# *The Cecil County Community Health Survey Report*

***October, 1999***

**Cecil County Health Department**
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**Elkton, Maryland 21921**

# Acknowledgment

Thank you, Cecil County! We are grateful to all those people who have served on the Cecil County Community Health Advisory Committee and on the seven Task Forces. We appreciate the residents who received a survey in the mail and took the time to complete and return it. Without all of you, this survey and report could not have happened.

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# Introduction

The mission of the Cecil County Health Department is to improve the health of Cecil County residents in partnership with the community by providing leadership to find solutions to our health problems through assessment, policy development, and assurance of quality health services and education. In order to achieve this mission, the Cecil County Health Department, in collaboration with different county agencies, organizations, and representative citizens, formed the Cecil County Community Health Advisory Committee in 1995. The purpose of this committee is to assess the health status of Cecil County residents and develop a community health plan for improving health status.

The committee used the APEX *PH* process, the Healthy People 2000 objectives and the Consensus Set of Health Indicators to select the most relevant health problems for the county. The health advisory committee formed seven task forces to address the different health problems that were identified as priorities for the community. The seven task forces were Family Violence, Cancer and Chronic Obstructive Pulmonary Disease, Heart Disease and Stroke, Alcohol/Drugs and Tobacco, Adolescent Pregnancy, Communicable Disease, and Accidents. Each task force defined goals and objectives for their specific health problems that were compiled to form a final health plan. The health plan was reviewed and adopted by the County Commissioners as the official Cecil County Community Health Plan in July 1997.

During the planning process, the task forces were confronted with a common problem related to the lack of baseline data for certain behavioral risk factors. The data from the Behavioral Risk Factor Surveillance System (BRFSS) for Cecil County was based on a small sample size and some of the concerns of the task forces were not addressed in that survey. The health advisory committee found that there was a need to conduct a survey for the purpose of getting reliable county-specific data regarding behavioral risk factors. The Cecil County Community Health Survey was then initiated. Each task force developed questions for the survey that would meet their need for information. The survey was administered with a paper-and-pencil questionnaire. The questions addressed issues related to demographic information, health status, health care access, household safety and injury prevention, tobacco use, alcohol consumption and drug use, and community safety concerns.

The results of this survey will help to assist the health advisory committee and its seven task forces in their planning efforts such as reviewing priorities, establishing baseline data for certain goals and objectives, and identifying new areas that need to be addressed. The results will also help to address issues related to the Healthy People 2010 objectives specific to the county. For example, if county-specific health problems are found to be different from those of the state or the nation, the objectives for the county will be adapted. Other uses of the survey data will be for resource allocation and evaluation and monitoring of already existing programs.

The first part of this report gives the description of the survey methodology and administration. The second part presents the results of the survey, which are divided into the seven sections that were included in the questionnaire.

# Methodology

## Population

The target population was all non-institutionalized adult residents that were living in the county at the time of the survey. The total adult population of the county and the population for each zip code were determined using US Census Bureau data (1990 census and 1997 population estimates). The survey was administered to residents, 18 years of age and over. The respondents were asked not to write their name on any part of the survey. A cover letter explained the strict anonymity of the information they were contributing.

The populations of the county zip codes were disproportionate with one having more than 40% of the population. To ensure that the results of the survey applied to all residents of the county, a sample size was selected for each zip code that related to the size of the population in that zip code. Excluded from the survey were residents that were homeless, or in an institutionalized setting at the time of the survey, such as jail, hospital, shelters.

## Sampling Method

To ensure representation from different categories and from different zip codes of the county, a stratified cluster sampling was used. This also would ensure that there were a sufficient number of participants from each zip code. The sampling size for each zip code was determined to provide a 95% confidence level for the estimates. A contract was made with a mailing service to develop a systematic random sample from a list of households within each zip code. The mailing service then mailed the survey to that sample with a cover letter. Only adults 18 and over were asked to complete the survey. An article was produced in the local paper, before the questionnaire was sent out, to inform the population about the survey. Another notice was published later to remind the participants to return the completed survey by a given date.

## Sample Weighting

Participation in surveys tends to vary for different subgroups of the population. For example, women are more likely than men to be reached at home and complete a self-administered survey. Additionally, a question may or may not be answered depending on how important the respondent feels the question is. This non-response produces some known biases in survey-derived estimates. In order to compensate for these biases, weights are applied to the sample data in the analysis. This will help to create a sample that more closely resembles the actual population of the county. The weighting helps to generate approximated answers that can be generalized to the county population as if all residents of Cecil County had been surveyed.

## Questionnaire

The questions of the Cecil County Community Health Survey were based mostly on the format of the Behavioral Risk Factors Surveillance System (BRFSS) from the Centers for Disease Control and Prevention (CDC). Some of the definitions, such as overweight, may be different than what other institutions may use, but to allow us to have comparable data to Maryland and the United States, we are using the BRFSS definitions. The questionnaire was separated into seven sections and contained a total of 126 questions.

Section 1 asked questions about the respondent's demographic information. These questions characterized the respondents by their zip code, gender, age, and racial category. To determine the racial category, the respondents were given the choice to select more than one option. This was to abide by new federal regulations about race identification in scientific studies, which allow multiracial persons to select all racial categories that pertain to them. Section 1 also included questions about education, employment, and household income. The purpose of these questions was to match the characteristics of the sample with those of the county's population.

Section 2 asked respondents to describe their health, diet, use of screening tests, healthy lifestyles, and also their awareness about certain behavioral risk factors. In this section, respondents were also asked about their family's immunization status, sexual behavior, oral health, and children's health. This section was the most important one to accomplish our purpose of learning about the prevalence of health problems and health risk behaviors.

Section 3 asked questions about access to primary care, as well as availability and duration of health care and prescription coverage. Respondents were also asked to rate on a scale the quality of health care resources in the county and to describe what they feel is missing in the health care continuum. These answers will help us to identify barriers to health care and preventive care.

Section 4 assessed household safety and injury prevention issues. These questions dealt with topics such as: smoke detectors, guns, cardio-pulmonary resuscitation (CPR) knowledge, water safety, and seatbelt, child safety seat, and helmet use by respondents and their children.

In Section 5, the questions were about tobacco use. These questions asked about smoking status, number of cigarettes smoked per day, and attempts to quit smoking. There were also questions about smokeless tobacco and cigar use. Tobacco use is related to many health problems, such as cancer, respiratory disease, preterm/low birth weight births, and others.

The questions in Section 6 were related to alcohol consumption and drug use. These questions assessed drinking habits. They also addressed drunk driving and use of street drugs. Alcohol and drug abuse are risk factors for accidents and many other health problems.

Section 7 addressed community safety issues. The questions asked about the respondent's perception of the safety of their neighborhood, if they had ever been a victim of crime, and if so, what type of crime. Additionally, it asked a question about domestic violence.

## Administration Procedures

The questionnaire was designed to address the questions of interest to the seven task forces, but not be too long to discourage survey participation. The readability was kept at a basic level with check boxes in front of the response options. The survey was pre-tested to insure it did not require too much time to complete and that there was a clear understanding of the questions.

As described before, the questionnaire was mailed, accompanied by a cover letter explaining the purpose, who was sponsoring it, the anonymity issues, and who should complete the survey. There was one mailing, with no follow-up mailings, in order to ensure the anonymity of the respondents. A self-addressed, stamped envelope was included with the survey for the respondents to mail it back once completed. In addition, there were two articles in the local paper to encourage those who received a survey to participate.

# Survey Results

## I. Demographic Information

The survey was a self-administered questionnaire. The response rate was 29.3% and reflects the one time only mailing. Of the 1688 returned surveys, three surveys, two from respondents under age 18 and one with insufficient information, were excluded from the analysis. The median age of the respondents was 47 and the oldest was 96.

The proportion of respondents from each region of the county was almost similar to the distribution of the county population; 48.3% of the respondents were from the western portion of the county, 41.8% were from the central portion, and 9.9% were from the southern portion. More than two thirds of the respondents (70.7%) were female and 0.8% were of Hispanic origin (from any race).

Due to small proportions of race categories other than white, respondents were classified into two groups: White or NonWhite. Respondents were 95.6% White and 4.4% NonWhite. Respondents in the age groups 18-24 represented only 3.1% of the sample, but otherwise all other age groups are well represented. Most respondents had a higher education than the general population. Only 9.6% of the survey respondents had less than a high school education compared to 27.8% of general population, 25.8% of the survey respondents had four years or more of college compared to 7.5% of general population.

About 22% of the respondents had a household income of more than $75,000, a higher proportion than is found in the county (8.7%), and only 8.8% had less than $15,000 compared to 16.4% in general population. About 68% of the respondents were married compared to 58.3% in general population and 73.7% were employed or self-employed (Table 1).

Race, gender, education, and income were statistically adjusted to compensate for differences between the respondent population and the general county population.

**Table 1: Sample and Population Characteristics**

| | Survey Sample | | County Population % (1990 US Census) |
|---|---|---|---|
| | Number | % | |
| County Regions: West | 808 | 48.0 | 47.3 |
| Central | 700 | 41.5 | 43.8 |
| South | 166 | 9.9 | 8.9 |
| Unknown | 11 | 0.6 | -- |
| Male | 494 | 29.3 | 50.5 |
| Female | 1191 | 70.7 | 49.5 |
| White | 1600 | 95.0 | 94.1 |
| NonWhite* | 74 | 4.4 | 5.9 |
| Unknown | 11 | 0.6 | -- |
| Hispanic | 12 | 0.8 | 1.1 |
| Non Hispanic | 1673 | 99.2 | 98.9 |
| 18-24** | 53 | 3.1 | 10.1 |
| 25-34 | 303 | 18.0 | 17.0 |
| 35-44 | 393 | 23.3 | 15.9 |
| 45-54 | 364 | 21.6 | 11.2 |
| 55-64 | 244 | 14.5 | 8.5 |
| 65+ | 311 | 18.5 | 10.4 |
| Unknown | 17 | 1.0 | -- |
| Less than Grade 12 | 162 | 9.6 | 27.8 |
| Grade 12 or GED | 596 | 35.4 | 36.2 |
| College 1 year to 3 years | 484 | 28.7 | 28.5 |
| College 4 years or more | 435 | 25.8 | 7.5 |
| Unknown | 8 | 0.5 | -- |
| Less than $15,000 | 149 | 8.8 | 16.4 |
| $15,001 - $25,000 | 240 | 14.2 | 15.5 |
| $25,001 - $50,000 | 518 | 30.7 | 38.6 |
| $50,001 - $75,000 | 343 | 20.4 | 20.8 |
| More than $75,000 | 378 | 22.4 | 8.7 |
| Unknown | 57 | 3.5 | -- |
| Married | 1145 | 68.0 | 58.3 |
| Separated | 46 | 2.7 | 2.9 |
| Not married | 294 | 17.4 | 36.9 |
| Other | 191 | 11.3 | 1.9 |
| Unknown | 9 | 0.6 | -- |
| Employed | 1111 | 65.9 | |
| Self-employed | 132 | 7.8 | |
| Retired | 342 | 20.3 | N/A*** |
| Student | 11 | 0.7 | |
| Unable | 48 | 2.8 | |
| Out of work | 36 | 2.2 | |
| Unknown | 5 | 0.3 | |
| All | 1685 | 100 | 100 |

*NonWhite includes African American, Indian, Asian, and multiracial.
** Age distribution does not include population under 18 years of age.
*** Not available from Census Data.

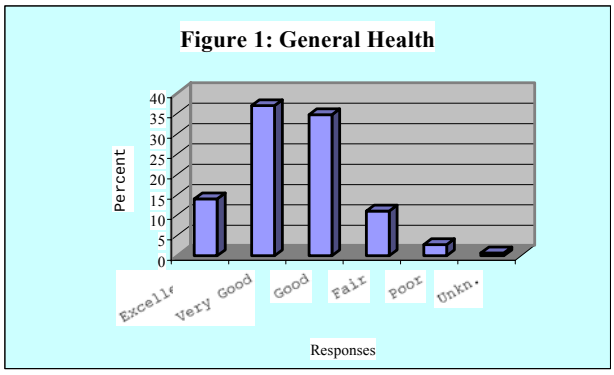
# II. Health Status

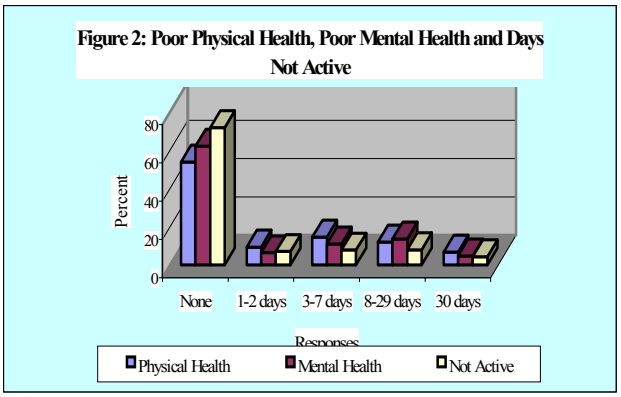
## Health Status

Survey participants were asked questions about their health status, which includes general health, physical health, mental health and overall health. They were asked to describe their general health with one of the categories: excellent, very good, good, fair or poor. They were also asked to specify the number of days during the past month their physical health and mental health was not good and for how many days they could not perform their usual daily activities because of poor health.

Most of the respondents were satisfied with their general health; they described it as excellent, very good or good (85.6%) while 13.7 % described their general health as fair or poor (Figure 1). More than half or 53.7% did not have any complaint about their physical health and 62.0% did not have a complaint about their mental health. Almost 7% reported poor physical health and 4.7% reported poor mental health for the entire past month.

For 71.7% of the respondents there were no days of inactivity due to poor health in the past month, but 4.3% could not do their usual activities such as self-care, work or recreation in the entire past month (Figure 2). The average number of days of poor physical health, poor mental health and days of no activities because of poor health in the past month was 2.0, 1.9 and 1.6, respectively.




## Lifestyle/Diet:

The Body Mass Index (BMI) is determined by dividing the weight in kilograms by the square of the height in meters. It is used to determine if the respondent is overweight. A BMI equal to or more than 27.3 is considered overweight for women. For men, a BMI equal to or more than

Table 2: Percent of Overweight

| | Yes | No | Unkn. |
|---|---|---|---|
| Race White | 39.7 | 57.8 | 2.5 |
| NonWhite | 43.0 | 47.9 | 9.1 |
| Gender Male | 38.2 | 59.1 | 2.7 |
| Female | 41.4 | 55.4 | 3.2 |
| All | 39.8 | 57.2 | 3.0 |

27.8 is considered overweight*. Based on this index, 39.8% of the respondents are overweight.

Females (59.5%) outnumbered the males (46.1%) who reported trying to lose weight. Interestingly, 72.7% of those who are overweight were trying to lose weight.

The most popular method of losing weight is exercise (19.3%), followed by reducing fat in diet (11.3%) and reducing calories in diet (10.3%). Half of the individuals trying to lose weight were doing so with more than one method at the same time.

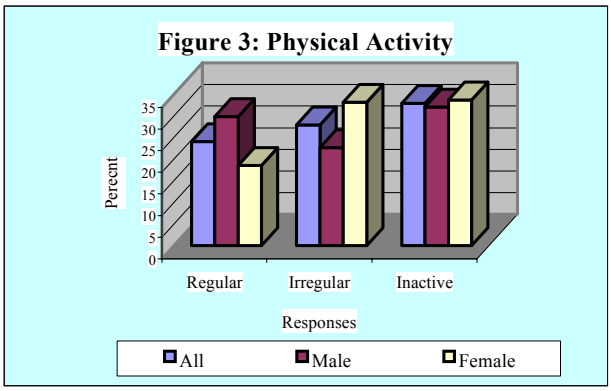
To the question of whether they have been given advice by a health professional about their weight, 22.6% of all the respondents said they were told to lose weight, 1.8% to gain weight and 5.2% to maintain their current weight. Most of the individuals who are overweight had been given advice to lose weight (80.5%).

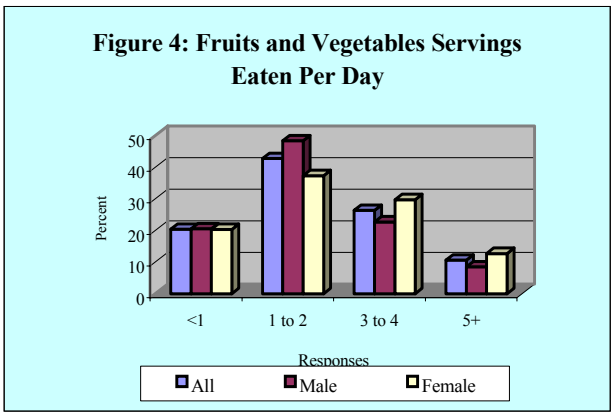
Physical activity/inactivity is classified in three categories. Respondents are considered inactive when they do not report any activities (does not exercise). It is considered irregular physical activity if they report exercising for at least 20 minutes between 1 and 2 times a week and regular physical activity when they exercise for at least 20 minutes for 3 or more times a week.

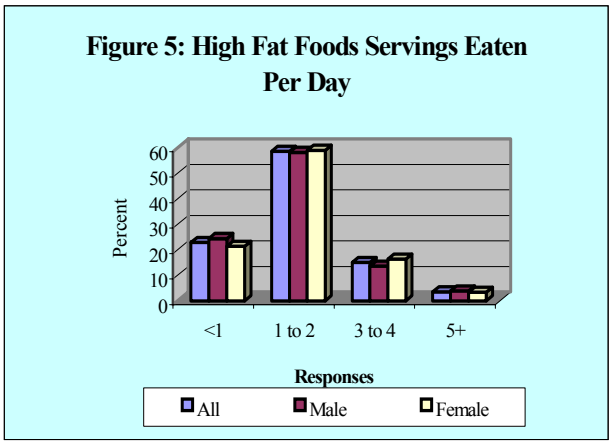
Based on this determination, 24.0% have regular physical activity, 27.9% have irregular physical activity, and 32.8% are considered physically inactive (Figure 3). The physical activity status was unknown for 15.3% of the respondents. Only 21.8% of those who are overweight have regular physical activity.

Participants were asked questions about their diet, principally fruit, vegetable, and high fat food intake. To the question of how many servings of fruits and vegetables do you usually eat per day, only 10.6% reported eating 5 or more servings a day and 20.4% reported eating less than 1 serving a day.

** CDC, BRFSS definition. Other institutions may use different criteria for defining overweight*



The majority of survey participants reported eating between 1 and 4 servings per day (Figure 4). Only 33.2% make an effort to eat 5 servings of fruits and vegetables each day (42.1% of females make an effort versus 24.4% of males). It appears that people make more effort to limit their high fat food intake than to increase their fruits and vegetables intake. About 72.8% said they limit their high fat food intake to 3 or less servings per day. And actually, 79.8% said they eat less than three high fat food servings per day (Figure 5).

Lyme disease is an infectious disease prevalent in Cecil County and deer ticks represent the vector for its transmission. Residents should protect themselves against tick bites when outdoors. In this survey, 52.0% of the respondents reported taking some kind of precautions against ticks or other insect bites when outdoors. More women than men take precaution against tick bites.

## Hypertension Awareness

Nearly one-third of the respondents said they had been told by a health professional that their blood pressure was high (Table 3). High blood pressure is more prevalent among the male population (36.2%) than the female population (25.3%). It is also more prevalent in the southern region of the county (32.5%) than in the central (27.0%) or the western (28.6%).

Respondents who never had their blood pressure checked or not checked within the past 2 years are considered to be unaware of their hypertension risk. Only 3.2% of the respondents are in this category (3.1% of males versus 3.4% of females). The percentages for the different regions of the county of those unaware of their risk for hypertension are 2.3% for the southern, 3.7% for the central and 3.1% for the western. Since hypertension is a major risk factor for heart disease and stroke, and many other health problems, it is important for people to get their blood pressure checked regularly.

## Cholesterol Awareness

Thirty-two percent of the respondents had been told by a health professional that they had a high blood cholesterol level. This percentage was higher for NonWhite and male respondents (Table 3). The percentage of respondents who had ever had their blood cholesterol checked was 80.4%. Eighty-six percent had had it checked in the past 2 years, and 95.1 % in the past 5 years (one Healthy People 2000 objective is to have 75% of the population 18 years and over who have their blood cholesterol checked within the past five years).

Participants who have never had their blood cholesterol checked or were last checked five or more years ago are considered to be unaware of their risk for having high blood cholesterol. About one fifth of the respondents were unaware of their risk with a higher percentage for females (25.2%) than males (20.4%). The percentages of those unaware of their risk were also higher for White (23.4%) than for NonWhite (16.3%).

Table 3: Percent of Persons Who Have High Blood Pressure/High Blood Cholesterol

| | | YES | NO | UNKNOWN |
|---|---|---|---|---|
| High Blood Pressure | White | 28.1 | 71.5 | 0.4 |
| | NonWhite | 33.8 | 66.2 | - |
| | Male | 36.2 | 63.6 | 0.2 |
| | Female | 25.3 | 74.3 | 0.4 |
| | All | 28.6 | 71.1 | 0.3 |
| High Blood Cholesterol | White | 31.5 | 67.9 | 0.6 |
| | NonWhite | 37.8 | 60.8 | 1.4 |
| | Male | 38.1 | 61.5 | 0.4 |
| | Female | 29.3 | 70.0 | 0.7 |
| | All | 31.9 | 67.5 | 0.6 |

## Diabetes

The prevalence of diabetes in the general population is 6.9%. This prevalence rate is higher among NonWhite than White, among male than female, and in the southern region of the county (Table 4). The survey reveals that NonWhite respondents who have higher rates of overweight also have higher rates of diabetes. The prevalence of pregnancy-induced diabetes was 2.0%.

Table 4: Percent of Diabetes *

| DIABETES | YES | NO | UNKNOWN |
|---|---|---|---|
| White | 6.6 | 89.8 | 0.7 |
| NonWhite | 13.5 | 78.4 | 2.7 |
| Male | 8.5 | 90.7 | 0.8 |
| Female | 6.2 | 88.8 | 0.8 |
| West | 6.7 | 89.4 | 0.6 |
| Central | 6.0 | 90.0 | 1.0 |
| South | 10.8 | 87.4 | 1.2 |
| All | 6.9 | 89.4 | 0.8 |

* Percentages do not add up to 100 because pregnancy-induced diabetes records were not included.

## Colorectal Cancer Screening

The fecal occult blood test is a test used to determine whether the stool contains blood. It is an initial screening tool for colorectal cancer, which is the third leading cause of cancer deaths in Cecil County for both men and women. In this survey, 46.5% of the population 50 years of age and older reported ever having a fecal occult blood test, but only 24.2% of those reported having this test in the preceding 2 years.

Sigmoidoscopy or proctoscopy is an exam that helps to diagnose cancer of the colon and the rectum. The adult population 50 years of age and older is recommended to have this exam, particularly those at high risk for colon cancer. Of the survey respondents, 43.6% of the adults aged 50 and older had had a sigmoidoscopy or proctoscopy for screening or diagnostic purposes, and 28.7% reported having had one within the past 5 years.

## Prostate Cancer Testing

Prostate cancer is the second leading cause of cancer deaths among men in Cecil County after lung cancer. From age forty, all men are advised to have an exam or a test for prostate cancer regularly. In this survey, male respondents were asked if they had been examined or tested for prostate cancer in the past 2 years. Most of the respondents 40 years of age and older reported being examined or tested in the past 2 years (70.7%). This percentage increased with males 50 years of age and older. There is no difference between White males and NonWhite males.

## Women's Health

***Mammogram***

A mammogram is an x-ray of each breast to look for breast cancer. The survey reveals that 85.6% of the women 40 years of age and older have had a mammogram. The percentage is higher for White women than for NonWhite women. Education and income were significant factors for having had a mammogram.

In this survey, 80.7% of women in the age group 40-49 have had a mammogram and 87.6% of women 50 and older have also had this exam. For women respondents in the age group 40-49, 55.0% reported having had their last mammogram in the past year and 18.4% had it within the past two years. For women 50 years of age and older, 58.3% had their last mammogram within a year and 16.6% had it within the past two years.

Table 5: Mammogram for Women 40 and Older (percent)

| | | YES | NO | UNKNOWN |
|---|---|---|---|---|
| Race | White | 87.5 | 11.8 | 0.7 |
| | NonWhite | 60.7 | 26.1 | 13.2 |
| Age | 40-49 | 80.7 | 17.7 | 1.6 |
| | 50-59 | 91.4 | 6.1 | 2.5 |
| | 60-64 | 92.9 | 7.1 | - |
| | 65+ | 83.1 | 15.8 | 1.1 |
| Education | Less than Grade 12 | 82.4 | 15.7 | 1.9 |
| | Grade 12 or GED | 85.1 | 13.4 | 1.5 |
| | College 1 year to 3 years | 88.8 | 10.2 | 1.0 |
| | College 4 years or more | 94.1 | 5.0 | 0.9 |
| Income | Less than $15,000 | 80.8 | 16.7 | 2.5 |
| | $15,001 - $25,000 | 81.0 | 19.0 | - |
| | $25,001 - $50,000 | 89.2 | 8.8 | 2.0 |
| | $50,001 - $75,000 | 90.8 | 7.8 | 1.4 |
| | More than $75,000 | 92.9 | 5.8 | 1.3 |
| All | | 85.6 | 12.9 | 1.5 |

Women who had never had a mammogram were asked what was the most important reason that they had not had the exam. About one-fifth (23.3%) of the women 40 years of age and older said that it was not recommended by a doctor and some 13.6% said that it was not needed or not necessary. Also, 20.3% of them cited not having health insurance and 5.8% cited cost of the exam as the reason for not having a mammogram. Women who did not have a mammogram in the past year were asked what was the most important reason why they had not. Of women 50 years of age and older, 14.2% said that it was not recommended by a doctor, 7.2% cited not having health insurance or cost as the reason. Another 4.1% said it was not needed and 49.0% did not give a reason. Only 0.6% said they had never heard of a mammogram.

Women were also asked what was the principal reason and whose idea it was to have their last mammogram. Eighty-four percent of the women who had a mammogram reported that the test was part of a routine checkup while 3.3% had the exam because they had breast cancer and 12.1% had it because of a breast problem other than cancer. The majority of women who had a mammogram said it was their doctor's idea to have the exam (64.5%), while 32.2% said it was their own idea and 2.2% said it was someone else's idea. The average number of mammograms in the last five years was 2.9 (+/-0.2) for women in the age group of 40 to 49 and 3.7 (+/-0.07) for women 50 and older.

### *Clinical Breast Exam*

A clinical breast exam is done by a health professional to examine the breasts for lumps. It is recommended for women to have this exam regularly. The majority of women (87.8%) had had a clinical breast exam. Fifty-eight percent of the women in the age group 40 and over had the exam within the past year and 16.1% had it within the past two years. The principal reason for having this exam was for a routine checkup.
The national Healthy People 2000 objective is for 60.0% of the women 50 and older to have had a breast examination and a mammogram in the preceding one to two years. In this survey, 74.9% of the women in this age category had received a clinical breast examination and a mammogram within the pas two years. For Maryland in 1997, this rate was 70.7%.

Table 6: Clinical Breast Exam (CBE) for Women 40 and Older (percent)

| EVER HAD CBE | | YES | NO | UNKNOWN |
|---|---|---|---|---|
| Race | White | 87.7 | 10.2 | 2.1 |
| | NonWhite | 87.7 | 12.3 | - |
| Age | 25-39 | 91.1 | 8.2 | 0.7 |
| | 40-49 | 96.3 | 1.2 | 2.5 |
| | 50-64 | 88.1 | 11.1 | 0.8 |
| | 65+ | 77.7 | 19.3 | 3.0 |
| Education | Less than Grade 12 | 80.3 | 16.6 | 3.1 |
| | Grade 12 or GED | 90.5 | 7.5 | 2.0 |
| | College 1 year to 3 years | 93.0 | 6.3 | 0.7 |
| | College 4 years or more | 94.7 | 5.3 | - |
| Income | Less than $15,000 | 80.6 | 15.5 | 3.9 |
| | $15,001 - $25,000 | 80.7 | 19.3 | - |
| | $25,001 - $50,000 | 94.1 | 4.4 | 1.5 |
| | $50,001 - $75,000 | 98.7 | - | 1.3 |
| | More than $75,000 | 96.3 | 2.2 | 1.5 |
| All | | 87.8 | 10.3 | 1.2 |

### *Papanicolaou (Pap) Test*

A Papanicolaou test (Pap test) is a test to identify pre-cancerous or cancerous lesions of the uterine cervix (cervical cancer). The majority of women with an intact uterine cervix (have not had a hysterectomy) have had a Pap test (94.0%). This varies significantly by race group with 94.8% for White and 82.6% for NonWhite (Table 7). Most of the women had their last Pap test within the past year (55.3%), and 17.7% had it within the past two years. Eighty-six percent of the women reported having the test as part of a routine checkup.

Table 7: Pap Test for Women 18 and Older (percent)

| EVER HAD PAP TEST | YES | NO | UNKNOWN |
|---|---|---|---|
| White | 94.8 | 3.6 | 1.6 |
| NonWhite | 82.6 | 14.6 | 2.8 |
| All | 94.0 | 4.3 | 1.7 |

***Hysterectomy***

Hysterectomy is a surgical procedure to remove the uterus. The survey shows that 29.6% of the women have had a hysterectomy and 83.6% of those women were 50 years of age or older.

## Children's Health

Of the survey participants, 38.2% have children under the age of 18 in their household. Women who are the birth mothers of the children in their household were asked if they had received prenatal care before the birth of each of their children. Most of these women had received prenatal care (96.1%).

The majority of respondents (92.2%) had health insurance for their children (Table 8). For children without health insurance, there was a significant difference by race group: 6.7% for White and 26.3% for NonWhite. Fewer children had dental insurance (72.5%). The percentage of children without dental insurance also varies significantly by race group: 26.7% for White and 42.4% for NonWhite.

More than three-fourths of the children had regular dental checkups and 97.4% are up to date on all of their immunizations. Almost 51% of those respondents who had children 6 years of age or younger in their household had had their children screened for lead poisoning and 35.3% had had them tested for lead poisoning.

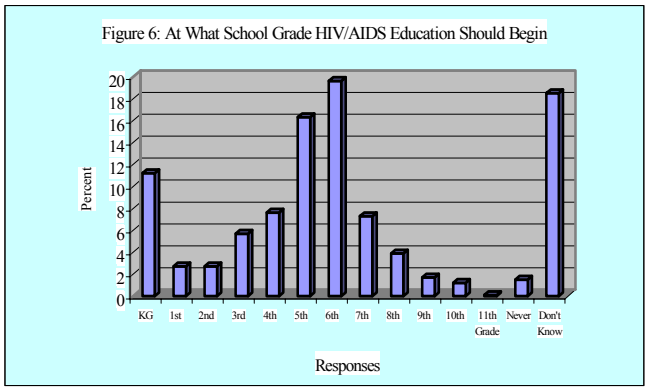
Table 8: Children's Health (percent)

| | Yes | No | Unknown/ Don't know |
|---|---|---|---|
| Health Insurance | 92.2 | 7.8 | -* |
| Dental Insurance | 72.5 | 27.5 | -* |
| Regular dental checkups | 77.4 | 22.6 | -* |
| Up to date on immunizations | 97.4 | 0.7 | 1.9* |
| Lead poisoning screening (6 or younger) | 50.5 | 32.6 | 16.9** |
| Lead poisoning test (6 or younger) | 35.3 | 52.4 | 12.3** |

* No response to this question
** The response was "Don't know"

Of the households with pre-school children, 35.0% reported the children were supervised by their parents or a licensed day care center and 49.0% of the households with school-age children reported they are supervised after school by their parents or grandparents. Many parents (84.0%) have had serious discussions with their children about problems such as drinking alcohol, sexually transmitted diseases, and the danger of using street drugs. Of the respondents with children 12 to 18 years of age in their household, 83.0% said they have had serious discussions with their child about pregnancy prevention: 38.5% had only discussions about sexual abstinence, 19.3% discussed only birth control and 31.2% discussed both sexual abstinence and birth control.

For HIV and AIDS education, most respondents said they think children should begin receiving education in elementary or middle school (Figure 6). Seventy-eight percent said the education should start before the 10th grade and 35.9% said it should begin at the 5th or 6th grade. Additionally, 72.0% of all respondents reported that they would encourage their teenager, if sexually active, to use a condom.




## Adult Immunization:

A national Healthy People 2000 objective is to have 60% of non-institutionalized persons 65 years and over immunized against influenza every year. Another objective is 60% of that same group to have ever received a pneumococcal immunization. In this survey, 70.4% of this

population had received a flu shot in the past year and 58.8% had had a pneumococcal vaccination. This rate for Cecil County also compares favorably to the 1997 data for the whole state, which indicated that 63.4% of adults 65 and older had received a flu shot and 41.0% had received a pneumococcal vaccination. Considering all age groups of the respondents, 40.7% had received a flu shot in the past year.

Table 9: Percent Adult Immunization (age 65 and older)

| | | YES | NO | UNKNOWN |
|---|---|---|---|---|
| Had flu vaccine Within past year | Male | 71.5 | 24.6 | 3.9 |
| | Female | 69.6 | 28.2 | 2.2 |
| | All | 70.4 | 26.7 | 2.9 |
| Had ever had Pneumonia vaccine | Male | 58.5 | 35.4 | 6.1 |
| | Female | 59.1 | 37.6 | 3.3 |
| | All | 58.8 | 36.7 | 4.5 |

## Sexual Behavior/HIV/AIDS

For respondents who are sexually active adults, only 5.6% had had multiple sex partners in the past 12 months. Only 23.2% of unmarried respondents who are sexually active had used condoms the last time they had sexual intercourse. All respondents were asked how effective they think a properly used condom is for protection against becoming infected with HIV. Almost 42% of the respondents 18 to 49 years old said a condom was very effective. This rate compares favorably to the 1997 Maryland BRFSS rate of 30.7% who said condom use was very effective.

Table 10: How Effective Condom Is - Adults 18 to 49 years old (percent)

| | | Very Effective | Somewhat Effective | Not at All Effective | Unknown |
|---|---|---|---|---|---|
| Race group | White | 42.5 | 51.2 | 3.7 | 2.6 |
| | NonWhite | 31.1 | 51.1 | 11.1 | 6.7 |
| Gender | Male | 44.9 | 45.4 | 5.8 | 3.9 |
| | Female | 41.1 | 52.8 | 3.6 | 2.5 |
| All | | 41.9 | 51.1 | 4.1 | 2.9 |

Respondents were asked to rate their chance of becoming infected with the HIV virus. In this survey, 5.6% thought they were at high or medium risk. Of all the respondents ages 18 to 64, 56.4% reported being tested for HIV, which compares to the Maryland rate of 52.6% (1997). Of those who reported changing their behavior to avoid risk of HIV infection, 16.1% had decreased their number of partners or become abstinent, 78.9% had intercourse with only one partner and 5.0% always used condoms.

Table 11: Chances for Becoming Infected with HIV. Adults 18 to 64 years old (percent)

| | | High | Medium | Low | None | Unknown |
|---|---|---|---|---|---|---|
| Race group | White | 1.4 | 4.2 | 39.3 | 53.3 | 1.8 |
| | NonWhite | 3.4 | 3.4 | 44.1 | 49.1 | - |
| Gender | Male | 2.0 | 3.4 | 39.6 | 53.0 | 2.0 |
| | Female | 1.3 | 4.4 | 39.3 | 53.2 | 1.8 |
| All | | 1.5 | 4.1 | 39.4 | 53.1 | 1.9 |

## Oral Health

More than half of all respondents visited a dentist or a dental clinic during the past year (53.8%). There is a strong correlation between higher education and income and having visited the dentist or a dental clinic within the past year (Table 12). For respondents who did not visit the dentist in the past year, the most reported cause was they had no reason to go, but 26.6% cited cost as a reason and 13.7% cited fear of the procedures. About 17% of all respondents had had 6 or more teeth removed and 8.4% had had all teeth removed.

Table 12: Time Since Last Visit to the Dentist (percent)

| | | Past Year | Past 2 years | Past 5 years | 5+ years | **Never** | Unkn. |
|---|---|---|---|---|---|---|---|
| Race | White | 54.4 | 17.6 | 8.0 | 16.7 | 1.3 | 2.0 |
| | NonWhite | 46.5 | 11.7 | 14.0 | 17.3 | - | 10.5 |
| Gender | Male | 51.5 | 16.7 | 9.5 | 17.3 | 1.5 | 3.5 |
| | Female | 56.0 | 17.7 | 7.6 | 16.1 | 0.8 | 1.8 |
| Age | 18-24 | 40.2 | 43.2 | 7.2 | 7.9 | 1.5 | - |
| | 25-34 | 57.2 | 22.0 | 13.6 | 7.2 | - | - |
| | 35-44 | 57.7 | 19.3 | 13.8 | 9.1 | 0.1 | - |
| | 45-54 | 62.0 | 16.1 | 10.0 | 10.7 | 0.8 | 0.4 |
| | 55-64 | 60.5 | 15.6 | 6.6 | 14.8 | 1.9 | 0.6 |
| | 65 + | 44.9 | 13.4 | 3.8 | 30.4 | 2.1 | 5.4 |
| Education | < Grade 12 | 37.2 | 20.7 | 5.6 | 27.0 | 3.2 | 6.3 |
| | Grade 12/GED | 53.4 | 17.7 | 10.7 | 16.7 | 0.3 | 1.2 |
| | College 1yr. to 3 yr. | 64.5 | 14.6 | 10.9 | 9.1 | 0.2 | 0.7 |
| | College 4 yr. + | 77.4 | 11.5 | 6.9 | 4.2 | - | - |
| Income | Less than $15,000 | 31.2 | 17.2 | 10.0 | 29.4 | 2.2 | 10.0 |
| | $15,001 - $25,000 | 47.1 | 19.6 | 8.4 | 22.7 | 1.5 | 0.7 |
| | $25,001 - $50,000 | 54.5 | 20.2 | 6.0 | 16.9 | 1.1 | 1.3 |
| | $50,001 - $75,000 | 58.4 | 18.8 | 12.7 | 9.6 | 0.3 | 0.2 |
| | More than $75,000 | 74.6 | 12.6 | 6.6 | 5.6 | 0.6 | - |
| All | | 53.8 | 17.2 | 8.5 | 16.7 | 1.2 | 2.6 |

More than half of the respondents had dental insurance, with the same proportion for male and female and a higher rate for White than for NonWhite (Table 13). Higher education and higher income also are factors for having dental insurance. In the 1998 Maryland BRFSS, 65.3% of the population surveyed had dental coverage.

Table 13: Dental Insurance (percent)

| | | YES | NO | UNKNOWN |
|---|---|---|---|---|
| Race | White | 58.7 | 39.0 | 2.3 |
| | NonWhite | 46.3 | 43.4 | 10.3 |
| Gender | Male | 57.7 | 38.7 | 3.6 |
| | Female | 57.9 | 39.7 | 2.4 |
| Age | 18-24 | 43.0 | 57.0 | - |
| | 25-34 | 66.2 | 33.1 | 0.7 |
| | 35-44 | 64.5 | 35.5 | - |
| | 45-54 | 60.9 | 37.6 | 1.5 |
| | 55-64 | 61.9 | 37.8 | 0.3 |
| | 65+ | 50.1 | 44.2 | 5.7 |
| Education | Less than Grade 12 | 45.9 | 46.7 | 7.4 |
| | Grade 12 or GED | 61.1 | 37.6 | 1.3 |
| | College 1 year to 3 years | 62.5 | 37.5 | - |
| | College 4 years or more | 70.5 | 29.3 | 0.2 |
| Income | Less than $15,000 | 32.4 | 56.0 | 11.6 |
| | $15,001 - $25,000 | 50.7 | 48.8 | 0.5 |
| | $25,001 - $50,000 | 55.0 | 43.6 | 1.4 |
| | $50,001 - $75,000 | 67.7 | 32.3 | - |
| | More than $75,000 | 81.1 | 18.7 | 0.2 |
| All | | 57.8 | 39.2 | 3.0 |

# III. Health Care Access

In this survey, health care access was measured by asking whether the respondent had a primary care physician, health coverage, and their overall accessibility to health care resources in the community. Almost 92% of all respondents had a family doctor with the same proportion for male and female but higher for White (92.1%) than for NonWhite (86.9%). Most of the respondents had visited their doctor within the past year for routine checkups (77.7%), but 5.4% had not visited their doctor for 5 or more years (Table 14).

Table 14: Last Visited a Doctor (percent)

| | | Past year | Past 2 Years | Past 5 Years | 5+ years | Unknown |
|---|---|---|---|---|---|---|
| Race | White | 77.3 | 11.4 | 5.0 | 5.3 | 1.0 |
| | NonWhite | 83.8 | 3.2 | 3.1 | 7.9 | 2.0 |
| Gender | Male | 77.7 | 10.8 | 5.2 | 5.4 | 0.9 |
| | Female | 77.8 | 10.8 | 4.7 | 5.4 | 1.3 |
| Age | 18-24 | 84.2 | 7.1 | 4.8 | 3.0 | 0.9 |
| | 25-34 | 69.3 | 14.3 | 10.8 | 5.1 | 0.5 |
| | 35-44 | 62.6 | 16.7 | 7.2 | 13.0 | 0.5 |
| | 45-54 | 66.6 | 18.5 | 5.6 | 8.0 | 1.3 |
| | 55-64 | 87.6 | 6.8 | 3.2 | 1.2 | 1.2 |
| | 65+ | 90.3 | 4.3 | 1.7 | 2.2 | 1.5 |
| Education | <Grade 12 | 87.3 | 7.1 | 1.0 | 3.4 | 1.2 |
| | Grade 12 or GED | 72.9 | 14.0 | 4.5 | 7.2 | 1.4 |
| | College 1yr. to 3 yr. | 75.2 | 9.9 | 9.1 | 5.2 | 0.6 |
| | College 4 yr. or more | 72.2 | 12.6 | 8.5 | 6.3 | 0.4 |
| Income | Less than $15,000 | 86.9 | 6.4 | 2.2 | 3.7 | 0.8 |
| | $15,001 - $25,000 | 80.3 | 6.8 | 3.3 | 8.7 | 0.9 |
| | $25,001 - $50,000 | 78.1 | 11.7 | 4.4 | 5.5 | 0.3 |
| | $50,001 - $75,000 | 72.8 | 15.3 | 5.6 | 5.9 | 0.4 |
| | More than $75,000 | 70.7 | 15.1 | 7.9 | 4.4 | 1.9 |
| All | | 77.7 | 10.8 | 4.9 | 5.4 | 1.2 |

The majority of respondents had health coverage including health insurance, prepaid plans such as HMOs or governmental plans such as Medicare. More White than NonWhite and more males than females had health coverage (Table 15). Compared to the 13.6% of Maryland residents who did not have health coverage in 1998 (BRFSS), this survey reveals that only 9.2 % of the respondents had no health coverage. The respondents who did not have health coverage were asked the main reason they did not have coverage. Most of them cited high premiums (32%) and 22.5% said it was because they were unemployed. The rest cited different other reasons.

Of the respondents who have health coverage, 45.3% have the coverage through their employer and 26.5% through Medicare. More than two-thirds of the respondents have had their health coverage for five or more years, but 12.4% have had it for less than a year.

Table 15: Health Care Coverage (percent)

| | | Yes | No | Unknown |
|---|---|---|---|---|
| Race | White | 89.8 | 8.4 | 1.8 |
| | NonWhite | 81.6 | 17.8 | 0.6 |
| Gender | Male | 92.3 | 5.7 | 2.0 |
| | Female | 85.7 | 12.7 | 1.6 |
| Age | 18-24 | 65.4 | 32.2 | 2.4 |
| | 25-34 | 87.3 | 11.8 | 0.9 |
| | 35-44 | 85.9 | 13.6 | 0.5 |
| | 45-54 | 82.0 | 17.9 | 0.1 |
| | 55-64 | 93.6 | 4.8 | 1.6 |
| | 65+ | 95.7 | 0.6 | 3.7 |
| Education | <Grade 12 | 87.9 | 8.9 | 3.2 |
| | Grade 12 or GED | 86.6 | 12.3 | 1.1 |
| | College 1y. to 3 y. | 90.4 | 8.4 | 1.2 |
| | College 4 y. or more | 96.4 | 3.4 | 0.2 |
| Income | Less than $15,000 | 82.9 | 13.8 | 3.3 |
| | $15,001 - $25,000 | 80.9 | 18.7 | 0.4 |
| | $25,001 - $50,000 | 89.1 | 10.2 | 0.7 |
| | $50,001 - $75,000 | 96.8 | 2.5 | 0.7 |
| | More than $75,000 | 96.2 | 2.1 | 1.7 |
| Total | | 89.1 | 9.2 | 1.7 |

Respondents were also asked if they had not been able to get the health care they needed; most of them reported that they had (71.4%). For those who did not get the care they needed, the main reason cited was not having health insurance. Sixteen percent of the respondents reported there was a time during the past 12 months when they needed to see a doctor, but could not because of the cost, and 13.7% could not get a prescription that they needed. Cost as a barrier was reported by more NonWhite than White, and by more females than males. The younger age groups had the higher percentages of inability to see a doctor because of cost and not getting a prescription they needed. For the age group of 55 and over, not being able to get a prescription they needed was more of a problem than not being able to see a doctor because of cost. Less education and lower income correlated for all ages with reporting cost as a barrier to health care access. Most of the respondents who did not receive the prescriptions they needed cited not having insurance coverage as the reason.

Respondents were asked to determine how adequate health care resources were in their community by rating this on a scale from 1 to 7 (1 being not at all adequate and 7 being very adequate). About thirty-two percent rated the adequacy of the resources at 7 and 17.6% at 6; that is, about half of the survey participants are very satisfied with the health care resources in their community.

# IV. Household Safety and Injury Control

Several questions about smoke detectors, guns, and use of passenger safety devices assessed safety of household members. Respondents were also asked if members of their household knew how to do cardio-pulmonary resuscitation (CPR) and how to swim or tread water.

About ninety percent of the respondents had working smoke detectors on each floor of their home. For 37.8% of them, the smoke detector was tested within the past month, for 40.9% it was tested within the past six months and for 13.1% the smoke detector was tested within the past year. For 8.2% of the respondents, the smoke detector was last tested one or more years ago or was never tested. About forty-four percent of the respondents have a gun in their home or vehicle, more White than NonWhite and more male than female. Respondents with a higher income are more likely to keep a gun. More males than females keep a gun and keep it loaded, but similar proportions of males and females keep their firearms in a locked area.

More than two-thirds of all respondents reported that all members of their households, age 2 and older, know how to swim or tread water, which is important in our water-oriented community. Also, more than half reported that someone in their household knew CPR.

Table 16: Safety Measures (percent)

| | | Have Smoke Detector | Keep a Gun | Keep Gun Loaded | Keep Firearms Locked | Know CPR | Know How to Swim |
|---|---|---|---|---|---|---|---|
| Race | White | 90.4 | 45.6 | 11.7 | 23.4 | 55.2 | 63.4 |
| | NonWhite | 91.6 | 22.1 | 5.6 | 11.7 | 54.0 | 48.6 |
| Gender | Male | 89.6 | 50.9 | 16.9 | 22.0 | 56.5 | 66.1 |
| | Female | 91.1 | 36.6 | 5.6 | 22.8 | 53.9 | 59.5 |
| Age | 18-24 | 87.7 | 32.1 | 13.2 | 12.8 | 76.7 | 77.0 |
| | 25-34 | 94.4 | 35.5 | 10.7 | 25.1 | 77.3 | 70.3 |
| | 35-44 | 93.3 | 52.1 | 10.0 | 31.3 | 68.7 | 75.2 |
| | 45-54 | 91.8 | 54.1 | 16.7 | 25.7 | 67.7 | 69.7 |
| | 55-64 | 86.7 | 52.7 | 15.8 | 25.5 | 43.2 | 60.6 |
| | 65+ | 88.1 | 33.8 | 7.0 | 14.5 | 36.5 | 49.8 |
| Education | <Grade 12 | 92.1 | 37.1 | 8.8 | 20.4 | 42.5 | 45.0 |
| | Grade 12/ GED | 88.0 | 48.4 | 12.8 | 24.4 | 57.9 | 67.2 |
| | College 1y. to 3 | 90.0 | 48.9 | 15.1 | 26.5 | 68.1 | 72.1 |
| | College 4 y. + | 92.9 | 41.0 | 8.0 | 17.6 | 60.2 | 79.2 |
| Income | Less than $15,000 | 90.5 | 25.9 | 7.7 | 15.6 | 41.9 | 46.3 |
| | $15,001 - $25,000 | 87.3 | 38.0 | 11.4 | 18.1 | 50.5 | 61.2 |
| | $25,001 - $50,000 | 89.7 | 51.9 | 12.0 | 30.2 | 51.2 | 59.9 |
| | $50,001 - $75,000 | 94.3 | 50.4 | 13.0 | 24.4 | 61.3 | 69.8 |
| | More than $75,000 | 90.9 | 54.9 | 12.5 | 26.3 | 70.9 | 77.3 |
| All | | 90.4 | 43.6 | 11.2 | 22.4 | 55.2 | 62.7 |

Respondents who reported that they did not always use their seatbelts when they drive or ride in a car are considered at risk for injury. For those adults who are at risk (23.9%), the percentage is higher for NonWhite than White and higher for male than female. This rate is similar to the rate of 23.8% for Maryland in 1997 (BRFSS).

Of the respondents who have children in their household, 81.5% reported that their children always use a safety seat or a seatbelt. Only 28.5% of those respondents reported that their children always use a bicycle helmet (21.0% never use a helmet).

Table 17: Percent of Seatbelt/Safety Seat and Helmet Use

| | Always | Nearly Always | Some-times | Seldom | Never | Unknown |
|---|---|---|---|---|---|---|
| Adult use of seatbelts | 75.7 | 11.8 | 7.0 | 3.0 | 2.1 | 0.4 |
| Children use seatbelts or safety seats | 81.5 | 7.0 | 3.5 | 0.8 | 0.2 | 7.0 |
| Children use bicycle helmets | 28.5 | 15.5 | 10.1 | 9.2 | 21.0 | 15.7 |

# V. Tobacco Use

## Cigarette Smoking

Almost 23% of all respondents are current smokers. This rate is similar to the rate of 22.4% for Maryland (1998 BRFSS). The percentage is higher for NonWhite than White, but similar for male and female. Smoking is also more prevalent among the younger age groups and among those with lower incomes (Table 18). The average number of cigarettes smoked per day for current smokers is 7.9 (± 0.7). The average age when they began to smoke was 16.3 (± 0.2).

Table 18: Percent of Current Smokers

| | | YES | NO | UNKNOWN |
|---|---|---|---|---|
| Race | White | 22.5 | 76.9 | 0.6 |
| | NonWhite | 27.0 | 68.9 | 4.1 |
| Gender | Male | 22.5 | 76.7 | 0.8 |
| | Female | 22.8 | 76.4 | 0.8 |
| Age | 18-24 | 37.7 | 62.3 | - |
| | 25-34 | 28.4 | 71.0 | 0.6 |
| | 35-44 | 27.5 | 72.0 | 0.5 |
| | 45-54 | 22.0 | 77.7 | 0.3 |
| | 55-64 | 20.5 | 79.1 | 0.4 |
| | 65+ | 10.6 | 87.1 | 2.3 |
| Education | <Grade 12 | 23.5 | 72.2 | 4.3 |
| | Grade 12 or GED | 30.2 | 69.1 | 0.7 |
| | College 1yr. to 3 yr. | 23.1 | 76.4 | 0.5 |
| | College 4 yr. or more | 11.7 | 88.0 | 0.3 |
| Income | Less than $15,000 | 32.7 | 63.3 | 4.0 |
| | $15,001 - $25,000 | 31.0 | 68.2 | 0.8 |
| | $25,001 - $50,000 | 25.5 | 74.1 | 0.4 |
| | $50,001 - $75,000 | 21.9 | 77.8 | 0.3 |
| | More than $75,000 | 17.5 | 82.2 | 0.3 |
| All | | 22.6 | 76.6 | 0.8 |

Sixty percent of the smokers who had quit smoking did so by the time they were 52 years old. Respondents who reported smoking in the past year were asked if they had tried to quit during that time. Of the respondents who smoked in the past year, 16.4% reported they had tried to quit, but started smoking again. Fourteen percent did not try to quit; only 5.2% said they did try to quit and were successful. Sixty-four percent of those who smoked in the past year did not respond to this question. The most popular method used to quit was “cold turkey”; 72.7% of those who did quit used this method alone. The next most popular method was the nicotine

patch (7.2%). Others reported using several methods simultaneously such as cessation classes or support groups, oral medications and/or nicotine replacement (patch, spray or gum).

## Cigars and Smokeless Tobacco Use

Almost 5% of all respondents are current cigar smokers and 14.8% reported that they had used cigars in the past. More NonWhites are current cigar users but more Whites had used cigars in the past. Males surpassed females in both current and past use of cigars. The prevalence of current smokeless tobacco use is 1.6% but 10.7% reported they had used smokeless tobacco in the past. This prevalence is higher for White than NonWhite and for male than female. Cigar and smokeless tobacco use does not vary significantly by age, education or income (Table 19).

Table 19: Percent of Smokeless Tobacco and Cigar Use

| | | Cigars | | Smokeless tobacco | |
|---|---|---|---|---|---|
| | | Current use | Ever used | Current use | Ever used |
| Race | White | 3.4 | 14.9 | 1.6 | 11.1 |
| | NonWhite | 19.9 | 11.2 | 1.1 | 6.1 |
| Gender | Male | 9.0 | 23.9 | 3.1 | 15.4 |
| | Female | 0.5 | 6.0 | 0.2 | 6.2 |
| Age | 18-24 | 2.6 | 14.0 | -- | 13.9 |
| | 25-34 | 8.8 | 7.4 | 1.9 | 10.4 |
| | 35-44 | 6.1 | 15.4 | 3.1 | 13.7 |
| | 45-54 | 6.6 | 14.9 | 1.3 | 7.8 |
| | 55-64 | 2.6 | 18.2 | 1.0 | 12.5 |
| | 65+ | 0.3 | 15.7 | 1.2 | 9.9 |
| Education | < Grade 12 | 3.5 | 12.2 | 0.8 | 10.9 |
| | Grade 12 or GED | 5.1 | 14.1 | 1.3 | 10.2 |
| | College 1yr. to 3 yr. | 5.2 | 16.0 | 3.3 | 11.4 |
| | College 4 yr. or more | 5.5 | 20.2 | 1.9 | 10.6 |
| Income | Less than $15,000 | 3.8 | 7.1 | 1.5 | 6.7 |
| | $15,001 - $25,000 | 5.6 | 18.0 | 1.4 | 13.9 |
| | $25,001 - $50,000 | 3.8 | 17.1 | 2.6 | 12.2 |
| | $50,001 - $75,000 | 3.5 | 16.5 | 1.4 | 10.7 |
| | More than $75,000 | 6.4 | 17.2 | 1.4 | 11.3 |
| All | | 4.6 | 14.8 | 1.6 | 10.7 |

# VI. Alcohol Consumption and Drug Use

When 5 or more drinks of alcoholic beverages have been consumed on one occasion at least one time in the past month, this is defined as acute alcohol abuse or binge drinking. Based on this definition, the prevalence of acute alcohol abuse was 12.0%. Having 5 or more drinks on an occasion was reported more by White and male respondents and by the younger age groups.

Table 20: Percent of all respondents reporting consumption of 5 or more drinks on one or more occasions in the past month (acute alcohol abuse). *

| | | One or more times | None | Unknown |
|---|---|---|---|---|
| Race | White | 12.1 | 86.5 | 1.4 |
| | NonWhite | 10.8 | 85.2 | 4.0 |
| Gender | Male | 16.2 | 83.2 | 0.6 |
| | Female | 8.1 | 89.6 | 2.3 |
| Age | 18-20 | 15.2 | 84.8 | - |
| | 21-24 | 33.2 | 66.8 | - |
| | 25-34 | 23.3 | 75.5 | 1.2 |
| | 35-44 | 17.6 | 81.5 | 0.9 |
| | 45-54 | 10.3 | 88.6 | 1.1 |
| | 55-64 | 12.3 | 87.2 | 0.5 |
| | 65+ | 4.2 | 92.8 | 3.0 |
| All | | 12.0 | 86.4 | 1.6 |

*Denominator is all respondents.

The rates in Table 20 are for all respondents in the survey, regardless of whether they had alcohol in the past month or not. Among those who had alcohol in the past month, 21.7% had 5 or more drinks on one or more occasions.

When the respondent reports having had 60 or more drinks in the past month, this is considered chronic alcohol abuse. The prevalence of chronic alcohol abuse was 7.1% (Table 21). The rate of chronic alcohol abuse was higher for White and for male respondents. There was no significant variation by age group.

Table 21: Percent of all respondents reporting 60 or more drinks in the past month (chronic alcohol abuse)

| | | YES | NO | UNKN. |
|---|---|---|---|---|
| Race | White | 7.2 | 89.5 | 3.3 |
| | NonWhite | 4.7 | 90.8 | 4.5 |
| Gender | Male | 11.3 | 86.3 | 2.4 |
| | Female | 3.0 | 92.5 | 4.5 |
| Age | 18-24 | 10.8 | 89.2 | - |
| | 25-34 | 8.4 | 85.2 | 6.4 |
| | 35-44 | 5.8 | 92.4 | 1.8 |
| | 45-54 | 8.0 | 90.6 | 1.4 |
| | 55-64 | 10.1 | 88.1 | 1.8 |
| | 65+ | 5.1 | 89.7 | 5.2 |
| All | | 7.1 | 89.5 | 3.4 |

The respondents were asked how many times in the past month that they had driven when they had too much to drink. In response to this question, 2.1% had driven at least once in the past month when they had too much to drink and are considered at risk for an accident. Respondents were also asked if they had been a passenger in a vehicle driven by someone who had too much alcohol to drink or taken drugs; 3.1% responded yes to this question.

Table 22: Percent of Driving When Had Too Much to Drink (Drunk Driving)

| | | One or more times | None | Unknown |
|---|---|---|---|---|
| Race | White | 2.3 | 96.4 | 1.3 |
| | NonWhite | - | 96.0 | 4.0 |
| Gender | Male | 3.5 | 95.9 | 0.6 |
| | Female | 0.8 | 96.9 | 2.3 |
| Age | 18-24 | 11.4 | 88.6 | - |
| | 25-34 | 4.3 | 94.1 | 1.6 |
| | 35-44 | 3.2 | 96.4 | 0.4 |
| | 45-54 | 2.3 | 96.8 | 0.9 |
| | 55-64 | 1.7 | 97.4 | 0.9 |
| | 65+ | - | 97.2 | 2.8 |
| All | | 2.1 | 96.4 | 1.5 |

The prevalence rate of street drugs use in the past six months is 4.0%. Almost 21% reported that they had used street drugs in the past. Respondents in the age group 18 to 24 had significantly higher rates of street drugs use. While more males than females have used street drugs in the past six months, the percent of those who have ever used street drugs is not significantly different between male and female.

Table 23: Percent of Persons Who Have Used Street Drugs

| | | Used in Past Six Months | Ever Used |
|---|---|---|---|
| Race | White | 3.6 | 20.6 |
| | NonWhite | 5.4 | 23.1 |
| Gender | Male | 5.4 | 21.3 |
| | Female | 2.7 | 20.3 |
| Age | 18-24 | 33.0 | 68.2 |
| | 25-34 | 7.0 | 43.4 |
| | 35-44 | 9.4 | 46.2 |
| | 45-54 | 2.3 | 23.6 |
| | 55-64 | 0.2 | 3.3 |
| | 65+ | - | 0.5 |
| All | | 4.0 | 20.8 |

# VII. Community Safety

In this part of the survey, respondents were asked how safe from crime they considered their neighborhood to be. The majority of them (94.3%) considered their neighborhood safe (extremely safe, quite safe and slightly safe) but 4.8% said it was not at all safe.

Table 24: Safe Neighborhood (percent)

| | | Extremely Safe | Quite Safe | Slightly Safe | Not at All Safe | Unknown |
|---|---|---|---|---|---|---|
| Race | White | 13.3 | 60.0 | 21.3 | 4.6 | 0.8 |
| | NonWhite | 7.9 | 49.1 | 34.6 | 7.7 | 0.7 |
| Gender | Male | 13.4 | 60.9 | 20.1 | 4.6 | 1.0 |
| | Female | 12.5 | 57.4 | 24.3 | 4.9 | 0.9 |
| Age | 18 to 65 | 14.4 | 59.5 | 21.0 | 4.6 | 0.5 |
| | 65 and older | 10.1 | 59.5 | 23.4 | 5.1 | 1.9 |
| All | | 12.9 | 59.1 | 22.3 | 4.8 | 0.9 |

All respondents were then asked if any member of their household had been a victim of a crime in their community. Nineteen percent reported someone had been a victim of a crime. Respondents 65 years of age and older were less likely to be victim of a crime than those under 65.

Table 25: Percent of Households Where a Member Had Been a Victim of a Crime

| | | YES | NO | UNKNOWN |
|---|---|---|---|---|
| Race | White | 18.7 | 79.2 | 2.1 |
| | NonWhite | 18.9 | 76.1 | 5.0 |
| Gender | Male | 17.5 | 79.8 | 2.7 |
| | Female | 19.9 | 78.0 | 2.1 |
| Age | Less than 65 | 22.2 | 76.3 | 1.5 |
| | 65 and older | 11.8 | 84.1 | 4.1 |
| All | | 18.7 | 78.9 | 2.4 |

The most prevalent type of crime reported was theft (31.1%), followed by property damage (18.8%), but 34.8% reported being victims of multiple types of crime.

Table 26: Types of Crime Reported (percent)

| | | Theft | Property Damage | Breaking &Entering | Assault | Stalking | Robbery | Multiple Crimes | Other | Unknown |
|---|---|---|---|---|---|---|---|---|---|---|
| Race | White | 29.6 | 20.1 | 5.9 | 3.5 | 0.3 | 1.7 | 36.1 | 2.4 | 0.4 |
| | NonWhite | 47.4 | 4.5 | 3.9 | 15.3 | - | 7.5 | 21.4 | - | - |
| Gender | | | | | | | | | | |
| | Male | 33.5 | 21.4 | 3.6 | 1.3 | - | 1.8 | 35.4 | 2.5 | 0.5 |
| | Female | 29.2 | 16.7 | 7.5 | 7.0 | 0.6 | 2.4 | 34.4 | 2.0 | 0.3 |
| Age | 18 to 65 | 27.0 | 20.8 | 5.3 | 0.8 | - | 3.1 | 39.2 | 3.7 | - |
| | 65 + | 32.2 | 18.6 | 5.9 | 5.4 | 0.4 | 1.9 | 33.2 | 1.9 | 0.5 |
| All | | 31.1 | 18.8 | 5.7 | 4.4 | 0.3 | 2.1 | 34.8 | 2.2 | 0.4 |

Domestic violence was assessed in the last question of the survey by asking participants to report if they or any member of their household had been a victim of domestic violence. The prevalence of domestic violence is 11.6%. That is, about 1 in 10 respondents had a member of their household who had been a victim of domestic violence. Having a member of the household who was a victim of domestic violence was more frequently reported by female respondents and those aged 18 to 65.

Table 27: Percent of Households That Had a Victim of Domestic Violence

| | | YES | NO | UNKNOWN |
|---|---|---|---|---|
| Race | White | 11.6 | 86.9 | 1.5 |
| | NonWhite | 11.1 | 87.4 | 1.5 |
| Gender | Male | 5.8 | 92.4 | 1.8 |
| | Female | 17.2 | 81.6 | 1.2 |
| Age | 18 to 65 | 15.1 | 84.2 | 0.7 |
| | 65 and older | 4.2 | 92.6 | 3.2 |
| All | | 11.6 | 86.8 | 1.6 |

# Appendices

# Appendix A

# Appendix A: Cecil County Population

Table 1: Cecil County Population Estimates by Age Group and Race (1997)

| Age Group | White | Non White | | | Total |
|---|---|---|---|---|---|
| | | Total | Afr. Am. | Other | |
| <1 | 1,020 | 60 | 40 | 20 | 1,080 |
| 1-4 | 4,120 | 200 | 170 | 30 | 4,320 |
| 5-17 | 15,320 | 1,130 | 970 | 160 | 16,450 |
| 18-44 | 30,580 | 2,170 | 1,910 | 260 | 32,750 |
| 45-64 | 16,610 | 900 | 730 | 170 | 17,510 |
| 65+ | 8,330 | 330 | 310 | 20 | 8,660 |
| Total | 75,980 | 4,790 | 4,130 | 660 | 80,770 |

*Source: Maryland Vital Statistics Annual Report (1997)*

Table 2: Cecil County Population Estimates by Race and Gender (1997)

| Race | Cecil County Male | | Cecil County Female | | Cecil County Total | | Maryland (Percent) |
|---|---|---|---|---|---|---|---|
| | Number | % | Number | % | Number | % | |
| White | 38,160 | 47.2 | 37,820 | 46.8 | 75,980 | 94.1 | 68.5 |
| Non White | 2,590 | 3.2 | 2,200 | 2.7 | 4,790 | 5.9 | 31.5 |
| Afr.Am. | 2,270 | 2.8 | 1,860 | 2.3 | 4,130 | 5.1 | 27.4 |
| Other | 320 | 0.4 | 340 | 0.4 | 660 | 0.8 | 4.1 |
| Total | 40,750 | 50.5 | 40,020 | 49.5 | 80,770 | 100 | 100 |

*Source: Maryland Vital Statistics Annual Report (1997)*

Table 3: Population Projections for Cecil County

| RACE GROUP | YEAR 2000 | YEAR 2005 | YEAR 2010 | YEAR 2015 | YEAR 2020 |
|---|---|---|---|---|---|
| White | 78,930 (94.3%) | 83,490 (94.1%) | 87,520 (94.0%) | 91,350 (93.9%) | 94,720 (93.8%) |
| Non White | 4,770 (5.7%) | 5,210 (5.9%) | 5,580 (6.0%) | 5,950 (6.1%) | 6,280 (6.2%) |
| Total | 83,700 | 88,700 | 93,100 | 97,300 | 101,000 |

*Source: Maryland Office of Planning*

# Appendix B

Cecil County Community Health Advisory Committee
401 Bow Street
Elkton, MD 21921
(410) 996-5550
Fax: (410) 996-5134

January 25, 1999

Dear Cecil County Resident:

The Cecil County Community Health Advisory Committee in cooperation with the Cecil County Health Department is conducting a survey to learn about the health of the residents of Cecil County. This is an important scientific study and the information will be used to plan programs to improve the health of the residents of Cecil County.

Only a fraction of Cecil County residents are receiving this survey. By completing the survey, you will help us discover what health needs our residents have. This will allow us to focus on those areas and services that will help Cecil County, instead of having to rely on national information that may not be right for our county. You can join us in our efforts to improve the health of **all** Cecil County residents by completing the survey. **Cecil County needs your help!**

Your household has been randomly selected to participate in this study. The Cecil County Health Department contracted with a mailing service to randomly choose addresses to receive the Cecil County Community Health Survey. To guarantee anonymity, the Cecil County Health Department does not know the names or addresses of the person/persons receiving this mailing.

**Please have an adult 18 or over in the household complete the Cecil County Community Health Survey.** It is anonymous so **do <u>not</u> put a name** anywhere on the survey. For the information to be useful, the answers must be accurate, so the person who completes the survey should take as much time as needed to answer the questions. Questions #1 through #9 are necessary so we can be sure we have a good representation of the population of the entire county. All the other questions are important to learn about the health needs of Cecil County.

Please return the completed Cecil County Community Health Survey in the enclosed self-addressed stamped envelope **by March 1, 1999**.

If you have any questions, please feel free to call Carol England, Director of Community Health Assessment, Planning and Evaluation at the Cecil County Health Department at (410) 996-5113.

I very much appreciate the time and effort you are putting into this. Working together, we can build a healthier county. Thank you for your help!

Sincerely,

Virginia R. Bailey, MD, MPH

Virginia R. Bailey, MD, MPH
Health Officer

**Task Forces**

| | |
|---|---|
| Violence | 996-5113 |
| Cancer/COPD | 996-5158 |
| Heart Disease & Stroke | 996-5130 |
| Alcohol, Drug & Tobacco | 996-5136 |
| Adolescent Pregnancy | 996-5130 |
| Communicable Disease | 996-5130 |
| Accidents | 996-5136 |



Appendix B: Page 1

**THIS IS AN ANONYMOUS HEALTH SURVEY FOR ADULTS 18 AND OVER WHO LIVE IN CECIL COUNTY. PLEASE DO NOT PUT YOUR NAME ANYWHERE ON THIS SURVEY.**

# CECIL COUNTY COMMUNITY HEALTH SURVEY

## Section 1 - Demographic Information

1. What is your zip code? _____

2. Are you: ☐ Male ☐ Female

3. What is your age? _____

4. Are you of Hispanic or Latino origin?
   ☐ Yes ☐ No

5. What is your race? (Multi-racial persons may select all that apply)
   ☐ American Indian or Alaska Native ☐ Asian
   ☐ Black or African - American ☐ Native Hawaiian or other Pacific Islander
   ☐ White ☐ Other (specify) _____

6. Are you:
   ☐ Married ☐ Not married
   ☐ Separated ☐ Other

7. What is the highest grade or year of school you completed?
   ☐ Never attended school or only kindergarten
   ☐ Grades 1 through 8
   ☐ Grades 9 through 11
   ☐ Grade 12 or GED
   ☐ College 1 year to 3 years
   ☐ College 4 years or more

8. Are you currently:
   ☐ Employed for wages ☐ Self-employed
   ☐ Homemaker ☐ Student
   ☐ Retired ☐ Unable to work
   ☐ Out of work for more than 1 year ☐ Out of work for less than 1 year

9. Is your annual household income from all sources:
   ☐ Less than $10,000 ☐ $10,001 - $15,000
   ☐ $15,001 - $20,000 ☐ $20,001 - $25,000
   ☐ $25,001 - $35,000 ☐ $35,001 - $50,000
   ☐ $50,001 - $75,000 ☐ $75,000 - $100,000
   ☐ Over $100,000

## Section 2 - Health Status

***Health Status:***

10. Would you say that in general your health is:
☐ Excellent ☐ Very Good ☐ Good ☐ Fair ☐ Poor

11. Now thinking about your physical health, which includes physical illness and injury, how many days during the past 30 days was your physical health not good?
☐ Number of days _____
☐ None

12. Now thinking about your mental health, which includes stress, depression, and problems with emotions, how many days during the past 30 days was your mental health not good?
☐ Number of days _____
☐ None

13. During the past 30 days, how many days did poor physical or mental health keep you from doing your usual activities, such as self-care, work, or recreation?
☐ Number of days _____
☐ None

14. My family (blood relatives: parents, grandparents, brothers, sisters or children) has a history of: (check all that apply)
☐ Breast Cancer ☐ Colon/Rectum Cancer ☐ Heart Disease
☐ High Blood Pressure ☐ High Cholesterol ☐ Skin Cancer (melanoma)
☐ Diabetes ☐ Glaucoma ☐ Stroke
☐ Don't know

***Lifestyle/Diet:***

15. How much do you weigh without shoes? Weight _____

16. How tall are you without shoes? Height _____

17. Are you now trying to lose weight?
☐ Yes ☐ No

18. If yes, which are you doing to lose weight? (Check all that apply)
☐ Exercise ☐ Reduce fat in diet ☐ Reduce calories in diet
☐ Nothing ☐ Other (please specify) _____

19. In the past year, have you been given advice about your weight?
(By a doctor, nurse, nutritionist, weight loss program, etc.)
☐ Yes, lose weight ☐ Yes, gain weight ☐ Yes, maintain current weight ☐ No

20. How often each week do you fit in 20 minutes of aerobic exercise? (Jogging, brisk walking, biking) ☐ _____ times

21. Do you take precautions against tick or other insect bites when outdoors?
☐ Yes ☐ No

22. How many servings of fruits and vegetables do you usually eat?
☐ Per day _____ or ☐ Per week _____
☐ Never eat vegetables ☐ Never eat fruit

23. Do you make an effort to eat 5 servings of fruits and vegetables each day?
☐ Yes ☐ No

24. On average, how many servings of high-fat foods do you eat per day?
(Fried foods, chips, butter, regular salad dressing, egg yolks, doughnuts, etc.)
☐ Number of servings_____
☐ None

25. Do you limit your servings of high fat foods to 3 or less per day?
☐ Yes ☐ No

***Hypertension Awareness:***

26. How long has it been since you last had your blood pressure taken by a doctor, nurse or other health professional?
☐ Within the past 6 months (0 to 6 months ago)
☐ Within the past year (6 to 12 months ago)
☐ Within the past 2 years (1 to 2 years ago)
☐ Within the past 5 years (2 to 5 years ago)
☐ 5 or more years ago
☐ Never

27. Have you ever been told by a doctor, nurse or other health professional that you have high blood pressure? ☐ Yes ☐ No

***Cholesterol Awareness:***

28. Blood cholesterol is a fatty substance found in the blood. Have you ever had your blood cholesterol checked? ☐ Yes ☐ No (If no, skip to question 31)

29. How long has it been since you last had your blood cholesterol checked?
☐ Within the past year (0 to 12 months ago)
☐ Within the past 2 years (1 to 2 years ago)
☐ Within the past 5 years (2 to 5 years ago)
☐ 5 or more years ago

30. Have you ever been told by a doctor or other health professional that your blood cholesterol is high? ☐ Yes ☐ No

***Diabetes:***

31. Have you ever been told by a doctor that you have diabetes?
    ☐ Yes ☐ (Women:) Yes, only during pregnancy
    ☐ No

***Colorectal Cancer Screening:***

32. 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?
    ☐ Yes ☐ No (If no, skip to question 34)

33. If yes, when did you have your last blood stool test using a home kit?
    ☐ Within the past year (0 to 12 months ago)
    ☐ Within the past 2 years (1 to 2 years ago)
    ☐ Within the past 5 years (2 to 5 years ago)
    ☐ 5 or more years ago

34. A sigmoidoscopy or proctoscopy is when a tube is inserted in the rectum to view the bowel for signs of cancer and other health problems. Have you ever had this exam?
    ☐ Yes ☐ No (If no, skip to question 36)

35. If yes, when did you have your last sigmoidoscopy or proctoscopy?
    ☐ Within the past year (0 to 12 months ago)
    ☐ Within the past 2 years (1 to 2 years ago)
    ☐ Within the past 5 years (2 to 5 years ago)
    ☐ 5 or more years ago

***Other Diseases:***

36. I have been told by a doctor that I have/had: (check all that apply)
    ☐ Lung Cancer ☐ Skin Cancer ☐ Other Cancer
    ☐ Depression ☐ Glaucoma ☐ Stroke
    ☐ Asthma ☐ Heart Disease ☐ Arthritis in some of my joints
    ☐ Sexually transmitted disease (such as syphilis or gonorrhea)
    ☐ None of the above

***For Men ONLY: (Women skip to question 38)***
***Prostate Cancer:***

37. Have you been examined or tested for Prostate Cancer in the past 2 years?
    ☐ Yes ☐ No

***For Women ONLY: (Men skip to question 54)***
***Women's Health:***

38. A mammogram is an x-ray of each breast to look for breast cancer. Have you ever had a mammogram? ☐ Yes ☐ No (skip to question 45)

39. If yes, how long has it been since you had your last mammogram?
- ☐ Within the past year (0 to 12 months ago)
- ☐ Within the past 2 years (1 to 2 years ago)
- ☐ Within the past 3 years (2 to 3 years ago)
- ☐ Within the past 5 years (3 to 5 years ago)
- ☐ 5 or more years ago

40. If you have not had a mammogram in the past year, what is the most important reason why you did not?
- ☐ Not recommended by doctor/Doctor never said it was needed
- ☐ Not needed/Not necessary
- ☐ Never heard of a mammogram
- ☐ Cost
- ☐ No insurance to pay for it
- ☐ Other _____

41. How many mammograms have you had in the last five years?
- ☐ Number of mammograms _____
- ☐ None

42. Was your last mammogram done as part of:
- ☐ A routine checkup ☐ Breast problem other than cancer
- ☐ Had breast cancer

43. Whose idea was it for you to have this last mammogram:
- ☐ Your idea ☐ Doctor's idea ☐ Someone else's idea

44. Was this your first mammogram? ☐ Yes ☐ No
(After answering, skip to question 46)

45. If you have never had a mammogram (answer to question 38 is "no"), what is the most important reason that you have never had a mammogram?
- ☐ Not recommended by doctor/Doctor never said it was needed
- ☐ Not needed/Not necessary
- ☐ Never heard of a mammogram
- ☐ Cost
- ☐ No Insurance to pay for it
- ☐ Other _____

46. A clinical breast exam is when a doctor, nurse or other health professional feels the breast for lumps. Have you ever had a clinical breast exam?
- ☐ Yes ☐ No (skip to question 49)

47. If yes, how long has it been since your last clinical breast exam?
☐ Within the past year (0 to 12 months ago)
☐ Within the past 2 years (1 to 2 years ago)
☐ Within the past 3 years (2 to 3 years ago)
☐ Within the past 5 years (3 to 5 years ago)
☐ 5 or more years ago

48. If yes, was your last clinical breast exam done as part of:
☐ A routine checkup ☐ Breast problem other than cancer
☐ Had breast cancer

49. A Pap smear is a test for cancer of the cervix. Have you ever had a Pap smear?
☐ Yes ☐ No (skip to question 52)

50. If yes, how long has it been since you had your last Pap smear?
☐ Within the past year (0 to 12 months ago)
☐ Within the past 2 years (1 to 2 years ago)
☐ Within the past 3 years (2 to 3 years ago)
☐ Within the past 5 years (3 to 5 years ago)
☐ 5 or more years ago

51. Was your last Pap smear done as part of:
☐ A routine exam ☐ Check current or previous problem
☐ Other _____

52. Have you had a hysterectomy? ☐ Yes ☐ No

53. To your knowledge, are you now pregnant? ☐ Yes ☐ No

***For people with children who are under 18:(if you do not have children under 18, skip to question 66)***
***Children's Health:***

54. What ages are your children under 18?
Boys _____ Girls _____

55. If you are the child's birth mother, before each of your children were born, did you receive prenatal care?
☐ Yes ☐ No ☐ I am not the birth mother

56. Do your children have regular dental check-ups?
☐ Yes ☐ No

57. Do your children have health insurance?
☐ Yes ☐ No

58. Do your children have dental insurance?
☐ Yes ☐ No

59. Are your children up to date on all of their shots?
☐ Yes ☐ No ☐ Don't know

60. Have your children been screened (questionnaire) for risk of lead poisoning?
☐ Yes ☐ No ☐ Don't know

61. Have your children been tested (blood test) for lead poisoning?
☐ Yes ☐ No ☐ Don't know

62. (If you have pre-school children:) My pre-school children are supervised by: (check all that apply)
☐ myself or another adult
☐ a grandparent
☐ an older brother or sister
☐ a licensed family day care home
☐ a licensed day care program
☐ a babysitter
☐ no one
☐ I do not have pre-school children

63. (If you have school-age children:) After school my children are supervised by: (check all that apply)
☐ myself or another adult in our household
☐ a grandparent
☐ an older brother or sister
☐ an after-school or latchkey program
☐ a babysitter
☐ no one
☐ I do not have school-age children

64. Have you had serious discussions with your children about: (check all that apply)
☐ the consequences of drinking alcohol
☐ sexually transmitted diseases
☐ the dangers of using street drugs
☐ the risks of tobacco (smoking or chewing)
☐ the dangers of riding with someone who has been drinking.
☐ good touch/bad touch (sexual abuse)

65. Have you had serious discussions with your children about pregnancy prevention?
☐ Yes ☐ No
If yes, have your discussions been about: ☐ abstinence ☐ birth control

66. At what grade do you think children should begin receiving education in school about HIV infection and AIDS?

☐ Grade _____ ☐ Kindergarten
☐ Never ☐ Don't know/Not sure

67. If you had a teenager who was sexually active, would you encourage him or her to use a condom?

☐ Yes ☐ No ☐ Would give other advice
☐ Don't know/Not sure ☐ Do not wish to answer

***Adult Immunization:***

68. During the past 12 months, have you had a flu shot?

☐ Yes ☐ No

69. Have you ever had a pneumonia vaccination?

☐ Yes ☐ No

***Sexual Behavior / HIV/AIDS:***

70. Have you been sexually active in the last 12 months?
(If No, skip to question 74)

☐ Yes ☐ No

71. Have you had more than one sexual partner in the past 12 months?
(If No, skip to question 74)

☐ Yes ☐ No

72. How many sexual partners did you have during the past twelve months?

☐ Number _____
☐ None ☐ Do not wish to answer

73. Was a condom used the last time you had sexual intercourse?

☐ Yes ☐ No

74. Some people use condoms to keep from getting infected with HIV through sexual activity. How effective do you think a properly used condom is for this purpose?

☐ Very effective ☐ Somewhat effective ☐ Not at all effective

75. What do you think are your chances of getting infected with HIV, the virus that causes AIDS?

☐ High ☐ Medium ☐ Low ☐ None

76. Have you ever had your blood tested for HIV?

☐ Yes ☐ No

77. Due to what you know about HIV, have you changed your sexual behavior to protect yourself from HIV infection in the past 12 months?

☐ Yes ☐ No

78. Due to what you know about HIV, did you make any of the following changes in the past 12 months?

☐ Decrease the number of your sexual partners or become abstinent
☐ Have sexual intercourse with only the same partner
☐ Always use condoms for protection
☐ No changes, but I was already doing one of the above
☐ None

***Oral Health:***

79. How long has it been since you last visited the dentist or a dental clinic?

☐ Within the past year (0 to 12 months ago)
☐ Within the past 2 years (1 to 2 years ago)
☐ Within the past 5 years (2 to 5 years ago)
☐ 5 or more years ago
☐ Never

80. If you have not visited the dentist in the last year what, is the main reason?

☐ Fear, apprehension, nervousness, pain, dislike going
☐ Cost
☐ Do not have/know a dentist
☐ Cannot get to the office/clinic
(too far away, no transportation, no appointments available)
☐ No reason to go (no problems, no teeth)
☐ Other priorities
☐ Have not thought of it
☐ Other _____

81. How many of your permanent teeth have been removed because of tooth decay or gum disease? Do not include teeth lost for other reasons, such as injury or orthodontics.

☐ 5 or fewer ☐ 6 or more ☐ All ☐ None

82. Do you have any kind of insurance coverage that pays for some or all of your routine dental care, including dental insurance, prepaid plans such as HMOs, or governmental plans such as Medicaid?

☐ Yes ☐ No

## Section 3 - Health Care Access

***Health Care Access:***

83. Do you have a family doctor/primary care doctor?
    ☐ Yes ☐ No

84. How long has it been since you last visited a doctor for a routine checkup?
    ☐ Within the past year (0 to 12 months)
    ☐ Within the past 2 years (1 to 2 years ago)
    ☐ Within the past 5 years (2 to 5 years ago)
    ☐ 5 or more years ago

85. Do you have any kind of health coverage, including health insurance, prepaid plans such as HMO's, or governmental plans such as Medicare?
    ☐ Yes (If yes, skip to question 87) ☐ No

86. If no, what is the main reason you don't have health coverage? (After answering, go to question 89)
    ☐ I am unemployed
    ☐ My employer doesn't offer it
    ☐ Work part-time and am not eligible
    ☐ Can't afford to pay the premium
    ☐ Insurance company refused coverage
    ☐ Lost Medicaid or Medical Assistance Eligibility
    ☐ Other (Please specify) _____

87. If yes, what type of health care coverage do you use to pay for most of your medical care? Is it coverage through:
    ☐ Your employer
    ☐ Someone else's employer
    ☐ A plan that you or someone else buys on your own
    ☐ Medicare
    ☐ Medicaid or Medical Assistance
    ☐ The military, CHAMPUS, or the VA
    ☐ The Indian Health Service
    ☐ Some other source

88. If yes, how long have you had this health coverage?
    ☐ For less than 12 months (0 to 12 months)
    ☐ For 1 to 2 years
    ☐ For 2 to 3 years
    ☐ For 3 to 5 years
    ☐ For 5 or more years

89. If you feel you have not been able to get the health care you need, please check all the reasons that apply:
- ☐ I have no health insurance
- ☐ I can't pay for health care services
- ☐ My insurance doesn't cover the care I need
- ☐ I don't have a ride
- ☐ Local doctors won't take my insurance or Medicaid
- ☐ My deductible is too high
- ☐ Health care services are not close by
- ☐ I don't trust doctors
- ☐ I can't get time off from work
- ☐ It's not a priority
- ☐ Other (Please specify)_____
- ☐ I have been able to get the health care I need.

90. Was there a time during the last 12 months when you needed to see a doctor, but could not because of the cost? ☐ Yes ☐ No

91. During the past year, have you needed any prescriptions that you did not get?
☐ Yes ☐ No (If no, skip to question 93)

92. Why didn't you receive the prescriptions? (Check all that apply)
- ☐ no insurance coverage
- ☐ could not afford
- ☐ had no transportation
- ☐ other _____
- ☐ does not apply to me

93. To what extent do you feel that there are adequate health care resources in your community? (Circle one number)
Not at all adequate 1 2 3 4 5 6 7 Very adequate
What do you feel is missing? _____

## Section 4 - Safety

94. Are there working smoke detectors on each floor of your home?
☐ Yes ☐ No

95. When was the last time you or someone else deliberately tested all of the smoke detectors in your home, either by pressing the test buttons or holding a source of smoke near them?
- ☐ Within the past month (0 to 1 months ago)
- ☐ Within the past 6 months (1 to 6 months ago)
- ☐ Within the past year (6 to 12 months ago)
- ☐ One or more years ago
- ☐ Never
- ☐ No smoke detectors in home

96. Do you keep a gun in the house or vehicle?
☐ Yes ☐ No (If no, skip to question 99)

97. If yes, do you keep it loaded?
☐ Yes ☐ No

98. Are all firearms kept in a locked area?
☐ Yes ☐ No

99. Does a member of your household know CPR?
☐ Yes ☐ No

100. Do all members of your household, age 2 and older, know how to swim or tread water?
☐ Yes ☐ No

101. How often do you use seatbelts when you drive or ride in a car?
☐ Always ☐ Seldom
☐ Nearly Always ☐ Never
☐ Sometimes

102. How often does the child(ren) in your household use a car safety seat (for children under 5) or a seatbelt (for children 5 or older), when they ride in a car?
☐ Always ☐ Seldom
☐ Nearly Always ☐ Never
☐ Sometimes ☐ No children in household

103. During the past year, how often has the child(ren) in your household worn a bicycle helmet when riding a bicycle?
☐ Always ☐ Seldom
☐ Nearly Always ☐ Never
☐ Sometimes ☐ No children in household

## Section 5 - Tobacco Use

104. Have you smoked at least 100 cigarettes in your entire life?
☐ Yes ☐ No (skip to question 113)

105. How old were you when you started to smoke? _____

106. Do you now smoke cigarettes?
☐ Everyday ☐ Some days ☐ Not at all

107. On the average, how many cigarettes a day do you now smoke?
☐ Number of cigarettes _____
☐ Not applicable

108. On the average, if you smoked during the past 30 days, how many cigarettes did you smoke a day?
☐ Number of cigarettes _____
☐ Not applicable

109. If you smoked in the past year, have you tried to quit during that time?
☐ Yes, and I was successful
☐ Yes, but I started smoking again
☐ No
☐ I have not smoked in the past year.

110. If you have quit smoking, how old were you when you quit?
☐ Age _____
☐ Not applicable

111. If you have ever quit smoking, which of the following methods did you use? (Check all that apply)
☐ Nicotine patch ☐ Nicotine gum ☐ Support Group
☐ Smoking cessation classes ☐ Quit cold turkey ☐ Nicotine spray
☐ Oral medications ☐ Other (please specify)_____

112. How long has it been since you last smoked cigarettes regularly, that is, daily?
☐ Within the past month (0 to 30 days ago)
☐ Within the past 3 months (31 days to 3 months ago)
☐ Within the past 6 months (4 to 6 months ago)
☐ Within the past year (7 to 12 months ago)
☐ 2 to 5 years ago
☐ 6 to 15 years ago
☐ 16 or more years ago

113. Do you use smokeless tobacco?
☐ Yes ☐ No, but I used to.
☐ No, I have never used smokeless tobacco

114. Do you smoke cigars?
☐ Yes ☐ No, but I used to.
☐ No, I have never smoked cigars.

## Section 6 - Alcohol Consumption/Drug Use:

115. During the past month, have you had at least one drink of any alcoholic beverage such as beer, wine, wine coolers, or liquor?
☐ Yes ☐ No (skip to question 120)

116. During the past month, how many days per week or per month did you drink any alcoholic beverages, on the average?
☐ Days per week _____ ☐ Days per month _____

117. A drink is 1 can or bottle of beer, 1 glass of wine, 1 can or bottle of wine cooler, 1 cocktail, or 1 shot of liquor. On the days when you drank, how many drinks did you drink on the average?

☐ Number of drinks _____

118. Considering all types of alcoholic beverages, how many times during the past month did you have 5 or more drinks on one occasion?

☐ Number of times _____ ☐ None

119. During the past month, how many times have you driven when you may have had too much to drink?

☐ Number of times _____ ☐ None

120. During the past month how many times have you been a passenger in a vehicle driven by someone who may have had too much alcohol to drink or taken drugs?

☐ Number of times _____ ☐ None

121. In the <u>last six months</u> have you used heroin, cocaine, marijuana, or other street drugs?

☐ Yes ☐ No

122. Have you <u>ever</u> used heroin, cocaine, marijuana, or other street drugs?

☐ Yes ☐ No

## Section 7 - Community

***Social Context:***

123. How safe from crime do you consider your neighborhood to be?

☐ Extremely safe ☐ Quite safe
☐ Slightly safe ☐ Not at all safe

124. Has any member of your household been a victim of a crime in your community?

☐ Yes ☐ No (skip to question 126)

125. If yes, check all that apply:

☐ theft ☐ assault
☐ property damage ☐ stalking
☐ breaking & entering ☐ robbery
☐ other _____

126. Have you or any member of your household been a victim of domestic violence?

☐ Yes ☐ No

**THANK YOU FOR COMPLETING THIS SURVEY. THIS WILL HELP US OBTAIN MORE ACCURATE INFORMATION ABOUT CECIL COUNTY'S HEALTH NEEDS.**
**THE CECIL COUNTY COMMUNITY HEALTH ADVISORY COMMITTEE**

# Appendix C

# Data Comparisons

| HEALTH STATUS | Cecil County 1999 % | Maryland 1998 BRFSS % | United States 1998 BRFSS % | U S Healthy People 2000 Goal % |
|---|---|---|---|---|
| General Health<br>Excellent/Very Good/Good<br>Fair/Poor | <br>85.6<br>13.7 | <br>86.1<br>13.9 | <br>85.1<br>13.1 | N/A |

| LIFESTYLE/DIET | Cecil County 1999 % | Maryland 1998 BRFSS % | U S 1998 BRFSS % | U S Healthy People 2000 Goal % |
|---|---|---|---|---|
| Overweight (based on BMI) | 39.8 | 34.4 | 32.4 | N/A |
| Regular and sustained physical activity | 24.0 | 25.0 | 20.4 | 20.0 |
| Eat 5 servings of fruits and vegetables per day | 12.8 | 30.1 | 23.8 | 50.0 |

| HYPERTENSION/ CHOLESTEROL/ DIABETES | Cecil County 1999 % | Maryland 1997 BRFSS % | U S 1997 BRFSS % | U S Healthy People 2000 Goal % |
|---|---|---|---|---|
| Blood pressure checked within the past 5 years | 98.3 | 98.2 | 97.2 | 75.0 |
| Have high blood pressure | 28.6 | 23.8 | 23.0 | N/A |
| Cholesterol checked within the past 5 years | 95.1 | 96.5 | 92.7 | 75.0 |
| Have high blood cholesterol | 31.9 | 28.6 | 28.8 | N/A |
| Diabetes Prevalence | 6.9 | 5.4 | 5.4 | 2.5 |

| COLORECTAL CANCER | Cecil County 1999 % | Maryland 1997 BRFSS % | U S 1997 BRFSS % | U S Healthy People 2000 Goal % |
|---|---|---|---|---|
| Time since last Fecal Occult Blood Test (50 years of age and older)<br>1 year<br>2 years | 14.4<br>6.6 | 24.4<br>6.8 | N/A<br>N/A | N/A<br>N/A |
| Ever Had Procto-sygmoidoscopy (50 years of age and older) | 43.6 | 37.1 | N/A | 40.0 |
| Time since last Procto-sygmoidoscopy<br>1 year<br>2 years | 9.5<br>12.9 | 13.9<br>11.2 | N/A<br>N/A | N/A<br>N/A |

| WOMEN ' S HEALTH | Cecil County 1999 % | Maryland 1998 BRFSS % | U S 1998 BRFSS % | U S Healthy People 2000 Goal % |
|---|---|---|---|---|
| Ever had a Mammogram (40 years of age and older) | 85.6 | 88.3 | N/A | N/A |
| Had a Mammogram and Clinical Breast Exam within the past 2 years<br>(50 years of age and older) | 74.9 | 70.7 | N/A | N/A |
| Ever had a Pap Test | 94.0 | 95.1 | 94.5 | 95.0 |
| Had a Pap Test within the past 3 years | 80.0 | 91.5 | 86.5 | 85.0 |

| CHILDREN ' S HEALTH | Cecil County 1999 % | Maryland 1998 BRFSS % | U S 1998 BRFSS % | U S Healthy People 2000 Goal % |
|---|---|---|---|---|
| HIV/AIDS education in school (what grade?) | | | | |
| Never | 1.5 | 1.4 | 1.6 | N/A |
| Kindergarten | 11.2 | 4.5 | 6.5 | |
| Elementary | 54.6 | 76.3 | 73.5 | |
| Junior High | 12.9 | 13.5 | 13.5 | |
| High | 1.3 | 4.3 | 4.1 | |
| Don't Know | 18.5 | N/A | N/A | |

| ADULT IMMUNIZATION | Cecil County 1999 % | Maryland 1998 BRFSS % | U S 1998 BRFSS % | U S Healthy People 2000 Goal % |
|---|---|---|---|---|
| Had Flu shot in the past 12 months (65 years of age and older) | 70.4 | 63.4 | 65.9 | 60.0 |
| Ever had Pneumonia Vaccine (65 years of age and older) | 58.8 | 41.0 | 45.8 | 60.0 |

| SEXUAL BEHAVIOR/HIV/AIDS | Cecil County 1999 % | Maryland 1998 BRFSS % | U S 1998 BRFSS % | U S Healthy People 2000 Goal % |
|---|---|---|---|---|
| Chances of getting HIV High/Medium | 5.6 | 6.0 | 6.3 | N/A |
| Ever been tested for HIV | 56.4 | 50.2 | 40.0 | N/A |

| ORAL HEALTH | Cecil County 1999 % | Maryland 1997 BRFSS % | U S 1997 BRFSS % | U S Healthy People 2000 Goal % |
|---|---|---|---|---|
| Last visited the dentist<br>Past year<br>5 or more years/Never | 53.8<br>17.9 | 70.3<br>18.7 | N/A | N/A |

| HEALTH CARE ACCESS | Cecil County 1999 % | Maryland 1998 BRFSS % | U S 1998 BRFSS % | U S Healthy People 2000 Goal % |
|---|---|---|---|---|
| Visited a doctor for a routine check-up within the past year | 77.7 | 75.6 | 70.5 | 91.0 |
| Have health insurance (health coverage) | 89.1 | 86.4 | 87.0 | N/A |
| Needed to see a doctor but couldn't because of cost (within the past year) | 16.0 | 7.6 | 9.2 | N/A |

| HOUSEHOLD SAFETY/ INJURY PREVENTION | Cecil County 1999 % | Maryland 1997 BRFSS % | U S 1997 BRFSS % | U S Healthy People 2000 Goal % |
|---|---|---|---|---|
| Have a smoke detector | 90.4 | 100.0 | 96.0 | 100.0 |
| Last time smoke detector was tested<br>Past month<br>Past 6 months<br>Past 12 months<br>1 or more years | 37.8<br>40.9<br>13.1<br>8.2 | 34.1<br>37.5<br>14.4<br>14.0 | 37.3<br>34.7<br>10.8<br>15.2 | N/A |
| Adults always use seatbelts | 75.7 | 76.1 | 69.3 | N/A |
| Children always use seatbelts or safety belts | 81.5 | 89.6 | 85.4 | N/A |
| Children always wear bike helmets (age 5 to 15) | 28.5 | 54.4 | 32.2 | N/A |

| TOBACCO USE/ ALCOHOL CONSUMPTION | Cecil County 1999 % | Maryland BRFSS % | United States BRFSS % | U S Healthy People 2000 Goal % |
|---|---|---|---|---|
| Smoke cigarettes now | 22.6 | 22.4* | 22.9* | 15.0 |
| Had 5 or more drinks on at least one occasion in the past month | | | | |
| None | 78.3 | 85.8** | 72.5** | N/A |
| 1 or more | 21.7 | 14.1** | 27.6** | |
| Had driven a car while drinking in the past month | | | | |
| None | 96.4 | 97.9** | 96.1** | N/A |
| 1 or more | 2.1 | 2.1** | 3.9** | |

* 1998 BRFSS
** 1997 BRFSS