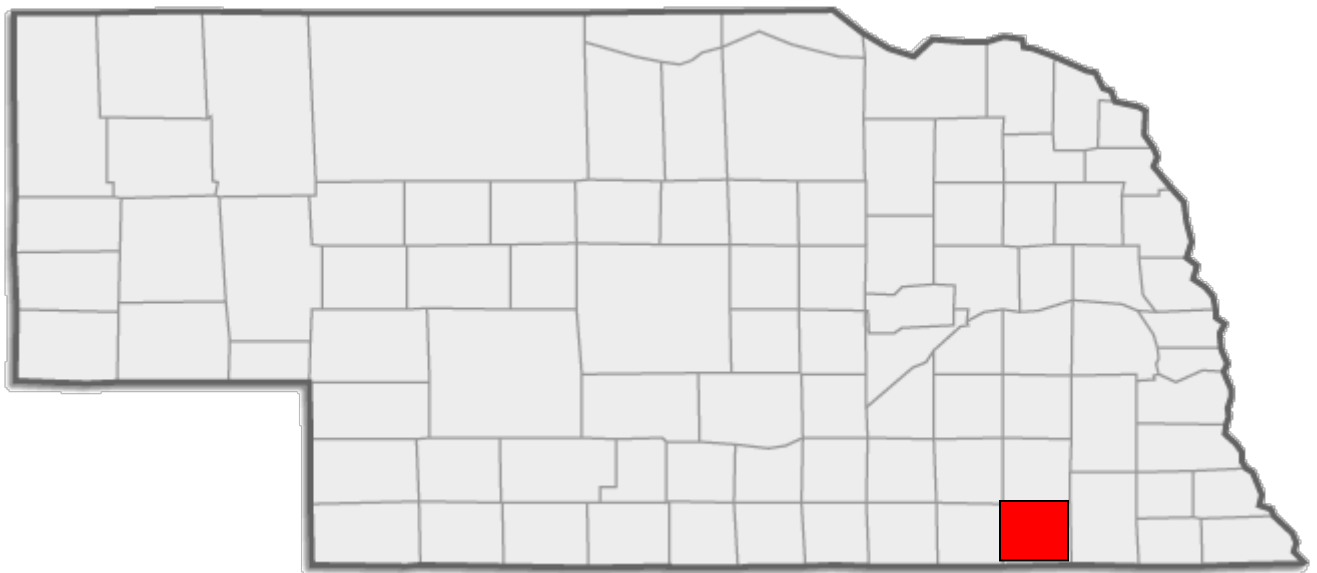


A Behavioral Risk Factor Surveillance Survey System

Findings for Jefferson County Nebraska



November 2010
(survey completed in 2009 - 2010)

**Public
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Solutions

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INTRODUCTION

Since the 1980's, the State of Nebraska has conducted the CDC Behavioral Risk Factor Surveillance System (BRFSS) at the statewide level to better understand health problems and risk behaviors among adults in the state. The BRFSS is a telephone survey of adults aged 18 and older that includes questions related to a variety of health issues of state and national concerns. While this system provides valuable statewide information, the sample size was not sufficient to provide meaningful data regarding health problems and behaviors for counties or multicounty regions of the state.

With the establishment of the system of local health departments in 2002, the need for county and regional data became apparent. In 2007, the Nebraska BRFSS sample was drawn to allow the collection of data for all 20 public health department regions in the state. Though this more targeted collection was indeed valuable, each county within the Public Health Solutions District Health Department (PHS) service area is unique in composition and needs, so in the interest of the general public and in support of local leadership as they focus on county level planning, PHS began contracting for a special 'over-sampling' of each county in the district – one county per year. Jefferson County was over-sampled in 2009 to provide this more locally relevant data.

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Executive Summary

Purpose

The purpose of this report is to provide a brief summary of 2009 Behavioral Risk Factor Surveillance System (BRFSS) results for Jefferson County. In addition to the standard BRFSS format, special questions were added to address local concerns raised in previously completed community health assessment projects, and to provide health and risk information about the minority population of the county. The results of this survey will be used to help identify or confirm health concerns and disparities, and support the development and implementation of strategies that can successfully address them.

Background

The BRFSS is a telephone survey of adults aged 18 and older which asks questions about a variety of health topics that are important for public health in Nebraska. Since the 1980's, Nebraska has conducted the BRFSS at the statewide level to gain a better understanding of the health problems and risk behaviors among adults. This system provides valuable information at the state level, but sample sizes at the local health department (LHD) level were insufficient in the past to provide useful data for many of the smaller rural health departments. In order to make the results more meaningful, each department began contracting to increase the sample at the local health department level. In 2007, Public Health Solutions District Health Department initiated a county-by-county BRFSS plan to gather more precise information about health and risk behaviors in each unique county we serve. The plan allows for one county to be oversampled each year from 2007 through 2012 – Jefferson County was selected for oversampling in 2009.

Health disparities exist when there is unequal disease, death and/or access to health care among populations based on certain demographic characteristics: race, gender, income, geographic location, and/or age. Eliminating these health disparities is a key goal of Nebraska Healthy People 2010, and a difficult one to achieve. There were not enough minority respondents to allow for analysis and comparison of their responses to other ethnic groups, but the percentage of total respondents who were of non-white racial origins was similar to demographics in the general population as of the 2000 Census. Of the Jefferson County respondents to the 2009 oversample, 2.7% was non-white (4.6% after statistical weighting). The minority population in Jefferson County in 2000 was 1.6% of the total population, the largest minority population being of Hispanic origins (1.3% of the county population). This is an increase from 1990, when just 0.6% of the total Jefferson County population was an ethnic minority. Other demographics relating to vulnerability were also collected, including age, work status, income, and whether or not the respondent has health insurance. Again, responses within each demographic were not sufficient to allow for in-depth analysis or comparisons.

Methods

As part of the statewide BRFSS survey, telephone interviews were conducted with 560 randomly selected non-institutionalized adults aged 18 and older living throughout the PHS district. PHS directed an additional “oversample” in one county per year to gain even more locally relevant insight into health issues facing our area, so in 2009 an additional 1,146 residents of Jefferson County were interviewed.

Data Collection and Editing. Telephone interviews tend to oversample people in certain age and gender demographics, so the responses were weighted to reduce the effect of these biases. Age-adjustment was used for most prevalence estimates in this report. This report includes only the weighted responses. Calculations based on very small sample sizes are not considered to be reliable, so percentages were not calculated for subgroups of the population when their sample size was less than 50. Unless otherwise noted, responses of “Don’t know/Not sure” and “Refused” were removed from the denominators when calculating percentages in this report. District and state comparisons are from the 2007 BRFSS survey completed across the state of Nebraska and collated by health district.

Study Limitations. The sample sizes for this survey were too small to conduct meaningful analyses using certain statistical tools. Although formal statistical significance testing is not used in this report, findings are still useful in identifying differences and potential “problem” areas.

Major Areas of Concern

Results within each survey ‘category’ were overall mixed, but when comparing county response rates against the PHS district and state as well as state and national health goals, the following 3 priority areas stood out:

- Health Status (e.g. chronic disease, disability)
- Preventive Care (e.g. cancer screening)
- Healthy Choices/Behaviors (e.g. physical activity, nutrition, weight control)

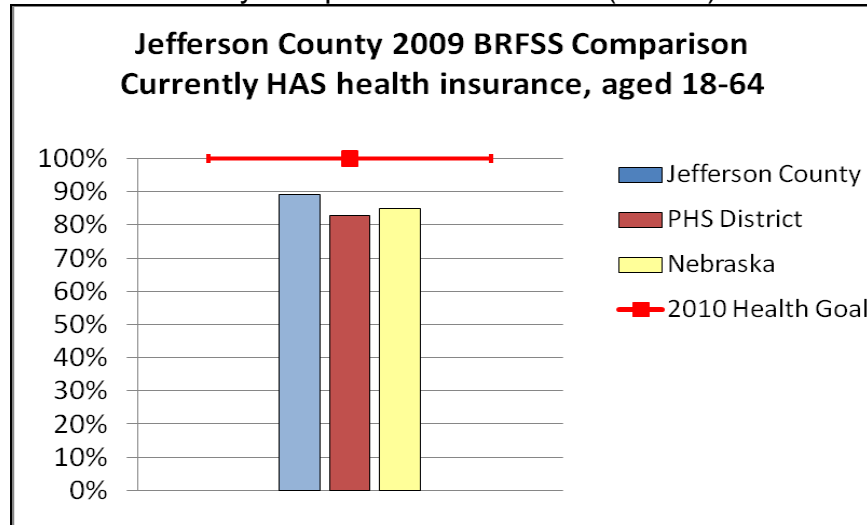
Select Findings from the Jefferson County BRFSS

*The weighted data can be found in Appendix 1, in the Table(s) indicated in *italics* below each heading.

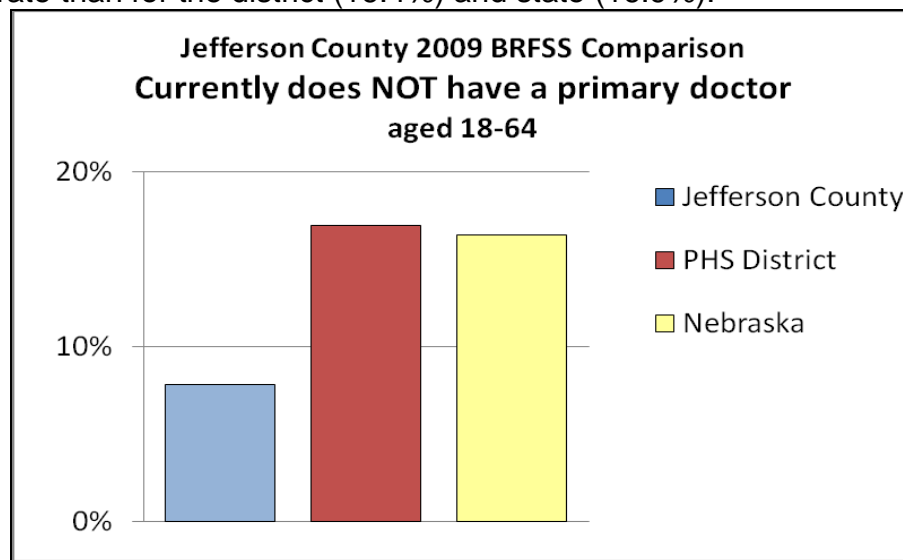
Access to Health Care

(Table 2)

- + A larger percentage of Jefferson County residents (89.1%) had health insurance at the time of the survey compared to the district (82.9%) and state (85%).



- A slightly higher percentage of Jefferson County residents (10.3%) reported being unable to see a doctor in the previous year due to costs compared to district (9.5%) and state (10%) rates.
- + 7.8% of Jefferson County residents reported NOT having access to at least one health care professional whom they consider to be a personal physician, a much lower rate than for the district (16.4%) and state (16.9%).



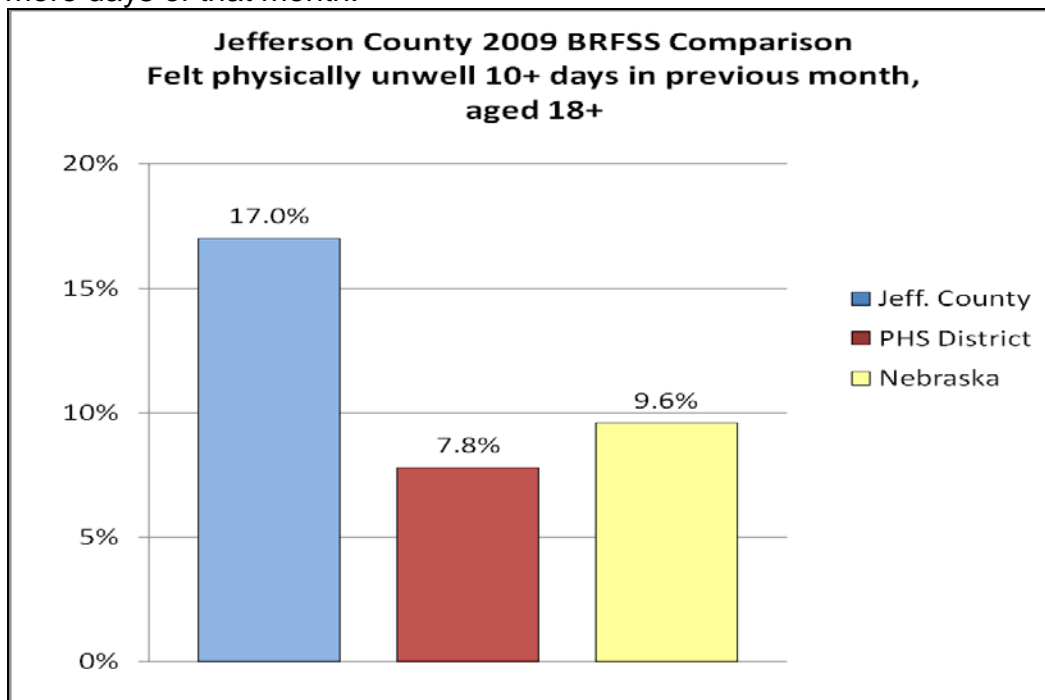
- ± Six out of 10 county residents (60.9%) indicated they had a routine check up in the previous year, similar to rates for the PHS district (60%) and state (62%).

Health Status

(Table 3)

Residents were asked to rate their general health.

- A strong majority of Jefferson County respondents (81.2%) considered their general health “good”, “very good” or “excellent” (i.e. “not at risk”), but the county rate was lower than district (89.5%) and state (88.4%) rates.
- 37.5% of Jefferson County respondents reported having felt physically unwell at least 1 day during the previous month; 17% reported feeling unwell for 10 or more days of that month.



Mental Health

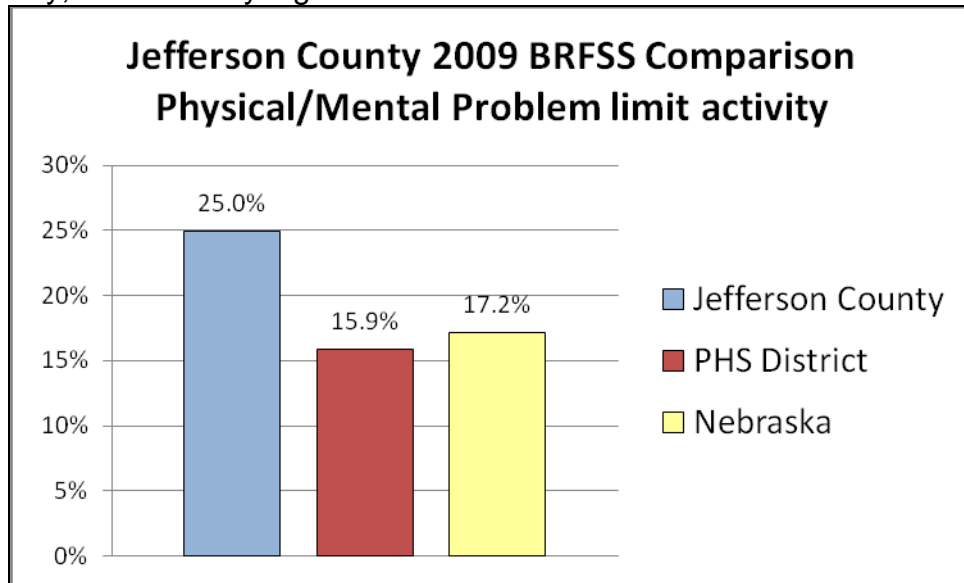
(Table 4)

- 37.8% of Jefferson County respondents reported feeling mentally unwell at least 1 day the previous month.
- More than 15% reported feeling unwell for 10 or more days of that month, compared to 9.4% for district respondents and 9.6% for respondents to the statewide survey.
- 1 in 10 survey responses (10.2%) indicated not enough rest every day of the previous month.

Disability and Quality of Life

(Tables 5, 6)

- + The vast majority of Jefferson County respondents reported they were either “very satisfied” (34.6%) or “satisfied” (59.5%) with their lives.
- 25% of respondents reported that physical or mental problems limited their activity, considerably higher than both district and state rates.



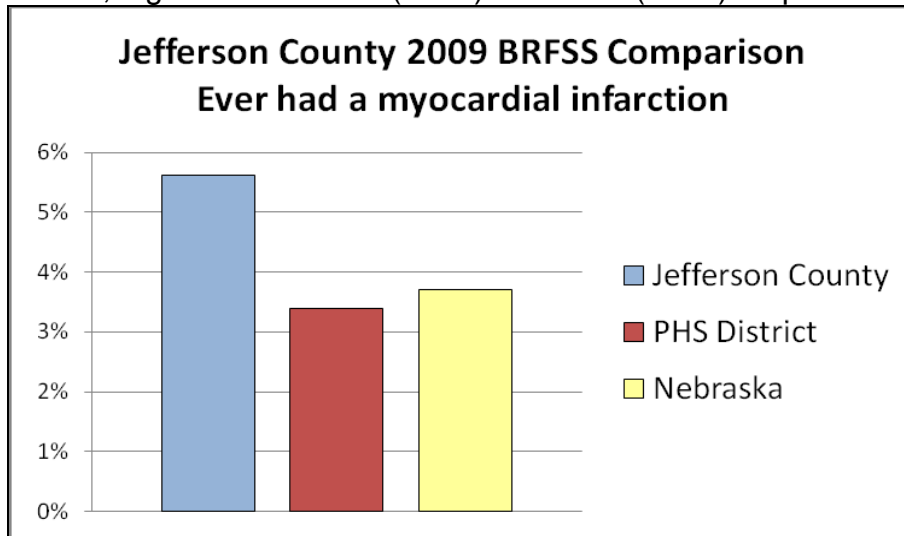
- 41% of county respondents have been told by a health professional that they have arthritis. Of those with arthritis, 47.3% report that their condition limits their usual activity, 35.3% report that arthritis limits their work, and just under 50% report that it limits their social lives “a lot” or “a little”.
- 8.1% of Jefferson County adults said they currently have any health problems requiring them to use special equipment, higher than the district-wide (6%) and state rates (5.9%).
- + Almost three-fourths of Jefferson County adults (73.3%) stated that they “always” or “usually” get the social and emotional support they need.
- 26.4% of county respondents reported providing long-term care to someone.
- Among residents providing long-term care, the largest percentages are caring for a parent (30%), spouse (11.8%), or child (10.9%).
- The primary problems creating a care-giver circumstance were other (29.9%), stroke (21.7%), cancer (9.1%), arthritis (4.4%), Alzheimer’s (4.1%).
- The most commonly difficulties reported by caregivers were other (16.6%), stress (16.2%), not enough time (10.9%), work interference (4.6%), and affect on family relationships (4.5%).

Cardiovascular Disease, High Blood Pressure, Stroke

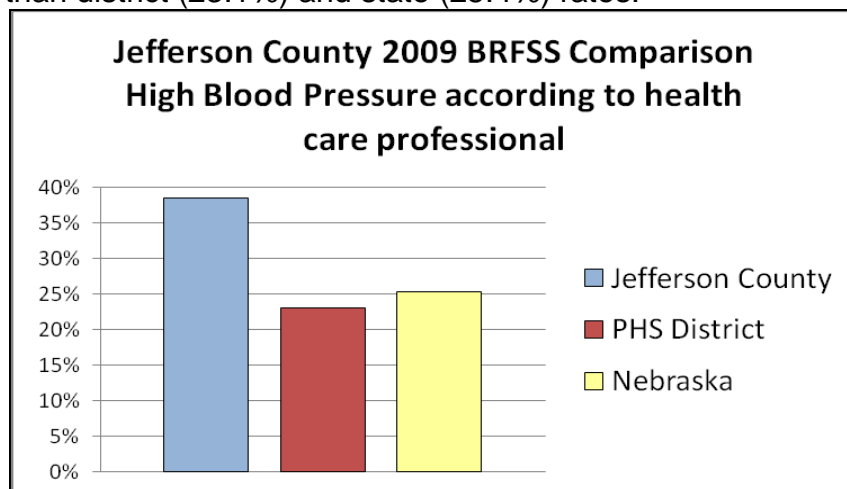
(Tables 7, 8, 9)

Jefferson County adults were more likely than district and state peers to report having been diagnosed with coronary heart disease diagnosis and high blood pressure compared to district and state response rates.

- 4.8% of Jefferson County adults said they had ever been told by a health professional that they have coronary heart disease, slightly higher than the PHS rate (3.1%) and Nebraska (3.6%) rates.
- Among Jefferson County adults, 5.6% stated they had ever been told they had a heart attack, higher than district (3.4%) and state (3.7%) response rates.



- 3.4% of Jefferson County adults reported ever being told they had a stroke, slightly higher than district (2.1%) and state (2.2%) rates.
- More than one-third of Jefferson County residents (38.6%) reported having been told by a health care professional that they had high blood pressure, notably higher than district (23.1%) and state (25.4%) rates.



- + 83% of county respondents had their blood cholesterol levels checked at least once in their lifetimes, a much higher rate than the district (71.4%) and state (76.2%).
- Of those who had their cholesterol checked, 43.2% were told their level was too high, compared to the district (34.1%) and state (31.9%) rates.

Diabetes

(Table 10)

- 55.8% of county respondents have been tested for diabetes sometime in the previous 3 years.
- Among those tested, 5.8% were told they were pre-diabetic.
- 10.9% of Jefferson County respondents reported ever being told they had diabetes. In comparison, 5.6% of PHS adults and 6.7% of Nebraska adults overall were ever diagnosed with diabetes.

Asthma

(Table 11)

- In Jefferson County, 12.8% of adults had ever been told they had asthma, slightly higher than district and state rates (both 11.6%).
- + In Jefferson County, 7.13% of adults stated they currently have asthma, slightly lower than district (7.7%) and Nebraska (8.1%) rates.

HIV

(Table 12)

- In Jefferson County, 18.9% of adults reported having been tested for HIV at least once in their lifetime. The top 3 locations for HIV testing were: private doctor (28%), clinic (25%), and hospital (21%).
- 0.7% of county respondents indicated that they engage in behaviors that place them at risk of contracting HIV.

Alcohol Misuse

(Table 13)

Binge Drinking: For men, five or more drinks of alcohol (beer, wine, wine coolers, cocktails, or liquor) on an occasion, one or more times during the past 30 days. For women, four or more drinks of alcohol on an occasion, one or more times during the past 30 days.

Heavy (Chronic) Drinking: Responses of more than 2 drinks for men and more than 1 drink for women to the question, "One drink is equivalent to a 12-ounce beer, a 5-ounce glass of wine, or a drink with one shot of liquor. During the past 30 days, on the days when you drank, about how many drinks did you drink on the average?"

- + 14.6% of Jefferson County adults reported binge drinking during the past previous 30 days. Among PHS adults, 17.9% engaged in binge drinking in the past month, as did 18.7% of Nebraska adults.
- Heavy drinking was slightly less common overall, with 12.1% of Jefferson County adults reporting this level of alcohol consumption in the past month, but still twice the PHS rate (6%) and even higher still than the state rate (4.5%).

Tobacco Use

(Table 13)

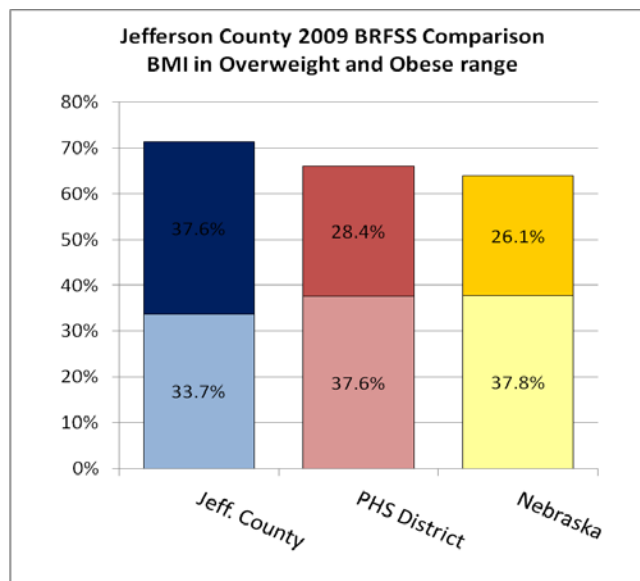
*** Since the time of this survey, Nebraska passed a statewide smoking ban that prohibits smoking indoors at workplaces.

- + In Jefferson County, 15.6% of adults reported currently smoking cigarettes. This prevalence rate is lower than both the PHS area rate (16.4%) and the overall Nebraska smoking rate (20.2%).
- 6.5% of Jefferson County respondents said they currently use chew tobacco.

Overweight and Obesity

(Table 14)

- ± Though more than one-third of Jefferson County adults (33.7%) reported heights and weights that placed them in the “overweight but not obese” category (body mass index of between 25.0 and 29.9), the county rate was lower than PHS and Nebraska rates (37.6% and 37.8%).
- Obesity (BMI or 30.0 or greater) prevalence rates for the county (37.6%) were considerably higher than the district rate (28.4%) and the Nebraska rate (26.1%).

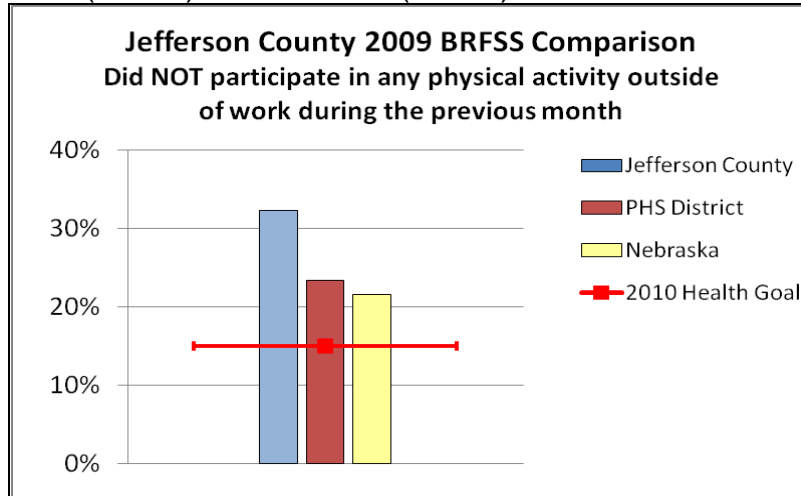


Lighter colors are “overweight but not obese”, darker colors are obese.

Physical Activity and Nutrition

(Table 14)

- Almost one-third of Jefferson County adults (32.2%) did **not** get any physical activity outside of work in the month prior, a considerably higher percentage than the PHS area (23.4%) and the state (21.6%).



- 12.3% of county respondents reported being physically **inactive**; an additional 41% of respondents reported getting **insufficient** physical activity.
- ± 46.8% of county respondents reported getting the recommended amount of moderate/vigorous physical activity, compared to 43.6% for the district and 53% for the state.
- ± More than 1 in five Jefferson County respondents (22.25%) reported getting the recommended 5+ daily servings of fruits and vegetables, slightly higher than the PHS district rate (20.0%) but lower than the Nebraska (24.0%) rate.

Cancer and Cancer Screening

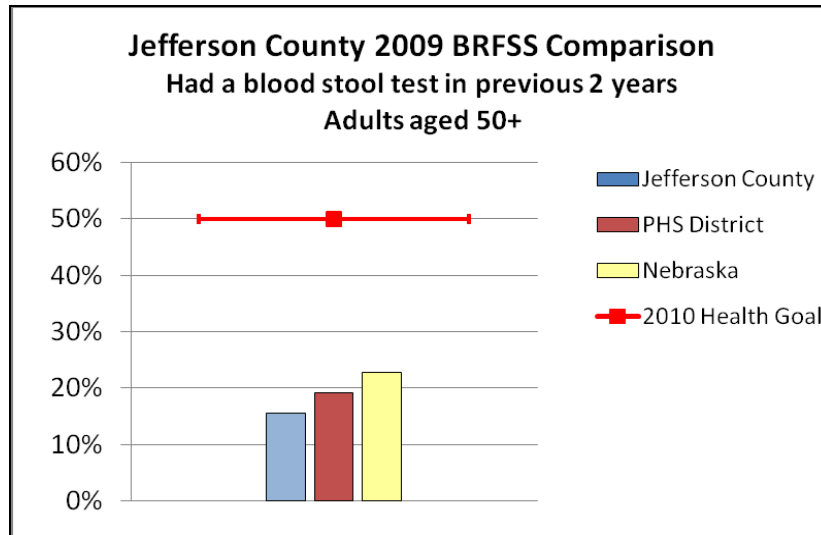
(Tables 15, 16, 17, 18)

- 10.6% of county respondents have had some kind of cancer (90.7% have had only one type, 7.8% have had 2 types).
- The largest proportion of those diagnosed with cancer, 37.4%, were aged 65 or older at the time of diagnosis. 18.3% were under the age of 35 at the time of diagnosis.
- The most common type of recently diagnosed cancer was Skin (not melanoma) at 21.9%, followed by Melanoma at 14.6% and Cervical cancer at 10.7%.

Colon Cancer

- 40.5% of Jefferson County adults aged 50 and older stated they ever had a blood stool test (also known as a fecal occult blood test or FOBT), though only 15.5%

had this test within the previous two years. The two-year county rate is below the district (19.2%) and state (22.8%) rates, and far below the Healthy People 2010 goal for Nebraska and the US.



- ± Less than half of Jefferson County residents (47.7%) in the appropriate age group reported ever having a sigmoidoscopy or colonoscopy to screen for cancer or other problems. This is similar to the district rate (47.6%) but notably lower than the state rate (56.1%).
- ± Only 21% of Jefferson County men aged 50 and older reported having had this colon cancer screen done in the previous 2 years, and about 43.1% reported having one done in the previous 10 years (higher than district and state rates, which were 41.2 and 49.1% respectively).

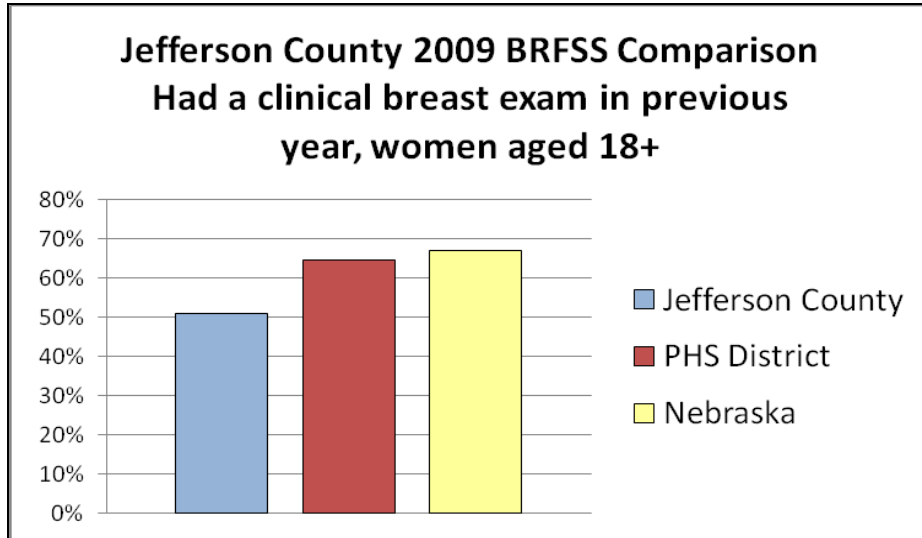
Prostate Cancer

- 71.3% of men aged 50 and older in Jefferson County stated that had a PSA Test to check for prostate cancer sometime in their lifetime. 45.2% of all men in this age group reported having this test within the past year.
- 86.2% of men aged 50 and older in Jefferson County indicated that they had a digital rectal exam at some point in their lifetime (75.3% for those aged 18 and older); 55.7% of all males in this age group reported the exam occurred in the previous two years (46.6% for those aged 18 and older).
- 4.9% of Jefferson County men aged 50 and older stated they had ever been told by a health professional that they have prostate cancer (3.9% for those aged 18 and older).

Breast Cancer

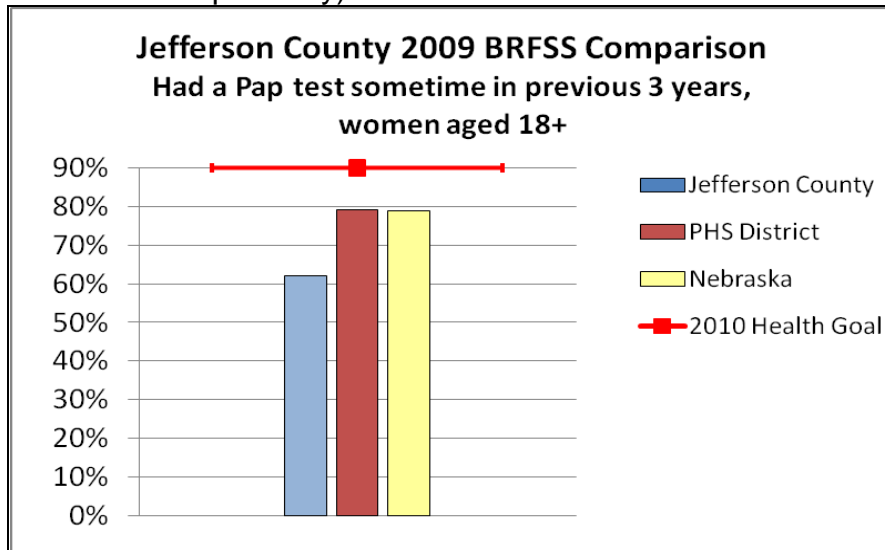
- + 88.1% of women aged 40 and older in Jefferson County stated had a mammogram at some time in their lives. Of those who had this screen, 69.6% reported having it in the past two years. 64.6% of women across the district in this age group reported having a mammogram within the previous 2 years, compared to 69.3% for the state rate.

- More than nine out of ten women (93.7%) aged 18 and older in Jefferson County said they had at some time had a clinical breast examination (CBE).
- 51.1% of Jefferson County women aged 18 and older reported having a breast exam sometime in the previous year, compared to 64.7% for the district and 67.2% for the state.



Cervical Cancer

- 89.2% of women in Jefferson County stated they ever had a Pap test for cervical cancer, lower than district (95.9%) and state (95.5) rates.
- The majority of women in this county aged 18 and older (62%) said their last Pap test occurred within the past three years, lower than district- and state-wide rates (79.1 and 78.9% respectively).



- The percentage of Jefferson County women aged 40 and older with a Pap test in the previous 3 years was slightly higher, at 64.6%.

Immunizations

(Table 19)

- 42.3% of county respondents reported having the flu shot sometime in the previous 12 months.
- 58.6% of Jefferson County residents aged 65 and older stated they had a flu shot in the previous 12 months. In the PHS area, a larger percentage of residents in this age group (67.4%) had a flu shot in the last year. Among Nebraskans aged 65 and older, 76.8% reported having this vaccination.
- Six out of ten Gage County residents aged 65 and older (60.4%) reported ever having a pneumonia shot, lower than the percentages for the PHS area (69.5%) and for Nebraska (71.8%). All three were well below the US and Nebraska Healthy People 2010 goal of 90%.

Emergency Preparedness

(Table 20)

- 78.1% of Jefferson County respondents reported that they would definitely or probably get the flu vaccination in the event of a flu pandemic.
- The majority of residents are comfortable going to a public place for their flu vaccination; 25.5% would definitely go, and 54% would probably go.
- Most county residents would prefer to get information about a pandemic from TV, followed by their doctor and the internet:

Information Source	Percent
TV	46.1
Doctor	28.4
Internet	10.4
Other	4.6
Family/Friends	2.7
State/Local Health Department	2.6
Newspaper	2.6
CDC	1.4
Radio	1.3

- Most county residents would prefer to get information about general emergencies (other than “other”) from the Radio (47.1%), TV (14.3%) and Neighbors (3.4%).
- The majority of respondents claimed their household was prepared (24.5% well-prepared, 61% somewhat prepared) for a disaster.
- Only 14.6% of respondents reported having a disaster evacuation plan, though a much higher proportion of residents reported having adequate supplies in preparation for an emergency:

Supplies	Percentage “Yes”
3-day supply of water	46.4%
3-day supply of food	86%
3-day supply of prescription medication	89.4%
	(5.7% reported not having any prescriptions)

Radio with working batteries	84.7%
Light with working batteries	97.1%

- The primary reasons residents cited for NOT evacuating prior to an emergency were (besides “other”): concern over leaving their property (20.5%), concern over leaving their pets (5.6%), and lack of transportation (2.5%).

Conclusions and Recommendations

Responses to the Jefferson County Behavioral Risk Factor Surveillance Survey generally support the outcomes of earlier community-driven efforts to identify priority local health problems. Prevention of chronic disease in particular was named as a priority concern of PHS residents, and encompasses indicators like cancer screening and behaviors/choices leading to poor health status. Additionally, though “access to care” was not a stand-out category for Jefferson County based on survey responses, there were several individual indicators within this category that warrant monitoring and intervention. Among those are “percentage of residents who could not see a doctor due to cost”, and the date of “last routine checkup”. As with prevention of chronic disease, these indicators are supportive of earlier efforts to characterize priority health issues in the PHS district. It is vital that PHS and other community health partners continue to focus on implementation of programs and services that align with the goals, objectives and strategies developed under the 2007 MAPP assessment project. The complete health improvement plan containing these strategies is available at the following web address (or upon request for hard copy):

http://www.phsneb.org/health_planning/MAPPforaHealthyFuture.html

Though district- and state-wide comparisons are not yet available through this survey, county response rates suggest that sexual violence, particularly sexual assault against children, is an important local issue that PHS will continue to monitor and work towards addressing.

As described in the Executive Summary above, vulnerable populations (including but not limited to low-income residents, children and the elderly and racial minorities) often experience health disparities that only add to their daily and oftentimes lifelong struggle. Due to small population size, response rate comparisons and subsequent analysis were not possible to identify trends among vulnerable populations in Jefferson County. However, PHS will continue to work towards equitable access to health care, and to the information and resources residents need to be healthy.

Appendix 1 – Data Tables

**Table 1
Demographics
Jefferson County Adults (2009 BRFSS)**

Age/Gender	Jefferson County (%)		
	Male	Female	Total
18 – 24	4.95	4.78	9.73
25 – 34	5.87	4.41	10.29
35 – 44	6.39	6.43	12.82
45 – 54	10.44	9.68	20.12
55 – 64	8.74	8.83	17.57
65+	12.42	17.04	29.46
TOTAL by gender	48.82	51.18	100.00
Race/Ethnicity			
White, Non-Hispanic	95.44		
Not white	4.56		
Income (annual)			
< \$15,000	11.28		
\$15,000 - \$24,999	22.80		
\$25,000 - \$34,999	14.93		
\$35,000 - \$49,999	20.37		
\$50,000+	30.63		
Work status			
Employed	38.04		
Self Employed	15.12		
No work > 1 year	1.24		
No work < 1 year	3.74		
Homemaker	6.74		
Student	5.94		
Retired	21.03		
Unable to Work	8.15		
Education			
< High School	7.68		
High School / GED	43.93		
Some College	29.17		
College Graduate	19.22		
Children <18 in household	33.07		
Marital status			
Married	66.72		
Divorced	6.01		
Widowed	8.87		
Separated	1.21		
Never married	16.51		
Unmarried couple	0.67		

Table 2
Access to Health Care
Jefferson County Adults (2009 BRFSS)

	Jefferson County (%)	Public Health Solutions (%)	Nebraska (%)
Currently has NO health insurance (aged 18-64)	10.87	17.1	15.0
Does NOT have at least one personal doctor or health care provider (aged 18+)	7.82	16.9	16.4
Could NOT see a physician due to cost at least once in previous year (aged 18+)	10.3	9.5	10.0
Last routine checkup (aged 18+):		60.0	62.0
Past Year	60.86		
1-2 Years	16.07		
2-5 Years	11.81		
5+ Years	10.63		
Never	0.64		

Table 3
Health Status
Jefferson County Adults, aged 18+ (2009 BRFSS)

	Jefferson County (%)	Public Health Solutions (%)	Nebraska (%)
Self-reported health status		89.5	88.4
Good to Excellent	81.17		
Fair or poor	18.83		
# of days physically not well in previous month		7.8	9.6
None	62.52		
1-9 days	20.47		
10+ days	17.02		

Table 4
Mental Health
Jefferson County Adults, aged 18+ (2009 BRFSS)

	Jefferson County (%)	Public Health Solutions (%)	Nebraska (%)
# of days mentally not well in previous month		9.4	9.6
None	62.20		
1-9 days	22.45		
10+ days	15.36		
# of days with not enough rest in previous month:			
None	30.09		
1-4 days	18.76		
5-9 days	13.19		
10-14 days	9.25		
15-29 days	18.49		
Every Day	10.22		

Table 5
Disability and Quality of Life
Jefferson County Adults, aged 18+ (2009 BRFSS)

	Jefferson County (%)	Public Health Solutions (%)	Nebraska (%)
Physical/mental problems limited activity	24.97	15.9	17.2
Has health problems requiring the use of special equipment	8.09	6.0	5.9
Gets needed social/emotional support:			
Always	42.44		
Usually	30.83		
Sometimes	15.03		
Rarely	4.37		
Never	7.32		
How satisfied with life			
Very satisfied	34.57		
Satisfied	59.49		
Dissatisfied	5.21		
Very dissatisfied	0.73		
Told by health professional that you have arthritis	41.04		
Usual activity limited by arthritis			
Yes, general	47.32		
<i>Work</i>	35.27		
<i>Socializing (a lot or a little)</i>	50.32		
Arthritis symptoms on day of the survey			
Can do most everything	22.97		
Can do most things	39.02		
Can do some things	30.54		
Can hardly do anything	7.48		
Doctor suggested the following to address arthritis symptoms			
Losing weight	42.04		
Exercising	53.94		

Table 6
Disability, care-giving
Jefferson County Adults, aged 18+ (2009 BRFSS)

	Jefferson County (%)
Provides long-term care to someone	26.37
Age of the person you care for	
0-17	4.23
18-24	3.11
25-34	3.08
35-44	10.24
45-54	10.61
55-64	7.73
65+	61.01
Relationship of the person you care for	
Parent	29.84
Parent-in-law	8.79
Child	10.93
Spouse	11.84

	Sibling	4.56
	Grandparent	15.5
	Grandchild	0.81
	Other relative	7.84
	Non-relative	9.9
Main problem of the person being cared for		
	Arthritis	4.41
	Asthma	0.27
	Cancer	9.05
	Diabetes	6.84
	Heart Disease	6.26
	HBP	0.39
	Lung Disease	2.02
	Parkinsons	1.61
	Stroke	21.69
	Blindness	0.51
	Deafness	0.08
	MS	0.19
	Spinal Cord injury	7.0
	TBI	0.42
	Alzheimers	4.11
	ADHD	0.19
	LD	0.36
	CP	0.28
	Other Birth Defect	3.91
	Depression	0.55
	Other	29.86
Which problem does person need most help with		
	Caring for themselves	12.47
	Caring for house	36.55
	Communicating	16.13
	Remembering	2.55
	Seeing/hearing	0.37
	Moving in home	1.84
	Transportation outside	19.1
	Getting along with others	3.58
	Relieving anxiety/depression	7.40
Hours per week giving care		
	1-4	21.6
	5-9	40.14
	10-14	8.68
	15-24	10.01
	25-49	7.66
	50-99	4.6
	100-149	3.39
	150+	3.92
Caregivers' biggest difficulty		
	Financial burden	4.26
	Not time for caregiver	10.89
	No time for family	6.0
	Interferes with work	4.56
	Creates stress	16.18
	Aggravates health	4.07
	Affects family relationships	4.49
	Other difficulty	16.59
	No difficulty	32.96

**Table 7
Cardiovascular Disease
Jefferson County Adults, aged 18+ (2009 BRFSS)**

	Jefferson County (%)	Public Health Solutions (%)	Nebraska (%)
Ever told by health professional you had a myocardial infarction	5.62	3.4	3.7
Had the following heart attack symptoms before being diagnosed			
Jaw, neck, or back pain	76.51		
Lightheaded, faint	71.83		
Chest pain	95.22		
Loss of vision	38.29		
Arm or shoulder pain	93.70		
Shortness of breath	93.47		
Ever told by health professional you had coronary heart disease	4.77	3.1	3.6
Ever told by health professional you had high blood pressure			
Yes	38.59	23.1	25.4
No	60.06		
During pregnancy	0.55		
Pre-hypertensive	0.79		
Using medication to control HBP	78.15		

**Table 8
Cholesterol
Jefferson County Adults, aged 18+ (2009 BRFSS)**

	Jefferson County (%)	Public Health Solutions (%)	Nebraska (%)
Told by health professional that you had high cholesterol (among those who had levels checked)	43.24	34.1	31.9
Ever had cholesterol checked	83.07	71.4	76.2
Last time cholesterol levels were checked			
Previous year	56.85		
1-2 years	13.62		
2-5 years	8.5		
[past 5 yrs, cumulative]	[78.98]	67.1 (in past 5 years)	72.0 (previous 5 years)
5+ years	3.91		
Never	17.11		

**Table 9
Stroke
Jefferson County Adults, aged 18+ (2009 BRFSS)**

	Jefferson County (%)	Public Health Solutions (%)	Nebraska (%)
Ever told by a health professional that you had a stroke	3.4	2.1	2.2
Had the following stroke symptoms			
Sudden confusion	96.59		
Numbness on one side	98.32		
Sudden vision loss	91.47		
Sudden chest pain	43.89		
Sudden dizziness	96.2		
Severe unexp. Headache	78.16		

**Table 10
Diabetes
Jefferson County Adults, aged 18+ (2009 BRFSS)**

	Jefferson County (%)	Public Health Solutions (%)	Nebraska (%)
Tested for diabetes in previous 3 years	55.79		
Ever told that you have pre-diabetes			
Yes	6.45		
During pregnancy	0.68		
Ever told by health professional you had diabetes			
Yes	10.89	5.6	6.7
No	87.94		
During pregnancy	0.05		
Borderline	1.12		

**Table 11
Asthma
Jefferson County Adults, aged 18+ (2009 BRFSS)**

	Jefferson County (%)	Public Health Solutions (%)	Nebraska (%)
Ever told by health professional you have asthma	12.81	11.6	11.6
Currently have asthma	7.13	7.7	8.1

Table 12
HIV
Jefferson County Adults, aged 18+ (2009 BRFSS)

	Jefferson County (%)
Ever tested for HIV	18.91
Location of last HIV test	
Private doctor	28.02
Counseling/testing	1.4
Hospital	21.04
Clinic	24.87
Prison	3.91
Other	4.13
Home	15.11
Unknown	1.54
Used a rapid HIV test	55.83
Engaged in high HIV-risk behavior	0.73

Table 13
Alcohol and Tobacco Use
Jefferson County Adults, aged 18+ (2009 BRFSS)

	Jefferson County (%)	Public Health Solutions (%)	Nebraska (%)
Engaged in binge drinking at least one during previous month	14.56	17.9	18.7
Engaged in heavy drinking over previous month (60+ drinks for males, 30+ drinks for females)	12.09	6.0	4.5
Currently smoke		16.4	20.2
Yes (current)	15.6		
Every day	9.97		
Some days	5.64		
Former	24.38		
Never	60.02		
Quit for at least 1 day in previous month	63.55		
Use of chew tobacco			
Every day	2.34		
Some days	4.11		
Not at all	93.56		

Table 14
Overweight, Physical Activity, and Nutrition
Jefferson County Adults, aged 18+ (2009 BRFSS)

	Jefferson County (%)	Public Health Solutions (%)	Nebraska (%)
Current body mass index			
< 25	28.67		
25-29 (overweight)	33.69	37.6	37.8
30+ (obese)	37.63	28.4	26.1

No physical activity outside of work	32.24	23.4	21.6
Amount of physical activity			
Moderate/Vigorous	46.81	43.6	53.0
Insufficient	40.91		
Inactive	12.28		
# Daily servings of fruits/veges			
<1	6.67		
1-2	39.6		
3-4	31.48		
5+	22.25	20.0	24.0

**Table 15
Cancer
Jefferson County Adults (2009 BRFSS)**

	Jefferson County (%)
Ever told by health professional you have cancer	
Yes	10.55
Yes, only one type	90.72
Yes, two types	7.77
Yes, three or more types	1.51
Age at first cancer diagnosis	
0-17	2.86
18-24	5.96
25-34	9.46
35-44	8.78
45-54	15.14
55-64	16.94
65+	37.43
Unknown	3.43
Most recent type of cancer	
Breast	17.1
Cervix	10.73
Uterus	6.1
Ovary	4.17
Thyroid	1.26
Colon	3.76
Hodgkins	0.48
Leukemia	1.29
Non-Hodgkins	0.22
Prostate	8.17
Melanoma	14.61
Other skin	21.91
Lung	0.92
Bladder	1.03
Renal	0.39
Bone	0.39
Brain	1.47
Unknown	5.98

**Table 16
Cancer Screening, Cervical and Breast
Jefferson County Adults (2009 BRFSS)**

	Jefferson County (%)		Public Health Solutions (%)	Nebraska (%)
	Aged 18+	Aged 40+		
Ever had a PAP test	89.24	96.93	95.9 (aged 18+)	95.5 (aged 18+)
Last had a PAP test				
Previous 3 years	61.98	64.6	79.1 (aged 18+)	78.9 (aged 18+)
3+ years	27.11	32.28		
Never	10.91	3.13		
Ever had a clinical breast exam	93.65	93.74		
Last had a clinical breast exam				
Previous year	51.05	53.67	64.7 (aged 18+)	67.2 (aged 18+)
1-2 years	16.5	18.11		
2+ to 3 years	14.34	8.24		
3+ to 5 years	4.32	5.03		
5+ years	7.36	8.58		
Never	6.43	6.37		
Had a hysterectomy	33.17	41.35		
Ever had a mammogram	70.12	88.09		
Last had a mammogram				
Previous 2 years	55.09	69.62	64.6 (aged 40+)	69.3 (aged 40+)
2+ years	14.74	18.32		
Never	30.17	12.06		

**Table 17
Cancer Screening, Prostate
Jefferson County Adults, aged 50+ (2009 BRFSS)**

	Jefferson County (%)	
	Aged 18+	Aged 50+
Ever had a PSA test	59.04	71.26
Last time had PSA test		
Previous year	36.93	45.19
Previous 2 years	11.66	14.47
Previous 3 years	4.09	4.09
Previous 5 years	3.89	4.93
Previous 5+ years	2.24	2.37
Never	41.19	28.95
Ever had a digital rectal exam	75.32	86.15
Last time had a digital rectal exam		
Previous year	32.16	38.63
Previous 2 years	14.4	17.11
Previous 3 years	6.75	7.61
Previous 5 years	12.63	13.64
Previous 5+ years	8.76	8.72
Never	25.31	14.3
Ever told by physician you have prostate cancer	3.86	4.86

**Table 18
Cancer Screening, Colon
Jefferson County Adults, aged 50+ (2009 BRFSS)**

	Jefferson County (%)	Public Health Solutions (%)	Nebraska (%)
Ever had a fecal occult blood test	40.45		
Last had a fecal occult blood test			
Previous year	9.61		
1+ to 2 years	5.93		
(cumulative, ever in prev. 2 years)	(15.53)	19.2	22.8
2+ to 3 years	5.47		
3+ to 5 years	4.4		
5+ years	14.64		
Never	59.96		
Ever had a sigmoidoscopy or colonoscopy			
Either	47.69	47.6	56.1
Sigmoidoscopy (% of those who had either)	9.85		
Colonoscopy (% of those who had either)	90.15		
Last sigmoidoscopy or colonoscopy			
Previous year	10.37		
1+ to 2 years	10.67		
2+ to 3 years	6.19		
3+ to 5 years	10.1		
5+ to 10 years	5.75		
(cumulative, ever in past 10 years)	(43.05)	41.2	49.1
10+ years	4.29		
Never	52.66		

**Table 19
Immunizations
Jefferson County Adults (2009 BRFSS)**

	Jefferson County (%)		Public Health Solutions, aged 65+ (%)	Nebraska, aged 65+ (%)
	Aged 18+	Aged 65+		
Had a flu shot in previous year	42.34	58.63	67.4	76.8
Ever had a pneumonia shot	32.1	60.41	69.5	71.8

**Table 20
Emergency Preparedness
Jefferson County Adults (2009 BRFSS)**

	Jefferson County (%)
Household prepared for natural disaster	
Well prepared	24.52
Somewhat prepared	61.04
Not prepared	14.45
Household has a disaster evacuation plan	14.61
Household has	
3-day supply of water	46.39

3-day supply of food	85.99
3-day supply of prescription meds	89.42*
Radio w/ working batteries	84.65
Light w/ working batteries	97.13
<i>* 5.74% reported not having any prescriptions, so total is out of 94.26%</i>	
Would leave if mandatory evacuation required	91.61
If no evacuation, why not	
Transportation	2.51
Doubt in officials	2.35
Leaving property	20.52
Personal safety	0.65
Family safety	0.74
Leaving pets	5.55
Traffic	0.38
Health problems	1.47
Other	65.84
Main method of communication	
Landline	24.78
Cell phone	65.56
Email	0.46
2-way radio	0.82
Other	7.37
Main method of getting information about general emergencies	
TV	14.3
Radio	47.12
Internet	2.1
Print media	0.05
Neighbor	3.38
Other	33.05

Table 21
Flu/Pandemic Prevention, Awareness
Jefferson County Adults (2009 BRFSS)

	Jefferson County (%)
How to avoid getting sick	
Don't touch face	24.22
Avoid close contact	42.04
Get vaccinated	30.86
Take anti-viral medications	2.88
How to avoid getting others sick	
Wash hands	28.54
Cover cough	2.57
Stay home	60.56
Get vaccinated	7.41
Other	0.93
Likelihood of getting vaccinated in flu pandemic	
Definitely	27.29
Probably	50.78
Probably not	18.21
Definitely not	3.72
Comfortable with going to public place for vaccination	
Definitely	25.45

	Probably	54.0
	Probably not	17.1
	Definitely not	3.45
Main method of getting information about a pandemic		
	TV	46.07
	Doctor	28.37
	Internet	10.40
	Other	4.63
	Family/Friends	2.70
	State/Local Health Department	2.64
	Newspaper	2.58
	Radio	1.25
Most likely action in a pandemic		
	Check websites	1.96
	Avoid crowds	15.63
	See doctor	39.41
	Get a prescription	4.93
	Avoid travel	0.31
	Wash hands	21.87
	Wear face mask	1.58
	Stay home	3.94
	Stock up on food/medicine	3.72
	Other	6.65
Likelihood of being able to stay home for 1 month during pandemic		
	Very likely	42.33
	Somewhat likely	28.23
	Somewhat unlikely	13.59
	Very unlikely	15.85