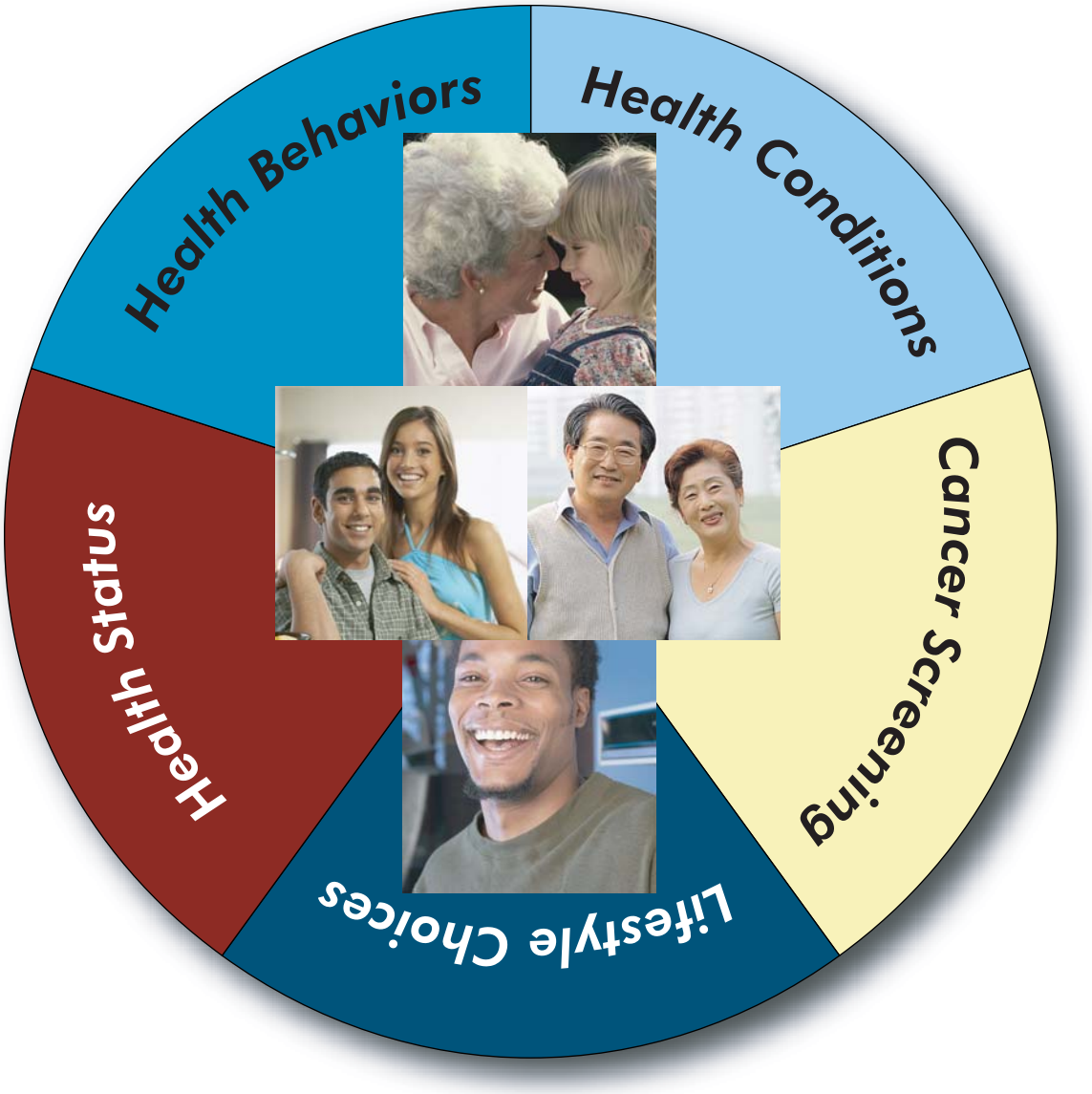
Report on the Findings of the 2006 Nassau County Behavioral Risk Factor Survey



Nassau County Department of Health
March, 2007

Thomas R. Suozzi
County Executive

Abby J. Greenberg, M.D.
Acting Commissioner

FROM THE COMMISSIONER:

Nassau County Department of Health is pleased to provide findings from the 2006 Nassau County Behavioral Risk Factor Surveillance Survey (BRFSS).

The BRFSS is an ongoing telephone surveillance program designed to identify emerging health problems, establish and track health objectives, and develop public health policies and programs. The survey also provides critical information for targeting local areas of need and evaluating the effectiveness of public health and health care initiatives. Additional information about the Nassau County BRFSS is available by contacting the Department's BRFSS Coordinator via email at nchealthdept@nassaucountyny.gov or via telephone at 516-571-3410.

We appreciate the efforts of the many individuals both within the Department and from the general public who made this publication possible. This evaluation could not have been done without the willingness of the over 4,600 anonymous residents who participated in the survey. We thank you.

Sincerely,

Abby J. Greenberg, M.D.
Acting Commissioner

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Executive Summary

The Behavioral Risk Factor Surveillance System (BRFSS) is the largest health surveillance system in the world. It tracks health conditions and risk behaviors and provides the only source of national health-risk data. Sponsored by the Centers for Disease Control and Prevention (CDC), this ongoing telephone survey of non-institutionalized adults is carried out independently by all 50 States, the District of Columbia, and several major local jurisdictions. Analysis of BRFSS data allows public health officials to detect emerging health problems, plan and evaluate prevention and control activities, measure progress toward state and national health objectives and support health-related legislative efforts.

Although previous BRFSS projects at the national and state level include data obtained from Nassau residents, dependable information about the county and its individual communities cannot be drawn from these surveys. In 2003, this gap was partially bridged with the creation of CDC's Selected Metropolitan/Micropolitan Area Risk Trends (SMART) project, which provided combined estimates of health conditions and risk behaviors for Nassau and Suffolk counties. However, the SMART project did not allow for single county estimates, subgroup or stratified analyses. Therefore, in order to better determine the particular health needs of its residents and to create a baseline of county health data, Nassau County Department of Health commissioned a BRFSS study of the county.

The Nassau County Behavioral Risk Factor Survey consisted of 141 questions on a variety of health conditions and risk behaviors. To allow for a refined geographic analysis and to better reflect Nassau's diversity, the sample was stratified into nine regions and towns [Freeport and Roosevelt; Hempstead Village and Uniondale; Inwood; Town of Hempstead (excluding Freeport, Roosevelt, Hempstead Village, Uniondale and Inwood); Westbury/New Cassel; Town of North Hempstead (excluding Westbury and New Cassel); Town of Oyster Bay; City of Long Beach; and the City of Glen Cove] and by demographic variables [gender, age, race/ethnicity, education, household income, and health insurance status].

This section provides an overview of selected results from the survey by grouping modules into four major categories: Health Status and Access, Health Behaviors and Lifestyle Choices, Health Conditions, and Cancer Screening:

- **Health Status and Access:** *Modules contained in this category include Health Status, Health Related Quality of Life, Activity Restriction, Health Care Access and Reactions to Race in Health Care Settings*
- **Health Behaviors and Lifestyle Choices:** *Modules contained in this category include: Physical Activity, Fruit and Vegetable Intake, Overweight/Obesity, Tobacco Use, HIV/AIDS, and Alcohol Consumption.*
- **Health Conditions:** *Modules contained in this category include: Cardiovascular Disease, Cholesterol, Hypertension, Diabetes, Asthma, and Depression*
- **Cancer Screening:** *Modules contained in this category include: Women's Health, Prostate Cancer, and Colorectal Cancer*

Overall, analysis of Nassau's BRFSS data revealed that in many areas the county's health is better than that seen in New York State and the nation. However, several findings emerged that are cause for concern. Hispanics appear to be faring worse than other races/ethnicities and residents of younger age, lower educational and income levels and the uninsured are receiving less preventive care. Additional information can be found in Table 1 and in Chapters 3 to 6.

Demographic Analysis: Health Status and Access

- ***Age:*** Residents between 25-44 years of age had the highest levels of being uninsured and were significantly more likely to lack coverage than those 55-64 years.
- ***Race/Ethnicity:*** Hispanics were significantly more likely to report being in fair or poor health than all other race/ethnicity groups and to report being uninsured compared to Whites and Blacks. Additionally, Hispanics and Blacks were significantly more likely (at least 4 times more) to perceive that they were treated worse when seeking health care than Whites.
- ***Education:*** Residents with less than a high school education were significantly more likely to report being in fair or poor health and to report being uninsured than those of all other education levels. Within race/ethnicity categories, this group was also significantly more likely to perceive that they were treated worse than other races when seeking health care compared to college graduates.
- ***Household Income:*** Residents with household incomes less than $15,000 were significantly more likely to be uninsured than those with household incomes between $25,000 and $74,999. Additionally, residents with household incomes between $15,000 and $24,999 were significantly more likely to be uninsured than those with household incomes between $35,000 and $74,999.
- ***Health Insurance Status:*** The uninsured were significantly more likely to report being in fair or poor health as compared to the insured.

Geographic Analysis: Nassau residents were significantly less likely to report being in fair or poor than New York State. However, residents of Freeport/Roosevelt and Hempstead Village/ Uniondale were significantly more likely to report being in fair or poor health than residents of the Town of Oyster Bay and the county overall.

Nassau residents were also significantly less likely to report a lack of health insurance compared to both New York State and the nation. However, residents of Freeport/Roosevelt, Hempstead Village/Uniondale, and Westbury/New Cassel had significantly more uninsured residents than the county overall.

Demographic Analysis: Health Behaviors and Lifestyle Choices

- Gender: Men were significantly more likely to be overweight than women, who were significantly more likely than men to eat five or more servings of fruits and vegetables each day. Men were also significantly more likely (2 times more) to report binge drinking during the previous month than women.
- Age: Younger age groups were significantly more likely to report engaging in HIV-related risky behavior than older age groups. Additionally, those between 18-44 years of age were significantly more likely to report binge drinking than those over 55.
- Race/Ethnicity: Whites were significantly more likely to report heavy drinking than Blacks and Hispanics and binge drinking than those of Other race.[1]
- Whites were also significantly more likely than Hispanics to consume five or more fruits and vegetables each day and were significantly less likely than Blacks to be obese.
- Blacks and Hispanics were significantly more likely to report engaging in HIV-related risky behavior than Whites. However, the differences for HIV-related risky behavior compared to Whites were not statistically significant.

[1] "Other race" includes all individuals who did not identify themselves as White, Black or Hispanic.

- Education: Residents with less than a high school education were twice as likely as all other age groups to report engaging in HIV-related risky behavior, although differences were not statistically significant.
- Household Income: No statistically significant findings noted.

Geographic Analysis: Overall, the county had significantly lower levels of current smoking than New York State and the nation. While residents of Glen Cove reported levels higher than New York State and the nation, the differences were not statistically significant.

Similarly, the county had significantly lower levels of binge and heavy drinking than New York State and the nation. Additionally, residents of Inwood and Westbury/New Cassel were significantly less likely to report heavy drinking than Long Beach and the county overall.

Residents of Hempstead Village/Uniondale were significantly less likely to report eating five or more fruits and vegetables a day than the Town of North Hempstead, the county overall and New York State.

Demographic Analysis: Health Conditions

- Gender: Women were more likely to report both high and moderate frequencies of depressive symptoms than men, although differences were not statistically significant.
- Age: Older residents were significantly more likely to be screened for cholesterol in the past five years, have cardiovascular disease and have high blood pressure than younger residents.
- Race/Ethnicity: Whites were significantly more likely to report both having cardiovascular disease than Blacks and higher frequencies of depressive symptoms than those of Other race.[2] Additionally, Whites and Blacks were significantly more likely to report both being screened for cholesterol in the past five years and having been diagnosed with high blood pressure than Hispanics.
- Hispanics were more likely to report having ever been told they have diabetes than all other races/ethnicities. Blacks were at least twice as likely as all other race/ethnicity groups to report a current diagnosis of asthma. However, in both instances, the differences were not statistically significant.
- Education: Residents with less than a high school education were significantly less likely to be screened for cholesterol in the past five years than those of any other level of educational attainment. Additionally, high school graduates were significantly more likely to report having cardiovascular disease than those with some college education and having been diagnosed with high blood pressure than college graduates.
- Household Income: Residents with annual household incomes less than $15,000 were significantly more likely to report having diabetes than those making more than $75,000. Additionally, those making at least $35,000 were significantly more likely to report having been screened for cholesterol in the past five years those making under $25,000.
- Health Insurance Status: Residents with health insurance were statistically more likely to report having had their cholesterol checked in the past five years than those without health insurance.

Geographic Analysis: Overall, the county had significantly higher levels of cholesterol screening in the past five years and significantly lower levels of asthma than New York State and the nation. While Hempstead Village/ Uniondale had the 2nd highest level of diabetes, residents reported comparatively low levels of important measures of quality of care, such as Hemoglobin

[2] "Other races" includes all individuals who did not identify themselves as White, Black or Hispanic.

A1C testing. Its residents also reported significantly lower levels of screening for cholesterol in the past five years than the county overall, New York State and the nation.

In another measure of quality of diabetes care, diabetics in Westbury/New Cassel were significantly more likely to report receiving foot exams than those in Freeport/Roosevelt. Freeport/Roosevelt residents also had significantly higher frequencies of moderate and high depressive symptoms than those residing in Inwood.

Residents of Westbury/New Cassel, the Town of Oyster Bay, Hempstead Village/Uniondale and the City of Glen Cove reported significantly lower levels of current asthma than that seen in New York State.

Demographic Analysis: Cancer Screening

- Age: Women between 18-24 and over 65 years were significantly less likely to report having a Pap test in the last three years than all other age groups. Additionally, those 55 years and older were significantly more likely than those 50-54 years to report ever having a sigmoidoscopy or colonoscopy.
- Race/Ethnicity: Whites were significantly more likely to report ever having a sigmoidoscopy or colonoscopy than those of the Other race category.
- Education: College graduates were significantly more likely to report ever having a sigmoidoscopy or colonoscopy than those with a high school education or less. Female college graduates were also significantly more likely to report having had a Pap test in the last three years than high school graduates.
- Household Income: Women with annual household incomes above $75,000 were significantly more likely than lower income groups to report having had a Pap test in the past three years and mammography in the past two years. Residents making less than $15,000 were significantly less likely than all other income groups except those with household incomes between $35,000 and $49,999 to report ever having a sigmoidoscopy or colonoscopy.

Geographic Analysis: Overall, female residents in Nassau County reported significantly higher levels of mammography within the past two years than New York State and the nation. Likewise, reports of PSA tests among male residents in the last two years were significantly greater than New York State and the nation.

Table 1: Summary of Key Findings from the 2006 Nassau County Behavioral Risk Factor Surveillance Survey

For each of the four content areas the table depicts prevalence values for the county, state and nation; demographic characteristics for which there were significant differences; and significant findings between county jurisdictions, New York State and the nation.

	Nassau	New York	U.S.	Statistically Significant Geographic Findings
Health Status and Access				
No Health Care Insurance (18 and over)	3.8% (10.9, Census 2000)	13.7% (15.5, Census 2000)	14.5% (14.9, Census 2000)	• Those ages 25-44 were more likely to be uninsured than 55-64 year olds. • Hispanics were more likely than Blacks & Whites to be uninsured. • Those with no high school education were more likely than all other education levels to be uninsured. • Those with household incomes less than $15,000 were more likely than those with household incomes $25,000-$74,999 to be uninsured. • Freeport/Roosevelt, Hempstead Village/Uniondale and Westbury/New Cassel had more uninsured residents as compared to the rest of the county. • The Town of Oyster Bay had less uninsured residents as compared to the rest of the county. • Nassau County had less uninsured residents as compared to NYS and the nation.
Overall health status described as fair or poor	12.3%	16.9%	14.8%	• Adults over 55 more often described their health status as fair or poor compared to all other age groups. • Hispanics more often described their health status as fair or poor compared to all other race/ethnicities. • Those with less than high school education more often described their health status as fair or poor compared to all other education levels. • Lower incomes more often described their health status as fair or poor compared to higher incomes. • Those with no health insurance more often described their health status as fair or poor compared to those with health insurance. • Hempstead Village/Uniondale and Freeport/Roosevelt more often described their health status as fair or poor compared to the Town of Oyster Bay and the county overall. • Residents of the Town of Oyster Bay less often described their health status as fair or poor compared to all other county jurisdictions.
Poor Physical Health for 10 or more days within the past 30 days	10.7%	n/a	n/a	• Adults 55+ years more often reported poor physical health than those 35-54 years. • Whites more often reported poor physical health than Blacks. • Those with household incomes below $25,000 more often reported poor physical health than those with household incomes over $35,000.
Poor Mental Health for 10 or more days within the past 30 days	9.7%	n/a	n/a	• Annual household incomes of $15,000-$24,999 more often reported poor mental health than those making between $25,000 and $34,999.
Activity Restriction of 10 or more days among those reporting at least one day of poor physical or mental health in the past 30 days	13.1%	n/a	n/a	• Those 65 years and over more often reported activity restriction than those 45-54 years. • Those with annual household incomes below $25,000 more often reported activity restriction than those with annual household incomes above $50,000.

	Nassau	New York	U.S.	Statistically Significant Geographic Findings
Feelings of worse treatment when seeking health care based on race	1.8%	n/a	n/a	• Those 35 years and over more often felt they were treated worse when seeking care than 18-24 year olds. • Blacks and Hispanics more often felt they were treated worse when seeking care than Whites. • Those with less than a high school education more often felt they were treated worse when seeking care than college graduates. • Those with annual incomes between $15,000 and $24,999 more often felt they were treated worse when seeking care than those with annual incomes over $75,000. • Residents in Hempstead Village/Uniondale more often felt they were treated worse when seeking care than residents in the Town of Hempstead1, the Town of North Hempstead2 and Nassau County overall.
Health Behaviors and Lifestyle Choices				
Engage in recommended levels of physical activity	44.8%	48.1%	49.1%	• Adults 65 and over less often engaged in recommended physical activity than adults 25-44 and 55-64.
Eat recommended servings of fruits and vegetables	25.7%	26.0%	23.2%	• Women more often ate recommended servings than men. • Whites more often ate recommended servings than Hispanics. • Residents in Hempstead Village/Uniondale less often ate recommended servings than residents in the Town of North Hempstead[2] and the county overall.
Overweight: BMI of 25 to 29.9	38.9%	37.6%	36.7%	• Males were more likely to be overweight than females.
Obese: BMI of 30 or higher	19.6%	22.2%	24.4%	• Blacks were more likely to be obese than Whites. • Those in the Other race category were less likely to be obese than Blacks, Whites and Hispanics.
Current Tobacco Use in past 30 days	15.4%	20.5%	20.6%	• Adults 45-54 years were more likely to be current tobacco users than those 65 and older.
Engage in behaviors that increase risk of HIV/AIDS	2.1%	n/a	n/a	• Residents between 18-24 years more often engaged in risky behaviors than 55-64 year olds.
Alcohol: Binge Drinking (5 or more drinks on an occasion)	10.7%	14.7%	14.4%	• Men more often reported binge drinking than women. • Those 18-44 years more often reported binge drinking than those above 55 years. • Those 25-34 years more often reported binge drinking than those 45-54 years. • Whites more often than Other race category reported binge drinking. • Nassau County residents less often reported binge drinking than NYS and the nation.
Alcohol: Heavy Drinking (2 or more drinks on an occasion)	2.9%	4.9%	4.9%	• Whites more often than Blacks and Hispanics reported heavy drinking. • Inwood and Westbury/New Cassel residents less often reported heavy drinking than the county overall. • Nassau County residents less often reported heavy drinking than NYS and the nation.
Health Conditions				
Cardiovascular Disease (Stoke, angina, and heart attack): Lifetime Prevalence	7.7%	n/a	n/a	• Those above 65 years were more likely to report cardiovascular disease than those 25-64 years. • Those 55-64 years were more likely to report cardiovascular disease than those 25-54 years. • Whites were more likely to report cardiovascular disease than Blacks. • Those with a high school education were more likely to report cardiovascular disease than those with some college education. • Those making less than $25,000 were more likely to report cardiovascular disease than those making at least $75,000.

	Nassau	New York	U.S.	Statistically Significant Geographic Findings
Cholesterol Screening in the past 5 years	84.5%	77.7%	73.0%	• Younger age groups were less likely to have had a cholesterol screening than older age groups. • Whites and Blacks were more likely to have had a cholesterol screening than Hispanics. • Whites were more likely to have had a cholesterol screening than those in the Other race category. • Those with a high school education were less likely to have had a cholesterol screening than those with any other level of education. • Residents making at least $35,000 were more likely to have had a cholesterol screening than those making less than $25,000. • The insured were more likely to have had a cholesterol screening than the uninsured. • The county overall was more likely to report having had a cholesterol screening than NYS and the nation.
High Blood Pressure: Lifetime Prevalence	23.8%	25.5%	25.5%	• Lifetime high blood pressure prevalence increased with each consecutive age group starting with 25-34 year olds. • Whites and Blacks had higher lifetime prevalence than Hispanics. • High school graduates had higher lifetime prevalence than college graduates. • Those with incomes above $75,000 had lower lifetime prevalence than those making between $35,000 and $49,999 and between $15,000 and $24,999.
Diabetes: Lifetime Prevalence	7.8%	8.1%	7.3%	• Those 55-64 reported a higher lifetime prevalence of diabetes than all younger age groups. • College graduates reported lower lifetime prevalence than those with less than high school education. • Those making less than $15,000 reported higher lifetime prevalence than those making more than $75,000.
Diabetes Control: Recommended A1C Testing among diabetics	78.0%	n/a	n/a	• Hempstead Village/Uniondale residents were less likely to report A1C testing than residents in the Town of Oyster Bay, the Town of North Hempstead, 2 Glen Cove and the county overall.
Diabetes Control: Recommended Foot Exam among diabetics	80.4%	n/a	n/a	• Those 55-64 years were more likely to report having foot exams than those 45-54 years and those above 65. • Westbury/New Cassel residents were more likely to report having foot exams than residents in Freeport/Roosevelt.
Diabetes Control: Recommended Eye Exam among diabetics	85.1%	n/a	n/a	• Those 55-64 were more likely to report having an eye exam than those 45-54.
Asthma: Current Prevalence	5.7%	9.3%	8.0%	• Nassau County residents had lower asthma prevalence than NYS and the nation.
High or moderate levels of depressive symptoms	27.7%	n/a	n/a	• Those 45-54 reported a high frequency of symptoms more often than those 55-64. • Those 18-24 reported moderate frequency of symptoms more often than those 45-54. • Whites were more likely than those of the Other race category to report a high frequency of symptoms. • Those making less than $15,000 were more likely to report high frequency of symptoms than those making more than $75,000 and those making $25,000-$34,999. • Freeport/Roosevelt residents were more likely to report high or moderate frequency of symptoms than residents in Inwood.
Cancer Screening				
Breast Cancer: Mammography within past 2 years (Women over 40)	82.8%	75.5%	74.9%	• Women with household incomes greater than $75,000 were more likely to have had a mammography than those with household incomes less than $25,000 and between $35,000 and $49,999. • Women in Nassau County were more likely to have had a mammography than women in NYS and the nation.

	Nassau	New York	U.S.	Statistically Significant Geographic Findings
Cervical Cancer: Pap test within the past 3 years (All women)	83.0%	85.4%	86.0%	• Women 18-24 years and above 65 years were less likely than all other age groups to have had a pap test. • College graduates were more likely than high school graduates to have had pap test. • Women with annual household incomes above $75,000 were more likely than those with household incomes below $35,000 to have had a pap test.
Prostate Cancer: PSA Test within the past 2 years (Men over 40)	61.7%	53.5%	51.8%	• Men 55 and above were more likely than those 40-54 to have had a PSA test. • Men 45-54 years were more likely than those 40-44 years to have had a PSA test. • Nassau County men were more likely than NYS and the nation to have had a PSA test.
Prostate Cancer: Digital Rectal Exam within the past year (Men over 40)	55.4%	n/a	n/a	• Men above 65 years were more likely than those 40-54 years to have had a Digital Rectal Exam. • Men 55-64 years were more likely than those 40-44 years to have had a Digital Rectal Exam.
Colorectal Cancer: Fecal Occult Blood Test (Adults over 50)	24.6%	25.9%	26.5%	• Those above 55 years were more likely than those 50-54 years to report having had a FOBT in the past two years. • Those 50-54 years were more likely than those above 55 to report never having had a FOBT. • Whites and Blacks were more likely than Hispanics to report having had a FOBT in the past two years. • Blacks were more likely than those of the Other race category to report having had a FOBT in the past two years. • Hispanics and those in the Other race category were more likely than Whites and Blacks to report never having had a FOBT.
Colorectal Cancer: Ever having a Sigmoidoscopy or Colonoscopy (Adults over 50)	63.1%	56.7%	53.5%	• Those above 55 years were more likely than those 50-54 years to ever have had a sigmoidoscopy or colonoscopy. • Whites were more likely than those in the Other race category to have had a sigmoidoscopy or colonoscopy. • College graduates were more likely than those with a high school education or less than a high school education to have had a sigmoidoscopy or colonoscopy. • Residents with an annual household income of less than $15,000 were less likely than those in all other income groups except $35,000-$49,999 to have had a sigmoidoscopy or colonoscopy.

[1] Excludes Freeport, Roosevelt, Hempstead Village, Uniondale and Inwood which were analyzed separately
[2] Excludes Westbury and New Cassel which were analyzed separately

Chapter 1: Methodology

The BRFSS telephone survey is conducted according to a standardized research methodology, defined by CDC in the BRFSS User's Guide. Readers who are interested in detailed information about the survey's methodology can obtain the document from the BRFSS website at www.cdc.gov/brfss.

Survey Instrument

The BRFSS questionnaire is designed by a working group of state coordinators and CDC staff. The questionnaire has three parts: 1) the core component, 2) optional modules, and 3) state/locality-added questions.

The core component is a standard set of questions that must be asked by all states and localities without modification. It includes queries about current behaviors that affect health and questions on demographic characteristics. Optional BRFSS modules are sets of questions on specific topics that states and localities may elect to use on their questionnaires. Although optional, CDC standards require that, if they are used, they must be used without modification. State/locality-added questions are not part of the official BRFSS questionnaire. They are written to address items of interest to individual jurisdictions, thereby reflecting the particular needs of local public health systems.

Topics covered by the Nassau County BRFSS included:

- Health Status
- Health-Related Quality of Life
- Physical Activity
- Diabetes
- Hypertension Awareness
- Cholesterol Awareness
- Cardiovascular Disease Prevalence
- Asthma
- Tobacco Use
- Alcohol Consumption
- Disability
- Fruits & Vegetables
- HIV/AIDS
- Emotional Support and Life Satisfaction
- Women's Health
- Prostate Cancer Screening
- Colorectal Cancer Screening
- Overweight and Obesity
- Reactions to Race
- Depression
- Indoor and Outdoor Environment
- Healthcare Access
- Family Planning

A copy of the Nassau County BRFSS questionnaire is included with this report in Appendix A.

Survey Sampling, Data Collection and Analysis

The sample for the BRFSS was drawn from a list of randomly generated landline telephone numbers located in Nassau County. Telephone interviewers collected data from anonymous residents, resulting in a total of 4,623 interviews and 620 partially completed interviews. The survey consisted of approximately 141 questions and lasted an average of just over 20 minutes. However, as some questions were administered only to respondents with certain characteristics, not all questions were administered to all respondents.

The telephone sample was stratified to allow for analysis of data from nine specific geographic areas of Nassau, as well as for the entire county. Areas within the county were stratified into the following groups:

- Freeport and Roosevelt
- Hempstead Village and Uniondale
- Inwood
- Town of Hempstead (excluding Freeport, Roosevelt, Hempstead Village, Uniondale and Inwood)
- Westbury/New Cassel
- Town of North Hempstead (excluding Westbury and New Cassel)
- Town of Oyster Bay
- City of Long Beach
- City of Glen Cove

Data were weighted to remove bias in the sample and enable generalizations of findings to the county's adult population, not just to those who responded to the survey. This process accounted for the probability of selecting a landline telephone number and the number of adults and landline telephones in a household. An additional, poststratification adjustment was also made to adjust for demographic differences between the sample and the county's adult population.

The sample design used in the Nassau County BRFSS established a 95% confidence interval for each question. In other words, 95 times out of 100, the result would lie within the range specified by the 95% confidence interval if different samples were taken repeatedly from the same overall population.

This range of results, or confidence interval, varies depending on the number of respondents within the analyzed group who answered a particular question, n, and the response distribution for that question. In the data tables in this report, confidence intervals are presented in parentheses below the result, and n is given in a separate column to the left of the results.

Limitations of the Data

When interpreting the results presented in this report, it is important to keep in mind the limitations of statistical sampling and telephone data collection in general, as well as limitations specific to the Nassau BRFSS study design.

Survey Errors

As with any sample survey, sampling error can cause the results to vary from those that would have been obtained with a census of all adults living in telephone-equipped households in the county. For instance, some households may not be able to be reached at all and others may refuse to participate in the survey. If the residents from these non-participating households differ from those of participating households, the results obtained from the participating households may not accurately represent residents of the entire county.

Small Sample Sizes

Small numbers of respondents can lead to concerns about the variability of the data. When the number of respondents is small, a difference between the responses of a few individuals can result in large differences in percentage of the total for that group, resulting in a large confidence interval.

A second concern is respondent anonymity. Particularly when examining data for less populous geographic regions, reporting responses of a very small number of individuals could potentially

enable the identification of particular individuals. For instance, if there is only one family of a particular race living in a less populous geographic area, reporting responses by race for that area could identify that family as the responding household.

Small numbers of respondents generally occur in one of two ways: 1) There are very few respondents in the total sample who have a particular characteristic under analysis, or 2) The survey design limits the number of respondents receiving a particular question, thereby reducing the number of respondents in each analytical unit for that item.

When unweighted counts are less than 50 respondents per subgroup, caution should be used in drawing conclusions from the data. In this report, data for cells where the number of respondents is less than 50 are noted in tables with an asterisk. Strict interpretation and application of such findings is not recommended.

Survey Population

By design, the BRFSS studies adults in households within given geographic areas and is conducted in a limited number of languages. In Nassau County surveys were conducted in English and Spanish.

The surveyed population specifically excludes:

- Adults in penal, mental, or other institutions;
- Adults living in group quarters such as dormitories, barracks, convents, or boarding houses;
- Adults contacted at their second home during a stay of less than 30 days;
- Adults who do not speak English or Spanish well enough to be interviewed; and
- Adults living in households without landline telephones.

Chapter 2 provides further information about the demographic characteristics of those surveyed.

Chapter 2: Survey Population

Table 2 shows the distribution of respondents to the 2006 Nassau County BRFSS by gender, age, race/ethnicity, education, annual household income and insurance status. The table compares unweighted and weighted data to the 2000 Census profile of Nassau County. Key questions from each topic area were analyzed by these characteristics. Nassau County BRFSS data are based on a total of 4,623 completed interviews and 620 partially completed interviews.

As Table 2 indicates, the unweighted sample shows an underrepresentation of men, residents between the ages of 18 and 44, Whites and those of Other race, those with lower levels of education, and people making less than $15,000 and over $50,000-$74,999; and corresponding overrepresentations of women, residents 45 years of age and older, those with higher levels of education and those making $15,000 to $49,999 and over $75,000. Census data were used to weight the survey sample by age, race, and gender to be more representative of these populations.

Table 3 shows the distribution of respondents in each of the nine geographic areas. The table compares the unweighted and weighted data to the 2000 Census profile of these jurisdictions. The unweighted sample shows that the Town of Hempstead (excluding Freeport, Roosevelt, Hempstead Village, Uniondale and Inwood), Town of North Hempstead (excluding Westbury and New Cassel), and Town of Oyster Bay were underrepresented while Freeport/Roosevelt, Hempstead Village/Uniondale, Inwood, Westbury/New Cassel, Long Beach, and Glen Cove were overrepresented. A combination of targeted sampling methods and data weighing created results that allowed accurate comparisons.

Table 4 further examines the demographic characteristics of respondents by geographic area. Comparisons to 2000 Census data were not made because detailed demographic information was not available.

Table 2: Demographic Characteristics of Respondents

	2000 Census for Nassau County	Unweighted Nassau County BRFSS	Weighted Nassau County BRFSS
Gender			
Male	47.1%	37.4%	47.6%
Female	52.9%	62.7%	52.5%
Age			
18-24	9.8%	3.1%	10.5%
25-34	16.2%	8.9%	13.1%
35-44	22.2%	19.4%	20.7%
45-54	19.4%	23.0%	21.9%
55-64	12.5%	17.8%	14.0%
65+	20.0%	27.9%	19.7%
Race/Ethnicity			
White/Non-Hispanic	75.8%	75.1%	72.5%
Black/Non-Hispanic	9.1%	10.5%	9.8%
Hispanic/Latino of Any Race	9.3%	10.1%	10.8%
Other	5.9%	4.3%	7.0%
Education			
Less than High School	13.7%	7.3%	7.0%
High School Graduate	26.3%	23.9%	24.3%
Some College	26.5%	23.6%	25.9%
College Graduate	33.5%	45.2%	42.8%
Annual Household Income			
Less than $15,000	7.8%	6.3%	5.0%
$15,000-$24,999	6.6%	10.5%	8.7%
$25,000-$34,999	7.0%	8.8%	8.9%
$35,000-$49,999	11.3%	12.0%	10.4%
$50,000-$74,999	19.3%	16.5%	17.8%
$75,000 and over	48.0%	46.0%	49.1%
Health Insurance Status			
Insured	n/a	96.5%	96.6%
Uninsured	n/a	3.5%	3.4%

Table 3: Percentage of Respondents by Geographic Area

Stratum	2000 Census for Nassau County	Unweighted 2005 Nassau County BRFSS	Weighted 2006 Nassau County BRFSS
Freeport & Roosevelt	4.3%	10.2%	4.9%
Hempstead Village/ Uniondale	6.0%	6.4%	5.6%
Inwood	0.6%	4.9%	0.6%
Town of Hempstead[1]	43.6%	36.8%	44.9%
Westbury/New Cassel	3.2%	4.9%	3.6%
Town of North Hempstead[2]	14.8%	8.1%	14.1%
Town of Oyster Bay	22.1%	17.5%	21.5%
Long Beach	3.2%	5.9%	2.8%
Glen Cove	2.2%	5.5%	2.2%
Total	100.0%	100.2%**	100.2%**

**Percents may not equal 100% exactly due to rounding

[1]Excluding Freeport, Roosevelt, Hempstead Village, Uniondale and Inwood

[2]Excluding Westbury and New Cassel

Table 4: Weighted Demographic Characteristics of Respondents by Geographic Area

	Strata								
	Freeport / Roosevelt	Hempstead Village / Uniondale	Inwood	Town of Hempstead[1]	Westbury / New Cassel	Town of North Hempstead[2]	Town of Oyster Bay	Long Beach	Glen Cove
Gender									
Male	41.3%	51.4%	48.0%	48.8%	47.1%	45.6%	50.9%	47.5%	41.4%
Female	58.7%	48.6%	52.0%	51.2%	52.9%	54.4%	49.1%	52.5%	58.6%
Age									
18-24	11.2%	12.3%	7.6%	13.0%	10.4%	5.4%	8.3%	5.2%	14.8%
25-34	13.2%	24.6%	21.1%	10.6%	19.2%	11.5%	12.1%	21.2%	26.5%
35-44	21.8%	22.3%	20.6%	20.4%	19.0%	21.2%	24.2%	14.4%	10.1%
45-54	25.3%	14.7%	22.4%	22.6%	22.8%	24.8%	20.9%	26.3%	16.5%
55-64	13.2%	11.5%	9.3%	14.7%	9.6%	12.9%	14.8%	13.8%	12.0%
65+	15.3%	14.6%	19.0%	18.7%	19.0%	24.2%	19.7%	19.1%	20.1%
Race / Ethnicity									
White/Non-Hispanic	25.6%	12.9%	36.7%	77.7%	49.2%	84.7%	87.0%	74.0%	73.2%
Black/Non-Hispanic	44.6%	53.5%	32.6%	6.7%	19.8%	0.5%	2.2%	6.4%	8.1%

	Strata								
	Freeport / Roosevelt	Hempstead Village / Uniondale	Inwood	Town of Hempstead[1]	Westbury / New Cassel	Town of North Hempstead[2]	Town of Oyster Bay	Long Beach	Glen Cove
Hispanic/Latino of Any Race	24.1%	29.0%	20.8%	8.0%	24.4%	4.3%	5.1%	15.5%	15.7%
Other	5.8%	4.7%	9.9%	7.6%	6.6%	10.6%	5.7%	4.1%	2.9%
Education									
Less than High School	20.3%	26.1%	14.8%	4.2%	10.2%	3.3%	3.7%	6.3%	7.4%
High School Graduate	24.4%	25.9%	45.0%	23.7%	27.9%	19.2%	26.1%	23.6%	22.9%
Some College	23.9%	23.3%	24.0%	27.6%	26.7%	25.2%	28.2%	23.7%	23.0%
College Graduate	31.4%	24.8%	16.2%	44.6%	35.3%	52.4%	42.1%	46.4%	46.8%
Household Income									
Less than $15,000	8.5%	15.2%	9.9%	2.3%	8.5%	3.3%	3.2%	11.1%	9.0%
$15,000-$24,999	13.6%	20.5%	16.2%	6.8%	11.0%	7.5%	6.2%	12.1%	12.8%
$25,000-$34,999	12.7%	11.9%	14.9%	10.1%	12.3%	7.4%	6.5%	5.4%	8.5%
$35,000-$49,999	20.6%	9.6%	15.7%	9.8%	7.6%	6.5%	12.3%	7.8%	13.3%
$50,000-$74,999	15.3%	22.1%	14.3%	18.8%	12.6%	15.1%	17.8%	19.3%	21.8%
$75,000 and over	29.4%	20.7%	29.0%	52.3%	48.1%	60.2%	54.0%	44.3%	34.6%
Health Insurance Status									
Insured	90.5%	86.6%	90.4%	98.1%	88.9%	98.3%	98.7%	92.6%	95.8%
Uninsured	9.5%	13.4%	9.6%	1.9%	11.1%	1.7%	1.3%	7.4%	4.2%

[1]Excluding Freeport, Roosevelt, Hempstead Village, Uniondale and Inwood

[2]Excluding Westbury and New Cassel

Chapter 3: Health Status and Access

Access to Health Care

The CDC estimates that approximately one in seven Americans is uninsured.[3] Tens of millions more are underinsured and are unable to afford needed services, particularly medications. Lack of health insurance and underinsurance significantly impact one's ability to access care and adversely impact outcomes, quality and duration of life.

The most recent BRFSS data reports that 14.5% of adults nationally and 13.7% in New York State did not have any form of health insurance.[4] According to the US Census 2000, 10.9% of adults in Nassau County are uninsured.[5]

General Findings

Overall, 96.2% of Nassau County residents reported having some sort of health insurance while 3.8% did not have any form of health care coverage.

- Although not significant, men were more likely than women to be uninsured. However, men were significantly more likely to have "Other Government" health insurance compared to women.
- Residents between the ages of 25 and 44 were significantly more likely to be uninsured than individuals 55 to 64 years of age.
- Adults age 65 and older were significantly less likely to have employer-based health insurance compared to all other age groups and were significantly more likely than all other age groups to have Medicare/Medicaid.
- Hispanics were significantly more likely than Whites and Blacks to be uninsured.
- Hispanics were significantly less likely than all other races/ethnicities to have employer-based health insurance. In addition, Whites were significantly less likely to have employer-based health insurance compared to Blacks.
- Whites were significantly more likely to have another "Private" source of health insurance or Medicare/Medicaid compared to Blacks. Whites were also significantly more likely than Blacks to have Medicare/Medicaid.
- Residents without a high school education were significantly more likely than individuals with all other levels of education to be uninsured.
- Those with a high school education or less were significantly less likely to have employer-based health insurance compared to those with some college education or more.

[3] 2005 United States (states and DC) BRFSS and 2005 New York State BRFSS. Available at http://www.cdc.gov/brfss. Accessed September 5, 2006.
[4] 2005 United States (states and DC) BRFSS and 2005 New York State BRFSS. Available at http://www.cdc.gov/brfss. Accessed September 5, 2006.
[5] 2000 U.S. Census Bureau, Data Integration Division, Small Area Estimates Branch. Available at http://www.census.gov/hhes/www/sahie. Accessed March 6, 2007.

- College graduates were significantly less likely than all other levels of education to have Medicare/Medicaid. Additionally, those with some college were significantly *less* likely than high school graduates to have Medicare/Medicaid
- Residents making less than $15,000 were significantly more likely to be uninsured than those making between $25,000 and $74,999. Those making $15,000-$24,999 were also significantly more likely to be uninsured than those making $35,000 to $74,999.
- Those with an annual household income of less than $15,000 were significantly less likely than all other income groups to have employer-based health insurance. Overall, residents with lower household income had a tendency to have employer-based health insurance than those with higher income levels.
- Residents with household incomes of $50,000 and greater were significantly less likely than lower income groups to have Medicare/Medicaid, and other government-sponsored health insurance.
- The highest levels of uninsured residents were seen in Hempstead Village/Uniondale while the lowest percentages were seen in the Town of Oyster Bay and the Town of North Hempstead[6]. Freeport/Roosevelt, Hempstead Village/Uniondale and Westbury/New Cassel had significantly more uninsured residents than the county overall, while the Town of Oyster Bay had significantly fewer people without coverage than the county.
- Nassau County was significantly less likely to be uninsured than New York State and the nation.

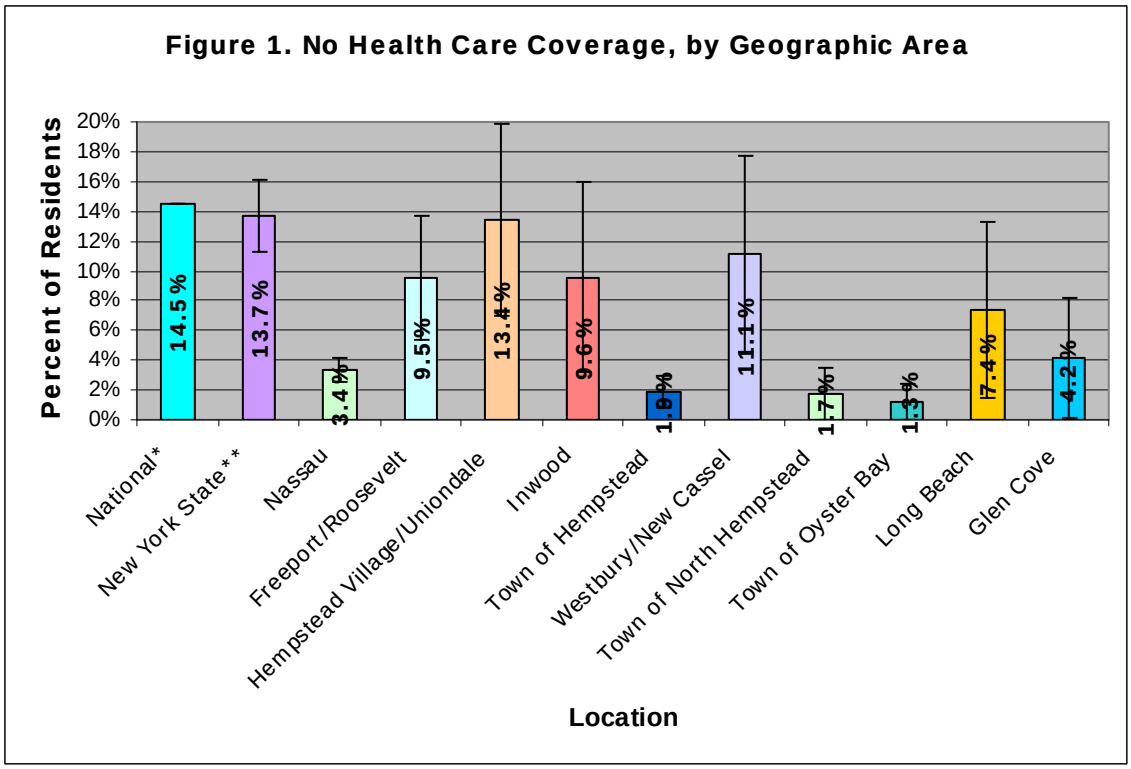
[6] Excludes Westbury/New Cassel, which was analyzed separately

Table 5: Type of Health Care Coverage by Selected Demographics

"What type of health care coverage do you use to pay for most of your medical care?"

	n	Employer Based	Other Private	Medicare / Medicaid	Other Government	None
Total	4411	68.0% (+/- 2.4%)	7.7% (+/- 1.4%)	18.1% (+/- 1.8%)	2.4% (+/- 0.8%)	3.8% (+/- 0.8%)
Gender						
Male	1640	68.5% (+/- 3.9%)	7.2% (+/- 2.2%)	15.5% (+/- 2.8%)	3.7% [g] (+/- 1.5%)	5.0% (+/- 1.5%)
Female	2771	67.5% (+/- 3.1%)	8.1% (+/- 1.8%)	20.4% (+/- 2.5%)	1.3% [g] (+/- 0.5%)*	2.8% (+/- 0.9%)
Age						
18-24	111	76.7% [a] (+/- 12.2%)	8.0% (+/- 6.4%)*	7.1% (+/- 7.9%)*	2.6% (+/- 2.7%)*	5.6% (+/- 4.2%)*
25-34	353	76.6% [a] (+/- 6.7%)	5.7% (+/- 3.8%)*	4.1% [e] (+/- 2.9%)*	4.5% (+/- 3.6%)*	9.1% [h,i] (+/- 3.8%)*
35-44	809	85.8% [a] (+/- 3.6%)	6.9% (+/- 2.9%)	1.9% [e] (+/- 1.1%)*	1.0% (+/- 0.6%)*	4.5% [h,i] (+/- 2.0%)*
45-54	1016	83.4% [a] (+/- 3.6%)	7.5% (+/- 2.5%)	3.4% [e] (+/- 1.7%)*	2.1% (+/- 1.4%)*	3.6% [i] (+/- 1.7%)*
55-64	795	78.9% [a] (+/- 5.4%)	12.0% (+/- 5.0%)	5.1% [e] (+/- 2.1%)	2.3% (+/- 1.8%)*	1.6% [h] (+/- 0.8%)*
65+	1231	14.8% [a] (+/- 3.3%)	5.8% (+/- 2.4%)	75.7% [e] (+/- 4.1%)	3.0% (+/- 1.7%)*	0.7% (+/- 0.9%)*
Race / Ethnicity						
White, Non-Hispanic	3319	68.3% [a,b] (+/- 2.6%)	8.3% [d] (+/- 1.6%)	19.9% [e] (+/- 2.0%)	1.9% (+/- 0.7%)	1.6% [h] (+/- 0.8%)*
Black, Non-Hispanic	438	77.4% [a,b] (+/- 5.7%)	3.9% [d] (+/- 2.0%)*	13.0% [e] (+/- 3.9%)	1.7% (+/- 1.3%)*	4.0% [h] (+/- 2.3%)*
Hispanic/Latino of Any Race	397	49.1% [a] (+/- 9.3%)	8.0% (+/- 5.8%)*	14.8% (+/- 7.0%)	6.9% (+/- 4.7%)*	21.3% [h] (+/- 6.0%)
Other	174	78.4% [a] (+/- 13.3%)	6.4% (+/- 6.6%)*	10.5% (+/- 10.7%)*	2.4% (+/- 2.9%)*	2.2% (+/- 2.4%)*
Education						
Less than High School	294	30.1% [a] (+/- 9.1%)	5.8% (+/- 3.4%)*	24.0% [e] (+/- 7.1%)	9.6% (+/- 7.7%)*	30.5% [h] (+/- 8.8%)
High School Graduate	1022	56.4% [a,b] (+/- 5.5%)	6.8% (+/- 2.6%)	31.0% [e,f] (+/- 5.1%)	3.2% (+/- 1.8%)*	2.5% [h] (+/- 1.3%)*
Some College	1033	70.6% [a,b] (+/- 5.0%)	7.2% (+/- 3.0%)	17.5% [e,f] (+/- 3.5%)	1.6% (+/- 0.8%)*	3.1% [h] (+/- 1.6%)*
College Graduate	2039	77.1% [a,b] (+/- 3.1%)	8.7% (+/- 2.2%)	11.2% [e,f] (+/- 2.0%)	1.7% (+/- 0.8%)*	1.4% [h] (+/- 0.6%)*
Household Income						
Less than $15,000	208	12.1% [a,b] (+/- 6.7%)*	6.9% (+/- 4.3%)*	41.0% [e] (+/- 10.6%)	18.0% [g] (+/- 11.9%)*	22.0% [h] (+/- 9.5%)*
$15,000-$24,999	356	33.8% [a,c] (+/- 9.6%)	7.4% (+/- 7.9%)*	40.4% [e] (+/- 8.2%)	4.6% [g] (+/- 3.5%)*	13.8% [i] (+/- 6.0%)*
$25,000-$34,999	311	53.5% [a,b,c] (+/- 14.2%)	6.9% (+/- 7.2%)*	28.1% [e] (+/- 9.9%)	5.0% [g] (+/- 3.5%)*	6.5% [h] (+/- 4.1%)*
$35,000-$49,999	416	60.7% [a,b,c] (+/- 9.6%)	6.9% (+/- 3.4%)*	26.4% [e] (+/- 7.8%)	3.0% (+/- 3.1%)*	3.0% [h,i] (+/- 2.3%)*
$50,000-$74,999	594	80.8% [a,b,c] (+/- 4.9%)	5.5% (+/- 3.0%)*	10.8% [e] (+/- 3.5%)	1.2% (+/- 1.5%)*	1.6% [h,i] (+/- 1.2%)*
$75,000+	1706	84.7% [a,b,c] (+/- 2.8%)	8.2% (+/- 2.3%)	5.8% [e] (+/- 1.4%)	0.5% [g] (+/- 0.3%)*	0.8% (+/- 0.8%)*
Health Insurance Status						
Insured	4255	70.4% (+/- 2.4%)	8.0% (+/- 1.5%)	18.8% (+/- 1.9%)	2.5% (+/- 0.8%)	0.4% (+/- 0.3%)*
Uninsured	156	0.0% (+/- 0.0%)*	0.0% (+/- 0.0%)*	0.0% (+/- 0.0%)*	0.0% (+/- 0.0%)*	100.0% (+/- 0.0%)

* This percentage is based on fewer than 50 respondents and should be interpreted with extreme caution.
[a] Results were significant at the 0.05 level between those 65+ and all other age groups; between Hispanics and all other race/ethnicity groups; between those with less than a high school education and those with higher education levels; and between those with incomes less than $15,000 and those making over $15,000.
[b] Results were significant at the 0.05 level between Whites and Blacks; between high school graduates and higher education levels; and between those making $15,000-$24,999 and those making over $35,000.
[c] Results were significant at the 0.05 level between those making $35,000-$49,999 and those making over $50,000.
[d] Results were significant at the 0,05 level between Whites and Blacks.
[e] Results were significant at the 0.05 level between those 65+ and those 25-64 years of age; between Whites and Blacks; between college graduates and those with a high school diploma or some college; and between those making over $50,000 and those making less than $50,000.
[f] Results were significant at the 0.05 level between some college and high school graduates.
[g] Results were significant at the 0.05 level between males and females and between those making over $75,000 and those making less than $35,000.
[h] Results were significant at the 0.05 level between those 55-64 years of age and those 25-44 years of age; between Hispanics and Whites/Blacks; between those without a high school diploma and all other levels of education attainment; and between those with incomes less than $15,000 and those with incomes over $25,000.
[i] Results were significant at the 0.05 level between those making $15,000-$24,999 and those making $35,000-$74,999.



Note:
"Town of Hempstead" excludes Freeport, Roosevelt, Hempstead Village, Uniondale, and Inwood, which were analyzed separately. "Town of North Hempstead" excludes Westbury/New Cassel, which was analyzed separately.

*2005 United States (states and DC) BRFSS. Available at http://www.cdc.gov/brfss Accessed September 5, 2006.
**2005 New York State BRFSS. Available at http://www.cdc.gov/brfss. Accessed September 5, 2006.

Health Status

Traditionally, health has been thought of as a term that describes physical health and relates to objective measures such as morbidity and mortality. However, the concept of health has expanded to include quality of life and general well-being, both of which integrate perceptions of biological, psychological, social, and cultural dimensions.

Perceived health, in addition to being a subjective measure of health, has been shown to be a predictor of illness, mortality, and functional disability.[7] In 2005, 14.8% of Americans and 16.9% of New Yorkers reported their health as being fair or poor.[8]

General Findings

Overall, 87.7% of Nassau County residents rated their general health as good, very good or excellent, while 12.3% reported it as fair or poor.

- There were no significant differences between how men and women perceived their general health.
- Those over 55 years of age were significantly more likely to report their health as fair or poor compared to all other age groups.
- Hispanics were significantly more likely to report their general health status as fair or poor compared to all other race/ethnicities.
- Those with less than a high school education were significantly more likely to report their general health status as fair or poor compared to all other educational levels. High school graduates were also significantly more likely to report their general health status as fair or poor compared to those with some college education and college graduates..
- Residents making less than $15,000 were significantly more likely to report their general health as fair or poor than those with incomes over $25,000. Similarly, those making $15,000-$24,999 were significantly more likely to report their general health as fair or poor than those with incomes of $35,000 or more.
- Those without health insurance were significantly more likely to report their general health status as fair or poor compared to those with health insurance.
- Hempstead Village/Uniondale and Freeport/Roosevelt had the highest percentages of residents reporting their general health status as fair or poor and were significantly higher than Nassau County overall and the Town of Oyster Bay, which had the lowest levels.
- Nassau County's overall level of adults reporting fair or poor general health was significantly lower than New York State estimates and was also lower than national estimates.

[7] McCallum J., B. Shadbolt, and D. Wang. 1994. Self-rated health and survival: A 7-year follow-up study of Australian elderly. American Journal of Public Health 84: 1100-1105.

[8] 2005 United States (states and DC) BRFSS and 2005 New York State BRFSS. Available at http://www.cdc.gov/brfss. Accessed September 5, 2006.

Table 6: Perceived Health Status by Selected Demographics

"How would you rate your general health?"

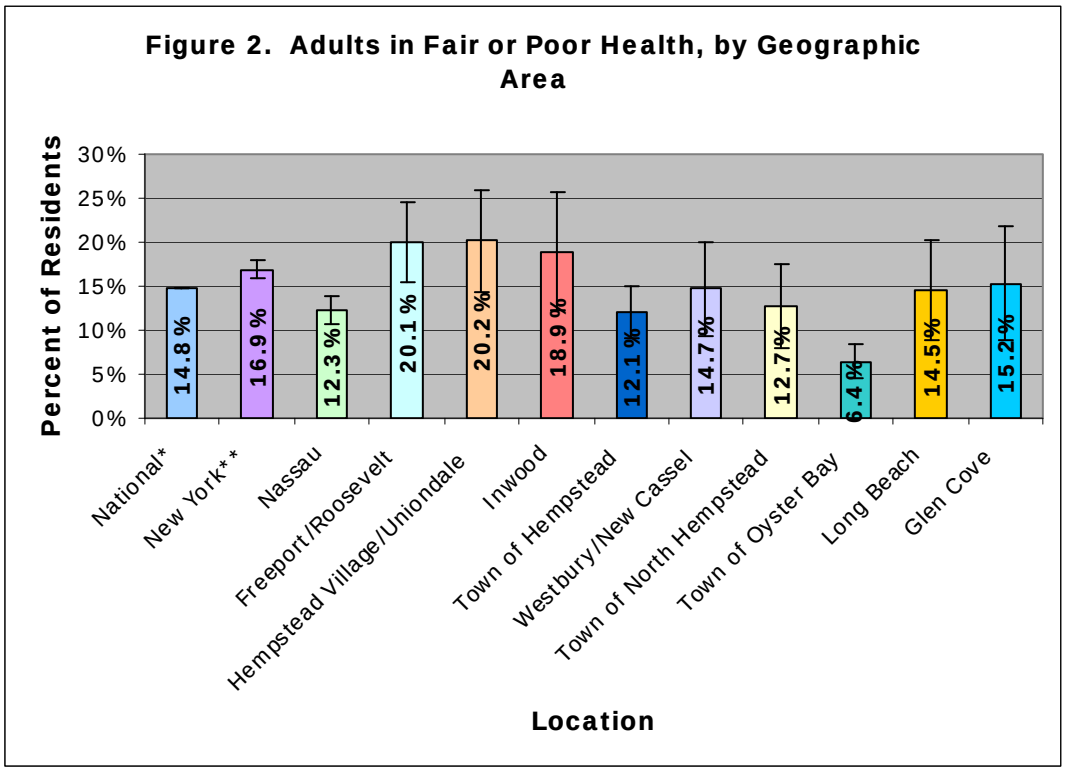
	n	Good or Better	Fair or Poor
Total	**5217**	**87.7%** (+/- 1.6%)	**12.3%** (+/- 1.6%)
Gender			
Male	**1950**	**89.0%** (+/- 2.4%)	**11.0%** (+/- 2.4%)
Female	**3267**	**86.6%** (+/- 2.2%)	**13.4%** (+/- 2.2%)
Age			
18-24	**156**	**94.3%**[a] (+/- 5.5%)	**5.7%**[b] (+/- 5.5%)*
25-34	**452**	**90.9%**[a] (+/- 3.7%)	**9.1%**[b] (+/- 3.7%)*
35-44	**987**	**92.3%**[a] (+/- 3.4%)	**7.7%**[b] (+/- 3.4%)
45-54	**1168**	**92.0%**[a] (+/- 2.1%)	**8.0%**[b] (+/- 2.1%)
55-64	**905**	**80.6%**[a] (+/- 5.4%)	**19.4%**[b] (+/- 5.4%)
65+	**1413**	**76.8%**[a] (+/- 4.0%)	**23.2%**[b] (+/- 4.0%)
Race/Ethnicity			
White, Non-Hispanic	**3831**	**90.1%**[a] (+/- 1.5%)	**9.9%**[b] (+/- 1.5%)
Black, Non-Hispanic	**536**	**87.5%**[a] (+/- 5.8%)	**12.5%**[b] (+/- 5.8%)
Hispanic/Latino of Any Race	**518**	**69.6%**[a] (+/- 7.9%)	**30.4%**[b] (+/- 7.9%)
Other	**216**	**91.3%**[a] (+/- 5.7%)	**8.7%**[b] (+/- 5.7%)*
Education			
Less than High School	**376**	**67.2%**[a] (+/- 8.2%)	**32.8%**[b] (+/- 8.2%)
High School Graduate	**1238**	**82.6%**[a] (+/- 4.0%)	**17.4%**[b] (+/- 4.0%)
Some College	**1221**	**90.2%**[a] (+/- 3.2%)	**9.8%**[b] (+/- 3.2%)
College Graduate	**2341**	**92.8%**[a] (+/- 1.7%)	**7.2%**[b] (+/- 1.7%)
Household Income			
Less than $15,000	**260**	**57.4%**[a] (+/- 12.2%)	**42.6%**[b] (+/- 12.2%)
$15,000-$24,999	**438**	**74.8%**[a] (+/- 6.9%)	**25.2%**[b] (+/- 6.9%)
$25,000-$34,999	**364**	**78.4%**[a] (+/- 8.7%)	**21.6%**[b] (+/- 8.7%)
$35,000-$49,999	**500**	**87.5%**[a] (+/- 4.6%)	**12.5%**[b] (+/- 4.6%)
$50,000-$74,999	**689**	**89.9%**[a] (+/- 5.3%)	**10.1%**[b] (+/- 5.3%)
$75,000+	**1925**	**94.4%**[a] (+/- 1.8%)	**5.6%**[b] (+/- 1.8%)

	n	Good or Better	Fair or Poor
Health Insurance Status			
Insured	**4419**	**88.6%**[a] (+/- 1.8%)	**11.4%**[b] (+/- 1.8%)
Uninsured	**160**	**67.5%**[a] (+/- 11.0%)	**32.5%**[b] (+/- 11.0%)

*This percentage is based on fewer than 50 respondents and should be interpreted with extreme caution

[a] Results were significant at the 0.05 level between those over 55 years of age and those under 55; between Hispanics and all other races/ethnicities; between those with less than a high school education and all other levels of educational attainment; between high school graduates and those with higher levels of educational attainment; between those with annual household incomes below $15,000 and those making over $25,000; between those with incomes between $15,000-$24,999 and those making more than $35,000; and between those with health insurance and those without coverage.

[b] Results were significant at the 0.05 level between those over 55 years of age and those under 55; between Hispanics and all other races/ethnicities; between those with less than a high school education and all other levels of educational attainment; between high school graduates and those with higher levels of educational attainment; between those with annual household incomes below $15,000 and those making over $25,000; between those with incomes between $15,000-$24,999 and those making more than $35,000; and between those with health insurance and those without coverage.



Note:
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**2005 New York State BRFSS. Available at http://www.cdc.gov/brfss Accessed September 5, 2006.

Quality of Life

In public health and in medicine, the concept of health-related quality of life refers to a person or group's perceived physical and mental health over time. Physicians have often used health-related quality of life to measure the effects of chronic illness in their patients to better understand how an illness interferes with a person's day-to-day life. Tracking health-related quality of life in different populations can identify subgroups with poor physical or mental health and can help guide policies or interventions to improve their health.[9]

General Findings: Physical Health

Overall, 67.1% of Nassau County residents reported that their physical health was poor on zero days, 22.2% reported having poor health for one to nine days, and 10.7% reported ten or more days of poor physical health in the past month.

- Gender, educational attainment and health insurance status were not significantly related to physical health associated quality of life.
- Those over 65 years were significantly more likely to report ten or more days of poor physical health than those 35-54 years. Adults 55-64 years were significantly more likely to report ten or more days of poor physical health than those 35-44 years. Similarly, significantly fewer residents over 65 reported one to nine days of poor physical health than 18-24 and 35-54 year olds.
- Whites were significantly more likely than Blacks to report ten or more days of poor physical health. Blacks and Whites were significantly more likely than Other race to report one to nine days of poor physical health. Additionally, residents of Other race were significantly more likely to report no days of poor physical health than all other races/ethnicities.
- Residents with annual household incomes below $25,000 were significantly more likely to report ten or more days of poor physical health than those with incomes over $35,000.
- Long Beach had the highest level of residents reporting ten or more days of poor physical health in the past month, while the Towns of North Hempstead[10] and Oyster Bay had the lowest levels. However, there were no statistically significant differences between Nassau County jurisdictions.
- National and New York State estimates were not available for comparison.

[9] Center for Disease Control and Prevention. Health Related Quality of Life Fact Sheet Accessed at: http://www.cdc.gov/hrqol/

[10] Excludes Westbury/New Cassel, which was analyzed separately

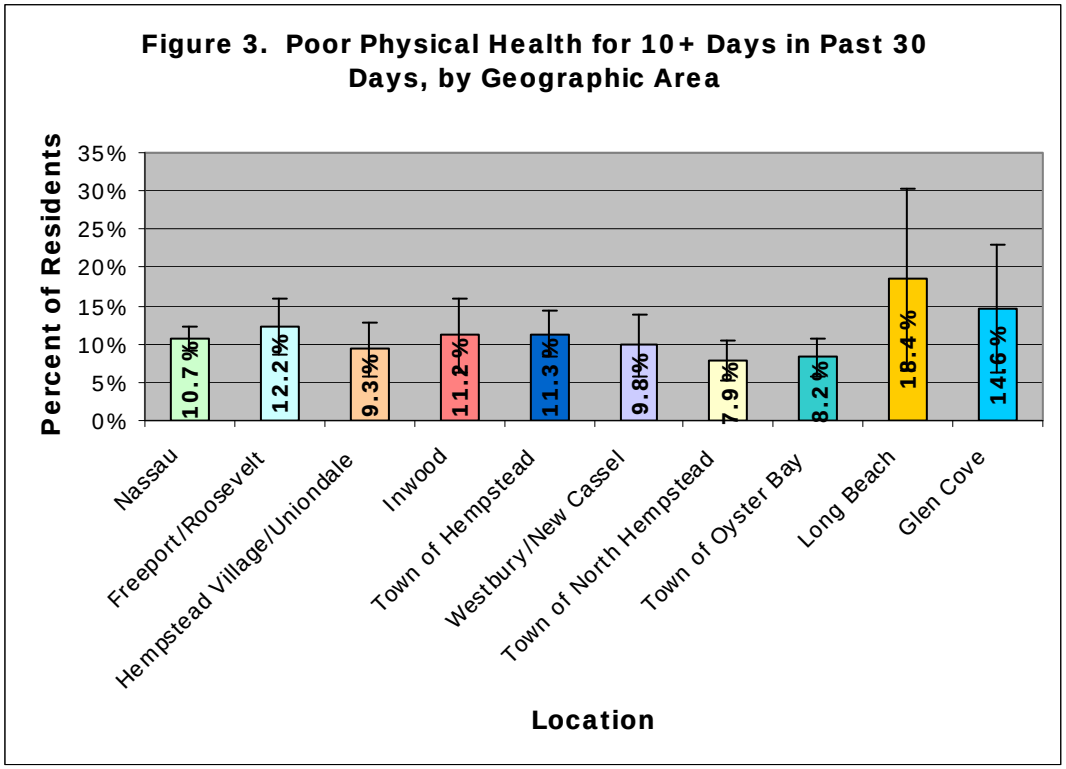
Table 7: Days of Poor Physical Health by Selected Demographics

"Now thinking about your physical health, which includes physical illness and injury, for how many days during the past 30 days was your physical health not good?"

	n	None	One to Nine Days	Ten or more Days
Total	5131	67.1% (+/- 2.7%)	22.2% (+/- 2.4%)	10.7% (+/- 1.6%)
Gender				
Male	1920	69.7% (+/- 4.1%)	21.1% (+/- 3.9%)	9.1% (+/- 2.2%)
Female	3211	64.7% (+/- 3.4%)	23.1% (+/- 3.1%)	12.2% (+/- 2.2%)
Age				
18-24	155	60.1% (+/- 15.4%)	35.1%[b] (+/- 15.1%)*	4.8% (+/- 5.6%)*
25-34	447	69.9% (+/- 7.5%)	20.0% (+/- 6.3%)	10.2% (+/- 5.4%)*
35-44	982	68.9% (+/- 4.9%)	24.3%[b] (+/- 4.6%)	6.8%[c,d] (+/- 2.5%)
45-54	1160	67.7% (+/- 4.6%)	23.2%[b] (+/- 4.3%)	9.1%[c] (+/- 2.4%)
55-64	895	65.4% (+/- 6.1%)	20.0% (+/- 5.0%)	14.6%[d] (+/- 4.8%)
65+	1359	66.5% (+/- 4.4%)	14.6%[b] (+/- 2.9%)	18.9%[c] (+/- 3.9%)
Race/Ethnicity				
White, Non-Hispanic	3772	65.3%[a] (+/- 3.0%)	23.3%[b] (+/- 2.8%)	11.4%[c] (+/- 1.9%)
Black, Non-Hispanic	526	66.2%[a] (+/- 9.9%)	27.1%[b] (+/- 10.4%)	6.7%[c] (+/- 2.3%)
Hispanic/Latino of Any Race	506	68.3%[a] (+/- 8.4%)	17.8% (+/- 6.7%)	13.9% (+/- 6.7%)
Other	215	85.2%[a] (+/- 7.1%)	10.4%[b] (+/- 5.8%)*	4.3% (+/- 3.2%)*
Education				
Less than High School	363	69.3% (+/- 8.4%)	16.7% (+/- 7.0%)	13.9% (+/- 5.3%)
High School Graduate	1210	62.7% (+/- 6.0%)	23.3% (+/- 6.1%)	14.0% (+/- 3.4%)
Some College	1207	70.3% (+/- 4.9%)	21.6% (+/- 4.3%)	8.2% (+/- 2.6%)
College Graduate	2314	67.3% (+/- 3.9%)	23.0% (+/- 3.5%)	9.7% (+/- 2.6%)
Household Income				
Less than $15,000	248	63.6% (+/- 11.2%)	13.1% (+/- 6.2%)*	23.3%[c] (+/- 8.6%)
$15,000-$24,999	427	57.5% (+/- 9.0%)	22.2% (+/- 7.9%)	20.3%[c] (+/- 6.8%)
$25,000-$34,999	357	66.3% (+/- 10.7%)	18.5% (+/- 7.2%)	15.2%[c] (+/- 7.7%)
$35,000-$49,999	495	68.1% (+/- 10.7%)	23.2% (+/- 11.0%)	8.7%[c] (+/- 4.1%)
$50,000-$74,999	684	63.3% (+/- 8.8%)	29.6% (+/- 9.1%)	7.1%[c] (+/- 3.2%)

	n	None	One to Nine Days	Ten or more Days
$75,000+	1911	67.0% (+/- 3.9%)	24.0% (+/- 3.4%)	8.9%[c] (+/- 2.6%)
Health Insurance Status				
Insured	4355	66.6% (+/- 2.8%)	22.7% (+/- 2.5%)	10.7% (+/- 1.8%)
Uninsured	155	72.7% (+/- 10.9%)	15.2% (+/- 8.5%)*	12.1% (+/- 8.5%)*

*This percentage is based on fewer than 50 respondents and should be interpreted with extreme caution
[a] Results were significant at the 0.05 level between Other race and all other races/ethnicities.
[b] Results were significant at the 0.05 level between those over 65 years and those 18-24/35-54 years; and between Whites/Blacks and Other race.
[c] Results were significant at the 0.05 level between those over 65 years and those 34-54 years; between Whites and Blacks; and between those making less than $25,000 and those making more than $35,000.
[d] Results were significant at the 0.05 level between those 55-64 years and those 35-44 years.



Note:
"Town of Hempstead" excludes Freeport, Roosevelt, Hempstead Village, Uniondale, and Inwood, which were analyzed separately. "Town of North Hempstead" excludes Westbury/New Cassel, which was analyzed separately.

General Findings: Mental Health

Overall, 72.6% of Nassau County residents reported that their mental health was poor on zero days, 17.7% reported that it was not good on one to nine days, and 9.7% reported ten or more days of poor mental health in the past month.

- Gender was not significantly related to mental health associated quality of life.
- Residents 65 years and older were significantly more likely to report zero days of poor mental health than all ages except those 25-34 years of age. Those over 65 years were also significantly less likely to report one to nine days of poor mental health than all other age groups except those 55-64 years.
- Hispanics were significantly more likely than Whites to report zero days of poor mental health. While not statistically significant, Blacks were nearly twice as likely as all other races/ethnicities to report ten or more days of poor mental health.
- Those with a college education were significantly more likely than high school graduates to report one to nine days of poor mental health.
- Residents with annual household incomes of $15,000-$24,999 were significantly more likely to report ten or more days of poor mental health than those making between $25,000 and $34,999.
- Those with health insurance were significantly more likely than those without insurance to report one to nine days of poor mental health.
- Long Beach and Glen Cove had the highest levels of residents reporting ten or more days of poor mental health in the past month, while Hempstead Village/Uniondale and the Town of Hempstead[11] had the lowest levels. However, there were no statistically significant differences between Nassau County jurisdictions.
- National and New York State estimates were not available for comparison.

[11] Excludes Freeport, Roosevelt, Hempstead Village, Uniondale, and Inwood, which were analyzed separately

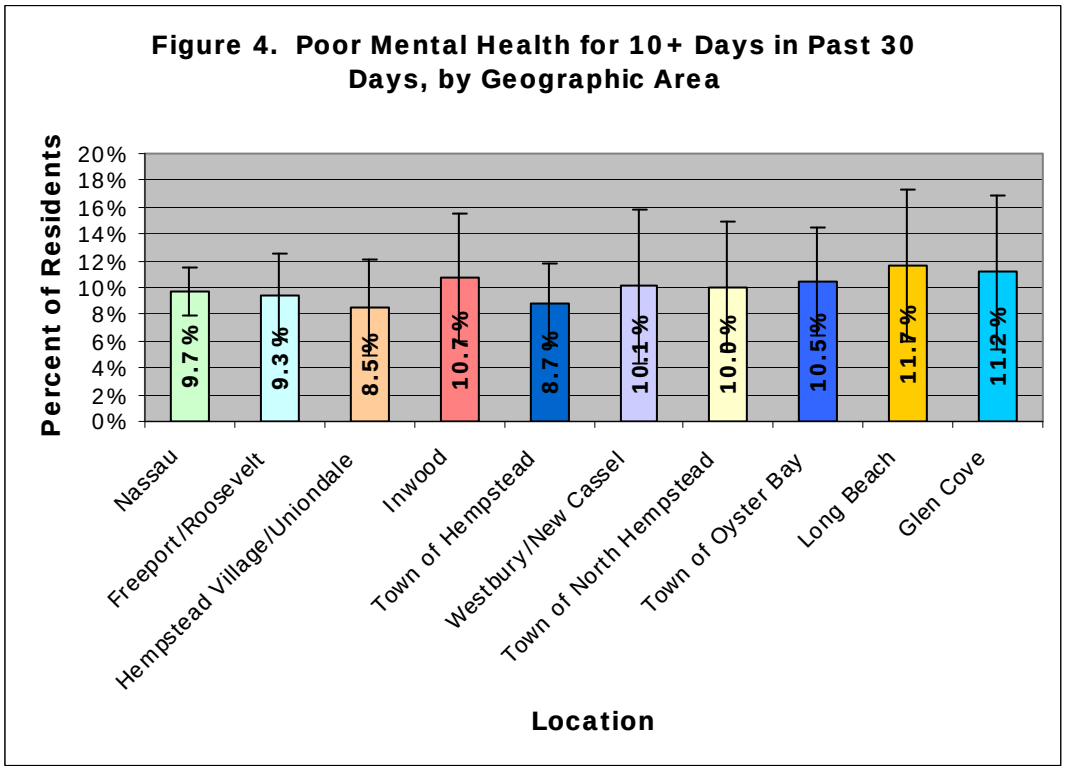
Table 8: Days of Poor Mental Health by Selected Demographics

"Now thinking about your mental health, which includes stress, depression, and problems with emotions, for how many days during the past 30 days was your mental health not good?"

	n	None	One to Nine Days	Ten or more Days
Total	5142	72.6% (+/- 2.5%)	17.7% (+/- 2.1%)	9.7% (+/- 1.8%)
Gender				
Male	1932	75.5% (+/- 3.9%)	15.6% (+/- 3.4%)	9.0% (+/- 2.6%)
Female	3210	69.9% (+/- 3.3%)	19.6% (+/- 2.7%)	10.4% (+/- 2.4%)
Age				
18-24	152	57.0%[a] (+/- 15.4%)	31.1%[b] (+/- 13.7%)*	12.0% (+/- 10.5%)*
25-34	449	74.1% (+/- 7.4%)	18.3%[b] (+/- 6.3%)	7.6% (+/- 4.9%)*
35-44	975	68.5%[a] (+/- 4.7%)	19.7%[b] (+/- 3.7%)	11.9% (+/- 3.6%)
45-54	1154	70.3%[a] (+/- 4.5%)	18.6%[b] (+/- 3.7%)	11.1% (+/- 3.2%)
55-64	893	75.3%[a] (+/- 5.8%)	14.3% (+/- 4.0%)	10.4% (+/- 5.1%)
65+	1389	84.4%[a] (+/- 3.1%)	9.1%[b] (+/- 2.5%)	6.5% (+/- 2.0%)
Race/Ethnicity				
White, Non-Hispanic	3782	71.5%[a] (+/- 2.7%)	18.9% (+/- 2.4%)	9.6% (+/- 1.8%)
Black, Non-Hispanic	524	68.1% (+/- 10.2%)	14.7% (+/- 4.9%)	17.2% (+/- 11.0%)
Hispanic/Latino of Any Race	507	80.9%[a] (+/- 6.3%)	13.2% (+/- 5.5%)	5.9% (+/- 3.4%)*
Other	218	73.9% (+/- 15.2%)	20.8% (+/- 15.1%)*	5.2% (+/- 4.0%)*
Education				
Less than High School	361	78.2% (+/- 7.6%)	12.6% (+/- 6.5%)*	9.2% (+/- 4.5%)*
High School Graduate	1214	74.1% (+/- 4.8%)	13.2%[b] (+/- 3.3%)	12.7% (+/- 3.8%)
Some College	1206	72.1% (+/- 5.7%)	18.8% (+/- 5.2%)	9.1% (+/- 3.4%)
College Graduate	2325	71.1% (+/- 3.8%)	20.5%[b] (+/- 3.1%)	8.4% (+/- 2.8%)
Household Income				
Less than $15,000	249	75.3% (+/- 8.7%)	10.6% (+/- 5.4%)*	14.1% (+/- 6.4%)*
$15,000-$24,999	425	63.9% (+/- 9.8%)	17.3% (+/- 7.7%)	18.8%[c] (+/- 9.0%)
$25,000-$34,999	356	79.0% (+/- 7.6%)	15.0% (+/- 6.4%)	6.0%[c] (+/- 3.3%)*
$35,000-$49,999	500	72.4% (+/- 10.8%)	13.4% (+/- 4.8%)	14.1% (+/- 11.3%)
$50,000-$74,999	687	74.2% (+/- 6.4%)	16.3% (+/- 5.4%)	9.6% (+/- 3.8%)
$75,000+	1915	70.0% (+/- 4.1%)	22.2% (+/- 3.9%)	7.8% (+/- 2.1%)

	n	None	One to Nine Days	Ten or more Days
Health Insurance Status				
Insured	**4367**	**71.9%** (+/- 2.8%)	**19.0%** [b] (+/- 2.4%)	**9.1%** (+/- 1.8%)
Uninsured	**155**	**78.0%** (+/- 9.5%)	**10.4%** [b] (+/- 5.6%)*	**11.5%** (+/- 8.4%)*

*This percentage is based on fewer than 50 respondents and should be interpreted with extreme caution
[a] Results were significant at the 0.05 level between those 65 and older and all other age groups except those 25-34 years; and between Whites and Hispanics.
[b] Results were significant at the 0.05 level between those 65 and older and all other age groups except those 55-64 years; between college graduates and high school graduates; and between the insured and the uninsured.
[c] Results were significant at the 0.05 level between those making $15,000-$24,999 and $25,000-$34,999.



Note:
"Town of Hempstead" excludes Freeport, Roosevelt, Hempstead Village, Uniondale, and Inwood, which were analyzed separately. "Town of North Hempstead" excludes Westbury/New Cassel, which was analyzed separately.

General Findings: Activity Restriction

Among Nassau County residents who reported at least one day of poor physical or mental health, 61.4% stated that it prevented them from doing their usual activities on zero days, 25.5% on one to nine days, and 13.1% on ten or more days.

- Gender, race, educational attainment and health insurance status were not significantly related to interference with normal activities.
- Those over 65 years were significantly more likely to report ten or more days of activity restriction than those 45-54 years. Furthermore, those 18-24 years were significantly more likely to report one to nine days of activity restriction than those over 65 years.
- Residents with annual household incomes below $25,000 were significantly more likely to report ten or more days of activity restriction than those with incomes above $50,000.
- Glen Cove and Inwood had the highest levels of residents reporting ten or more days of activity restriction because of poor physical or mental health in the past month, while the Towns of Oyster Bay and North Hempstead[12] had the lowest levels. However, there were no statistically significant differences between Nassau County jurisdictions.
- National and New York State estimates were not available for comparison.

[12] Excludes Westbury/New Cassel, which was analyzed separately.

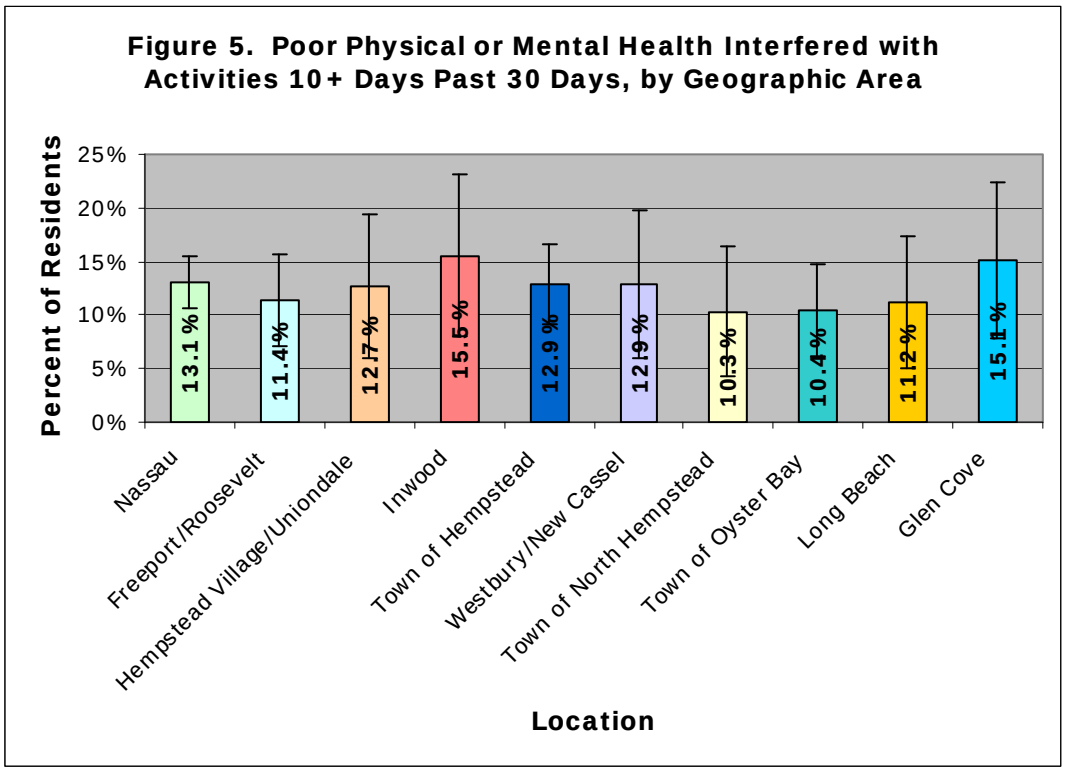
Table 9: Days Poor Health Interfered with Activities by Selected Demographics

Respondents who indicated one or more days of poor physical or mental health in the past 30 days were asked "During the past 30 days, for about how many days did poor physical or mental health keep you from doing your usual activities, such as self-care, work, or recreation?"

	N	None	One to Nine Days	Ten or More Days
Total	**2494**	**61.4%** (+/- 4.2%)	**25.5%** (+/- 4.3%)	**13.1%** (+/- 2.4%)
Gender				
Male	**827**	**60.8%** (+/- 7.4%)	**25.8%** (+/- 7.5%)	**13.4%** (+/- 4.4%)
Female	**1667**	**62.0%** (+/- 4.7%)	**25.2%** (+/- 4.7%)	**12.8%** (+/- 2.6%)
Age				
18-24	**92**	**54.6%** (+/- 20.4%)	**44.7%** [a] (+/- 20.5%)	**0.7%** (+/- 0.9%)
25-34	**214**	**52.5%** (+/- 12.9%)	**33.2%** [a] (+/- 12.4%)	**14.3%** (+/- 10.9%)
35-44	**508**	**64.8%** (+/- 6.9%)	**22.3%** (+/- 5.3%)	**12.9%** (+/- 5.5%)
45-54	**600**	**66.6%** (+/- 6.1%)	**21.6%** (+/- 4.9%)	**11.8%** [b] (+/- 4.0%)
55-64	**414**	**58.3%** (+/- 9.7%)	**24.6%** (+/- 8.5%)	**17.1%** (+/- 6.8%)
65+	**612**	**62.8%** (+/- 6.5%)	**15.7%** [a] (+/- 4.5%)	**21.5%** [b] (+/- 5.4%)
Race/Ethnicity				
White, Non-Hispanic	**1881**	**63.0%** (+/- 4.5%)	**24.1%** (+/- 4.4%)	**12.9%** (+/- 2.6%)
Black, Non-Hispanic	**250**	**51.4%** (+/- 15.7%)	**34.7%** (+/- 17.0%)	**14.0%** (+/- 11.6%)
Hispanic/Latino of Any Race	**225**	**69.8%** (+/- 10.4%)	**16.1%** (+/- 7.6%)	**14.1%** (+/- 6.7%)
Other	**89**	**44.1%** (+/- 25.9%)	**44.9%** (+/- 29.9%)	**11.0%** (+/- 10.3%)
Education				
Less than High School	**170**	**54.2%** (+/- 13.0%)	**26.7%** (+/- 12.8%)	**19.1%** (+/- 8.2%)
High School Graduate	**585**	**61.9%** (+/- 9.5%)	**20.1%** (+/- 9.6%)	**18.0%** (+/- 6.1%)
Some College	**607**	**63.9%** (+/- 8.5%)	**25.1%** (+/- 8.5%)	**11.0%** (+/- 4.3%)
College Graduate	**1116**	**60.9%** (+/- 6.0%)	**29.1%** (+/- 6.0%)	**10.0%** (+/- 3.1%)
Household Income				
Less than $15,000	**141**	**53.7%** (+/- 11.8%)	**15.1%** (+/- 8.5%)	**31.2%** [b] (+/- 10.9%)
$15,000-$24,999	**224**	**52.2%** (+/- 13.6%)	**17.8%** (+/- 10.3%)	**30.1%** [b] (+/- 13.9%)
$25,000-$34,999	**195**	**66.7%** (+/- 10.5%)	**18.1%** (+/- 8.0%)	**15.2%** (+/- 7.5%)
$35,000-$49,999	**238**	**49.3%** (+/- 16.0%)	**31.6%** (+/- 20.0%)	**19.2%** (+/- 9.9%)

	N	None	One to Nine Days	Ten or More Days
$50,000-$74,999	335	58.4% (+/- 14.1%)	34.3% (+/- 14.8%)	7.4% [b] (+/- 4.2%)
$75,000+	913	62.3% (+/- 6.4%)	28.8% (+/- 6.4%)	8.8% [b] (+/- 3.2%)
Health Insurance Status				
Insured	2133	63.2% (+/- 4.3%)	24.9% (+/- 4.2%)	11.9% (+/- 2.3%)
Uninsured	70	66.5% (+/- 17.2%)	20.8% (+/- 14.1%)	12.7% (+/- 12.3%)

*This percentage is based on fewer than 50 respondents and should be interpreted with extreme caution
[a] Results were significant at the 0.05 level between those 65+ and those 18-34 years.
[b] Results were significant at the 0.05 level between those 65+ and those 45-54 years and between those making over $50,000 and those making less than $25,000.



Note:
"Town of Hempstead" excludes Freeport, Roosevelt, Hempstead Village, Uniondale, and Inwood, which were analyzed separately. "Town of North Hempstead" excludes Westbury/New Cassel, which was analyzed separately.

Differential Treatment When Seeking Health Care

Despite great improvements in the overall health of the nation, Americans who are members of racial and ethnic minority groups, including African Americans, Asian Americans, Hispanics, and Pacific Islanders/Native Hawaiians, are more likely than Whites to have poor health and to die prematurely. Because racial and ethnic minority groups are expected to make up an increasingly larger proportion of the U.S. population in coming years, culturally appropriate, community-driven programs are needed to eliminate these disparities.[13]

General Findings

Most Nassau County residents (80.5%) said that they were treated the same as other races when seeking health care. However, 13.4% felt that their experiences were better than other races and 1.8% felt they were treated worse.

- There were no significant differences between men and women in their perceptions of differential treatment due to race when seeking health care.
- Those 35 years and older were significantly more likely to feel they were treated worse than other races when seeking health care compared to 18-24 year olds.
- Adults age 35-44 were significantly more likely to feel that they were treated the same as other races compared to 65+ year olds.
- Blacks and Hispanics perceived that they were treated worse when seeking health care significantly more often compared to Whites.
- Compared to Whites and Blacks, residents of Other race were significantly more likely to perceive that they were treated similar to other races when seeking health care.
- Whites were significantly more likely to feel that they were treated better when seeking health care than Blacks and Hispanics.
- Those with less than a high school education were significantly more likely to perceive that they were treated worse than other races when seeking health care compared to college graduates.
- College graduates were significantly more likely than high school graduates and those with some college education to perceive being treated better than other races.
- Residents with annual incomes between $15,000 and $24,999 were significantly more likely to perceive worse treatment than other races when seeking health care than those with incomes over $75,000.
- Insurance status was not significantly related to perceptions of differential treatment when seeking health care.
- Residents of Hempstead Village/Uniondale reported the highest perceptions of differential treatment when seeking health care, while the Town of Hempstead and the Town of North Hempstead[14] had the lowest levels. Hempstead Village/Uniondale had significantly higher perceptions of differential treatment when seeking health care compared to Nassau County overall, the Town of Hempstead and the Town of North Hempstead.
- National and New York State estimates were not available for comparison.

[13] Centers for Disease Control and Prevention. Office of Minority Health. Available at: http://www.cdc.gov/omh/Populations/populations.htm. Accessed on February 7, 2007.

[14] Excludes Westbury/New Cassel, which was analyzed separately

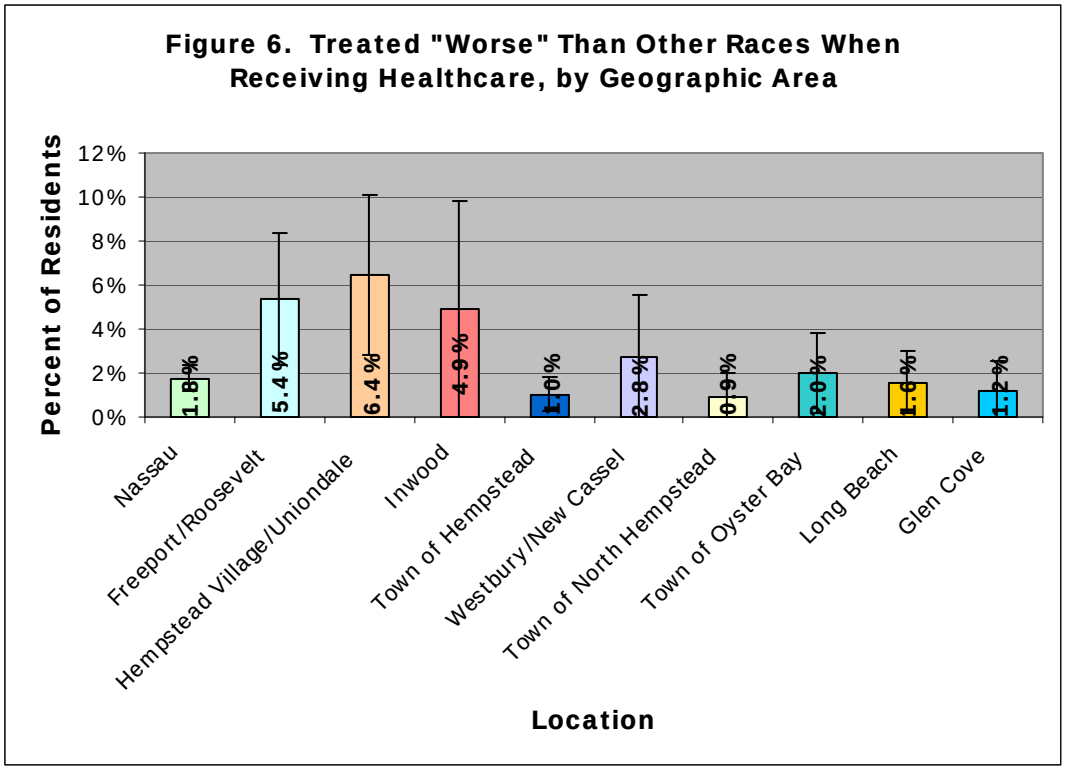
Table 10: Treatment in Health Care Based on Race

"Within the past year when seeking health care, did you feel your experiences were worse than other races, the same as other races, better than other races, or worse than some but better than others?"

	n	Better	The Same	Worse	Worse than Some Better than Others	Only Encountered Same Race
Total	3966	13.4% (+/- 2.1%)	80.5% (+/- 2.4%)	1.8% (+/- 0.6%)	3.0% (+/- 1.0%)	0.3% (+/-0.2%)*
Gender						
Male	1500	11.6% (+/- 2.8%)	81.0% (+/- 3.6%)	1.8% (+/- 0.9%)*	3.5% (+/- 1.9%)	0.2% (+/- 0.2%)*
Female	2466	15.1% (+/- 3.0%)	80.1% (+/- 3.2%)	1.7% (+/- 0.7%)	2.5% (+/- 0.9%)	0.4% (+/- 0.3%)*
Age						
18-24	124	20.1% (+/- 12.9%)*	72.0% (+/- 13.7%)	0.1%[c] (+/- 0.1%)*	6.9% (+/- 5.2%)*	0.0% (+/- 0.0%)*
25-34	364	8.7% (+/- 5.8%)*	85.0% (+/- 7.6%)	1.9% (+/- 2.0%)*	3.3% (+/- 4.2%)*	0.0% (+/- 0.0%)*
35-44	789	11.0% (+/- 3.6%)	84.4%[b] (+/- 3.9%)	1.1%[c] (+/- 0.7%)*	2.4% (+/- 1.1%)*	0.2% (+/- 0.2%)*
45-54	931	11.7% (+/- 3.0%)	82.8% (+/- 4.0%)	2.2%[c] (+/- 1.2%)*	1.5% (+/- 1.2%)*	0.3% (+/- 0.3%)*
55-64	704	15.1% (+/- 4.8%)	79.6% (+/- 5.1%)	1.4%[c] (+/- 0.8%)*	2.5% (+/- 1.7%)*	0.3% (+/- 0.4%)*
65+	977	17.8% (+/- 3.9%)	74.8%[b] (+/- 4.6%)	3.4%[c] (+/- 2.1%)*	2.5% (+/- 1.6%)*	0.7% (+/- 0.7%)*
Race/Ethnicity						
White, Non-Hispanic	2906	16.5%[a] (+/- 2.7%)	78.9%[b] (+/- 3.0%)	0.9%[c] (+/- 0.5%)*	2.5%[d] (+/- 1.3%)	0.2% (+/- 0.2%)*
Black, Non-Hispanic	408	5.9%[a] (+/- 2.5%)*	78.4%[b] (+/- 5.9%)	6.0%[c] (+/- 3.7%)*	8.9%[d] (+/- 4.3%)*	0.0% (+/- 0.0%)*
Hispanic/Latino of Any Race	423	6.0%[a] (+/- 3.3%)*	85.1% (+/- 4.8%)	4.3%[c] (+/- 2.3%)*	2.5% (+/- 2.1%)*	0.2% (+/- 0.3%)*
Other	173	3.4% (+/- 3.6%)*	93.3%[b] (+/- 4.6%)	1.2% (+/- 1.3%)*	1.8%[d] (+/- 1.7%)*	0.0% (+/- 0.0%)*
Education						
Less than High School	290	12.3% (+/- 7.4%)*	75.1% (+/- 8.6%)	5.5%[c] (+/- 3.2%)*	3.6% (+/- 3.7%)*	0.9% (+/- 1.1%)*
High School Graduate	951	9.3%[a] (+/- 2.8%)	84.9% (+/- 3.4%)	2.3% (+/- 1.3%)*	2.3% (+/- 1.1%)*	0.4% (+/- 0.5%)*
Some College	918	9.7%[a] (+/- 3.3%)	81.5% (+/- 5.0%)	2.2% (+/- 1.5%)*	4.5% (+/- 3.1%)*	0.1% (+/- 0.1%)*
College Graduate	1784	18.3%[a] (+/- 3.8%)	78.2% (+/- 3.9%)	0.6%[c] (+/- 0.4%)*	2.3% (+/- 1.1%)*	0.2% (+/- 0.2%)*
Household Income						
Less than $15,000	202	11.3% (+/- 6.2%)*	76.3% (+/- 8.4%)	5.5% (+/- 4.2%)*	4.0% (+/- 2.8%)*	0.0% (+/- 0.0%)*
$15,000-$24,999	337	11.3% (+/- 7.1%)*	75.5% (+/- 8.3%)	4.7%[c] (+/- 2.7%)*	5.3% (+/- 4.3%)*	0.9% (+/- 1.0%)*
$25,000-$34,999	280	11.1% (+/- 6.4%)*	87.2% (+/- 6.7%)	1.2% (+/- 1.3%)*	0.0% (+/- 0.0%)*	0.3% (+/- 0.5%)*
$35,000-$49,999	382	12.5% (+/- 5.2%)	79.5% (+/- 6.5%)	2.0% (+/- 1.6%)*	5.3% (+/- 3.4%)*	0.4% (+/- 0.6%)*
$50,000-$74,999	548	12.8% (+/- 5.7%)	81.8% (+/- 6.0%)	1.6% (+/- 1.5%)*	2.2% (+/- 1.4%)*	0.0% (+/- 0.1%)*

	n	Better	The Same	Worse	Worse than Some Better than Others	Only Encountered Same Race
$75,000+	1542	15.0% (+/- 3.5%)	80.4% (+/- 3.9%)	0.9%[c] (+/- 0.8%)*	3.1% (+/- 2.0%)*	0.1% (+/- %)*
Health Insurance Status						
Insured	3696	13.4% (+/- 2.1%)	80.8% (+/- 2.4%)	1.6% (+/- 0.6%)	3.0% (+/- 1.1%)	0.2% (+/- 0.2%)*
Uninsured	141	7.0% (+/- 7.6%)*	78.4% (+/- 10.3%)	4.3% (+/- 3.3%)*	5.9% (+/- 5.5%)*	0.8% (+/- 1.1%)*

* This percentage is based on fewer than 50 respondents and should be interpreted with extreme caution.
[a] Results were significant at the 0.05 level between Whites and Blacks/Hispanics; and between college graduates and those with some college/high school graduates.
[b] Results were significant at the 0.05 level between those 35-44 and 65+; and between Other race and Whites/Blacks.
[c] Results were significant at the 0.05 level between 18-24 year olds and those over 35 years of age; between Whites and Blacks and Hispanics; between college graduates and those with less than a high school education; and between those with annual incomes between $15,000-$24,999 and those making more than $75,000.
[d] Results were significant at the 0.05 level between Blacks/Hispanics and Whites.



Note:
"Town of Hempstead" excludes Freeport, Roosevelt, Hempstead Village, Uniondale, and Inwood, which were analyzed separately. "Town of North Hempstead" excludes Westbury/New Cassel, which was analyzed separately.

Chapter 4: Health Behaviors/Lifestyle Choices

Physical Activity

Regular physical activity substantially reduces the risk of dying of coronary heart disease, the nation's leading cause of death, and decreases the risk of stroke, colon cancer, diabetes, and high blood pressure. It also helps to control weight; contributes to healthy bones, muscles, and joints; reduces falls among older adults; helps to relieve the pain of arthritis; reduces symptoms of anxiety and depression; and is associated with fewer hospitalizations, physician visits, and medications.[15] The CDC recommends that adults be moderately active for at least 30 minutes on five or more days per week or vigorously active for at least 20 minutes on three or more days per week.[16] However, in 2005, only 49.1% of Americans and 48.1% of New Yorkers regularly engaged in these recommended levels of physical activity.[17]

General Findings

Nearly 45% of Nassau County residents participated in moderate activities for at least 30 minutes at a time (five or more days per week) or vigorous activities for at least 20 minutes at a time (three or more days per week) as recommended by the CDC.

- Men were more likely to engage in moderate or vigorous physical activity than women. However, this result was not statistically significant.
- Adults 65+ were significantly less likely to routinely engage in recommended levels of vigorous or moderate physical activity compared to adults 25-44 and 55-64. However, those over 65 were not statistically different than those 18-24 and 45-54 to engage in recommended levels of vigorous or moderate physical activity.
- Although there were no statistically significant differences among income and education groups, as levels of each increased, residents engaging in moderate and vigorous physical activity increased by up to 30%.
- Race/ethnicity and insurance status were not significantly related to participation in recommended levels of physical activity.
- Long Beach leads the county with the highest percentage of residents who reported engaging in moderate or vigorous physical activity and Inwood had the lowest level. However, there were no statistically significant differences between Nassau County jurisdictions.
- With the exception of Long Beach, all areas of the county reported lower levels of recommended physical activity than New York State and the nation.

[15] Centers for Disease Control and Prevention, National Center for Chronic Disease Prevention and Health Promotion, Division of Nutrition and Physical Activity. Available at: http://www.cdc.gov/nccdphp/dnpa/physical/importance/index.htm. Accessed August 23, 2006.

[16] Centers for Disease Control and Prevention, National Center for Chronic Disease Prevention and Health Promotion, Division of Nutrition and Physical Activity. Available at: http://www.cdc.gov/nccdphp/dnpa/physical/recommendations/index.htm Accessed August 23, 2006.

[17] 2005 United States (states and DC) BRFSS and 2005 New York State BRFSS. Available at http://www.cdc.gov/brfss. Accessed September 5, 2006.

Table 11: Respondents Engaging in Moderate or Vigorous Physical Activity by Selected Demographics

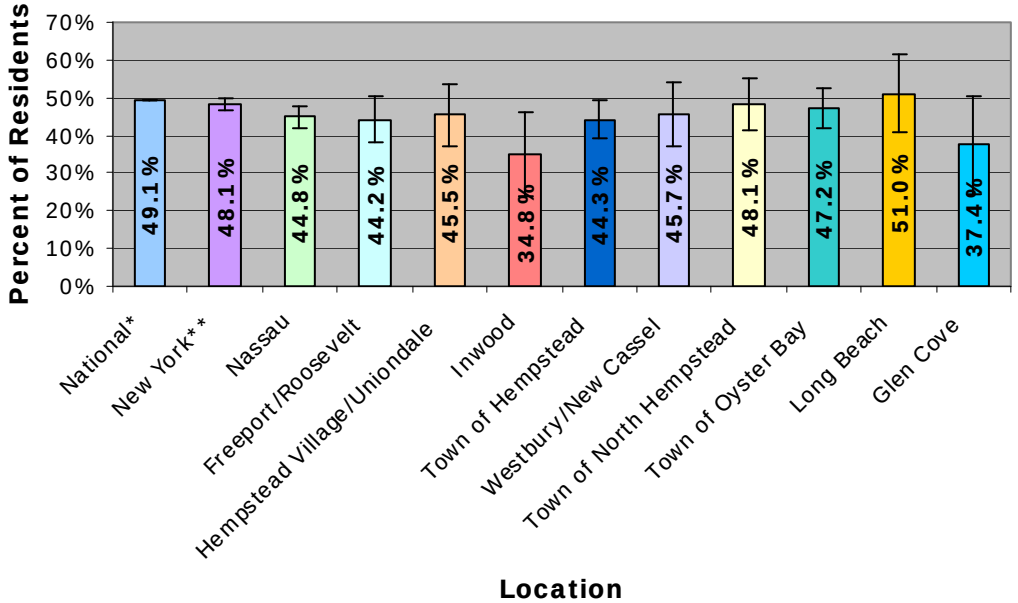
Calculated variable based on a series of questions related to vigorous and moderate physical activity and the time allotted to each. "Engaging in moderate or vigorous physical activity" indicates that the respondent was moderately active for at least 30 minutes on 5 or more days per week or vigorously active for at least 20 minutes on 3 or more days per week.

	n	Engage in Moderate or Vigorous Physical Activity	Do Not Engage in Moderate or Vigorous Physical Activity
Total	**4710**	**44.8%** (+/- 2.8%)	**55.2%** (+/- 2.8%)
Gender			
Male	**1761**	**47.4%** (+/- 4.4%)	**52.6%** (+/- 4.4%)
Female	**2949**	**42.6%** (+/- 3.5%)	**57.4%** (+/-3.5%)
Age			
18-24	**133**	**43.3%** (+/- 15.8%)	**56.7%** (+/- 15.8%)
25-34	**393**	**51.8%** [a] (+/- 8.8%)	**48.2%** (+/- 8.8%)
35-44	**898**	**49.4%** [a] (5.4%)	**50.6%** (+/- 5.6%)
45-54	**1079**	**44.1%** (+/- 5.1%)	**55.9%** (+/- 5.1%)
55-64	**836**	**47.1%** [a] (+/- 6.5%)	**52.9%** (+/- 6.5%)
65+	**1262**	**35.6%** [a] (+/- 4.5%)	**64.4%** (+/- 4.5%)
Race/Ethnicity			
White, Non-Hispanic	**3505**	**46.0%** (+/- 3.0%)	**54.0%** (+/- 3.0%)
Black, Non-Hispanic	**462**	**40.9%** (+/- 9.4%)	**59.1%** (+/- 9.4%)
Hispanic/Latino of Any Race	**458**	**39.3%** (+/- 8.2%)	**60.7%** (+/- 8.2%)
Other	**190**	**50.1%** (+/- 18.1%)	**49.9%** (+/- 18.1%)
Education			
Less than High School	**338**	**36.1%** (+/- 8.7%)	**63.9%** (+/- 8.7%)
High School Graduate	**1098**	**39.5%** (+/- 5.5%)	**60.5%** (+/- 5.5%)
Some College	**1097**	**48.0%** (+/- 6.4%)	**52.0%** (+/- 6.4%)
College Graduate	**2149**	**47.1%** (+/- 4.1%)	**52.9%** (+/- 4.1%)

	n	Engage in Moderate or Vigorous Physical Activity	Do Not Engage in Moderate or Vigorous Physical Activity
Household Income			
Less than $15,000	234	36.7% (+/- 9.9%)	63.3% (+/- 9.9%)
$15,000-$24,999	384	39.2% (+/- 10.1%)	60.8% (+/- 10.1%)
$25,000-$34,999	336	40.1% (+/- 12.5%)	59.9% (+/- 12.5%)
$35,000-$49,999	443	42.4% (+/- 10.3%)	57.6% (+/- 10.3%)
$50,000-$74,999	630	47.4% (+/- 7.3%)	52.6% (+/- 7.3%)
$75,000 and over	1804	48.6% (+/- 4.3%)	51.4% (+/- 4.3%)
Health Insurance Status			
Insured	4225	44.6% (+/- 3.0%)	55.4% (+/- 3.0%)
Uninsured	151	55.7% (+/- 11.6%)	44.3% (+/- 11.6%)

[a] Results were significant at the 0.05 level between those 65+ and those 25-44/55-64 years of age.

Figure 7. Respondents Engaging in Moderate or Vigorous Physical Activity, by Geographic Area



Note:
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*2005 United States (states and DC) BRFSS. Available at http://www.cdc.gov/brfss Accessed September 5, 2006.
**2005 New York State BRFSS. Available at http://www.cdc.gov/brfss. Accessed September 5, 2006.

Nutrition

Good nutrition promotes health and reduces the risk of heart disease, stroke, certain cancers, diabetes, and osteoporosis. Unfortunately, a gap exists between recommended dietary guidelines and what Americans are actually eating. In 2005, 23.2% of Americans and 26.0% of New Yorkers ate the recommended five or more servings of fruits and vegetables each day.[18]

General Findings

Only one quarter of Nassau County residents (25.7%) reported eating five or more fruits and vegetables daily.

- Women were significantly more likely than men to eat five or more servings of fruits and vegetables each day.
- Whites were significantly more likely than Hispanics to consume five or more fruits and vegetables per day. Although not significant, Whites also reported consuming 5 or more fruits and vegetables per day than Blacks.
- Age, education level, income level and insurance status were not significantly related to fruit and vegetable consumption.
- The Town of North Hempstead had the highest percentage of residents eating five or more fruits and vegetables daily. Inwood (18.9%) and Hempstead Village/Uniondale had the lowest.
- Recommended fruit and vegetable consumption in Hempstead Village/Uniondale was significantly lower than New York State, Nassau County and the Town of North Hempstead[19].
- Although not statistically significant, Nassau County was lower than the New York State level but better than the nation for daily consumption of 5 or more fruits and vegetables.

[18] 2005 United States (states and DC) BRFSS and 2005 New York State BRFSS. Available at http://www.cdc.gov/brfss. Accessed September 5, 2006.

[19] Excludes Westbury/New Cassel, which was analyzed separately.

Table 12: Respondents Who Eat 5 or More Fruits or Vegetables per Day by Selected Demographics

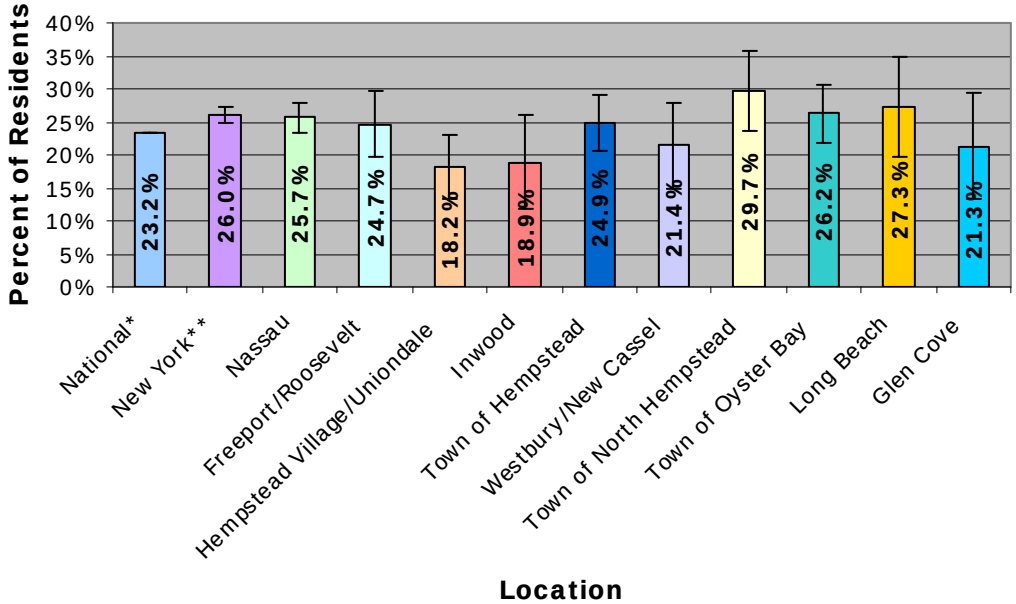
Calculated variable based on a series of questions related to types of fruits and vegetables consumed as well as how often they were eaten. "Eat 5 or More" indicates that the respondent reported eating five or more fruits or vegetables per day.

	n	Eat 5 or More	Do Not Eat 5 or More
Total	**5069**	**25.7%** (+/- 2.3%)	**74.3%** (+/- 2.3%)
Gender			
Male	**1895**	**20.8%**[a] (+/- 3.5%)	**79.2%** (+/- 3.5%)
Female	**3174**	**30.1%**[a] (+/- 3.0%)	**69.9%** (+/- 3.0%)
Age			
18-24	**146**	**24.5%** (+/- 13.4%)*	**75.5%** (+/- 13.4%)
25-34	**430**	**22.6%** (+/- 7.2%)	**77.4%** (+/- 7.2%)
35-44	**958**	**22.6%** (+/-4.1%)	**77.4%** (+/- 4.1%)
45-54	**1137**	**27.4%** (+/- 4.2%)	**72.6%** (+/- 4.2%)
55-64	**885**	**27.6%** (+/- 5.1%)	**72.4%** (+/- 5.1%)
65+	**1388**	**27.6%** (+/- 3.9%)	**72.4%** (+/- 3.9%)
Race/Ethnicity			
White, Non-Hispanic	**3742**	**26.8%**[a] (+/- 2.5%)	**73.2%** (+/- 2.5%)
Black, Non-Hispanic	**513**	**21.8%** (+/- 7.1%)	**78.2%** (+/- 7.1%)
Hispanic/Latino of Any Race	**499**	**17.9%**[a] (+/- 4.9%)	**82.1%** (+/- 4.9%)
Other	**208**	**33.2%** (+/- 16.1%)	**66.8%** (+/- 16.1%)
Education			
Less than High School	**369**	**22.8%** (+/- 6.8%)	**77.2%** (+/- 6.8%)
High School Graduate	**1198**	**23.5%** (+/- 4.4%)	**76.5%** (+/- 4.4%)
Some College	**1186**	**27.1%** (+/- 5.4%)	**72.9%** (+/- 5.4%)
College Graduate	**2278**	**26.6%** (+/- 3.2%)	**73.4%** (+/- 3.2%)
Household Income			

	n	Eat 5 or More	Do Not Eat 5 or More
Less than $15,000	258	24.1% (+/- 7.8%)	75.9% (+/- 7.8%)
$15,000-$24,999	420	28.3% (+/- 9.4%)	71.7% (+/- 9.4%)
$25,000-$34,999	360	26.0% (+/- 9.2%)	74.0% (+/- 9.2%)
$35,000-$49,999	485	22.2% (+/- 6.4%)	77.8% (+/- 6.4%)
$50,000-$74,999	670	23.3% (+/- 5.6%)	76.7% (+/- 5.6%)
$75,000 and over	1880	25.7% (+/- 3.9%)	74.3% (+/- 3.9%)
Health Insurance Status			
Insured	4436	25.4% (+/- 2.4%)	74.6% (+/- 2.4%)
Uninsured	161	20.8% (+/- 8.4%)*	79.2% (+/- 8.4%)*

*This percentage is based on fewer than 50 respondents and should be interpreted with extreme caution.
[a] Results were statistically significant at the 0.05 level between gender and between Whites and Hispanics.

Figure 8. Respondents who Eat Five or More Fruits or Vegetables per Day, by Geographic Area



Note:
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*2005 United States (states and DC) BRFSS. Available at http://www.cdc.gov/brfss Accessed September 5, 2006.
**2005 New York State BRFSS. Available at http://www.cdc.gov/brfss Accessed September 5, 2006.

Overweight and Obesity

Poor diet and physical inactivity, the root causes of obesity, comprise the second leading cause of preventable death in the U.S., resulting in 365,000 deaths annually.[20] During the past decade, the prevalence of overweight and obesity has at least doubled. In 2005, 24.4% of U.S. adults were obese; an estimated 61.1% were either overweight or obese.[21] In New York State, 22.2% of residents were obese during that same year.[22] Across all populations, these individuals are at greater risk for coronary heart disease, diabetes, cancer, stroke, asthma and arthritis.

For adults, overweight and obesity is determined by using weight and height to calculate a number called the "body mass index" (BMI). BMI is used because, for most people, it correlates with their amount of body fat. An adult who has a BMI between 18.5 and 24.9 is considered to be at a healthy weight, a BMI between 25 and 29.9 is considered overweight, and a BMI of 30 or higher is considered obese.[23]

General Findings

Overall, 19.6% of Nassau County residents were obese, 38.9% were overweight, and 41.4% were considered to have a healthy weight. While the county's level of obesity falls below that of New York State's (22.2%) and the nation (24.4%), the magnitude is still cause for concern. The estimate of overweight in the county (38.9%) exceeded both state and national estimates (37.6% and 36.7%, respectively).

- Males were significantly more likely to be overweight than females. However, when it came to obesity, there was no significant difference between the two groups.
- Race/ethnicity did not statistically influence the percentage of people who were overweight. Blacks were significantly more likely to be obese compared to Whites. Those of the Other race category were significantly less likely to be obese than all other races.
- There appeared to be an inverse relationship in which higher education was related to a lower percentage of people who are overweight or obese. However, these relationships were not statistically significant.
- Age, income and insurance status were not significantly related to being overweight or obese.
- The highest level of overweight was reported in Westbury/New Cassel and the lowest in Glen Cove. There were no statistically significant differences in levels of overweight between Nassau County jurisdictions.
- Inwood had the highest level of obesity, while the Town of North Hempstead[24] had the lowest. However, there were no statistically significant differences between Nassau County jurisdictions.
- Of note, while the Town of Oyster Bay had low levels of obesity, it ranked second only to Westbury/New Cassel in overweight.
- Although not statistically significant, the estimate of overweight in the county exceeded both state and national estimates. Nassau County was below but not statistically different than New York State and the Nation in obesity.

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[20] Mokdad AH, Marks JS, Stroup DF, Gerberding JL. Correction: Actual Causes of Death in the United States, 2000. JAMA 2005; 293(3): 293-294.
[21] 2005 United States (states and DC) BRFSS. Available at http://www.cdc.gov/brfss Accessed September 5, 2006.
[22] 2005 New York State BRFSS. Available at http://www.cdc.gov/brfss Accessed September 5, 2006.
[23] CDC Nutrition and Physical Activity Program. Available at http://www.cdc.gov/nccdphp/dnpa/obesity/defining.htm Accessed September 5, 2006.
[24] Excludes Westbury/New Cassel, which was analyzed separately.

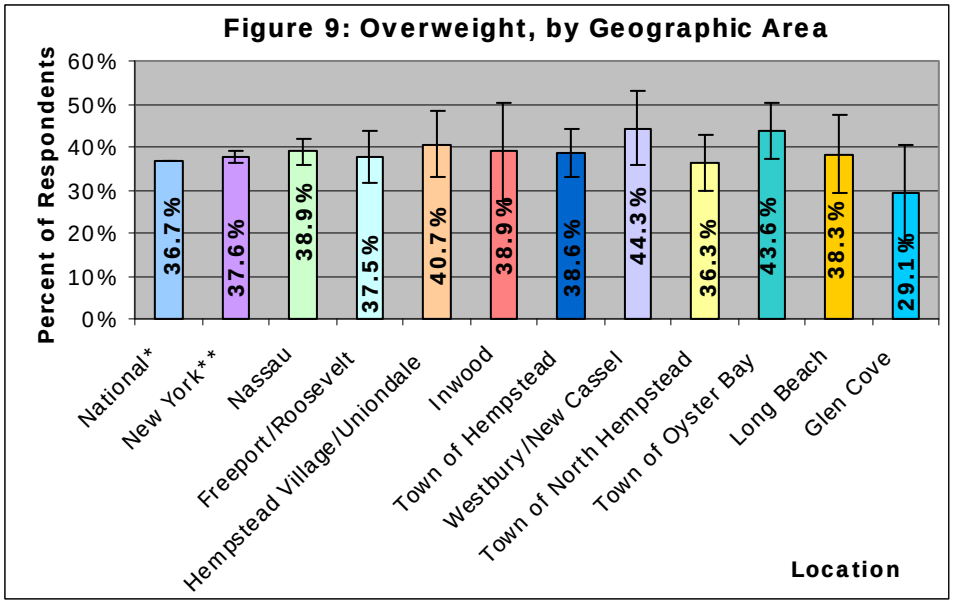
Table 13: Overweight and Obesity by Selected Demographic Characteristics

Calculated variable based on Body Mass Index (BMI), a function of respondent's reported height and weight. Residents were asked for their height and weight in separate questions during the survey. "Healthy Weight" is equal to a BMI of 18.5 to 24.9, "Overweight" is equal to a BMI of 25.0 to 29.9, and "Obese" is equal to a BMI of 30.0 or higher.

	n	Healthy Weight	Overweight	Obese
Total	**4807**	**41.4%** (+/- 2.8%)	**38.9%** (+/- 2.9%)	**19.6%** (+/- 2.2%)
Gender				
Male	**1890**	**28.2%**[a] (+/- 3.8%)	**50.3%**[b] (+/- 4.4%)	**21.4%** (+/- 3.4%)
Female	**2917**	**54.1%** [a] (+/- 3.7%)	**28.0%**[b] (+/- 3.6%)	**17.9%** (+/- 2.9%)
Age				
18-24	**144**	**38.8%** (+/- 13.8%)	**49.8%** (+/- 15.9%)*	**11.4%** (+/- 10.6%)*
25-34	**394**	**52.9%**[a] (+/- 8.7%)	**33.8%** (+/- 7.9%)	**13.2%** (+/- 5.9%)
35-44	**891**	**43.3%**[a] (+/- 5.4%)	**33.5%** (+/- 5.1%)	**23.2%** (+/- 5.0%)
45-54	**1091**	**39.8%** (+/- 5.0%)	**38.8%** (+/- 4.9%)	**21.4%** (+/- 4.2%)
55-64	**835**	**30.7%**[a] (+/- 5.4%)	**44.8%** (+/- 6.5%)	**24.5%** (+/- 5.8%)
65+	**1364**	**41.4%**[a] (+/- 4.7%)	**39.6%** (+/- 4.6%)	**18.9%** (+/- 3.3%)
Race/Ethnicity				
White, Non-Hispanic	**3580**	**44.3%**[a] (+/- 3.1%)	**37.3%** (+/- 3.1%)	**18.4%**[c,d] (+/- 2.3%)
Black, Non-Hispanic	**507**	**31.7%**[a] (+/-8.6%)	**36.2%** (+/- 7.8%)	**32.1%**[c,d] (+/- 9.8%)
Hispanic/Latino of Any Race	**432**	**30.4%**[a] (+/- 8.2%)	**45.9%** (+/- 8.8%)	**23.7%**[d] (+/- 8.0)
Other	**207**	**41.7%** (+/- 15.2%)	**49.7%** (+/- 17.2%)	**8.6%**[d] (+/- 6.2%)*
Education				
Less than High School	**304**	**33.1%** (+/- 9.0%)	**46.0%** (+/- 9.3%)	**20.8%** (+/- 7.8%)
High School Graduate	**1151**	**37.3%** (+/- 5.6%)	**39.6%** (+/- 6.3%)	**23.1%** (+/- 4.5%)
Some College	**1158**	**40.6%** (+/- 5.9%)	**38.5%** (+/- 6.5%)	**20.9%** (+/- 4.4%)
College Graduate	**2166**	**45.0%** (+/- 4.0%)	**38.1%** (+/- 4.0%)	**16.9%** (+/- 3.5%)
Household Income				
Less than $15,000	**224**	**31.4%** (+/- 9.1%)	**46.3%** (+/- 10.7%)	**22.3%** (+/- 10.4%)
$15,000-$24,999	**404**	**42.4%** (+/- 9.7%)	**37.5%** (+/- 8.7%)	**20.0%** (+/- 5.9%)
$25,000-$34,999	**351**	**36.3%** (+/- 11.4%)	**45.0%** (+/- 14.4%)	**18.7%** (+/- 8.7%)
$35,000-$49,999	**478**	**36.3%** (+/- 8.8%)	**36.3%** (+/- 9.3%)	**27.4%** (+/- 11.2%)

	n	Healthy Weight	Overweight	Obese
$50,000-$74,999	644	41.6% (+/- 8.1%)	37.4% (+/- 8.7%)	21.0% (+/- 6.1%)
$75,000 and over	1821	40.2% (+/- 4.1%)	40.3% (+/- 4.3%)	19.5% (+/- 3.3%)
Health Insurance Status				
Insured	4146	41.3% (+/- 3.0%)	38.7% (+/- 3.1%)	20.0% (+/- 2.5%)
Uninsured	124	35.5% (+/- 13.2%)*	43.1% (+/- 13.4%)	21.5% (+/- 9.5%)*

* This percentage is based on fewer than 50 respondents and should be interpreted with extreme caution.
[a] Results were statistically significant at the 0.05 level between gender groups; between those 55-64 and those 25-44/65+; and between Whites and Blacks/Hispanics.
[b] Results were statistically significant at the 0.05 level between gender groups.
[c] Results were statistically significant at the 0.05 level between Blacks and Whites.
[d] Results were statistically significant at the 0.05 level between Other race and all other races.



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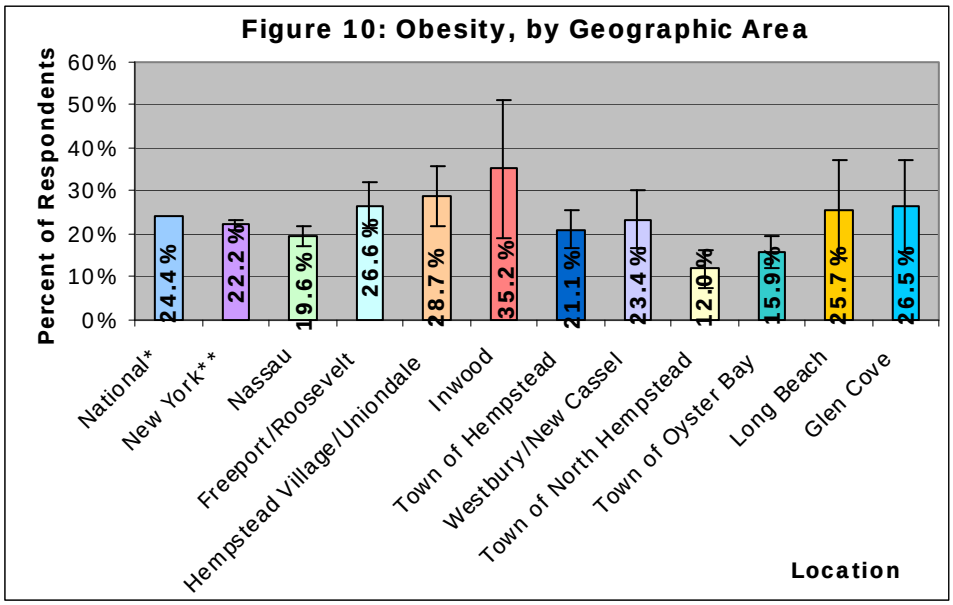

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*2005 United States (states and DC) BRFSS. Available at http://www.cdc.gov/brfss Accessed September 5, 2006.
**2005 New York State BRFSS. Available at http://www.cdc.gov/brfss Accessed September 5, 2006.

Tobacco Use

Tobacco is the leading cause of preventable illness and death in the United States, resulting in approximately 438,000 deaths and $75.5 Billion in direct health care costs per year.[25] Long recognized as a cause of cancer, heart disease, stroke, chronic obstructive pulmonary disease and other serious medical conditions, quitting is the single most important action users can take to improve their immediate and long term health. Despite progress made in the past decade toward reducing smoking, one fifth of adults nationwide and in New York State still smoke (20.6% and 20.5%, respectively).[26]

General Findings

Overall 15.4% of Nassau County residents reported smoking either every day or some days; of those, 68% reported smoking on a daily basis.

- Gender and income were not significantly related to current tobacco use.
- Adults 45-54 years had the highest proportion of daily smokers and were statistically more likely to smoke every day compared to those 65 and older. Those less than 45 years of age were significantly more likely to never have smoked and significantly less likely to be former smokers than those 45 and over.
- Significantly fewer Whites reported never smoking compared to all other races. Whites were also significantly more likely to be former smokers than Blacks and Other races.
- An inverse trend was noted between educational attainment and daily smoking. However, this relationship was not statistically significant. College graduates were significantly more likely than those with some college and high school graduates to never have smoked.
- Those with insurance were significantly more likely than the uninsured to be former smokers.
- The highest level of current smoking was seen in Glen Cove, while the lowest percentage was seen in the Town of North Hempstead[27] However, there were no statistically significant differences between Nassau County jurisdictions.
- With the exception of Glen Cove, all areas, as well as the county overall, fell below national and New York State estimates for current smoking.

[25] Morbidity and Mortality Weekly Report. Annual Smoking-Attributable Mortality, Years of Potential Life Lost, and Productivity Losses-U.S., 1997-2001. Vol. 54, No. 25, July 2005.
[26] 2005 United States (states and DC) BRFSS and 2005 New York State BRFSS. Available at http://www.cdc.gov/brfss. Accessed September 5, 2006.
[27] Excludes Westbury/New Cassel, which was analyzed separately.

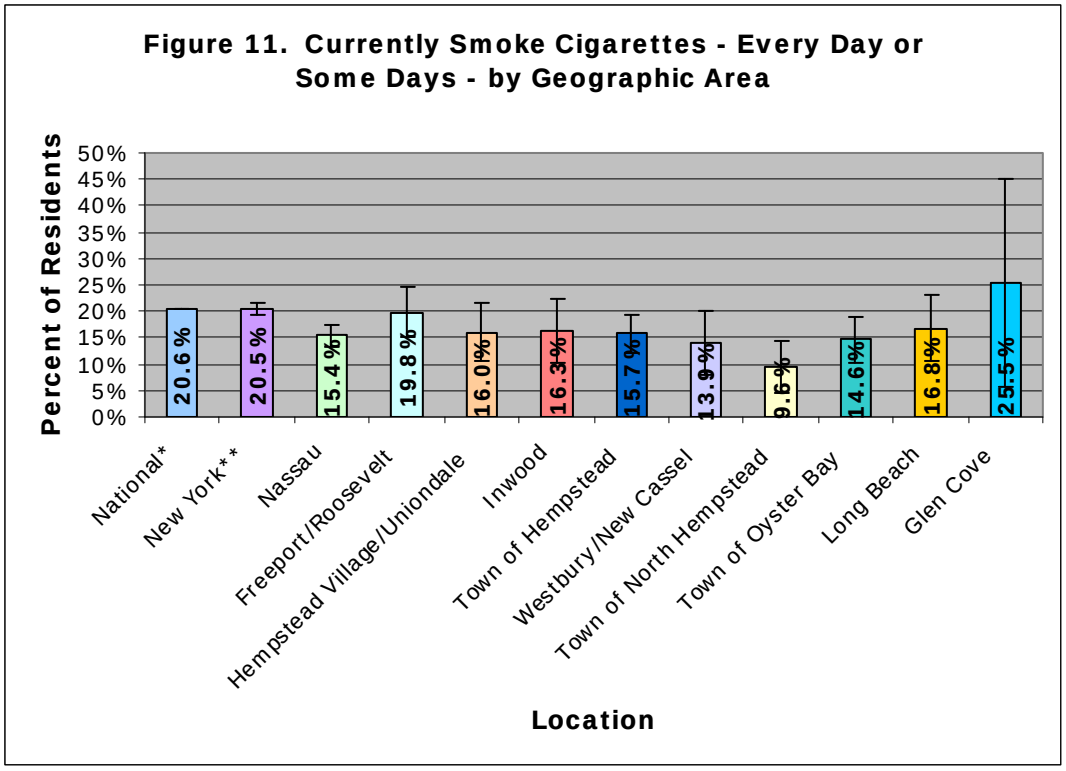
Table 14: Smoking Status by Selected Demographic Characteristics

Residents were asked about their current and former smoking habits. Calculated variable based on whether the respondent has ever smoked and, if so, how frequently.

	n	Never Smoked	Former Smoker	Current Smoker – Some Days	Current Smoker - Daily
Total	**5217**	**56.8%** (+/- 2.7%)	**27.8%** (+/- 2.2%)	**5.0%** (+/- 1.2%)	**10.4%** (+/- 1.8%)
Gender					
Male	**1946**	**57.0%** (+/- 4.2%)	**26.5%** (+/- 3.5%)	**4.7%** (+/- 1.8%)	**11.9%** (+/- 2.9%)
Female	**3271**	**56.6%** (+/- 3.4%)	**29.0%** (+/- 2.8%)	**5.3%** (+/- 1.5%)	**9.1%** (+/- 2.1%)
Age					
18-24	**156**	**83.0%** [a,b] (+/- 8.3%)	**3.2%** [a,b] (+/- 2.4%)*	**3.6%** (+/- 2.9%)*	**10.2%** (+/- 7.1%)*
25-34	**451**	**64.2%** [a,b] (+/- 8.1%)	**14.5%** [a,b] (+/- 5.2%)	**8.1%** (+/- 4.7%)*	**13.2%** (+/- 6.8%)*
35-44	**985**	**63.8%** [a,b] (+/- 5.0%)	**20.3%** [a,b] (+/- 4.0%)	**8.0%** (+/- 3.0%)	**7.9%** (+/- 2.8%)
45-54	**1172**	**48.3%** [a] (+/- 5.0%)	**32.7%** [a] (+/- 4.8%)	**4.1%** (+/- 1.6%)	**14.9%** [e] (+/- 4.2%)
55-64	**902**	**49.3%** [a] (+/- 6.2%)	**38.2%** [a] (+/- 6.2%)	**2.2%** (+/- 1.4%)*	**10.3%** (+/- 3.6%)
65+	**1418**	**45.1%** [a] (+/- 4.5%)	**46.6%** [a] (+/- 4.5%)	**3.2%** (+/- 3.2%)*	**5.1%** [e] (+/- 1.8%)
Race/Ethnicity					
White, Non-Hispanic	**3832**	**52.0%** [a] (+/- 3.0%)	**31.9%** [c] (+/- 2.6%)	**4.9%** (+/- 1.5%)	**11.2%** (+/- 2.0%)
Black, Non-Hispanic	**537**	**69.2%** [a] (+/- 7.6%)	**14.3%** [c] (+/- 4.0%)	**6.7%** (+/- 3.7%)*	**9.8%** (+/- 6.3%)*
Hispanic/Latino of Any Race	**516**	**65.0%** [a] (+/- 8.2%)	**22.9%** (+/- 8.0%)	**5.9%** (+/- 3.7%)*	**6.1%** (+/- 3.4%)*
Other	**218**	**79.3%** [a] (+/- 10.7%)	**11.2%** [c] (+/- 6.7%)*	**3.0%** (+/- 2.9%)*	**6.6%** (+/- 7.3%)*
Education					
Less than High School	**377**	**57.7%** (+/- 8.7%)	**23.8%** (+/- 7.5%)	**4.3%** (+/- 3.0%)*	**14.1%** (+/- 6.7%)
High School Graduate	**1237**	**52.2%** [a] (+/- 5.7%)	**31.8%** (+/- 4.8%)	**3.3%** [d] (+/- 1.4%)	**12.6%** (+/- 3.6%)
Some College	**1225**	**49.5%** [a] (+/- 6.0%)	**31.3%** (+/- 5.1%)	**8.3%** [d] (+/- 3.5%)	**11.0%** (+/- 3.4%)
College Graduate	**2338**	**63.6%** [a] (+/- 3.7%)	**24.2%** (+/- 2.9%)	**4.1%** (+/- 1.5%)	**8.2%** (+/- 2.7%)
Household Income					
Less than $15,000	**259**	**56.2%** (+/- 10.0%)	**29.5%** (+/- 10.0%)	**4.0%** (+/- 3.6%)*	**10.2%** (+/- 5.0%)*
$15,000-$24,999	**436**	**51.1%** (+/- 9.1%)	**27.2%** (+/- 7.8%)	**5.7%** (+/- 4.0%)*	**15.9%** (+/- 9.0%)
$25,000-$34,999	**365**	**60.9%** (+/- 11.3%)	**27.7%** (+/- 9.6%)	**5.1%** (+/-3.4%)*	**6.2%** (+/- 4.0%)*
$35,000-$49,999	**504**	**47.3%** (+/- 10.1%)	**27.5%** (+/- 6.9%)	**7.2%** (+/- 5.5%)*	**17.9%** (+/- 8.0%)

	n	Never Smoked	Former Smoker	Current Smoker – Some Days	Current Smoker - Daily
$50,000-$74,999	689	53.0% (+/- 8.0%)	29.1% (+/- 6.5%)	4.4% (+/- 2.1%)*	13.6% (+/- 5.9%)
$75,000+	1923	57.4% (+/- 4.0%)	27.8% (+/- 3.3%)	6.2% (+/- 2.3%)	8.6% (+/- 2.3%)
Health Insurance Status					
Insured	4417	56.2% (+/- 2.9%)	28.6%[c] (+/- 2.4%)	5.0% (+/- 1.3%)	10.2% (+/- 1.9%)
Uninsured	161	53.5% (+/- 11.8%)	16.0%[c] (+/- 7.9%)*	7.5% (+/- 6.3%)*	23.0% (+/- 11.9%)*

* This percentage is based on fewer than 50 respondents and should be interpreted with extreme caution.
[a] Results were significant at the 0.05 level between those over 45 years and those under 45; between Whites and all other races; and between college graduates and some college/high school graduates.
[b] Results were significant at the 0.05 level between those 18-24 years and those 25-44 years.
[c] Results were significant at the 0.05 level between Whites and Blacks/Other race and between the insured and uninsured.
[d] Results were significant at the 0.05 level between high school graduates and those with some college.
[e] Results were significant at the 0.05 level between those 65+ and those 45-54 years of age.



Note:
"Town of Hempstead" excludes Freeport, Roosevelt, Hempstead Village, Uniondale, and Inwood, which were analyzed separately. "Town of North Hempstead" excludes Westbury/New Cassel, which was analyzed separately.

*2005 United States (states and DC) BRFSS. Available at http://www.cdc.gov/brfss Accessed September 5, 2006.
**2005 New York State BRFSS. Available at http://www.cdc.gov/brfss Accessed September 5, 2006.

HIV/AIDS

Human Immunodeficiency Virus (HIV) attacks cells of the immune system, progressively destroying the body's ability to fight infections and certain cancers. Over time, most people infected with HIV become less able to fight the germs that they are exposed to each day. Acquired Immune Deficiency Syndrome (AIDS) is a late stage of HIV disease. People diagnosed with AIDS may get life-threatening diseases (opportunistic infections) that generally do not affect healthy people. These infections are often severe and sometimes fatal because the immune system is so ravaged by HIV that the body cannot fight off certain bacteria, viruses, fungi, parasites, and other microbes.[28]

By the end of 2003, over 1.1 million Americans were estimated to be living with HIV/AIDS, one-quarter of whom are unaware of their infection. Despite extensive prevention efforts, approximately 40,000 people become infected each year.[29] The epidemic is growing most rapidly among minority populations and is a leading killer of Black males ages 25 to 44. According to the CDC, AIDS affects nearly seven times more Blacks and three times more Hispanics than Whites. In recent years, an increasing number of black women and children (up to two-thirds) are being affected by HIV/AIDS.[30]

General Findings

Overall, 2.1% of Nassau County residents reported engaging in one or more activities in the past year that placed them at risk of contracting HIV. Moreover, 37.0% of residents reported having previously been tested for HIV.

- Gender, income and insurance status were not significantly related to engagement in activities that place one at risk of contracting HIV.
- Residents between 18-24 years were significantly more likely than those 55-64 to report engaging in risky behavior. While not statistically significant, those 18-24 were also at least twice as likely those 25-54 to report engaging in risky activities.
- Hispanics and Blacks were more likely than Whites to report engaging in these activities. However, the differences were not statically significant.
- Residents with less than a high school education were more than twice as likely as those with any other level of education to report participating in these activities. However, the differences were not statistically significant.
- Although not statistically significant, those making $15,000-$24,999 were more than twice as likely to engage in risky behaviors compared to all other income groups.
- Westbury/New Cassel had the highest percentage of residents who reported engaging in high risk activities, while Glen Cove and the Towns of North Hempstead[31] and Oyster Bay had the lowest levels. However, there were no statistically significant differences between Nassau County jurisdictions.
- National and New York State estimates on risky behaviors were not available for comparison.

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[28] National Institute of Allergy and Infectious Diseases, National Institutes of Health. Available at: http://www.niaid.nih.gov/factsheets/hivinf.htm. Accessed February 16, 2007.

[29] Centers for Disease Control and Prevention. A glance at the HIV/AIDS epidemic. Available at: www.cdc.gov/hiv/resources/factsheets/pdf/at-a-glance.pdf. Accessed January 17, 2007.

[30] National Institute of Allergy and Infectious Diseases, National Institutes of Health. Available at: http://www.niaid.nih.gov/factsheets/hivinf.htm. Accessed February 16, 2007.

[31] Excludes Westbury/New Cassel, which was analyzed separately.

Table 15: At-Risk for HIV by Selected Demographic Characteristics

To evaluate whether someone was at risk of contracting HIV, respondents age 18-64 were asked if they had engaged in any of the following activities in the past year:

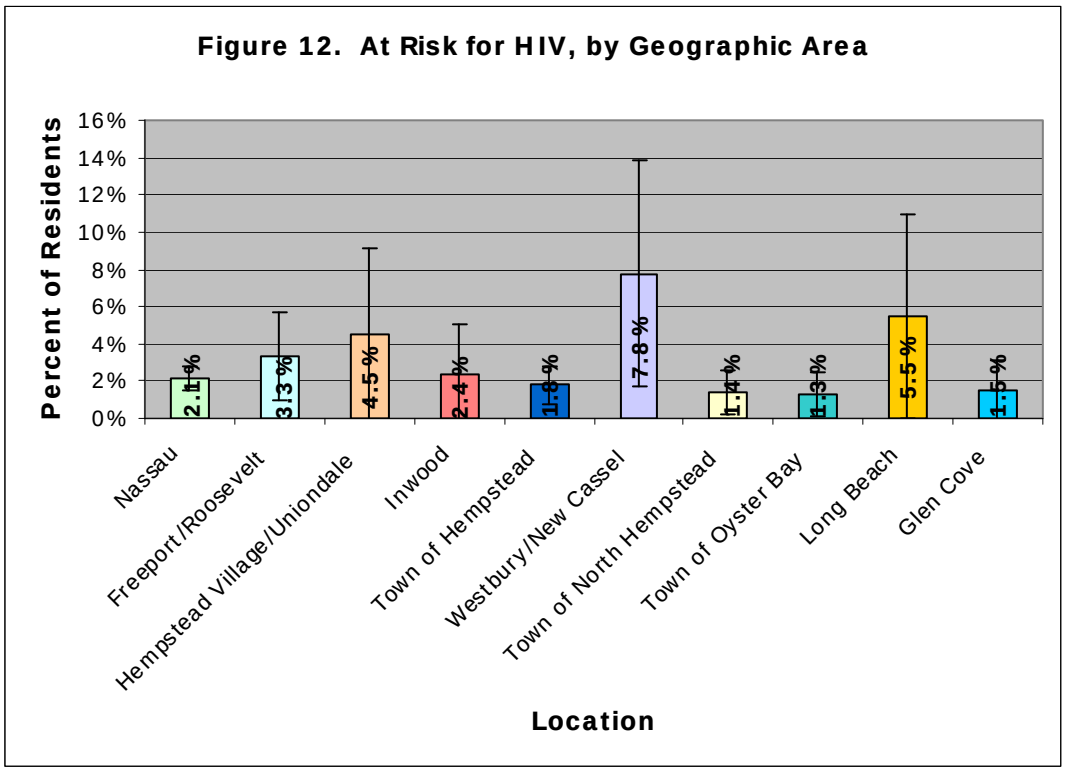
- Used intravenous drugs.
- Treated for a sexually transmitted or venereal disease.
- Given or received money or drugs in exchange for sex.
- Had anal sex without a condom.

Nassau County residents were also asked whether they had ever been tested for HIV.

	n	Yes	No
Total	3522	2.1% (+/- 0.7%)	97.9% (+/- 0.7%)
Gender			
Male	1289	1.9% (+/- 0.9%)*	98.1% (+/- 0.9%)
Female	2233	2.3% (+/- 0.9%)*	97.7% (+/- 0.9%)
Age			
18-24	137	4.8%[a] (+/- 3.4%)*	95.2% (+/- 3.4%)
25-34	405	2.4% (+/- 1.7%)*	97.6% (+/- 1.7%)
35-44	908	2.6% (+/- 1.5%)*	97.4% (+/- 1.5%)
45-54	1097	1.4% (+/- 0.9%)*	98.6% (+/- 0.9%)
55-64	857	0.7%[a] (+/- 0.6%)*	99.3% (+/- 0.6%)
Race/Ethnicity			
White, Non-Hispanic	2466	1.7% (+/- 0.7%)	98.3% (+/- 0.7%)
Black, Non-Hispanic	383	3.2% (+/- 2.9%)*	96.8% (+/- 2.9%)
Hispanic/Latino of Any Race	425	4.4% (+/- 2.4%)*	95.6% (+/- 2.4%)
Other	163	1.7% (+/- 2.1%)*	98.3% (+/- 2.1%)
Education			
Less than High School	243	4.8% (+/- 3.7%)*	95.2% (+/- 3.7%)
High School Graduate	701	1.8% (+/- 1.2%)*	98.2% (+/- 1.2%)
Some College	832	2.0% (+/- 1.2%)*	98.0% (+/- 1.2%)
College Graduate	1718	2.0% (+/- 1.0%)*	98.0% (+/- 1.0%)
Household Income			
Less than $15,000	147	0.5% (+/- 0.7%)*	99.5% (+/- 0.7%)

	n	Yes	No
$15,000-$24,999	220	8.2%[a] (+/- 6.0%)*	91.8% (+/- 6.0%)
$25,000-$34,999	195	1.3% (+/- 1.4%)*	98.7% (+/- 1.4%)
$35,000-$49,999	301	2.4% (+/- 1.8%)*	97.6% (+/- 1.8%)
$50,000-$74,999	485	3.0% (+/- 2.1%)*	97.0% (+/- 2.1%)
$75,000+	1588	1.7% (+/- 0.9%)*	98.3% (+/- 0.9%)
Health Insurance Status			
Insured	3148	2.1% (+/- 0.7%)	97.9% (+/- 0.7%)
Uninsured	156	3.1% (+/- 3.7%)*	96.9% (+/- 3.7%)
HIV Status			
Ever had HIV Test	1387	3.4%[a] (+/- 1.2%)	96.6% (+/- 1.2%)
Never had HIV Test	2057	1.4%[a] (+/- 0.8%)*	98.6% (+/- 0.8%)

*This percentage is based on fewer than 50 respondents and should be interpreted with extreme caution.
[a] Results were significant at the 0.05 level between residents 18-24 and 55-64.



Note:
"Town of Hempstead" excludes Freeport, Roosevelt, Hempstead Village, Uniondale, and Inwood, which were analyzed separately. "Town of North Hempstead" excludes Westbury/New Cassel, which was analyzed separately.

Alcohol Consumption

Alcohol use is very common in our society. Drinking alcohol has immediate effects that can increase the risk of many harmful health conditions. Excessive alcohol use, either in the form of heavy drinking (drinking more than two drinks per day on average for men or more than one drink per day on average for women), or binge drinking (5 or more drinks – for both men and women - on a single occasion), can lead to increased risk of health problems such as liver disease or unintentional injuries. In 2000, there were approximately 85,000 deaths attributable to excessive alcohol use, making it the third leading cause of preventable death in the U.S.[32]

In 2005, 14.4% of adults nationally and 14.7% in New York State engaged in binge drinking in the past month. An additional 4.9% of adults nationally and in New York State engaged in heavy drinking during this same period of time.[33]

General Findings: Binge Drinking

Approximately one in ten Nassau County residents (10.7%) reported binge drinking in the past month.

- Men were significantly more likely to report binge drinking during the previous month than women.
- Those between 18-44 years of age reported binge drinking significantly more than those 55+ years. Residents between 25-34 years were also significantly more likely to report binge drinking than those 45-54 years.
- Whites were significantly more likely to binge drink compared to those of Other race.
- Education, income and health insurance status were not significantly related to binge drinking.
- The highest percentage of residents reporting binge drinking was seen in Glen Cove, while the lowest percentages were seen in the Town of North Hempstead[34] and Inwood. However, there were no statistically significant differences between Nassau County jurisdictions.
- The overall percentage of county residents reporting binge drinking in the previous month was significantly lower than both the nation and New York State.

[32] Mokdad AH, Marks JS, Stroup DF, Gerberding JL. Actual Causes of Death in the United States, 2000. JAMA 2004: 291(10): 1238-1244.
[33] 2005 United States (states and DC) BRFSS and 2005 New York State BRFSS. Available at http://www.cdc.gov/brfss. Accessed September 5, 2006.
[34] Excludes Westbury/New Cassel, which was analyzed separately.

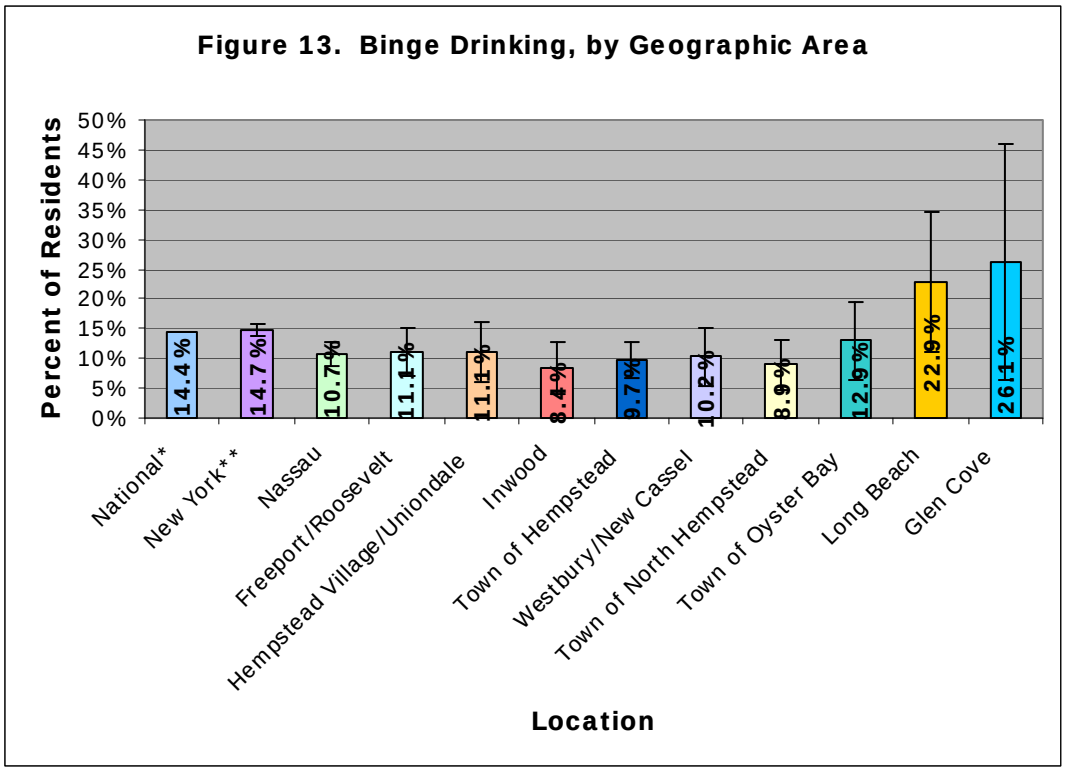
Table 16: Binge Drinking by Selected Demographic Characteristics

"Considering all types of alcoholic beverages, how many times during the past 30 days did you have 5 or more drinks on an occasion?"

	n	Yes	No
Total	5203	10.7% (+/- 2.0%)	89.3% (+/- 2.0%)
Gender			
Male	1936	15.8% (+/- 3.8%)	84.2% (+/- 3.8%)
Female	3267	6.1% (+/- 1.7%)	93.9% (+/- 1.7%)
Age			
18-24	156	21.0% *[a] (+/- 12.8%)	79.0% (+/- 12.8%)
25-34	445	21.2% [a,b] (+/- 7.4%)	78.8% (+/- 7.4%)
35-44	984	13.6% [a] (+/- 3.9%)	86.4% (+/- 3.9%)
45-54	1167	8.1% [a] (+/- 2.4%)	91.9% (+/- 2.4%)
55-64	902	4.4% *[a] (+/- 2.2%)	95.6% (+/- 2.2%)
65+	1415	4.4% [a] (+/- 3.3%)	95.6% (+/- 3.3%)
Race/Ethnicity			
White, Non-Hispanic	3827	12.1% [a] (+/- 2.7%)	87.9% (+/- 2.7%)
Black, Non-Hispanic	535	7.2% * (+/- 3.2%)	92.8% (+/- 3.2%)
Hispanic/Latino of Any Race	513	9.7% * (+/- 4.0%)	90.3% (+/- 4.0%)
Other	217	4.8% *[a] (+/- 4.5%)	95.2% (+/- 4.5%)
Education			
Less than High School	374	10.8% * (+/- 6.1%)	89.2% (+/- 6.1%)
High School Graduate	1237	10.8% (+/- 5.6%)	89.2% (+/- 5.6%)
Some College	1214	12.3% (+/- 4.0%)	87.7% (+/- 4.0%)
College Graduate	2339	9.7% (+/- 2.5%)	90.3% (+/- 2.5%)
Household Income			
Less than $15,000	261	6.7% * (+/- 4.9%)	93.3% (+/- 4.9%)
$15,000-$24,999	436	12.9% (+/- 6.5%)	87.1% (+/- 6.5%)
$25,000-$34,999	359	6.8% * (+/- 3.8%)	93.2% (+/- 3.8%)
$35,000-$49,999	500	8.1% * (+/- 3.8%)	91.9% (+/- 3.8%)
$50,000-$74,999	684	15.2% (+/- 9.1%)	84.8% (+/- 9.1%)
$75,000+	1922	12.9% (+/- 3.1%)	87.1% (+/- 3.1%)
Health Insurance Status			
Insured	4411	10.3% (+/- 1.9%)	89.7% (+/- 1.9%)

	n	Yes	No
Uninsured	157	12.7%* (+/- 8.3%)	87.3% (+/- 8.3%)

*This percentage is based on fewer than 50 respondents and should be interpreted with extreme caution.
[a] Results were significant at the 0.05 level between gender groups; between those under 45 and over 55; and between Whites and Other race.
[b] Results were significant at the 0.05 level between those 25-34 and those 45-54.



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*2005 United States (states and DC) BRFSS. Available at http://www.cdc.gov/brfss. Accessed September 5, 2006.
**2005 New York State BRFSS. Available at http://www.cdc.gov/brfss. Accessed September 5, 2006.

General Findings: Heavy Drinking

A total of 2.9% of Nassau County residents reported heavy drinking in the past month, a level more than three times lower than binge drinking (10.7%).

- Gender, age, education, income and health insurance status were not significantly related to heavy drinking.
- Whites were significantly more likely than Blacks and Hispanics to report heavy drinking.
- The highest percentage of residents reporting heavy drinking was seen in Long Beach, while the lowest percentages were seen in Inwood and Westbury/New Cassel. The percentage of residents reporting heavy drinking in these two communities was significantly lower than the county overall (2.9%).
- Nassau County's level of heavy drinking was significantly lower than that seen in both the nation and New York State.

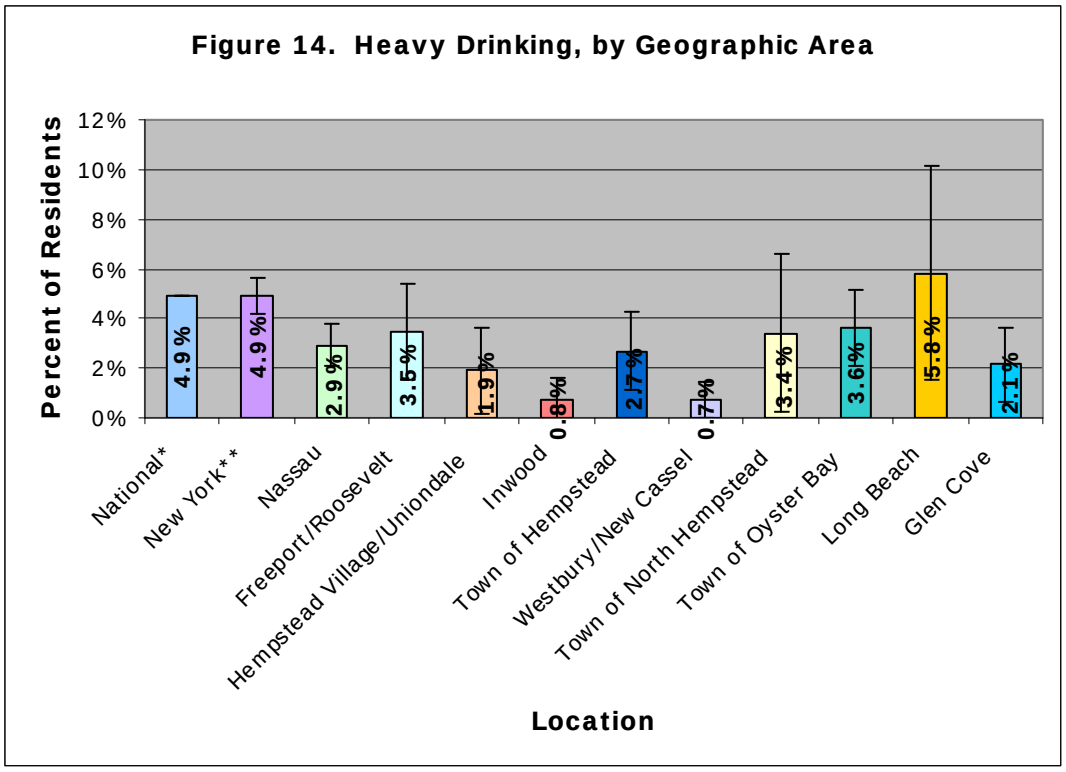
Table 17: Heavy Drinking by Selected Demographic Characteristics

"During the past 30 days, on the days when you drank, about how many drinks did you drink on the average?" (Heavy drinking is categorized as drinking more than two drinks per day on average for men or more than one drink per day on average for women)

	n	Yes	No
Total	5140	2.9% (+/- 0.9%)	97.1% (+/- 0.9%)
Gender			
Male	1912	2.7% (+/- 1.1%)	97.3% (+/- 1.1%)
Female	3228	3.2% (+/- 1.3%)	96.8% (+/- 1.3%)
Age			
18-24	151	6.8% * (+/- 6.1%)	93.2% (+/- 6.1%)
25-34	440	2.4% * (+/- 1.5%)	97.6% (+/- 1.5%)
35-44	972	2.1% * (+/- 1.0%)	97.9% (+/- 1.0%)
45-54	1163	3.2% * (+/- 2.0%)	96.8% (+/- 2.0%)
55-64	893	2.6% * (+/- 1.7%)	97.4% (+/- 1.7%)
65+	1390	2.5% * (+/- 1.1%)	97.5% (+/- 1.1%)
Race/Ethnicity			
White, Non-Hispanic	3782	3.7% [a] (+/- 1.2%)	96.3% (+/- 1.2%)
Black, Non-Hispanic	528	1.4% *[a] (+/- 1.0%)	98.6% (+/- 1.0%)
Hispanic/Latino of Any Race	504	1.0% *[a] (+/- 0.9%)	99.0% (+/- 0.9%)
Other	218	0.1% * (+/- 0.2%)	99.9% (+/- 0.2%)
Education			
Less than High School	367	3.1% * (+/- 4.0%)	96.9% (+/- 4.0%)
High School Graduate	1218	2.6% * (+/- 1.8%)	97.4% (+/- 1.8%)
Some College	1202	4.0% * (+/- 1.5%)	96.0% (+/- 1.5%)
College Graduate	2315	2.5% (+/- 1.3%)	97.5% (+/- 1.3%)
Household Income			
Less than $15,000	258	0.5% * (+/- 0.5%)	99.5% (+/- 0.5%)
$15,000-$24,999	431	5.5% * (+/- 5.0%)	94.5% (+/- 5.0%)
$25,000-$34,999	356	3.6% * (+/- 3.1%)	96.4% (+/- 3.1%)
$35,000-$49,999	492	3.6% * (+/- 2.2%)	96.4% (+/- 2.2%)
$50,000-$74,999	678	2.1% (+/- 1.4%)	97.9% (+/- 1.4%)
$75,000+	1910	2.9% (+/- 1.2%)	97.1% (+/- 1.2%)

	n	Yes	No
Health Insurance Status			
Insured	**4365**	**2.9%** (+/- 0.8%)	**97.1%** (+/- 0.8%)
Uninsured	**155**	**1.2%*** (+/- 1.3%)	**98.8%** (+/- 1.3%)

* This percentage is based on fewer than 50 respondents and should be interpreted with extreme caution.
[a] Results were significant at the 0.05 level between Whites and Blacks/Hispanics.



Note:
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*2005 United States (states and DC) BRFSS. Available at http://www.cdc.gov/brfss. Accessed September 5, 2006.
**2005 New York State BRFSS. Available at http://www.cdc.gov/brfss. Accessed September 5, 2006.

Chapter 5: Health Conditions

Cardiovascular Disease

Cardiovascular disease (CVD), including heart disease, angina and stroke, remains the nation's leading cause of death despite improvements in prevention, detection, and treatment. Approximately 910,000 Americans die of cardiovascular disease each year, which is 1 death every 35 seconds. No longer thought of as a disease that primarily affects men, more than half of these deaths now occur among women. [35]

More than 70 million Americans currently live with CVD and more than 6 million are hospitalized each year.[36] The economic impact of CVD is estimated at over $400 billion from health care expenditures and lost productivity alone.

General Findings

Overall, 7.7% of Nassau County residents had been told – at some time – that they had at least one of the cardiovascular conditions (stroke, angina, or a heart attack).

- Men were more likely to report ever having cardiovascular disease than women. However, the difference was not statistically significant.
- Cardiovascular disease prevalence increased with age; those 65+ were significantly more likely to report ever having had a stroke, angina, or heart attack than those 25-64 years. Those aged 55-64 were also significantly more likely to report ever having cardiovascular disease than those 25-54.
- Whites were significantly more likely to report ever having cardiovascular disease than Blacks.
- Adults with a high school education were significantly more likely to report ever having cardiovascular disease than those with some college education.
- Those making less than $25,000 were significantly more likely to report ever having cardiovascular disease than those making at least $75,000.
- Health insurance status was not significantly related to ever having cardiovascular disease.
- The Town of Hempstead[37] had the highest levels of reporting ever having cardiovascular disease, while the Town of Oyster Bay and Hempstead Village/Uniondale had the lowest levels. However, there were no statistically significant differences between Nassau County jurisdictions.
- National and New York State estimates do not exist for this combination of cardiovascular conditions.

[35] Centers for Disease Control and Prevention, Division for Heart Disease and Stroke Prevention, Addressing the Nation's Leading Killers 2006, Available at http://www.cdc.gov/nccdphp/publications/aag/pdf/aag_cvh2006.pdf Accessed February 13, 2007.

[36] Centers for Disease Control and Prevention, Division for Heart Disease and Stroke Prevention, Addressing the Nation's Leading Killers 2006, Available at http://www.cdc.gov/nccdphp/publications/aag/pdf/aag_cvh2006.pdf Accessed February 13, 2007.

[37] Excludes Freeport, Roosevelt, Hempstead Village, Uniondale, and Inwood, which were analyzed separately.

Table 18: Lifetime Experience with Cardiovascular Disease by Selected Demographics

Residents were asked whether they were ever told by a health professional that they had a stroke, angina, or a heart attack. If the resident answered "yes" to any of these conditions, they were classified as ever having cardiovascular disease.

	n	Yes	No
Total	5204	7.7% (+/- 1.3%)	92.3% (+/- 1.3%)
Gender			
Male	1937	8.9% (+/- 2.2%)	91.1% (+/- 2.2%)
Female	3267	6.7% (+/- 1.6%)	93.3% (+/- 1.6%)
Age			
18-24	157	0% (+/- 0.0%)	100.0% (+/- 0.0%)
25-34	448	1.9% *[a,b] (+/- 1.7%)	98.1% (+/- 1.7%)
35-44	984	2.1% *[a,b] (+/- 1.5%)	97.9% (+/- 1.5%)
45-54	1171	4.2% *[a,b] (+/- 2.3%)	95.8% (+/- 2.3%)
55-64	903	11.7% [a,b] (+/- 4.9%)	88.3% (+/- 4.9%)
65+	1405	22.3% [a] (+/- 4.0%)	77.7% (+/- 4.0%)
Race / Ethnicity			
White, Non-Hispanic	3827	7.5% [a] (+/- 1.3%)	92.5% (+/- 1.3%)
Black, Non-Hispanic	533	4.3% *[a] (+/- 1.6%)	95.7% (+/- 1.6%)
Hispanic/Latino of Any Race	511	8.9% * (+/- 6.5%)	89.1% (+/- 6.5%)
Other	217	7.1% * (+/- 5.0%)	92.9% (+/- 5.0%)
Education			
Less than High School	373	10.2% * (+/- 4.5%)	89.8% (+/- 4.5%)
High School Graduate	1236	11.2% [a] (+/- 3.2%)	88.8% (+/- 3.2%)
Some College	1215	5.4% [a] (+/- 2.4%)	94.6% (+/- 2.4%)
College Graduate	2340	6.6% (+/- 1.9%)	93.4% (+/- 1.9%)
Household Income			
Less than $15,000	255	13.3% *[a] (+/- 6.3%)	86.7% (+/- 6.3%)
$15,000-$24,999	436	14.5% *[a] (+/- 5.3%)	85.5% (+/- 5.3%)
$25,000-$34,999	360	12.9% * (+/- 7.9%)	87.1% (+/- 7.9%)
$35,000-$49,999	500	8.1% * (+/- 3.3%)	91.9% (+/- 3.3%)
$50,000-$74,999	691	6.0% * (+/- 3.4%)	94.0% (+/- 3.4%)
$75,000+	1926	4.6% [a] (+/- 1.6%)	95.4% (+/- 1.6%)

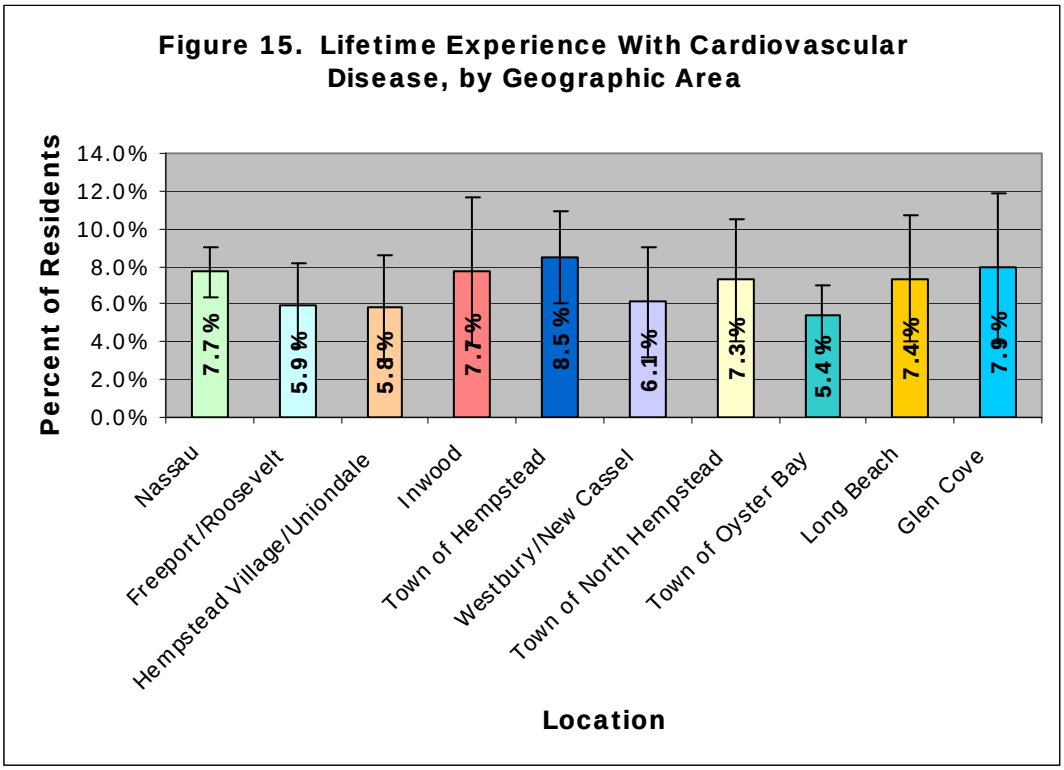
	n	Yes	No
Health Insurance Status			
Insured	**4408**	**7.9%** (+/- 1.5%)	**92.1%** (+/- 1.5%)
Uninsured	**159**	**3.1%*** (+/- 3.9%)	**96.9%** (+/- 3.9%)

* This percentage is based on fewer than 50 respondents and should be interpreted with extreme caution

[a] Results were significant at the 0.05 level between those 65+ and those 25-64; between Whites and Blacks; between high school graduates and some college education; and between those making more than $75,000 and those making less than $25,000.

[b] Results were significant at the 0.05 level between those 55-64 and those 25-54.

Figure 15. Lifetime Experience With Cardiovascular Disease, by Geographic Area



Note:
"Town of Hempstead" excludes Freeport, Roosevelt, Hempstead Village, Uniondale, and Inwood, which were analyzed separately. "Town of North Hempstead" excludes Westbury/New Cassel, which was analyzed separately.

Cholesterol Screening

High blood cholesterol is a major risk factor for cardiovascular disease, the leading cause of death in the nation. As a modifiable risk factor, lowering cholesterol levels reduces the incidence of disease and death among persons with or without coronary heart disease. Cholesterol levels can be lowered through lifestyle changes such as dietary improvement, increased physical activity, weight control, drug therapy, or a combination of these.[38]

Substantial progress has been made in increasing testing and reducing cholesterol levels. As of 2005, 73% of American adults and 77.7% in New York State have had their cholesterol checked in the past five years.

General Findings

Overall, 84.5% of Nassau County residents reported having had their cholesterol checked within the past five years.

- A similar percentage of men and women reported having their cholesterol levels checked in the past five years. This difference was not significant.
- Levels of cholesterol screening within the past five years rose significantly with every other age group. Similarly, younger age groups were significantly more likely to never have had their cholesterol checked than older age groups.
- Whites and Blacks reported being screened for cholesterol in the past five years significantly more likely than Hispanics. Whites also reported being screened for cholesterol significantly more likely than Other races.
- Whites were significantly less likely than Hispanics and Other races to never have had cholesterol screenings. Blacks were also significantly less likely than Hispanics to never have had cholesterol screenings.
- Those with less than a high school education were significantly less likely to be screened for cholesterol in the past five years than those with any other level of educational attainment. The inverse is true for those reporting never having cholesterol screenings.
- Residents making at least $35,000 were significantly more likely to be screened for cholesterol in the past five years than those making less than $25,000. The inverse is true for those reporting never having cholesterol screenings.
- The insured were statistically more likely to report having had their cholesterol checked in the past five years than those without health insurance. The inverse is true for those reporting never having cholesterol screenings.
- The highest level of cholesterol screening was seen in Long Beach, while the lowest level was in Hempstead Village/Uniondale. However, there were no statistically significant differences between Nassau County jurisdictions.
- All areas exceeded national and New York State except Hempstead Village/Uniondale which fell in between the two estimates.
- Nassau County was significantly higher than both New York State and the nation to have cholesterol screening in the past five years.

[38]Centers for Disease Control and Prevention. Cholesterol. Available at http://www.cdc.gov/cholesterol/index.htm Accessed February 13, 2007.

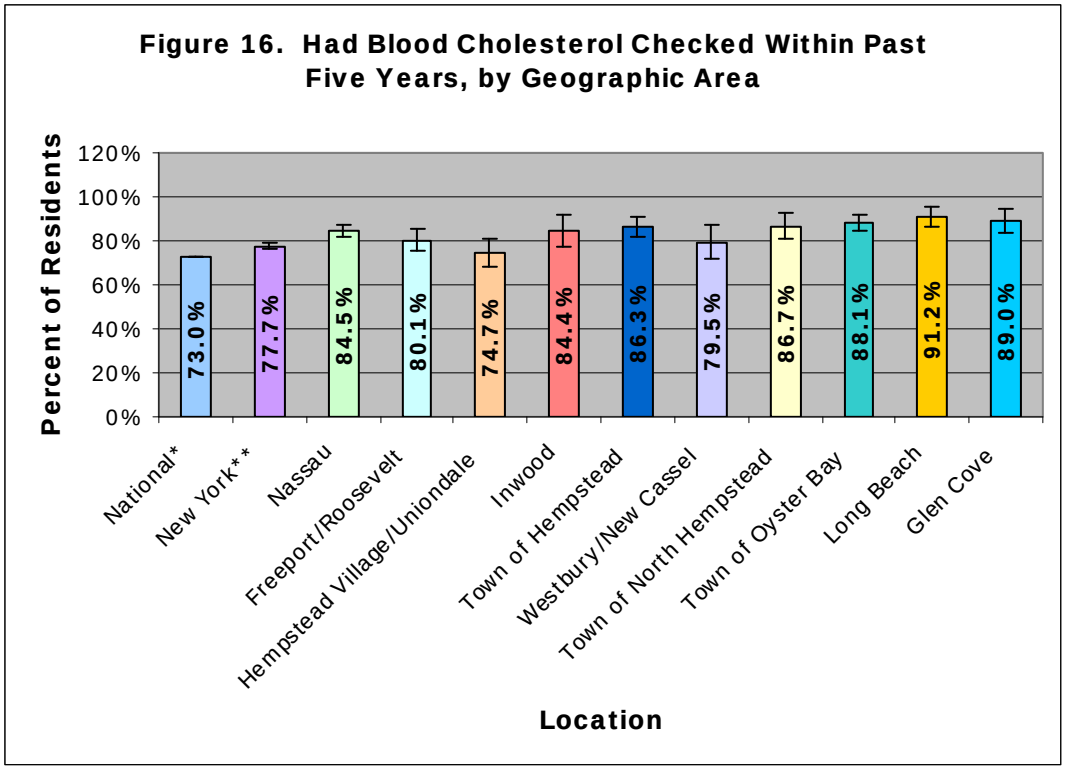
Table 19: Timing of Cholesterol Screening by Selected Demographics

Residents were asked if they ever had their blood cholesterol checked. If the resident answered "yes", they were asked about how long it had been since they were screened last.

	n	Past 5 Years	5+ Years	Never
Total	5129	84.5% (+/- 2.5%)	2.1% (+/-0.8%)	13.4% (+/- 2.4%)
Gender				
Male	1916	83.2% (+/- 3.8%)	2.4% * (+/- 1.5%)	14.3% (+/- 3.6%)
Female	3213	85.7% (+/- 3.3%)	1.8% (+/- 0.8%)	12.5% (+/- 3.3%)
Age				
18-24	149	54.8% [a] (+/- 16.1%)	4.0% * (+/- 4.7%)	41.2% [c] (+/- 16.1%)
25-34	429	75.0% [a] (+/- 6.5%)	0.8% * (+/- 0.7%)	24.2% [c] (+/- 6.4%)
35-44	971	84.4% [a] (+/- 3.6%)	2.2% * (+/- 1.2%)	13.4% [c,d] (+/- 3.5%)
45-54	1163	89.0% [a] (+/- 3.1%)	3.1% * (+/- 2.3%)	7.8% [c] (+/- 2.3%)
55-64	898	92.0% [a] (+/- 3.2%)	1.7% * (+/- 1.4%)	6.4% [c,d] (+/- 3.0%)
65+	1387	96.2% [a] (+/- 1.4%)	1.0% * (+/- 1.0%)	2.8% [c,d] (+/- 1.1%)
Race / Ethnicity				
White, Non-Hispanic	3768	89.4% [a,b] (+/- 2.0%)	2.5% (+/- 1.1%)	8.1% [c,d] (+/- 1.7%)
Black, Non-Hispanic	528	85.6% [a] (+/- 4.8%)	0.5% * (+/- 0.5%)	13.9% [c] (+/- 4.8%)
Hispanic/Latino of Any Race	508	62.1% [a] (+/- 8.5%)	1.8% * (+/- 2.3%)	36.1% [c] (+/- 8.4%)
Other	215	64.8% [b] (+/- 19.8%)	0.0% * (+/- 0.1%)	35.2% [d] (+/- 19.8%)*
Education				
Less than High School	370	53.8% [a] (+/- 10.3%)	2.4% * (+/- 3.5%)	43.9% [c] (+/- 10.4%)
High School Graduate	1215	86.0% [a] (+/- 4.1%)	2.8% * (+/- 2.1%)	11.3% [c] (+/- 3.7%)
Some College	1199	82.0% [a] (+/- 6.7%)	2.2% * (+/- 1.1%)	15.8% [c] (+/- 6.8%)
College Graduate	2308	90.6% [a] (+/- 2.5%)	1.6% * (+/- 1.1%)	7.8% [c] (+/- 2.2%)
Household Income				
Less than $15,000	253	60.3% [a] (+/- 14.9%)	1.2% * (+/- 1.3%)	38.5% [c] (+/- 15.1%)
$15,000-$24,999	426	73.0% [a] (+/- 8.6%)	3.7% * (+/- 4.2%)	23.2% [c] (+/- 8.0%)
$25,000-$34,999	361	72.3% [b] (+/- 16.2%)	1.5% * (+/- 1.9%)	26.2% [d] (+/- 16.4%)
$35,000-$49,999	493	88.4% [a] (+/- 4.3%)	1.3% * (+/- 1.1%)	10.3% [c] (+/- 4.1%)
$50,000-$74,999	684	92.5% [a,b] (+/- 2.8%)	2.2% * (+/- 1.5%)	5.3% *[c,d] (+/- 2.3%)
$75,000+	1903	89.1% [a] (+/- 3.4%)	2.0% * (+/- 1.3%)	8.9% [c] (+/- 3.2%)
Health Insurance Status				

	n	Past 5 Years	5+ Years	Never
Insured	4350	86.5% [a] (+/- 2.7%)	2.3% (+/- 1.0%)	11.2% [c] (+/- 2.6%)
Uninsured	153	44.0% [a] (+/- 11.6%)	3.1% * (+/- 2.8%)	52.9% [c] (+/- 11.8%)

* This percentage is based on fewer than 50 respondents and should be interpreted with extreme caution:
[a] Results were significant at the 0.05 level between every other age range; between Whites/Blacks and Hispanics; between those with at least a high school education and those with less than a high school education; between those making less than $25,000 and those making at least $35,000; and between the insured and the uninsured.
[b] Results were also significant at the 0.05 level between Whites and Other race; between those making $25,000-$34,999 and those making $50,000-$74,999.
[c] Results were significant at the 0.05 level between those younger than 35 and over 35 years; between Whites/ Blacks and Hispanics; between those with less than high school and all other education levels; those making less than $25,000 and over $35,000; and between the insured and uninsured.
[d] Results were significant at the 0.05 level between those ages 35-44 and 55+; between Whites and Other race; and between those making $25,000-$34,999 and $50,000-$74,999.



Note:
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*2005 United States (states and DC) BRFSS. Available at http://www.cdc.gov/brfss Accessed September 5, 2006.
**2005 New York State BRFSS. Available at http://www.cdc.gov/brfss Accessed September 5, 2006.

High Blood Pressure

High blood pressure, also called hypertension, increases one's chance of developing heart disease, stroke, and other serious conditions. It is sometimes called the 'silent killer' because it usually has no noticeable warning signs or symptoms and many people do not know they have it until other serious problems arise.[39]

In 2005, 25.5% of American adults and 25.5% of New York adults had ever been told by a health professional that their blood pressure was high.[40]

General Findings

Almost one in four (23.8%) Nassau County residents reported having been told by a health professional that they had high blood pressure.

- Gender and insurance status were not significantly related to high blood pressure.
- High blood pressure prevalence increased with age; significant differences were found between each consecutive group starting with 25-34 year olds.
- Whites and Blacks were significantly more likely to report being diagnosed with high blood pressure than Hispanics.
- High school graduates were significantly more likely to report being diagnosed with high blood pressure than college graduates.
- People who have the highest annual income reported the lowest prevalence of high blood pressure. The difference was significant between this group and those making between $35,000 and $49,999 and between $15,000 and $24,999.
- The highest prevalence of high blood pressure was seen in Inwood, while the lowest percentage was seen in Long Beach. There were no statistically significant differences between Nassau County jurisdictions.
- Nassau County had lower levels of high blood pressure than the nation and New York State, yet the differences were not significant.

[36] Centers for Disease Control and Prevention, High Blood Pressure , Available at http://www.cdc.gov/bloodpressure/facts.htm Accessed February 15, 2007.

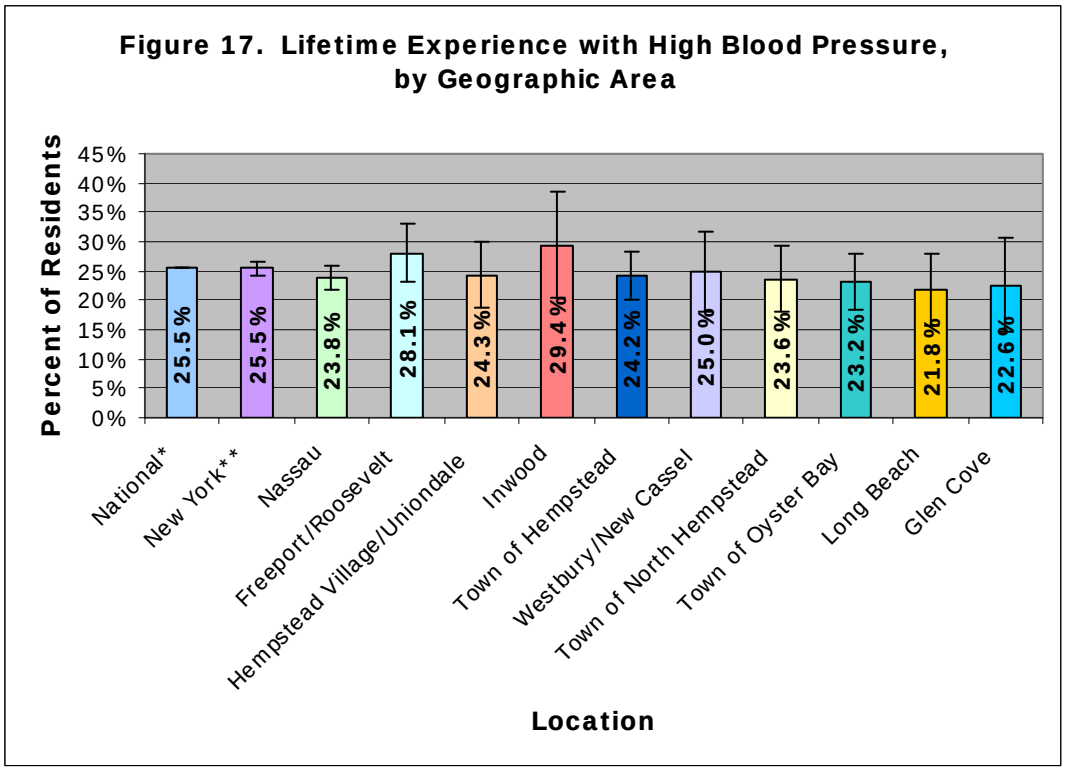
[37] 2005 United States (states and DC) BRFSS and 2005 New York State BRFSS. Available at http://www.cdc.gov/brfss. Accessed September 5, 2006.

Table 20: Lifetime Experience with High Blood Pressure by Selected Demographics
Residents were asked if they had ever been told by a doctor, nurse, or other health professional that they had high blood pressure.

	n	Yes	No
Total	5234	23.8% (+/- 2.2%)	76.2% (+/- 2.2%)
Gender			
Male	1953	24.8% (+/- 3.3%)	75.2% (+/- 3.3%)
Female	3281	23.0% (+/- 2.9%)	77.0% (+/- 2.9%)
Age			
18-24	156	7.1% (+/- 8.5%)*	92.9% (+/- 8.5%)
25-34	452	4.6%[a] (+/- 2.4%)*	95.4% (+/- 2.4%)
35-44	990	11.0%[a] (+/- 3.3%)	89.0% (+/- 3.3%)
45-54	1173	20.5%[a] (+/- 4.1%)	79.5% (+/- 4.1%)
55-64	907	37.6%[a] (+/- 6.2%)	62.4% (+/- 6.2%)
65+	1420	52.8%[a] (+/- 4.6%)	47.2% (+/- 4.6%)
Race/Ethnicity			
White, Non-Hispanic	3842	25.0%[a] (+/- 2.4%)	75.0% (+/- 2.4%)
Black, Non-Hispanic	539	33.1%[a] (+/- 9.4%)	66.9% (+/- 9.4%)
Hispanic/Latino of Any Race	519	12.9%[a] (+/- 5.4%)	87.1% (+/- 5.4%)
Other	219	17.6% (+/- 8.4%)	82.4% (+/- 8.4%)
Education			
Less than High School	379	22.7% (+/- 6.8%)	77.3% (+/- 6.8%)
High School Graduate	1241	29.5%[a] (+/- 4.7%)	70.5% (+/- 4.7%)
Some College	1226	23.4% (+/- 4.3%)	76.6% (+/- 4.3%)
College Graduate	2347	21.0%[a] (+/- 3.3%)	79.0% (+/- 3.3%)
Household Income			
Less than $15,000	262	27.2% (+/- 9.0%)	72.8% (+/- 9.0%)
$15,000-$24,999	438	33.2%[a] (+/- 7.6%)	66.8% (+/- 7.6%)
$25,000-$34,999	367	27.5% (+/- 9.1%)	72.5% (+/- 9.1%)
$35,000-$49,999	504	35.3%[a] (+/- 10.4%)	64.7% (+/-10.4%)
$50,000-$74,999	690	22.0% (+/- 5.3%)	78.0% (+/- 5.3%)
$75,000+	1925	19.2%[a] (+/- 3.0%)	80.8% (+/- 3.0%)

	n	Yes	No
Health Insurance Status			
Insured	**4431**	**24.2%** (+/- 2.4%)	**75.8%** (+/- 2.4%)
Uninsured	**161**	**16.1%** (+/- 9.2%)*	**83.9%** (+/- 9.2%)

* This percentage is based on fewer than 50 respondents and should be interpreted with extreme caution
[a] Results were significant at the 0.05 level between each consecutive age group; between Whites/Blacks and Hispanics; between high school graduates and college graduates; and between those making $35,000-$49,999 and $15,000-$24,999.



Note:
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*2005 United States (states and DC) BRFSS. Available at http://www.cdc.gov/brfss Accessed September 5, 2006.
**2005 New York State BRFSS. Available at http://www.cdc.gov/brfss Accessed September 5, 2006.

Diabetes

Diabetes is a group of diseases marked by high levels of blood glucose resulting from defects in insulin production, insulin action, or both. Diabetes is the sixth leading cause of death in the US and can lead to serious complications, including heart disease, high blood pressure, blindness, amputation, kidney disease, dental disease, nervous system disorders, and complications in pregnancy. People with diabetes can take steps to control the disease and lower the risk of complications.[41]

There are 2 types of diabetes; Type 1 (previously called insulin-dependent or juvenile-onset) accounts for 5 to 10 percent of all diagnosed cases while Type 2 (previously called non-insulin-dependent or adult-onset) diabetes accounts for 90 to 95 percent of diagnosed cases. While Type 2 was once a disease affecting mostly adults, it is increasingly being diagnosed in children and adolescents.

In 2005, 7.3% of American adults and 8.1% of New York adults reported ever having diabetes. More alarming, is that as many as 6 million people do not know they have the disease.[42]

General Findings

Overall, 7.8% of Nassau County residents have ever been told by a health professional that they have diabetes. This figure does not include women who had diabetes only during pregnancy (0.8%) or those who have borderline or pre-diabetes (0.6%).

- Gender and insurance status were not significantly related to diabetes prevalence.
- In general, diabetes prevalence increased with age; residents 55-64 years were significantly more likely to report the highest prevalence of diabetes than all younger age groups. However, this group did not significantly differ from those 65 and over.
- Hispanics were more likely to report having ever been told they have diabetes than all other races. However, the differences were not statistically significant.
- College graduates were significantly more likely to report never having diabetes than those with less than high school education.
- Diabetes prevalence was inversely related to income. Significant differences in reported diabetes prevalence were found between those making less than $15,000 and those making more than $75,000.
- The highest percentage of diabetes was seen in Westbury/New Cassel, while the lowest was in the Town of North Hempstead[43]. However, there were no statistically significant differences between Nassau County jurisdictions.
- The estimated prevalence of diabetes in Nassau County fell in between national and New York State estimates. However, these differences were not statistically significant.

[41] Centers for Disease Control and Prevention. Diabetes Public Health Resource. Available at http://www.cdc.gov/diabetes/faq/basics.htm Accessed February 15, 2007.
[42] 2005 United States (states and DC) BRFSS and 2005 New York State BRFSS. Available at http://www.cdc.gov/brfss. Accessed September 5, 2006.
[43] Excludes Westbury/New Cassel, which was analyzed separately.

Table 21: Prevalence of Diabetes by Selected Demographic Characteristics

Respondents were asked whether they had ever been told by a doctor that they had diabetes. Gestational diabetes was recorded in a separate response category as was pre-diabetes or borderline diabetes.

	n	Yes	Only While Pregnant	No	Pre Diabetes
Total	5236	7.8% (+/- 1.4%)	0.8% (+/- 0.3%)	90.9% (+/- 1.5%)	0.6% (+/- 0.3%)
Gender					
Male	1954	8.1% (+/- 2.2%)	0.0% (+/- 0.0%)	91.3% (+/- 2.3%)	0.5% (+/- 0.5%)
Female	3282	7.4% (+/- 1.8%)	1.5% (+/- 0.6%)	90.5% (+/- 1.9%)	0.6% (+/- 0.4%)
Age					
18-24	157	0.0% (+/- 0.0%)	0.2% (+/- 0.3%)*	99.5%[d] (+/- 0.6%)	0.3% (+/- 0.4%)
25-34	451	1.0%[a,b,c] (+/- 0.9%)*	1.7% (+/- 1.3%)*	96.4%[d] (+/- 1.9%)	0.9% (+/- 1.0%)
35-44	990	1.6%[a,b,c] (+/- 1.3%)*	1.4% (+/- 0.9%)*	97.0%[d] (+/- 1.6%)	0.0% (+/- 0.0%)
45-54	1172	6.0%[a,b,c] (+/- 2.2%)	0.8% (+/- 0.6%)*	92.6%[d] (+/- 2.4%)	0.6% (+/- 0.6%)
55-64	907	19.5%[a] (+/- 6.4%)	0.3% (+/- 0.4%)*	79.6%[d] (+/- 6.4%)	0.6% (+/- 0.7%)
65+	1424	16.7%[a,c] (+/- 3.8%)	0.1% (+/- 0.2%)*	82.0%[d] (+/- 3.9%)	1.2% (+/- 1.1%)
Race/Ethnicity					
White, Non-Hispanic	3847	7.3% (+/- 1.6%)	0.6% (+/- 0.3%)*	91.5% (+/- 1.6%)	0.6% (+/- 0.4%)
Black, Non-Hispanic	539	6.4% (+/- 2.1%)	0.9% (+/- 1.0%)*	92.3% (+/- 2.4%)	0.4% (+/- 0.4%)
Hispanic/Latino of Any Race	517	11.2% (+/- 6.5%)*	1.8% (+/- 1.2%)*	86.1% (+/- 6.5%)	0.9% (+/- 0.8%)
Other	218	9.9% (+/- 6.2%)*	1.0% (+/- 1.2%)*	88.8% (+/- 6.5%)	0.3% (+/- 0.3%)
Education					
Less than High School	377	11.2% (+/- 4.9%)	2.3% (+/- 2.1%)*	85.8%[d] (+/- 5.4%)	0.6% (+/- 0.7%)
High School Graduate	1245	10.1% (+/- 3.2%)	0.6% (+/- 0.4%)*	88.0% (+/- 3.4%)	1.3% (+/- 1.1%)
Some College	1225	8.1% (+/- 3.4%)	0.4% (+/- 0.4%)*	91.2% (+/- 3.5%)	0.3% (+/- 0.2%)
College Graduate	2348	5.7% (+/- 1.6%)	0.9% (+/- 0.5%)*	93.0%[d] (+/- 1.7%)	0.3% (+/- 0.3%)
Household Income					
Less than $15,000	260	16.1%[a] (+/- 6.9%)*	2.6% (+/- 2.7%)*	80.8%[d] (+/- 7.6%)	0.5% (+/- 0.7%)
$15,000-$24,999	439	9.7% (+/- 4.4%)	0.2% (+/- 0.2%)	88.2% (+/- 4.7%)	1.9% (+/- 1.8%)
$25,000-$34,999	366	12.6% (+/- 7.8%)*	0.6% (+/- 0.7%)*	86.1% (+/- 7.9%)	0.7% (+/- 0.8%)
$35,000-$49,999	504	8.3% (+/- 3.5%)*	0.7% (+/- 0.9%)*	89.7% (+/- 4.4%)	1.4% (+/- 1.9%)
$50,000-$74,999	691	7.2% (+/- 3.3%)*	0.4% (+/- 0.4%)*	92.3%[d] (+/- 3.3%)	0.1% (+/- 0.1%)
$75,000+	1928	4.7%[a] (+/- 1.7%)	0.8% (+/- 0.5%)*	94.1%[d] (+/- 1.8%)	0.4% (+/- 0.4%)

	n	Yes	Only While Pregnant	No	Pre Diabetes
Health Insurance Status					
Insured	**4436**	**7.7%** (+/- 1.5%)	**0.8%** (+/- 0.3%)*	**90.9%** (+/- 1.5%)	**0.6%** (+/- 0.4%)
Uninsured	**159**	**9.0%** (+/- 7.5%)*	**1.1%** (+/- 1.0%)*	**89.9%** (+/- 7.5%)	**0.0%** (+/- 0.0%)

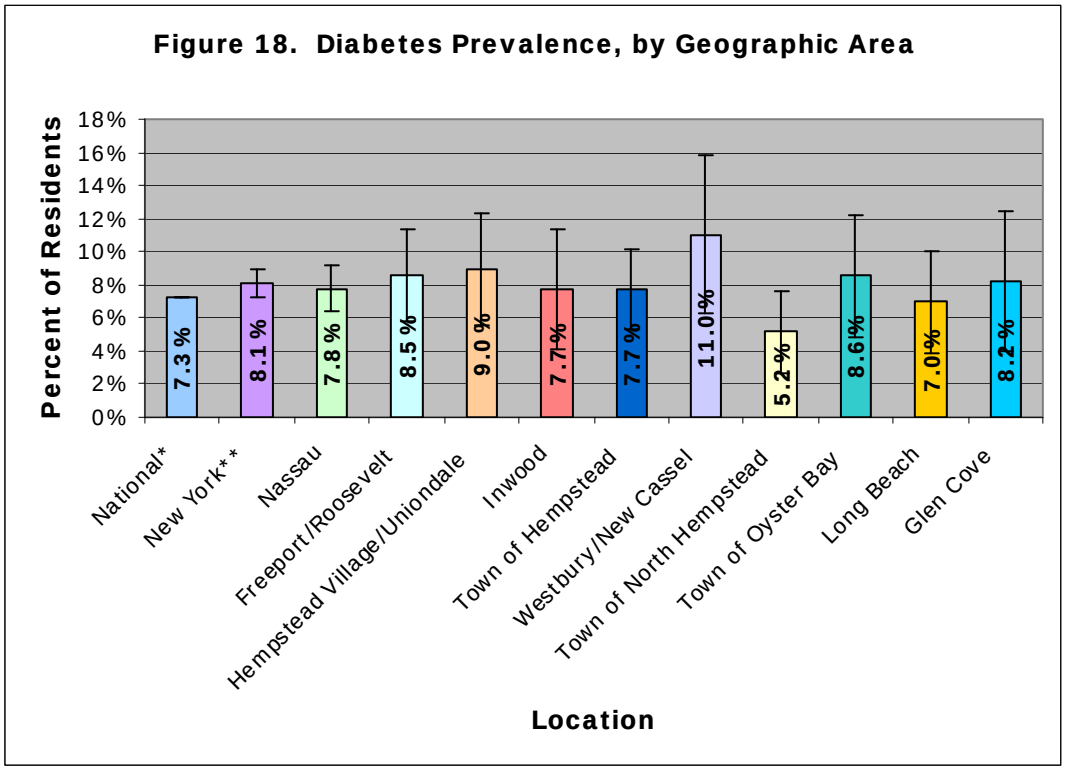
* This percentage is based on fewer than 50 respondents and should be interpreted with extreme caution

[a] Results were significant at the 0.05 level between 25-54 years old and those 55 and older; and between those making less than $15,000 and those making more than $75,000.

[b] Results were significant at the 0.05 level between those ages 45-54 and those ages 25-44.

[c] Results were significant at the 0.05 level between those aged 65+ and those under 45.

[d] Results were significant at the 0.05 level between those 55+ and under 55; between those with less than a high school education and college graduates; and between those making less than $15,000 and those making more than $50,000.



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**2005 New York State BRFSS. Available at http://www.cdc.gov/brfss Accessed September 5, 2006.

Diabetes Control

The following sections describe three important measures of diabetes control and quality: blood sugar testing, foot examination, and dilated eye examination. These questions were asked of residents reporting having diabetes.

Blood Sugar Testing (A1C)

Hemoglobin A1C measures the average level of blood sugar during the previous three months. For diabetics with well-controlled glucose, A1C should be tested twice a year. For those without controlled glucose levels, it should be tested four times per year.[44]

General Findings

Overall, 78.0% of diabetic Nassau County residents reported having been checked for A1C two or more times in the past year, 4.6% of diabetics reported not having been checked and another 8.1% had never heard of such a test.

- Gender was not significantly related to A1C testing.
- Significant differences in A1C testing characteristics could not be detected for age, race/ethnicity, education, income or insurance status, due to the low sample sizes.
- The highest level of A1C testing among diabetics was seen in the Town of Oyster Bay, while the lowest was seen in Hempstead Village/Uniondale. Hempstead Village/Uniondale had a significantly lower percentage of diabetics reporting being checked for A1C two or more times in the last year than the county overall, the Town of Oyster Bay, the Town of North Hempstead[45], and Glen Cove.
- National and New York State estimates were not available for comparison.

[44] Standards of Medical Care in Diabetes 2007, Diabetes Care, Volume 30, Supplement 1, January 2007.
[45] Excludes Westbury/New Cassel, which was analyzed separately.

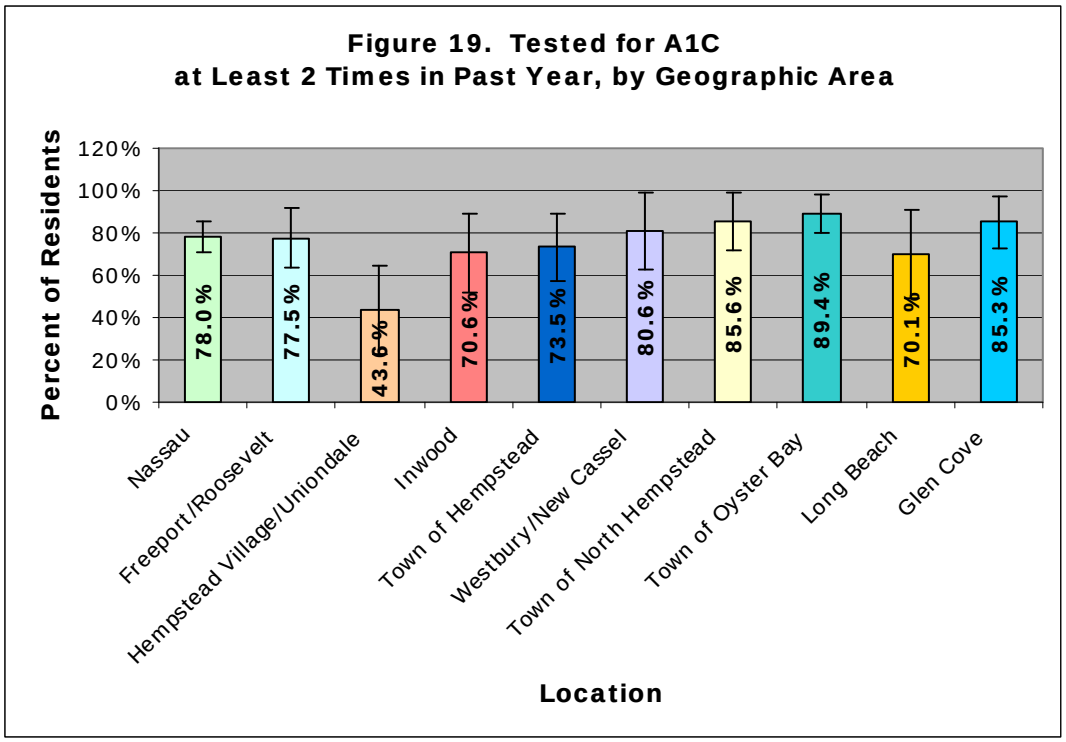
Table 22: Annual A1C Testing by Selected Demographic Characteristics

Respondents with diabetes were asked how many times their A1C level was checked by a health professional in the past 12 months.

	N	None	One time	Two or more times	Never heard of test
Total	399	4.6%* (+/- 3.7%)	9.2%* (+/- 4.4%)	78.0% (+/- 7.3%)	8.1%* (+/- 5.5%)
Gender					
Male	178	4.3%* (+/- 5.3%)	8.6%* (+/- 6.5%)	83.3% (+/- 9.2%)	3.9%* (+/- 3.0%)
Female	221	5.1%* (+/- 3.7%)	9.8%* (+/- 5.7%)	72.5% (+/- 11.4%)	12.7%* (+/- 10.5%)
Age					
25-34	7	1.5%* (+/- 2.4%)	33.4%* (+/- 38.7%)	65.1%* (+/- 39.5%)	0.0%* (+/- 0.0%)
35-44	17	11.7%* (+/- 17.1%)	3.3%* (+/- 4.3%)	67.2%* (+/- 33.1%)	17.7%* (+/- 20.7%)
45-54	59	14.7%* (+/- 15.6%)	6.5%* (+/- 7.9%)	75.2%* (+/- 17.9%)	3.6%* (+/- 4.2%)
55-64	115	0.8%* (+/- 0.8%)	12.1%* (+/- 10.0%)	76.4% (+/- 16.2%)	10.6%* (+/- 12.7%)
65+	197	2.5%* (+/- 2.1%)	7.7%* (+/- 4.5%)	82.3% (+/- 6.7%)	7.5%* (+/- 4.5%)
Race / Ethnicity					
White, Non-Hispanic	275	4.9%* (+/- 5.0%)	9.6%* (+/- 6.0%)	77.2% (+/- 9.9%)	8.2%* (+/- 7.6%)
Black, Non-Hispanic	53	0.8%* (+/- 1.2%)	16.7%* (+/- 11.1%)	74.4%* (+/- 13.2%)	8.1%* (+/- 8.4%)
Hispanic/Latino of Any Race	39	7.6%* (+/- 8.6%)	8.2%* (+/- 8.0%)	69.8%* (+/- 18.7%)	14.4%* (+/- 14.2%)
Other	25	3.6%* (+/- 4.5%)	2.4%* (+/- 3.0%)	92.1%* (+/- 8.0%)	1.9%* (+/- 2.9%)
Education					
Less than High School	41	22.2%* (+/- 25.2%)	7.3%* (+/- 7.9%)	49.9%*[a] (+/- 26.0%)	20.7%* (+/- 16.3%)
High School Graduate	126	2.4%* (+/- 2.3%)	8.3%* (+/- 5.9%)	71.4% (+/- 16.0%)	17.9%* (+/- 16.2%)
Some College	89	3.3%* (+/- 3.8%)	10.3%* (+/- 10.9%)	84.5% (+/- 13.2%)	2.0%* (+/- 3.0%)
College Graduate	142	2.7%* (+/- 3.0%)	9.8%* (+/- 7.6%)	86.5%[a] (+/- 8.3%)	1.0%* (+/- 1.1%)

	N	None	One time	Two or more times	Never heard of test
Household Income					
Less than $15,000	**45**	**0.0%*** (+/- 0.0%)	**6.2%*** (+/- 6.6%)	**78.7%*** (+/- 14.7%)	**15.1%*** (+/- 13.2%)
$15,000-$24,999	**49**	**22.0%*** (+/- 26.1%)	**5.3%*** (+/- 5.9%)	**58.4%*** (+/- 26.9%)	**14.3%*** (+/- 12.6%)
$25,000-$34,999	**42**	**2.4%*** (+/- 2.8%)	**15.2%*** (+/- 17.2%)	**79.6%*** (+/- 20.1%)	**2.8%*** (+/- 3.7%)
$35,000-$49,999	**42**	**8.1%*** (+/- 9.4%)	**11.5%*** (+/- 10.0%)	**78.1%*** (+/- 15.1%)	**2.3%*** (+/- 2.6%)
$50,000-$74,999	**41**	**0.0%*** (+/- 0.0%)	**15.8%*** (+/- 15.8%)	**79.8%*** (+/- 17.2%)	**4.4%*** (+/- 5.9%)
$75,000+	**103**	**3.5%*** (+/- 4.0%)	**8.0%*** (+/- 8.9%)	**77.6%** (+/- 18.5%)	**11.0%*** (+/- 14.5%)
Health Insurance Status					
Insured	**343**	**3.2%*** (+/- 2.1%)	**8.7%*** (+/- 4.7%)	**79.9%** (+/- 7.8%)	**8.1%*** (+/- 6.6%)
Uninsured	**14**	**40.9%*** (+/- 45.4%)	**15.1%*** (+/- 17.2%)	**33.7%*** (+/- 34.0%)	**10.3%*** (+/- 13.5%)

* This percentage is based on fewer than 50 respondents and should be interpreted with extreme caution
[a] Results were significant at the 0.05 level between less than a high school and college graduates.



Note:
"Town of Hempstead" excludes Freeport, Roosevelt, Hempstead Village, Uniondale, and Inwood, which were analyzed separately. "Town of North Hempstead" excludes Westbury/New Cassel, which was analyzed separately.

Foot Exam

Amputation and foot ulceration are common consequences of uncontrolled diabetes and are major causes of morbidity and disability. Early recognition and management of problems can prevent or delay adverse outcomes. All individuals with diabetes are recommended to receive an annual foot exam to identify these high risk conditions.[46]

General Findings

Overall, 80.4% of diabetic Nassau County residents reported having had their feet checked by a health professional at least once in the past year.

- Men were more likely to report having had at least one foot examination in the past year than women. However, the difference was not statistically significant.
- Those 55-64 years old were significantly more likely to report having had at least one exam in the past year compared to those 45-54 years old and those 65 and older.
- Education was not significantly related to having had a foot exam in the past year.
- Significant differences could not be detected for race/ethnicity, income or insurance status, due to the low sample sizes.
- The highest percentage of diabetics who reported having had a foot examination in the past year was in Westbury/New Cassel, while the lowest was reported in Freeport/Roosevelt. This difference was statistically significant.
- National and New York State estimates were not available for comparison.

[46] Standards of Medical Care in Diabetes 2007, Diabetes Care, Volume 30, Supplement 1, January 2007.

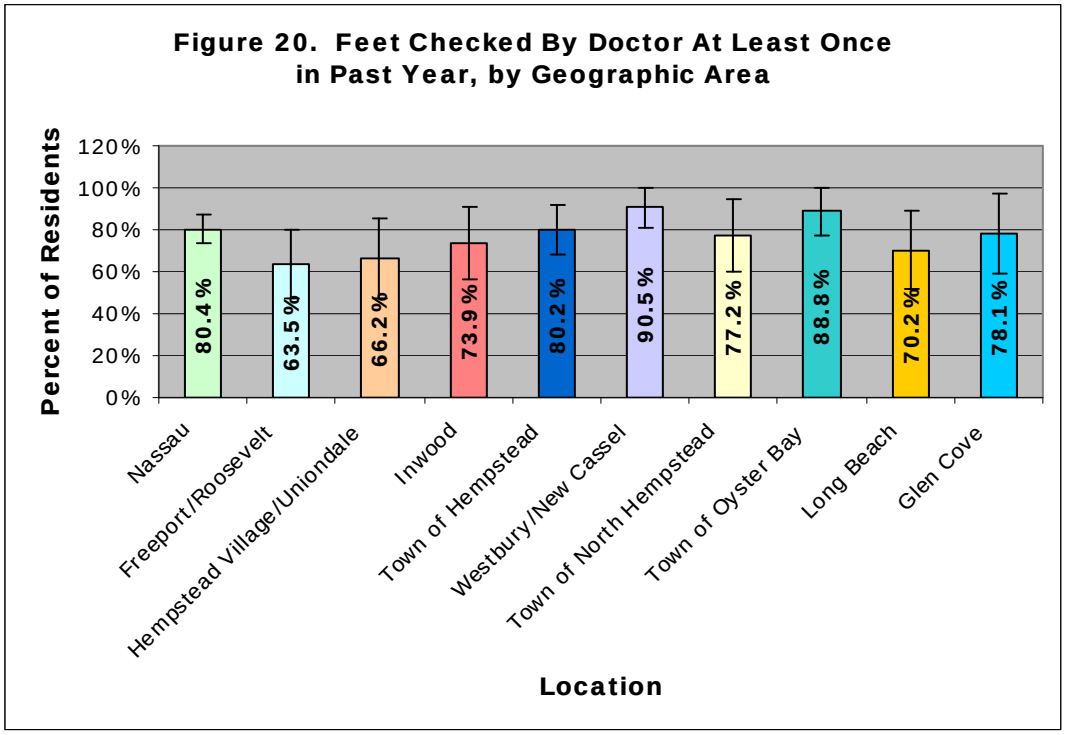
Table 23: Annual Foot Examination by Selected Demographic Characteristics

Respondents with diabetes were asked how many times their feet were checked for sores or irritations by a health professional in the past 12 months. Diabetics without feet were not asked this question.

	n	None	One or more times
Total	**425**	**19.6%** (+/- 6.5%)	**80.4%** (+/- 6.5%)
Gender			
Male	**191**	**15.3%*** (+/- 8.0%)	**84.7%** (+/- 8.0%)
Female	**234**	**24.0%** (+/- 9.9%)	**76.0%** (+/- 9.9%)
Age			
25-34	**8**	**38.6%*** (+/- 40.2%)	**61.4%*** (+/- 40.2%)
35-44	**18**	**8.2%*** (+/- 9.6%)	**91.8%*** (+/- 9.6%)
45-54	**58**	**36.5%*[a]** (+/- 19.3%)	**63.5%*[b]** (+/- 19.3%)
55-64	**121**	**7.1%*[a]** (+/- 4.3%)	**92.9%[b]** (+/- 4.3%)
65+	**214**	**25.5%[a]** (+/- 11.1%)	**74.5%[b]** (+/- 11.1%)
Race / Ethnicity			
White, Non-Hispanic	**287**	**20.5%** (+/- 8.1%)	**79.5%** (+/- 8.1%)
Black, Non-Hispanic	**58**	**19.0%*** (+/- 10.1%)	**81.0%*** (+/- 10.1%)
Hispanic/Latino of Any Race	**45**	**14.9%*** (+/- 12.1%)	**85.1%*** (+/- 12.1%)
Other	**24**	**22.7%*** (+/- 24.6%)	**77.3%*** (+/- 24.6%)
Education			
Less than High School	**50**	**40.7%*** (+/- 23.6%)	**59.3%*** (+/- 23.6%)
High School Graduate	**134**	**18.6%*** (+/- 11.7%)	**81.4%** (+/- 11.7%)
Some College	**98**	**11.0%*** (+/- 8.3%)	**89.0%** (+/- 8.3%)
College Graduate	**141**	**21.6%*** (+/- 11.5%)	**78.4%** (+/- 11.5%)

	n	None	One or more times
Household Income			
Less than $15,000	46	17.8%* (+/- 14.2%)	82.2%* (+/- 14.2%)
$15,000-$24,999	53	31.8%* (+/- 25.8%)	68.2%* (+/- 25.8%)
$25,000-$34,999	44	24.3%* (+/- 24.8%)	75.7%* (+/- 24.8%)
$35,000-$49,999	46	40.4%*[a] (+/- 22.1%)	59.6%* (+/- 22.1%)
$50,000-$74,999	42	11.2%* (+/- 9.2%)	88.8%* (+/- 9.2%)
$75,000+	105	15.3%*[a] (+/- 10.0%)	84.7% (+/- 10.0%)
Health Insurance Status			
Insured	364	17.1%[a] (+/- 6.1%)	82.9% (+/- 6.1%)
Uninsured	12	62.6%*[a] (+/- 38.7%)	37.4%* (+/- 38.7%)

* This percentage is based on fewer than 50 respondents and should be interpreted with extreme caution
[a] Results were significant at the 0.05 level between those aged 55-64 and those 45-54/65+; between those making $35,000-$49,999 and those making at least $75,000; and between the insured and uninsured.
[b] Results were significant at the 0.05 level between those aged 55-64 and those 45-54/65+.



Note:
"Town of Hempstead" excludes Freeport, Roosevelt, Hempstead Village, Uniondale, and Inwood, which were analyzed separately. "Town of North Hempstead" excludes Westbury/New Cassel, which was analyzed separately.

Eye Exam

Retinopathy, cataracts, and blindness are common visual consequences of uncontrolled diabetes. Early recognition and management of problems can prevent or delay adverse outcomes. All individuals with diabetes are recommended to receive an annual dilated eye examination to identify these high risk conditions.[47]

General Findings

Overall, 85.1% of diabetic Nassau County residents reported having had a dilated eye examination within the past year.

- Men were more likely to report having had at least one eye examination in the past year than women. However, the difference was not statistically significant.
- Those ages 55-64 were significantly more likely to report having at least one eye exam in the past year than those ages 45-54.
- Race/ethnicity and education were not significantly related to having had a dilated eye examination in the past year.
- Significant differences in eye exam testing could not be detected for income or insurance status, due to the low sample sizes.
- The highest percentage of diabetics who reported having had a dilated eye examination in the past year was in Westbury/New Cassel, while the lowest was in the Town of North Hempstead[48]. However, there were no statistically significant differences between Nassau County jurisdictions.
- National and New York State estimates were not available for comparison.

[47] Standards of Medical Care in Diabetes 2007, Diabetes Care, Volume 30, Supplement 1, January 2007.
[48] Excludes Westbury/New Cassel, which was analyzed separately.

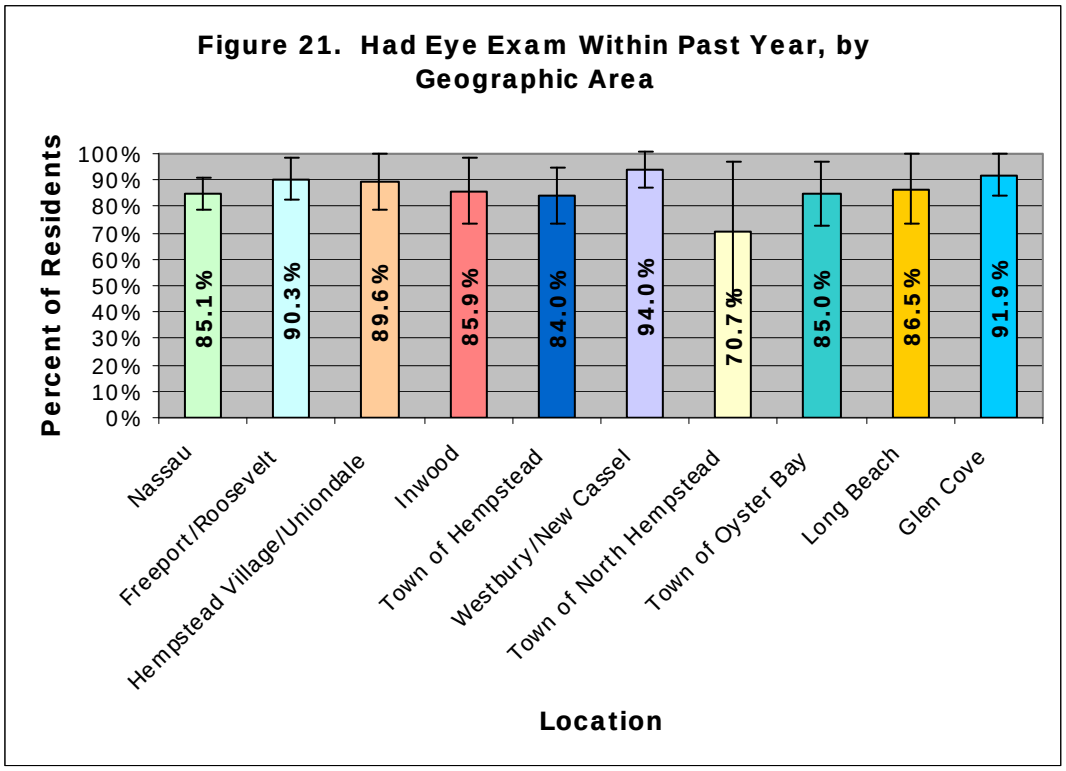
Table 24: Timing of Eye Examination by Selected Demographic Characteristics

Respondents with diabetes were asked how long it has been since their last eye exam where the pupils were dilated.

	n	Never	Within past year	More than 1 year
Total	438	1.5%* (+/- 2.0%)	85.1% (+/- 6.0%)	13.4% (+/- 5.6%)
Gender				
Male	192	2.7%* (+/- 3.8%)	89.4% (+/- 7.8%)	7.9%* (+/- 6.4%)
Female	246	0.3%* (+/- 0.3%)	80.5% (+/- 9.1%)	19.3%* (+/- 9.1%)
Age				
25-34	7	0.0%* (+/- 0.0%)	27.5%* (+/- 31.5%)	72.5%*[c] (+/- 31.5%)
35-44	18	2.0%* (+/- 3.1%)	35.9%*[a,b] (+/- 33.7%)	62.1%*[c] (+/- 34.5%)
45-54	61	7.4%* (+/- 10.6%)	67.0%*[a] (+/- 20.2%)	25.6%*[d] (+/- 18.9%)
55-64	122	0.0%* (+/- 0.0%)	96.7%[a] (+/- 2.4%)	3.3%*[c,d] (+/- 2.4%)
65+	223	0.4%* (+/- 0.5%)	89.2%[b] (+/- 5.9%)	10.4%*[c] (+/- 5.9%)
Race/Ethnicity				
White, Non-Hispanic	296	0.1%* (+/- 0.1%)	86.3% (+/- 6.8%)	13.7%* (+/- 6.8%)
Black, Non-Hispanic	61	1.4%* (+/- 2.0%)	94.0% (+/- 5.0%)	4.7%* (+/- 4.2%)
Hispanic/Latino of Any Race	43	0.7%* (+/- 1.1%)	90.0%* (+/- 10.3%)	9.3%* (+/- 9.8%)
Other	26	14.2%* (+/- 19.6%)	60.7%* (+/- 30.4%)	25.1%* (+/- 26.6%)
Education				
Less than High School	49	0.9%* (+/- 1.3%)	81.2%* (+/- 21.6%)	17.9%* (+/- 21.2%)
High School Graduate	140	0.5%* (+/- 0.6%)	87.4% (+/- 7.4%)	12.1%* (+/- 7.3%)
Some College	102	0.0%* (+/- 0.0%)	84.5% (+/- 13.5%)	15.5%* (+/- 13.5%)
College Graduate	145	3.9%* (+/- 5.7%)	84.5% (+/- 10.2%)	11.6%* (+/- 7.7%)

	n	Never	Within past year	More than 1 year
Household Income				
Less than $15,000	**46**	**0.0%*** (+/- 0.0%)	**76.2%*** (+/- 18.7%)	**23.8%*** (+/- 18.7%)
$15,000-$24,999	**54**	**0.0%*** (+/- 0.0%)	**75.2%*** (+/- 25.3%)	**24.8%*** (+/- 25.3%)
$25,000-$34,999	**45**	**0.0%*** (+/- 0.0%)	**87.1%*** (+/- 17.6%)	**12.9%*** (+/- 17.6%)
$35,000-$49,999	**48**	**0.4%*** (+/- 0.6%)	**88.8%*** (+/- 11.3%)	**10.8%*** (+/- 11.1%)
$50,000-$74,999	**45**	**10.1%*** (+/- 13.6%)	**74.8%*** (+/- 20.2%)	**15.0%*** (+/- 13.9%)
$75,000+	**105**	**0.0%*** (+/- 0.0%)	**86.7%** (+/- 10.5%)	**13.3%*** (+/- 10.5%)
Health Insurance Status				
Insured	**376**	**1.7%*** (+/- 2.4%)	**85.5%**[a] (+/- 6.4%)	**12.8%***[c] (+/- 5.8%)
Uninsured	**14**	**2.5%*** (+/- 3.9%)	**38.1%***[a] (+/- 37.1%)	**59.4%***[c] (+/- 38.6%)

* This percentage is based on fewer than 50 respondents and should be interpreted with extreme caution
[a] Results were significant at the 0.05 level between those ages 55-64 and those ages 45-54/55-64 and between the insured and uninsured.
[b] Results were significant at the 0.05 level between those aged 65 and over and 35-44.
[c] Results were significant at the 0.05 level between those 55 and over and those ages 25-44 and between the insured and uninsured.
[d] Results were significant at the 0.05 level between those ages 55-64 and those ages 45-54.



Note:
"Town of Hempstead" excludes Freeport, Roosevelt, Hempstead Village, Uniondale, and Inwood, which were analyzed separately. "Town of North Hempstead" excludes Westbury/New Cassel, which was analyzed separately.

Asthma

Asthma is a disease of the lungs characterized by repeated episodes of wheezing, breathlessness, chest tightness, and nighttime or early morning coughing. The symptoms are generally intermittent and can often be controlled with medical management plans and by avoiding contact with specific environmental triggers including tobacco smoke, dust mites, outdoor air pollution, pet dander and molds.[49]

Although much progress has been made in our understanding of asthma over the past decade, asthma remains among the most prevalent conditions causing limitation of activity and utilization of health care services.[50] In 2005, 8.0% of adults nationally and 9.3% in New York State reported having a current diagnosis of asthma.

General Findings

Overall, 5.7% of Nassau County residents reported currently having asthma.

- Women were more likely to report currently having asthma than men. However, the difference was not statistically significant.
- Adults 55-64 years had the highest percentage of individuals who reported currently having asthma, while those over 65 had the lowest. However, the difference was not statistically significant.
- Blacks were at least twice as likely as all other race/ethnicity groups to report currently having asthma. However, these differences were not statistically significant.
- Education, household income and health insurance status were not significantly related to currently having asthma.
- Inwood has the highest percentage of current asthma, while Glen Cove, Hempstead Village/Uniondale and the Town of Oyster Bay had the lowest. However, there were no statistically significant differences between Nassau County jurisdictions.
- Westbury/New Cassel, the Town of Oyster Bay, Hempstead Village/Uniondale and Glen Cove were significantly less likely to currently have asthma than New York State.
- Nassau County's percentage of current asthma was significantly lower than that of New York State and national estimates.

[49] Centers for Disease Control and Prevention, Environmental Hazards and Health Effects, Asthma. Available at http://www.cdc.gov/asthma Accessed February 13, 2007

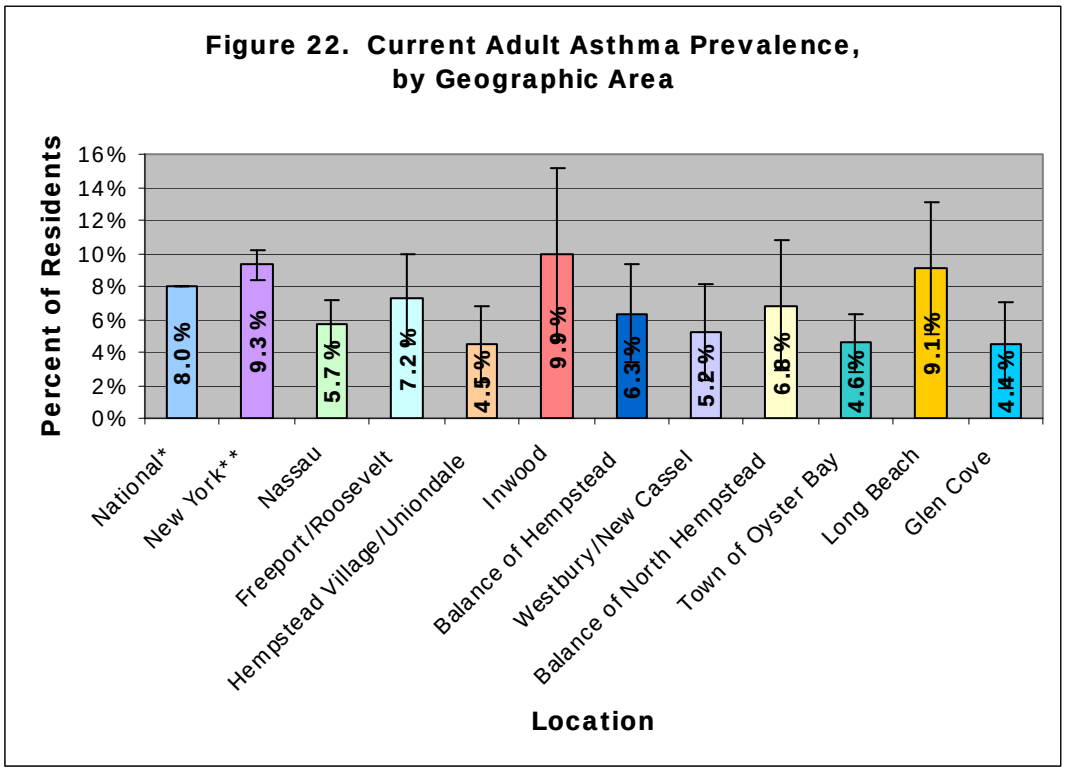
[50] Ford E.S., Mannino D.M., Homa D.M., Gwynn, C, Redd S.C., Moriarty, D.G., Mokdad, A. Self-Reported Asthma and Health-Related Quality of Life: Findings From the Behavioral Risk Factor Surveillance System Chest 2003;123; (1) 119-127

Table 25: Current Adult Asthma Prevalence by Selected Demographic Characteristics
"Have you ever been told by a doctor or other health professional that you had asthma?" and "Do you still have asthma?"

	n	Current	Former	Never
Total	5213	5.7% (+/- 1.4%)	4.2% (+/- 1.0%)	90.1% (+/- 1.7%)
Gender				
Male	1945	4.4% (+/- 1.7%)	4.5% (+/- 1.8%)	91.0% (+/- 2.4%)
Female	3268	6.9% (+/- 2.2%)	3.9% (+/- 1.1%)	89.2% (+/- 2.3%)
Age				
18-24	157	6.4% (+/- 8.1%)*	5.1% (+/- 3.6%)*	88.5% (+/- 10.1%)
25-34	448	7.6% (+/- 4.9%)*	3.0% (+/- 1.9%)*	89.4% (+/- 5.1%)
35-44	986	5.4% (+/- 1.7%)	5.4% (+/- 3.2%)*	89.2% (+/- 3.5%)
45-54	1167	4.9% (+/- 1.7%)	4.1% (+/- 2.0%)*	91.0% (+/- 2.6%)
55-64	903	8.2% (+/- 3.2%)	4.5% (+/- 2.4%)*	87.3% (+/- 3.9%)
65+	1416	3.9% (+/- 1.2%)	3.1% (+/- 1.4%)*	92.9% (+/- 1.9%)
Race/Ethnicity				
White, Non-Hispanic	3825	5.1% (+/- 1.1%)	3.7% (+/- 1.0%)	91.2% (+/- 1.5%)
Black, Non-Hispanic	537	12.0% (+/- 10.0%)	7.7% (+/- 5.6%)*	80.3%[a] (+/- 10.4%)
Hispanic/Latino of Any Race	517	3.5% (+/- 2.0%)*	2.6% (+/- 1.8%)*	93.9%[a] (+/- 2.7%)
Other	219	6.3% (+/- 6.4%)*	5.6% (+/- 4.7%)*	88.1% (+/- 8.0%)
Education				
Less than High School	378	2.4% (+/- 1.4%)*	6.6% (+/- 4.1%)*	91.0% (+/- 4.3%)
High School Graduate	1237	5.6% (+/- 2.1%)	5.2% (+/- 2.8%)*	89.2% (+/- 3.4%)
Some College	1219	5.5% (+/- 1.9%)	4.0% (+/- 1.7%)	90.5% (+/- 2.5%)
College Graduate	2339	6.5% (+/- 2.8%)	3.3% (+/- 1.2%)	90.3% (+/- 3.0%)
Household Income				
Less than $15,000	259	3.2% (+/- 2.2%)*	1.3% (+/- 1.8%)*	95.4% (+/- 3.1%)
$15,000-$24,999	436	7.2% (+/- 3.4%)*	4.6% (+/- 3.1%)*	88.2% (+/- 4.6%)
$25,000-$34,999	367	4.7% (+/- 5.1%)*	1.5% (+/- 1.4%)*	93.7% (+/- 5.6%)
$35,000-$49,999	501	9.5% (+/- 10.5%)*	3.3% (+/- 2.2%)*	87.2% (+/- 11.3%)
$50,000-$74,999	687	5.4% (+/- 2.5%)*	5.9% (+/- 4.1%)*	88.7% (+/- 4.7%)
$75,000+	1919	5.3% (+/- 1.6%)	4.5% (+/- 1.7%)	90.1% (+/- 2.3%)

	n	Current	Former	Never
Health Insurance Status				
Insured	**4410**	**5.8%** (+/- 1.6%)	**4.5%** (+/- 1.2%)	**89.7%** (+/- 1.9%)
Uninsured	**160**	**4.6%** (+/- 4.6%)*	**2.3%** (+/- 2.5%)*	**93.2%** (+/- 5.3%)

*This percentage is based on fewer than 50 respondents and should be interpreted with extreme caution.
a Results were significant at the 0.05 level between Blacks and Hispanics.



Note:
"Town of Hempstead" excludes Freeport, Roosevelt, Hempstead Village, Uniondale, and Inwood, which were analyzed separately. "Town of North Hempstead" excludes Westbury/New Cassel, which was analyzed separately.

*2005 United States (states and DC) BRFSS. Available at http://www.cdc.gov/brfss Accessed September 5, 2006.
**2005 New York State BRFSS. Available at http://www.cdc.gov/brfss Accessed September 5, 2006.

Depression

Depression is a serious medical condition resulting in real and invasive feelings of sadness and hopelessness as well as physical symptoms. While many people may experience feelings of being "down in the dumps" or "blue" every so often, people with depressive illnesses experience symptoms for weeks at a time.[51] Depression is the leading cause of disability in the United States, and nearly one in ten adults is affected by depressive disorders in a given year.[52] In addition to significant economic costs, depressive illnesses interfere with normal functioning and cause pain and suffering not only to those who have a disorder, but also to those who care about them.[53]

General Findings

Overall, 27.7% of Nassau County residents reported either high (7.9%) or moderate (19.8%) frequencies of symptoms of depression, placing them at considerable risk of having an existing depressive illness.

- Women were more likely to report both high and moderate frequencies of depressive symptoms than men. However, these differences were not statistically significant.
- Those between 45-54 years were significantly more likely to report a high frequency of symptoms than those 55-64 years. Residents 18-24 years were significantly more likely to report a moderate frequency of symptoms than those 45-54 years and were significantly less likely than those between 45-64 years to report low frequencies of depressive symptoms.
- Whites were significantly more likely to report high frequencies of depressive symptoms than those of Other race.
- Residents with higher education levels were more likely not to have high frequencies of depressive symptoms compared to lower levels of education.
- Residents with incomes less than $15,000 were significantly more likely to report high frequencies of depressive symptoms than those making more than $75,000 and those making $25,000-$34,999. Similarly, those with incomes less than $15,000 were significantly less likely than those with incomes above $75,000 to report low frequencies of symptoms.
- Health insurance status was not significantly related to the frequency of depressive symptoms.
- The highest percentage of residents reporting high or moderate frequencies of depressive symptoms was seen in Freeport/Roosevelt, while the lowest frequency was seen in Inwood. This was the only statistically significant difference between Nassau County jurisdictions.
- National and New York State estimates were not available for comparison.

[51] National Institute of Mental Health, National Institutes of Health, Available at http://www.nimh.nih.gov/healthinformation/depressionmenu.cfm Accessed February 13, 2007

[52] National Institute of Mental Health, National Institutes of Health, Available at http://www.nimh.nih.gov/publicat/invisible.cfm Accessed June 22, 2006

[53] National Institute of Mental Health, National Institutes of Health, Available at http://www.nimh.nih.gov/publicat/depression.cfm#intro Accessed February 13, 2007.

Table 26: Frequency of Depressive Symptoms by Selected Demographics

	n	Low Frequency of Depressive Symptoms	Medium Frequency of Depressive Symptoms	High Frequency of Depressive Symptoms
Total	4478	72.4% (+/- 2.9%)	19.8% (+/- 2.7%)	7.9% (+/- 1.5%)
Gender				
Male	1670	75.3% (+/- 4.3%)	18.6% (+/- 4.1%)	6.0% (+/- 1.9%)
Female	2808	69.7% (+/- 3.8%)	20.8% (+/- 3.7%)	9.5% (+/- 2.2%)
Age				
18-24	133	54.6%[a] (+/- 16.7%)	35.4%[b] (+/- 17.6%)	10.0% (+/- 8.3%)
25-34	371	71.9% (+/- 8.3%)	20.5% (+/- 7.5%)	7.5% (+/- 4.9%)
35-44	838	71.3% (+/- 5.2%)	19.1% (+/- 4.5%)	9.6% (+/- 3.2%)
45-54	1022	76.2%[a] (+/- 4.1%)	14.0%[b] (+/- 3.0%)	9.8%[c] (+/- 3.0%)
55-64	800	80.7%[a] (+/- 4.7%)	15.0% (+/- 4.3%)	4.3%[c] (+/- 2.1%)
65+	1212	72.7% (+/- 4.8%)	21.3% (+/- 4.6%)	5.9% (+/- 2.2%)
Race / Ethnicity				
White, Non-Hispanic	3350	73.2% (+/- 2.9%)	18.5% (+/- 2.5%)	8.3%[c] (+/- 1.8%)
Black, Non-Hispanic	445	66.9% (+/- 7.4%)	26.1% (+/- 7.3%)	7.1% (+/- 2.9%)
Hispanic/Latino of Any Race	415	74.5% (+/- 8.2%)	15.8% (+/- 6.9%)	9.7% (+/- 5.5%)
Other	178	69.6% (+/- 22.6%)	27.0% (+/- 23.4%)	3.4%[c] (+/- 2.5%)
Education				
Less than High School	297	65.6% (+/- 9.5%)	19.9% (+/- 7.9%)	14.6% (+/- 7.7%)
High School Graduate	1051	73.5% (+/- 4.6%)	18.7% (+/- 4.1%)	7.9% (+/- 2.6%)
Some College	1056	67.6% (+/- 7.3%)	23.4% (+/- 7.6%)	9.0% (+/- 3.0%)
College Graduate	2047	75.9% (+/- 3.6%)	18.2% (+/- 3.2%)	6.0% (+/- 2.2%)

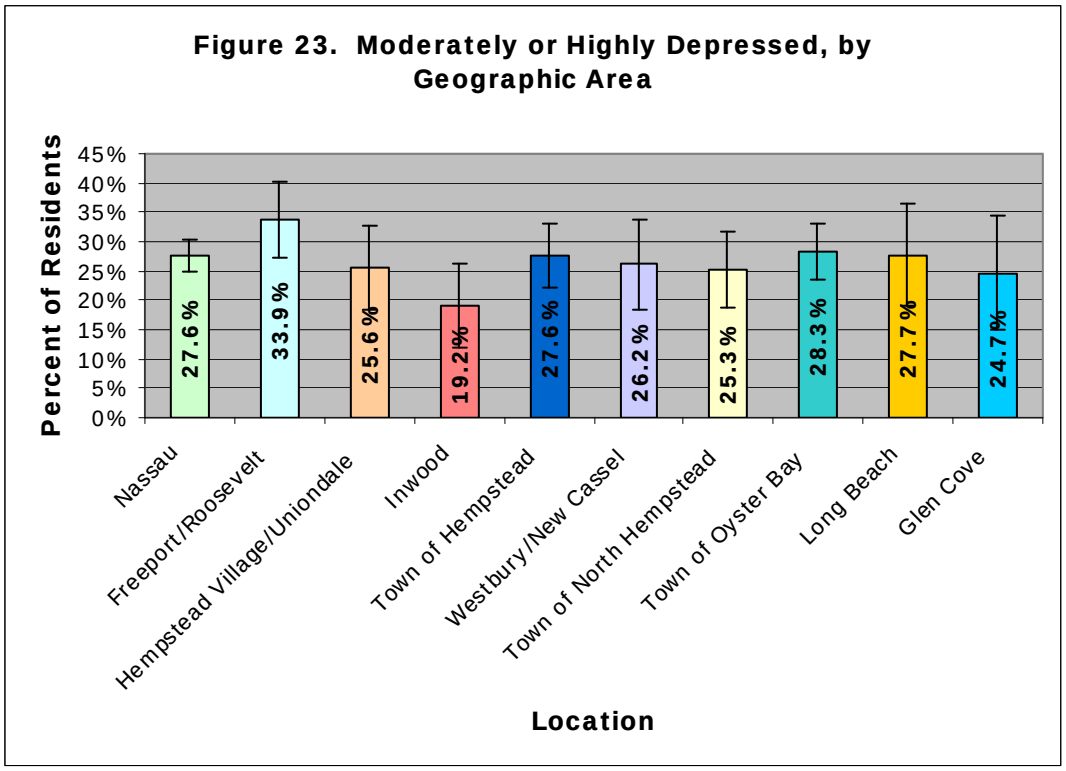
	n	Low Frequency of Depressive Symptoms	Medium Frequency of Depressive Symptoms	High Frequency of Depressive Symptoms
Household Income				
Less than $15,000	**211**	**57.1%**[a] (+/- 11.1%)	**21.2%** (+/- 7.6%)	**21.8%**[c] (+/- 11.0%)
$15,000-$24,999	**368**	**67.9%** (+/- 8.3%)	**20.5%** (+/- 7.3%)	**11.6%** (+/- 5.1%)
$25,000-$34,999	**313**	**63.3%** (+/- 16.6%)	**31.0%** (+/- 17.5%)	**5.7%**[c] (+/- 4.0%)
$35,000-$49,999	**431**	**72.8%** (+/- 7.8%)	**15.0%** (+/- 5.2%)	**12.2%** (+/- 6.6%)
$50,000-$74,999	**603**	**72.9%** (+/- 6.5%)	**17.9%** (+/- 5.5%)	**9.2%** (+/- 4.0%)
$75,000+	**1720**	**75.3%**[a] (+/- 4.5%)	**19.2%** (+/- 4.5%)	**5.5%**[c] (+/- 1.7%)
Health Insurance Status				
Insured	**4254**	**72.4%** (+/- 3.0%)	**20.0%** (+/- 2.9%)	**7.6%** (+/- 1.5%)
Uninsured	**151**	**70.9%** (+/- 10.8%)	**14.5%** (+/- 7.2%)	**14.6%** (+/- 9.3%)

Note: Depression scores based on Modified CES scale

[a] Results were significant at the 0.05 level between those 18-24 years and those 45-64 years; and between those making less than $15,000 and more than $75,000.

[b] Results were significant at the 0.05 level between those 18-24 years and those 45-54 years of age.

[c] Results were significant at the 0.05 level between those 45-54 years and those 55-64 years; between Whites and Other race; and between those making less than $15,000 and those making $25,000-$34,999/more than $75,000.



Note:
"Town of Hempstead" excludes Freeport, Roosevelt, Hempstead Village, Uniondale, and Inwood, which were analyzed separately. "Town of North Hempstead" excludes Westbury/New Cassel, which was analyzed separately.

Chapter 6: Cancer Screening

Breast Cancer: Mammography

Breast cancer is the most common non-skin malignancy among women in the US and is second only to lung cancer as a cause of cancer-related death. It is estimated that, in 2007, over 178,000 new cases of breast cancer will be diagnosed in women and over 40,000 women will die of the disease. With the use of mammography, breast cancer can be detected in early stages when treatment is most likely to be effective.[54]

The risk for developing breast cancer increases with age beginning in the fourth decade of life. According to the United States Preventive Services Task Force (USPSTF), women 40 years and older should have a screening mammogram every one to two years.[55] Approximately three-quarters of women 40 years and older nationally (74.9%) and in New York State (75.5%) have received a mammogram in the past two years.[56]

General Findings

The majority of Nassau County female residents age 40 and older (82.8%) have had a mammogram in the past two years. Another 10.2% of women have had a mammogram, but not within the last two years. Finally, 7.0% reported never having had a mammogram.

- Women ages 40-44 were more likely to report never having had a mammogram than women in all other age groups. However, this result was not statistically significant.
- Race/ethnicity was not significantly related to having had a mammogram.
- As educational attainment increased, the percentage of women who reported having had a mammogram within the last two years increased. Similarly, the percentage of women who reported never having had a mammogram decreased. However, these relationships were not statistically significant.
- Women with household incomes greater than $75,000 were significantly more likely than those with incomes less than $25,000 and between $35,000 and $49,999 to report having had a mammogram within the last two years.
- Significant differences for mammography could not be detected for insurance status due to the low sample sizes.
- The highest percentage of women age 40 and older reporting having had a mammogram in the past two years was seen in Long Beach while the lowest percentage was seen in Hempstead Village/Uniondale. However, there were no statistically significant differences between Nassau County jurisdictions.
- All areas – except Hempstead Village/Uniondale – as well as the county as a whole exceeded national and New York State estimates of mammography in the past two years. The county's overall percentage was significantly higher than both the nation and New York State.

[54] American Cancer Society. Cancer Facts & Figures 2007. Atlanta: American Cancer Society; 2007.
[55] U.S. Preventive Services Task Force. Screening for Breast Cancer. Available at http://www.ahrq.gov/clinic/uspstf/uspsbrca.htm. Accessed February 14, 2007.
[56] 2004 United States (states and DC) BRFSS and 2004 New York State BRFSS. Available at http://www.cdc.gov/brfss Accessed September 5, 2006.

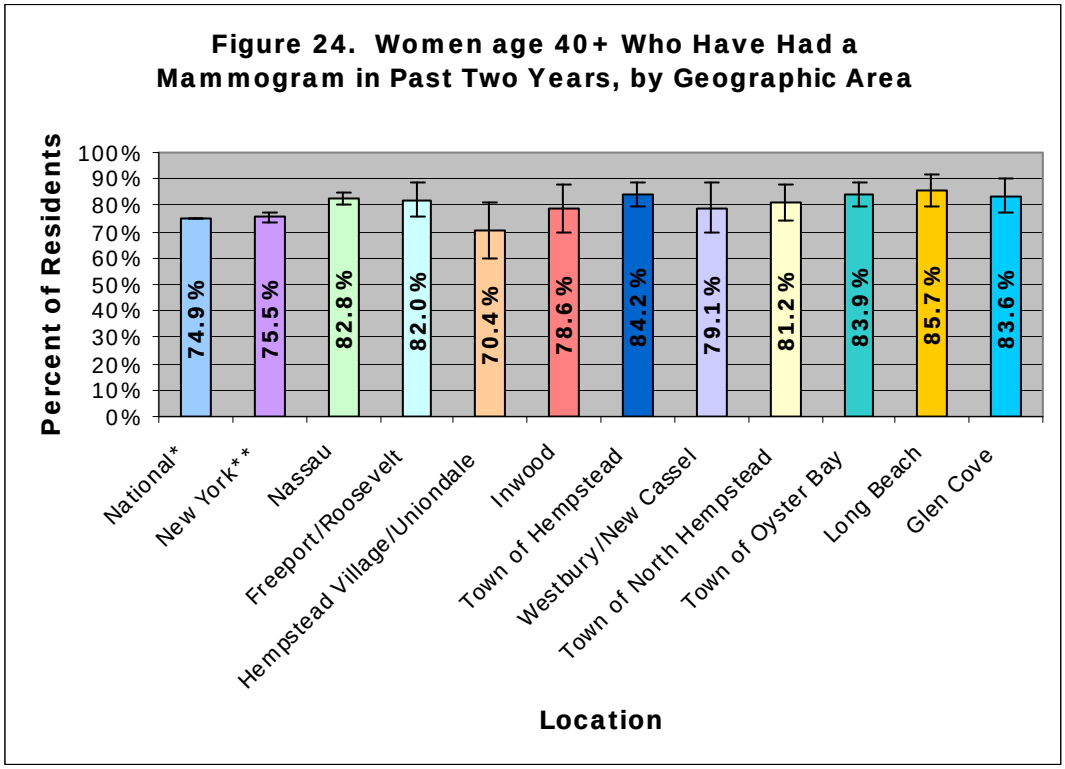
Table 27: Time Since Last Mammogram by Selected Demographic Characteristics

"Have you ever had a mammogram?" and "How long has it been since your last mammogram?"
Both questions were asked of women age 40 and older only.

	n	Past 2 years	Two or more years	Never
Total	**2344**	**82.8%** (+/- 2.4%)	**10.2%** (+/- 1.8%)	**7.0%** (+/- 1.7%)
Gender				
Female	**2344**	**82.8%** (+/- 2.4%)	**10.2%** (+/- 1.8%)	**7.0%** (+/- 1.7%)
Age				
40-44	**340**	**78.4%** (+/- 6.7%)	**8.5%** (+/- 4.9%)*	**13.0%** (+/- 5.1%)*
45-54	**674**	**86.6%** (+/- 4.1%)	**8.4%** (+/- 3.0%)	**5.0%** (+/- 3.0%)*
55-64	**519**	**86.2%** (+/- 4.6%)	**8.6%** (+/- 3.5%)*	**5.1%** (+/- 3.1%)*
65+	**811**	**79.2%** (+/- 4.3%)	**13.7%** (+/- 3.5%)	**7.1%** (+/- 2.7%)
Race/Ethnicity				
White, Non-Hispanic	**1853**	**83.2%** (+/- 2.6%)	**10.5%** (+/- 2.1%)	**6.3%** (+/- 1.6%)
Black, Non-Hispanic	**229**	**82.2%** (+/- 6.5%)	**7.7%** (+/- 4.1%)*	**10.1%** (+/- 5.4%)*
Hispanic/Latino of Any Race	**158**	**85.8%** (+/- 7.0%)	**8.8%*** (+/- 5.4%)	**5.4%** (+/- 4.1%)*
Other	**68**	**66.7%** (+/- 22.3%)*	**12.9%** (+/- 10.7%)*	**20.4%** (+/- 21.8%)*
Education				
Less than High School	**142**	**73.9%** (+/- 10.4%)	**12.5%** (+/- 6.9%)*	**13.5%** (+/- 8.7%)*
High School Graduate	**667**	**79.7%** (+/- 4.8%)	**11.4%** (+/- 3.5%)	**8.9%** (+/- 3.6%)
Some College	**555**	**83.3%** (+/- 4.8%)	**9.9%** (+/- 4.0%)	**6.8%** (+/- 2.9%)*
College Graduate	**971**	**86.4%** (+/- 3.3%)	**9.1%** (+/- 2.6%)	**4.5%** (+/- 2.2%)*
Household Income				
Less than $15,000	**123**	**68.5%**[a] (+/- 12.2%)	**18.6%** (+/- 10.0%)*	**12.9%** (+/- 9.2%)*
$15,000-$24,999	**208**	**75.0%**[a] (+/- 8.1%)	**14.2%** (+/- 6.6%)*	**10.9%** (+/- 5.5%)*
$25,000-$34,999	**174**	**76.9%** (+/- 9.7%)	**13.5%** (+/- 8.3%)*	**9.6%** (+/- 5.8%)*
$35,000-$49,999	**228**	**71.1%**[a] (+/- 9.5%)	**15.4%** (+/- 7.6%)*	**13.5%** (+/- 7.4%)*
$50,000-$74,999	**310**	**83.3%** (+/- 7.4%)	**8.9%** (+/- 4.5%)*	**7.8%** (+/- 6.4%)*
$75,000+	**780**	**87.9%**[a] (+/- 3.6%)	**7.8%** (+/- 2.9%)	**4.3%** (+/- 2.2%)*
Health Insurance Status				
Insured	**2195**	**84.5%**[a] (+/- 2.3%)	**9.3%**[b] (+/- 1.7%)*	**6.2%** (+/- 1.6%)
Uninsured	**47**	**50.0%**[a] (+/- 24.8%)*	**38.6%**[b] (+/- 27.3%)*	**11.4%** (+/- 9.6%)*

* This percentage is based on fewer than 50 respondents and should be interpreted with extreme caution.

[a] Results were significant at the 0.05 level between those making more than $75,000 and those making less than $25,000/$35,000-49,999 and between those insured and those uninsured.
[b] Results were significant at the 0.05 level between those insured and those uninsured.



Note:
"Town of Hempstead" excludes Freeport, Roosevelt, Hempstead Village, Uniondale, and Inwood, which were analyzed separately. "Town of North Hempstead" excludes Westbury/New Cassel, which was analyzed separately.

*2004 United States (states and DC) BRFSS. Available at http://www.cdc.gov/brfss Accessed September 5, 2006.
**2004 New York State BRFSS. Available at http://www.cdc.gov/brfss Accessed September 5, 2006.

Cervical Cancer: Pap Test

During the past four decades, the incidence and mortality from cervical cancer have declined significantly, primarily because of the widespread use of the Papanicolaou (Pap) test. Despite these advances, more than 11,000 women will be diagnosed with, and nearly 3700 will die from, cervical cancer in 2007.[57]

Cervical cancer is preventable and curable if it is detected early. The United States Preventive Services Task Force (USPSTF) currently recommends cervical cancer screening at least every 3 years, within 3 years of onset of sexual activity or at age 21, whichever comes first.[58] According to the CDC, 86.0% of American women and 85.4% of women in New York State have received a Pap smear in the past three years.[59]

General Findings

The majority of Nassau County female residents (83%) reported having had a Pap test in the past three years. However, nearly one in ten women (9.5%) reported never having had a Pap test.

- Women in the youngest (18-24) and oldest (65+) age groups were significantly less likely to report having had a Pap test in the last 3 years compared to all other age groups.
- Women ages 18-24 were significantly more likely to report never having had a Pap test than those ages 25-34 and those ages 55 and older. Women age 65 and older were significantly more likely to report never having had a Pap test compared to women ages 55-64.
- Whites and Hispanics were more likely to report having had a Pap test in the past three years than Blacks and those of Other race. However, these differences were not statistically significant.
- Women of Other races were at least twice as likely to report never having had a Pap test compared to all other races. This was significant when compared to White women.
- College graduates were significantly more likely to report having had a Pap test in the last three years than high school graduates.
- Women with annual household incomes above $75,000 were significantly more likely than those with incomes below $35,000 to report having had a Pap test in the past three years.
- Women with annual household incomes above $75,000 were significantly less likely than those with incomes $15,000-$24,999 to report never having had a Pap test.
- Health insurance status was not significantly related to having had a Pap test.
- The highest percentage of women who reported having had a Pap test in the past three years was seen in Glen Cove (92.1%), while the lowest percentage was seen in the Town of Hempstead.[60] However, there were no statistically significant differences between Nassau County jurisdictions.
- Although not significant, Nassau County women had a lower percentage of getting Pap tests in the past three years than national and New York State estimates.

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[57] American Cancer Society. Cancer Facts & Figures 2007. Atlanta: American Cancer Society; 2007.
[58] U.S. Preventive Services Task Force. Screening for Cervical Cancer. Available at http://www.ahrq.gov/clinic/uspstf/uspscerv.htm. Accessed February 13, 2007.
[59] 2004 United States (states and DC) BRFSS and 2004 New York State BRFSS. Available at http://www.cdc.gov/brfss Accessed September 5, 2006.
[60] Excludes Freeport, Roosevelt, Hempstead Village, Uniondale, and Inwood, which were analyzed separately.

Table 28: Time Since Last Pap Test by Selected Demographic Characteristics

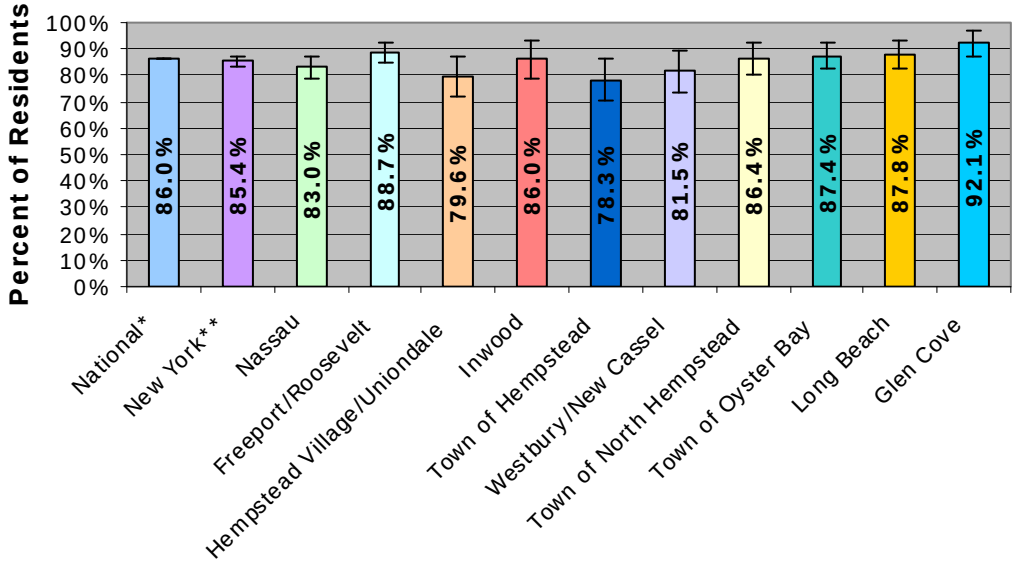
"Have you ever had a Pap smear?" and "How long has it been since your last Pap smear?"
Asked of all female respondents.

	n	Past 3 years	3 or More Years	Never
Total	**3000**	**83.0%** (+/- 3.8%)	**7.6%** (+/- 1.4%)	**9.5%** (+/- 3.8%)
Gender				
Female	**3000**	**83.0%** (+/- 3.8%)	**7.6%** (+/- 1.4%)	**9.5%** (+/- 3.8%)
Age				
18-24	**65**	**45.0%**[a] (+/- 24.2%)*	**0.0%** (+/- 0.0%)*	**55.0%**[d] (+/- 24.2%)*
25-34	**260**	**90.1%**[a] (+/- 7.8%)	**1.0%** (+/- 1.2%)*	**8.9%**[d] (+/- 7.7%)*
35-44	**601**	**96.2%**[a] (+/- 2.5%)	**1.5%**[b,c] (+/- 0.9%)*	**2.3%** (+/- 2.3%)*
45-54	**671**	**95.2%**[a] (+/- 3.1%)	**2.9%**[b] (+/- 1.8%)*	**1.8%** (+/- 2.2%)*
55-64	**514**	**90.3%**[a] (+/- 4.1%)	**7.9%**[b,c] (+/- 3.8%)*	**1.8%**[d,e] (+/- 1.5%)*
65+	**798**	**66.5%**[a] (+/- 5.3%)	**23.7%**[b] (+/- 4.8%)	**9.9%**[d,e] (+/- 3.2%)
Race/Ethnicity				
White, Non-Hispanic	**2203**	**85.9%** (+/- 2.6%)	**8.8%**[b] (+/- 1.8%)	**5.3%**[d] (+/- 2.0%)
Black, Non-Hispanic	**326**	**74.7%** (+/- 17.6%)	**5.1%** (+/- 3.6%)*	**20.2%** (+/- 18.4%)*
Hispanic/Latino of Any Race	**299**	**85.1%** (+/- 9.8%)	**3.9%**[b] (+/- 2.7%)*	**11.1%** (+/- 9.7%)*
Other	**111**	**56.1%** (+/- 30.2%)	**3.3%** (+/- 3.5%)*	**40.6%**[d] (+/- 31.6%)*
Education				
Less than High School	**204**	**72.8%** (+/- 12.9%)	**7.0%** (+/- 5.0%)*	**20.2%** (+/- 13.0%)*
High School Graduate	**763**	**78.5%**[a] (+/- 4.7%)	**13.9%**[b] (+/- 3.8%)	**7.6%** (+/- 3.2%)
Some College	**706**	**77.6%** (+/- 10.7%)	**6.4%**[b] (+/- 2.4%)	**16.1%** (+/- 11.3%)*
College Graduate	**1310**	**90.0%**[a] (+/- 5.1%)	**4.8%**[b] (+/- 1.8%)	**5.2%** (+/- 5.0%)*
Household Income				
Less than $15,000	**167**	**66.7%**[a] (+/- 10.9%)	**24.0%**[b] (+/- 10.1%)*	**9.3%** (+/- 6.6%)*
$15,000-$24,999	**259**	**71.2%**[a] (+/- 11.4%)	**10.8%** (+/- 5.1%)*	**18.0%**[d] (+/- 11.4%)*
$25,000-$34,999	**216**	**60.6%**[a] (+/- 23.9%)	**12.8%** (+/- 8.5%)*	**26.6%** (+/- 27.2%)*
$35,000-$49,999	**277**	**72.7%** (+/- 20.0%)	**6.9%**[b] (+/- 4.3%)*	**20.3%** (+/- 20.9%)*
$50,000-$74,999	**396**	**84.9%** (+/- 8.4%)	**6.1%**[b] (+/- 4.1%)*	**9.0%** (+/- 7.8%)*
$75,000+	**1037**	**93.7%**[a] (+/- 2.4%)	**4.1%**[b] (+/- 1.7%)	**2.2%**[d] (+/- 1.7%)*
Health Insurance Status				
Insured	**2762**	**83.3%** (+/- 4.1%)	**7.8%** (+/- 1.5%)	**8.9%** (+/- 4.1%)

	n	Past 3 years	3 or More Years	Never
Uninsured	88	78.3% (+/- 13.6%)	5.9% (+/- 5.1%)*	15.7% (+/- 13.1%)*

* This percentage is based on fewer than 50 respondents and should be interpreted with extreme caution.
[a] Results were significant at the 0.05 level between those 18-24/65+ and those of all other age groups; between college graduates and high school graduates; and between those with household incomes less than $35,000 and those over $75,000.
[b] Results were significant at the 0.05 level between those 65+ and those 35-64; between Hispanics and Whites; between those with some college/college graduates and high school graduates; and between those with household incomes of less than $15,000 and greater than $35,000.
[c] Results were significant at the 0.05 level between those ages 35-44 and 55-64.
[d] Results were significant at the 0.05 level between those ages 18-24 and 25-34/55+; between those of Other race and Whites; and between those with household incomes $75,000+ and $15,000-$24,999.
[e] Results were significant at the 0.05 level between those ages 55-64 and 65+.

Figure 25. Women Who Have Had a PAP Test in Past Three Years, by Geographic Area



Note:
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*2004 United States (states and DC) BRFSS. Available at http://www.cdc.gov/brfss Accessed September 5, 2006.
**2004 New York State BRFSS. Available at http://www.cdc.gov/brfss Accessed September 5, 2006.

Prostate Cancer: PSA and DRE

Prostate cancer is the most commonly diagnosed non-skin cancer in the US and is second only to lung cancer as a cause of cancer-related death in men. In 2007, an estimated 219,000 new cases of prostate cancer will be diagnosed in men, and approximately 27,000 men will die of the disease.[61] Moreover, one in every six U.S. men will develop invasive prostate cancer during their lifetime.[62]

The main screening tools for prostate cancer are the digital rectal examination (DRE) and the prostate-specific antigen (PSA) test. The DRE and PSA test do not diagnose cancer; rather, they suggest the need for further tests. In 2004, 51.8% of American men 40 and older and 53.5% of men 40 and older in New York State have received a PSA test in the past two years.[63]

General Findings: PSA Test

The majority of Nassau County male residents age 40 and older (61.7%) reported having had a PSA test in the past two years. Nearly one-third of men (31.5%) reported never having had a PSA test.

- As age increased, the percentage of men reporting that they have had a PSA test in the past two years increased. Men 55+ years were significantly more likely than those 40-54 to report having had a PSA test in the past two years. Additionally, men age 45-54 were significantly more likely than those age 40-44 to report having had a PSA test in the past two years.
- Men ages 40-54 were significantly more likely to report never having had a PSA test compared to men 55+ years.
- Race/ethnicity was not significantly related to PSA testing in the past two years. However, men of Other race were significantly more likely to report never having had a PSA test than White men.
- Education and annual household income were not significantly related to PSA testing.
- Significant differences for PSA testing could not be detected for insurance status due to the low sample sizes.
- The highest percentage of men reporting having had a PSA test in the past two years was seen in the Town of Oyster Bay, while the lowest percentage was seen in Hempstead Village/Uniondale.[64] However, there were no statistically significant differences between Nassau County jurisdictions.
- The overall percentage of men reporting having had a PSA test in the past two years was significantly higher than national and New York State estimates.

[61] American Cancer Society. Cancer Facts & Figures 2007. Atlanta: American Cancer Society; 2007.
[62] Ries LAG, Harkins D, Krapcho M, Mariotto A. et al (eds). SEER Cancer Statistics Review, 1975-2003, National Cancer Institute, Bethesda, MD, http://seer.cancer.gov/csr/1975_2003/, based on November 2005 SEER data submission posted to the SEER web site, 2006. Accessed February 9, 2005.
[63] 2004 United States (states and DC) BRFSS and 2004 New York State BRFSS. Available at http://www.cdc.gov/brfss Accessed September 5, 2006.
[64] Excludes Freeport, Roosevelt, Hempstead Village, Uniondale, and Inwood, which were analyzed separately.

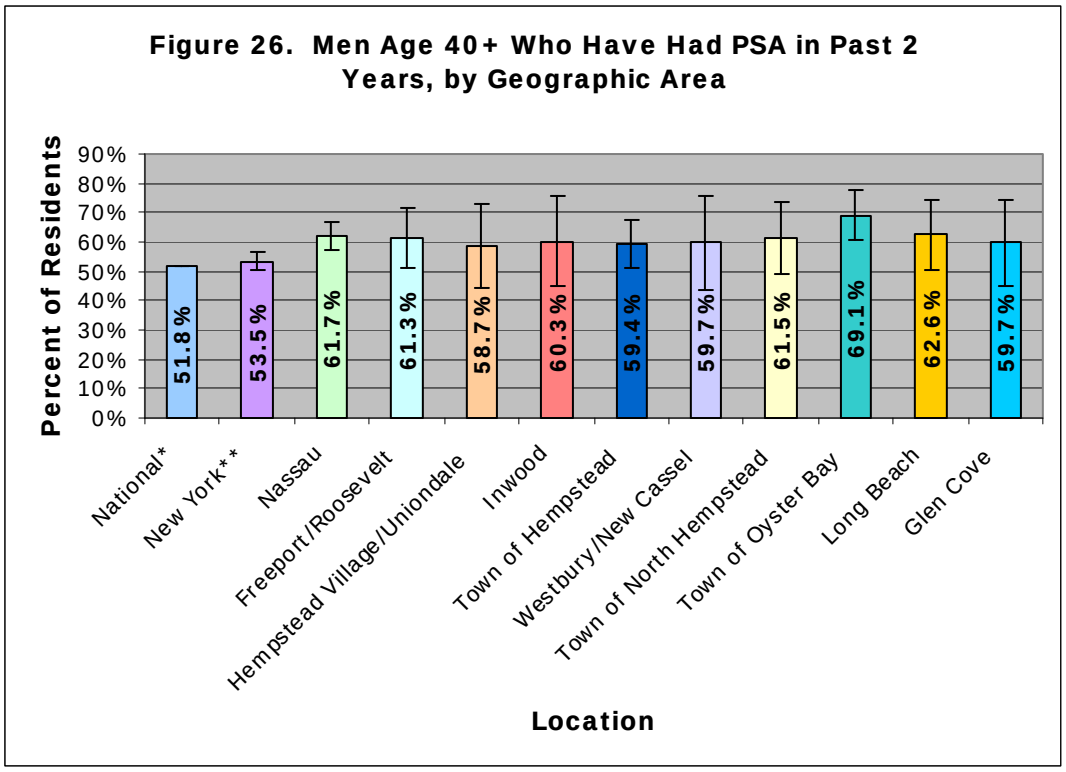
Table 29: Time Since Last PSA Test by Selected Demographic Characteristics

"Have you ever had a PSA test?" and "How long has it been since your last PSA test?"
Both questions were asked of men age 40 and older only.

	n	Past 2 years	2 or More Years	Never
Total	**1408**	**61.7%** (+/- 4.8%)	**6.8%** (+/- 2.5%)	**31.5%** (+/- 4.7%)
Gender				
Male	**1408**	**61.7%** (+/- 4.8%)	**6.8%** (+/- 2.5%)	**31.5%** (+/- 4.7%)
Age				
40-44	**154**	**26.9%**[a,b] (+/- 12.7%)*	**12.3%** (+/- 9.4%)*	**60.8%**[c] (+/- 14.1%)
45-54	**395**	**51.7%**[a,b] (+/- 8.4%)	**5.8%** (+/- 4.7%)*	**42.5%**[c] (+/- 8.4%)
55-64	**325**	**76.9%**[a] (+/- 8.7%)	**5.6%** (+/- 4.2%)*	**17.4%**[c] (+/- 8.2%)*
65+	**512**	**80.3%**[a] (+/- 8.1%)	**6.1%** (+/- 3.4%)*	**13.6%**[c] (+/- 8.0%)
Race/Ethnicity				
White, Non-Hispanic	**1133**	**64.6%** (+/- 5.2%)	**6.7%** (+/- 2.5%)	**28.6%**[c] (+/- 5.2%)
Black, Non-Hispanic	**109**	**49.3%** (+/- 18.8%)	**2.8%** (+/- 3.5%)*	**47.9%** (+/- 19.6%)*
Hispanic/Latino of Any Race	**80**	**58.9%** (+/- 20.1%)*	**8.2%** (+/- 9.5%)*	**32.8%** (+/- 18.5%)*
Other	**52**	**42.6%** (+/- 19.6%)*	**0.0%** (+/- 0.0%)*	**57.4%**[c] (+/- 19.6%)*
Education				
Less than High School	**77**	**52.5%** (+/- 17.4%)*	**11.0%** (+/- 13.4%)*	**36.5%** (+/- 15.2%)*
High School Graduate	**302**	**55.6%** (+/- 11.0%)	**5.9%** (+/- 3.5%)*	**38.5%** (+/- 11.1%)
Some College	**321**	**66.4%** (+/- 10.1%)	**6.4%** (+/- 4.3%)*	**27.1%** (+/- 10.2%)
College Graduate	**698**	**63.1%** (+/- 6.6%)	**7.1%** (+/- 4.3%)*	**29.8%** (+/- 6.2%)
Household Income				
Less than $15,000	**44**	**49.2%** (+/- 21.7%)*	**4.2%** (+/- 5.1%)*	**46.6%** (+/- 21.7%)*
$15,000-$24,999	**105**	**52.5%** (+/- 15.7%)	**20.5%** (+/- 14.5%)*	**27.0%** (+/- 12.3%)*

	n	Past 2 years	2 or More Years	Never
$25,000-$34,999	101	63.6% (+/- 18.1%)	7.9% (+/- 8.4%)*	28.5% (+/- 17.2%)*
$35,000-$49,999	147	71.0% (+/- 11.8%)	7.2% (+/- 8.1%)*	21.8% (+/- 9.6%)*
$50,000-$74,999	195	57.2% (+/- 14.4%)	6.4% (+/- 7.4%)*	36.4% (+/- 14.3%)
$75,000+	604	61.6% (+/- 7.3%)	5.9% (+/- 3.2%)*	32.5% (+/- 7.3%)
Health Insurance Status				
Insured	1290	63.7% (+/- 5.0%)	6.2% (+/- 2.5%)	30.1%[c] (+/- 5.0%)
Uninsured	33	5.8% (+/- 7.4%)*	22.6% (+/- 24.7%)*	71.6%[c] (+/- 26.6%)*

* This percentage is based on fewer than 50 respondents and should be interpreted with extreme caution.
[a] Results were significant at the 0.05 level between men ages 40-54 and those ages 55 and older.
[b] Results were significant at the 0.05 level between men ages 40-44 and those ages 45-54.
[c] Results were significant at the 0.05 level between men ages 40-54 and those ages 55 and older; between Whites and Other race; and between insured and uninsured.



Note:
"Town of Hempstead" excludes Freeport, Roosevelt, Hempstead Village, Uniondale, and Inwood, which were analyzed separately. "Town of North Hempstead" excludes Westbury/New Cassel, which was analyzed separately.

*2004 United States (states and DC) BRFSS. Available at http://www.cdc.gov/brfss Accessed September 5, 2006.
**2004 New York State BRFSS. Available at http://www.cdc.gov/brfss Accessed September 5, 2006.

General Finding: DRE Test

Just over half of Nassau County male residents age 40 and older (55.4%) reported having had a DRE in the past year. One in five men (20%) reported never having had a DRE.

- Men over 65 years were significantly more likely than those 40-54 years old to report having had a DRE in the past year. Additionally, men 55-64 years were significantly more likely to report having had a DRE in the past year than those 40-44 years.
- Men ages 40-44 were significantly more likely to report never having had a DRE compared to men ages 55-64. Additionally, men ages 45-54 were significantly more likely to report never having had a DRE compared to men ages 55 and over.
- Race/ethnicity was not significantly related to DRE testing in the past year. However, men of Other races were significantly more likely to report never having had a DRE compared to White men.
- Education was not significantly related to DRE testing in the past year. However, men with a high school education were significantly more likely to report never having had a DRE compared to men with a college education.
- DRE testing was not significantly related to annual household income level.
- Significant difference for DRE testing could not be detected for health insurance status due to small sample sizes.
- The highest percentage of men reporting having had a DRE in the past year was seen in Westbury/New Cassel (66.0%), while the lowest percentages were seen in Inwood (46.9%) and Hempstead Village/Uniondale (47.0%). However, there were no statistically significant differences between Nassau County jurisdictions.
- National and New York State estimates were not available for comparison.

Table 30: Time Since Last DRE by Selected Demographic Characteristics

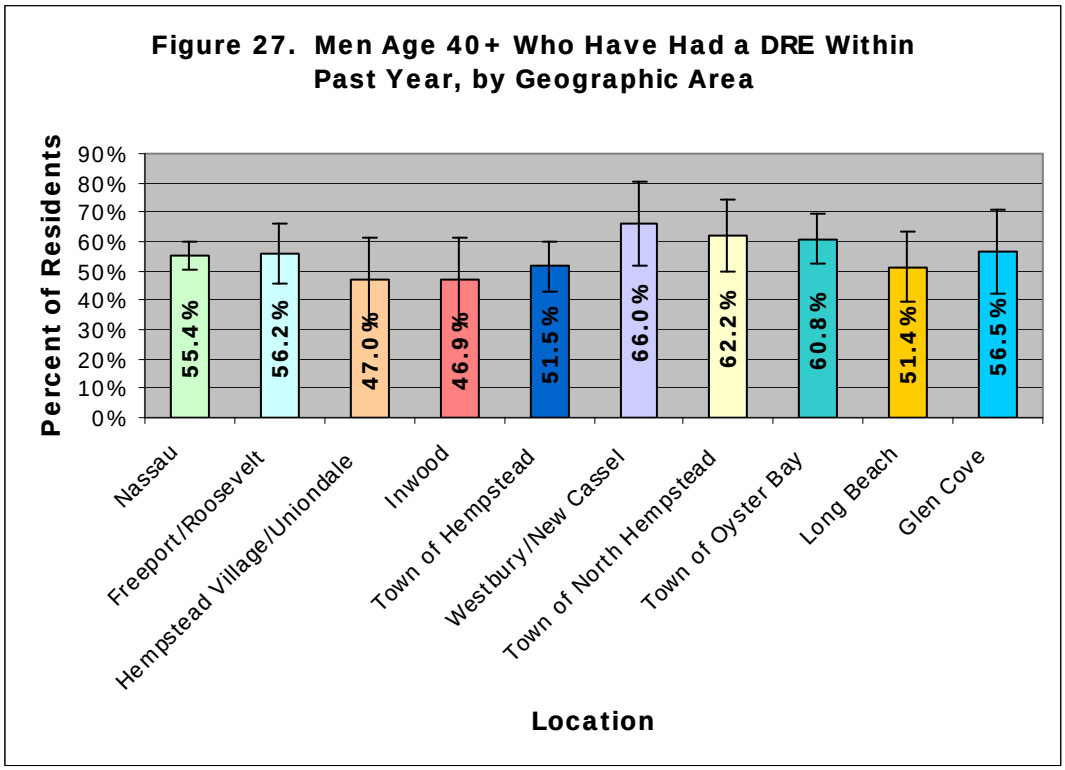
"Have you ever had a digital rectal exam?" and "How long has it been since your last DRE?" Both questions were asked of men age 40 and older.

	n	Past Year	More Than 1 Year	Never
Total	1451	55.4% (+/- 4.8%)	24.5% (+/- 4.2%)	20.0% (+/- 4.3%)
Gender				
Male	1451	55.4% (+/- 4.8%)	24.5% (+/- 4.2%)	20.0% (+/- 4.3%)
Age				
40-44	162	34.1% [a,b] (+/- 13.3%)	35.0% (+/- 12.8%)	30.9% [c] (+/- 13.1%)
45-54	414	50.2% [a] (+/- 8.4%)	21.6% (+/- 7.1%)	28.2% [d] (+/- 8.0%)
55-64	329	64.6% [b] (+/- 9.7%)	25.4% (+/- 9.2%)	10.1% *[c,d] (+/- 6.0%)
65+	524	69.4% [a] (+/- 8.2%)	20.2% (+/- 6.0%)	10.4% [d] (+/- 7.7%)
Race / Ethnicity				
White, Non-Hispanic	1169	59.8% (+/- 5.3%)	23.8% (+/- 4.5%)	16.4% [c] (+/- 4.6%)
Black, Non-Hispanic	110	40.9% * (+/- 16.4%)	31.6% * (+/- 17.2%)	27.5% * (+/- 21.4%)
Hispanic/Latino of Any Race	83	47.1% * (+/- 21.2%)	15.2% * (+/- 12.5%)	37.6% * (+/- 19.6%)
Other	54	35.8% * (+/- 20.1%)	20.8% * (+/- 12.9%)	43.4% *[c] (+/- 19.8%)
Education				
Less than High School	82	50.9% * (+/- 17.1%)	17.4% * (+/- 15.5%)	31.7% * (+/- 14.0%)
High School Graduate	312	51.3% (+/- 10.7%)	18.6% (+/- 7.2%)	30.1% [c] (+/- 10.8%)
Some College	331	58.1% (+/- 10.0%)	22.8% (+/- 7.9%)	19.1% (+/- 10.0%)
College Graduate	715	56.8% (+/- 6.6%)	29.2% (+/- 6.6%)	14.0% [c] (+/- 4.1%)
Household Income				
Less than $15,000	47	51.5% * (+/- 21.2%)	17.0% * (+/- 15.8%)	31.5% * (+/- 20.0%)
$15,000-$24,999	108	43.2% * (+/- 15.3%)	38.8% * (+/- 16.1%)	18.0% * (+/- 10.2%)
$25,000-$34,999	106	62.2% (+/- 17.4%)	22.0% * (+/- 16.4%)	15.9% * (+/- 9.3%)
$35,000-$49,999	154	61.3% (+/- 12.8%)	19.1% * (+/- 10.4%)	19.6% * (+/- 10.7%)
$50,000-$74,999	201	47.6% (+/- 13.6%)	23.4% * (+/- 10.4%)	29.0% (+/- 14.5%)
$75,000+	624	58.6% (+/- 7.2%)	23.2% (+/- 5.8%)	18.2% (+/- 6.5%)
Health Insurance Status				
Insured	1336	56.0% (+/- 5.1%)	24.7% (+/- 4.4%)	19.4% (+/- 4.6%)
Uninsured	35	11.3% * (+/- 11.8%)	42.2% * (+/- 25.7%)	46.5% * (+/- 24.1%)

* This percentage is based on fewer than 50 respondents and should be interpreted with extreme caution.

[a] Results were significant at the 0.05 level between men over age 65 and those 40-54 years of age.

[b] Results were significant at the 0.05 level between men ages 55-64 and those 40-44 years of age.
[c] Results were significant at the 0.05 level between men ages 40-44 and those ages 55-64; between Whites and Other race; and between college graduates and high school graduates.
[d] Results were significant at the 0.05 level between men ages 45-54 and those over age 55.



Note:
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Colorectal Cancer: FOBT, Sigmoidoscopy and Colonoscopy

Colorectal cancer is the third most common non-skin malignancy among both men and women in the US and is the third leading cause of cancer-related death in the US. In 2007 an estimated 153,000 new cases of colorectal cancer will be diagnosed and just over 52,000 persons will die of the disease. The risk of developing colorectal cancer increases with age in both men and women, with more than 90% of cases occurring in individuals ages 50 and older. Colorectal cancer almost always develops from precancerous polyps (abnormal growths). Screening tests can detect these precancerous polyps so that they may be removed and can identify colorectal cancer early, when treatment works best.[65]

Several tests can be used alone or in combination to screen for colorectal cancer, including Fecal Occult Blood Test (FOBT), Flexible Sigmoidoscopy and Colonoscopy. According to the CDC, approximately one quarter of adults (age 50 and older) nationally (26.5%) and in New York State (25.9%) have had a FOBT in the past two years.[66] More than half of adults (age 50 and older) nationally (53.5%) and in New York State (56.7%) have ever had a sigmoidoscopy or colonoscopy.[67]

General Findings: Fecal Occult Blood Test (FOBT)

Nearly one in four Nassau County adults age 50 and older (24.6%) reported having had a FOBT in the past two years. However, most (63.2%) reported never having had a FOBT.

- Adults ages 55 and over were significantly more likely than those 50-54 years to report having had a FOBT in the past two years.
- Adults 50-54 years were significantly more likely than those ages 55 and older to report *never* having had a FOBT.
- Whites and Blacks were significantly more likely than Hispanics to report having had a FOBT in the past two years. Blacks were also significantly more likely than those of Other races to report having had a FOBT in the past two years.
- Hispanics and adults of Other races were significantly more likely to report *never* having had a FOBT than Whites and Blacks.
- Gender, education, income and health insurance status were not significantly related to FOBT.
- The highest percentages of residents age 50 and older reporting having had a FOBT in the past two years were seen in Hempstead Village/Uniondale and the Town of Oyster Bay, while the lowest percentages were seen in the Town of Hempstead[68] and Glen Cove. However, there were no statistically significant differences between Nassau County jurisdictions.
- Overall, the county's percentage of people who reported having had a FOBT in the past two years was not significantly different than either national or New York State estimates.

[65] American Cancer Society. Cancer Facts & Figures 2007. Atlanta: American Cancer Society; 2007.
[66] 2004 United States (states and DC) BRFSS and 2004 New York State BRFSS. Available at http://www.cdc.gov/brfss Accessed September 5, 2006.
[67] 2004 United States (states and DC) BRFSS and 2004 New York State BRFSS. Available at http://www.cdc.gov/brfss Accessed September 5, 2006.
[68] Excludes Freeport, Roosevelt, Hempstead Village, Uniondale, and Inwood, which were analyzed separately.

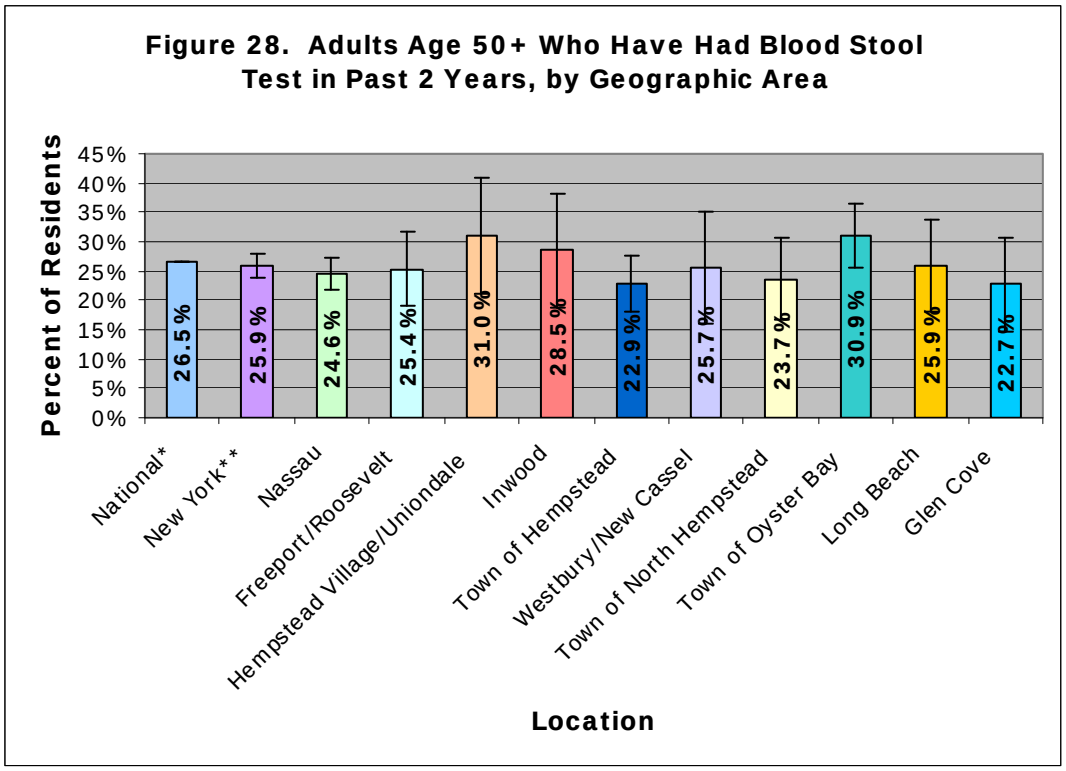
Table 31: Time since Last Blood Stool Test (FOBT) by Selected Demographic Characteristics

"Have you ever had a FOBT?" and "How long has it been since your last FOBT?"
Both questions were asked of respondents age 50 and older.

	n	Past 2 years	2 or More Years	Never
Total	**2812**	**24.6%** (+/- 2.7%)	**12.2%** (+/- 1.9%)	**63.2%** (+/- 3.1%)
Gender				
Male	**1074**	**27.2%** (+/- 4.7%)	**10.7%** (+/- 3.0%)	**62.1%** (+/- 5.1%)
Female	**1738**	**22.6%** (+/- 3.1%)	**13.4%** (+/- 2.5%)	**64.1%** (+/- 3.7%)
Age				
50-54	**554**	**13.2%**[a] (+/- 3.9%)	**9.2%** (+/- 3.8%)	**77.6%**[c] (+/- 5.3%)
55-64	**839**	**25.3%**[a] (+/- 4.9%)	**11.0%** (+/- 3.8%)	**63.7%**[c] (+/- 5.7%)
65+	**1308**	**30.4%**[a] (+/- 4.3%)	**15.0%** (+/- 3.0%)	**54.5%**[c] (+/- 4.7%)
Race/Ethnicity				
White, Non-Hispanic	**2282**	**24.5%**[a] (+/- 3.0%)	**13.7%** (+/- 2.3%)	**61.7%**[c] (+/- 3.4%)
Black, Non-Hispanic	**236**	**35.2%**[a,b] (+/- 9.3%)	**8.7%** (+/- 5.3%)*	**56.1%**[c] (+/- 9.8%)
Hispanic/Latino of Any Race	**134**	**11.4%**[a] (+/- 7.3%)*	**2.2%** (+/- 2.3%)*	**86.4%**[c] (+/- 7.9%)
Other	**94**	**14.1%**[b] (+/- 8.8%)*	**6.7%** (+/- 5.5%)*	**79.2%**[c] (+/- 10.5%)
Education				
Less than High School	**161**	**21.8%** (+/- 11.2%)*	**9.7%** (+/- 7.1%)*	**68.5%** (+/- 12.1%)
High School Graduate	**781**	**22.4%** (+/- 4.7%)	**10.3%** (+/- 3.5%)	**67.3%** (+/- 5.5%)
Some College	**633**	**27.0%** (+/- 5.9%)	**9.8%** (+/- 3.2%)	**63.2%** (+/- 6.5%)
College Graduate	**1220**	**25.2%** (+/- 4.3%)	**15.7%** (+/- 3.4%)	**59.2%** (+/- 4.8%)
Household Income				
Less than $15,000	**150**	**23.3%** (+/- 9.6%)*	**11.0%** (+/- 8.5%)*	**65.7%** (+/- 11.4%)
$15,000-$24,999	**255**	**23.9%** (+/- 7.7%)	**11.8%** (+/- 7.4%)*	**64.3%** (+/- 9.5%)
$25,000-$34,999	**239**	**23.2%** (+/- 9.6%)	**15.1%** (+/- 6.7%)*	**61.7%** (+/- 11.1%)
$35,000-$49,999	**302**	**31.7%** (+/- 8.9%)	**14.2%** (+/- 6.8%)*	**54.1%** (+/- 9.2%)
$50,000-$74,999	**355**	**25.9%** (+/- 7.6%)	**9.7%** (+/- 4.7%)*	**64.4%** (+/- 8.3%)
$75,000+	**880**	**20.9%** (+/- 4.3%)	**13.5%** (+/- 3.8%)	**65.6%** (+/- 5.4%)
Health Insurance Status				
Insured	**2633**	**24.7%** (+/- 2.8%)	**12.6%** (+/- 2.0%)	**62.8%** (+/- 3.2%)
Uninsured	**43**	**13.2%** (+/- 12.7%)*	**15.2%** (+/- 16.7%)*	**71.6%** (+/- 20.5%)*

* This percentage is based on fewer than 50 respondents and should be interpreted with extreme caution.

[a] Results were significant at the 0.05 level between those 50-54 years and those 55 years and older and between Whites/Blacks and Hispanics.
[b] Results were significant at the 0.05 level between Blacks and those of the Other race category.
[c] Results were significant at the 0.05 level between those 50-54 years and those 55 years and older and between Whites/Blacks and Hispanics/Others.



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**2004 New York State BRFSS. Available at http://www.cdc.gov/brfss Accessed September 5, 2006.

General Findings: Sigmoidoscopy or Colonoscopy

The majority (63.1%) of Nassau County residents age 50 and older reported having ever had a sigmoidoscopy or colonoscopy.

- Gender was not significantly related to sigmoidoscopy or colonoscopy.
- Adults 55 and older were significantly more likely than those 50-54 years to report having ever had a sigmoidoscopy or colonscopy.
- Whites were significantly more likely than those of Other races to report having ever had a sigmoidoscopy or colonscopy.
- College graduates were significantly more likely than those with a high school education or less to report having ever had a sigmoidoscopy or colonscopy.
- Residents with an annual household income of less than $15,000 were significantly less likely to report having ever had a sigmoidoscopy or colonoscopy than those in all other income groups except $35,000-$49,999.
- Significant differences for sigmoidoscopy or colonscopy could not be detected for health insurance status due to the low sample size.
- The highest percentage of residents age 50 and older reporting having ever had a sigmoidoscopy or colonoscopy was seen in Westbury/New Cassel, while the lowest percentage was seen in Hempstead Village/Uniondale. However, there were no statistically significant differences between Nassau County jurisdictions.
- Overall, the county's percentage of people who reported having ever had a sigmoidoscopy or colonscopy was significantly higher than national and New York State estimates.

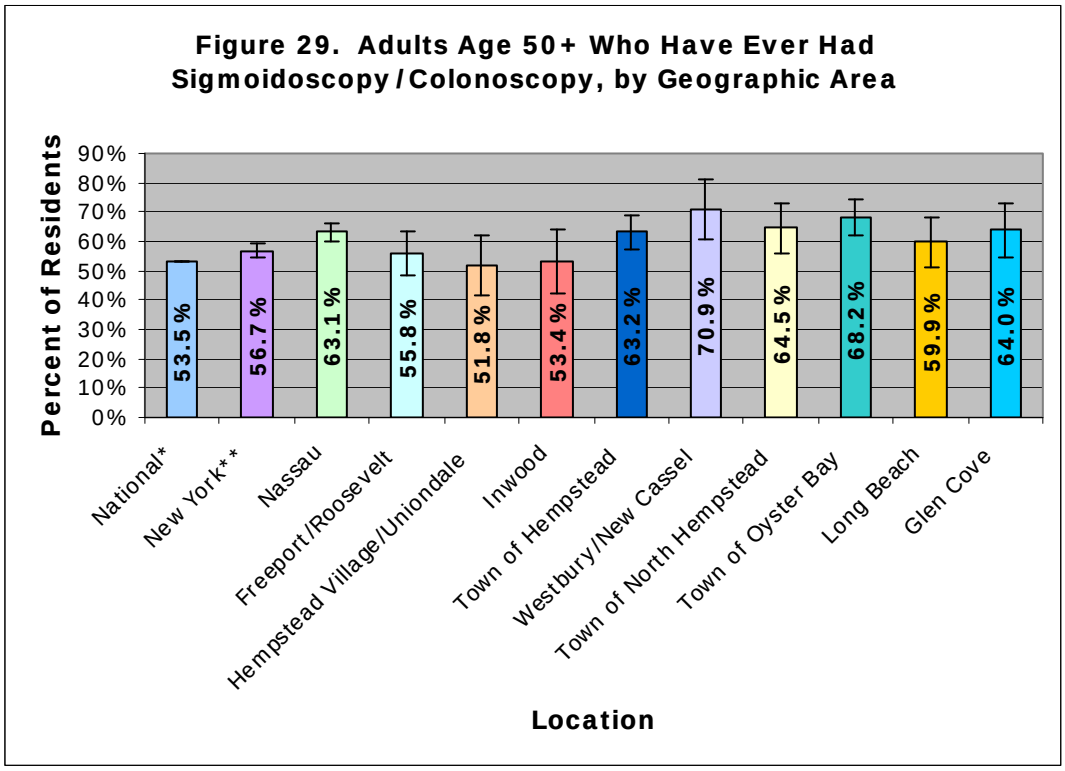
Table 32: Ever Had a Colonoscopy or Sigmoidoscopy by Selected Demographic Characteristics

"Have you ever had a sigmoidoscopy or colonoscopy?"

	n	Yes	No
Total	**2852**	**63.1%** (+/- 3.2%)	**36.9%** (+/- 3.2%)
Gender			
Male	**1080**	**65.3%** (+/- 5.2%)	**34.7%** (+/- 5.2%)
Female	**1772**	**61.4%** (+/- 4.1%)	**38.6%** (+/- 4.1%)
Age			
50-54	**555**	**48.5%**[a] (+/- 7.2%)	**51.5%** (+/- 7.2%)
55-64	**847**	**70.6%**[a] (+/- 5.3%)	**29.4%** (+/- 5.3%)
65+	**1334**	**67.3%**[a] (+/- 4.8%)	**32.7%** (+/- 4.8%)
Race			
White, Non-Hispanic	**2314**	**65.3%**[a] (+/- 3.5%)	**34.7%** (+/- 3.5%)
Black, Non-Hispanic	**236**	**62.5%** (+/- 8.9%)	**37.5%** (+/- 8.9%)
Hispanic/Latino of Any Race	**140**	**49.1%** (+/- 18.3%)	**50.9%** (+/- 18.3%)
Other	**92**	**37.6%***[a] (+/- 16.8%)	**62.4%** (+/- 16.8%)
Education			
Less than High School	**169**	**54.0%**[a] (+/- 12.2%)	**46.0%** (+/- 12.2%)
High School Graduate	**787**	**55.5%**[a] (+/- 6.2%)	**44.5%** (+/- 6.2%)
Some College	**644**	**62.9%** (+/- 7.3%)	**37.1%** (+/- 7.3%)
College Graduate	**1235**	**70.7%**[a] (+/- 4.3%)	**29.3%** (+/- 4.3%)
Household Income			
Less than $15,000	**151**	**36.9%**[a] (+/- 11.2%)	**63.1%** (+/- 11.2%)
$15,000-$24,999	**258**	**59.4%**[a] (+/- 9.8%)	**40.6%** (+/- 9.8%)
$25,000-$34,999	**239**	**68.2%**[a] (+/- 10.6%)	**31.8%** (+/- 10.6%)
$35,000-$49,999	**306**	**57.0%** (+/- 9.1%)	**43.0%** (+/- 9.1%)
$50,000-$74,999	**356**	**61.5%**[a] (+/- 8.9%)	**38.5%** (+/- 8.9%)
$75,000+	**889**	**65.2%**[a] (+/- 6.0%)	**34.8%** (+/- 6.0%)
Health Insurance Status			
Insured	**2666**	**64.7%**[a] (+/- 3.4%)	**35.3%** (+/- 3.4%)
Uninsured	**45**	**27.1%***[a] (+/- 24.9%)	**72.9%*** (+/- 24.9%)

* This percentage is based on fewer than 50 respondents and should be interpreted with extreme caution.

[a] Results were significant at the 0.05 level between those 50-54 years and those over age 55; between Whites and Other races; between college graduates and those with a high school diploma or less; between those with household incomes less than $15,000 and all other income groups except $34,999-$49,999; and between the insured and the uninsured.



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APPENDIX A. 2006 NASSAU COUNTY BRFSS SURVEY QUESTIONNAIRE

2006

Nassau County
Behavioral Risk Factor Surveillance System

Questionnaire

Interviewer's Script

HELLO, I am calling for the **Nassau County Department of Health. (**. My name is **(name)** **.** We are gathering information about the health of **Nassau County** residents. Your telephone number has been chosen randomly, and I would like to ask some questions about health and health practices.

Is this **(phone number)** ? If **"No",** thank you very much, but I seem to have dialed the wrong number. It is possible that your number may be called at a later time. **STOP**

Is this a private residence? If **"No",** thank you very much, but we are only interviewing private residences. **STOP**

Is this a **cellular telephone**? If "**Yes**", thank you very much, but we are only interviewing landline telephones and private residences. **STOP**

I need to randomly select one adult who lives in your household to be interviewed. How many members of your household, including yourself, are 18 years of age or older?

__ Number of adults

If **"1"** Are you the adult?

If "Yes" Then you are the person I need to speak with. Enter 1 man or 1 woman below. [Ask gender if necessary]. ["Some questions are asked of females, and some are asked of males. Just to confirm, this is a single adult {female/male} household."] Go to "correct respondent", second paragraph.

If **"No"** Is the adult a man or a woman? Enter 1 man or 1 woman below. May I speak with **[fill in (him/her**) from previous question**]**? **Go to "C*orrect Respondent*" on next page.**

How many of these adults are men and how many are women?

__ Number of men
__ Number of women

If more than 1 adult: PROGRAMMER:
RN1=random number between 1 and ADULTS+1. If =1, go back to "yes" above and collect gender. If RN1does NOT =1, do RN2.

RN2=random number between 1 and ADULTS. If RN2=1, go back to "yes" above and collect gender. If RN2 does NOT =1, ask for person in traditional manner (oldest female, 2nd oldest male, etc)

If person selected is not available and RN1 does NOT =1, ask when to call back.

If RPick1= not 1 it remains as is, BUT if RPick1=1 it should go:
Intro1
HS1
HS2
Adults
#men
#women
Newsel

new screen to recall "Are you the oldest male, second oldest male, or youngest male" based on answer to # men or # women.

[NEWSEL SCREN] We are conducting this survey with people aged 18 or older.
Are you 18 years of age or older?

IF NO: "May I speak to an adult member of the household who is 18 years of age or older?"

INTERVIEWER: ENTER THE GENDER OF THE PERSON ON THE LINE

INTERVEIWER: IF UNSURE OF THE RESPONDENTS GENDER ASK:

"Some questions are asked of females, and some are asked of males.
For survey purposes I need to confirm your gender, are you a (female/male)?"

31 Yes, Male
32 Yes, Female

99 Person over 18 is not available/ refuses to come to phone
-->

Are you the (READ LIST) in your household?

Oldest Male
2nd Oldest Male etc – or
Oldest Female
2nd Oldest Female – etc – depending on respondents answers to previous question above

The person in your household that I need to speak with is **_____.**

If "You", Go to "correct respondent", second paragraph.
To Correct Respondent: HELLO, I am calling for the Nassau County Department of Health**.** My name is **____(name).** We are gathering information about the health of **Nassau County** residents. This project is conducted by the health department. Your telephone number has been chosen randomly, and I would like to ask some questions about health and health practices.

I will not ask for your name, address, or other personal information that can identify you. You do not have to answer any question you do not want to, and you can end the interview at any time. Any information you give me will be confidential. If you have any questions, I will provide a telephone number for you to call to get more information.

Core Sections

Section 1: Health Status

1.1 Would you say that in general your health is: (73)

Please read

1 Excellent
2 Very Good
3 Good
4 Fair
or
5 Poor

DO NOT READ

7 Don't know / Not sure
9 Refused

Section 2: Healthy Days - Health-related Quality of Life

2.1. Now thinking about your physical health, which includes physical illness and injury, for how many days during the past 30 days was your physical health not good? (74-75)

_ _ Number of days
8 8 None
7 7 Don't know / Not sure
9 9 Refused

2.2. Now thinking about your mental health, which includes stress, depression, and problems with emotions, for how many days during the past 30 days was your mental health not good? (76-77)

_ _ Number of days
8 8 None
7 7 Don't know / Not sure
9 9 Refused

{If Q2.1 and Q2.2=88 (None), Go to next section.}

2.3. During the past 30 days, for about how many days did poor physical or mental health keep you from doing your usual activities, such as self-care, work, or recreation? (78-79)

_ _ Number of days
8 8 None
7 7 Don't know / Not sure
9 9 Refused

Section 4: Exercise

4.1. During the past month, other than your regular job, did you participate in any physical activities or exercises such as running, calisthenics, golf, gardening, or walking for exercise? (84)

1 Yes
2 No

7 Don't know / Not sure
9 Refused

Section 5: Diabetes

5.1. Have you EVER been told by a doctor that you have diabetes? (85)

Note: If respondent says 'pre-diabetes or borderline diabetes', use response **Code 4**.

1 Yes
2 Yes, but female told only during pregnancy
3 No
4 No, pre-diabetes or borderline diabetes
7 Don't know / Not sure
9 Refused

[If "Yes" and respondent is female, ask: "Was this only when you were pregnant?"]

Module 1: Diabetes

{To be asked following Core Q5.1; if response code=1 (Yes).}

Mod1_1. How old were you when you were told you have diabetes? (201-202)

_ _ Code age in years **[97=97 and older]**
9 8 Don't know / Not sure
9 9 Refused

Mod1_2. Are you now taking insulin? (203)

1 Yes
2 No
9 Refused

Mod1_3. Are you now taking diabetes pills? (204)

1 Yes
2 No
7 Don't know / Not sure
9 Refused

Mod1_4. 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. (205-207)

4 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.(197-199)

1 _ _ Times per day
2 _ _ Times per week
3 _ _ Times per month
4 _ _ Times per year
88 8 Never
777 Don't know / Not sure
999 Refused

Mod1_5. 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. (208-210)

1 _ _ Times per day
2 _ _ Times per week
3 _ _ Times per month
4 _ _ Times per year
888 Never
555 No feet
777 Don't know / Not sure
999 Refused

Mod1_6. Have you EVER had any sores or irritations on your feet that took more than four weeks to heal? (211)

1 Yes
2 No
7 Don't know / Not sure
9 Refused

Mod1_7. About how many times in the past 12 months have you seen a doctor, nurse, or other health professional for your diabetes? (212-213)

_ _ Number of times **[76=76 or more]**
88 None
77 Don't know / Not sure
99 Refused

Mod1_8. A test for "**A one C**" measures the average level of blood sugar over the past three months. About how many times in the past 12 months has a doctor, nurse, or other health professional checked you for "**A one C**"? (214-215)

_ _ Number of times **[76=76 or more]**
8 8 None
9 8 Never heard of "**A one C**" test
7 7 Don't know / Not sure
9 9 Refused

{If Mod1_5= 555 (No Feet), Go to Q10; else continue}

Mod1_9. About how many times in the past 12 months has a health professional checked your feet for any sores or irritations? (216-217)

_ _ Number of times **[76=76 or more]**
8 8 None
7 7 Don't know / Not sure
9 9 Refused

Mod1_10. 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. (218)

Read only if necessary:
1 Within the past month (anytime less than 1 month ago)
2 Within the past year (1 month but less than 12 months ago)
3 Within the past 2 years (1 year but less than 2 years ago)
4 2 or more years ago

8 Never

Do not read
7 Don't know / Not sure
9 Refused

Mod1_11. Has a doctor EVER told you that diabetes has affected your eyes or that you had retinopathy? (219)

1 Yes
2 No
7 Don=t know/Not sure
9 Refused

Mod1_12. Have you EVER taken a course or class in how to manage your diabetes yourself? (220)

1 Yes
2 No
7 Don't know / Not sure
9 Refused

Section 6: Hypertension Awareness

6.1. Have you EVER been told by a doctor, nurse, or other health professional that you have high blood pressure? (86)

[If "Yes" and respondent is female, ask: *"Was this only when you were pregnant?"]*

1 Yes
2 Yes, but female told only during pregnancy **[Go to next section]**
3 No **[Go to next section]**
4 Told borderline high or pre-hypertensive **[Go to next section]**
7 Don't know / Not sure **[Go to next section]**
9 Refused **[Go to next section]**

6.2. Are you currently taking medicine for your high blood pressure? (87)

1 Yes
2 No
7 Don't know / Not sure
9 Refused

Section 7: Cholesterol Awareness

7.1. Blood cholesterol is a fatty substance found in the blood. Have you EVER had your blood cholesterol checked? (88)

1 Yes
2 No **[Go to next section]**
7 Don't know / Not sure **[Go to next section]**
9 Refused **[Go to next section]**

7.2. About how long has it been since you last had your blood cholesterol checked? (89)

Read only if necessary:
1 Within the past year (anytime less than 12 months ago)
2 Within the past 2 years (1 year but less than 2 years ago)

3 Within the past 5 years (2 years but less than 5 years ago)
4 5 or more years ago

Do not read
7 Don't know / Not sure
9 Refused

7.3. Have you EVER been told by a doctor, nurse or other health professional that your blood cholesterol is high? (90)

1 Yes
2 No
7 Don't know / Not sure
9 Refused

Section 8: Cardiovascular Disease Prevalence

Now I would like to ask you some questions about cardiovascular disease.

Has a doctor, nurse, or other health professional EVER told you that you had any of the following? For each, tell me "Yes", "No", or you're "Not sure":

8.1. (Ever told) you had a heart attack, also called a myocardial infarction? (91)

1 Yes
2 No
7 Don't know / Not sure
9 Refused

8.2. (Ever told) F? (92)

1 Yes
2 No
7 Don't know / Not sure
9 Refused

8.3. (Ever told) you had a stroke? (93)

1 Yes
2 No
7 Don't know / Not sure
9 Refused

Section 9: Asthma

9.1. Have you EVER been told by a doctor, nurse, or other health professional that you had asthma? (94)

1 Yes
2 No **[Go to next section]**
7 Don't know / Not sure **[Go to next section]**
9 Refused **[Go to next section]**

9.2. Do you still have asthma? (95)

1 Yes
2 No

7 Don't know / Not sure
9 Refused

Section 11: Tobacco Use

11.1. Have you smoked at least 100 cigarettes in your entire life? (99)

[Note: 5 packs = 100 cigarettes]

1 Yes
2 No **[Go to next section]**
7 Don't know / Not sure **[Go to next section]**
9 Refused **[Go to next section]**

11.2. Do you now smoke cigarettes every day, some days, or not at all? (100)

1 Every day
2 Some days
3 Not at all **[Go to next section]**
7 Don't know / Not sure [Go to next section
9 Refused **[Go to next section]**

11.3. During the past 12 months, have you stopped smoking for one day or longer because you were trying to quit smoking? (101)

1 Yes
2 No
7 Don't know / Not sure
9 Refused

Section 12: Alcohol Consumption

12.1. During the past 30 days, have you had at least one drink of any alcoholic beverage such as beer, wine, a malt beverage or liquor? (102)

1 Yes
2 No **[Go to next section]**
7 Don't know / Not sure **[Go to next section]**
9 Refused **[Go to next section]**

12.2. During the past 30 days, how many days per week or per month did you have at least one drink of any alcoholic beverage? (103-105)

1 _ _ Days per week
2 _ _ Days in past 30 days
888 No drinks in past 30 days **[Go to next section]**
777 Don't know / Not sure
999 Refused

12.3. One drink is equivalent to a 12 ounce beer, a 5 ounce glass of wine, or a drink with one shot of liquor. During the past 30 days, on the days when you drank, about how many drinks did you drink on the average? (106-107)

_ _ Number of drinks
77 Don't know / Not sure
99 Refused

12.4. Considering all types of alcoholic beverages, how many times during the past 30 days did you have 5 or more drinks on one occasion? (108-109)

_ _ Number of times
88 None
77 Don't know / Not sure
99 Refused

12.5. During the past 30 days, what is the largest number of drinks you had on any occasion? (110-111)

_ _ Number
77 Don't know / Not sure
99 Refused

Section 13: Demographics

13.1. What is your age? (112-113)

_ _ Code age in years
0 7 Don't know / Not sure
0 9 Refused

13.2. Are you Hispanic or Latino? (114)

1 Yes
2 No
7 Don't know / Not sure
9 Refused

13.3. Which one or more of the following would you say is your race? (115-120)

[Check all that apply]

Please read
1 White
2 Black or African American
3 Asian
4 Native Hawaiian or Other Pacific Islander
5 American Indian, Alaska Native
or
6 Other [specify] _____

DO NOT READ
8 No additional choices
7 Don't know / Not sure
9 Refused

{If more than one response to S13q3, continue. Otherwise, Go to S13q5.}

13.4. Which one of these groups would you say BEST represents your race? (121)

1 White
2 Black or African American
3 Asian
4 Native Hawaiian or Other Pacific Islander
5 American Indian or Alaska Native

6 Other [specify] _____
7 Don't know / Not sure
9 Refused

13.5. Are you…? (122)

Please read
1 Married
2 Divorced
3 Widowed
4 Separated
5 Never married
or
6 A member of an unmarried couple

DO NOT READ
9 Refused

13.6. How many children less than 18 years of age live in your household? (123-124)

_ _ Number of children
8 8 None
9 9 Refused

13.7. What is the highest grade or year of school you completed? (125)

Read only if necessary:
1 Never attended school or only attended kindergarten
2 Grades 1 through 8 (Elementary)
3 Grades 9 through 11 (Some high school)
4 Grade 12 or GED (High school graduate)
5 College 1 year to 3 years (Some college or technical school)
6 College 4 years or more (College graduate)
9 Refused

13.8. Are you currently? (126)

Please read
1 Employed for wages
2 Self-employed
3 Out of work for more than 1 year
4 Out of work for less than 1 year
5 A homemaker
6 A student
7 Retired,
or
8 Unable to work

DO NOT READ
9 Refused

13.9. Is your annual household income from all sources…? (127-128)

[If respondent refuses at ANY income level, code 99 (Refused).]

Read only if necessary:

0 4 Less than $25,000 If "no", ask 05; if "yes", ask 03 ($20,000 to less than $25,000)

0 3 Less than $20,000 If "no", code 04; if "yes", ask 02 ($15,000 to less than $20,000)

0 2 Less than $15,000 If "no", code 03; if "yes", ask 01 ($10,000 to less than $15,000)

0 1 Less than $10,000 If "no", code 02

0 5 Less than $35,000 If "no", ask 06 ($25,000 to less than $35,000)

0 6 Less than $50,000 If "no", ask 07 ($35,000 to less than $50,000)

0 7 Less than $75,000 If "no", code 08 ($50,000 to less than $75,000)

0 8 $75,000 or more

DO NOT READ

7 7 Don't know / Not sure

9 9 Refused

13.10. About how much do you weigh without shoes? (129-132)

{Note: If respondent answers in metrics, put "9" in column 129.}
[Round fractions up]

_ _ _ _ Weight
(pounds/kilograms)

7 7 7 7 Don't know / Not sure

9 9 9 9 Refused

13.11. About how tall are you without shoes? (133-136)

{Note: If respondent answers in metrics, put "9" in column 133.}

[Round fractions down]

_ _ /_ _ Height
(ft / inches/meters/centimeters)

7 7 7 7 Don't know / Not sure

9 9 9 9 Refused

13.12. What town do you live in? (137-139)

_ _ _ FIPS county code
7 7 7 Don't know / Not sure
9 9 9 Refused

13.13. What is your ZIP Code where you live? (140-144)

_ _ _ _ _ ZIP Code
7 7 7 7 7 Don't know / Not sure
9 9 9 9 9 Refused

13.14. Do you have more than one telephone number in your household? Do not include cell phones or numbers that are only used by a computer or fax machine. (145)

1 Yes
2 No **[Go to Q13.16]**
7 Don't know / Not sure **[Go to Q13.16]**
9 Refused **[Go to Q13.16]**

13.15. How many of these phone numbers are residential numbers? (146)

_ Residential telephone numbers [**6=6 or more**]
7 Don't know / Not sure
9 Refused

13.16. During the past 12 months, has your household been without telephone service for 1 week or more? Do not include interruptions of phone service due to weather or natural disasters. (147)

1 Yes
2 No
7 Don't know / Not sure
9 Refused

13.17. Indicate sex of respondent. **[Ask only if necessary**]. (148)

1 Male [Go to next section]
2 Female {If respondent is 45 years old or older, [Go to next section]}

13.18. To your knowledge, are you now pregnant? (149)

1 Yes
2 No
7 Don't know / Not sure
9 Refused

Section 15: Disability

The following questions are about health problems or impairments you may have.

15.1. Are you limited in any way in any activities because of physical, mental, or emotional problems? (151)

1 Yes
2 No
7 Don't know / Not sure
9 Refused

15.2. 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? (152)

[Note: Include occasional use or use in certain circumstances.]

1 Yes
2 No
7 Don't know / Not sure
9 Refused

Section 17: Fruits & Vegetables

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

17.1. How often do you drink fruit juices such as orange, grapefruit, or tomato? (158-160)

1 _ _ Per day
2 _ _ Per week
3 _ _ Per month
4 _ _ Per year
5 5 5 Never
7 7 7 Don't know / Not sure
9 9 9 Refused

17.2. Not counting juice, how often do you eat fruit? (161-163)

1 _ _ Per day
2 _ _ Per week
3 _ _ Per month
4 _ _ Per year
5 5 5 Never
7 7 7 Don't know / Not sure
9 9 9 Refused

17.3. How often do you eat green salad? (164-166)

1 _ _ Per day
2 _ _ Per week
3 _ _ Per month
4 _ _ Per year
5 5 5 Never
7 7 7 Don't know / Not sure
9 9 9 Refused

17.4. How often do you eat potatoes not including French fries, fried potatoes, or potato chips? (167-169)

1 _ _ Per day
2 _ _ Per week
3 _ _ Per month
4 _ _ Per year
5 5 5 Never
7 7 7 Don't know / Not sure
9 9 9 Refused

17.5 How often do you eat carrots? (170-172)

1 _ _ Per day
2 _ _ Per week
3 _ _ Per month
4 _ _ Per year
5 5 5 Never
7 7 7 Don't know / Not sure
9 9 9 Refused

17.6. Not counting carrots, potatoes, or salad, how many servings of vegetables do you usually eat? (Example: A serving of vegetables at both lunch and dinner would be two servings.) (173-175)

1 _ _ Per day
2 _ _ Per week
3 _ _ Per month
4 _ _ Per year
5 5 5 Never
7 7 7 Don't know / Not sure
9 9 9 Refused

Section 18: Physical Activity

{If Core Q13.8=1(employed for wages) or 2(self-employed), continue. Otherwise, Go to Q18.2.}

18.1. When you are at work, which of the following best describes what you do? Would you say? (176)

[Note: If respondent has multiple jobs, include all jobs.]

Please read
1 Mostly sitting or standing
2 Mostly walking
3 Mostly heavy labor or physically demanding work

DO NOT READ
7 Don't know / Not sure
9 Refused

Please read

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

18.2. Now, thinking about the moderate activities you do [fill in "when you are not working" if "employed" or self-employed"] in a usual week, do you do moderate activities for at least 10 minutes at a time, such as brisk walking, bicycling, vacuuming, gardening, or anything else that causes some increase in breathing or heart rate? (177)

1 Yes
2 No **[Go to Q18.5]**
7 Don't know / Not sure **[Go to Q18.5]**
9 Refused **[Go to Q18.5]**

18.3. How many days per week do you do these moderate activities for at least 10 minutes at a time? (178-179)

_ _ Days per week

8 8 Do not do any moderate physical activity for at least 10 minutes at a time **[Go to Q18.5]**
7 7 Don't know / Not sure **[Go to Q18.5]**
9 9 Refused **[Go to Q18.5]**

18.4. On days when you do moderate activities for at least 10 minutes at a time, how much total time per day do you spend doing these activities? (180-182)

_:_ _ Hours and minutes per day
7 7 7 Don't know / Not sure
9 9 9 Refused

18.5. Now, thinking about the vigorous activities you do **[fill in "when you are not working" if "employed" or "self-employed"]** in a usual week, do you do vigorous activities for at least 10 minutes at a time, such as running, aerobics, heavy yard work, or anything else that causes large increases in breathing or heart rate? (183)

1 Yes
2 No **[Go to next section]**
7 Don't know / Not sure **[Go to next section]**
9 Refused **[Go to next section]**

18.6. How many days per week do you do these vigorous activities for at least 10 minutes at a time? (184-185)

_ _ Days per week
8 8 Do not do any vigorous physical activity for at least 10 minutes at a time **[Go to next section]**
7 7 Don't know / Not sure **[Go to next section]**
9 9 Refused **[Go to next section]**

18.7. On days when you do vigorous activities for at least 10 minutes at a time, how much total time per day do you spend doing these activities? (186-188)

_:_ _ Hours and minutes per day
7 7 7 Don't know / Not sure
9 9 9 Refused

Section 19: HIV/AIDS

{If respondent is 65 years or older, Go to next section}

The next few questions are about the national health problem of HIV, the virus that causes AIDS. Please remember that your answers are strictly confidential and that you do not have to answer every question if you do not want to. Although we will ask you about testing, we will not ask you about the results of any test you may have had.

19.1. Have you EVER been tested for HIV? Do not count tests you may have had as part of a blood donation. Include tests using fluid from your mouth. (189)

1 Yes
2 No **[Go to Q19.4]**
7 Don't know / Not sure **[Go to Q19.4]**
9 Refused **[Go to Q19.4]**

19.2. Not including blood donations, in what month and year was your last HIV test? (190-195)

[Note: If response is before January 1985, code "**Don't know**."]

_ _ /_ _ _ _ Code month and year
7 7 7 7 7 7 Don't know / Not sure
9 9 9 9 9 9 Refused

19.3. Where did you have your last HIV test, at a private doctor or HMO office, at a counseling and testing site, at a hospital, at a clinic, in a jail or prison, at home, at a drug treatment facility, or somewhere else? (196-197)

0 1 Private doctor or HMO office
0 2 Counseling and testing site
0 3 Hospital
0 4 Clinic
0 5 In a jail or prison (or other correctional facility)
0 6 Home
0 7 Somewhere else
08 Drug treatment facility
7 7 Don't know / Not sure
9 9 Refused

19.4. I am going to read you a list. When I am done, please tell me if any of the situations apply to you. You do not need to tell me which one.

Please read

- You have used intravenous drugs in the past year.
- You have been treated for a sexually transmitted or venereal disease in the past year.
- You have given or received money or drugs in exchange for sex in the past year.
- You had anal sex without a condom in the past year.

Do any of these situations apply to you? (198)
1 Yes
2 No
7 Don't know / Not sure
9 Refused

Section 20: Emotional Support & Life Satisfaction

The next two questions are about emotional support and your satisfaction with life.

20.1. How often do you get the social and emotional support you need? (199)

Please read
1 Always
2 Usually
3 Sometimes
4 Rarely
5 Never

DO NOT READ
7 Don't know / Not sure
9 Refused

20.2. In general, how satisfied are you with your life? (200)

Please read
1 Very satisfied
2 Satisfied
3 Dissatisfied
4 Very dissatisfied

DO NOT READ
7 Don't know / Not sure
9 Refused

Go to modules and/or state-added questions

Finally, I have just a few questions left about some other health topics.

Module 6: Actions to Control High Blood Pressure

{If Core S6q1=1 (Yes), continue; Else go to next section.}

Are you now doing any of the following to help lower or control your high blood pressure?

Mod6_1. (Are you) changing your eating habits (to help lower or control your high blood pressure)? (253)
1 Yes
2 No
7 Don't know / Not sure
9 Refused

Mod6_2. (Are you) cutting down on salt (to help lower or control your high blood pressure)? (254)
1 Yes
2 No
3 Do not use salt
7 Don't know / Not sure
9 Refused

Mod6_3. (Are you) reducing alcohol use (to help lower or control your high blood pressure)? (255)
1 Yes
2 No
3 Do not drink
7 Don't know / Not sure
9 Refused

Mod6_4. (Are you) exercising (to help lower or control your high blood pressure)? (256)
1 Yes
2 No
7 Don't know / Not sure
9 Refused

Has a doctor or other health professional EVER advised you to do any of the following to help lower or control your high blood pressure:

Mod6_5. (Ever advised you to) change your eating habits (to help lower or control your high blood pressure)? (257)

1 Yes
2 No
7 Don't know / Not sure
9 Refused

Mod6_6. (Ever advised you to) cut down on salt (to help lower or control your high blood pressure)? (258)

1 Yes
2 No
3 Do not use salt
7 Don't know / Not sure
9 Refused

Mod6_7. (Ever advised you to) reduce alcohol use (to help lower or control your high blood pressure)? (259)

1 Yes
2 No
3 Do not drink
7 Don't know / Not sure
9 Refused

Mod6_8. (Ever advised you to) exercise (to help lower or control your high blood pressure)? (260)

1 Yes
2 No
7 Don't know / Not sure
9 Refused

Mod6_9. (Ever advised you to) take medication (to help lower or control your high blood pressure)? (261)

1 Yes
2 No
7 Don't know / Not sure
9 Refused

Mod6_10. Were you told on **two or more different visits** to a doctor or other health professional that you had high blood pressure? (262)

[If "Yes" and respondent is female, ask: "Was this only when you were pregnant?"]

1 Yes
2 Yes, but female told only during pregnancy
3 No
4 Told borderline or pre-hypertensive
7 Don't know / Not sure
9 Refused

Module 11: Childhood Asthma Prevalence

{If Core S13q6=00, 88, or 99 (no children under age 18 in the household, or refused), Go to next module.}

{If Core S13q6 = 1}:

INTERVIEWER: "Previously, you indicated there was one child age 17 or younger in your household. I would like to ask you some questions about that child." [Go to Mod11_1]

{If Core S13q6 is >1 and Core S13q6 does not equal to 88 or 99}:
INTERVIEWER: "Previously, you indicated there were [number] children age 17 or younger in your household. Think about those [number] children in order of their birth, from oldest to youngest. The oldest child is the first child and the youngest child is the last." Please include children with the same birth date, including twins, in the order of their birth.

{CATI INSTRUCTION: RANDOMLY SELECT ONE OF THE CHILDREN.} This is the "Xth" child.

INTERVIEWER: "I have some additional questions about one specific child. The child I will be referring to is the "Xth" child in your household. The next two questions are about the "Xth" [CATI: please fill in correct number] child.

Mod11_1. Has a doctor, nurse or other health professional EVER said that the child has asthma? (310)

1 Yes
2 No **[Go to next module]**
7 Don't know / Not sure **[Go to next module]**
9 Refused **[Go to next module]**

Mod11_2. Does the child still have asthma? (311)

1 Yes
2 No
7 Don't know / Not sure
9 Refused

Module 13: Women's Health

{If the respondent is male (S13q17=1), Go to next module, else continue.}

Mod13_1. A mammogram is an x-ray of each breast to look for breast cancer. Have you EVER had a mammogram? (314)

1 Yes
2 No **[Go to Mod13_3]**
7 Don't know / Not sure **[Go to Mod13_3]**
9 Refused **[Go to Mod13_3]**

Mod13_2. How long has it been since you had your last mammogram? (315)

Read only if necessary:
1 Within the past year (anytime less than 12 months ago)
2 Within the past 2 years (1 year but less than 2 years ago)
3 Within the past 3 years (2 years but less than 3 years ago)
4 Within the past 5 years (3 years but less than 5 years ago)
5 5 or more years ago

Do not read
7 Don't know / Not sure
9 Refused

Mod13_3. A clinical breast exam is when a doctor, nurse or other health professional feels the breasts for lumps. Have you EVER had a clinical breast exam? (316)

1 Yes
2 No **[Go to Mod13_5]**
7 Don't know / Not sure **[Go to Mod13_5]**
9 Refused **[Go to Mod13_5]**

Mod13_4. How long has it been since your last breast exam? (317)

Read only if necessary:
1 Within the past year (anytime less than 12 months ago)
2 Within the past 2 years (1 year but less than 2 years ago)
3 Within the past 3 years (2 years but less than 3 years ago)
4 Within the past 5 years (3 years but less than 5 years ago)
5 5 or more years ago

Do not read
7 Don't know / Not sure
9 Refused

Mod13_5. A Pap test is a test for cancer of the cervix. Have you EVER had a Pap test? (318)

1 Yes
2 No **[Go to Mod13_7]**
7 Don't know / Not sure **[Go to Mod13_7]**
9 Refused **[Go to Mod13_7]**

Mod13_6. How long has it been since you had your last Pap test? (319)

Read only if necessary:
1 Within the past year (anytime less than 12 months ago)
2 Within the past 2 years (1 year but less than 2 years ago)
3 Within the past 3 years (2 years but less than 3 years ago)
4 Within the past 5 years (3 years but less than 5 years ago)
5 5 or more years ago

Do not read
7 Don't know / Not sure
9 Refused

{If response to Core Q13.18=1 (is pregnant), Go to next module; Else continue.}

Mod13_7. Have you had a hysterectomy? (320)

[Read only if necessary: "A hysterectomy is an operation to remove the uterus (womb)".]
1 Yes
2 No
7 Don't' know / Not sure
9 Refused

Module 14: Prostate Cancer Screening

{If S13q1=18-39 or S13q17=2 (female), Go to next module; Else continue.}

Mod14_1. A Prostate-Specific Antigen test, also called a PSA test, is a blood test used to check men for prostate cancer. Have you EVER had a PSA test? (321)

1 Yes
2 No **[Go to Mod14_3]**
7 Don't know / Not sure **[Go to Mod14_3]**
9 Refused **[Go to Mod14_3]**

Mod14_2. How long has it been since you had your last PSA test? (322)

Read only if necessary:
1 Within the past year (anytime less than 12 months ago)
2 Within the past 2 years (1 year but less than 2 years ago)
3 Within the past 3 years (2 years but less than 3 years ago)
4 Within the past 5 years (3 years but less than 5 years ago)
5 5 or more years ago

Do not read
7 Don't know / Not sure
9 Refused

Mod14_3. A digital rectal exam is an exam in which a doctor, nurse or other health professional places a gloved finger into the rectum to feel the size, shape, and hardness of the prostate gland. Have you EVER had a digital rectal exam? (323)

1 Yes
2 No **[Go to Mod14_5]**
7 Don't know / Not sure **[Go to Mod14_5]**
9 Refused **[Go to Mod14_5]**

Mod14_4. How long has it been since your last digital rectal exam? (324)

Read only if necessary:
1 Within the past year (anytime less than 12 months ago)
2 Within the past 2 years (1 year but less than 2 years ago)
3 Within the past 3 years (2 years but less than 3 years ago)
4 Within the past 5 years (3 years but less than 5 years ago)
5 5 or more years ago

Do not read
7 Don't know / Not sure
9 Refused

Mod14_5. Have you EVER been told by a doctor, nurse or other health professional that you had prostate cancer? (325)

1 Yes
2 No
7 Don't know / Not sure
9 Refused

Module 15: Colorectal Cancer Screening

{If S13q1=18-49, Go to next module; Else continue.}

Mod15_1. 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? (326)

1 Yes
2 No **[Go to Mod15_3]**
7 Don't know / Not sure **[Go to Mod15_3]**
9 Refused **[Go to Mod15_3]**

Mod15_2. How long has it been since you had your last blood stool test using a home kit? (327)

Read only if necessary:
1 Within the past year (anytime less than 12 months ago)
2 Within the past 2 years (1 year but less than 2 years ago)
3 Within the past 5 years (2 years but less than 5 years ago)
4 5 or more years ago

Do not read
7 Don't know / Not sure
9 Refused

Mod15_3. Sigmoidoscopy and colonoscopy are exams in which a tube is inserted in the rectum to view the colon for signs of cancer or other health problems. Have you EVER had either of these exams? (328)

1 Yes
2 No **[Go to next module]**
7 Don't know / Not sure **[Go to next module]**
9 Refused **[Go to next module]**

Mod15_4. How long has it been since you had your last sigmoidoscopy or colonoscopy? (329)

Read only if necessary:
1 Within the past year (anytime less than 12 months ago)
2 Within the past 2 years (1 year but less than 2 years ago)
3 Within the past 5 years (2 years but less than 5 years ago)
4 Within the past 10 years (5 years but less than 10 years ago)
5 10 or more years ago

Do not read
7 Don't know / Not sure
9 Refused

Module 18: Weight Control

Mod18_1. Are you now trying to lose weight? (335)

1 Yes [Go to Mod18_3]
2 No
7 Don't know / Not sure
9 Refused

Mod18_2. Are you now trying to maintain your current weight, that is, to keep from gaining weight? (336)

1 Yes
2 No **[Go to Mod18_5]**
7 Don't know / Not sure **[Go to Mod18_5]**
9 Refused **[Go to Mod18_5]**

Mod18_3. Are you eating either fewer calories or less fat to… (337)

lose weight? **[If "Yes" to Mod18_1]**

keep from gaining weight? **[If "Yes" to Mod18_2]**

Probe for which:
1 Yes, fewer calories
2 Yes, less fat
3 Yes, fewer calories and less fat
4 No
7 Don't know / Not sure
9 Refused

Mod18_4. Are you using physical activity or exercise to… (338)

lose weight? [If "Yes" to Mod18_1]

keep from gaining weight? [If "Yes" to Mod18_2]

1 Yes
2 No
7 Don't know / Not sure
9 Refused

Mod18_5. In the past 12 months, has a doctor, nurse or other health professional given you advice about your weight? (339)

Probe for which:
1 Yes, lose weight
2 Yes, gain weight
3 Yes, maintain current weight
4 No
7 Don't know / Not sure
9 Refused

Module 21: Smoking Cessation

{If response to Core S11q2 =3 (Not at all), continue; If Core S11q2=1 or 2 ('every day' or 'some days'), Go to Mod21_2; IF S11q2=7,9, go to next module}

Previously you said you have smoked cigarettes:

Mod21_1. About how long has it been since you last smoked cigarettes? (355-356)

Read only if necessary:
0 1 Within the past month (anytime less than 1 month ago) [Go to Mod21_2]
0 2 Within the past 3 months (1 month but less than 3 months ago) [Go to Mod21_2]

0 3 Within the past 6 months (3 months but less than 6 months ago) [Go to Mod21_2]
0 4 Within the past year (6 months but less than 1 year ago) [Go to Mod21_2]
0 5 Within the past 5 years (1 year but less than 5 years ago) [Go to next module]
0 6 Within the past 10 years (5 years but less than 10 years ago) [Go to the next module]
0 7 10 or more years ago [Go to next module]

Do not read
7 7 Don't know / Not sure [Go to next module]
9 9 Refused [Go to next module]

{If response to Mod21_1= 01, 02, 03, or 04, Or if Core S11q2=1 or 2 continue; else go to next module}

The next questions are about interactions you might have had with a doctor, nurse, or other health professional.

Mod21_2. In the last 12 months, how many times have you seen a doctor, nurse or other health professional to get any kind of care for yourself? (357-358)

_ _ Number of times **[01-76]**
8 8 None **[Go to next module]**
7 7 Don't know / Not sure
9 9 Refused

Mod21_3. In the last 12 months, on how many visits were you advised to quit smoking by a doctor or other health provider? (359-360)

_ _ Number of visits **[01-76]**
8 8 None
7 7 Don't know / Not sure
9 9 Refused

Mod21_4. On how many visits did your doctor, nurse or other health professional recommend or discuss medication to assist you with quitting smoking, such as nicotine gum, patch, nasal spray, inhaler, lozenge, or prescription medication such as Wellbutrin/Zyban/Bupropion? (361-362)

(Pronunciation: Well BYOU trin/ZEYE ban/byou PRO pee on)

_ _ Number of visits **[01-76]**
8 8 None
7 7 Don't know / Not sure
9 9 Refused

Mod21_5. On how many visits did your doctor or health provider recommend or discuss methods and strategies other than medication to assist you with quitting smoking? (363-364)

_ _ Number of visits **[01-76]**
8 8 None
7 7 Don't know / Not sure
9 9 Refused

Module 22: Secondhand Smoke Policy

Mod22_1. Which statement best describes the rules about smoking inside your home? (365)

Please read
1 Smoking is not allowed anywhere inside your home
2 Smoking is allowed in some places or at some times
3 Smoking is allowed anywhere inside your home
or
4 There are no rules about smoking inside your home

DO NOT READ
7 Don't know / Not sure
9 Refused

{If response to Core S13q8= 1 or 2 ('employed' or 'self-employed'), continue; Else, Go to next module.}

Mod22_2. While working at your job, are you indoors most of the time? (366)

1 Yes
2 No **[Go to next module]**
7 Don't know / Not sure **[Go to next module]**
9 Refused **[Go to next module]**

Mod22_3. Which of the following best describes your place of work's official smoking policy for indoor public or common areas, such as lobbies, rest rooms, and lunch rooms? (367)

Note: For workers who visit clients or work at home, "place of work" means their base location. For self-employed persons who work at home, the official smoking policy means the home smoking policy.

Please read
1 Not allowed in any public areas
2 Allowed in some public areas
3 Allowed in all public areas
or
4 No official policy

DO NOT READ
7 Don't know / Not sure
9 Refused

Mod22_4. Which of the following best describes your place of work's official smoking policy for work areas? (368)

Please read
1 Not allowed in any work areas
2 Allowed in some work areas
3 Allowed in all work areas
or
4 No official policy

DO NOT READ
7 Don't know / Not sure
9 Refused

Module 24: Reactions to Race

Earlier, I asked you to self-identify your race. Now I will ask how other people identify you and treat you.

Mod24_1. How do *other people* usually classify you in this country? Would you say White, Black or African American, Hispanic or Latino, Asian, Native Hawaiian or Other Pacific Islander, American Indian or Alaska Native, or some other group? (371)

1 White
2 Black or African American
3 Hispanic or Latino
4 Asian
5 Native Hawaiian or Other Pacific Islander
6 American Indian or Alaska Native
8 Some other group [please specify]_____
7 Don't know / Not sure
9 Refused

[INTERVIEWER NOTE: If the respondent requests clarification of this question, say: "We want to know how OTHER people usually classify you in this country, which might be different from how you classify yourself**."]**

Mod24_2. How often do you think about your race? Would you say never, once a year, once a month, once a week, once a day, once an hour, or constantly? (372)

1 Never
2 Once a year
3 Once a month
4 Once a week
5 Once a day
6 Once an hour
8 Constantly
7 Don't know / Not sure
9 Refused

[INTERVIEWER NOTE: The responses can be interpreted as meaning "at least" the indicated time frequency. For example, if the respondent says that they think about their race between once a week and once a month, check "once a month" as the response.]

{If S13q8=1,2 or 4 ('employed for wages', 'self-employed', or 'out of work for less than one year'), continue; Else go to Mod24_4.}

Mod24_3. Within the past 12 months at work, do you feel you were treated worse than other races, the same as other races, better than other races, or worse than some races but better than others? (373)

1 Worse than other races
2 The same as other races
3 Better than other races
4 Worse than some races, better than others

DO NOT READ
5 Only encountered people of the same race
7 Don't know / Not sure
9 Refused

Mod24_4. Within the past 12 months when seeking health care, do you feel your experiences were worse than other races, the same as other races, better than other races, or worse than some races but better than others? (374)

1 Worse than other races
2 The same as other races
3 Better than other races
4 Worse than some races, better than others

DO NOT READ
5 Only encountered people of the same race
6 No health care in past 12 months
7 Don't know / Not sure
9 Refused

[INTERVIEWER NOTE: If the respondent indicates that they do not know about other people's experiences when seeking health care, say: *"This question is asking about your perceptions when seeking health care. It does not require specific knowledge about other people's experiences."]*

Mod24_5. Within the past 12 months on average, how often have you experienced any physical symptoms, for example a headache, an upset stomach, tensing of your muscles, or a pounding heart, as a result of how you were treated based on your race? (375)

1 Never
2 No more than once a year
3 At least once a month
4 At least once a week
5 At least once a day
6 At least once an hour
8 Constantly
7 Don't know / Not sure
9 Refused

Mod24_6. Within the past 12 months on average, how often have you felt emotionally upset, for example angry, sad, or frustrated, as a result of how you were treated based on your race? (376)

1 Never
2 No more than once a year
3 At least once a month
4 At least once a week
5 At least once a day
6 At least once an hour
8 Constantly
7 Don't know / Not sure
9 Refused

County-Added: Depression

Center for Epidemiological Studies Depression Scale (CES-D)
5-Item Subset
These next few questions are about your emotional and mental health in general. I am going to read a list of ways you may have felt or behaved. Please tell me how you have felt during the past 7 days.

CA1. How many days in the past 7 days have you..
"felt depressed"

Read if necessary

0 = less than 1 day
1 = 1-2 days
2 = 3-4 days
3 = 5-7 days
4 = none
9 = refused

CA2. How many days in the past 7 days have you..
"felt your sleep was restless."

Read if necessary
0 = less than 1 day
1 = 1-2 days
2 = 3-4 days
3 = 5-7 days
4 = none
9 = refused

CA3. How many days in the past 7 days have you..
"felt lonely."

Read if necessary
0 = less than 1 day
1 = 1-2 days
2 = 3-4 days
3 = 5-7 days
4 = none
9 = refused

CA4. How many days in the past 7 days have you..
"had crying spells."

Read if necessary
0 = less than 1 day
1 = 1-2 days
2 = 3-4 days
3 = 5-7 days
4 = none
9 = refused

CA5. How many days in the past 7 days have you..
"felt you could not 'get going'."

Read if necessary
0 = less than 1 day
1 = 1-2 days
2 = 3-4 days
3 = 5-7 days
4 = none
9 = refused

County-Added: Module 19

Mod19_4. A carbon monoxide or CO detector checks the level of carbon monoxide in your home. It is not a smoke detector. Do you have a CO detector in your home? (345)

1 Yes
2 No
7 Don't know / Not sure
9 Refused

Mod19_5. Do you currently have mold in your home on an area greater than the size of a dollar bill? (346)

1 Yes
2 No
7 Don't know / Not sure
9 Refused

County-Added: Module 20

Mod20_3. During the past 12 months, on how many days were pesticides, sprays, or chemicals applied inside your home to kill bugs, mice, or other pests? (349-351)

[Read only if necessary: *"Include pesticide powders, but do not include pest traps, pest strips, or herbal treatments".]*

[Note: If response is '777' (Don't know/Not sure), probe for approximate number of days.]

_ _ _ Number of days
8 8 8 None
7 7 7 Don't know / Not sure
9 9 9 Refused

Mod20_4. During the past 12 months, on how many days were pesticides or chemicals applied in your yard or garden to kill plant, animal, or insect pests, including applications by lawn care services? (352-354)

[Read only if necessary: *"Do not include lime or fertilizer if no weed or bug killer used*".]

[Note: If response is '777' (Don't know/Not sure), probe for approximate number of days.]

_ _ _ Number of days
5 5 5 Do not have a yard or garden
8 8 8 None
7 7 7 Don't know / Not sure
9 9 9 Refused

County-Added: New York Health Access Questions

NY01Q01 What type of health care coverage do you use to pay for most of your medical care? (401-402)
Is it through: coverage code __ __

(Note: If more than one, ask Which type do you use to pay for most of your medical care)

Please Read
01 Your employer

02 Someone else's employer
03 A plan that you or someone else buys on your own
04 Medicare
05 Medicaid or Medical Assistance
06 Family Health Plus (State Sponsored Program)
07 The Military, Champus, TriCare or the VA(or Champ VA)
08 The Indian Health Service
or
09 Some other source
88 None
77 Don't Know/Not Sure
99 Refused

[ASK NY01Q02 IF NY01Q01 = 77, 88, 99; ELSE GO TO Q3.2]

NY01Q02 There are some types of coverage you may not have considered. Please tell me if you have any of the following: (403-404)
Coverage through coverage code: __ __

Please Read
01 Your employer
02 Someone else's employer
03 A plan that you or someone else buys on your own
04 Medicare
05 Medicaid or Medical Assistance
06 Family Health Plus (State Sponsored Program)
07 The Military, Champus, TriCare or the VA(or Champ VA)
08 The Indian Health Service
or
09 Some other source
88 None
77 Don't Know/Not Sure
99 Refused

[ASK 3.2 of ALL]

3.2. Do you have one person you think of as your personal doctor or health care provider? (81)

If "No", ask: "*Is there more than one or is there no person who you think of as your personal doctor or health care provider*?"

If "Yes" ask "Yes you have only one person you think of as your personal doctor, or yes you have more than one person you think of as your personal doctor.

1 Yes, only one
2 More than one
3 No
7 Don't know / Not sure
9 Refused

3.3. Was there a time in the past 12 months when you needed to see a doctor but could not because of cost? (82)

1 Yes
2 No
7 Don't know / Not sure
9 Refused

3.4. About how long has it been since you last visited a doctor for a routine checkup? A routine checkup is a general physical exam, not an exam for a specific injury, illness, or condition. (83)

1 Within past yr (1-12 months ago)
2 Within past 2 yrs (1-2 yrs ago)
3 Within past 5 yrs (2-5 yrs ago)
4 5 or more years ago
7 Don't know / Not sure
8 Never
9 Refused

County-Added: Family Planning

{If respondent is female and 45 years of age or older, has had a hysterectomy, is pregnant, or male 60 years or older, go to next section.}

The next set of questions asks you about your thoughts and experiences with family planning. Please remember that all of your answers will be kept confidential.

CA18.1 Some things people do to keep from getting pregnant include not having sex at certain times, using birth control methods such as the pill, implants, shots, condoms, diaphragm, foam, IUD, having their tubes tied, or having a vasectomy. Are you or your [if female, insert husband/partner, if male, insert wife/partner] doing anything now to keep [if female, insert "you", if male, insert "her"] from getting pregnant?

NOTE: If more than one partner, consider usual partner.

1 Yes
2 No [Go to Q18.3]
3 No partner/not sexually active [Go to next section]
4 Same sex partner [Go to next section]
7 Don't know / Not sure [Go to next section]
9 Refused [Go to next section]

CA18.2 What are you or your [if female, insert husband/partner, if male, insert wife/partner] doing now to keep [if female, insert "you", if male, insert "her"] from getting pregnant?

Read only if necessary
01 Tubes tied [Go to next section]
02 hysterectomy (female sterilization) [Go to next section]
03 Vasectomy (male sterilization) [Go to next section]
04 Pill, all kinds (Seasonale, etc.) [Go to next section]
05 Condoms (male or female) [Go to next section]
06 contraceptive implants (Jadelle or Implants) [Go to next section]
07 Shots (Depo-Provera) [Go to next section]
08 Shots (Lunelle) [Go to next section]
09 Contraceptive Patch [Go to next section]
10 Diaphragm, cervical ring, or cap (Nuvaring or others) [Go to next section]
11 IUD (including Mirena) [Go to next section]
12 Emergency contraception (EC) [Go to next section]
13 Withdrawal [Go to next section]
14 Not having sex at certain times (rhythm) [Go to next section]
15 Other method (foam, jelly, cream, etc.) [Go to next section]

77 Don't know / Not sure [Go to next section]
99 Refused [Go to next section]

CA18.3 What is your main reason for not doing anything to keep [if female, insert "you," if male, insert "your wife/partner"] from getting pregnant?

Read only if necessary
01 Didn't think was going to have sex/no regular partner
02 You want a pregnancy
03 You or your partner don't want to use birth control
04 You or your partner don't like birth control/fear side effects
05 You can't pay for birth control
06 Lapse in use of a method
07 Don't think you or your partner can get pregnant
08 You or your partner had tubes tied (sterilization)
09 You or your partner had a vasectomy (sterilization)
10 You or your partner had a hysterectomy
11 You or your partner are too old
12 You or your partner are currently breast-feeding
13 You or your partner just had a baby/postpartum
14 Other reason
15 Don't care if get pregnant
16 Partner is pregnant now

Do not read
77 Don't know / Not sure
99 Refused

Closing Statement

That is my last question. Everyone's answers will be combined to give us information about the health practices of people in Nassau County. Thank you very much for your time and cooperation.

APPENDIX B. RESPONSE RATE CALCULATIONS

Upper Bound Response Rate

One measure of successful interviewing practice is the upper bound response rate, also known as the cooperation rate, which is computed as:

$$I/I+R$$

In this formula, I = number of interviews and R = number of refusals. This measures the level of cooperation attained among identified, eligible, and capable respondents. Some respondents do not complete the interview for reasons other than refusing to cooperate. For example, they may be away from home for an extended period of time or unable to complete the interview in English.

CASRO Response Rate

An alternative response rate calculates the rate at which interviews were produced among all identified, potentially eligible consumers, plus those households where eligibility could not be determined. This formula results in the Council of American Survey Research Organizations (CASRO) response rate. The formula for the CASRO is as follows:

$$\text{Casro} = \frac{\text{Complete}}{\text{Eligible} + \left[\frac{\text{Eligible}}{\text{Eligible} + \text{Ineligible}}\right] * \text{Unknown}}$$

$$\text{Overall Response Rate} = \frac{\text{Complete}}{0.98 * \text{Eligible HH}}$$

$$\text{Cooperation Rate} = \frac{\text{Complete}}{\text{Complete} + \text{B/R} + 250 + 260}$$

where :

Complete = (110+120+(210*0.32))

Eligible = (110+120+210+220+230+240+250+260+270+280)

Ineligible = (405+410+420+430+440+450)

Unknown = (305+310+315+320+325+330+332 +
335+340+345+350+355+360+365+370)

Breakoff & Refusal (B/R) = 210*0.68+220

Known HH = (230+240+250+260+270+280+305+310+315+335)

Ineligible HH = 410

All Likely HH = (345+350+320+325+330+332+340+370+355)

Eligible HH = Known HH + Ineligible HH + Completes+ B / R + 0.90*Likely HH

BRFSS Disposition Codes	
Code	**Disposition**
110	Complete
120	Partial Complete
210	Midterminate
220	Refused after selection
230	Selected but postponed
240	Selected unavailable in time period
250	Selected has language barrier
260	Selected has impairment
270	Refused, indefinite number of men/women
280	Postponed, indefinite number of men/women
305	Household unavailable in time period
310	Refused, indefinite number of adults
315	Postponed, indefinite number of adults
320	Language barrier before selection
325	Impairment before selection
330	Refused, indefinite private residence
332	Postponed, indefinite private residence
335	Answering machine, definite private residence
340	Blocking device, definite private residence
345	Answering machine, indefinite private residence
350	Blocking device, indefinite private residence
355	May be private residence but currently nonworking
360	No answer
365	Busy
370	On "Never Call" list
405	Reached wrong geographic location
410	No adults, or teen/child telephone line
420	Not private residence
430	Dedicated fax/modem line
440	Fast busy detected
450	Nonworking

Lower Bound Response Rate

Finally, measuring the efficiency of the sample frame is the lower bound response rate, which is computed as:

I/(Total Sample)

This rate is a measure of sample frame efficiency. It shows the rate at which the total sample released produces completed interviews.