# MGH 2016 Community Health Survey Data Output & Analysis

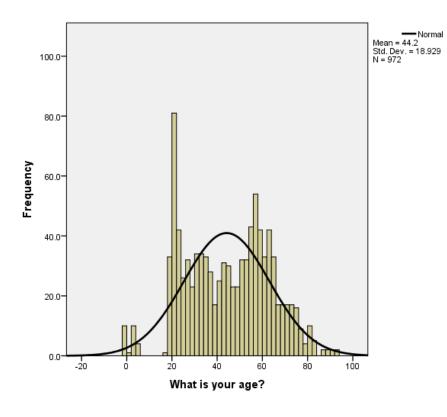
## Kevin J Brown—August, 2016

## **Demographics**

#### 1) What is your age?

**Descriptive Statistics** 

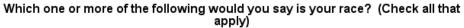
	N	Range	Minimum	Maximum	Mean	Std. Deviation	
What is your age?	972	94	-1	93	44.20	18.929	
Valid N (listwise)	972						

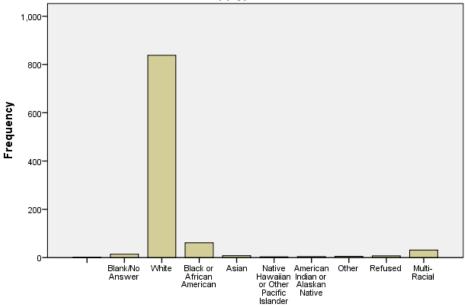


2) Which one or more of the following would you say is your race? (Check all that apply)

Which one or more of the following would you say is your race? (Check all that apply)

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	-	1	.1	.1	.1
	Blank/No Answer	14	1.4	1.4	1.5
	White	838	86.2	86.2	87.8
	Black or African American	61	6.3	6.3	94.0
	Asian	8	.8	.8	94.9
	Native Hawaiian or Other Pacific Islander	3	.3	.3	95.2
	American Indian or Alaskan Native	4	.4	.4	95.6
	Other	5	.5	.5	96.1
	Refused	7	.7	.7	96.8
	Multi-Racial	31	3.2	3.2	100.0
	Total	972	100.0	100.0	





Which one or more of the following would you say is your race? (Check all that apply)

## 3) Are you Hispanic or Latino?

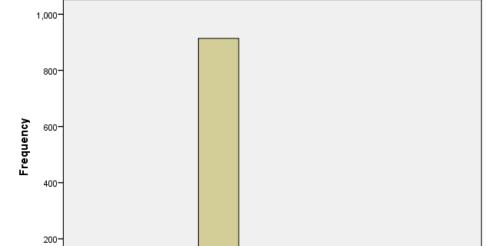
Blank/No Answer

Yes

No

Are you Hispanic or Latino?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Blank/No Answer	16	1.6	1.6	1.6
	Yes	27	2.8	2.8	4.4
	No	914	94.0	94.0	98.5
	Don't Know/Not Sure	4	.4	.4	98.9
	Refused	2	.2	.2	99.1
	Other	6	.6	.6	99.7
	Other	3	.3	.3	100.0
	Total	972	100.0	100.0	



Are you Hispanic or Latino?

Don't Know/Not Sure Are you Hispanic or Latino?

Refused

Other

Other

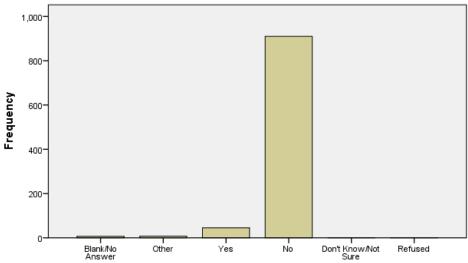
4) Have you ever served on active duty in the United States Armed Forces, either in the regular military or in a National Guard or military reserve unit? Active duty does not include training for the Reserves or National Guard, but DOES include activation, for example, for the Persian Gulf War.

Have you ever served on active duty in the United States Armed Forces, either in the regular military or in a National Guard or military reserve unit? Active duty does not include training for the Reserves or National Guard,

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				7			

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Blank/No Answer	7	.7	.7	.7
	Other	8	.8	.8	1.5
	Yes	45	4.6	4.6	6.2
	No	910	93.6	93.6	99.8
	Don't Know/Not Sure	1	.1	.1	99.9
	Refused	1	.1	.1	100.0
	Total	972	100.0	100.0	

Have you ever served on active duty in the United States Armed Forces, either in the regular military or in a National Guard or military reserve unit? Active duty does not include training for the Reserves or National Guard, but DOES include activation.



Have you ever served on active duty in the United States Armed Forces, either in the regular military or in a National Guard or military reserve unit? Active duty does not include training for the Reserves or National Guard, but DOES include activation.

#### 5) Marital Status: Are you...?

What is your marital status?

	Frequency	Percent	Valid Percent	Cumulative Percent
Valid	1	.1	.1	.1
Blank/No Answer	2	.2	.2	.3
Married	568	58.4	58.4	58.7
Divorced	76	7.8	7.8	66.6
Widowed	54	5.6	5.6	72.1
Separated	11	1.1	1.1	73.3
Never Married	212	21.8	21.8	95.1
A member of unmarried couple	46	4.7	4.7	99.8
Refused	2	.2	.2	100.0
Total	972	100.0	100.0	



What is your marital status?

6) How many children less than 18 years of age live in your household?

Statistics

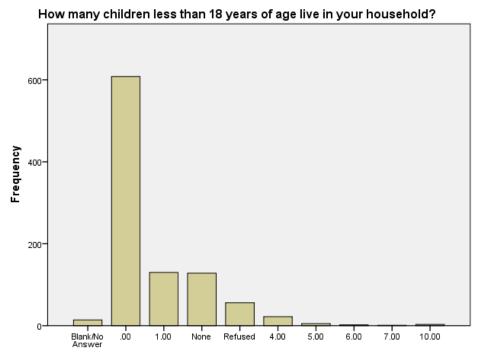
How many children less than 18 years of

age live in your household?

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N	Valid	969
	Missing	3
Mean		.7245
Media	ın	.0000
Std. D	eviation	1.26517
Range	Э	11.00
Minim	um	-1.00
Maxim	num	10.00

How many children less than 18 years of age live in your household?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Blank/No Answer	14	1.4	1.4	1.4
	.00	608	62.6	62.7	64.2
	1.00	130	13.4	13.4	77.6
	None	128	13.2	13.2	90.8
	Refused	56	5.8	5.8	96.6
	4.00	22	2.3	2.3	98.9
	5.00	5	.5	.5	99.4
	6.00	2	.2	.2	99.6
	7.00	1	.1	.1	99.7
	10.00	3	.3	.3	100.0
	Total	969	99.7	100.0	
Missing	System	3	.3		
Total		972	100.0		

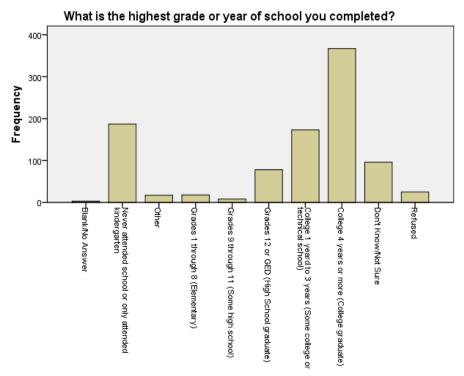


How many children less than 18 years of age live in your household?

7) What is the highest grade or year of school you completed?

What is the highest grade or year of school you completed?

_	What is the highest grade or year of school you completed?						
		Frequency	Percent	Valid Percent	Cumulative Percent		
Valid	Blank/No Answer	3	.3	.3	.3		
	Never attended school or only attended kindergarten	187	19.2	19.2	19.5		
	Other	17	1.7	1.7	21.3		
	Grades 1 through 8 (Elementary)	18	1.9	1.9	23.1		
	Grades 9 through 11 (Some high school)	8	.8	.8	24.0		
	Grades 12 or GED (High School graduate)	78	8.0	8.0	32.0		
	College 1 yeard to 3 years (Some college or technical school)	173	17.8	17.8	49.8		
	College 4 years or more (College graduate)	367	37.8	37.8	87.6		
	Don't Know/Not Sure	96	9.9	9.9	97.4		
	Refused	25	2.6	2.6	100.0		
	Total	972	100.0	100.0			

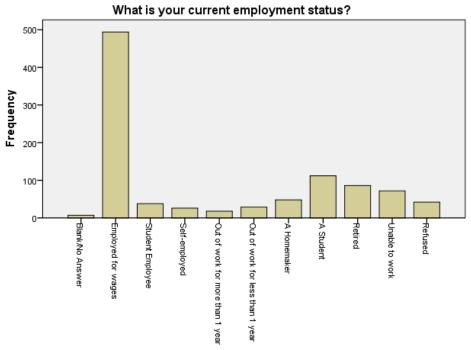


What is the highest grade or year of school you completed?

## 8) Employment: Are you currently...?

What is your current ampleyment status?

	What is your current employment status?						
		Frequency	Percent	Valid Percent	Cumulative Percent		
Valid	Blank/No Answer	7	.7	.7	.7		
	Employed for wages	494	50.8	50.8	51.5		
	Student Employee	38	3.9	3.9	55.5		
	Self-employed	26	2.7	2.7	58.1		
	Out of work for more than 1 year	18	1.9	1.9	60.0		
	Out of work for less than 1 year	29	3.0	3.0	63.0		
	A Homemaker	48	4.9	4.9	67.9		
	A Student	112	11.5	11.5	79.4		
	Retired	86	8.8	8.8	88.3		
	Unable to work	72	7.4	7.4	95.7		
	Refused	42	4.3	4.3	100.0		
	Total	972	100.0	100.0			

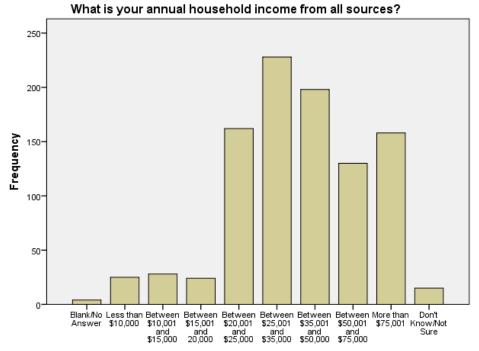


What is your current employment status?

9) Is your annual household income from all sources

What is your annual household income from all sources?

	What is your annual household income from all sources?						
		Frequency	Percent	Valid Percent	Cumulative Percent		
Valid	Blank/No Answer	4	.4	.4	.4		
	Less than \$10,000	25	2.6	2.6	3.0		
	Between \$10,001 and \$15,000	28	2.9	2.9	5.9		
	Between \$15,001 and 20,000	24	2.5	2.5	8.3		
	Between \$20,001 and \$25,000	162	16.7	16.7	25.0		
	Between \$25,001 and \$35,000	228	23.5	23.5	48.5		
	Between \$35,001 and \$50,000	198	20.4	20.4	68.8		
	Between \$50,001 and \$75,000	130	13.4	13.4	82.2		
	More than \$75,001	158	16.3	16.3	98.5		
	Don't Know/Not Sure	15	1.5	1.5	100.0		
	Total	972	100.0	100.0			

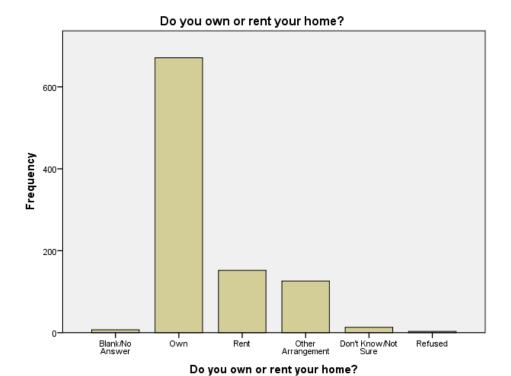


What is your annual household income from all sources?

- 10) What is the ZIP Code where you live?
- 11) Do you own or rent your home?

Do you own or rent your home?

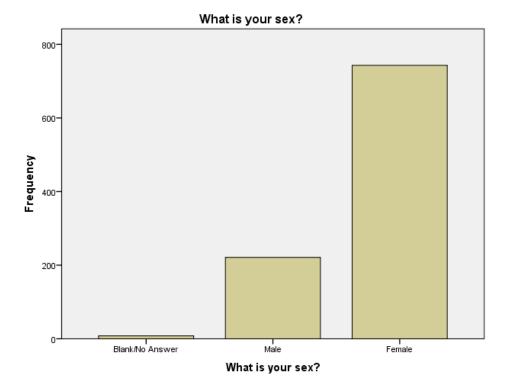
		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Blank/No Answer	7	.7	.7	.7
	Own	671	69.0	69.0	69.8
	Rent	152	15.6	15.6	85.4
	Other Arrangement	126	13.0	13.0	98.4
	Don't Know/Not Sure	13	1.3	1.3	99.7
	Refused	3	.3	.3	100.0
	Total	972	100.0	100.0	



12) What is your sex?

What is your sex?

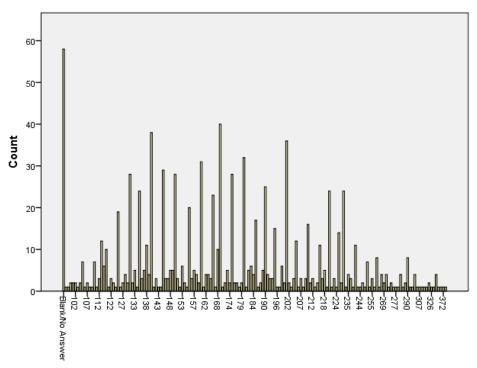
		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Blank/No Answer	8	.8	.8	.8
	Male	221	22.7	22.7	23.6
	Female	743	76.4	76.4	100.0
	Total	972	100.0	100.0	



13) About how much do you weigh without shoes on?

**Descriptive Statistics** 

Descriptive citatistics									
	N	Range	Minimum	Maximum	Mean	Std. Deviation			
About how much do you weigh without shoes on?	972	1191	-1	1190	169.10	70.605			
Valid N (listwise)	972								



About how much do you weigh without shoes on?

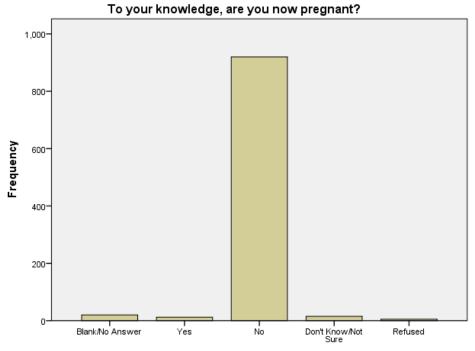
14) About how tall are you without shoes?

\*Data from the question could not be translated into numerical or graphical form.

15) To your knowledge, are you now pregnant?

To your knowledge, are you now pregnant?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Blank/No Answer	20	2.1	2.1	2.1
	Yes	12	1.2	1.2	3.3
	No	920	94.7	94.7	97.9
	Don't Know/Not Sure	15	1.5	1.5	99.5
	Refused	5	.5	.5	100.0
	Total	972	100.0	100.0	



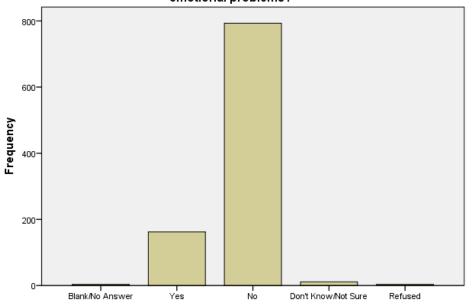
To your knowledge, are you now pregnant?

16) Are you limited in any way in any activities because of physical, mental, or emotional problems?

Are you limited in any way in any activities because of physical, mental, or emotional problems?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Blank/No Answer	3	.3	.3	.3
	Yes	162	16.7	16.7	17.0
	No	793	81.6	81.6	98.6
	Don't Know/Not Sure	11	1.1	1.1	99.7
	Refused	3	.3	.3	100.0
	Total	972	100.0	100.0	

# Are you limited in any way in any activities because of physical, mental, or emotional problems?



Are you limited in any way in any activities because of physical, mental, or emotional problems?

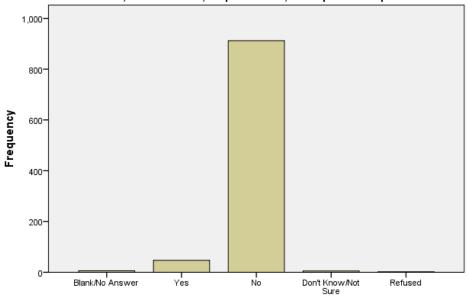
17) Do you now have any health problem that requires you to use special equipment, such as a cane, a wheelchair, a special bed, or a special telephone?

Do you now have any health problem that requires you to use special equipment, such as a cane, a wheelchair, a

special bed, or a special telephone?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Blank/No Answer	6	.6	.6	.6
	Yes	47	4.8	4.8	5.5
	No	912	93.8	93.8	99.3
	Don't Know/Not Sure	5	.5	.5	99.8
	Refused	2	.2	.2	100.0
	Total	972	100.0	100.0	

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



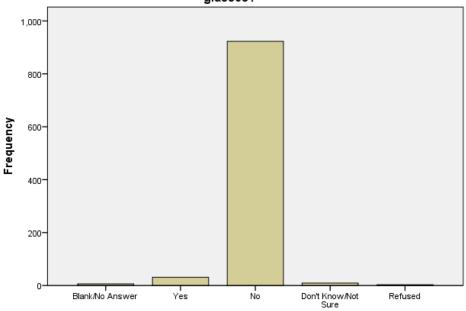
Do you now have any health problem that requires you to use special equipment, such as a cane, a wheelchair, a special bed, or a special telephone?

18) Are you blind or do you have serious difficulty seeing, even when wearing glasses?

Are you blind or do you have serious difficulty seeing, even when wearing glasses?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Blank/No Answer	6	.6	.6	.6
	Yes	31	3.2	3.2	3.8
	No	923	95.0	95.0	98.8
	Don't Know/Not Sure	9	.9	.9	99.7
	Refused	3	.3	.3	100.0
	Total	972	100.0	100.0	

# Are you blind or do you have serious difficulty seeing, even when wearing glasses?



Are you blind or do you have serious difficulty seeing, even when wearing glasses?

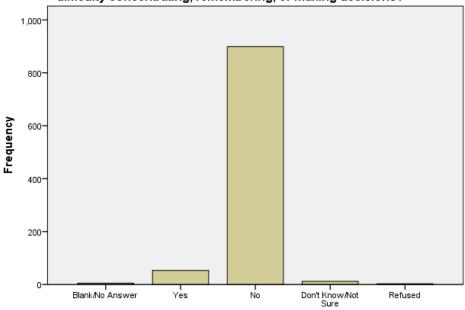
19) Because of a physical, mental, or emotional condition, do you have serious difficulty concentrating, remembering, or making decisions?

Because of a physical, mental, or emotional condition, do you have serious difficulty concentrating, remembering,

or making decisions?

	o. maning accidence.						
		Frequency	Percent	Valid Percent	Cumulative Percent		
Valid	Blank/No Answer	5	.5	.5	.5		
	Yes	53	5.5	5.5	6.0		
	No	899	92.5	92.5	98.5		
	Don't Know/Not Sure	12	1.2	1.2	99.7		
	Refused	3	.3	.3	100.0		
	Total	972	100.0	100.0			

Because of a physical, mental, or emotional condition, do you have serious difficulty concentrating, remembering, or making decisions?

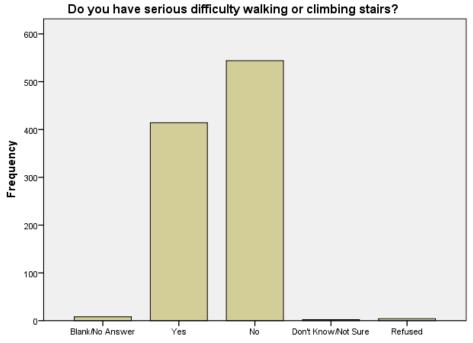


Because of a physical, mental, or emotional condition, do you have serious difficulty concentrating, remembering, or making decisions?

20) Do you have serious difficulty walking or climbing stairs?

Do you have serious difficulty walking or climbing stairs?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Blank/No Answer	8	.8	.8	.8
	Yes	414	42.6	42.6	43.4
	No	544	56.0	56.0	99.4
	Don't Know/Not Sure	2	.2	.2	99.6
	Refused	4	.4	.4	100.0
	Total	972	100.0	100.0	

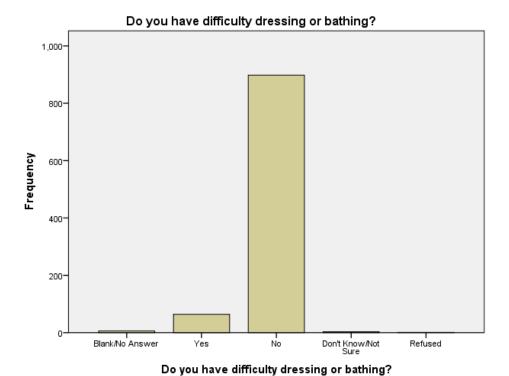


Do you have serious difficulty walking or climbing stairs?

21) Do you have difficulty dressing or bathing?

Do you have difficulty dressing or bathing?

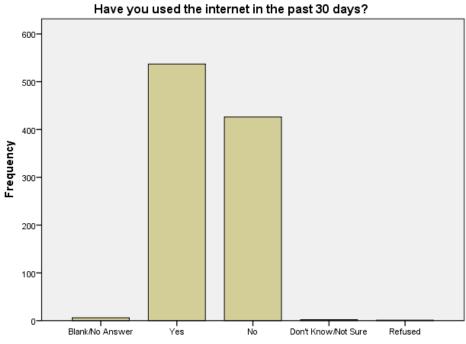
		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Blank/No Answer	6	.6	.6	.6
	Yes	64	6.6	6.6	7.2
	No	898	92.4	92.4	99.6
	Don't Know/Not Sure	3	.3	.3	99.9
	Refused	1	.1	.1	100.0
	Total	972	100.0	100.0	



22) Have you used the internet in the past 30 days?

Have you used the internet in the past 30 days?

	have you used the litternet in the past 30 days?							
		Frequency	Percent	Valid Percent	Cumulative Percent			
Valid	Blank/No Answer	6	.6	.6	.6			
	Yes	537	55.2	55.2	55.9			
	No	426	43.8	43.8	99.7			
	Don't Know/Not Sure	2	.2	.2	99.9			
	Refused	1	.1	.1	100.0			
	Total	972	100.0	100.0				



Have you used the internet in the past 30 days?

#### **Health Care Access**

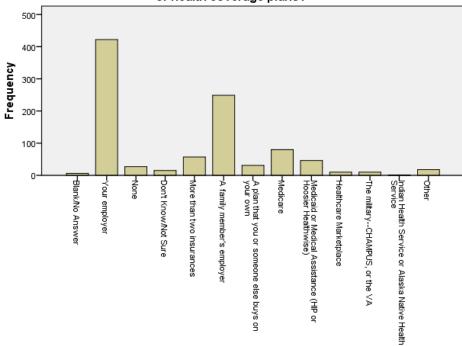
23) Are you CURRENTLY covered by any of the following types of health insurance or health coverage plans?

Are you CURRENTLY covered by any of the following types of health insurance or health coverage plans?

_	Are you CURRENILY covered by any of the following types of health insurance or health coverage plans?							
		Frequency	Percent	Valid Percent	Cumulative Percent			
Valid	Blank/No Answer	6	.6	.6	.6			
	Your employer	422	43.4	43.4	44.0			
	None	27	2.8	2.8	46.8			
	Don't Know/Not Sure	15	1.5	1.5	48.4			
	More than two insurances	57	5.9	5.9	54.2			
	A family member's employer	249	25.6	25.6	79.8			
	A plan that you or someone else buys on your own	31	3.2	3.2	83.0			
	Medicare	80	8.2	8.2	91.3			
	Medicaid or Medical Assistance (HIP or Hoosier Healthwise)	46	4.7	4.7	96.0			
	Healthcare Marketplace	10	1.0	1.0	97.0			

The militaryCHAMPUS, or the VA	10	1.0	1.0	98.0
Indian Health Service or Alaska Native Health Service	1	.1	.1	98.1
Other	18	1.9	1.9	100.0
Total	972	100.0	100.0	

Are you CURRENTLY covered by any of the following types of health insurance or health coverage plans?



24) Have you delayed getting needed medical care for any of the following reasons in the past 12 months? Select the most important reason.

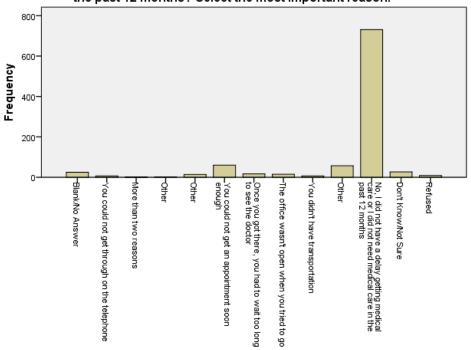
Have you delayed getting needed medical care for any of the following reasons in the past 12 months? Select the most important

reason.

	reason.						
		Frequency	Percent	Valid Percent	Cumulative Percent		
Valid	Blank/No Answer	25	2.6	2.6	2.6		
	You could not get through on the telephone	7	.7	.7	3.3		
	More than two reasons	1	.1	.1	3.4		
	Other	2	.2	.2	3.6		
	Other	14	1.4	1.4	5.0		
	You could not get an appointment soon	00	0.0	0.0	44.0		
	enough	60	6.2	6.2	11.2		

Once you got there, you had to wait too long to see the doctor	17	1.7	1.7	13.0
The office wasn't open when you tried to go	15	1.5	1.5	14.5
You didn't have transportation	7	.7	.7	15.2
Other	57	5.9	5.9	21.1
No, I did not have a delay getting medical care				
or I did not need medical care in the past 12	731	75.2	75.2	96.3
months	ı			
Don't Know/Not Sure	27	2.8	2.8	99.1
Refused	9	.9	.9	100.0
Total	972	100.0	100.0	

# Have you delayed getting needed medical care for any of the following reasons in the past 12 months? Select the most important reason.

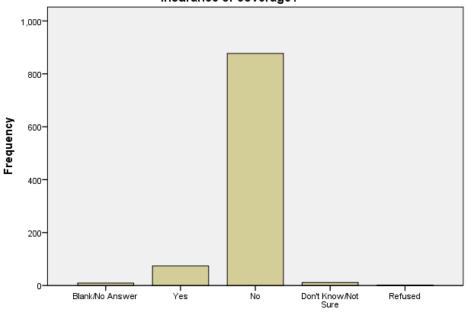


25) In the past 12 months was there any time when you did not have any health insurance or coverage?

In the past 12 months was there any time when you did not have any health insurance or coverage?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Blank/No Answer	9	.9	.9	.9
	Yes	74	7.6	7.6	8.5
	No	877	90.2	90.2	98.8
	Don't Know/Not Sure	11	1.1	1.1	99.9
	Refused	1	.1	.1	100.0
	Total	972	100.0	100.0	

In the past 12 months was there any time when you did not have any health insurance or coverage?



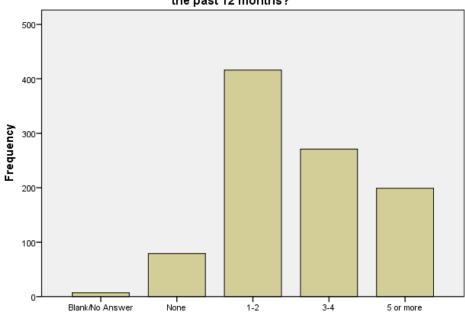
In the past 12 months was there any time when you did not have any health insurance or coverage?

26) How many times have you been to a doctor, nurse, or other health professional in the past 12 months?

How many times have you been to a doctor, nurse, or other health professional in the past 12 months?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Blank/No Answer	7	.7	.7	.7
	None	79	8.1	8.1	8.8
	1-2	416	42.8	42.8	51.6
	3-4	271	27.9	27.9	79.5
	5 or more	199	20.5	20.5	100.0
	Total	972	100.0	100.0	

How many times have you been to a doctor, nurse, or other health professional in the past 12 months?



How many times have you been to a doctor, nurse, or other health professional in the past 12 months?

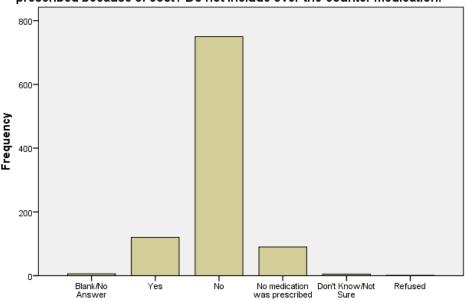
27) Was there a time in the past 12 months when you did not take your medication as prescribed because of cost? Do not include over-the-counter medication.

Was there a time in the past 12 months when you did not take your medication as prescribed because of cost? Do not include

over-the-counter medication.

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Blank/No Answer	6	.6	.6	.6
	Yes	120	12.3	12.3	13.0
	No	750	77.2	77.2	90.1
	No medication was prescribed	90	9.3	9.3	99.4
	Don't Know/Not Sure	5	.5	.5	99.9
	Refused	1	.1	.1	100.0
	Total	972	100.0	100.0	

Was there a time in the past 12 months when you did not take your medication as prescribed because of cost? Do not include over-the-counter medication.



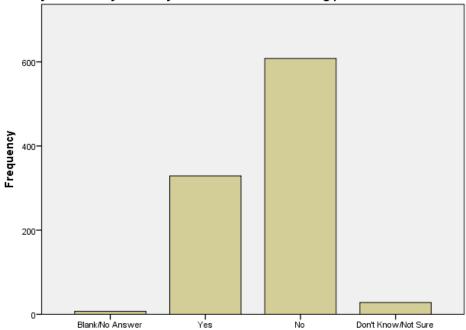
Was there a time in the past 12 months when you did not take your medication as prescribed because of cost? Do not include over-the-counter medication.

28) Do you currently have any medical bills that are being paid off over time?

Do you currently have any medical bills that are being paid off over time?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Blank/No Answer	7	.7	.7	.7
	Yes	329	33.8	33.8	34.6
	No	608	62.6	62.6	97.1
	Don't Know/Not Sure	28	2.9	2.9	100.0
	Total	972	100.0	100.0	





Do you currently have any medical bills that are being paid off over time?

## **Nutrition**

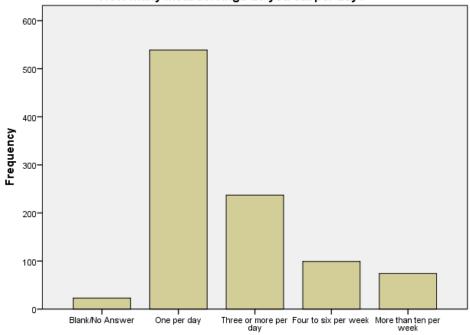
29) How many meat servings do you eat per day?

How many meat servings do you eat per day?

	Tion many mout corvinge do you out por day.						
		Frequency	Percent	Valid Percent	Cumulative Percent		
Valid	Blank/No Answer	23	2.4	2.4	2.4		
	One per day	539	55.5	55.5	57.8		

	i i	ı	İ	ī
Three or more per day	237	24.4	24.4	82.2
Four to six per week	99	10.2	10.2	92.4
More than ten per week	74	7.6	7.6	100.0
Total	972	100.0	100.0	

How many meat servings do you eat per day?

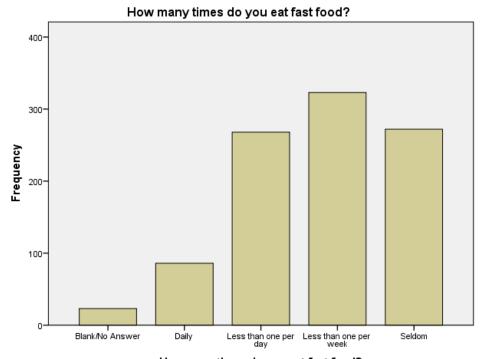


How many meat servings do you eat per day?

#### 30) How many times do you eat fast food?

How many times do you eat fast food?

	How many times do you eat last food?							
		Frequency	Percent	Valid Percent	Cumulative Percent			
Valid	Blank/No Answer	23	2.4	2.4	2.4			
	Daily	86	8.8	8.8	11.2			
	Less than one per day	268	27.6	27.6	38.8			
	Less than one per week	323	33.2	33.2	72.0			
	Seldom	272	28.0	28.0	100.0			
	Total	972	100.0	100.0				

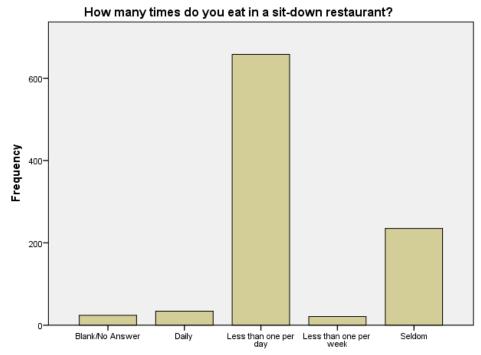


How many times do you eat fast food?

31) How many times do you eat in a sit-down restaurant?

How many times do you eat in a sit-down restaurant?

	now many times do you eat in a sit-down restaurant?						
		Frequency	Percent	Valid Percent	Cumulative Percent		
Valid	Blank/No Answer	24	2.5	2.5	2.5		
	Daily	34	3.5	3.5	6.0		
	Less than one per day	658	67.7	67.7	73.7		
	Less than one per week	21	2.2	2.2	75.8		
	Seldom	235	24.2	24.2	100.0		
	Total	972	100.0	100.0			



How many times do you eat in a sit-down restaurant?

### **Fruits and Vegetables**

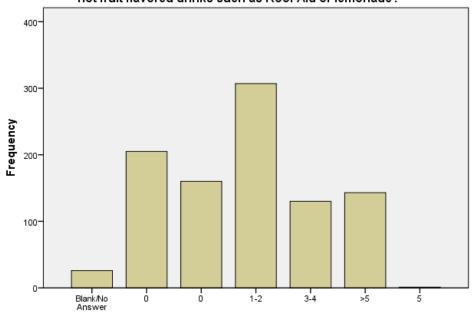
The following questions are about the fruits and vegetables you ate or drank during the past 30 days. Include cooked or raw, fresh, frozen or canned.

32) During the past month, how many times per week did you drink 100% fruit juices – not fruit flavored drinks such as Kool-Aid or lemonade?

During the past month, how many times per week did you drink 100% fruit juices - not fruit flavored drinks

	such as Kool-Aid or lemonade?							
		Frequency	Percent	Valid Percent	Cumulative Percent			
Valid	Blank/No Answer	26	2.7	2.7	2.7			
	0	205	21.1	21.1	23.8			
	0	160	16.5	16.5	40.2			
	1-2	307	31.6	31.6	71.8			
	3-4	130	13.4	13.4	85.2			
	>5	143	14.7	14.7	99.9			
	5	1	.1	.1	100.0			
	Total	972	100.0	100.0				

During the past month, how many times per week did you drink 100% fruit juices
– not fruit flavored drinks such as Kool-Aid or lemonade?



During the past month, how many times per week did you drink 100% fruit juices – not fruit flavored drinks such as Kool-Aid or lemonade?

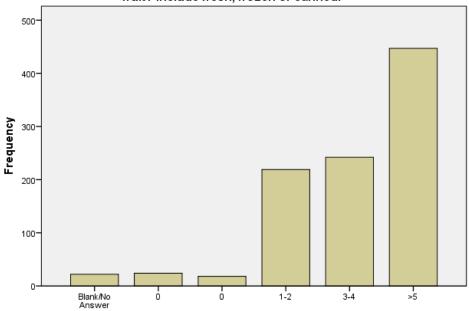
33) During the past month, not counting juice, how many times per week did you eat fruit? Include fresh, frozen or canned.

During the past month, not counting juice, how many times per week did you eat fruit? Include fresh, frozen

or canned.

	or canned.							
		Frequency	Percent	Valid Percent	Cumulative Percent			
Valid	Blank/No Answer	22	2.3	2.3	2.3			
	0	24	2.5	2.5	4.7			
	0	18	1.9	1.9	6.6			
	1-2	219	22.5	22.5	29.1			
	3-4	242	24.9	24.9	54.0			
	>5	447	46.0	46.0	100.0			
	Total	972	100.0	100.0				

During the past month, not counting juice, how many times per week did you eat fruit? Include fresh, frozen or canned.



During the past month, not counting juice, how many times per week did you eat fruit? Include fresh, frozen or canned.

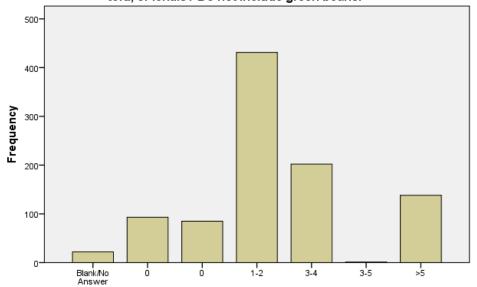
34) During the past month, how many times per week did you eat cooked or canned beans including refried, baked, black, garbanzo beans, soup beans, soybeans, tofu, or lentils? Do not include green beans.

During the past month, how many times per week did you eat cooked or canned beans including refried,

baked, black, garbanzo beans, soup beans, soybeans, tofu, or lentils? Do not include green beans.

Do	baked, black, garbanzo beans, soup beans, soybeans, toru, or lentils? Do not include green beans.				
		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Blank/No Answer	22	2.3	2.3	2.3
	0	93	9.6	9.6	11.8
	0	85	8.7	8.7	20.6
	1-2	431	44.3	44.3	64.9
	3-4	202	20.8	20.8	85.7
	3-5	1	.1	.1	85.8
	>5	138	14.2	14.2	100.0
	Total	972	100.0	100.0	

During the past month, how many times per week did you eat cooked or canned beans including refried, baked, black, garbanzo beans, soup beans, soybeans, tofu, or lentils? Do not include green beans.



During the past month, how many times per week did you eat cooked or canned beans including refried, baked, black, garbanzo beans, soup beans, soybeans, tofu, or lentils? Do not include green beans.

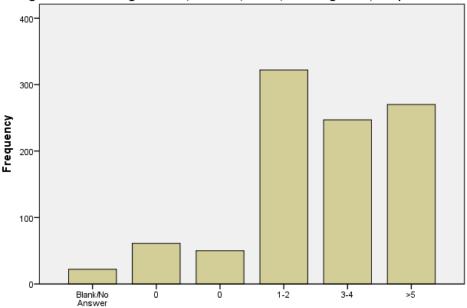
35) During the past month, how many times per week did you eat dark green vegetables including broccoli, romaine, chard, collard greens, or spinach?

During the past month, how many times per week did you eat dark green vegetables including broccoli,

romaine, chard, collard greens, or spinach?

	romaine, chara, contra greens, or spinaerr.				
		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Blank/No Answer	22	2.3	2.3	2.3
	0	61	6.3	6.3	8.5
	0	50	5.1	5.1	13.7
	1-2	322	33.1	33.1	46.8
	3-4	247	25.4	25.4	72.2
	>5	270	27.8	27.8	100.0
	Total	972	100.0	100.0	

# During the past month, how many times per week did you eat dark green vegetables including broccoli, romaine, chard, collard greens, or spinach?



During the past month, how many times per week did you eat dark green vegetables including broccoli, romaine, chard, collard greens, or spinach?

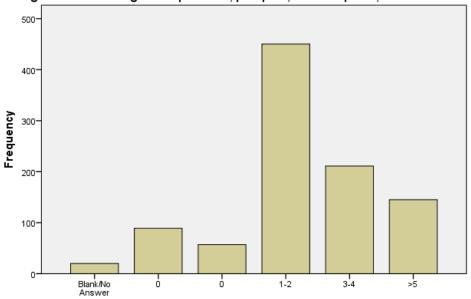
36) During the past month, how many times per week did you eat orange colored vegetables including sweet potatoes, pumpkin, winter squash, or carrots?

During the past month, how many times per week did you eat orange colored vegetables including sweet

potatoes, pumpkin, winter squash, or carrots?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Blank/No Answer	20	2.1	2.1	2.1
	0	89	9.2	9.2	11.2
	0	57	5.9	5.9	17.1
	1-2	450	46.3	46.3	63.4
	3-4	211	21.7	21.7	85.1
	>5	145	14.9	14.9	100.0
	Total	972	100.0	100.0	

During the past month, how many times per week did you eat orange colored vegetables including sweet potatoes, pumpkin, winter squash, or carrots?



During the past month, how many times per week did you eat orange colored vegetables including sweet potatoes, pumpkin, winter squash, or carrots?

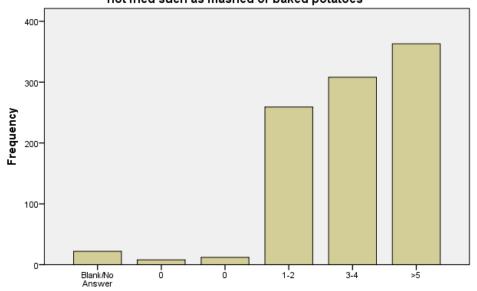
37) How many times per week did you eat other vegetables including tomatoes, tomato juice, corn, eggplant, peas, lettuce, cabbage, and white potatoes that are not fried such as mashed or baked potatoes?

How many times per week did you eat other vegetables including tomatoes, tomato juice, corn, eggplant,

peas, lettuce, cabbage, and white potatoes that are not fried such as mashed or baked potatoes

peas, lettuce, cabbage, and writte potatoes that are not theu such as mashed or baked potatoes					
		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Blank/No Answer	22	2.3	2.3	2.3
	0	8	.8	.8	3.1
	0	12	1.2	1.2	4.3
	1-2	259	26.6	26.6	31.0
	3-4	308	31.7	31.7	62.7
	>5	363	37.3	37.3	100.0
	Total	972	100.0	100.0	

How many times per week did you eat other vegetables including tomatoes, tomato juice, corn, eggplant, peas, lettuce, cabbage, and white potatoes that are not fried such as mashed or baked potatoes



How many times per week did you eat other vegetables including tomatoes, tomato juice, corn, eggplant, peas, lettuce, cabbage, and white potatoes that are not fried such as mashed or baked potatoes

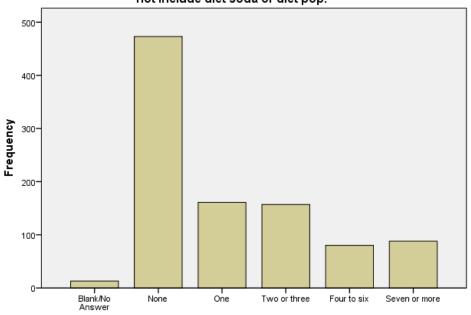
## **Sugar Sweetened Beverages and Menu Labeling**

38) How often do you drink regular soda or pop that contains sugar per week? Do not include diet soda or diet pop.

How often do you drink regular soda or pop that contains sugar per week? Do not include diet soda or diet

рор.						
		Frequency	Percent	Valid Percent	Cumulative Percent	
Valid	Blank/No Answer	13	1.3	1.3	1.3	
	None	473	48.7	48.7	50.0	
	One	161	16.6	16.6	66.6	
	Two or three	157	16.2	16.2	82.7	
	Four to six	80	8.2	8.2	90.9	
	Seven or more	88	9.1	9.1	100.0	
	Total	972	100.0	100.0		

# How often do you drink regular soda or pop that contains sugar per week? Do not include diet soda or diet pop.



How often do you drink regular soda or pop that contains sugar per week? Do not include diet soda or diet pop.

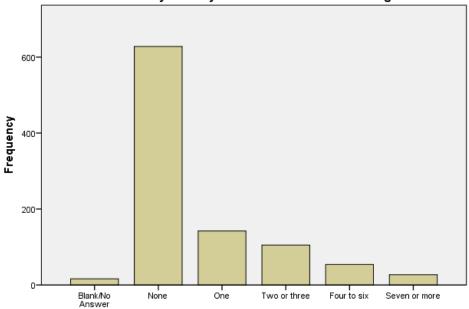
39) How often do you drink sweetened fruit drinks, such as Kool-aid or lemonade per week? Include any drinks you make at home and add sugar.

How often do you drink sweetened fruit drinks, such as Kool-aid or lemonade per week? Include any drinks

you make at home and add sugar.

	you make at nome and add sugar.						
		Frequency	Percent	Valid Percent	Cumulative Percent		
Valid	Blank/No Answer	16	1.6	1.6	1.6		
	None	628	64.6	64.6	66.3		
	One	142	14.6	14.6	80.9		
	Two or three	105	10.8	10.8	91.7		
	Four to six	54	5.6	5.6	97.2		
	Seven or more	27	2.8	2.8	100.0		
	Total	972	100.0	100.0			

How often do you drink sweetened fruit drinks, such as Kool-aid or lemonade per week? Include any drinks you make at home and add sugar.



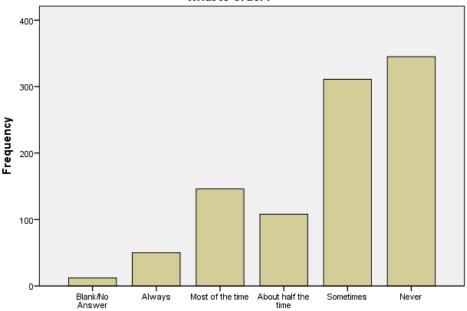
How often do you drink sweetened fruit drinks, such as Kool-aid or lemonade per week? Include any drinks you make at home and add sugar.

40) When eating in a restaurant, how often does calorie information help you decide what to order?

When eating in a restaurant, how often does calorie information help you decide what to order?

_		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Blank/No Answer	12	1.2	1.2	1.2
	Always	50	5.1	5.1	6.4
	Most of the time	146	15.0	15.0	21.4
	About half the time	108	11.1	11.1	32.5
	Sometimes	311	32.0	32.0	64.5
	Never	345	35.5	35.5	100.0
	Total	972	100.0	100.0	

# When eating in a restaurant, how often does calorie information help you decide what to order?



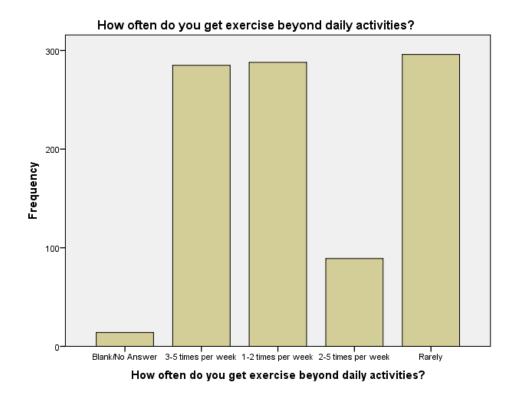
When eating in a restaurant, how often does calorie information help you decide what to order?

### **Exercise and Activities**

41) How often do you get exercise beyond daily activities?

How often do you get exercise beyond daily activities?

	now often do you get exercise beyond daily delivines.						
		Frequency	Percent	Valid Percent	Cumulative Percent		
Valid	Blank/No Answer	14	1.4	1.4	1.4		
	3-5 times per week	285	29.3	29.3	30.8		
	1-2 times per week	288	29.6	29.6	60.4		
	2-5 times per week	89	9.2	9.2	69.5		
	Rarely	296	30.5	30.5	100.0		
	Total	972	100.0	100.0			

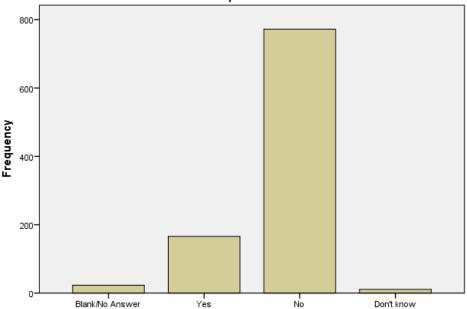


42) Are you limited in any way in any activities because of physical, mental, or emotional problems?

Are you limited in any way in any activities because of physical, mental, or emotional problems?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Blank/No Answer	23	2.4	2.4	2.4
	Yes	166	17.1	17.1	19.4
	No	772	79.4	79.4	98.9
	Don't know	11	1.1	1.1	100.0
	Total	972	100.0	100.0	

# Are you limited in any way in any activities because of physical, mental, or emotional problems?

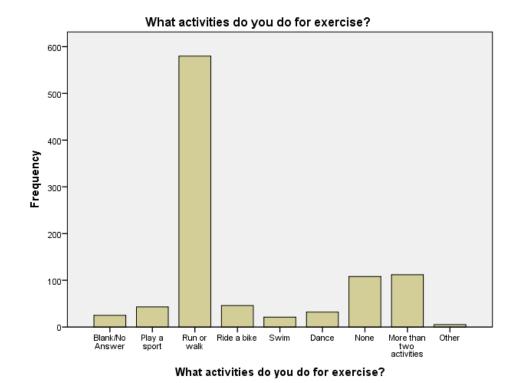


Are you limited in any way in any activities because of physical, mental, or emotional problems?

### 43) What activities do you do for exercise?

What activities do you do for exercise?

	What delivines do you do for exercise.					
		Frequency	Percent	Valid Percent	Cumulative Percent	
Valid	Blank/No Answer	25	2.6	2.6	2.6	
	Play a sport	43	4.4	4.4	7.0	
	Run or walk	580	59.7	59.7	66.7	
	Ride a bike	46	4.7	4.7	71.4	
	Swim	21	2.2	2.2	73.6	
	Dance	32	3.3	3.3	76.9	
	None	108	11.1	11.1	88.0	
	More than two activities	112	11.5	11.5	99.5	
	Other	5	.5	.5	100.0	
	Total	972	100.0	100.0		

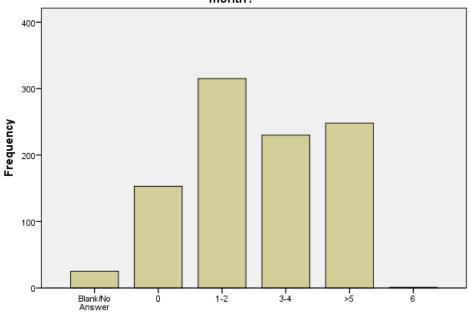


44) How many times per week did you take part in this activity during the past month?

How many times per week did you take part in this activity during the past	month?
riow ilially tilles bel week did you take balt ill tills activity durilly tile bast	HIDHUI

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Blank/No Answer	25	2.6	2.6	2.6
	0	153	15.7	15.7	18.3
	1-2	315	32.4	32.4	50.7
	3-4	230	23.7	23.7	74.4
	>5	248	25.5	25.5	99.9
	6	1	.1	.1	100.0
	Total	972	100.0	100.0	

# How many times per week did you take part in this activity during the past month?



How many times per week did you take part in this activity during the past month?

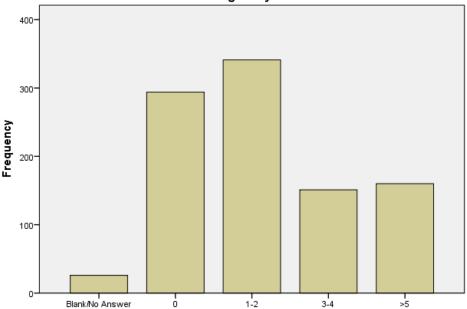
45) During the past month, how many times per week did you do physical activities or exercises to strengthen your muscles?

During the past month, how many times per week did you do physical activities or exercises to strengthen

your muscles?

	your muscles?							
		Frequency	Percent	Valid Percent	Cumulative Percent			
Valid	Blank/No Answer	26	2.7	2.7	2.7			
	0	294	30.2	30.2	32.9			
	1-2	341	35.1	35.1	68.0			
	3-4	151	15.5	15.5	83.5			
	>5	160	16.5	16.5	100.0			
	Total	972	100.0	100.0				

# During the past month, how many times per week did you do physical activities or exercises to strengthen your muscles?



During the past month, how many times per week did you do physical activities or exercises to strengthen your muscles?

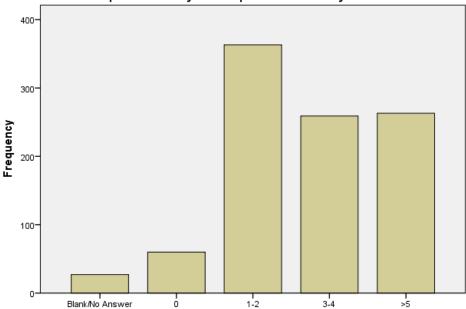
46) Housework may be included as a physical activity or exercise. How many times per week did you take part in this activity?

Housework may be included as a physical activity or exercise. How many times per week did you take part in

this activity?

	ino dentity.						
		Frequency	Percent	Valid Percent	Cumulative Percent		
Valid	Blank/No Answer	27	2.8	2.8	2.8		
	0	60	6.2	6.2	9.0		
	1-2	363	37.3	37.3	46.3		
	3-4	259	26.6	26.6	72.9		
	>5	263	27.1	27.1	100.0		
	Total	972	100.0	100.0			

# Housework may be included as a physical activity or exercise. How many times per week did you take part in this activity?

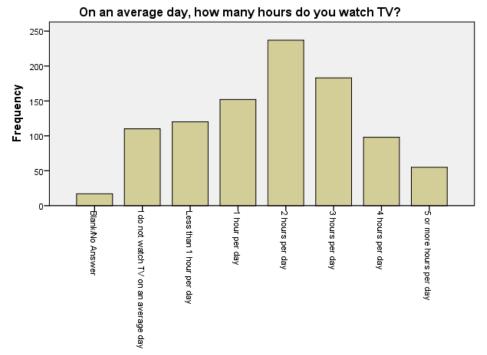


Housework may be included as a physical activity or exercise. How many times per week did you take part in this activity?

#### 47) On an average day, how many hours do you watch TV?

On an average day, how many hours do you watch TV?

	On an average day, now many nours do you watch 1 v?						
_		Frequency	Percent	Valid Percent	Cumulative Percent		
Valid	Blank/No Answer	17	1.7	1.7	1.7		
	I do not watch TV on an average day	110	11.3	11.3	13.1		
	Less than 1 hour per day	120	12.3	12.3	25.4		
	1 hour per day	152	15.6	15.6	41.0		
	2 hours per day	237	24.4	24.4	65.4		
	3 hours per day	183	18.8	18.8	84.3		
	4 hours per day	98	10.1	10.1	94.3		
	5 or more hours per day	55	5.7	5.7	100.0		
	Total	972	100.0	100.0			



On an average day, how many hours do you watch TV?

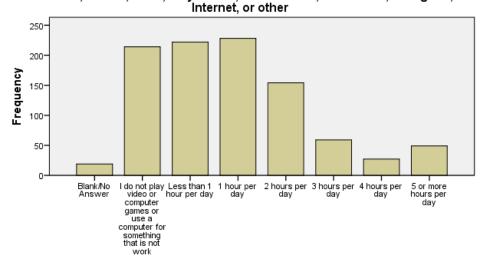
48) On an average day, how many hours do you play video or computer games or use a computer for something that is not related to work? (Include activities such as Facebook, Twitter, Xbox, PlayStation, Nintendo DS, iPod touch, Instagram, the Internet, or other social media.)

On an average day, how many hours do you play video or computer games or use a computer for something that is not related to

work? (Include activities such as Facebook, Twitter, Xbox, PlayStation, Nintendo DS, iPod touch, Instagram, the Internet, or other

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Blank/No Answer	19	2.0	2.0	2.0
	I do not play video or computer games or use a computer for something that is not work	214	22.0	22.0	24.0
	Less than 1 hour per day	222	22.8	22.8	46.8
	1 hour per day	228	23.5	23.5	70.3
	2 hours per day	154	15.8	15.8	86.1
	3 hours per day	59	6.1	6.1	92.2
	4 hours per day	27	2.8	2.8	95.0
	5 or more hours per day	49	5.0	5.0	100.0
	Total	972	100.0	100.0	

On an average day, how many hours do you play video or computer games or use a computer for something that is not related to work? (Include activities such as Facebook, Twitter, Xbox, PlayStation, Nintendo DS, iPod touch, Instagram, the

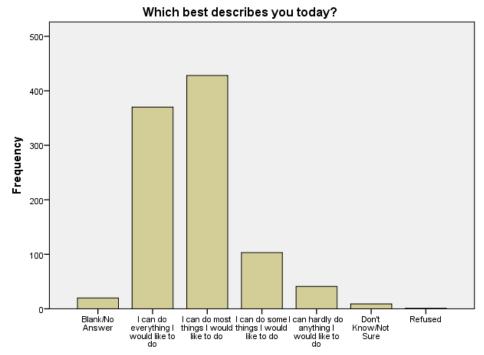


On an average day, how many hours do you play video or computer games or use a computer for something that is not related to work? (Include activities such as Facebook, Twitter, Xbox, PlayStation, Nintendo DS, iPod touch, Instagram, the Internet, or other

#### 49) Which best describes you today?

Which best describes you today?

	which best describes you today?						
		Frequency	Percent	Valid Percent	Cumulative Percent		
Valid	Blank/No Answer	20	2.1	2.1	2.1		
	I can do everything I would like to do	370	38.1	38.1	40.1		
	I can do most things I would like to do	428	44.0	44.0	84.2		
	I can do some things I would like to do	103	10.6	10.6	94.8		
	I can hardly do anything I would like to do	41	4.2	4.2	99.0		
	Don't Know/Not Sure	9	.9	.9	99.9		
	Refused	1	.1	.1	100.0		
	Total	972	100.0	100.0			



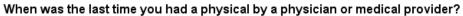
Which best describes you today?

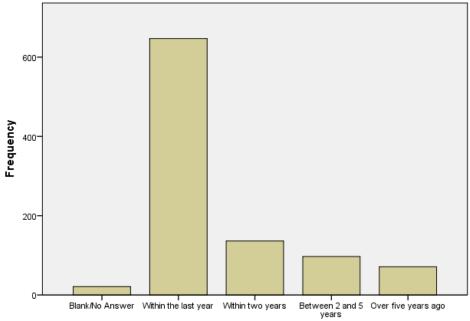
### **Screenings**

50) When was the last time you had a physical by a physician or medical provider?

When was the last time you had a physical by a physician or medical provider?

	trion that the last time you had a physical by a physician of medical provider.				
		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Blank/No Answer	21	2.2	2.2	2.2
	Within the last year	647	66.6	66.6	68.7
	Within two years	136	14.0	14.0	82.7
	Between 2 and 5 years	97	10.0	10.0	92.7
	Over five years ago	71	7.3	7.3	100.0
	Total	972	100.0	100.0	





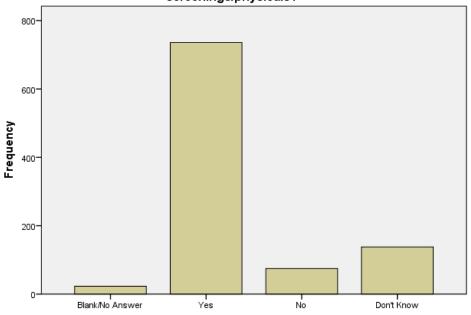
When was the last time you had a physical by a physician or medical provider?

51) Does your health insurance pay for wellness & preventive health screenings/physicals?

Does your health insurance pay for wellness & preventive health screenings/physicals?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Blank/No Answer	23	2.4	2.4	2.4
	Yes	736	75.7	75.7	78.1
	No	75	7.7	7.7	85.8
	Don't Know	138	14.2	14.2	100.0
	Total	972	100.0	100.0	

# Does your health insurance pay for wellness & preventive health screenings/physicals?

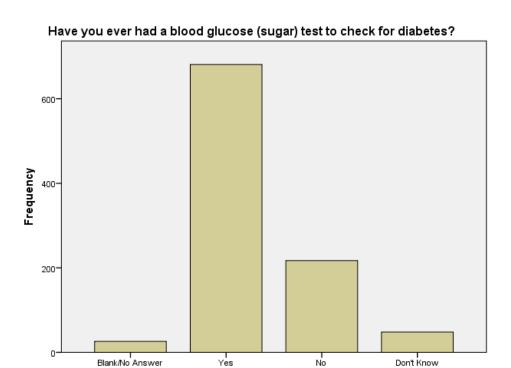


Does your health insurance pay for wellness & preventive health screenings/physicals?

52) Have you ever had a blood glucose (sugar) test to check for diabetes?

Have you ever had a blood glucose (sugar) test to check for diabetes?

		Frequency	Percent	Valid Percent	Cumulative Percent	
Valid	Blank/No Answer	26	2.7	2.7	2.7	
	Yes	681	70.1	70.1	72.7	
	No	217	22.3	22.3	95.1	
	Don't Know	48	4.9	4.9	100.0	
	Total	972	100.0	100.0		

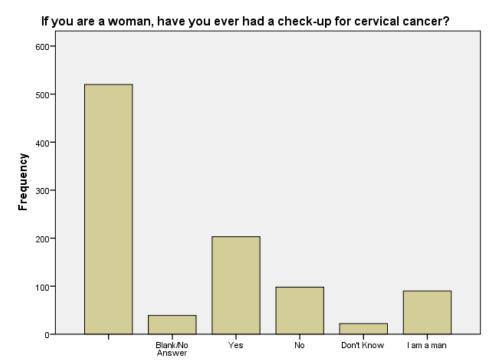


Have you ever had a blood glucose (sugar) test to check for diabetes?

53) If you are a woman, have you ever had a check-up for cervical cancer?

If you are a woman, have you ever had a check-up for cervical cancer?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	_	520	53.5	53.5	53.5
	Blank/No Answer	39	4.0	4.0	57.5
	Yes	203	20.9	20.9	78.4
	No	98	10.1	10.1	88.5
	Don't Know	22	2.3	2.3	90.7
	I am a man	90	9.3	9.3	100.0
	Total	972	100.0	100.0	

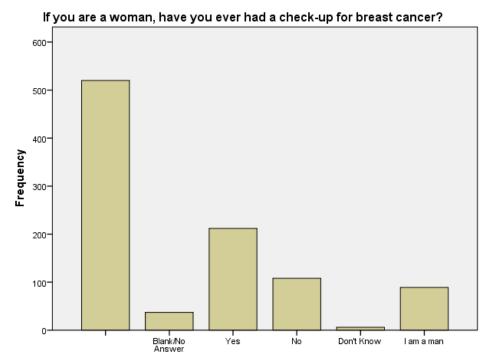


If you are a woman, have you ever had a check-up for cervical cancer?

54) If you are a woman, have you ever had a check-up for breast cancer?

If you are a woman, have you ever had a check-up for breast cancer?

	ii you are a woman, have you ever had a check-up for breast cancer:					
		Frequency	Percent	Valid Percent	Cumulative Percent	
Valid	-	520	53.5	53.5	53.5	
	Blank/No Answer	37	3.8	3.8	57.3	
	Yes	212	21.8	21.8	79.1	
	No	108	11.1	11.1	90.2	
	Don't Know	6	.6	.6	90.8	
	I am a man	89	9.2	9.2	100.0	
	Total	972	100.0	100.0		

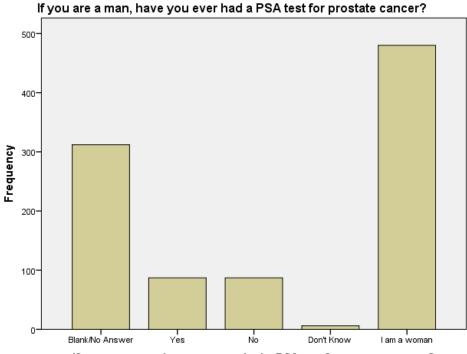


If you are a woman, have you ever had a check-up for breast cancer?

55) If you are a man, have you ever had a PSA test for prostate cancer?

If you are a man, have you ever had a PSA test for prostate cancer?

	in you are a man, nave you over mad an overteen produce balloon.						
		Frequency	Percent	Valid Percent	Cumulative Percent		
Valid	Blank/No Answer	312	32.1	32.1	32.1		
	Yes	87	9.0	9.0	41.0		
	No	87	9.0	9.0	50.0		
	Don't Know	6	.6	.6	50.6		
	I am a woman	480	49.4	49.4	100.0		
	Total	972	100.0	100.0			



If you are a man, have you ever had a PSA test for prostate cancer?

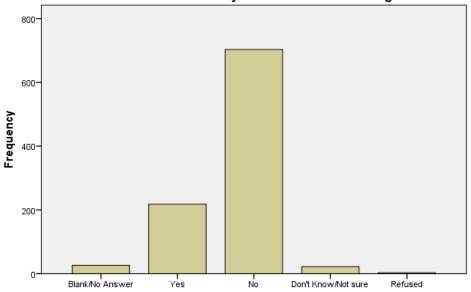
56) A blood stool test is a test that may use a special kit at home to determine whether the stool contains blood. Have you ever had this test using a home kit?

A blood stool test is a test that may use a special kit at home to determine whether the stool contains blood. Have

you ever had this test using a home kit?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Blank/No Answer	26	2.7	2.7	2.7
	Yes	218	22.4	22.4	25.1
	No	703	72.3	72.3	97.4
	Don't Know/Not sure	22	2.3	2.3	99.7
	Refused	3	.3	.3	100.0
	Total	972	100.0	100.0	

# A blood stool test is a test that may use a special kit at home to determine whether the stool contains blood. Have you ever had this test using a home kit?



A blood stool test is a test that may use a special kit at home to determine whether the stool contains blood. Have you ever had this test using a home kit?

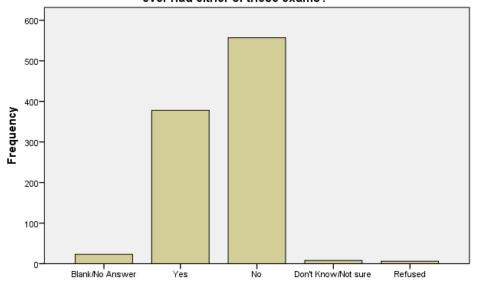
57) Sigmoidoscopy and colonoscopy are exams in which a tube is inserted into the rectum to view the colon for signs of cancer or other health problems. Have you ever had either of these exams?

Sigmoidoscopy and colonoscopy are exams in which a tube is inserted into the rectum to view the colon for signs

of cancer or other health problems. Have you ever had either of these exams?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Blank/No Answer	23	2.4	2.4	2.4
	Yes	378	38.9	38.9	41.3
	No	557	57.3	57.3	98.6
	Don't Know/Not sure	8	.8	.8	99.4
	Refused	6	.6	.6	100.0
	Total	972	100.0	100.0	l

# Sigmoidoscopy and colonoscopy are exams in which a tube is inserted into the rectum to view the colon for signs of cancer or other health problems. Have you ever had either of these exams?

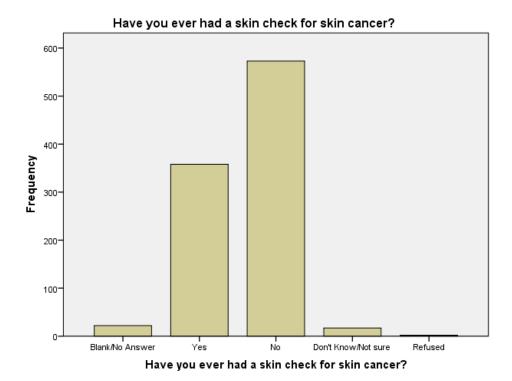


Sigmoidoscopy and colonoscopy are exams in which a tube is inserted into the rectum to view the colon for signs of cancer or other health problems. Have you ever had either of these exams?

58) Have you ever had a skin check for skin cancer?

Have you ever had a skin check for skin cancer?

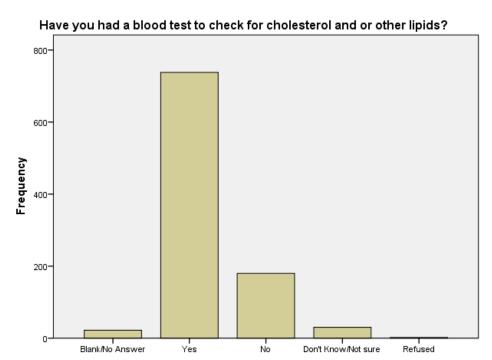
_	Have you ever had a skill check for skill cancer?						
		Frequency	Percent	Valid Percent	Cumulative Percent		
Valid	Blank/No Answer	22	2.3	2.3	2.3		
	Yes	358	36.8	36.8	39.1		
	No	573	59.0	59.0	98.0		
	Don't Know/Not sure	17	1.7	1.7	99.8		
	Refused	2	.2	.2	100.0		
	Total	972	100.0	100.0			



59) Have you had a blood test to check for cholesterol and or other lipids?

Have you had a blood test to check for cholesterol and or other lipids?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Blank/No Answer	22	2.3	2.3	2.3
	Yes	738	75.9	75.9	78.2
	No	180	18.5	18.5	96.7
	Don't Know/Not sure	30	3.1	3.1	99.8
	Refused	2	.2	.2	100.0
	Total	972	100.0	100.0	

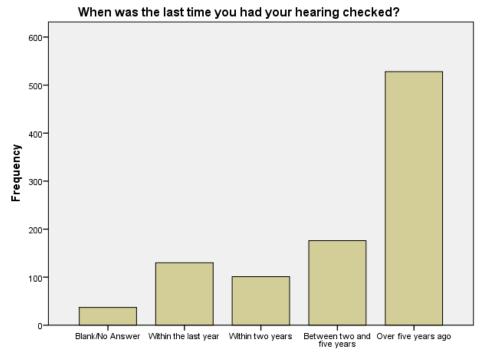


Have you had a blood test to check for cholesterol and or other lipids?

60) When was the last time you had your hearing checked?

When was the last time you had your hearing checked?

when was the last time you had your hearing checked?							
		Frequency	Percent	Valid Percent	Cumulative Percent		
Valid	Blank/No Answer	37	3.8	3.8	3.8		
	Within the last year	130	13.4	13.4	17.2		
	Within two years	101	10.4	10.4	27.6		
	Between two and five years	176	18.1	18.1	45.7		
	Over five years ago	528	54.3	54.3	100.0		
	Total	972	100.0	100.0			



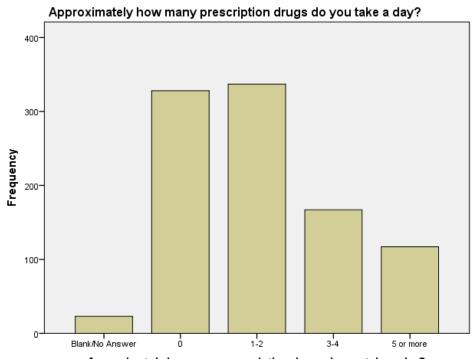
When was the last time you had your hearing checked?

### **Substance Use**

61) Approximately how many prescription drugs do you take a day?

Approximately how many prescription drugs do you take a day?

	Approximately now many prescription drugs do you take a day?					
		Frequency	Percent	Valid Percent	Cumulative Percent	
Valid	Blank/No Answer	23	2.4	2.4	2.4	
	0	328	33.7	33.7	36.1	
	1-2	337	34.7	34.7	70.8	
	3-4	167	17.2	17.2	88.0	
	5 or more	117	12.0	12.0	100.0	
	Total	972	100.0	100.0		

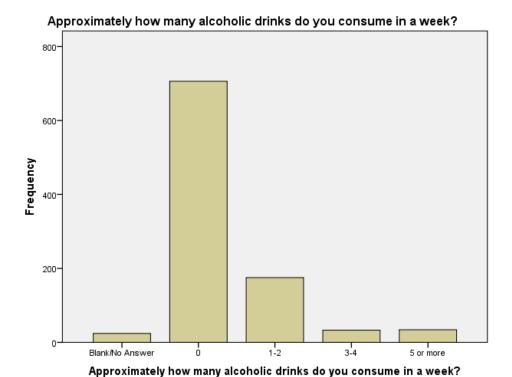


Approximately how many prescription drugs do you take a day?

62) Approximately how many alcoholic drinks do you consume in a week?

Approximately how many alcoholic drinks do you consume in a week?

	Approximately now many alcoholic units do you consume in a week.						
		Frequency	Percent	Valid Percent	Cumulative Percent		
Valid	Blank/No Answer	24	2.5	2.5	2.5		
	0	706	72.6	72.6	75.1		
	1-2	175	18.0	18.0	93.1		
	3-4	33	3.4	3.4	96.5		
	5 or more	34	3.5	3.5	100.0		
	Total	972	100.0	100.0			

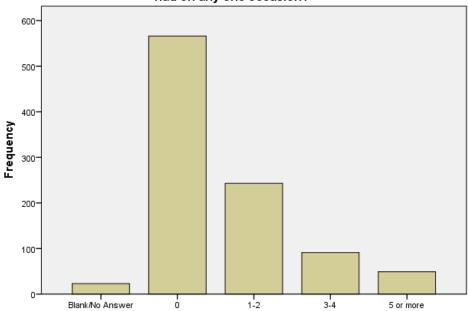


63) During the past 30 days, what is the largest number of alcoholic drinks you have had on any one occasion?

During the past 30 days, what is the largest number of alcoholic drinks you have had on any one occasion?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Blank/No Answer	23	2.4	2.4	2.4
	0	566	58.2	58.2	60.6
	1-2	243	25.0	25.0	85.6
	3-4	91	9.4	9.4	95.0
	5 or more	49	5.0	5.0	100.0
	Total	972	100.0	100.0	

# During the past 30 days, what is the largest number of alcoholic drinks you have had on any one occasion?



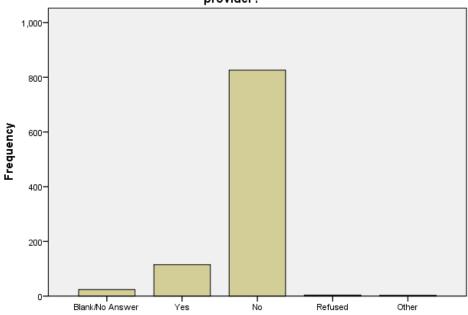
During the past 30 days, what is the largest number of alcoholic drinks you have had on any one occasion?

64) Have you ever used drugs other than those prescribed by your medical provider?

Have you ever used drugs other than those prescribed by your medical provider?

	you over used and go once man another processing by your measure provider.					
		Frequency	Percent	Valid Percent	Cumulative Percent	
Valid	Blank/No Answer	24	2.5	2.5	2.5	
	Yes	115	11.8	11.8	14.3	
	No	826	85.0	85.0	99.3	
	Refused	4	.4	.4	99.7	
	Other	3	.3	.3	100.0	
	Total	972	100.0	100.0		

# Have you ever used drugs other than those prescribed by your medical provider?



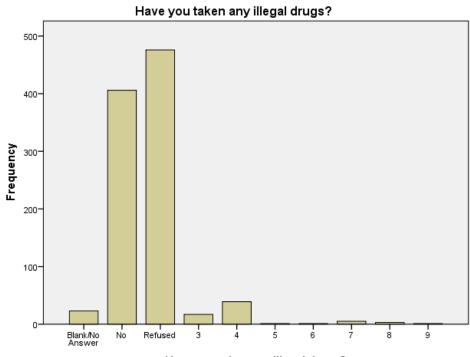
Have you ever used drugs other than those prescribed by your medical provider?

### 65) Have you taken any illegal drugs?

Have you taken any illegal drugs?

	riave you taken any megararags:						
		Frequency	Percent	Valid Percent	Cumulative Percent		
Valid	Blank/No Answer	23	2.4	2.4	2.4		
	No	406	41.8	41.8	44.1		
	Refused	476	49.0	49.0	93.1		
					1		
	Total	972	100.0	100.0			

**NOTE**: Answer to question was not labeled accurately in Data File for answers other than "no" or "refused."

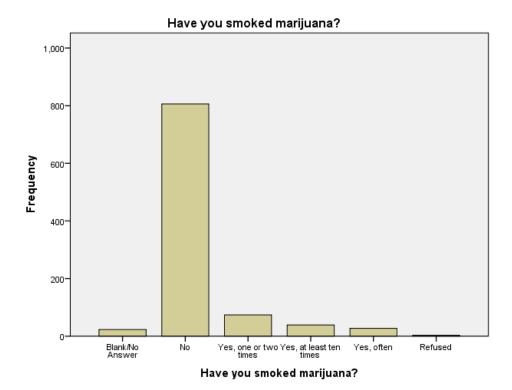


#### Have you taken any illegal drugs?

### 66) Have you smoked marijuana?

Have you smoked marijuana?

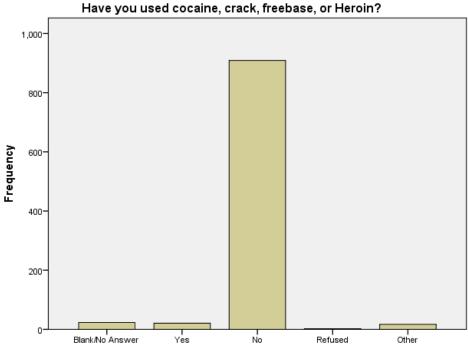
		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Blank/No Answer	23	2.4	2.4	2.4
	No	806	82.9	82.9	85.3
	Yes, one or two times	74	7.6	7.6	92.9
	Yes, at least ten times	39	4.0	4.0	96.9
	Yes, often	27	2.8	2.8	99.7
	Refused	3	.3	.3	100.0
	Total	972	100.0	100.0	



67) Have you used cocaine, crack, freebase, or Heroin?

Have you used cocaine, crack, freebase, or Heroin?

,					
		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Blank/No Answer	23	2.4	2.4	2.4
	Yes	21	2.2	2.2	4.5
	No	909	93.5	93.5	98.0
	Refused	2	.2	.2	98.3
	Other	17	1.7	1.7	100.0
	Total	972	100.0	100.0	



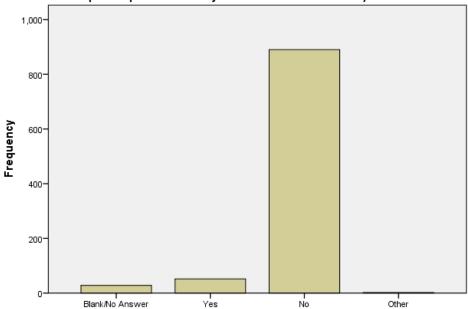
Have you used cocaine, crack, freebase, or Heroin?

68) Have you abused more than one drug at a time (for example a narcotic prescription and marijuana or Heroin and crack)?

Have you abused more than one drug at a time (for example a narcotic prescription and marijuana or Heroin

	and crack)?							
_		Frequency	Percent	Valid Percent	Cumulative Percent			
Valid	Blank/No Answer	28	2.9	2.9	2.9			
	Yes	52	5.3	5.3	8.2			
	No	890	91.6	91.6	99.8			
	Other	2	.2	.2	100.0			
	Total	972	100.0	100.0				

# Have you abused more than one drug at a time (for example a narcotic prescription and marijuana or Heroin and crack)?

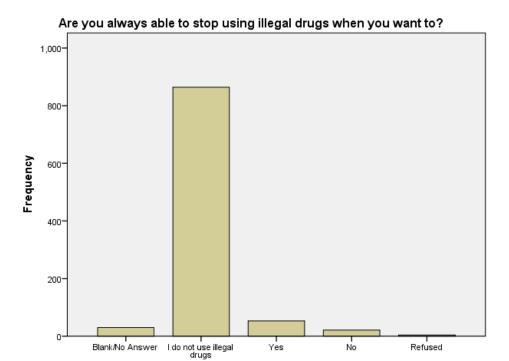


Have you abused more than one drug at a time (for example a narcotic prescription and marijuana or Heroin and crack)?

69) Are you always able to stop using illegal drugs when you want to?

Are you always able to stop using illegal drugs when you want to?

	no you amayo also to stop along megal and go men you man to					
		Frequency	Percent	Valid Percent	Cumulative Percent	
Valid	Blank/No Answer	30	3.1	3.1	3.1	
	I do not use illegal drugs	864	88.9	88.9	92.0	
	Yes	53	5.5	5.5	97.4	
	No	21	2.2	2.2	99.6	
	Refused	4	.4	.4	100.0	
	Total	972	100.0	100.0		

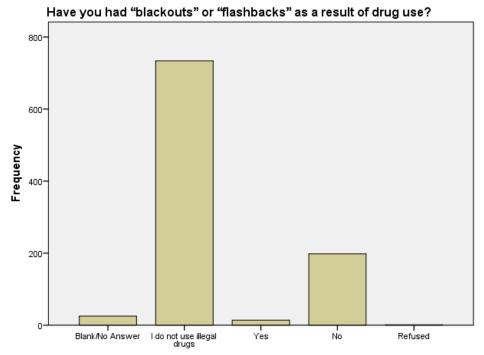


Are you always able to stop using illegal drugs when you want to?

70) Have you had "blackouts" or "flashbacks" as a result of drug use?

Have you had "blackouts" or "flashbacks" as a result of drug use?

	Have you had blackouts of hashbacks as a result of drug use?					
		Frequency	Percent	Valid Percent	Cumulative Percent	
Valid	Blank/No Answer	25	2.6	2.6	2.6	
	I do not use illegal drugs	734	75.5	75.5	78.1	
	Yes	14	1.4	1.4	79.5	
	No	198	20.4	20.4	99.9	
	Refused	1	.1	.1	100.0	
	Total	972	100.0	100.0		

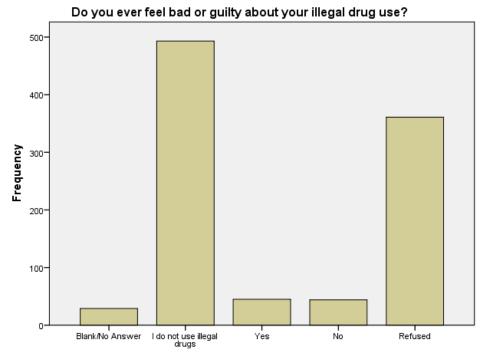


Have you had "blackouts" or "flashbacks" as a result of drug use?

71) Do you ever feel bad or guilty about your illegal drug use?

Do you ever feel bad or guilty about your illegal drug use?

	bo you ever reer bad or guilty about your inlegal drug use?						
		Frequency	Percent	Valid Percent	Cumulative Percent		
Valid	Blank/No Answer	29	3.0	3.0	3.0		
	I do not use illegal drugs	493	50.7	50.7	53.7		
	Yes	45	4.6	4.6	58.3		
	No	44	4.5	4.5	62.9		
	Refused	361	37.1	37.1	100.0		
	Total	972	100.0	100.0			



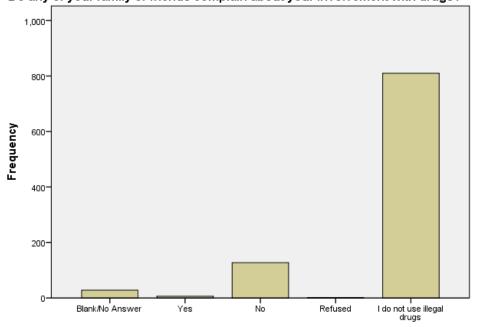
Do you ever feel bad or guilty about your illegal drug use?

72) Does any of your family or friends complain about your involvement with drugs?

Do any of your family or friends complain about your involvement with drugs?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Blank/No Answer	28	2.9	2.9	2.9
	Yes	6	.6	.6	3.5
	No	127	13.1	13.1	16.6
	Refused	1	.1	.1	16.7
	I do not use illegal drugs	810	83.3	83.3	100.0
	Total	972	100.0	100.0	



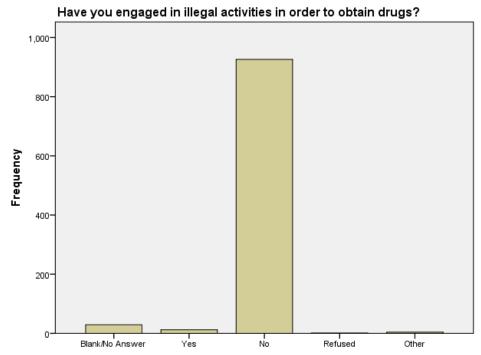


Do any of your family or friends complain about your involvement with drugs?

73) Have you engaged in illegal activities in order to obtain drugs?

Have you engaged in illegal activities in order to obtain drugs?

	nato you ongagou m mogal dominioo m or doi to obtain drago.						
		Frequency	Percent	Valid Percent	Cumulative Percent		
Valid	Blank/No Answer	29	3.0	3.0	3.0		
	Yes	12	1.2	1.2	4.2		
	No	926	95.3	95.3	99.5		
	Refused	1	.1	.1	99.6		
	Other	4	.4	.4	100.0		
	Total	972	100.0	100.0			

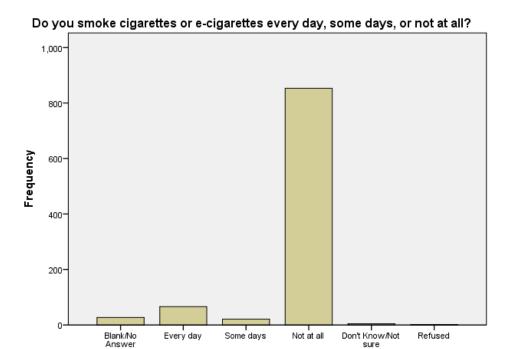


Have you engaged in illegal activities in order to obtain drugs?

74) Do you smoke cigarettes or e-cigarettes every day, some days, or not at all?

Do you smoke cigarettes or e-cigarettes every day, some days, or not at all?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Blank/No Answer	27	2.8	2.8	2.8
	Every day	66	6.8	6.8	9.6
	Some days	21	2.2	2.2	11.7
	Not at all	853	87.8	87.8	99.5
	Don't Know/Not sure	4	.4	.4	99.9
	Refused	1	.1	.1	100.0
	Total	972	100.0	100.0	



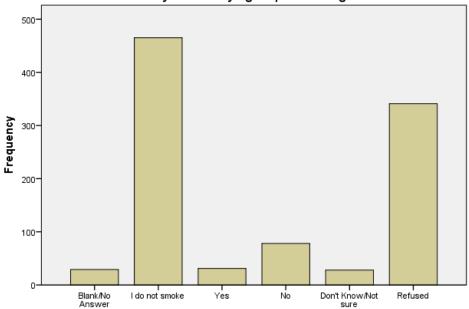
Do you smoke cigarettes or e-cigarettes every day, some days, or not at all?

75) During the past 12 months, have you stopped smoking for one day or longer because you were trying to quit smoking?

During the past 12 months, have you stopped smoking for one day or longer because you were trying to quit

smoking? Valid Percent Frequency Percent **Cumulative Percent** Valid Blank/No Answer 29 3.0 3.0 3.0 47.8 47.8 50.8 I do not smoke 465 Yes 31 3.2 3.2 54.0 No 78 8.0 8.0 62.0 Don't Know/Not sure 28 2.9 2.9 64.9 Refused 341 35.1 35.1 100.0 Total 100.0 100.0 972

# During the past 12 months, have you stopped smoking for one day or longer because you were trying to quit smoking?



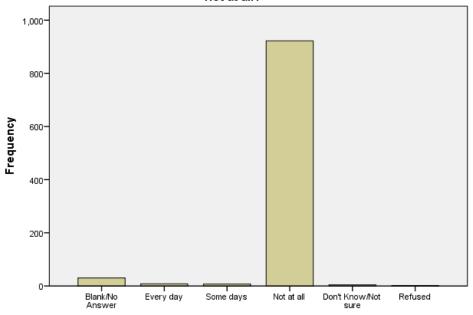
During the past 12 months, have you stopped smoking for one day or longer because you were trying to quit smoking?

76) Do you currently use chewing tobacco, snuff, or snus every day, some days, or not at all?

Do you currently use chewing tobacco, snuff, or snus every day, some days, or not at all?

	Frequency	Percent	Valid Percent	Cumulative Percent
swer	30	3.1	3.1	3.1
	8	.8	.8	3.9
	7	.7	.7	4.6
	922	94.9	94.9	99.5
Not sure				99.9
vot ouro	1			100.0
	072			100.0
	swer Not sure	8 7 922	8 .8 7 .7 922 94.9 Not sure 4 .4 1 .1	8 .8 .8 .7 .7 .7 .7 .7 .7 .7 .922 .94.9 .94.9 .4 .4 .4 .4 .1 .1 .1 .1

# Do you currently use chewing tobacco, snuff, or snus every day, some days, or not at all?

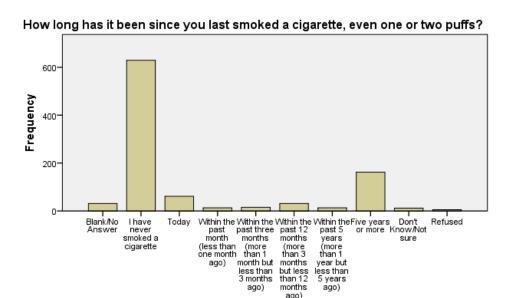


Do you currently use chewing tobacco, snuff, or snus every day, some days, or not at all?

77) How long has it been since you last smoked a cigarette, even one or two puffs?

How long has it been since you last smoked a cigarette, even one or two puffs?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Blank/No Answer	31	3.2	3.2	3.2
	I have never smoked a cigarette	629	64.7	64.7	67.9
	Today	61	6.3	6.3	74.2
	Within the past month (less than one month ago)	13	1.3	1.3	75.5
	Within the past three months (more than 1 month but less than 3 months ago)	15	1.5	1.5	77.1
	Within the past 12 months (more than 3 months but less than 12 months ago)	31	3.2	3.2	80.2
	Within the past 5 years (more than 1 year but less than 5 years ago)	13	1.3	1.3	81.6
	Five years or more	162	16.7	16.7	98.3
	Don't Know/Not sure	12	1.2	1.2	99.5
	Refused	5	.5	.5	100.0
	Total	972	100.0	100.0	



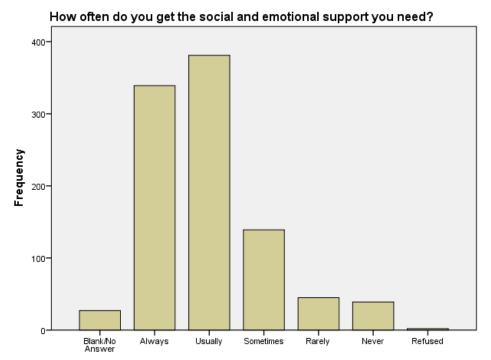
How long has it been since you last smoked a cigarette, even one or two puffs?

## **Emotional and Life Satisfaction**

78) How often do you get the social and emotional support you need?

How often do you get the social and emotional support you need?

	How often do you get the social and emotional support you need?						
		Frequency	Percent	Valid Percent	Cumulative Percent		
Valid	Blank/No Answer	27	2.8	2.8	2.8		
	Always	339	34.9	34.9	37.7		
	Usually	381	39.2	39.2	76.9		
	Sometimes	139	14.3	14.3	91.2		
	Rarely	45	4.6	4.6	95.8		
	Never	39	4.0	4.0	99.8		
	Refused	2	.2	.2	100.0		
	Total	972	100.0	100.0			

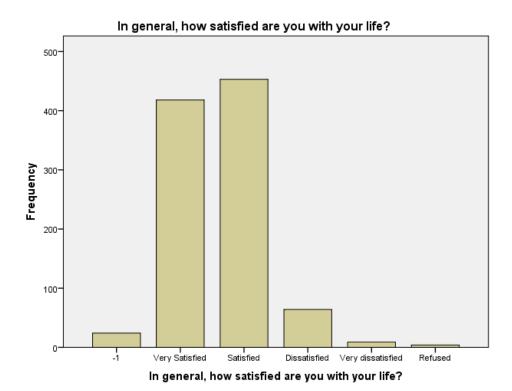


How often do you get the social and emotional support you need?

79) In general, how satisfied are you with your life?

In general, how satisfied are you with your life?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	-1 (Did not Respond)	24	2.5	2.5	2.5
	Very Satisfied	418	43.0	43.0	45.5
	Satisfied	453	46.6	46.6	92.1
	Dissatisfied	64	6.6	6.6	98.7
	Very dissatisfied	9	.9	.9	99.6
	Refused	4	.4	.4	100.0
	Total	972	100.0	100.0	100.0



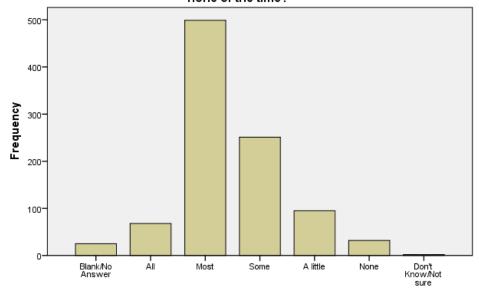
80) During the past 30 days, how many days have you felt very healthy and full of energy – all of the time, most of the time, some of the time, a little of the time or none of the time?

During the past 30 days, how many days have you felt very healthy and full of energy - all of the time, most of the

time, some of the time, a little of the time or none of the time?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Blank/No Answer	25	2.6	2.6	2.6
	All	68	7.0	7.0	9.6
	Most	499	51.3	51.3	60.9
	Some	251	25.8	25.8	86.7
	A little	95	9.8	9.8	96.5
	None	32	3.3	3.3	99.8
	Don't Know/Not sure	2	.2	.2	100.0
	Total	972	100.0	100.0	

# During the past 30 days, how many days have you felt very healthy and full of energy – all of the time, most of the time, some of the time, a little of the time or none of the time?



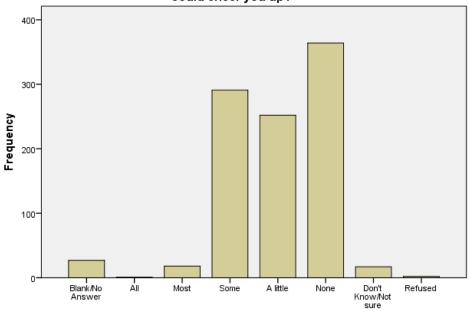
During the past 30 days, how many days have you felt very healthy and full of energy – all of the time, most of the time, some of the time, a little of the time or none of the time?

81) During the past 30 days, about how often did you feel so depressed that nothing could cheer you up?

During the past 30 days, about how often did you feel so depressed that nothing could cheer you up?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Blank/No Answer	27	2.8	2.8	2.8
	All	1	.1	.1	2.9
	Most	18	1.9	1.9	4.7
	Some	291	29.9	29.9	34.7
	A little	252	25.9	25.9	60.6
	None	364	37.4	37.4	98.0
	Don't Know/Not sure	17	1.7	1.7	99.8
	Refused	2	.2	.2	100.0
	Total	972	100.0	100.0	

# During the past 30 days, about how often did you feel so depressed that nothing could cheer you up?

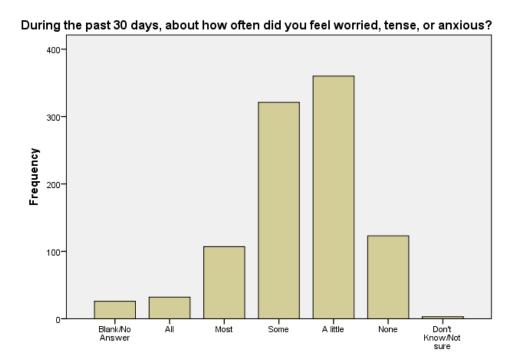


During the past 30 days, about how often did you feel so depressed that nothing could cheer you up?

82) During the past 30 days, about how often did you feel worried, tense, or anxious?

During the past 30 days, about how often did you feel worried, tense, or anxious?

	builing the past 30 days, about now often did you reel worned, tense, or anxious?					
		Frequency	Percent	Valid Percent	Cumulative Percent	
Valid	Blank/No Answer	26	2.7	2.7	2.7	
	All	32	3.3	3.3	6.0	
	Most	107	11.0	11.0	17.0	
	Some	321	33.0	33.0	50.0	
	A little	360	37.0	37.0	87.0	
	None	123	12.7	12.7	99.7	
	Don't Know/Not sure	3	.3	.3	100.0	
	Total	972	100.0	100.0		



During the past 30 days, about how often did you feel worried, tense, or anxious?

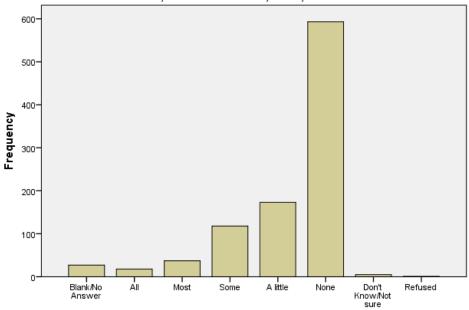
83) During the past 30 days, about how often did pain make it hard for you to do your usual activities, such as self-care, work, or recreation?

During the past 30 days, about how often did pain make it hard for you to do your usual activities, such as self-

care, work, or recreation?

	care, work, or recreation?					
		Frequency	Percent	Valid Percent	Cumulative Percent	
Valid	Blank/No Answer	27	2.8	2.8	2.8	
	All	18	1.9	1.9	4.6	
	Most	37	3.8	3.8	8.4	
	Some	118	12.1	12.1	20.6	
	A little	173	17.8	17.8	38.4	
	None	593	61.0	61.0	99.4	
	Don't Know/Not sure	5	.5	.5	99.9	
	Refused	1	.1	.1	100.0	
	Total	972	100.0	100.0		

During the past 30 days, about how often did pain make it hard for you to do your usual activities, such as self-care, work, or recreation?



During the past 30 days, about how often did pain make it hard for you to do your usual activities, such as self-care, work, or recreation?

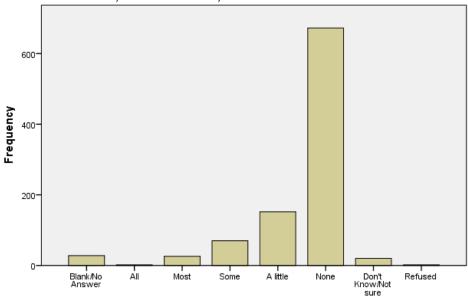
84) During the past 30 days, about how often did you feel hopeless – all of the time, most of the time, some of the time, a little of the time or none of the time?

During the past 30 days, about how often did you feel hopeless - all of the time, most of the time, some of the

time, a little of the time or none of the time?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Blank/No Answer	28	2.9	2.9	2.9
	All	2	.2	.2	3.1
	Most	26	2.7	2.7	5.8
	Some	70	7.2	7.2	13.0
	A little	152	15.6	15.6	28.6
	None	672	69.1	69.1	97.7
	Don't Know/Not sure	20	2.1	2.1	99.8
	Refused	2	.2	.2	100.0
	Total	972	100.0	100.0	

During the past 30 days, about how often did you feel hopeless – all of the time, most of the time, some of the time, a little of the time or none of the time?



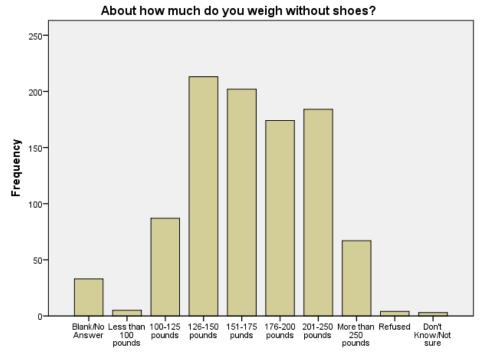
During the past 30 days, about how often did you feel hopeless — all of the time, most of the time, some of the time, a little of the time or none of the time?

## Weight

85) About how much do you weigh without shoes?

About how much do you weigh without shoes?

_	About now much do you weigh without shoes?					
	_	Frequency	Percent	Valid Percent	Cumulative Percent	
Valid	Blank/No Answer	33	3.4	3.4	3.4	
	Less than 100 pounds	5	.5	.5	3.9	
	100-125 pounds	87	9.0	9.0	12.9	
	126-150 pounds	213	21.9	21.9	34.8	
	151-175 pounds	202	20.8	20.8	55.6	
	176-200 pounds	174	17.9	17.9	73.5	
	201-250 pounds	184	18.9	18.9	92.4	
	More than 250 pounds	67	6.9	6.9	99.3	
	Refused	4	.4	.4	99.7	
	Don't Know/Not sure	3	.3	.3	100.0	
	Total	972	100.0	100.0		

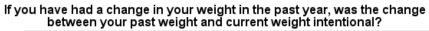


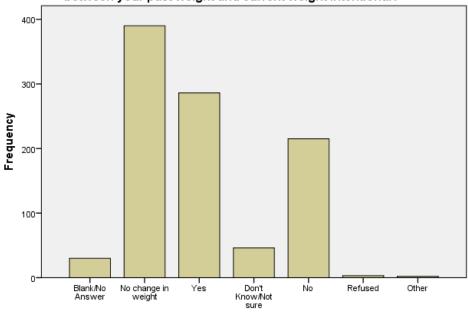
About how much do you weigh without shoes?

86) If you have had a change in your weight in the past year, was the change between your past weight and current weight intentional?

If you have had a change in your weight in the past year, was the change between your past weight and current

weight intentional? Frequency Percent Valid Percent **Cumulative Percent** Valid Blank/No Answer 30 3.1 3.1 3.1 40.1 40.1 43.2 No change in weight 390 Yes 286 29.4 29.4 72.6 Don't Know/Not sure 46 4.7 4.7 77.4 215 22.1 22.1 99.5 Refused 99.8 3 .3 .3 .2 Other 2 .2 100.0 972 100.0 100.0 Total



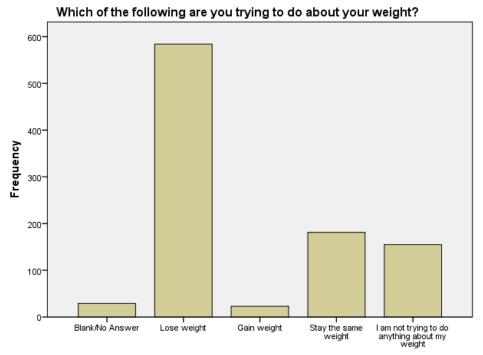


If you have had a change in your weight in the past year, was the change between your past weight and current weight intentional?

87) Which of the following are you trying to do about your weight?

Which of the following are you trying to do about your weight?

	which of the following are you trying to do about your weight:						
		Frequency	Percent	Valid Percent	Cumulative Percent		
Valid	Blank/No Answer	29	3.0	3.0	3.0		
	Lose weight	584	60.1	60.1	63.1		
	Gain weight	23	2.4	2.4	65.4		
	Stay the same weight	181	18.6	18.6	84.1		
	I am not trying to do anything about my weight	155	15.9	15.9	100.0		
	Total	972	100.0	100.0			



Which of the following are you trying to do about your weight?

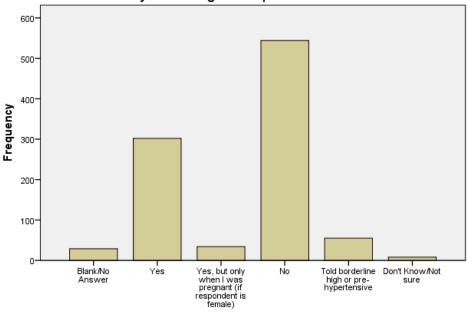
## **Hypertension Awareness**

88) Have you EVER been told by a doctor, nurse, or other health professional that you have high blood pressure?

Have you EVER been told by a doctor, nurse, or other health professional that you have high blood pressure?

	Have you Even been told by a doctor, harse,	er emier meanin pr		j	
_		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Blank/No Answer	29	3.0	3.0	3.0
	Yes	302	31.1	31.1	34.1
	Yes, but only when I was pregnant (if				
	respondent is female)	34	3.5	3.5	37.6
	No	544	56.0	56.0	93.5
	Told borderline high or pre-hypertensive	55	5.7	5.7	99.2
	Don't Know/Not sure	8	.8	.8	100.0
	Total	972	100.0	100.0	

Have you EVER been told by a doctor, nurse, or other health professional that you have high blood pressure?

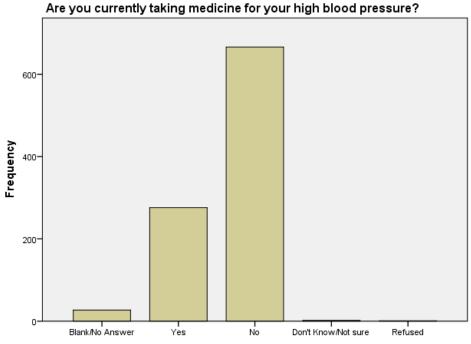


Have you EVER been told by a doctor, nurse, or other health professional that you have high blood pressure?

89) Are you currently taking medicine for your high blood pressure?

Are you currently taking medicine for your high blood pressure?

	rac year carrenary tanang meanonie io. year mgm brock procedure.					
		Frequency	Percent	Valid Percent	Cumulative Percent	
Valid	Blank/No Answer	27	2.8	2.8	2.8	
	Yes	276	28.4	28.4	31.2	
	No	666	68.5	68.5	99.7	
	Don't Know/Not sure	2	.2	.2	99.9	
	Refused	1	.1	.1	100.0	
	Total	972	100.0	100.0		



Are you currently taking medicine for your high blood pressure?

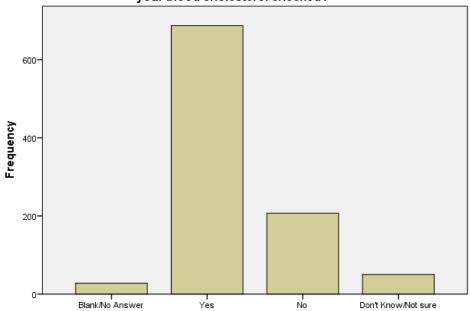
### **Cholesterol Awareness**

90) Blood cholesterol is a fatty substance found in the blood. Have you EVER had your blood cholesterol checked?

Blood cholesterol is a fatty substance found in the blood. Have you EVER had your blood cholesterol checked?

_		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Blank/No Answer	28	2.9	2.9	2.9
	Yes	687	70.7	70.7	73.6
	No	207	21.3	21.3	94.9
	Don't Know/Not sure	50	5.1	5.1	100.0
	Total	972	100.0	100.0	

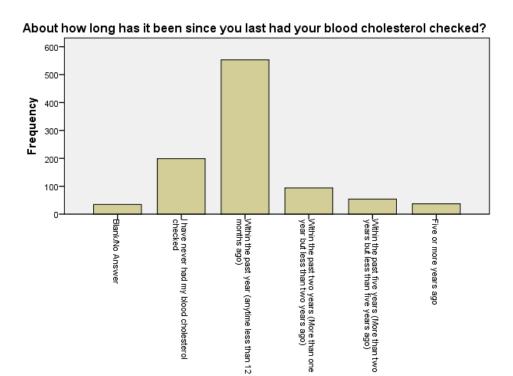
# Blood cholesterol is a fatty substance found in the blood. Have you EVER had your blood cholesterol checked?



Blood cholesterol is a fatty substance found in the blood. Have you EVER had your blood cholesterol checked?

91) About how long has it been since you last had your blood cholesterol checked?

About how long has it been since you last had your blood cholesterol checked?						
		Frequency	Percent	Valid Percent	Cumulative Percent	
Valid	Blank/No Answer	35	3.6	3.6	3.6	
	I have never had my blood cholesterol checked	199	20.5	20.5	24.1	
	Within the past year (anytime less than 12 months ago)	553	56.9	56.9	81.0	
	Within the past two years (More than one year but less than two years ago)	94	9.7	9.7	90.6	
	Within the past five years (More than two years but less than five years ago)	54	5.6	5.6	96.2	
	Five or more years ago	37	3.8	3.8	100.0	
	Total	972	100.0	100.0		



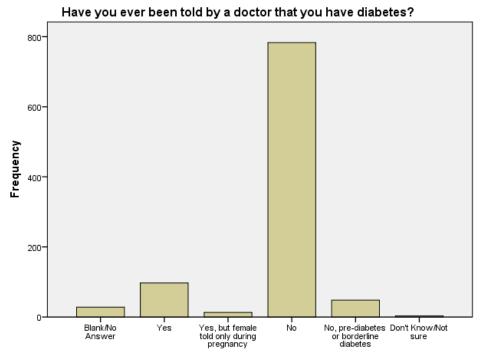
About how long has it been since you last had your blood cholesterol ...

### **Diabetes**

92) Have you ever been told by a doctor that you have diabetes?

Have you ever been told by a doctor that you have diabetes?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Blank/No Answer	28	2.9	2.9	2.9
	Yes	97	10.0	10.0	12.9
	Yes, but female told only during pregnancy	13	1.3	1.3	14.2
	No	783	80.6	80.6	94.8
	No, pre-diabetes or borderline diabetes	48	4.9	4.9	99.7
	Don't Know/Not sure	3	.3	.3	100.0
	Total	972	100.0	100.0	

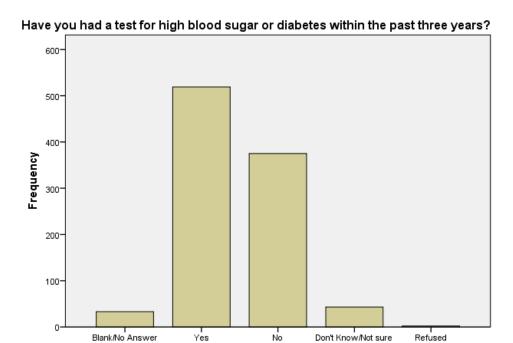


Have you ever been told by a doctor that you have diabetes?

93) Have you had a test for high blood sugar or diabetes within the past three years?

Have you had a test for high blood sugar or diabetes within the past three years?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Blank/No Answer	33	3.4	3.4	3.4
	Yes	519	53.4	53.4	56.8
	No	375	38.6	38.6	95.4
	Don't Know/Not sure	43	4.4	4.4	99.8
	Refused	2	.2	.2	100.0
	Total	972	100.0	100.0	



Have you had a test for high blood sugar or diabetes within the past three years?

94) Have you ever been told by a doctor or other health professional that you have pre-diabetes or borderline diabetes?

Have you ever been told by a doctor or other health professional that you have pre-diabetes or borderline

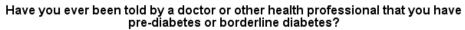
Valid Percent Cumulative Percent Frequency Percent 36 3.7

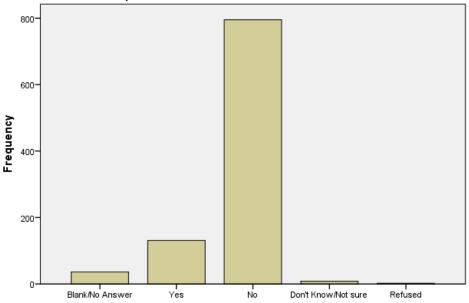
3.7

Yes	131	13.5	13.5	17.2
No	795	81.8	81.8	99.0
Don't Know/Not sure	8	.8	.8	99.8
Refused	2	.2	.2	100.0
Total	972	100.0	100.0	

Valid

Blank/No Answer





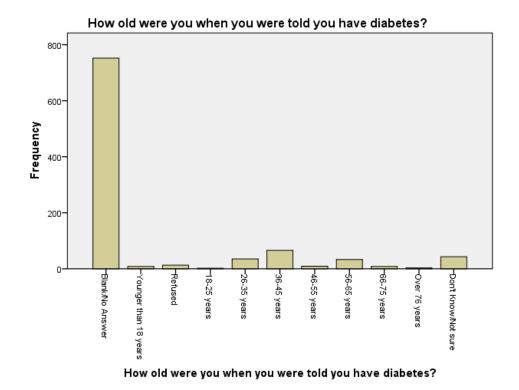
Have you ever been told by a doctor or other health professional that you have pre-diabetes or borderline diabetes?

#### If you have been told you have diabetes, please answer the following 11 questions

95) How old were you when you were told you have diabetes?

How old were you when you were told you have diabetes?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Blank/No Answer	752	77.4	77.4	77.4
	Younger than 18 years	8	.8	.8	78.2
	Refused	13	1.3	1.3	79.5
	18-25 years	2	.2	.2	79.7
	26-35 years	35	3.6	3.6	83.3
	36-45 years	66	6.8	6.8	90.1
	46-55 years	9	.9	.9	91.0
	56-65 years	33	3.4	3.4	94.4
	66-75 years	8	.8	.8	95.3
	Over 76 years	3	.3	.3	95.6
	Don't Know/Not sure	43	4.4	4.4	100.0
	Total	972	100.0	100.0	

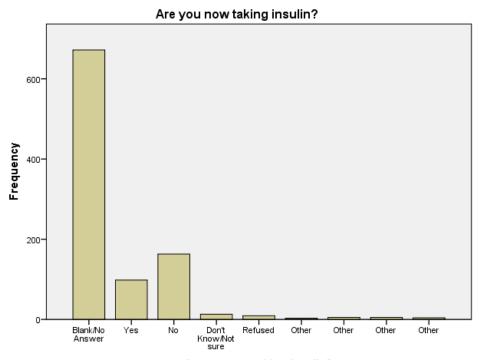


### 96) Are you now taking insulin?

Are you now taking insulin?

	Are you now taking insulin?					
		Frequency	Percent	Valid Percent	Cumulative Percent	
Valid	Blank/No Answer	672	69.1	69.1	69.1	
	Yes	98	10.1	10.1	79.2	
	No	163	16.8	16.8	96.0	
	Don't Know/Not sure	13	1.3	1.3	97.3	
	Refused	9	.9	.9	98.3	
	Other	3	.3	.3	98.6	
	Other	5	.5	.5	99.1	
	Other	5	.5	.5	99.6	
	Other	4	.4	.4	100.0	
	Total	972	100.0	100.0		

# \*NOTE: Problems with labeling between the data sets (thus multiple categories that say "other")



Are you now taking insulin?

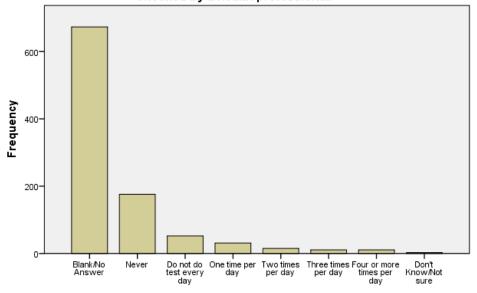
97) About how often do you check your blood for glucose or sugar? Include times when checked by a family member or friend, but do NOT include times when checked by a health professional.

About how often do you check your blood for glucose or sugar? Include times when checked by a family member or

friend, but do NOT include times when checked by a health professional.

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Blank/No Answer	673	69.2	69.2	69.2
	Never	176	18.1	18.1	87.3
	Do not do test every day	52	5.3	5.3	92.7
	One time per day	31	3.2	3.2	95.9
	Two times per day	15	1.5	1.5	97.4
	Three times per day	11	1.1	1.1	98.6
	Four or more times per day	11	1.1	1.1	99.7
	Don't Know/Not sure	3	.3	.3	100.0
	Total	972	100.0	100.0	

About how often do you check your blood for glucose or sugar? Include times when checked by a family member or friend, but do NOT include times when checked by a health professional.



About how often do you check your blood for glucose or sugar? Include times when checked by a family member or friend, but do NOT include times when checked by a health professional.

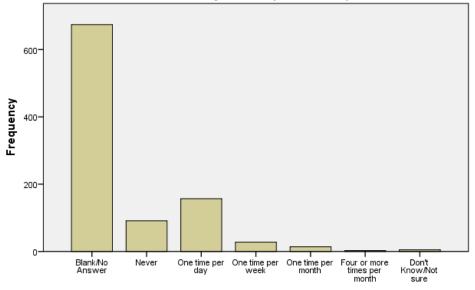
98) About how often do you check your feet for any sores or irritations? Include times when checked by a family member or friend, but do NOT include times when checked by a health professional

About how often do you check your feet for any sores or irritations? (Include times when checked by a family member or

friend, but do NOT include times when checked by a health professional)

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Blank/No Answer	674	69.3	69.3	69.3
	Never	91	9.4	9.4	78.7
	One time per day	157	16.2	16.2	94.9
	One time per week	28	2.9	2.9	97.7
	One time per month	14	1.4	1.4	99.2
	Four or more times per month	3	.3	.3	99.5
	Don't Know/Not sure	5	.5	.5	100.0
	Total	972	100.0	100.0	

# About how often do you check your feet for any sores or irritations? (Include times when checked by a family member or friend, but do NOT include times when checked by a health professional)



About how often do you check your feet for any sores or irritations? (Include times when checked by a family member or friend, but do NOT include times when checked by a health professional)

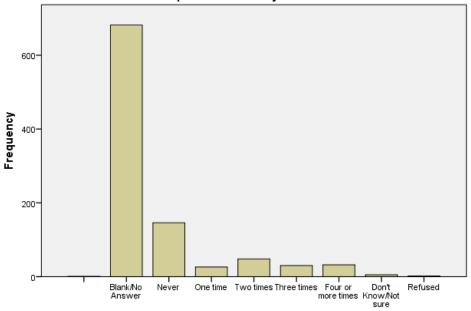
99) About how many times in the past 12 months have you seen a doctor, nurse, or other health professional for your diabetes?

About how many times in the past 12 months have you seen a doctor, nurse, or other health professional for your

diabetes?

diabetes?					
		Frequency	Percent	Valid Percent	Cumulative Percent
Valid		1	.1	.1	.1
Bla	nk/No Answer	682	70.2	70.2	70.3
Nev	ver	146	15.0	15.0	85.3
One	e time	26	2.7	2.7	88.0
Two	o times	48	4.9	4.9	92.9
Thr	ree times	30	3.1	3.1	96.0
Fou	ur or more times	32	3.3	3.3	99.3
Dor	n't Know/Not sure	5	.5	.5	99.8
Ref	fused	2	.2	.2	100.0
Tot	al	972	100.0	100.0	

About how many times in the past 12 months have you seen a doctor, nurse, or other health professional for your diabetes?



About how many times in the past 12 months have you seen a doctor, nurse, or other health professional for your diabetes?

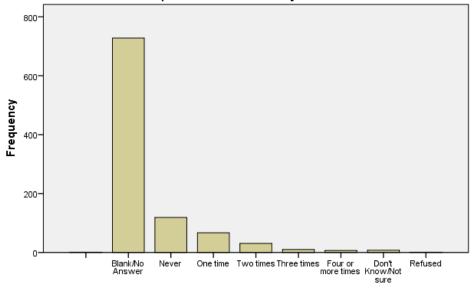
100) A test for "A1C" measures the average level of blood sugar over the past three months. About how many times in the past 12 months has a doctor, nurse, or other health professional checked you for "A1C"?

A test for "A1C" measures the average level of blood sugar over the past three months. About how many times in

the past 12 months has a doctor, nurse, or other health professional checked you for "A1C"?

_	the past 12 months has a doctor, hurse, or other health professional checked you for "ATC"?				
		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	-	1	.1	.1	.1
	Blank/No Answer	728	74.9	74.9	75.0
	Never	119	12.2	12.2	87.2
	One time	67	6.9	6.9	94.1
	Two times	31	3.2	3.2	97.3
	Three times	10	1.0	1.0	98.4
	Four or more times	7	.7	.7	99.1
	Don't Know/Not sure	8	.8	.8	99.9
	Refused	1	.1	.1	100.0
	Total	972	100.0	100.0	

A test for "A1C" measures the average level of blood sugar over the past three months. About how many times in the past 12 months has a doctor, nurse, or other health professional checked you for "A1C"?



A test for "A1C" measures the average level of blood sugar over the past three months. About how many times in the past 12 months has a doctor, nurse, or other health professional checked you for "A1C"?

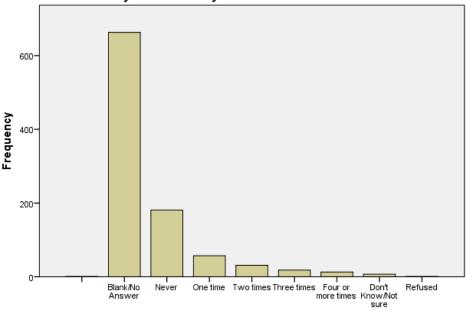
101) About how many times in the past 12 months has a health professional checked your feet for any sores or irritations?

About how many times in the past 12 months has a health professional checked your feet for any sores or

irritations?

	Frequency	Percent	Valid Percent	Cumulative Percent
Valid	1	.1	.1	.1
Blank/No Answer	663	68.2	68.2	68.3
Never	181	18.6	18.6	86.9
One time	57	5.9	5.9	92.8
Two times	31	3.2	3.2	96.0
Three times	18	1.9	1.9	97.8
Four or more times	13	1.3	1.3	99.2
Don't Know/Not sure	7	.7	.7	99.9
Refused	1	.1	.1	100.0
Total	972	100.0	100.0	

# About how many times in the past 12 months has a health professional checked your feet for any sores or irritations?



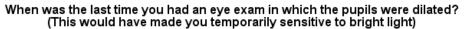
About how many times in the past 12 months has a health professional checked your feet for any sores or irritations?

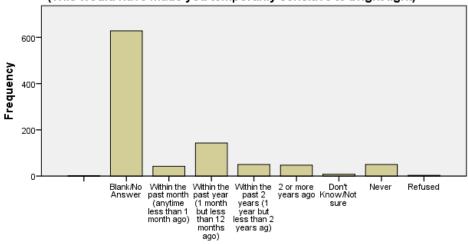
When was the last time you had an eye exam in which the pupils were dilated? (This would have made you temporarily sensitive to bright light).

When was the last time you had an eye exam in which the pupils were dilated? (This would have made you temporarily sensitive

to bright light)

to bright light)					
		Frequency	Percent	Valid Percent	Cumulative Percent
Valid		1	.1	.1	.1
	Blank/No Answer	628	64.6	64.6	64.7
	Within the past month (anytime less than 1 month ago)	42	4.3	4.3	69.0
	Within the past year (1 month but less than 12 months ago)	143	14.7	14.7	83.7
	Within the past 2 years (1 year but less than 2 years ag)	50	5.1	5.1	88.9
	2 or more years ago	47	4.8	4.8	93.7
	Don't Know/Not sure	8	.8	.8	94.5
	Never	50	5.1	5.1	99.7
	Refused	3	.3	.3	100.0
	Total	972	100.0	100.0	





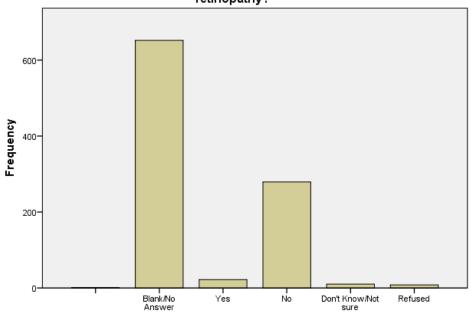
When was the last time you had an eye exam in which the pupils were dilated? (This would have made you temporarily sensitive to bright light)

103) Has a doctor ever told you that diabetes has affected your eyes or that you had retinopathy?

Has a doctor ever told you that diabetes has affected your eyes or that you had retinopathy?

	Frequency	Percent	Valid Percent	Cumulative Percent
Valid	1	.1	.1	.1
Blank/No Answer	652	67.1	67.1	67.2
Yes	22	2.3	2.3	69.4
No	279	28.7	28.7	98.1
Don't Know/Not sure	10	1.0	1.0	99.2
Refused	8	.8	.8	100.0
Total	972	100.0	100.0	

Has a doctor ever told you that diabetes has affected your eyes or that you had retinopathy?



Has a doctor ever told you that diabetes has affected your eyes or that you had retinopathy?

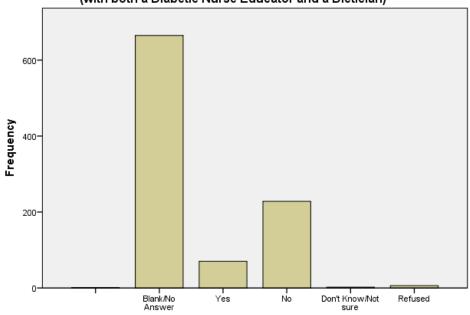
Have you ever taken a formal course or class in how to manage your diabetes (with both a Diabetic Nurse Educator and a Dietician).

Have you ever taken a formal course or class in how to manage your diabetes (with both a Diabetic Nurse

Educator and a Dietician)

Educator and a Dietician)					
_		Frequency	Percent	Valid Percent	Cumulative Percent
Valid		1	.1	.1	.1
	Blank/No Answer	665	68.4	68.4	68.5
	Yes	70	7.2	7.2	75.7
	No	228	23.5	23.5	99.2
	Don't Know/Not sure	2	.2	.2	99.4
	Refused	6	.6	.6	100.0
	Total	972	100.0	100.0	

Have you ever taken a formal course or class in how to manage your diabetes (with both a Diabetic Nurse Educator and a Dietician)



Have you ever taken a formal course or class in how to manage your diabetes (with both a Diabetic Nurse Educator and a Dietician)

# MGH 2016 Community Health

# **Executive Summary of Survey Data**

# Output & Analysis

Kevin J. Brown - August, 2016

### **Introduction and Report**

In 2010 and 2013, a community wide survey was administered across Grant County to provide a comprehensive assessment of the community's health status, behaviors, and education. The following is the third assessment, which was most recently conducted in the fall of 2016.

The forthcoming report will be laid out in the following manner:

- I. Executive Study—summary highlights of the 2016 community health survey data
- II. Survey methodology and considerations
- III. Output—descriptive statistics results (tables & bar charts) from the survey data

## I. Executive Summary

The 2016 community health survey consisted of the following primary health category dimensions:

- 1) Demographics
- 2) Health Care Access
- 3) Nutrition
- 4) Fruits and Vegetables
- 5) Sugar Sweetened Beverages and Menu Labeling
- 6) Exercise and Activities
- 7) Screenings
- 8) Substance Use
- 9) Emotional and Life Satisfaction
- 10) Weight
- 11) Hypertension Awareness
- 12) Cholesterol Awareness
- 13) Diabetes

Each category utilized an array of questions in order to provide point estimates of the community's health status and/or risk exposure relative to the category. Below is a summary of each category based upon survey output.

#### **Demographics**

The mean age of survey recipients was 44 years old, with a standard deviation of approximately 19 years (Census mean age is approximately 40 years of age for Grant County). 86.2% of respondents were White, 6.3% were Black or African American, and 3.2% were Multi-Racial. Further, approximately 58% of respondents were married, 7.8% were divorced, 5.6% were widowed, and over 21% were never married. Related, a small proportion of the sample had more than 1 child living in the home.

Over 50% of the sample has either attended or completed college, and over 50% are currently employed for wages (with less than 5% of the sample being out of work for less than or more than 1 year). Approximately 50% of survey respondents earn over \$35,000 per year—and over two-thirds are homeowners.

Of interest, nearly 17% of survey participants indicated that they were "limited" in some way related to their activities due to physical, mental, or emotional problems. Moreover, nearly 43% indicated that they "have serious difficulty walking or climbing stairs."

\*NOTE: Survey participants were overwhelmingly female by an approximately 77% to 23% ratio. This suggests some bias in the sample, which could limit the generalizability of survey results.

#### **Health Care Access**

Approximately 13% of the respondents have health care coverage under Medicare or Medicaid. The majority (43.8%) of the sample have health care through their employer. Over 75% of respondents indicated that they were not "delayed" in getting their needed medical care, with over 6% indicating that they "could not get an appointment soon enough."

Over 7% indicated that in the past 12 months there was a time when they did not have any health insurance or coverage. Over 90% of survey participants visited the doctor at least once within the last year.

Of interest, over 12% of respondents indicated that, within the last 12 months, they did not take a prescribed medication due to the prohibitive cost of the medication, and over one-third of the sample indicated that they currently possessed medical bills that were being paid off over time.

#### **Nutrition**

Over 50% of respondents indicated that they are at least one meat serving per day. As it related to fast food, 28%, or nearly one-third, suggested that they "seldom" ate fast food, and 8.8% indicated that they are fast food "daily." Similarly, 24.2% of respondents indicated that they "seldom" ate out at a sit down restaurant, and 3.5% are at a sit down restaurant "daily."

#### Fruits and Vegetables

A little over one-third of the sample indicated that they failed to drink at least one 100% fruit juice within a given month. Well over 90% indicated that they consumed fruit at least once a month, and over 70% indicated consuming some type of bean (or bean-based food item) within a given month. Approximately 85% consumed some type of dark vegetable, 83% an orange colored vegetable, and 96% some other type of vegetable—all within the previous month.

#### Sugar Sweetened Beverages and Menu Labeling

Over 50% of the sample marked that they you drink regular soda or pop that contains sugar within a given week, where approximately only one-third drink a sweetened fruit drink (e.g., lemonade or Kool-Aid) within a given week.

When eating out, respondents indicated that "calorie-information" helps them to decide what to eat to varying degrees: 5% "Always"; 15% "Most of the Time"; 11% "About Half the Time"; 32% "Sometimes"; and 35.5% "Never."

#### **Exercise and Activities**

Approximately two-thirds of the sample indicated that they get to exercise at least once within a given week, with 17% indicating that they were limited in some activities because of physical, mental, or emotional problems.

Of interest, 75% of respondents indicated watching at least one hour of television per day, with nearly one-sixth of the entire sample watching "4 or more" hours of television per day. Approximately 54% of respondents indicated playing video or computer games or using a computer for something that is not related to work (e.g., social media), with nearly 8% of the entire sample watching or playing "4 or more" hours per day.

82% of the sample indicated that they could do "all" or "most" of the things they would like to do.

#### **Screenings**

Two-thirds of the sample engaged in a physical by a physician or a medical provider within the last year. Moreover, over 75% of the sample had health insurance that paid for wellness & preventive health screenings/physicals.

Over two-thirds of respondents had undertaken a blood glucose (sugar) test to check for diabetes (where 22% indicated they had never had this test).

Of the female respondents, over 20.9% indicated that they had undertaken a check-up for cervical cancer, and 21.8% for breast cancer. Of the male respondents, 9% indicated that they had undertaken a PSA test for prostate cancer.

Just under 40% of the sample has had a Sigmoidoscopy or colonoscopy at some point (where just

under 60% had indicated that they had not). 37% of the sample had undertaken a skin check for skin cancer (59% had not), and over 75% indicated having a blood test aimed to measure cholesterol and/or other lipids.

Less than one-fifth of the sample had undertaken a hearing test within the last two years (and over 50% indicated that "the last time they had their hearing checked" was five years or over).

#### **Substance Use**

Only one-third of the sample indicated that they were taking "0" prescription drugs per day (12% indicated taking "5 or more" per day). Over 72% of respondents denoted drinking "0" alcoholic beverages in a week (3.5% indicated "5 or more" per week). 85% of respondents noted that they had never used drugs other than those prescribed by your medical provider (83% had never smoked marijuana; 93.5% had never used cocaine, crack, freebase, or heroin; and 2.2% of respondents suggested that they could not stop using illegal drugs when they wanted to).

87.8% of the sample indicated that they did not smoke cigarettes or e-cigarettes (nearly two-thirds noted that they had never smoked a cigarette in their life), while nearly 95% indicated that they do not use chewing tobacco.

#### **Emotional and Life Satisfaction**

Of interest, over 74% of the sample suggested that they "always" or "usually" get the social and emotional support that they need (with 4% saying they "never" get the social and emotional support they need). Moreover, nearly 90% of survey respondents indicated that they are, in general, either "satisfied" or "very satisfied" with their lives (with <8% indicating they were "dissatisfied" or "very dissatisfied").

Within the past 30 days, nearly 60% of the sample indicated that they felt very healthy and full of energy "all of the time" or "most of the time" (with over 12% suggesting that they felt very healthy and full of energy "a little" or "none"). Also within the past 30 days, nearly one-third of the respondents indicated feeling—at least "some" of the time—so depressed that "nothing could cheer them up." Similarly, respondents indicated feelings of anxiety. When asked, "During the past 30 days, about how often did you feel worried, tense, or anxious?"—3.3% of respondents answered "all of the time"; 11% "most of the time"; and 33% "some of the time" (12.7% answered "none").

When asked about feelings of hopelessness (how often did "you feel hopeless?") <2% of survey respondents answered "all of the time"; 3.8% "most of the time"; and 12.1% "some of the time" (61% answered "none").

When asked about debilitating pain (how often did "pain make it hard for you to do your usual activities, such as self-care, work, or recreation?") <1% of survey respondents answered "all of the time"; 2.7% "most of the time"; and 7.2% "some of the time" (69% answered "none").

#### Weight

When looking at weight, approximately 19% of the sample weighed between 200 and 250 pounds, and approximately 7% weighed more than 250 pounds. Nearly one-third of the sample indicated a change in weight within the last year that was "intentional"—with over 60% of respondents indicating that they were actively trying to lose weight and approximately 19% trying to "stay the same weight."

#### **Hypertension Awareness**

Nearly one-third of respondents have had a medical professional tell them that they have high-blood pressure, and 28% of respondents indicated taking medicine "currently" for high blood pressure.

#### **Cholesterol Awareness**

Over 70% of the sample has been checked for blood cholesterol (with nearly 57% indicating that they had been checked within the past year).

#### **Diabetes**

10% of the sample has been told, at some point, that they have diabetes, and over half had been checked for diabetes or high blood sugar within the previous three years (38.6% indicated that they had not been checked for diabetes within the previous three years). Related, over 13% of the sample had been told by a health professional that they had pre-diabetes or borderline diabetes (81.8% said they had not).

## **Comparison to 2013 Survey**

In 2013, various health "hot topics" were identified. These included: Mental Health Status, Chronic Disease, and Health Care Access. Relative to this, it is important to highlight a few key areas when comparing the 2016 survey to the 2013 survey.

#### **Mental Health Status**

#### Depression

In 2013, over 75% of participants indicated feeling worried, tense, or anxious in the previous 30 days upon taking the survey. In 2016, less than 50% indicated feeling worried, tense, or anxious "some", "most", or "all" of the time in the previous 30 days.

Support and Satisfaction

In 2013, 77.1% of respondents indicated that they "Usually" or "Always" get the social and emotional support they need. This value was 74% for 2016.

In 2013, 86.1% of respondents indicated that they are "Satisfied" or "Very Satisfied" with their life. In 2016, the value was 89.6%.

#### **Chronic Diseases**

#### Diabetes

In 2013, approximately half of Grant County adults had undertaken a test for high blood sugar or diabetes within the previous three years of taking the survey. In 2016, this figure was 53.4% (or over half). Furthermore, approximately 13% of Grant County adults have been told that they have diabetes, with approximately 5% of those individuals currently taking insulin. In 2016, this figure was only 10% (suggesting a potential decrease), with 10.1% of those individuals currently taking insulin.

#### Blood Pressure

In 2013, 38.2% of respondents indicated that they had been advised at some point by a doctor that they had high blood pressure. Comparatively, in 2016, only 31.1% of respondents indicated that they had been advised at some point by a doctor that they had high blood pressure.

#### **Health Care Access**

In 2013, approximately 15% of Grant County residents indicated that they did not have health care coverage, including health insurance, prepaid plans, and government plans. In 2016, the figure was approximately 3% (suggesting a significant decrease). However, in 2016, when asked "In the past 12 months was there any time when you did not have any health insurance or coverage?" 7.6% of the sample answered "Yes." Moreover, in 2016, only 8% of the sample indicated that they had not visited a doctor, nurse, or health professional within the previous 12 months.