the report and in the Appendix may differ by one or two percentage points as a result of combining several response categories for report analysis.]

1.	Currently, what is your primary type of health care coverage? Is it through [INTERVIEWER NOTE: If
	Respondent answer "Obamacare, the exchange, Affordable Care Act (ACA)", code as private insurance]

Private insurance	55%
Medicaid including medical assistance, Title 19 or	
Badger Care	16
Medicare	18
Or do you not have health care coverage	9
Not sure	

2. Did everyone in your household have health insurance during all, part or none of the past 12 months?

All	86%
Part	5
None	3
Not sure	6

3. In the past 12 months, have you or anyone in your household not taken prescribed medication due to prescription costs?

Yes	12%
No	88
Not sure	<1

4. In the past 12 months, did you or anyone in your household not get the medical care needed?

Yes	→CONTINUE WITH Q5
No92	→GO TO Q6
Not sure<1	

5. Why did someone in your household not receive the medical care needed? [100 Respondents; More than 1 response accepted]

Uninsured	38%
Cannot afford to pay	38
Poor medical care	
Co-payments too high	16
Insurance did not cover it	
Unable to get appointment	
Not enough time	
Other (2% or less)	

6. In the past 12 months, did you or anyone in your household not get the dental care needed?

Yes	5% →CONTINUE WITH Q7
No85	G →GO TO Q8
Not sure<1	→GO TO Q8

7.	Why did someone in your household not receive the dental care needed? [196 Respondents; More than 1 response accepted]
	Uninsured
	Cannot afford to pay34
	Insurance did not cover it
	Unable to find dentist to take Medicaid or other
	insurance
	Unable to get appointment
	Co-payments too high
	Other (2% or less)
8.	In the past 12 months, did you or anyone in your household not get the mental health care needed?
	Yes
	No
	Not sure \longrightarrow GO TO Q10
9.	Why did someone not receive the mental health care you thought you needed? [43 Respondents: Multiple responses accepted]
	Insurance did not cover it
	Unable to get appointment24
	Poor mental health care
	Cannot afford to pay15
	Uninsured
	Don't know where to go
	Lack of transportation
	Specialty physician not in area
	Other (2% or less)
10.	When you are sick, to which one of the following places do you usually go? Would you say
	Doctor's or nurse practitioner's office62%
	Public health clinic or community health center 2
	Hospital outpatient department
	Hospital emergency room
	Urgent care center
	Some other kind of place or<1
	No usual place 8
	Not sure<1
11.	Do you have a primary care doctor, nurse practitioner, physician assistant or primary care clinic where you regularly go for check-ups and when you are sick?
	Yes82%
	No
	Not sure<1

	Yes	36%		
	No			
	Not sure			
	long has it been since you last visited a dentist or dialists, such as orthodontists.	ental clinic fo	or any reason?	Include visits
	Less than a year ago	63%		
	1 to 2 years ago			
	3 to 4 years ago			
	5 or more years ago or			
	Never			
	Not sure			
. Could you	please tell me in what year you born? [CALCULA]	TE AGE]		
	18 to 24 years old	150/		
	25 to 34 years old			
	35 to 44 years old			
	45 to 54 years old			
	55 to 64 years old			
	65 and older			
	Yes No Not sure	52		
the past three	No	52 <1 doctor, nurse		
	No	52<1 doctor, nurse of Yes	No	Not Sure
6. You l	No	52 <1 doctor, nurse of Yes 28%	No 72%	Not Sure <1%
16. You l 17. Your	No	52 	No 72% 76	Not Sure <1% <1
16. You l 17. Your 18. You l	No	52 <1 doctor, nurse of Yes 28%	No 72%	Not Sure <1%
6. You l 7. Your 8. You l 9. You l	No	52 	No 72% 76	Not Sure <1% <1
16. You l 17. Your 18. You l 19. You l anxie	No	Yes 28% 24 8	No 72% 76 91	Not Sure <1% <1 <1
6. You l 7. Your 8. You l 9. You l anxie disord	No	52 	No 72% 76	Not Sure <1% <1
6. You la 7. Your la 8. You la anxie disord 20. You l	No	Yes 28% 24 8	No 72% 76 91	Not Sure <1% <1 <1
16. You l 17. Your 18. You l 19. You l anxie disord 20. You l	No	Yes 28% 24 8	No 72% 76 91	Not Sure <1% <1 <1 <1 0
16. You l 17. Your 18. You l 19. You l anxie disord 20. You l (wor	No	Yes 28% 24 8	No 72% 76 91 77	Not Sure <1% <1 <1 <1 <1 <1 <1 <1 <1 <1 <1 <1 <1 <1
16. You l 17. Your 18. You l 19. You l anxie disord 20. You l (wor	No	Yes 28% 24 8	No 72% 76 91	Not Sure <1% <1 <1 <1 0
16. You l 17. Your 18. You l 19. You l anxie disord 20. You l (wom 21. Do yo	No	Yes 28% 24 8 23	No 72% 76 91 77 90 87	Not Sure <1% <1 <1 <1 <1 <1 <1 <1 <1 <1 <1 <1 <1 <1
16. You l 17. Your 18. You l 19. You l anxie disord 20. You l (wom 21. Do yo	Not sure	Yes 28% 24 8 23 10 12 rink? One ser	No 72% 76 91 77 90 87	Not Sure <1% <1 <1 <1 <1 <1 <1 <1 <1 <1 <1 <1 <1 <1
16. You l 17. Your 18. You l 19. You l anxie disord 20. You l (wom 21. Do yo	No	23 10 12 rink? One ser	No 72% 76 91 77 90 87	Not Sure <1% <1 <1 <1 <1 <1 <1 <1 <1

23. On an <u>average day</u> , ho vegetable or 6 ounces		you eat? One serving is ½ cup of c	ooked or raw
	One or fewer servings	40%	
	wo servings		
	Three or more servings		
	Not sure		
causes some increase		cling, vacuuming, gardening or anyt al week, not including at work, on h me?	
Z	Zero days	17%	
	to 4 days		
5	to 7 days	36	
	Vot sure		
breathing or heart rate for at least 20 minutes	Not including at work, in a usual at a time? Yero days		
	to 2 days		
	to 7 days Not sure		
1	NOT SUITE		
FEMALES ONLY			
Now I have some question	ns about women's health.		
	x-ray of each breast to look for bro 6 Respondents 50 and Older]	east cancer. How long has it been sin	nce you had your
Within the Within the Within the 5 or more y Never	past year (anytime less than 12 me past 2 years (1 year, but less than past 3 years (2 years, but less than past 5 years (3 years, but less than years ago	2 years ago) 17 n 3 years ago) 8 n 5 years ago) 4 8	
27. A bone density scan h		or fractures or are in the early stages	of osteoporosis.
Y	es	83%	
N	10	16	
N	Not sure	2	

MALE & FEMALE RESPONDENTS 50 AND OLDER

	test is a test that may use a special kit at home to determine whether the stool contains blood. It is it been since you had a blood stool test? [499 Respondents 50 and Older]
W W	ithin the past year (anytime less than 12 months ago)
	ever
	copy is where a flexible tube is inserted into the rectum to view the bowel for signs of cancer or
other health p	problems. How long has it been since you had your last sigmoidoscopy? dents 50 and Older]
	ithin the past year (anytime less than 12 months ago) 2%
	ithin the past 2 years (1 year, but less than 2 years ago) 2
	ithin the past 5 years (2 years, but less than 5 years ago) 3
	ithin the past 10 years (5 years but less than 10 years ago) 4 years ago or more
	ever
	ot sure
W W W W 10	ithin the past year (anytime less than 12 months ago)
	ast 30 days, about how often would you say you felt sad, blue, or depressed?
	Never
	Sometimes 23
	Nearly always 5
	Always 3
	Not sure<1
32. In the past ye	ar have you ever felt so overwhelmed that you considered suicide?
	Yes
	No94
	Not sure 0

Now I'd like to ask you about alcohol. An alcoholic drink is one can or bottle of beer, one glass of wine, one can or bottle of wine cooler, one cocktail or one shot of liquor.

33.	Considering all types	of alcoholic	beverages, l	now many	times durin	g the past	month did	you have	five or more
	drinks on an occasion	? (MALES)	(4 or more	drinks FEI	MALES)				

0 times	68%
1 time	10
2 or more times	22
Not sure	<1

During the past year, has ANYONE IN YOUR HOUSEHOLD, INCLUDING YOURSELF, experienced any kind of problem such as legal, social, personal, physical or medical in connection with ...?

		Yes	No	Not Sure
34.	Drinking alcohol	2%	98%	<1%
35.	Marijuana	1	99	0
36.	Cocaine, heroin or other street drugs	2	98	<1
37.	Misuse of prescription drugs or over-the-			
	counter drugs	1	99	<1
38.	Gambling	<1	99	<1

In the past 30 days, did you use...

		Yes	No	Not Sure
39.	Cigars, cigarillos, or little cigars	6%	94%	0%
40.	Electronic cigarettes, also known as e-cigarettes	4	96	0

Now I'd like to talk to you about regular tobacco cigarettes....

41. Do you now smoke tobacco cigarettes every day, some days or not at all?

Every day	12%
Some days	
Not at all	84
Not sure	0

42. Which statement best describes the rules about smoking inside your home...

Smoking is not allowed anywhere inside your home	78%
Smoking is allowed in some places or at some times	10
Smoking is allowed anywhere inside your home or	2
There are no rules about smoking inside your home	10
Not sure	0

Now, I have a few questions to ask about you and your household.

43. Gender [DERIVED, NOT ASKED]

Male48	3%
Female52	2

	About how tall are y	you weigh, without shoes? you, without shoes? DY MASS INDEX (BMI)]
		Not overweight/obese
		Overweight
		Obese38
46.	Are you Hispanic or	Latino?
		Yes
		No
		Not sure 0
47.	Which of the follow	ring would you say is your race?
		White55%
		Black, African American32
		Asian
		Native Hawaiian or other Pacific Islander<1
		American Indian or Alaska Native
		Or another race (please specify)
		Multiple races
		Not sure<1
48.	What is your curren	t marital status?
		Single and never married47%
		A member of an unmarried couple
		Married32
		Separated 1
		Divorced
		Widowed 6
		Not sure 0
49.	What is the highest	grade level of education you have completed?
		8th grade or less
		Some high school 6
		High school graduate or GED26
		Some college23
		Technical school graduate
		College graduate
		Advanced or professional degree16
		Not sure<1
50.	What county do you	live in? [FILTER]
		Milwaukee

51. What city, town or village do you legally reside in? [FILTER]

Milwaukee city	59%
Wauwatosa	6
West Allis	4
Cudahy	3
Greenfield	3
Oak Creek	3
All others (2% or less)	12

52. What is the zip code of your primary residence?

53224	8%
53209	6
53218	6
53210	5
53221	5
53206	4
53207	4
53213	4
53215	4
53223	4
53110	3
53154	3
53212	3
53214	3
53216	3
53217	3
53219	3
53220	3
53222	3
53226	3
All others (2% or less)	20

LANDLINE SAMPLE ONLY [FOR SAMPLING PURPOSES]

- 53. 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.
- 54. How many of these telephone numbers are residential numbers?
- 55. Do you have a cell phone that you use mainly for personal use?

ALL RESPONDENTS

		_		_		_
56	W/hot ic	vour annual	household	incomo	hatara	tovoc?
JU.	vv nat 18	voui aiiiiuai	Household	IIICOIIIC	Deloie	taxes:

Less than \$10,00011%)
\$10,000 to \$20,00012	
\$20,001 to \$30,00011	
\$30,001 to \$40,000	
\$40,001 to \$50,00010	
\$50,001 to \$60,000	
\$60,001 to \$75,000	
\$75,001 to \$90,000	
\$90,001 to \$105,000 5	
\$105,001 to \$120,000 4	
\$120,001 to \$135,000	
Over \$135,000	
Not sure	
No answer 5	

57. How many adults, INCLUDING YOURSELF, live in the household?

One	.39%
Two	.45
Three or more	.16
Not sure	. 0

58. How many children under the age of 18 are living in the household?

None67%	G →GO TO Q81
One	~
Two or more	→CONTINUE WITH Q59
Not sure	→GO TO O81

For the next questions, we would like to talk about the [RANDOM SELECTED] child.

59. Do you make health care decisions for [HIM/HER]? [426 Respondents]

Yes76%	→ CONTINUE WITH Q60
No24	
Not sure 0	→GO TO Q81

60. What is the age of the child? [325 Respondents]

12 or younger	68%
13 to 17 years old	
Not sure	

61. Is this child a boy or girl? [325 Respondents]

Boy	.43%
Girl	.57
Not sure	

62.	. Was there a time during the last 12 months that you felt your chil needed? [323 Respondents]	d did not get the medical care [HE/SHE]
	Yes	→ CONTINUE WITH Q63
	No97	\rightarrow GO TO Q64
	Not sure 0	→ GO TO Q64 → GO TO Q64
	TVOL Suite	7 00 10 004
63.	. Why did your child not receive the medical care needed? [11 Res	pondents; Multiple Responses Accepted]
	Don't know where to go	4 respondents
	Uninsured	2 respondents
	Specialty physician not in area	2 respondents
	All others	4 respondents
64.	A personal doctor or nurse is a health professional who knows you health history. This can be a general doctor, a pediatrician, a speciassistant. Do you have one or more persons you think of as your [325 Respondents]	tialist, a nurse practitioner or a physician
	Yes	95% → CONTINUE WITH O65
	No	•
	Not sure	•
	preventive care? [309 Respondents] Yes	93%
	No	
	Not sure	
66.	Specialists are doctors like surgeons, heart doctors, allergists, psy specialize in one area of health care. Was there a time during the specialist but did not? [323 Respondents] Yes	past 12 months your child needed to see a
67.	. Why did your child not see a specialist needed? [15 Respondents	; Multiple Responses Accepted]
	Physical barriers	3 respondents
	Specialty physician not in area	
	Cannot afford to pay	-
	All others	

68.	8. Was there a time during the last 12 months that you felt you needed? [323 Respondents]	our chil	d did no	t get the dental care [HE/SHE]
	Yes	6%	\rightarrow C	ONTINUE WITH Q69
	No			O TO Q70
	Not sure			O TO Q70
	Not sure	. 0	, 0	10 10 0/0
69.	9. Why did your child not receive the dental health care need	led? [18	Respoi	ndents; Multiple Responses Accepted]
	Unable to get appointment			.5 respondents
	Can't find dentist who accepts child's	s insura	nce	.4 respondents
	Cannot afford to pay			.3 respondents
	No dental insurance			.2 respondents
	Not enough time			.2 respondents
	All others			.2 respondents
70.	0. Does your child have asthma? [323 Respondents]			
	Yes		17%	
	No			
	Not sure			
71.	On an average school day, how many hours does your chill student, say "Weekday"] [322 Respondents]			If Respondent says child not a
	Does not watch TV on average school			
	Less than 1 hour per day			
	1 hour per day			
	2 hours per day			
	3 hours per day			
	4 hours per day			
	5 or more hours per day			
	Not sure	•••••	0	
72.	2. On an average school day, how many hours does your child for something that is not school work? Count time spent of tablet, a smartphone, texting, YouTube, Instagram, Faceboon a student, say "Weekday"] [322 Respondents]	n thing	s such as	s Xbox, PlayStation, an iPad or other
	Does not play video games, etc. in av	erage		
	school day		35%	
	Less than 1 hour per day			
	1 hour per day			
	2 hours per day			
	3 hours per day			
	4 hours per day			
	5 or more hours per day			
	Not sure			

Č I	days, how many times did your child oprite? Do not include diet soda or diet p	drink a can, bottle, or glass of soda or pop, such as pop. [323 Respondents]
	Did not drink soda or pop in the pas	st 7 days 61%
	1 to 3 times during past 7 days	
	4 to 6 times during the past 7 days.	
	1 time per day	
	2 times per day	
	3 times per day	
	4 or more times per day	
	Not sure	
74. When your child of Children 2 year	•	where did [HE/SHE] usually sleep? [70 Respondents
	Crib or bassinette	84%
	Pack n' Play	4
	Couch or chair	
	Swing	
	Car	
	Car seat	0
	Floor	0
	In bed with you or another person	11
	Not sure	
·	Always	
76. During the past 6 5 to 17 years old]	•	appy, sad or depressed? [231 Respondents of Children
	Always	
	Nearly always	
	Sometimes	
	Seldom	
	Never	
	Not sure	
	2 months, has your child experienced a s of Children 5 to 17 years old]	ny bullying?
	Yes	16% →CONTINUE WITH Q78
	No	
	Not sure	`

Physically bullied for Cyber or electronicall threatened by email, c	example spreading mean rumors or kept of example, being hit or kickedy bullied for example, teased, taunted, hell phone, Facebook postings, texts or o	umiliated or ther electronic
	v many days was your child physically a their heart rate and made them breathe h 17 years old]	
Zero or one d	ay 8%	
	four days29	
	days58	
	5	
Tiot sure		
80. [0 to 4 DAYS OF PHYSICAL AC more days? [87 Respondents: Mult	TIVITY] Why was your child not physiciple responses accepted]	cally active for at least 60 minutes on
Child does no	t like to be physically active21%	
	21	
School/homey	work/other activities14	
Sick/ill	13	
Likes to play	video games or on computer11	
	7	
No afterschoo	ol activities 5	
	l is not safe to be outside 3	
Prefers to wat	ch TV 3	
All others	7	
The next series of questions deal with p	personal safety issues. ade you afraid for your personal safety?	
or. Burning the past year has anyone in	ade you arraid for your personal safety.	
Yes		→CONTINUE WITH Q82
No	91	→GO TO Q83
Not sure	0	→GO TO Q83
spouse, boyfriend or girlfriend, par	people to you? For example, a spouse, rent, brother or sister, friend, acquaintanhat all your responses are strictly confid	ce, a stranger, a child, or someone
Friand	41%	
	33	
	8	
Royfriend or	girlfriend 5	
Parent		
	7	
Someone else	,	

78. What type of bullying did your child experience? [231 Respondents of Children 5 to 17 years old]

83. During the past year has anyone pushed, kicked, slapped, hit or otherwise hurt you?				
Yes				
No	91 →GO TO Q85			
Not sure	0 →GO TO Q85			

84. What relationship is this person or people to you? For example, a spouse, spouse who is now separated, exspouse, boyfriend or girlfriend, parent, brother or sister, friend, acquaintance, a stranger, a child, or someone else? [123 Respondents; More than 1 response accepted]

Stranger	39%
Friend	
Acquaintance	. 7
Child	
Boyfriend or girlfriend	. 2
Parent	
Someone else	.15

85. Finally, what are the three largest health concerns in your community?

Chronic diseases (like diabetes or heart disease) or cancer34%
Illegal drug use or prescription/over-the-counter drug abuse27
Access to health care (physical, dental or mental care)20
Infectious diseases such as whooping cough, tuberculosis, or
sexually transmitted diseases
Violence or crime
Overweight or obesity
Mental health or depression
Alcohol use or abuse
Access to affordable healthy food
Tobacco use
Environmental issues (air, water, wind turbines, animal waste) 5
Affordable health care
Lack of physical activity
Lead poisoning
Driving problems/aggressive driving/drunk driving
Aging/aging population 1
Infant mortality<1

APPENDIX B: SURVEY METHODOLOGY

SURVEY METHODOLOGY

2018 Community Health Survey

The 2018 Milwaukee County Community Health Survey was conducted from February 20 through May 12, 2018. A total of 1,312 respondents were scientifically selected so that the survey would be representative of all adults 18 and older. The sampling strategy was two-fold. 1) A random-digit-dial landline sample of telephone numbers which included listed and unlisted numbers. The respondent within each household was randomly selected by computer based on the number of adults in the household (n=647). 2) A cell-phone only sample where the person answering the phone was selected as the respondent (n=665). For the landline sample, weighting was based on the number of adults in the household and the number of residential phone numbers, excluding fax and computer lines, to take into account the probability of selection. For the cell-phone only sample, it was assumed the respondent was the primary cell phone user. Combined, post-stratification was conducted by sex and age to reflect the 2010 census proportion of these characteristics in the county. With a sample size of 656, the margin of error is ±4%. The margin of error for smaller subgroups is larger.

2015 Community Health Survey

The 2015 Milwaukee County Community Health Survey was conducted from March 16 through July 14, 2015. A total of 1,967 respondents were scientifically selected so that the survey would be representative of all adults 18 and older. The sampling strategy was two-fold. 1) A random-digit-dial landline sample of telephone numbers which included listed and unlisted numbers. The respondent within each household was randomly selected by computer based on the number of adults in the household (n=1,292). 2) A cell-phone only sample where the person answering the phone was selected as the respondent (n=675). For the landline sample, weighting was based on the number of adults in the household and the number of residential phone numbers, excluding fax and computer lines, to take into account the probability of selection. For the cell-phone only sample, it was assumed the respondent was the primary cell phone user. Combined, post-stratification was conducted by sex and age to reflect the 2010 census proportion of these characteristics in the county. With a sample size of 1,967, the margin of error is $\pm 2\%$. The margin of error for smaller subgroups is larger.

2012 Community Health Survey

The 2012 Milwaukee County Community Health Survey was conducted from June 20 through November 7, 2012. A total of 1,970 respondents were scientifically selected so that the survey would be representative of all adults 18 and older. The sampling strategy was two-fold. 1) A random-digit-dial landline sample of telephone numbers which included listed and unlisted numbers. The respondent within each household was randomly selected by computer based on the number of adults in the household (n=1,428). 2) A cell-phone only sample where the person answering the phone was selected as the respondent (n=542). For the landline sample, weighting was based on the number of adults in the household and the number of residential phone numbers, excluding fax and computer lines, to take into account the probability of selection. For the cell-phone only sample, it was assumed the respondent was the primary cell phone user. Combined, post-stratification was conducted by sex and age to reflect the 2010 census proportion of these characteristics in the county. With a sample size of 1,970, the margin of error is ±2%. The margin of error for smaller subgroups is larger.

2009 Community Health Survey

The 2009 Milwaukee County Community Health Survey was conducted from September 30, 2009 through January 28, 2010. One thousand nine hundred seventy-six respondents were scientifically selected so that the survey would be representative of all adults 18 and older. The sampling strategy was two-fold. 1) A random-digit-dial landline sample of telephone numbers which included both listed and unlisted numbers. The respondent within each household was randomly selected by computer based on the number of adults in the household (n=1,415). 2) A cell-phone only sample where the person answering the phone was selected as the respondent (n=561). A reimbursement of \$20 was offered to respondents to cover the cost of incoming minutes. For the landline sample, weighting was based on the number of adults in the household and the number of residential phone numbers, excluding fax and computer lines, to take into account the probability of selection. For the cell-phone only sample, it was assumed the respondent was the primary cell phone user. Combined, post-stratification was conducted by sex

and age to reflect the 2000 census proportion of these characteristics in the county. With a sample size of 1,976, the margin of error is $\pm 2\%$. The margin of error for smaller subgroups is larger.

2006 Community Health Survey

The 2006 Milwaukee County Community Health Survey was conducted from March 14 through August 11, 2006. A total of 3,271 random adults 18 and older within the community were interviewed by telephone. Due to the nature of the study, some areas were random digit dial which included unlisted and listed numbers while other areas were listed numbers only. Respondents within each household were randomly selected by computer based on the number of adults in the household. At least 8 attempts were made to contact a respondent. Survey respondents were weighted based on the number of adults in the household and the number of residential phone numbers, excluding fax and computer lines, to take into account the probability of selection. Post-stratification was also done by sex and age to reflect the 2000 census proportion of these characteristics in the county. With a sample size of 3,271, the margin of error is $\pm 2\%$. The margin of error for smaller subgroups is larger.