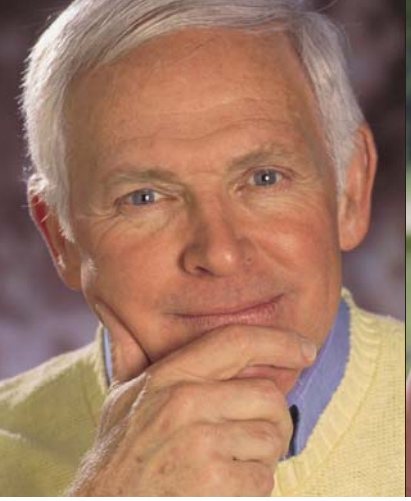


Behavioral Risk Factor Surveillance System (BRFSS) 2006 Annual Report

Government of the District of Columbia
Department of Health
Center for Policy, Planning and Epidemiology




GOVERNMENT OF THE DISTRICT OF COLUMBIA
Department of Health

Office of the Director

Dear Colleague:

As the Director of the Department of Health, I am pleased to present the District of Columbia Behavioral Risk Factor Surveillance System 2006 Annual Report. This annual report is just one of the many ways the Department of Health demonstrates its commitment to monitoring the health and well-being of the residents of the District of Columbia. This survey allows the Center for Policy, Planning and Epidemiology's Behavioral Risk Factor Surveillance System (BRFSS) Program to monitor modifiable risk factors for chronic disease and other leading causes of death.

The data presented herein helps the Department of Health and our community partners to:

- Increase public awareness of personal behaviors that may have negative health consequences
- Guide policy decisions for improving the health of District residents
- Monitor progress toward achieving Healthy People objectives
- Support funding proposals and reports by providing baseline data

Public Health Systems function optimally when they conduct health needs assessment, identify problem areas, and establish priorities. We hope that you will find this report useful in planning and implementing your various public health activities.

If you would like to request additional copies of this report, please contact Tracy Garner, Program Coordinator, Behavioral Risk Factor Surveillance System, District of Columbia Department of Health, 825 North Capitol Street, NE, 2nd Floor, Washington, DC 20002, or call 202-442-5857.

Sincerely,

Pierre N. D. Vigilance, MD, MPH
Director

GOVERNMENT OF THE DISTRICT OF COLUMBIA
Adrian M. Fenty, Mayor

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SPECIAL THANKS
ORC Macro International, BRFSS Contractor, for their assistance with the analysis of data and writing of this report.

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Introduction

The Behavioral Risk Factor Surveillance System (BRFSS) is the largest health-risk behavior database in the world and provides the only nationwide health-risk data in the country. This ongoing telephone survey, sponsored by the U.S. Centers for Disease Control and Prevention (CDC), is carried out independently by all 50 United States, the District of Columbia, and three United States territories.

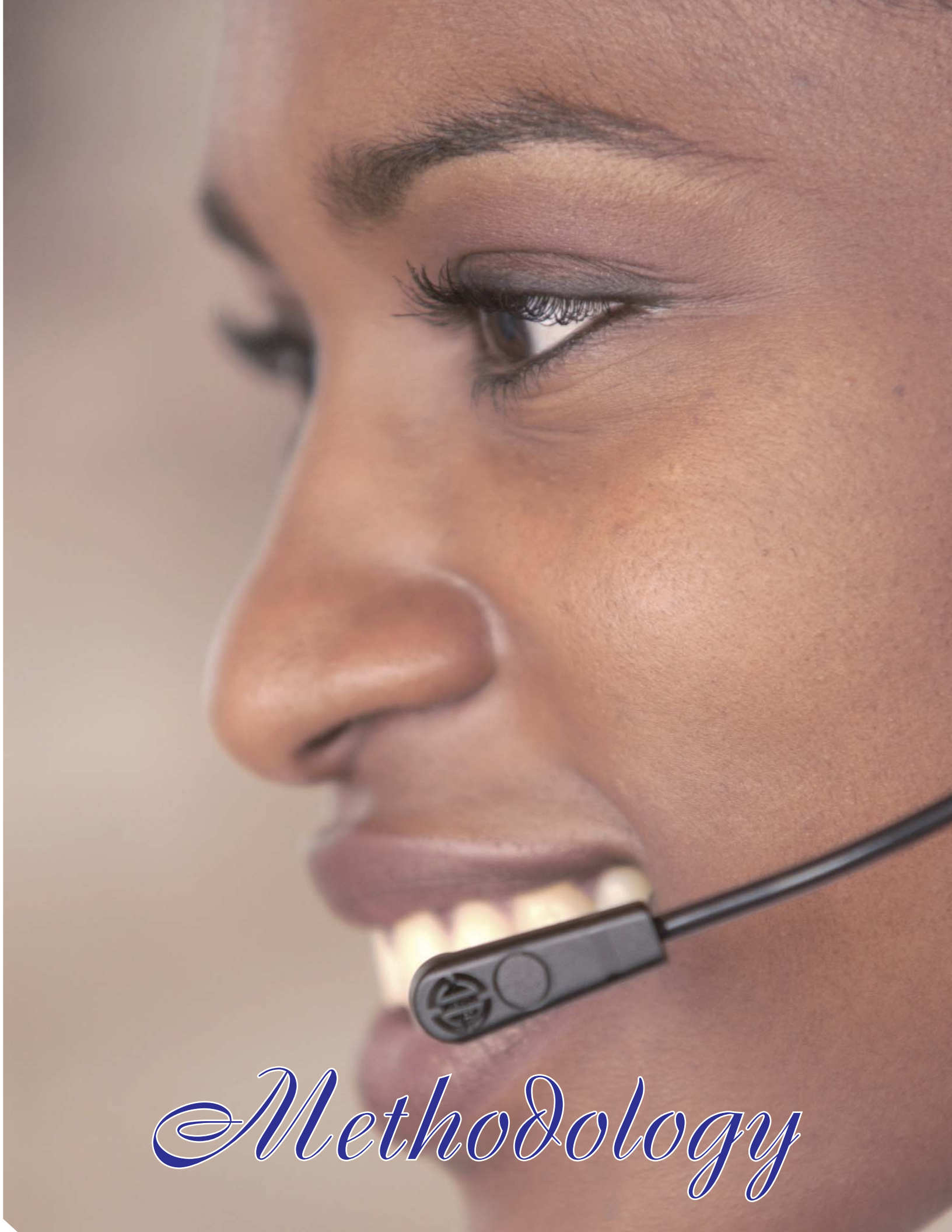
The BRFSS began in 1984 with four primary goals:

- Identify emerging health issues
- Document health trends
- Compare health behaviors across states
- Measure progress toward health-related goals

In the past, the District of Columbia has used the BRFSS system to:

- Provide data for legislative advocacy and education supporting the successful passage of tobacco control legislation.
- Provide data to support Project "WISH" (Women Into Staying Healthy), a breast and cervical cancer prevention program in the District of Columbia.
- Provide information for the District of Columbia State Health Plan.
- Assess the impact of screening programs and evaluate the effectiveness of those programs for the District of Columbia Cancer Registry.
- Provide baseline data to the Diabetes Program—used to produce fact sheets and a comprehensive surveillance report, apply for various grants, and to keep policy-makers well informed.

The BRFSS is conducted for the District of Columbia Department of Health, with funding and guidance provided by the CDC of the U.S. Public Health Service.



Methodology

The BRFSS is a telephone survey conducted among adults within households randomly selected from all telephone-equipped households in the District of Columbia. The methodology for conducting BRFSS surveys is standardized by the CDC and described in the BRFSS User's Guide and related policy memos. Macro International Inc. (Macro), an independent survey research company, collected survey data for the 2006 District of Columbia BRFSS following this methodology, summarized below.

Survey Sample

BRFSS protocol calls for a probability sample of all households with telephones within each participating state or territory. In such a sample, each household with a telephone in the survey area has a known chance of being selected for the study.

This was accomplished for the 2006 District of Columbia BRFSS with a disproportionate stratified Random Digit Dial (RDD) sample based on a list-assisted frame. This sample was generated for the District of Columbia BRFSS, as for all states participating in the BRFSS, by Marketing Systems Group (MSG) using their proprietary Genesys sampling software.

The Genesys sample was drawn quarterly from all working banks of District of Columbia telephone numbers, and provided to Macro each month. The sample included both listed and unlisted numbers. The sample was pre-screened for non-working and business numbers and configured in replicates of 30 to be released for interviewing attempts.

Survey Questionnaire

The BRFSS questionnaire consists of three parts:

The "core" questionnaire consists of a standard set of questions, designed by the CDC, that are included in the survey for every state. Core modules administered for the 2006 District of Columbia BRFSS were:

- *Health Status*
- *Health Care Access*
- *Diabetes*
- *Cardiovascular Disease Prevalence*
- *Disability*
- *Demographics*
- *Alcohol Consumption*
- *Falls*
- *Drinking and Driving*
- *Prostate Cancer Screening*
- *HIV/AIDS*
- *Health-Related Quality of Life*
- *Exercise*
- *Oral Health*
- *Asthma*
- *Tobacco Use*
- *Veteran Status*
- *Immunization*
- *Seatbelt use*
- *Women's Health*
- *Colorectal Cancer Screening*
- *Emotional Support and Life Satisfaction*

The CDC also designs "optional" modules. These modules are sets of questions organized by topic; states can choose which modules they want to include each year. Optional modules included in the 2006 District of Columbia BRFSS were:

- *Diabetes*
- *Anxiety and Depression*
- *Childhood Asthma Prevalence*

"State-added" questions are designed by states to address topics that may not be covered in the CDC modules, or to gather more detailed information about certain topics. The District of Columbia Department of Health added questions to the 2006 BRFSS on the following topics:

- *Tobacco Use*
- *Ward of Residence*
- *Sexual Assault*

The survey was programmed and administered using Computer-Assisted Telephone Interviewing (CATI) software designed specifically for telephone survey research. This software, called Survent, is by the Computers for Marketing Corporation (CfMC).

The survey consisted of a total of 112 questions. Not all questions were administered to all respondents, however, as some questions were administered only to respondents with certain characteristics, determined by responses to previous questions. The CATI software system controls this survey logic. The average survey length in 2006 was 15.7 minutes.

Interviewing Protocol

Experienced, supervised personnel conducted the interviews using CfMC's Survent software. A total of 4,023 completed interviews were obtained during the year —approximately 335 during each of 12 monthly calling periods beginning January 1, 2006 and ending December 31, 2006. Interviewers adhered to the following procedures when contacting households for interviews:

Random Respondent Selection. For each household contacted, one adult was selected for an interview using a household roster and automated random selection process. If that adult was unavailable during the survey period, unable or unwilling to participate, or did not speak English well enough to be interviewed, the survey was not conducted.

Contact Attempts. Up to 15 attempts, over a minimum five-day period (typically 15 days), were made to reach each sampled telephone number. Once contact was made at a residence, as many calls as necessary were made to reach the randomly selected adult (within the permitted time schedule). Attempts were made on different days of the week and at different times of day, in a pattern chosen to maximize the likelihood of contact with the minimum number of calls.

Non-English Households. The 2006 District of Columbia BRFSS was conducted in English only. No attempts were made to conduct an interview in a household where the randomly selected adult could not be interviewed in English. However, when a Spanish-speaking individual was contacted, a bilingual interviewer attempted to determine if the selected person was capable of completing the survey in English.

Converting Initial Refusals. Households where interviews were initially refused were contacted again, at least three days later, by specially trained interviewers to persuade respondents to participate in the survey.

Quality Control Measures. Ten percent of interviews were monitored by supervisors using a remote monitoring feature of the CATI software. During these sessions, the supervisor simultaneously monitored both the interviewer-respondent interaction on the telephone and the data being entered by the interviewer into the CATI system—scoring the interviewer on a variety of performance measures. Neither interviewers nor respondents were aware when calls were being monitored.

Response Rates

Response rates for the District of Columbia BRFSS are calculated according to formulas developed by the Council of American Survey Research Organizations (CASRO), as specified by the CDC. Three response rates are calculated:

The Cooperation Rate measures how successful interviewers are at completing interviews once a respondent has been contacted and selected. The cooperation rate for the 2006 District of Columbia BRFSS was 77.0%.

The CASRO response rate is the percentage of completed interviews returned out of eligible respondents. The CASRO response rate for the 2006 District of Columbia BRFSS was 46.3%.

The overall response rate is a measure of sample frame efficiency. It shows the rate at which the total sample released produces completed interviews. The overall response rate for the 2006 District of Columbia BRFSS was 26.9%.

Data Analysis

Data for the 2006 District of Columbia BRFSS were delivered to the CDC each month; the data were then aggregated and the CDC weighted it after interviewing was complete for the year. Data were weighted to adjust for differences in the probabilities of selection of each respondent. This weight accounted for the probability of selection of a telephone number, the number of adults in a household, and the number of telephones in a household.

An additional, post-stratification adjustment was also made to ensure that the sample proportions of selected demographic characteristics (gender, age, and race) were equal to the estimated sample proportions in the population, and to make the sum of the weights equal to the population of the District of Columbia. In this report, all data reported are weighted data unless otherwise noted.

Limitations of the Data

Confidence Limits

As with any sample survey, sampling error can cause the results of the District of Columbia BRFSS to vary from those that would have been obtained with a census of all adults living in telephone-equipped households. The results of this sample survey could differ from the "true" figures because some households cannot be reached at all and others refuse to participate. These non-responding households may differ from respondents in terms of attributes relevant to the study.

The sample design used in the District of Columbia BRFSS results in a 95% confidence interval. In other words, 95 times out of 100, the BRFSS result will vary no more than a given number of percentage points from the figure that would have been obtained if data had been collected for all adults in District of Columbia households with telephones.

Small Numbers

Small numbers of respondents are also an issue when analyzing data. This is due to concerns about the variability of the data; that is, a difference in the responses of only a few individuals can result in a large difference in percentage of the total for that group.

Small numbers of respondents in a group 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 logic limits the number of respondents receiving a particular question, thereby reducing the number of respondents in each analytical unit for that item. Where counts are less than 50 respondents per subgroup, caution should be used in drawing conclusions from the data.

Survey Population

The surveyed population excludes adults:

- In penal, mental, or other institutions
- Living in group quarters such as dormitories barracks, convents, or boarding houses
- Contacted at their second home during a stay of less than 30 days
- Who do not speak English well enough to be interviewed
- Living in households without telephones

Survey Population

Table 1 shows the distribution of respondents for the 2006 District of Columbia BRFSS by gender, age, race, education, and annual household income. Key questions from each survey module are analyzed in this report by these demographic characteristics. Table 1 compares the unweighted and weighted data to the 2000 Census profile of the District of Columbia for adults age 18 and older, so that the representativeness of the sample can be assessed. The Census figures show a total adult population of 457,067 for the District of Columbia in 2000. The 2006 District of Columbia BRFSS data are based on a total of 4,023 completed interviews.

As Table 1 indicates, the unweighted sample shows an under-representation of men, adults between the ages of 18 and 24, African Americans, Hispanics, and adults with the lowest levels of education and income. There are corresponding over-representations of women, older age groups, Caucasians, and respondents with the highest levels of education and income.

Table 1. 2000 Census, 2006 District of Columbia BRFSS Demographic Data

	2000 Census	Unweighted 2006 DC BRFSS	Weighted 2006 DC BRFSS
GENDER			
Male	46.3%	38.7%	46.6%
Female	53.7%	61.3%	53.4%
AGE			
18-24	15.9%	5.0%	13.3%
25-34	22.3%	17.0%	24.1%
35-44	19.2%	19.4%	19.0%
45-54	16.5%	19.0%	14.8%
55-64	10.9%	18.1%	13.1%
65+	15.3%	21.4%	15.7%
RACE			
Caucasian	31.8%	48.4%	35.4%
African American	55.7%	42.9%	51.9%
Hispanic	7.3%	3.6%	5.9%
Other	5.1%	5.2%	6.8%
EDUCATION			
Less than High School	22.2%	6.7%	8.0%
High School Graduate	20.6%	17.4%	22.1%
Some College	18.2%	17.0%	19.3%
College Graduate	39.1%	59.0%	50.6%
INCOME			
Less than $15,000	20.7%	10.3%	12.2%
$15,000-$24,999	11.4%	10.7%	12.5%
$25,000-$34,999	12.3%	9.2%	11.3%
$35,000-$49,999	14.2%	12.0%	12.2%
$50,000-$74,999	15.9%	13.9%	12.6%
$75,000+	25.4%	43.8%	39.2%

Tables 2 and 3 present comparisons by Ward for the 2000 Census, and unweighted and weighted 2006 District of Columbia BRFSS. By Ward, the largest differences between the Census and the unweighted 2006 data occur for Wards 1 and 2 (an under-representation).

Twenty-three percent of respondents (unweighted data) did not know which Ward they lived in. Except for Tables 2 and 3, these respondents are excluded from all analyses by Ward presented in this report.

Table 2. 2000 Census, 2006 District of Columbia BRFSS Ward Data

Ward	2000 Census	Unweighted 2006 DC BRFSS	Weighted 2006 DC BRFSS
Ward 1	13.2%	6.8%	6.2%
Ward 2	13.9%	7.4%	5.6%
Ward 3	14.2%	15.7%	12.0%
Ward 4	12.8%	12.5%	12.7%
Ward 5	12.5%	9.6%	10.5%
Ward 6	12.3%	10.3%	9.2%
Ward 7	11.2%	8.0%	10.1%
Ward 8	9.9%	7.1%	8.6%
Don't Know	NA	22.6%	25.1%

Table 3 presents the demographics of BRFSS respondents by Ward. Some notable differences include: the higher percentages of females in Wards 7 and 8; the high percentages of African Americans in Wards 4, 5, 7 and 8; the higher percentage of adults with a college degree in Ward 3 and the higher percentages of adults with less than a high school degree in Wards 7 and 8; and the disproportionately higher levels of income in Wards 1, 2, 3 and 6.

Table 3. District of Columbia BRFSS Demographic Data, By Ward

	1	2	3	4	5	6	7	8	DK
GENDER									
Male	50.7%	56.9%	48.8%	44.1%	42.6%	50.7%	39.1%	38.7%	46.7%
Female	49.3%	43.1%	51.2%	55.9%	57.4%	49.3%	60.9%	61.3%	53.3%
AGE									
18-24	8.3%	12.6%	8.4%	4.8%	7.9%	4.5%	14.3%	18.0%	24.8%
25-34	27.7%	24.4%	17.3%	17.7%	19.7%	26.0%	22.7%	20.2%	34.6%
35-44	23.4%	15.7%	20.0%	19.8%	18.0%	27.1%	19.3%	19.5%	15.7%
45-54	13.3%	14.6%	20.0%	17.0%	18.5%	14.8%	12.5%	17.4%	9.4%
55-64	15.9%	15.2%	15.4%	16.5%	13.1%	14.4%	10.6%	15.8%	7.7%
65+	11.5%	17.6%	18.8%	24.2%	22.7%	13.3%	20.6%	9.2%	7.8%
RACE									
Caucasian	47.3%	63.7%	74.9%	18.5%	14.5%	44.9%	3.9%	2.8%	49.0%
African American	35.8%	28.6%	7.1%	68.8%	78.4%	44.0%	90.8%	93.0%	30.1%
Hispanic	9.8%	2.8%	8.8%	6.4%	3.3%	4.0%	2.4%	1.0%	10.2%
Other	7.1%	4.9%	9.3%	6.3%	3.8%	7.1%	3.0%	3.2%	10.7%

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continued - District of Columbia Ward									
	1	2	3	4	5	6	7	8	DK
EDUCATION									
Less than High School	3.8%	7.7%	1.2%	8.6%	8.8%	4.9%	11.5%	17.8%	6.8%
High School Graduate	14.0%	14.1%	7.5%	17.0%	27.6%	15.9%	39.3%	47.2%	15.7%
Some College	15.8%	9.9%	10.1%	29.2%	22.1%	17.6%	25.3%	22.9%	18.3%
College Graduate	66.4%	68.3%	81.2%	45.3%	41.5%	61.7%	23.9%	12.0%	59.1%
INCOME									
Less than $15,000	7.2%	6.2%	2.2%	10.1%	16.2%	9.4%	18.8%	23.3%	11.5%
$15,000-$24,999	10.6%	5.4%	2.6%	10.9%	15.5%	9.6%	22.6%	22.2%	11.8%
$25,000-$34,999	8.1%	4.9%	4.0%	10.7%	12.9%	5.7%	22.6%	16.0%	13.0%
$35,000-$49,999	13.4%	14.2%	7.8%	12.5%	9.8%	15.9%	10.4%	17.1%	12.2%
$50,000-$74,999	11.4%	12.3%	12.6%	13.0%	17.2%	11.9%	7.4%	12.7%	12.8%
$75,000+	49.4%	56.9%	70.8%	42.8%	28.3%	47.5%	18.3%	8.6%	38.8%

DK: Don't Know

This chapter presents the results of the 2006 District of Columbia BRFSS by topic. Topics generally correspond to modules of the questionnaire. Data tables are titled by topic, and a definition of the variable or variables analyzed (either question text, or a brief definition of calculated variables) are included underneath the title. Where applicable, objectives of the Healthy People 2010 initiative are included in the presentation of the data.

Tables indicate the number of respondents (N) who answered each question in the column to the left of the percentages of respondents giving analyzed responses.

Data presented in tables are stratified by key demographic variables (gender, age, race, education, and income) and Ward. Additional data for some topics are presented in table format, but are not described in the text; the start of these tables in each section is noted accordingly.

Survey Results

One key measure of general health and quality of life is perceived health. That is, how healthy do people feel that they are? This one question, asked of respondents in the BRFSS, provides a holistic view of one's health, incorporating physical and mental well-being. [1] In addition, perceived health, while subjective, can be a predictor of acute illness, chronic disease, mortality, functional disability, and use of health services. [2,3]

BRFSS respondents were asked to rate their own health using a scale of excellent, very good, good, fair, or poor. District adults rated their own health relatively high compared to national figures. Twenty-eight percent of District adults rated their health "excellent" compared to the national mean of 21%; the District of Columbia had the highest "excellent" rating of all states participating in the BRFSS. [4]

Demographic Differences

While there were minor differences in health status by gender, much more significant differences occurred by age, race, education, and income.

- Thirty-eight percent of the oldest adults self-describe their health status as "excellent" or "very good". This is compared to 66% of 18-24 year-olds, 75% of 25-34 year-olds, and 70% of 35-44 year-olds.

- Forty-nine percent of African Americans perceived their health as "excellent" or "very good". Whereas, 78% Caucasian and 70% adults of "other" races thought were most likely to rate their health as "excellent" or "very good".

- Self-perceived health status increased as adults' education increased. Eleven percent of adults with less than a high school degree rated their health as "excellent" compared to 37% of college graduates. On the other side of the scale, 12% of adults with less than a high school degree rated their health status as "poor" compared to less than 1% of college graduates.

- Health status increased as household income increased. While 40% of adults who had a household income of $75,000 or more rated their health as "excellent," less than 20% of adults who had a household income of $25,000 or less did so.

Ward Differences

- Greater proportions of adults in Wards 1, 2, 3, and 6 reported their health status as "excellent" or "very good."

- Adults in Ward 8 had the lowest perceived health status— only 19% rated their health as "excellent." Whereas, 21% to 39% of the adults in the remaining Wards perceived themselves as having excellent health. To the contrary Ward 5 had the highest proportion of adults that rated their health as "poor" (7%).

Table 4. Perceived Health Status, by Demographics and Ward *"How would you rate your general health?"*						
	N	Excellent	Very Good	Good	Fair	Poor
TOTAL	4009	28.0%	33.6%	25.5%	9.3%	3.7%
GENDER						
Male	1550	28.8%	32.9%	25.1%	8.0%	4.2%
Female	2459	26.4%	34.1%	25.9%	10.3%	3.2%
AGE						
18-24	198	24.2%	41.3%	26.4%	7.7%	0.4%
25-34	664	38.5%	36.0%	17.6%	6.3%	1.5%
35-44	762	33.8%	36.2%	22.4%	5.6%	2.2%
45-54	745	26.4%	30.5%	28.8%	10.6%	3.8%
55-64	710	23.8%	32.7%	26.9%	11.0%	5.5%
65+	834	12.9%	25.2%	35.3%	16.9%	9.8%
RACE						
Caucasian	1896	37.9%	40.2%	16.7%	4.1%	1.0%
African American	1671	20.8%	28.0%	32.9%	12.5%	5.8%
Hispanic	146	18.7%	43.4%	21.8%	13.9%	2.3%
Other	202	34.3%	35.5%	21.1%	7.6%	1.5%
EDUCATION						
Less than High School	262	10.8%	19.4%	39.1%	18.5%	12.2%
High School Graduate	692	18.4%	25.9%	33.1%	16.1%	6.5%
Some College	676	21.5%	34.2%	30.8%	9.3%	4.2%
College Graduate	2356	37.0%	39.1%	18.1%	4.9%	0.9%
INCOME						
Less than $15,000	357	16.6%	16.1%	31.8%	21.4%	14.1%
$15,000-$24,999	369	18.0%	22.6%	37.5%	16.1%	5.8%
$25,000-$34,999	316	22.4%	29.5%	33.2%	12.5%	2.4%
$35,000-$49,999	415	22.8%	39.3%	25.9%	10.0%	1.9%
$50,000-$74,999	481	30.8%	38.6%	23.6%	5.2%	1.9%
$75,000+	1516	39.7%	42.4%	15.0%	2.5%	0.4%
WARD						
Ward 1	253	25.9%	40.9%	20.5%	11.9%	0.9%
Ward 2	272	29.0%	40.3%	20.0%	7.7%	3.0%
Ward 3	581	38.9%	36.3%	17.5%	6.3%	1.0%
Ward 4	461	21.4%	33.1%	32.3%	9.0%	4.2%
Ward 5	355	24.4%	32.3%	25.6%	10.3%	7.4%
Ward 6	379	29.75	37.7%	21.9%	6.4%	4.2%
Ward 7	294	22.3%	27.9%	30.8%	14.3%	4.8%
Ward 8	262	18.9%	29.0%	34.1%	13.8%	4.3%

One key measure of general health and quality of life is the concept of health-related quality of life (HRQOL) which refers to one's perceived physical and mental health status. HRQOL data can be used in a variety of ways, including: measuring the effects of chronic illnesses, health disorders, and disabilities; identifying health disparities; and tracking population trends. [5,6]

Measuring HRQOL is also important to understanding the effectiveness of health programs and disease based on the patient's perception of the outcome. When patient perspective is paired with other objective information that is used to evaluate programs and treatments (such as the number of visits and disease status), this provides a more complete picture of the effectiveness of health programs. [7]

Respondents were asked a series of questions to assess their HRQOL, in terms of the influence of physical or mental health problems on their day-to-day lives.

Physical Health

Respondents were asked how many days out of the last 30 they had experienced poor physical health. Over two-thirds of adults (67%) experienced no days of poor physical health. However, one-in-10 (10%) adults felt their physical health was not good for 10 or more days out of the last 30.

- There were only minor differences between men and women for the number of days of poor physical health.
- Less than 36% of adults in all age groups experienced at least one day of poor physical health in the past 30 days. As adults' ages increased, so did reports of experiencing 10 or more days with poor physical health; 4% of adults aged 18-34 experienced poor physical health for 10 or more days, compared to 20% of adults aged 65 and over. However, as adults' age increased, their likelihood of experiencing one to nine days of poor physical health decreased; 31% of 18-24 year-olds experienced this many days of poor physical health, compared to 15% of adults aged 65 and over.
- Thirteen percent of African Americans reported experiencing 10 or more days, in the past 30 days, of poor physical health. This is compared to only 5% of Caucasians, 9% of Hispanics, and 7% of adults of "other" races.
- By education, adults with less schooling reported greater proportions of experiencing 10 or more days of poor health. However, adults with more schooling were more likely to report less than 10 days of poor physical health. Twenty-two percent of adults with less than a high school education experienced 10 or more days of poor physical health compared to only 5% of adults with a college degree. On the other hand, 25% of adults with a college degree had one to nine days of poor physical health, compared to 19% of adults with less than a high school degree.
- Twenty-seven percent of adults with the lowest household incomes (below $15,000) were also most likely to have 10 or more days of poor physical health. This is compared to less than 10% for adults with household incomes of $25,000 or more, and only 4% for adults with a household income above $69,999.
- By Ward, adults residing in Wards 4, 5, and 7 had higher reports 10 or more days of poor physical health (12%, 15%, and 12%, respectively). Adults in Wards 2 and 3 were least likely to do so (6% and 7%, respectively).

Mental Health

Respondents were asked about their mental health—how many days out of the last 30 they felt their mental health was not good. Slightly more adults reported 10 or more days of poor mental health (12%), compared to those who

reported 10 or more days of poor physical health (10%). Exactly two-thirds, 66%, of adults had no days of poor mental health.

- Women were slightly more likely than men to report days of poor mental health; 23% of women, compared to 20% of men, had one to nine days of poor mental health. Thirteen percent of women, compared to 12% of men, had 10 or more days of poor mental health.

- As adults' age increased, the probability of poor mental health days decreased. Over half, 51%, of adults aged 18-24 experienced at least one day of poor mental health in the past 30 days, compared to only 19% of adults aged 65 and over.

- African Americans and Hispanics (16%) reported two-times more than Caucasians (8%) and adults of "other" (8%) races to have 10 or more days of poor mental health.

- As education decreased, the reports of experiencing days of poor mental health increased; 26% of adults with less than a high school degree had 10 or more days of poor mental health, compared to only 8% of adults with a college degree.

- Forty-seven percent of adults incomes less than $15,000 a year experienced at least one day of poor mental health, compared to 30% of adults with a household incomes of $75,000 or more a year.

- Adults residing in Wards 3 and 7 reported lower proportions of having at least one day of poor mental health; than the other Wards 27% of adults in Ward 3 and 28% of adults in Ward 7. This is compared to 42% of adults in Ward 1 who had at least one day, in the past 30, with poor mental health.

Poor Health Interfering with Normal Activities

Respondents who experienced any days when their physical or mental health was not good were asked how many days of the last 30 they were kept from doing normal activities because of poor health. Accounting for all adults (including those who previously stated they did not have any days of poor physical or mental health), 79% of the population had "0" days of impaired activity, 14% had "1-9" days of impairment, and 7% had "10 or more" days.

- The proportion of adults limited in their usual activities because of poor physical or mental health decreased as age increased; 29% of 18-24 year-olds were limited one day or more, compared to 17% of adults age 65 and older. However, younger adults had more reports of between one and nine days when they were limited in their usual activities compared to older adults (23% for adults younger than age 25) and 7% for adults aged 65 and over.

- Adults with the lowest level of education had higher reports of 10 or more days when they were limited in their usual activities compared to the most highly educated adults; 18% of adults with less than a high school degree compared to 4% of adults with a college degree. A similar trend occurred by household income; 22% of adults with a household income below $15,000 reported experiencing 10 or more days of limitations in their daily activities, compared to only 2% of adults with a household income of $75,000 or greater.

- Adults in Wards 5 and 8 had more reports 10 or more days of interference at 10% and 14%, respectively. Adults in Ward 3 had the lowest report at 2%.

Table 5. Number of Days of Poor Physical and Mental Health Demographics and Ward

"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?" and "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?"

	Days Poor Physical Health					Days Poor Mental Health		
	N	0	1-9	10+	N	0	1-9	10+
TOTAL	3955	66.6%	23.6%	9.8%	3966	65.9%	21.8%	12.3%
GENDER								
Male	1542	68.4%	22.3%	9.4%	1540	68.3%	20.2%	11.5%
Female	2413	65.0%	24.8%	10.2%	2426	63.8%	23.2%	13.0%
AGE								
18-24	198	65.1%	30.9%	4.0%	195	49.3%	30.2%	20.5%
25-34	661	69.5%	26.6%	3.9%	665	60.7%	25.5%	13.8%
35-44	756	68.2%	24.3%	7.5%	757	64.6%	23.8%	11.6%
45-54	743	65.0%	22.4%	12.6%	740	66.7%	22.6%	10.7%
55-64	699	63.9%	21.9%	14.2%	696	73.3%	16.4%	10.3%
65+	805	64.5%	15.2%	20.4%	819	81.2%	11.6%	7.2%
RACE								
Caucasian	1882	66.7%	27.9%	5.4%	1870	63.9%	28.4%	7.7%
African American	1635	66.7%	20.2%	13.2%	1658	66.9%	17.3%	15.8%
Hispanic	146	65.4%	25.4%	9.2%	146	61.8%	22.7%	15.5%
Other	201	69.9%	23.5%	6.6%	201	67.9%	24.6%	7.5%
EDUCATION								
Less than High School	260	59.0%	19.2%	21.9%	259	63.9%	9.7%	26.4%
High School Graduate	677	66.9%	18.1%	14.9%	683	65.5%	17.8%	16.7%
Some College	662	61.1%	27.2%	11.6%	671	60.4%	25.6%	14.0%
College Graduate	2334	69.6%	25.4%	5.0%	2331	68.3%	24.2%	7.6%
INCOME								
Less than $15,000	344	48.4%	24.5%	27.2%	350	52.6%	21.2%	26.2%
$15,000-$24,999	364	60.1%	22.7%	17.2%	365	64.4%	17.5%	18.1%
$25,000-$34,999	313	70.7%	21.8%	7.4%	316	69.1%	19.2%	11.7%
$35,000-$49,999	411	68.6%	22.8%	8.6%	413	61.5%	23.6%	14.8%
$50,000-$74,999	477	63.6%	29.6%	6.8%	478	66.5%	25.9%	7.6%
$75,000+	1511	71.5%	24.2%	4.3%	1504	70.1%	23.5%	6.4%
WARD								
Ward 1	250	62.3%	29.3%	8.5%	250	57.6%	31.2%	11.2%
Ward 2	266	68.0%	26.0%	6.0%	269	63.3%	19.5%	17.2%
Ward 3	578	69.3%	23.3%	7.4%	573	73.5%	21.4%	5.1%
Ward 4	450	60.6%	27.9%	11.5%	455	68.9%	19.2%	11.9%
Ward 5	353	64.9%	20.0%	15.1%	356	64.6%	21.6%	13.8%
Ward 6	374	65.6%	23.8%	10.6%	377	62.8%	28.3%	8.9%
Ward 7	290	68.4%	19.4%	12.2%	293	72.5%	15.6%	11.8%
Ward 8	261	64.3%	24.4%	11.3%	260	61.2%	19.3%	19.5%

Table 6. Number of Days of Poor Health Interfered with Usual Activities, By Demographics and Ward

"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?" This table represents the total survey population; respondents indicating zero days for poor physical or mental health are included in the figure for zero days of impairment.

	N	0 Days	1-9 Days	10+ Days
Total	3994	79.0%	13.9%	7.1%
GENDER				
Male	1551	79.8%	12.5%	7.7%
Female	2443	78.2%	15.2%	6.6%
AGE				
18-24	198	71.5%	22.9%	5.6%
25-34	667	77.6%	17.3%	5.1%
35-44	759	79.5%	14.3%	6.2%
45-54	745	80.2%	10.9%	8.9%
55-64	706	80.5%	10.3%	9.2%
65+	823	83.2%	7.3%	9.4%
RACE				
Caucasian	1886	79.0%	18.1%	2.9%
African American	1666	79.8%	9.6%	10.6%
Hispanic	146	73.3%	19.7%	7.0%
Other	202	75.7%	20.5%	3.8%
EDUCATION				
Less than High School	262	72.4%	9.5%	18.1%
High School Graduate	687	81.0%	9.7%	9.3%
Some College	672	74.6%	16.3%	9.1%
College Graduate	2350	80.8%	15.6%	3.5%
INCOME				
Less than $15,000	354	68.9%	9.5%	21.6%
$15,000-$24,999	366	71.5%	14.1%	14.5%
$25,000-$34,999	315	84.6%	10.8%	4.6%
$35,000-$49,999	416	82.7%	12.3%	5.0%
$50,000-$74,999	479	79.9%	14.8%	5.3%
$75,000+	1513	81.6%	15.9%	2.4%
WARD				
Ward 1	249	79.4%	14.9%	5.7%
Ward 2	271	73.5%	18.1%	8.3%
Ward 3	579	80.8%	17.0%	2.2%
Ward 4	459	81.7%	10.6%	7.7%
Ward 5	355	76.8%	13.1%	10.1%
Ward 6	379	78.8%	14.3%	6.8%
Ward 7	295	80.4%	13.4%	6.2%
Ward 8	261	77.7%	7.9%	14.4%

Receiving social and emotional support can reduce stress and positively affect health. Social and emotional support buffer the negative health effects of stress by reducing increases in blood pressure, and reducing secretion of damaging stress-related hormones. Individuals with social and emotional support who have cancer, or have suffered a heart attack, have lower death rates, faster rates of recovery, live longer, and have increased satisfaction with life. [8]

District of Columbia respondents were asked how often they received the social and emotional support they needed, and how satisfied they were with their life.

Social and Emotional Support

Overall, 47% of District adults "always" received the social and emotional support that they needed, and 30% "usually" received such support. At the opposite end of the response scale, 3% "rarely" and 7% "never" received such support.

- The general trend shows the ability of adults to "always" receive social and emotional support increased as age, income, and education increased. However, by age, the trend reverses for adults who stated they "usually" received such support—with the youngest adults showing higher proportions compared to older adults. In addition, the youngest (18-24 year olds) and oldest (65 and older) adults more often reported to "never" receive the support they needed (10% and 13%, respectively).

- Caucasians reported more often to "always" or "usually" receive social and emotional support (91%) compared to all other racial groups. Whereas 1% of Caucasians "never" received such support, 9% or more of African Americans, Hispanics, and adults of "other" races stated such.

- District adults living in Ward 4 reported more often to receive the support they needed (54% stated this "always" occurred), and adults' in Ward 2 reported the least to "always" receive the support they needed (only 41% of adults stated such). Adults in Ward 7 had the highest reports that they "never" received the support they needed (13%).

Satisfaction with Life

- Almost all adults, 94%, were "very satisfied" or "satisfied" with their life. Across all demographics, very few adults were "very dissatisfied" with life.

- The youngest adults were least likely to be satisfied with life, as only 35% stated they were "very satisfied" compared with 45% or more for all other age groups.

- Caucasians had the highest reports of being "very satisfied" with life (59%), and African Americans had the lowest reports to state such (37%). African Americans had more responses than all other race groups to report being "dissatisfied" with life (8%).

- Satisfaction with life increased dramatically by education and income. Only 31% of adults with less than a high school degree, and 26% of adults with a household income below $15,000 were "very satisfied" with life. This is compared to 57% of adults with a college degree and 61% of adults with a household income of $75,000 or more who were "very satisfied."

- Adults in Wards 1, 3, and 6 had more reports of being "very satisfied" with life—over 50% of adults in each of these three Wards stated such. However, only 36% of Ward 7 adults and 33% of Ward 8 adults were "very satisfied." Ward 8 adults reported the highest proportion of being "dissatisfied" with life (10%).

Table 7. Receiving Needed Social and Emotional Support, By Demographics and Ward *"How often do you get the social and emotional support you need?"*						
	N	Always	Usually	Sometimes	Rarely	Never
TOTAL	3757	46.5%	29.6%	14.1%	2.9%	6.9%
GENDER						
Male	1440	45.3%	29.2%	13.5%	2.4%	9.6%
Female	2317	47.5%	30.0%	14.6%	3.4%	4.5%
AGE						
18-24	188	38.8%	33.1%	15.9%	2.3%	9.8%
25-34	641	46.8%	36.0%	11.8%	2.9%	2.5%
35-44	725	48.3%	29.9%	14.1%	2.2%	5.6%
45-54	697	41.3%	28.3%	20.9%	2.9%	6.7%
55-64	660	48.5%	28.7%	11.2%	4.1%	7.6%
65+	766	53.0%	18.6%	12.5%	3.4%	12.5%
RACE						
Caucasian	1822	47.0%	43.5%	6.9%	1.5%	1.1%
African American	1525	46.4%	19.9%	19.3%	3.8%	10.5%
Hispanic	142	38.4%	31.9%	18.3%	1.9%	9.5%
Other	193	46.9%	27.4%	12.7%	3.4%	9.6%
EDUCATION						
Less than High School	234	34.7%	14.8%	26.8%	6.0%	17.7%
High School Graduate	620	46.1%	16.8%	20.9%	4.4%	11.8%
Some College	639	46.5%	24.5%	17.6%	3.4%	8.0%
College Graduate	2249	48.6%	39.0%	8.0%	1.8%	2.7%
INCOME						
Less than $15,000	332	35.5%	11.6%	28.5%	5.7%	18.7%
$15,000-$24,999	339	42.2%	22.7%	16.6%	4.7%	13.8%
$25,000-$34,999	300	43.5%	27.6%	18.8%	2.6%	7.5%
$35,000-$49,999	392	51.4%	23.7%	14.4%	4.3%	6.3%
$50,000-$74,999	452	47.4%	34.8%	8.7%	1.3%	7.8%
$75,000+	1468	50.9%	39.7%	7.3%	1.2%	1.0%
WARD						
Ward 1	247	45.2%	39.2%	11.9%	0.9%	2.9%
Ward 2	272	40.7%	40.0%	9.3%	4.9%	5.2%
Ward 3	570	47.5%	36.7%	10.5%	2.7%	2.6%
Ward 4	456	53.8%	26.3%	12.9%	2.1%	4.9%
Ward 5	351	43.4%	26.9%	17.6%	4.4%	7.7%
Ward 6	376	47.2%	34.8%	10.9%	1.7%	5.4%
Ward 7	288	48.8%	15.2%	21.0%	2.2%	12.7%
Ward 8	259	47.6%	15.6%	20.6%	6.9%	9.3%

Table 8. Satisfaction with Life, By Demographics and Ward *"In general, how satisfied are you with your life?"*					
	N	Very Satisfied	Satisfied	Dissatisfied	Very Dissatisfied
TOTAL	3794	45.9%	47.8%	5.2%	1.1%
GENDER					
Male	1458	43.9%	49.1%	6.3%	1.0%
Female	2336	47.8%	46.7%	4.4%	1.1%
AGE					
18-24	189	35.2%	55.1%	7.4%	2.3%
25-34	638	47.2%	47.5%	4.9%	0.4%
35-44	728	48.7%	44.5%	6.0%	0.8%
45-54	703	45.0%	46.7%	6.5%	1.8%
55-64	663	49.1%	45.3%	4.5%	1.2%
65+	789	47.3%	49.3%	2.7%	0.8%
RACE					
Caucasian	1829	58.5%	38.2%	2.8%	0.5%
African American	1550	36.7%	54.0%	7.8%	1.5%
Hispanic	141	43.1%	52.9%	2.8%	1.2%
Other	194	44.6%	52.8%	2.0%	0.6%
EDUCATION					
Less than High School	242	30.8%	57.9%	8.7%	2.7%
High School Graduate	632	31.8%	57.8%	8.1%	2.2%
Some College	647	37.4%	53.5%	8.2%	0.8%
College Graduate	2258	57.0%	40.1%	2.4%	0.5%
INCOME					
Less than $15,000	333	25.6%	55.5%	14.7%	4.2%
$15,000-$24,999	338	34.8%	52.4%	9.3%	3.5%
$25,000-$34,999	303	36.0%	54.3%	9.6%	0%
$35,000-$49,999	398	40.7%	53.4%	5.0%	0.8%
$50,000-$74,999	461	50.0%	48.3%	1.6%	0.2%
$75,000+	1468	60.7%	37.8%	1.4%	0.1%
WARD					
Ward 1	249	50.9%	46.3%	1.6%	1.2%
Ward 2	271	45.7%	46.8%	6.1%	1.4%
Ward 3	576	60.1%	37.8%	2.0%	0.1%
Ward 4	460	47.4%	46.0%	5.9%	0.8%
Ward 5	356	41.2%	49.9%	7.3%	1.7%
Ward 6	378	54.7%	41.6%	3..0%	0.7%
Ward 7	296	36.0%	55.7%	6.05	2.3%
Ward 8	263	32.5%	56.0%	10.4%	1.1%

Forty million adults in the U.S. experience the effects of an anxiety disorder, and over 20 million U.S. adults experience a depressive episode. [9,10] Both anxiety and depressive disorders can be very disruptive to an individual's daily routine, and can have a serious impact on one's family—ultimately reducing one's quality of life. In addition, depression can have a negative effect on any other illnesses the individual may have and can lead to suicide. [11]

District of Columbia respondents were asked whether or not they experienced any symptoms of anxiety or depression, and if they had ever been diagnosed with an anxiety or depressive disorder.

Anxiety and Depressive Disorder Symptoms

District adults were asked the number of days in the past two weeks that they experienced a variety of anxiety and depressive disorder symptoms. These included: having little interest or pleasure in doing things; feeling down, depressed, or hopeless; having trouble sleeping; feeling tired or having little energy; over or under eating; having negative feelings about oneself; having trouble concentrating; and being lethargic or restless.

- Responses were broken down as follows: to be tired or have little energy (64%), least likely to have negative feelings about themselves (19%), have trouble concentrating (18%), or be lethargic, fidgety, or restless (10%).

- There were only minor differences by gender for each anxiety and depressive disorder symptom.

- For the majority of symptoms, the reports of experiencing each decreased as age, education, and income increased. Exceptions were for having trouble sleeping, where the more highly educated and adults with higher household incomes had more trouble, and for being tired or having little energy, where adults in the highest and lowest educational groups had the most trouble.

- For many symptoms, differences were small for the different race groups. Two exceptions were for adults who had little interest or pleasure in doing things and having trouble sleeping. Caucasians reported the least to experience little interest or pleasure in things (26%) and African Americans reported the most (43%). On the other hand, African Americans reported the least amount of trouble sleeping (42%) and Hispanics had the most (56%).

- Differences by Ward were most pronounced for having little interest or pleasure in doing things (49% of Ward 8 adults reported this compared to only 26% of Ward 3 adults) and for having trouble sleeping (52% of Ward 1 adults compared to 35% of Ward 7 adults). Differences were the least pronounced by Ward for feeling tired or having little energy (67% of Ward 1 adults stated such compared to 58% of Ward 7 adults).

Prevalence of Anxiety and Depressive Disorders

Only 10% of adults had ever been told by a doctor or other health professional that they had an anxiety disorder, and only 15% had been told that they had a depressive disorder.

- Women were more likely than men to have ever been told that they had an anxiety or depressive disorder (10% of women had an anxiety disorder compared to 9% of men, and 18% of women had a depressive disorder compared to 11% of men).

- The oldest adults, aged 65 and over, were much less likely to have been diagnosed with a depressive disorder compared to all other age groups; 10% for adults aged 65 and over, compared to 14% or higher of adults aged 18-44, and 19% of adults aged 45-64.

- Caucasians and Hispanics were more likely than African Americans and adults of "other" races to have been told that they had an anxiety or depressive disorder. Thirteen percent of Caucasians and 14% of Hispanics reported having had an anxiety disorder, compared to 9% or less of adults of all other races. Twenty percent of Caucasians and Hispanics reported having had a depressive disorder, compared to 13% or less of African Americans and adults of "other" races.

- Adults in the lowest income brackets were most likely to have been told that they had an anxiety or depressive disorder. Sixteen percent of adults with a household income below $15,000 reported having been told that they had an anxiety disorder (compared to 10% or less of adults in all other household income groups), and 23% of adults in this lowest income group had been told that they had a depressive disorder, compared with 17% or less of adults in all other income categories.

- Adults residing in Ward 1 were most likely to report having had an anxiety or depressive disorder (13% and 25%, respectively), and adults in Wards 7 and 8 were least likely to report such (6% in each Ward had an anxiety disorder, and 11% in each had a depressive disorder).

Table 9. Number of Days With Little Interest or Pleasure in Doing Things, By Demographics and Ward

"Over the last 2 weeks, how many days have you had little interest or pleasure in doing things?"

	N	None	1-3 days	4-6 days	7-10 days	11-13 days	All 14 days
TOTAL	3664	64.6%	20.0%	5.4%	4.2%	0.6%	5.2%
GENDER							
Male	1414	64.8%	20.8%	5.3%	3.5%	0.4%	5.1%
Female	2250	64.3%	19.3%	5.5%	4.8%	0.7%	5.3%
AGE							
18-24	186	46.6%	24.3%	8.6%	8.8%	1.7%	10.0%
25-34	626	62.2%	22.5%	6.9%	4.0%	0.3%	4.1%
35-44	709	67.8%	20.7%	4.1%	3.0%	0.2%	4.2%
45-54	686	65.3%	19.4%	4.3%	4.1%	0.9%	6.0%
55-64	644	69.3%	18.5%	4.1%	3.6%	0.4%	4.1%
65+	738	74.4%	14.2%	4.2%	2.6%	0.2%	4.4%
RACE							
Caucasian	1796	73.8%	18.8%	3.2%	2.3%	0.4%	1.6%
African American	1473	57.1%	21.5%	7.2%	5.3%	0.7%	8.2%
Hispanic	134	63.1%	16.6%	6.2%	8.7%	0.7%	4.7%
Other	186	66.8%	19.2%	5.2%	3.8%	0.5%	4.5%
EDUCATION							
Less than High School	223	47.3%	21.0%	12.6%	5.0%	0.6%	13.4%
High School Graduate	599	54.3%	20.5%	7.4%	7.7%	1.3%	8.9%
Some College	613	58.6%	22.1%	6.6%	6.2%	0.2%	6.3%
College Graduate	2216	73.5%	18.9%	3.2%	2.0%	0.4%	2.0%
INCOME							
Less than $15,000	314	45.6%	20.7%	11.8%	11.0%	0.9%	10.1%
$15,000-$24,999	322	57.9%	15.0%	6.9%	8.2%	0.4%	11.5%
$25,000-$34,999	287	57.8%	25.9%	4.5%	3.0%	0.2%	8.5%
$35,000-$49,999	389	61.8%	20.7%	5.0%	4.8%	0.1%	7.6%
$50,000-$74,999	450	64.0%	25.8%	4.5%	3.2%	0.3%	2.1%
$75,000+	1438	76.5%	17.5%	3.1%	1.5%	0.4%	1.0%
WARD							
Ward 1	249	68.0%	22.2%	3.0%	2.8%	0.7%	3.2%
Ward 2	267	67.3%	17.2%	6.0%	4.6%	0%	4.8%
Ward 3	567	74.3%	19.7%	3.7%	0.6%	0.2%	1.6%
Ward 4	448	67.8%	18.0%	5.1%	2.2%	1.2%	5.6%
Ward 5	344	63.4%	20.0%	6.8%	5.9%	0%	3.9%
Ward 6	366	71.3%	19.8%	3.4%	2.7%	0.7%	2.1%
Ward 7	275	60.5%	18.2%	9.4%	4.6%	0.3%	7.0%
Ward 8	257	51.2%	20.7%	5.2%	12.4%	0.4%	10.2%

Table 10. Number of Days Feeling Down, Depressed or Hopeless, By Demographics and Ward

"Over the last 2 weeks, how many days have you felt down, depressed or hopeless?"

	N	None	1-3 days	4-6 days	7-10 days	11-13 days	All 14 days
TOTAL	3749	70.1%	19.5%	3.7%	2.9%	0.5%	3.3%
GENDER							
Male	1447	71.5%	19.7%	3.0%	2.5%	0.4%	3.0%
Female	2302	68.9%	19.4%	4.3%	3.2%	0.6%	3.5%
AGE							
18-24	189	60.2%	24.0%	5.3%	5.8%	0.8%	3.9%
25-34	635	63.7%	25.7%	4.0%	2.7%	0.3%	3.6%
35-44	723	72.1%	18.9%	3.2%	2.3%	0.4%	3.1%
45-54	693	68.0%	20.5%	4.0%	3.2%	1.0%	3.3%
55-64	655	77.4%	13.3%	3.5%	2.4%	0.5%	2.9%
65+	771	81.0%	11.8%	2.7%	1.5%	0%	3.0%
RACE							
Caucasian	1812	71.6%	22.6%	2.6%	2.1%	0.3%	0.8%
African American	1531	68.6%	17.0%	5.1%	3.8%	0.6%	4.9%
Hispanic	137	66.0%	20.7%	2.5%	2.8%	0.7%	7.2%
Other	191	72.6%	21.8%	1.5%	1.6%	0.5%	2.0%
EDUCATION							
Less than High School	237	56.7%	18.0%	6.0%	9.1%	0.7%	9.5%
High School Graduate	622	62.5%	20.0%	7.7%	3.7%	0.9%	5.2%
Some College	636	67.8%	20.4%	3.1%	3.0%	0.3%	5.4%
College Graduate	2240	76.1%	19.3%	2.0%	1.7%	0.2%	0.8%
INCOME							
Less than $15,000	321	53.6%	20.3%	7.6%	6.0%	1.8%	10.6%
$15,000-$24,999	341	68.3%	12.6%	8.9%	5.5%	0.2%	4.5%
$25,000-$34,999	297	64.2%	25.1%	3.5%	3.1%	0.2%	3.8%
$35,000-$49,999	395	69.2%	20.1%	5.2%	3.0%	0%	2.6%
$50,000-$74,999	456	76.2%	19.1%	2.2%	1.7%	0%	0.8%
$75,000+	1459	76.5%	19.7%	1.4%	1.4%	0.3%	0.6%
WARD							
Ward 1	252	66.7%	24.0%	2.6%	3.8%	0.4%	2.5%
Ward 2	269	75.8%	12.6%	2.8%	7.1%	0.7%	1.0%
Ward 3	573	76.5%	20.5%	1.3%	1.3%	0.1%	0.3%
Ward 4	460	74.2%	16.1%	3.9%	2.2%	0.1%	3.5%
Ward 5	356	64.4%	22.1%	6.0%	2.0%	0.7%	4.9%
Ward 6	378	70.5%	21.6%	4.7%	1.3%	0.2%	1.7%
Ward 7	291	74.2%	13.7%	5.3%	2.4%	1.4%	3.1%
Ward 8	262	62.2%	16.0%	4.5%	9.3%	0.1%	7.9%

Table 11. Number of Days Having Trouble Sleeping, By Demographics and Ward

"Over the last 2 weeks, how many days have you had trouble falling asleep or staying asleep or sleeping too much?"

	N	None	1-3 days	4-6 days	7-10 days	11-13 days	All 14 days
TOTAL	3725	53.2%	24.1%	7.4%	5.7%	0.5%	9.1%
GENDER							
Male	1443	53.4%	25.0%	7.8%	5.4%	0.5%	7.9%
Female	2282	53.0%	23.2%	7.1%	6.0%	0.6%	10.1%
AGE							
18-24	184	42.6%	27.1%	9.5%	8.3%	0.4%	12.1%
25-34	631	48.3%	24.6%	7.55	7.8%	0.5%	11.2%
35-44	725	53.0%	27.0%	8.1%	4.1%	0.6%	7.2%
45-54	691	56.3%	24.2%	7.4%	4.1%	0.6%	7.4%
55-64	652	56.7%	22.2%	6.3%	5.9%	0.9%	8.0%
65+	759	63.6%	19.4%	5.2%	3.7%	0.3%	7.8%
RACE							
Caucasian	1808	49.2%	28.7%	9.6%	6.1%	0.8%	5.6%
African American	1512	57.7%	19.6%	5.8%	5.3%	0.3%	11.4%
Hispanic	138	43.9%	30.7%	6.1%	9.1%	1.2%	9.0%
Other	190	46.9%	27.2%	10.2%	4.8%	0.9%	9.9%
EDUCATION							
Less than High School	236	55.4%	17.3%	4.7%	5.1%	0%	17.5%
High School Graduate	609	53.6%	18.7%	5.6%	6.3%	0.4%	15.2%
Some College	629	53.7%	24.0%	5.8%	6.7%	0.5%	9.3%
College Graduate	2238	52.4%	27.3%	9.1%	5.2%	0.6%	5.3%
INCOME							
Less than $15,000	319	49.0%	18.8%	9.6%	5.5%	1.0%	16.1%
$15,000-$24,999	333	56.9%	22.1%	4.0%	3.7%	0%	13.3%
$25,000-$34,999	291	55.6%	18.4%	8.8%	8.1%	0.2%	9.0%
$35,000-$49,999	391	55.5%	23.7%	6.3%	4.5%	0.1%	10.0%
$50,000-$74,999	453	50.7%	27.4%	7.2%	5.4%	0.9%	8.5%
$75,000+	1458	51.3%	29.1%	8.8%	5.3%	0.7%	4.7%
WARD							
Ward 1	252	47.6%	27.7%	6.3%	8.2%	0.7%	9.5%
Ward 2	269	45.9%	29.2%	8.6%	6.0%	0.5%	9.9%
Ward 3	571	52.4%	29.9%	8.7%	5.4%	1.0%	2.6%
Ward 4	456	55.1%	23.5%	5.4%	5.0%	0.2%	10.8%
Ward 5	347	48.3%	24.7%	9.2%	5.6%	0%	12.2%
Ward 6	377	53.0%	25.9%	7.5%	4.3%	0.3%	9.0%
Ward 7	292	65.5%	16.7%	3.2%	5.0%	0%	9.6%
Ward 8	258	53.4%	20.2%	8.9%	4.6%	1.1%	11.7%

Table 12. Number of Days Being Tired or Having Little Energy, By Demographics and Ward

"Over the last 2 weeks, how many days have you felt tired or had little energy?"

	N	None	1-3 days	4-6 days	7-10 days	11-13 days	All 14 days
TOTAL	3712	36.1%	35.7%	10.8%	7.0%	0.5%	9.9%
GENDER							
Male	1441	39.5%	36.9%	9.7%	6.2%	0.4%	7.2%
Female	2271	33.2%	34.6%	11.7%	7.7%	0.5%	12.3%
AGE							
18-24	188	22.6%	38.1%	13.0%	13.5%	0.5%	12.7%
25-34	633	30.8%	37.9%	13.0%	7.1%	1.0%	10.3%
35-44	722	32.5%	40.5%	10.8%	6.3%	0.4%	9.6%
45-54	688	38.6%	35.0%	10.0%	6.8%	0.9%	8.7%
55-64	653	46.1%	35.0%	8.1%	3.7%	0.1%	7.0%
65+	746	50.0%	25.4%	8.9%	5.3%	0%	10.3%
RACE							
Caucasian	1804	34.0%	38.8%	12.8%	8.5%	0.7%	5.2%
African American	1505	37.8%	31.6%	10.1%	6.5%	0.4%	13.6%
Hispanic	138	35.9%	40.0%	6.7%	4.2%	0%	13.2%
Other	187	31.9%	46.4%	9.0%	6.2%	0.5%	6.0%
EDUCATION							
Less than High School	230	35.2%	26.9%	13.0%	8.8%	0.3%	15.7%
High School Graduate	611	37.2%	32.1%	9.1%	5.9%	0.2%	15.5%
Some College	629	37.3%	30.0%	10.9%	7.8%	0.8%	13.2%
College Graduate	2228	35.5%	40.5%	11.2%	6.7%	0.5%	5.6%
INCOME							
Less than $15,000	321	30.7%	32.2%	10.9%	6.3%	1.6%	18.4%
$15,000-$24,999	332	36.4%	29.0%	10.7%	7.9%	0%	16.0%
$25,000-$34,999	294	36.8%	33.4%	10.0%	7.5%	0.2%	12.1%
$35,000-$49,999	393	35.5%	36.6%	11.6%	8.4%	0.4%	7.5%
$50,000-$74,999	451	38.2%	36.0%	10.7%	7.9%	0.4%	6.8%
$75,000+	1451	36.7%	41.2%	10.9%	5.7%	0.5%	4.9%
WARD							
Ward 1	247	32.9%	39.4%	8.1%	7.1%	0%	12.4%
Ward 2	272	33.8%	43.9%	8.1%	7.0%	0%	7.2%
Ward 3	572	39.7%	38.5%	10.9%	6.7%	0.7%	3.5%
Ward 4	454	36.4%	30.1%	11.6%	7.1%	1.0%	13.9%
Ward 5	352	38.6%	30.3%	10.9%	7.2%	0.3%	12.6%
Ward 6	377	35.3%	38.6%	9.4%	7.9%	0.8%	7.9%
Ward 7	287	41.8%	36.1%	6.9%	4.5%	0.3%	10.4%
Ward 8	258	37.1%	29.8%	8.2%	9.6%	0%	15.4%

Table 13. Number of Days With Poor Appetite or Over eating, By Demographics and Ward

"Over the last 2 weeks, how many days have you had a poor appetite or eaten too much?"

	N	None	1-3 days	4-6 days	7-10 days	11-13 days	All 14 days
TOTAL	3724	66.1%	17.7%	6.2%	3.9%	0.3%	5.8%
GENDER							
Male	1440	67.4%	18.9%	6.3%	2.1%	0.0%	5.3%
Female	2284	65.0%	16.7%	6.2%	5.5%	0.5%	6.2%
AGE							
18-24	186	52.4%	21.2%	10.2%	7.0%	0.2%	9.0%
25-34	634	61.7%	19.2%	8.1%	5.0%	0.7%	5.3%
35-44	722	67.0%	19.1%	5.5%	2.5%	0%	6.0%
45-54	685	65.1%	18.4%	5.2%	5.0%	0.5%	5.8%
55-64	651	70.7%	17.9%	4.4%	2.6%	0.1%	4.4%
65+	766	80.4%	10.0%	3.3%	1.5%	0%	4.8%
RACE							
Caucasian	1809	66.1%	20.9%	6.1%	3.5%	0.4%	3.0%
African American	1510	65.2%	15.6%	6.6%	4.2%	0.3%	8.1%
Hispanic	137	64.8%	17.2%	8.2%	6.8%	0%	3.0%
Other	191	70.0%	17.5%	3.8%	1.6%	0%	7.0%
EDUCATION							
Less than High School	233	63.3%	18.9%	4.2%	2.8%	0.3%	10.4%
High School Graduate	615	61.7%	13.1%	8.3%	4.2%	0.5%	12.2%
Some College	628	62.1%	19.0%	6.2%	6.3%	0.5%	6.0%
College Graduate	2234	69.9%	18.9%	5.7%	3.1%	0.1%	2.3%
INCOME							
Less than $15,000	320	53.3%	21.9%	5.2%	3.5%	0.7%	15.5%
$15,000-$24,999	333	66.1%	11.7%	5.3%	5.1%	0%	11.8%
$25,000-$34,999	294	64.9%	15.8%	8.0%	4.5%	0.3%	6.5%
$35,000-$49,999	390	64.2%	19.2%	8.4%	2.5%	0.2%	5.5%
$50,000-$74,999	453	66.5%	19.4%	6.5%	2.4%	0.3%	4.9%
$75,000+	1454	70.4%	18.9%	6.0%	3.4%	0.2%	1.1%
WARD							
Ward 1	250	64.2%	17.9%	7.5%	4.8%	0.5%	5.1%
Ward 2	270	71.3%	18.3%	3.8%	1.9%	0%	4.6%
Ward 3	574	70.5%	19.3%	5.1%	2.5%	0.1%	2.5%
Ward 4	455	71.7%	13.6%	5.3%	4.4%	0%	5.0%
Ward 5	352	63.9%	19.6%	7.9%	2.2%	0.1%	6.3%
Ward 6	376	65.3%	23.2%	5.3%	3.2%	0.3%	2.7%
Ward 7	291	67.4%	16.1%	5.2%	4.0%	0%	7.2%
Ward 8	258	55.6%	14.3%	8.3%	5.6%	0.4%	15.7%

Table 14. Number of Days with Bad Feelings About Themselves, By Demographics and Ward

"Over the last 2 weeks, how many days have you felt bad about yourself or that you were a failure or had let yourself or your family down?"

	N	None	1-3 days	4-6 days	7-10 days	11-13 days	All 14 days
TOTAL	3736	80.8%	11.5%	2.2%	2.7%	0.4%	2.3%
GENDER							
Male	1443	80.7%	11.6%	2.3%	1.9%	0.6%	2.9%
Female	2293	81.0%	11.5%	2.1%	3.5%	0.1%	1.8%
AGE							
18-24	188	75.8%	12.2%	3.4%	4.3%	0.5%	3.8%
25-34	635	76.3%	15.0%	3.7%	3.1%	0.6%	1.3%
35-44	719	80.8%	12.8%	1.9%	2.3%	0.1%	2.0%
45-54	691	76.7%	13.0%	1.4%	4.1%	0.5%	4.3%
55-64	653	86.5%	8.1%	1.4%	1.5%	0.4%	2.2%
65+	767	91.1%	5.5%	0.7%	1.3%	0.1%	1.2%
RACE							
Caucasian	1808	80.5%	14.6%	1.6%	2.0%	0.5%	0.9%
African American	1525	81.2%	9.0%	2.8%	2.9%	0.3%	3.7%
Hispanic	136	76.9%	11.8%	3.0%	8.2%	0%	0%
Other	189	81.1%	13.8%	1.0%	1.7%	0.5%	1.9%
EDUCATION							
Less than High School	232	74.9%	9.5%	3.6%	2.6%	0%	9.4%
High School Graduate	621	78.9%	9.5%	3.7%	3.4%	0.5%	3.9%
Some College	635	80.2%	11.3%	1.7%	4.1%	0.9%	1.8%
College Graduate	2235	82.8%	12.7%	1.6%	2.0%	0.2%	0.7%
INCOME							
Less than $15,000	317	70.5%	11.6%	4.7%	4.3%	0.9%	7.9%
$15,000-$24,999	336	74.7%	10.0%	5.1%	4.5%	0.2%	5.6%
$25,000-$34,999	298	8.0%	11.5%	1.1%	3.1%	0%	3.3%
$35,000-$49,999	393	82.0%	9.9%	1.9%	3.1%	1.3%	1.0%
$50,000-$74,999	454	84.8%	11.3%	1.9%	1.8%	0%	0.3%
$75,000=	1457	84.3%	12.8%	1.0%	1.4%	0.3%	0.3%
WARD							
Ward 1	249	72.1%	20.4%	2.1%	1.9%	0.5%	3.0%
Ward 2	271	81.8%	9.5%	4.2%	1.7%	1.8%	1.1%
Ward 3	572	83.1%	13.6%	1.6%	1.4%	0%	0.3%
Ward 4	457	87.5%	6.0%	2.0%	2.9%	0.1%	1.5%
Ward 5	354	82.1%	9.8%	1.9%	3.3%	0%	2.8%
Ward 6	377	80.5%	13.5%	2.9%	2.4%	0.3%	0.4%
Ward 7	295	80.6%	11.0%	2.1%	3.0%	0.3%	3.1%
Ward 8	261	75.9%	11.9%	1.5%	3.1%	1.8%	5.9%

Table 15. Number of Days Having Trouble Concentrating, By Demographics and Ward

"Over the last 2 weeks, how many days have you had trouble concentrating on things, such as reading the newspaper or watching the TV?"

	N	None	1-3 days	4-6 days	7-10 days	11-13 days	All 14 days
TOTAL	3739	81.8%	10.1%	2.8%	2.3%	0.1%	2.9%
GENDER							
Male	1442	80.9%	10.8%	2.6%	2.0%	0.2%	3.4%
Female	2297	82.6%	9.4%	2.9%	2.6%	0.1%	2.4%
AGE							
18-24	187	75.7%	11.1%	5.6%	3.5%	0.5%	3.6%
25-34	634	80.1%	12.3%	2.4%	2.5%	0.1%	2.6%
35-44	722	80.8%	10.8%	2.9%	2.4%	0%	3.2%
45-54	693	81.9%	10.2%	2.2%	2.5%	0.3%	2.9%
55-64	660	83.3%	9.4%	2.9%	1.1%	0%	3.2%
65+	762	89.1%	5.6%	1.5%	1.6%	0%	2.2%
RACE							
Caucasian	1814	81.6%	11.3%	3.2%	1.9%	0.4%	1.6%
African American	1520	82.3%	8.6%	2.0%	2.7%	0%	4.4%
Hispanic	137	79.9%	8.1%	8.0%	2.8%	0%	1.2%
Other	190	78.4%	16.5%	2.4%	1.4%	0%	1.2%
EDUCATION							
Less than High School	234	76.9%	9.6%	1.9%	4.9%	0%	6.7%
High School Graduate	625	81.1%	7.9%	3.4%	2.4%	0.3%	4.9%
Some College	630	80.9%	8.9%	4.3%	2.5%	0%	3.4%
College Graduate	2238	83.3%	11.5%	2.1%	1.8%	0.1%	1.2%
INCOME							
Less than $15,000	322	77.2%	8.3%	3.5%	3.4%	0%	7.6%
$15,000-$24,999	337	80.1%	8.0%	3.9%	3.6%	0%	4.4%
$25,000-$34,999	297	81.6%	10.3%	1.4%	2.8%	0%	3.9%
$35,000-$49,999	391	79.9%	11.4%	3.7%	2.6%	0.3%	2.2%
$50,000-$74,999	456	83.0%	11.0%	2.6%	2.0%	0.2%	1.1%
$75,000+	1458	84.8%	10.4%	1.7%	1.6%	0.3%	1.3%
WARD							
Ward 1	252	80.5%	13.1%	1.1%	1.9%	0.4%	3.0%
Ward 2	271	79.9%	13.0%	1.6%	2.4%	1.2%	2.0%
Ward 3	577	85.8%	9.3%	3.2%	1.0%	0.0%	0.7%
Ward 4	459	83.1%	6.8%	3.7%	4.1%	0%	2.4%
Ward 5	357	80.2%	12.4%	2.8%	1.6%	0%	2.9%
Ward 6	376	83.8%	7.4%	3.6%	2.4%	0.2%	2.7%
Ward 7	291	88.8%	6.6%	1.0%	0.6%	0%	3.0%
Ward 8	261	76.9%	9.5%	1.2%	5.4%	0%	6.0%

Table 16. Number of Days Being Lethargic, Fidgety, or Restless, By Demographics and Ward

"Over the last 2 weeks, how many days have you moved or spoken so slowly that other people could have noticed? Or the opposite - being so fidgety or restless that you were moving around a lot more than usual?"

	N	None	1-3 days	4-6 days	7-10 days	11-13 days	All 14 days
TOTAL	3711	90.0%	5.5%	1.6%	1.4%	0.1%	1.4%
GENDER							
Male	1433	89.7%	6.2%	1.6%	1.3%	0.1%	1.2%
Female	2278	90.2%	5.0%	1.7%	1.5%	0%	1.6%
AGE							
18-24	188	82.1%	8.4%	3.5%	4.0%	0%	2.0%
25-34	632	89.9%	6.5%	1.2%	1.2%	0%	1.2%
35-44	721	88.9%	7.1%	1.8%	0.5%	0%	1.6%
45-54	681	90.0%	5.7%	1.5%	0.9%	0.4%	1.6%
55-64	657	94.0%	2.7%	1.2%	1.4%	0%	0.7%
65+	751	94.2%	2.0%	1.2%	1.1%	0%	1.5%
RACE							
Caucasian	1805	92.3%	5.5%	0.7%	0.8%	0.1%	0.5%
African American	1506	87.8%	5.8%	2.5%	1.6%	0%	2.3%
Hispanic	135	87.5%	4.2%	2.4%	5.9%	0%	0%
Other	188	91.8%	6.6%	0.1%	0.2%	0%	1.3%
EDUCATION							
Less than High School	228	79.8%	9.4%	4.6%	3.1%	0%	3.0%
High School Graduate	615	85.9%	6.4%	2.4%	1.4%	0%	3.9%
Some College	629	87.8%	5.9%	2.7%	2.7%	0%	1.0%
College Graduate	2226	93.9%	4.5%	0.5%	0.8%	0.1%	0.3%
INCOME							
Less than $15,000	311	82.4%	8.7%	1.0%	2.0%	0.1%	5.8%
$15,000-$24,999	335	84.1%	5.8%	3.5	3.2%	0%	3.2%
$25,000-$34,999	294	88.5%	8.6%	1.0%	1.0%	0%	0.8%
$35,000-$49,999	390	92.9%	4.5%	0.7%	0.4%	0%	1.4%
$50,000-$74,999	453	91.2%	5.7%	2.2%	0.6%	0.2%	0.1%
$75,000+	1451	94.1%	4.4%	0.7%	0.6%	0.1%	0.1%
WARD							
Ward 1	250	87.8%	8.2%	1.0%	0.5%	0.4%	2.1%
Ward 2	270	89.7%	6.6%	3.5%	0%	0%	0.2%
Ward 3	570	94.7%	3.6%	0.3%	0.6%	0.1%	0.7%
Ward 4	457	90.5%	3.2%	3.1%	1.8%	0%	1.4%
Ward 5	354	91.1%	5.0%	1.3%	0.2%	0%	2.4%
Ward 6	374	90.8%	5.6%	1.9%	0.4%	0.2%	1.1%
Ward 7	291	90.7%	5.7%	2.1%	1.0%	0%	0.5%
Ward 8	255	83.2%	8.5%	1.6%	2.8%	0%	4.0%

Table 17. Prevalence of Anxiety and Depressive Disorders, By Demographics and Ward

"Has a doctor or other healthcare provider EVER told you that you had an anxiety disorder (including acute stress disorder, anxiety, generalized anxiety disorder, obsessive-compulsive disorder, panic disorder, phobia, post traumatic stress disorder, or social anxiety disorder)?" and "Has a doctor or other healthcare provider EVER told you that you have a depressive disorder (including depression, major depression, dysthymia, or minor depression)?"

		Anxiety Disorder		Depressive Disorder
	N	Yes	N	Yes
TOTAL	3758	9.5%	3754	15.0%
GENDER				
Male	1455	8.6%	1450	11.3%
Female	2303	10.3%	2304	18.1%
AGE				
18-24	188	10.1%	187	17.2%
25-34	633	9.4%	631	13.7%
35-44	723	8.4%	723	14.4%
45-54	693	12.3%	694	19.0%
55-64	660	11.4%	660	18.6%
65+	777	6.8%	775	9.9%
RACE				
Caucasian	1822	12.8%	1821	19.6%
African American	1529	7.0%	1526	11.6%
Hispanic	136	13.5%	137	20.4%
Other	191	9.1%	191	13.4%
EDUCATION				
Less than High School	239	6.8%	237	18.5%
High School Graduate	622	8.6%	622	14.0%
Some College	640	12.0%	641	14.1%
College Graduate	2243	9.3%	2239	15.2%
INCOME				
Less than $15,000	323	15.9%	320	23.2%
$15,000-$24,999	340	9.1%	340	15.4%
$25,000-$34,999	298	6.7%	298	11.8%
$35,000-$49,999	392	10.1%	393	16.5%
$50,000-$74,999	456	8.5%	454	11.9%
$75,000+	1461	9.1%	1461	14.1%
WARD				
Ward 1	250	13.0%	252	24.7%
Ward 2	273	8.5%	271	21.8%
Ward 3	579	9.0%	579	16.3%
Ward 4	460	8.6%	461	12.3%
Ward 5	356	10.4%	355	12.4%
Ward 6	379	9.8%	380	14.0%
Ward 7	297	6.0%	297	11.4%
Ward 8	262	6.4%	263	10.5%

Healthy People 2010 Objectives

- ***Increase the proportion of adults under age 65 with health insurance to 100%***
- ***Increase the proportion of persons who have a regular primary care provider to 85%***

Having health care coverage is important to every individual in order to get needed healthcare when sick. Individuals without health care coverage have been shown to receive less preventive care, receive disease diagnoses at more advanced stages, undergo less therapeutic care, and have higher disease mortality rates. [12]

In addition to the benefits of having health care coverage, there are numerous benefits to having a primary care provider. Individuals with a primary care provider receive more effective and efficient health care—such as more preventive services and having better control of chronic medical conditions. [13] Having a primary provider—or a usual source of professional care—also relates to one's ability to access the health care system, increased satisfaction with medical care, a decrease in visits to the Emergency Department, a lower chance of being admitted to the hospital, and a higher likelihood of proper adherence to medications. [14]

District of Columbia respondents were asked a series of questions about their health care coverage. These questions assessed whether certain obstacles—such as lack of insurance, having the necessary money to pay for care, and not having a regular source of health care—prevented them from getting needed health care.

Health Care Coverage

Respondents were asked if they had any sort of health care coverage, public or private. Ninety-one percent of adults had health care coverage—a higher rate of coverage than reported nationally (86%). This is the fifth highest percentage of coverage compared to all states, but less than the Healthy People 2010 goal of 100%.[15]

- Women were slightly more likely to have health insurance than men—93% versus 89%, respectively.
- Adults aged 18-24 were least likely to have health insurance, as only 86% stated such. This is compared to 90% or more of adults in all other age groups.
- Caucasians were most likely to have health insurance (96%), and African Americans were least likely to have coverage (88%).
- The likelihood of having health insurance increased by education; 82% of adults with less than a high school degree had health insurance compared to 96% of college graduates. This trend is similar by income, as adults with the lowest household incomes had the lowest rates of coverage (87% or less for adults with a household income below $35,000), and almost all (98%) of adults with a household income of $75,000 or more were covered.
- Adults in Wards 5 and 8 were least likely to have health insurance, at 87% and 86% respectively. Ward 3 adults were most likely to have health insurance, at 97%.

Primary Care Provider

District of Columbia respondents were asked whether or not they had one or more persons they considered to be their

personal doctor or health care provider. Eighty-percent of District adults had a primary care provider, just below the Healthy People 2010 target of 85%.

- Women were more likely than men to have a primary care provider—85% versus 75%, respectively.

- The likelihood of having a primary care provider increased by age; 64% of adults aged 18-24 had a primary care provider compared to 91% of adults aged 65 and over.

- As household income increased, so did one's likelihood of having a primary care provider; 73% of adults with household incomes below $15,000 had a primary care provider compared to 84% of adults in households with incomes of $75,000 or more.

- Adults in Wards 3 and 6 were most likely to have a primary care provider (86% and 87% respectively), whereas adults in Wards 7 and 8 were least likely to have such (77% and 80% respectively).

Did Not Get Needed Care

District of Columbia respondents were asked if there was ever a time in the past 12 months when they did not see a doctor because of cost. Corresponding to the high rates of health care coverage, only 10% of adults were unable to see a doctor for this reason (almost equal to the 10% of adults who did not have health care).

- Thirteen percent of adults between the ages of 18-24 and 45-54 reported to have problems seeing a doctor because of cost. This compares to less than 10% of adults aged 35-44 and 55 and older.

- African Americans had a much more difficult time seeing a doctor because of cost. Fourteen percent of African Americans had this experience, compared to 10% of Hispanics, 9% of adults of "other" races, and only 5% of Caucasians.

- As education and income increased, the likelihood that a District of Columbia adult was unable to see a doctor because of cost decreased. Whereas 19% of adults with less than a high school degree, and 21% of adults who had a household income below $15,000 were prohibited from seeing a doctor because of cost, only 6% of adults with a college degree, and 5% or fewer of adults with a household income of $50,000 or more were prohibited from seeing a doctor because of cost.

- Adults in Ward 8 were much more likely to not see a doctor because of cost—at 23%—compared to adults in all other wards. Adults in Ward 3 were least likely to be prohibited because of cost, at only 6%.

Additional Data Highlights

- Over three-fourths, 77%, of adults had been to a doctor within the past year for a routine check-up, and an additional 13% had been within the past two years.

- Four percent of District adults had not been to a doctor for five years or longer.

Table 18. Having Health Care Coverage and A Primary Provider, By Demographics and Ward

"Do you have any kind of health care coverage, including health insurance, prepaid plans such as HMOs, or government plans such as Medicare?" and "Do you have one person you think of as your personal doctor or health care provider?" (combined responses of one or more primary providers.)

		Covered By Health Plan		Has Primary Provider
	N	Yes	N	No
TOTAL	4019	91.3%	4011	80.1%
GENDER				
Male	1556	89.2%	1552	75.0%
Female	2463	93.2%	2459	84.5%
AGE				
18-24	197	86.0%	198	64.1%
25-34	668	90.6%	666	71.5%
35-44	762	92.0%	758	82.9%
45-54	744	91.2%	745	84.3%
55-64	712	90.2%	710	89.3%
65+	841	97.1%	838	90.8%
RACE				
Caucasian	1897	96.4%	1893	79.5%
African American	1679	87.8%	1676	81.0%
Hispanic	147	90.3%	146	76.1%
Other	202	91.1%	203	78.7%
EDUCATION				
Less than High School	267	82.0%	266	77.2%
High School Graduate	692	85.3%	692	77.2%
Some College	679	91.0%	676	81.5%
College Graduate	2358	95.6%	2354	81.2%
INCOME				
Less than $15,000	356	86.6%	357	72.7%
$15,000-$24,999	371	86.7%	368	76.3%
$25,000-$34,999	319	85.4%	319	77.2%
$35,000-$49,999	417	90.4%	416	77.7%
$50,000-$74,999	481	92.9%	480	82.2%
$75,000+	1518	97.9%	1516	84.4%
WARD				
Ward 1	253	90.2%	252	81.2%
Ward 2	273	91.0%	272	81.9%
Ward 3	582	97.2%	579	85.7%
Ward 4	461	94.0%	460	84.7%
Ward 5	357	87.4%	357	81.0%
Ward 6	382	96.6%	381	87.2%
Ward 7	296	88.9%	297	77.0%
Ward 8	263	85.9%	262	79.8%

Table 19. Inability to See A Doctor Because of Cost, By Demographics and Ward *"Was there a time in the past 12 months when you needed to see a doctor but could not because of the cost?"*			
	N	Yes	No
TOTAL	4020	10.0%	90.0%
GENDER			
Male	1557	11.1%	88.9%
Female	2463	9.0%	91.0%
AGE			
18-24	198	13.2%	86.8%
25-34	668	11.2%	88.8%
35-44	762	7.6%	92.4%
45-54	746	12.9%	87.1%
55-64	712	9.5%	90.5%
65+	838	5.6%	94.4%
RACE			
Caucasian	1896	5.3%	94.7%
African American	1680	13.5%	86.5%
Hispanic	147	9.6%	90.4%
Other	203	9.2%	90.8%
EDUCATION			
Less than High School	266	18.5%	81.5%
High School Graduate	694	15.5%	84.5%
Some College	679	11.6%	88.4%
College Graduate	2358	5.5%	94.5%
INCOME			
Less than $15,000	357	20.5%	79.5%
$15,000-$24,999	371	17.2%	82.8%
$25,000-$34,999	319	15.6%	84.4%
$35,000-$49,999	417	15.2%	84.8%
$50,000-$74,999	481	5.2%	94.8%
$75,000+	1518	2.1%	97.9%
WARD			
Ward 1	253	9.3%	90.7%
Ward 2	273	12.2%	87.8%
Ward 3	582	6.2%	93.8%
Ward 4	461	9.0%	91.0%
Ward 5	357	10.7%	89.3%
Ward 6	382	6.7%	93.3%
Ward 7	297	8.1%	91.9%
Ward 8	263	23.3%	76.7%

Table 20. Time since Last Check-up, By Demographics and Ward

"About how long has it been since you last visited a doctor for a routine check-up? A routine check-up is a general physical exam, not an exam for a specific injury, illness, or condition."

	N	Within Past Year	More than 1 year but less than 2 years ago	More than 2 years but less than 5 years ago	5 or more years ago or never
TOTAL	3987	77.3%	13.4%	5.7%	3.6%
GENDER					
Male	1546	72.2%	15.1%	7.7%	5.0%
Female	2441	81.7%	11.9%	4.0%	2.4%
AGE					
18-24	195	74.9%	16.2%	7.4%	1.5%
25-34	660	70.4%	17.3%	7.3%	5.0%
35-44	760	75.7%	12.9%	6.5%	4.9%
45-54	742	73.4%	14.8%	7.7%	4.1%
55-64	708	83.3%	10.8%	3.8%	2.2%
65+	828	90.1%	6.3%	1.4%	2.2%
RACE					
Caucasian	1878	66.4%	19.4%	8.9%	5.4%
African American	1672	85.0%	9.5%	3.6%	1.9%
Hispanic	146	75.4%	12.5%	7.3%	4.8%
Other	202	72.8%	13.6%	6.2%	7.4%
EDUCATION					
Less than High School	263	86.0%	10.1%	0.6%	3.2%
High School Graduate	686	82.7%	9.6%	5.4%	2.2%
Some College	675	82.0%	12.7%	4.0%	1.4%
College Graduate	2341	716%	15.8%	7.4%	5.1%
INCOME					
Less than $15,000	354	79.3%	13.3%	3.8%	3.6%
$15,000-$24,999	370	78.0%	10.8%	8.0%	3.2%
$25,000-$34,999	317	80.1%	11.6%	6.6%	1.6%
$35,000-$49,999	414	75.7%	15.7%	6.0%	2.6%
$50,000-$74,999	479	75.8%	12.9%	5.3%	6.0%
$75,000+	1508	72.8%	16.2%	6.7%	4.4%
WARD					
Ward 1	249	73.9%	15.0%	6.9%	4.2%
Ward 2	272	75.0%	13.8%	9.1%	2.1%
Ward 3	579	71.1%	18.3%	6.4%	4.1%
Ward 4	461	81.4%	10.0%	5.4%	3.2%
Ward 5	353	82.1%	12.1%	3.5%	2.2%
Ward 6	378	74.6%	18.3%	3.6%	3.5%
Ward 7	295	82.1%	11.4%	3.1%	3.4%
Ward 8	262	84.3%	10.3%	4.0%	1.4%

Nationwide, about 50 million adults have a disability. Adults with disabilities tend to have a lower income, report higher levels of smoking and obesity, receive less routine preventive care, and get less exercise than people without disabilities. [16] Some examples of the differences between adults with and without disabilities include: adults with disabilities reported sedentary behavior at a rate of 53% compared to only 34% for people without disabilities; and adults with disabilities have higher rates of high cholesterol (19% compared to 17% of adults without disabilities), high blood pressure (37% compared to 29% of adults without disabilities), and obesity (42% compared to 28% of adults without disabilities).[17]

District of Columbia respondents were asked about their level of disability. First, respondents were asked if they were limited in any activities because of a disability. Second, they were asked if they used special equipment because of a health problem.

Limited Activity

Respondents were asked whether they were limited in any way by physical, mental, or emotional problems—regardless of how they responded to the questions about physical and mental health discussed in the previous section. Overall, 16% of District adults reported some kind of limitation.

- Women were more likely than men to be limited by health; 18% of women reported limitations in their activities because of a health problem compared to 14% of men.
- Health limitations increased as age increased; 10% of adults aged 34 and younger had health limitations, compared to 29% of adults aged 65 years and older.
- African Americans were had the most reports of health limitations (18%), and adults of "other" races had the least reports (12%).
- As education increased, limitations in health decreased; 24% of adults with less than a high school degree reported a health limitation, compared to only 14% of adults with a college degree.
- As with education, as adults' household income increased, reports of health limitations decreased; 33% of adults with household incomes below $15,000 had such problems, compared to only 12% of adults with household incomes of $75,000 or more.
- Adults in Wards 1, 4, and 5 had the three highest reports of limitations in their activities because of a health problem—22%, 20%, and 20%, respectively. Wards 2, 6, and 7 adults had the three lowest reports of health limitations; 16%, 15%, and 16%, respectively.

Use of Assistive Devices

Respondents were asked if they had a health problem that required the use of special equipment, such as a cane, wheelchair, special bed, or telephone. Overall, 8% of District of Columbia adults had a condition for which they used such equipment.

- Women and men to need special equipment 9% versus 7%, respectively.
- The use of special equipment increased as age increased; 1% of adults aged 18-24 reported needing special equipment compared to 25%of adults aged 65 years and older.

- African Americans (11%) had more reports to need special equipment than across all race categories (<6%).
- Adults in the lowest education and income groups had more reports of needing special equipment; 19% of adults with less than a high school degree and 24% of adults with a household income below $15,000 reported needing special equipment. This is compared to 4% of college graduates and 4% of adults with a household income of $50,000 or higher that reported needing special equipment.
- Ten percent of more adults in Wards 5, 7, and 8 were more likely to reported needing special equipment .

Table 21. Prevalence of Health Limitations and Use of Assistive Devices, By Demographics and Ward

"Are you limited in any way in any activities because of physical, mental, or emotional problems?" and "Do you now have any health problem that requires you to use special equipment, such as a cane, wheelchair, special bed, or special telephone?"

		Limited by Health		Use Special Equipment
	N	Yes	N	Yes
TOTAL	4007	16.3%	4022	7.9%
GENDER				
Male	1552	14.1%	1558	6.9%
Female	2455	18.2%	2464	8.7%
AGE				
18-24	198	9.7%	198	0.9%
25-34	667	10.1%	668	3.1%
35-44	761	10.5%	762	2.7%
45-54	744	20.2%	746	8.1%
55-64	708	23.8%	712	11.4%
65+	834	29.2%	840	24.9%
RACE				
Caucasian	1891	15.3%	1897	4.3%
African American	1673	17.9%	1682	11.3%
Hispanic	146	14.1%	147	2.9%
Other	203	11.6%	203	6.1%
EDUCATION				
Less than High School	263	23.9%	267	18.8%
High School Graduate	693	18.0%	695	11.4%
Some College	674	18.4%	679	8.8%
College Graduate	2354	13.5%	2358	4.3%
INCOME				
Less than $15,000	356	33.0%	358	23.8%
$15,000-$24,999	370	21.8%	371	14.2%
$25,000-$34,999	317	13.6%	319	5.9%
$35,000-$49,999	416	12.5%	417	5.9%
$50,000-$74,999	480	13.6%	481	3.7%
$75,000+	1515	11.8%	1517	3.0%
WARD				
Ward 1	253	21.6%	253	8.9%
Ward 2	271	16.4%	273	7.2%
Ward 3	579	18.7%	582	5.7%
Ward 4	462	20.0%	462	7.7%
Ward 5	356	19.7%	356	11.1%
Ward 6	381	14.6%	382	6.0%
Ward 7	297	15.9%	297	10.3%
Ward 8	262	18.0%	263	11.2%

Unintentional falls can result in a wide array of injuries, fatal and non-fatal. This is especially a concern for older adults, aged 65 and above. For this age group, over one-third experience a fall each year. In addition, falls are the leading cause of injury deaths. Some of the moderate to severe non-fatal injuries caused by falls include bruises, hip fractures, and head traumas. These falls or the resulting non-fatal injuries not only limit one's ability to lead an independent lifestyle, but they also increase the likelihood of an early death. Falls among older adults also result in significant medical expenses—direct medical costs for fatal and non-fatal fall injuries totaled $19.2 billion in 2000.[18]

Respondents aged 45 years or older were asked the number of times they had fallen in the past three months, as well as how many of these falls resulted in an injury.

Number of Falls

A majority of adults aged 45 and older, 85%, had not fallen within the past three months, and 14% had fallen between one to five times.

- More women reported falling more than men 16% of women versus 13% of men had fallen within the past three months.
- Hispanics (91%) reported more falls than of all other race categories.
- Adults with a household income below $15,000 reported to have fallen than adults in higher household income categories; 24% of adults in the less-than-$15,000 household income bracket had fallen within the past three months, compared to 19% or less of adults in all other household income groups.
- Adults residing in Wards 1 and 8 had the most reports of falls; 18% of adults in Ward 1 and 20% of adults in Ward 8 had fallen within the past three months.

Falls Resulting in an Injury

Adults who had fallen were asked how many of the falls resulted in an injury. Almost two-thirds, 65%, did not have a resulting injury because of the fall.

- There were small differences by gender, race, and education.
- Younger adults had more reports of an injury as a result of their fall than older adults. Forty percent of adults aged 45-54 had an injury because of a fall, compared to only 36% of adults aged 55-64 and 28% of adults aged 65 years and older.
- Adults with a household income less than $15,000 reported more injuries due to falls (46%) compared to adults with a household income of $75,000 or more (33%).

Table 22. Number of Falls, By Demographics and Ward

"The next questions ask about recent falls. By a fall, we mean when a person unintentionally comes to rest on the ground or another lower level. In the past 3 months, how many times have you fallen?"

	N	None	1-5 falls	6-10 falls	11-20 falls	21+ falls
TOTAL	2297	85.4%	14.1%	0.4%	0.1%	0%
GENDER						
Male	868	87.3%	11.7%	0.9%	0.1%	0%
Female	1432	83.9%	15.9%	0.1%	0.0%	0%
AGE						
45-54	722	84.7%	14.6%	0.5%	0.2%	0%
55-64	679	84.8%	14.8%	0.3%	0.1%	0%
65+	808	85.5%	13.9%	0.6%	0%	0%
RACE						
Caucasian	1049	83.2%	16.1%	0.6%	0.1%	0%
African American	1046	85.8%	13.6%	0.4%	0.1%	0%
Hispanic	53	90.5%	9.5%	0%	0%	0%
Other	85	88.4%	11.1%	0.5%	0%	0%
EDUCATION						
Less than High School	194	82.9%	15.9%	1.3%	0%	0%
High School Graduate	404	83.8%	15.4%	0.5%	0.3%	0%
Some College	408	86.1%	13.9%	0%	0%	0%
College Graduate	1274	86.4%	13.1%	0.4%	0.%	0%
INCOME						
Less than $15,000	237	76.4%	21.8%	1.3%	0.5%	0%
$15,000-$24,999	222	80.7%	19.1%	0%	0.1%	0%
$25,000-$34,999	175	87.6%	12.4%	0%	0%	0%
$35,000-$49,999	224	91.1%	8.9%	0%	0%	0%
$50,000-$74,999	251	88.5%	11.1%	0.4%	0%	0%
$75,000+	820	87.0%	12.6%	0.5%	0%	0%
WARD						
Ward 1	130	81.6%	15.4%	3.0%	0%	0%
Ward 2	178	87.0%	13.0%	0%	0%	0%
Ward 3	409	83.8%	15.3%	0.7%	0.1%	0%
Ward 4	317	88.3%	11.7%	0%	0%	0%
Ward 5	237	88.5%	11.5%	0%	0%	0%
Ward 6	211	87.6%	12.4%	0%	0%	0%
Ward 7	186	86.4%	13.6%	0%	0%	0%
Ward 8	149	80.4%	19.1%	0.5%	0%	0%

Table 23. Number of Falls Resulting In An Injury, By Demographics and Ward

"Did any of these falls cause an injury? By an injury, we mean the fall caused you to limit your regular activities for at least a day or to go see a doctor?"

	N	None	1-5 falls	6-10 falls	11+ falls
TOTAL	357	65.3%	34.5%	0.2%	0%
GENDER					
Male	123	64.3%	35.1%	0.6%	0%
Female	234	65.9%	34.1%	0%	0%
AGE					
45-54	117	59.6%	40.4%	0%	0%
55-64	107	64.1%	35.2%	0.7%	0%
65+	129	71.6%	28.4%	0%	0%
RACE					
Caucasian	177	63.9%	35.6%	0.6%	0%
African American	153	67.4%	32.6%	0%	0%
Hispanic	7	*	*	*	0%
Other	12	*	*	*	
EDUCATION					
Less than High School	29	*	*	*	*
High School Graduate	72	63.4%	36.3%	0%	0%
Some College	57	67.6%	32.4%	0%	0%
College Graduate	195	66.5%	33.0%	0.5%	0%
INCOME					
Less than $15,000	60	54.5%	45.5%	0%	0%
$15,000-$24,999	41	*	*	*	*
$25,000-$34,999	25	*	*	*	*
$35,000-$49,999	28	*	*	*	*
$50,000-$74,999	35	*	*	*	*
$75,000+	116	67.5%	32.5%	0%	0%
WARD					
Ward 1	25	*	*	*	*
Ward 2	29	*	*	*	*
Ward 3	73	59.8%	40.2%	0%	0%
Ward 4	41	*	*	*	*
Ward 5	29	*	*	*	*
Ward 6	29	*	*	*	*
Ward 7	26	*	*	*	*
Ward 8	24	*	*	*	*

*Data not presented if the unweighted cell was <50.

Healthy People 2010 Objectives

- ***Increase the proportion of person with diabetes who receive from diabetes education to 60%***
- ***Increase the proportion of adults with diabetes who have a glycosylated hemoglobin measurement (A one C) at least once a year to 50%***
- ***Increase the proportion of adults with diabetes who have an annual dilated eye examination to 75%***
- ***Increase the proportion of adults with diabetes who perform self blood glucose monitoring at least once daily to 60%***

Diabetes occurs when there are high levels of blood glucose from insufficient insulin production, insulin action, or both. Diabetes is a group of diseases, of which the three most common are: (1) Type 1 diabetes, also known as insulin-dependent diabetes or juvenile-onset diabetes. Type 1 diabetes is when one's immune system destroys the cells that make insulin. (2) Type 2 diabetes, also known as non-insulin dependent diabetes or adult-onset diabetes. Type 2 diabetes is characterized by insulin resistance, in which insulin is not used by the body's cells properly. (3) Gestational diabetes, which occurs during pregnancy, and is intolerant to glucose. [19]

There are numerous complications of diabetes, including heart disease and stroke, high blood pressure, blindness, kidney disease, nervous system disease, amputations, dental disease, and complications of pregnancy. [20] The estimated direct and indirect medical costs of diabetes in 2002 were $132 billion. [12]

District of Columbia respondents were asked if they had diabetes, and if yes, how they managed the disease.

Diabetes Prevalence

Respondents were asked to indicate whether they had ever been diagnosed with diabetes. As in previous years, gestational diabetes was recorded in a separate response category.

Overall, 8% of District adults were diagnosed with diabetes, not including pre-diabetes or diabetes that was only occurring during pregnancy (the same percentage as reported nationwide by the BRFSS). There were very low rates of pre-diabetes (0.8%) and gestational diabetes (0.6%).

- Women and men were equally reported having diabetes—8% for each group.
- Reports of being diagnosed with diabetes increased with age. Two percent or less of adults aged 34 and younger had diabetes, compared to 19% or higher of adults aged 55 and older.
- African Americans had higher reports of diabetes than adults of all other races. Thirteen percent of African Americans were diagnosed with diabetes, compared to less than 5% of adults of all other races.
- Reports of having diabetes decreased as education and income increased. By education, less than 4% of adults with a college degree had diabetes, compared to 18% of adults with less than a high school degree. By income, 5% or fewer adults with a household income of $50,000 or more had diabetes, compared to 19% of adults with a household in come below $15,000.
- Adults in Wards 1, 2, and 3 reported the least amount of having diabetes—all at rates of 6% or less. Adults in Ward 8 reported the highest of having the disease; 13% stated such.

Age of Diagnosis

Respondents with diabetes were asked at what age they were diagnosed with the disease. A majority of adults with diabetes were diagnosed between the ages of 45-59 (44%).

- Men were much more likely to be diagnosed before they were the age of 30 (26%), than women (5%).

Diabetes Management

District of Columbia respondents with Diabetes were asked a variety of questions about how they managed their disease—ranging from what medications they took to how often they checked their A1c levels. The following highlights some of the findings.

- Over one-third (37%) of adults with diabetes used insulin, compared with over one-half (58%) who took diabetes pills.
- District adults with Diabetes exceeded the Healthy People 2010 goal that targets 60% of diabetics to check their glucose or sugar levels "daily" or "more than once per day" (61%).
- Almost three-fourths (72%) of diabetic adults checked their feet at least daily for sores or irritations.
- District adult diabetics also exceeded the Healthy People 2010 target that 75% of the diabetic adult population has their feet checked professionally for sores or irritations within the past year. Seventy-eight percent of District adult diabetics had done so.
- Twelve percent of diabetic adults had sores or irritations on their feet that took more than four weeks to heal.
- Eighty-five percent of diabetic adults had visited a health professional for their diabetes within the past 12 months.
- Over two-thirds (68%) of diabetic adults had their A1c levels checked by a doctor at least once in the past three months; this is above the Healthy People 2010 target of 50% in the past year.
- Seventy percent of diabetic adults had their eyes dilated within the past year—just below the Healthy People 2010 target of 75%.
- Less than one-fourth (21%) of District diabetic adults had retinopathy.
- Just over half, 53%, of District adult diabetics participated in a diabetes management course, which is below the Healthy People 2010 goal of 60%.

Table 24. Prevalence of Diabetes, By Demographics and Ward

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

	N	Yes	Only while Pregnant	No	Pre-diabetes
TOTAL	4017	8.1%	0.6%	90.5%	0.8%
GENDER					
Male	1555	7.9%	N/A	91.3%	0.8%
Female	2462	8.2%	1.1%	89.9%	0.8%
AGE					
18-24	198	0.5%	0%	99.0%	0.5%
25-34	667	2.1%	0.8%	97.1%	0%
35-44	762	3.8%	1.1%	9.6%	0.5%
45-54	746	7.9%	0.9%	90.3%	0.9%
55-64	708	19.8%	0.3%	78.6%	1.4%
65+	840	19.2%	0.2%	78.6%	2.0%
RACE					
Caucasian	1894	3.2%	0.8%	95.4%	0.6%
African American	1679	12.5%	0.5%	86.1%	1.0%
Hispanic	147	4.2%	1.0%	94.8%	0%
Other	203	4.9%	0%	94.0%	1.1%
EDUCATION					
Less than High School	267	17.7%	0.4%	81.2%	0.8%
High School Graduate	694	13.1%	0.6%	85.0%	1.3%
Some College	678	9.1%	0.9%	88.8%	1.2%
College Graduate	2355	3.9%	0.5%	95.1%	0.5%
INCOME					
Less than $15,000	358	18.9%	0.5%	79.5%	1.1%
$15,000-$24,999	371	12.5%	0.4%	86.3%	0.8%
$25,000-$34,999	319	8.2%	0.8%	89.8%	1.1%
$35,000-$49,999	417	8.2%	0.1%	90.7%	1.0%
$50,000-$74,999	481	5.0%	1.1%	92.9%	1.0%
$75,000+	1516	3.3%	0.6%	95.7%	0.3%
WARD					
Ward 1	253	6.2%	0.6%	92.9%	0.3%
Ward 2	273	5.3%	0.2%	94.2%	0.3%
Ward 3	582	3.0%	0.9%	95.5%	0.6%
Ward 4	459	11.1%	0.2%	88.4%	0.6%
Ward 5	357	11.1%	1.5%	85.2%	2.1%
Ward 6	381	10.0%	1.3%	88.2%	0.6%
Ward 7	297	11.1%	0.2%	88.0%	0.7%
Ward 8	262	13.3%	0%	85.2%	1.5%

Table 25. Age When Diagnosed with Diabetes, By Demographics and Ward

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

	N	Under 30	30-40	45-59	60+
TOTAL	134	15.6%	21.5%	43.5%	19.3%
GENDER					
Male	55	25.7%	16.4%	34.6%	23.4%
Female	79	4.5%	27.2%	53.4%	14.9%
AGE					
18-24	0	*	*	*	*
25-34	5	*	*	*	*
35-44	11	*	*	*	*
45-54	27	*	*	*	*
55-64	37	*	*	*	*
65+	53	0.6%	9.8%	46.3%	43.4%
RACE					
Caucasian	36	*	*	*	*
African American	87	11.5%	22.5%	46.8%	19.1%
Hispanic	3	*	*	*	*
Other	5	*	*	*	*
EDUCATION					
Less than High School	21	*	*	*	*
High School Graduate	40	*	*	*	*
Some College	28	*	*	*	*
College Graduate	45	*	*	*	*
INCOME					
Less than $15,000	30	*	*	*	*
$15,000-$24,999	17	*	*	*	*
$25,000-$34,999	16	*	*	*	*
$35,000-$49,999	14	*	*	*	*
$50,000-$74,999	12	*	*	*	*
$75,000+	20	*	*	*	*

*Data not presented if the unweighted cell size was <50.
Small number prohibit the display of the data by Ward.

Table 26. Insulin Use, By Demographics *"Are you now taking insulin?"*			
	N	Yes	No
TOTAL	150	37.2%	62.8%
GENDER			
Male	58	45.2%	54.8%
Female	92	29.6%	70.4%
AGE			
18-24	0	*	*
25-34	5	*	*
35-44	11	*	*
45-54	28	*	*
55-64	39	*	*
65+	63	37.7%	62.3%
RACE			
Caucasian	37	*	*
African American	100	34.1%	65.9%
Hispanic	3	*	*
Other	6	*	*
EDUCATION			
Less than High School	27	*	*
High School Graduate	45	*	*
Some College	30	*	*
College Graduate	47	*	*
INCOME			
Less than $15,000	33	*	*
$15,000-$24,999	19	*	*
$25,000-$34,999	17	*	*
$35,000-$49,999	16	*	*
$50,000-$74,999	13	*	*
$75,000+	21	*	*

*Data not presented if the unweighted cell size was <50.
Small numbers prohibit the display of the data by Ward.

Table 27. Use of Diabetes Pills, By Demographics *"Are you now taking diabetes pills?"*			
	N	Yes	No
TOTAL	150	58.1%	41.9%
GENDER			
Male	58	39.6%	60.4%
Female	92	75.8%	24.2%
AGE			
18-24	0	*	*
25-34	5	*	*
35-44	11	*	*
45-54	28	*	*
55-64	39	*	*
65+	63	63.8%	36.2%
RACE			
Caucasian	37	*	*
African American	100	58.0%	42.0%
Hispanic	3	*	*
Other	6	*	*
EDUCATION			
Less than High School	27	*	*
High School Graduate	45	*	*
Some College	30	*	*
College Graduate	47	*	*
INCOME			
Less than $15,000	33	*	*
$15,000-$24,999	19	*	*
$25,000-$34,999	17	*	*
$35,000-$49,999	16	*	*
$50,000-$74,999	13	*	*
$75,000+	21	*	*

*Data not presented if the unweighted cell size was <50.
Small numbers prohibit the display of the data by Ward.

Table 28. How Often Glucose or Sugar is Checked, By Demographics and Ward

"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."

	N	Never or Less Than Once Per Week	1-5 Times Per Week	Once Per Day	More Than Once Per Day
TOTAL	147	17.0%	22.3%	31.3%	29.5%
GENDER					
Male	58	21.1%	27.6%	26.0%	25.3%
Female	89	12.9%	16.9%	36.5%	33.6%
AGE					
18-24	0	*	*	*	*
25-34	5	*	*	*	*
35-44	11	*	*	*	*
45-54	27	*	*	*	*
55-64	38	*	*	*	*
65+	63	13.3%	28.7%	34.0%	23.9%
RACE					
Caucasian	37	*	*	*	*
African American	97	18.0%	21.6%	35.0%	25.5%
Hispanic	3	*	*		
Other	6	*	*	*	*
EDUCATION					
Less than High School	27	*	*	*	*
High School Graduate	43	*	*	*	*
Some College	30	*	*	*	*
College Graduate	46	*	*	*	*
INCOME					
Less than $15,000	31	*	*	*	*
$15,000-$24,999	19	*	*	*	*
$25,000-$34,999	17	*	*	*	*
$35,000-$49,999	16	*	*	*	*
$50,000-$74,999	12	*	*	*	*
$75,000+	21	*	*	*	*

*Data not presented if the unweighted cell size was <50.
Small number prohibit the display of the data by Ward.

Table 29. How Often Feet Are Checked For Sores or Irritations, By Demographics and Ward

"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."

	N	Never or Less Than Once Per Week	1-5 Times Per Week	Once Per Day	More Than Once Per Day
TOTAL	149	15.5%	12.3%	72.2%	0%
GENDER					
Male	58	16.1%	12.8%	71.1%	0%
Female	91	14.9%	11.8%	73.2%	0%
AGE					
18-24	0	*	*	*	*
25-34	5	*	*	*	*
35-44	11	*	*	*	*
45-54	27	*	*	*	*
55-64	39	*	*	*	*
65+	63	19.9%	11.5%	68.6%	0%
RACE					
Caucasian	37	*	*	*	*
African American	99	11.8%	8.0%	80.1%	0%
Hispanic	3	*	*	*	*
Other	6	*	*	*	*
EDUCATION					
Less than High School	27	*	*	*	*
High School Graduate	44	*	*	*	*
Some College	30	*	*	*	*
College Graduate	47	*	*	*	*
INCOME					
Less than $15,000	33	*	*	*	*
$15,000-$24,999	19	*	*	*	*
$25,000-$34,999	16	*	*	*	*
$35,000-$49,999	16	*	*	*	*
$50,000-$74,999	13	*	*	*	*
$75,000+	21	*	*	*	*

*Data not presented if the unweighted cell size was <50.
Small number prohibit the display of the data by Ward.

Table 30. How Often Health Care Professionals Check feet For Sores, By Demographics

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

	N	None	Once	2-4 Times	5+ Times
TOTAL	144	22.1%	13.9%	46.3%	17.7%
GENDER					
Male	57	26.3%	15.1%	46.6%	11.9%
Female	87	17.8%	12.6%	46.0%	23.7%
AGE					
18-24	0	*	*	*	*
25-34	5	*	*	*	*
35-44	11	*	*	*	*
45-54	28	*	*	*	*
55-64	37	*	*	*	*
65+	59	11.9%	9.5%	50.6%	28.1%
RACE					
Caucasian	36	*	*	*	*
African American	96	24.0%	13.1%	41.3%	21.5%
Hispanic	3	*	*	*	*
Other	6	*	*	*	*
EDUCATION					
Less than High School	25	*	*	*	*
High School Graduate	43	*	*	*	*
Some College	30	*	*	*	*
College Graduate	46	*	*	*	*
INCOME					
Less than $15,000	32	*	*	*	*
$15,000-$24,999	19	*	*	*	*
$25,000-$34,999	16	*	*	*	*
$35,000-$49,999	16	*	*	*	*
$50,000-$74,999	13	*	*	*	*
$75,000+	21	*	*	*	*

*Data not presented if the unweighted cell size was <50.
Small number prohibit the display of the data by Ward.

Table 31. Feet Sores or Irritations That Took More Than Four Weeks to Heal, By Demographics *"Have you EVER had any sores or irritations on your feet that took more than four weeks to heal?"*			
	N	Yes	No
TOTAL	149	11.7%	88.3%
GENDER			
Male	57	17.3%	82.7%
Female	92	6.3%	93.7%
AGE			
18-24	0	*	*
25-34	5	*	*
35-44	11	*	*
45-54	28	*	*
55-64	39	*	*
65+	62	5.9%	94.1%
RACE			
Caucasian	36	*	*
African American	100	11.7%	88.3%
Hispanic	3	*	*
Other	6	*	*
EDUCATION			
Less than High School	27	*	*
High School Graduate	45	*	*
Some College	30	*	*
College Graduate	46	*	*
INCOME			
Less than $15,000	33	*	*
$15,000-$24,999	19	*	*
$25,000-$34,999	17	*	*
$35,000-$49,999	15	*	*
$50,000-$74,999	13	*	*
$75,000+	21	*	*

*Data not presented if the unweighted cell size was <50.
Small numbers prohibit the display of the data by Ward.

Table 32. Number of Visits To A Health Professional for Diabetes, By Demographics

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

	N	0	1-3	4-9	10 or More
TOTAL	145	15.3%	28.3%	44.5%	11.9%
GENDER					
Male	57	21.4%	36.3%	38.7%	3.6%
Female	88	9.3%	20.5%	50.3%	20.0%
AGE					
18-24	0	*	*	*	*
25-34	5	*	*	*	*
35-44	11	*	*	*	*
45-54	27	*	*	*	*
55-64	37	*	*	*	*
65+	61	10.8%	32.6%	43.9%	12.7%
RACE					
Caucasian	36				
African American	97	15.2%	23.4%	47.7%	13.7%
Hispanic	3	*	*	*	*
Other	5	*	*	*	*
EDUCATION					
Less than High School	25	*	*	*	*
High School Graduate	44	*	*	*	*
Some College	29	*	*	*	*
College Graduate	46	*	*	*	*
INCOME					
Less than $15,000	33	*	*	*	*
$15,000-$24,999	19	*	*	*	*
$25,000-$34,999	17	*	*	*	*
$35,000-$49,999	16	*	*	*	*
$50,000-$74,999	13	*	*	*	*
$75,000+	20	*	*	*	*

*Data not presented if the unweighted cell size was <50.
Small number prohibit the display of the data by Ward.

Table 33. Number of A One C Test, By Demographics

"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'?"

	N	Don't Know/Never Heard of	None	1-3 Times	4 or More Times
TOTAL	150	19.4%	12.5%	38.7%	29.3%
GENDER					
Male	58	10.9%	16.4%	51.6%	21.1%
Female	92	27.6%	8.8%	26.3%	37.3%
AGE					
18-24	0	*	*	*	*
25-34	5	*	*	*	*
35-44	11	*	*	*	*
45-54	28	*	*	*	*
55-64	39	*	*	*	*
65+	63	20.0%	4.5%	40.8%	34.7%
RACE					
Caucasian	37	*	*	*	*
African American	100	22.5%	12.4%	34.3%	30.7%
Hispanic	3	*	*	*	*
Other	6	*	*	*	*
EDUCATION					
Less than High School	27	*	*	*	*
High School Graduate	45	*	*	*	*
Some College	30	*	*	*	*
College Graduate	47	*	*	*	*
INCOME					
Less than $15,000	33	*	*	*	*
$15,000-$24,999	19	*	*	*	*
$25,000-$34,999	17	*	*	*	*
$35,000-$49,999	16	*	*	*	*
$50,000-$74,999	13	*	*	*	*
$75,000+	21	*	*	*	*

*Data not presented if the unweighted cell size was <50.
Small number prohibit the display of the data by Ward.

Table 34. Times since Last Pupil Dilation, By Demographics

"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."

	N	Within Past Month	Within Past Year	Within Past 2 Years	2+ Years or Never
TOTAL	147	28.1%	41.9%	10.1%	19.9%
GENDER					
Male	57	24.6%	39.8%	12.0%	23.6%
Female	90	31.5%	43.8%	8.4%	16.4%
AGE					
18-24	0	*	*	*	*
25-34	5	*	*	*	*
35-44	10	*	*	*	*
45-54	28	*	*	*	*
55-64	38	*	*	*	*
65+	62	32.0%	47.3%	2.8%	18.0%
RACE					
Caucasian	36	*	*	*	*
African American	100	27.5%	41.9%	6.6%	24.0%
Hispanic	2	*	*	*	*
Other	5	*	*	*	*
EDUCATION					
Less than High School	25	*	*	*	*
High School Graduate	45	*	*	*	*
Some College	30	*	*	*	*
College Graduate	46	*	*	*	*
INCOME					
Less than $15,000	33	*	*	*	*
$15,000-$24,999	18	*	*	*	*
$25,000-$34,999	17	*	*	*	*
$35,000-$49,999	15	*	*	*	*
$50,000-$74,999	13	*	*	*	*
$75,000+	21	*	*	*	*

*Data not presented if the unweighted cell size was <50.
Small number prohibit the display of the data by Ward.

Table 35. Prevalence of Retinopathy, By Demographics *"Has a doctor EVER told you that diabetes has affected your eyes or that you had retinopathy?"*			
	N	Yes	No
TOTAL	150	21.1%	78.9%
GENDER			
Male	58	20.2%	79.8%
Female	92	21.9%	78.1%
AGE			
18-24	0	*	*
25-34	5	*	*
35-44	11	*	*
45-54	28	*	*
55-64	39	*	*
65+	63	18.2%	78.1%
RACE			
Caucasian	37	*	*
African American	100	20.6%	79.4%
Hispanic	3	*	*
Other	6	*	*
EDUCATION			
Less than High School	27	*	*
High School Graduate	45	*	*
Some College	30	*	*
College Graduate	47	*	*
INCOME			
Less than $15,000	33	*	*
$15,000-$24,999	19	*	*
$25,000-$34,999	17	*	*
$35,000-$49,999	16	*	*
$50,000-$74,999	13	*	*
$75,000+	21	*	*

*Data not presented if the unweighted cell size was <50.
Small numbers prohibit the display of the data by Ward.

Table 36. Participation In A Diabetes Management Course, By Demographics *"Have you EVER taken a course or class in how to manage your diabetes yourself?"*			
	N	Yes	No
TOTAL	150	52.9%	47.1%
GENDER			
Male	58	54.6%	45.4%
Female	92	51.3%	48.7%
AGE			
18-24	0	*	*
25-34	5	*	*
35-44	11	*	*
45-54	28	*	*
55-64	39	*	*
65+	63	59.4%	40.6%
RACE			
Caucasian	37	*	*
African American	100	54.9%	45.1%
Hispanic	3	*	*
Other	6	*	*
EDUCATION			
Less than High School	27	*	*
High School Graduate	45	*	*
Some College	30	*	*
College Graduate	47	*	*
INCOME			
Less than $15,000	33	*	*
$15,000-$24,999	19	*	*
$25,000-$34,999	17	*	*
$35,000-$49,999	16	*	*
$50,000-$74,999	13	*	*
$75,000+	21	*	*

*Data not presented if the unweighted cell size was <50.
Small numbers prohibit the display of the data by Ward.

Heart disease and stroke are the first and third leading causes of death for all U.S. adults. Heart disease is also the leading cause of early and permanent disability in the U.S. workforce, and can lead to a heart attack. For survivors of a stroke, side effects can include disability, paralysis, and speech and emotional problems. [21]

There are many actions an individual can take to decrease the chance of developing heart disease, or having a heart attack or stroke. For heart disease and heart attacks, high blood pressure and high blood cholesterol are the two major independent risk factors, both of which are largely preventable. [22]

To reduce one's risk of a stroke, it is important to maintain a healthy blood pressure, blood cholesterol, and successfully manage one's diabetes. Behaviors that can increase one's risk for a stroke include alcohol and tobacco use, physical inactivity, obesity, a diet high in saturated fat, cholesterol, salt, and sodium, as well as a diet lacking sufficient fruits and vegetables. [23]

District of Columbia respondents were asked whether a health professional had ever told them that they had a heart attack, angina or coronary heart disease, or a stroke. Overall, 3% of adults were told they had a heart attack, 3% heart disease, and 3% a stroke.

- Among adults aged 65 and older, 11% had been told they had a heart attack or heart disease, and 9% had been told they had a stroke. Less than 1% of adults aged 44 and younger had ever had a heart attack, heart disease, or a stroke.

- African Americans reported more than adults of all other races to have had a heart attack, heart disease, or a stroke. However, adults of "other" races had a similar rate of having had a heart attack at 4%.

- The likelihood of having a heart attack, heart disease, or a stroke decreased as education and income increased. By education, 7% of adults with less than a high school degree had a heart attack or a stroke, and 5% had heart disease, compared to 2% or less for all three (heart attacks, heart disease, and stroke) for college graduates. By income, 10% or more of adults with a household income below $15,000 had any of the three conditions, compared to 2% or less for adults with a household income of $35,000 or higher.

- The differences by gender and Ward were minor.

Table 37. Prevalence of Cardiovascular Disease, By Demographics and Ward

"Has a doctor, nurse, or other health professional ever told you that you had a heart attack, also called a myocardial infarction, angina or coronary heart disease, or a stroke?"

	N	Told Had Heart Attack	N	Told Had Heart Disease	N	Told Had Stroke
		Yes		Yes		Yes
TOTAL	4006	3.3%	4007	2.9%	4014	2.8%
GENDER						
Male	1553	4.0%	1554	3.3%	1555	3.2%
Female	2453	2.7%	2453	2.6%	2459	2.6%
AGE						
18-24	197	0.7%	198	0%	198	0%
25-34	667	0.1%	668	0.1%	668	0.2%
35-44	762	0.5%	761	0.4%	761	0.8%
45-54	743	4.3%	743	2.9%	745	4.0%
55-64	707	4.3%	709	4.9%	711	5.1%
65+	835	11.2%	832	11.3%	835	8.5%
RACE						
Caucasian	1892	1.6%	1893	2.2%	1895	0.6%
African American	1671	4.3%	1671	3.7%	1676	4.5%
Hispanic	147	2.6%	147	1.6%	147	1.3%
Other	202	4.0%	202	2.5%	202	2.5%
EDUCATION						
Less than High School	265	7.2%	264	5.3%	265	6.9%
High School Graduate	689	5.1%	688	3.6%	691	5.0%
Some College	679	3.0%	679	3.6%	678	2.8%
College Graduate	2351	2.0%	2353	2.0%	2357	1.3%
INCOME						
Less than $15,000	354	10.6%	356	9.7%	356	10.0%
$15,000-$24,999	368	4.2%	368	2.3%	370	2.7%
$25,000-$34,999	318	3.8%	317	1.7%	316	4.0%
$35,000-$49,999	416	1.5%	416	1.6%	417	2.1%
$50,000-$74,999	480	1.9%	479	1.4%	480	1.1%
$75,000+	1515	1.3%	1517	1.7%	1518	0.7%
WARD						
Ward 1	252	2.7%	253	2.6%	253	2.1%
Ward 2	271	3.7%	273	3.6%	273	2.0%
Ward 3	582	2.3%	581	2.5%	581	1.0%
Ward 4	462	2.7%	461	4.5%	460	3.7%
Ward 5	354	3.7%	354	4.3%	355	3.7%
Ward 6	381	3.3%	380	2.8%	382	3.0%
Ward 7	295	3.7%	295	2.9%	297	3.4%
Ward 8	261	4.2%	263	2.4%	263	4.3%

Healthy People 2010 Objectives

- ***Increase the proportion of women aged 40 and older who received a mammogram within the past two years to 70%***
- ***Increase the proportion of women who ever had a pap test to 97%***
- ***Increase the proportion of women who had a pap test in the last three years to 90%***

Breast and cervical cancer are two of the most common types of cancer affecting women. In 2003, over 180,000 women were diagnosed with breast cancer. [24] Breast cancer can be detected and treated through breast exams and regular mammograms. The incidence and mortality of cervical cancer has decreased dramatically over the years, due to the use of the Pap test, which not only provides early detection of the cancer, but also detects cervical abnormalities that may lead to the disease. Cervical cancer is most often found in women aged 40 and older. [25]

Hysterectomies are the second most common surgical procedure for women. One in three women has had a hysterectomy by the time she is 60 years of age. There are a variety of reasons hysterectomies are performed, including: to treat fibroids, endometriosis, uterine prolapse, cancer (of the uterus, cervix, or ovary), persistent vaginal bleeding, and chronic pelvic pain. [26]

Female respondents were asked a series of questions about having mammograms, breast exams, and Pap tests. Women who were not pregnant at the time of the interview were also asked if they had ever had a hysterectomy.

Mammograms

District women were asked if they had ever had a mammogram. Sixty-one percent of women had such an exam.

- Overall 61% proportion of having a mammogram increased; only 20% of women aged 18-34 had ever had a mammogram, compared to 61% of women aged 35-54, and 93% or higher for women aged 45 years and older.

- The proportion of African American women was much higher than women of all other races to have had a mammogram; 71% of African American women had such an exam, compared to 56% of women of "other" races, 51% of Caucasian women, and only 32% of Hispanic women.

- The proportion of a woman having had a mammogram decreased as education increased; 78% of women with less than a high school degree had ever had a mammogram, compared to 58% of women with a college degree.

- Women in lowest income grouping (<$15,000 yr) had the highest proportion of having ever had a mammogram at 69%. However, the women among the mid-range income reported the lowest proportions at 56% and 53% ($25,000 to $34,999 and $35,000 to $49,999 respectively).

- By Ward. women residing in Ward 1 reporting the lowest proportions of having ever had a mammogram, at 49%.

Women were also asked how long it had been since their last mammogram. Overall, 52% of District women had their last mammogram within the past two years.

- The majority of women who had ever had a mammogram had done so within the past year. Small percentages of women in all demographic subgroups had their last mammogram three years or more ago.

- For women aged 40 years and older, 82% had a mammogram within the past two years, which is higher than the nationwide rate of 77%, and also exceeds the Healthy People 2010 goal of 70%.

Clinical Breast Exams

District women were asked if they had ever had a breast exam performed by a doctor, nurse, or other health professional. A majority of women, 92%, had such an exam.

- Women between the ages of 35-64 showed the highest proportion of having had a clinical breast exam (94% or greater), whereas women aged 18-24 years and 65 years and over had the smallest proportions (88% for each).

- Caucasian women proportion were greater than women of all other races to have had a clinical breast exam (97%) compared to 89% had the smallest proportions.

- Women with the highest levels of education and household income had the highest proportions of having had a clinical breast exam; 96% or more of women with a college degree or a household income above $50,000, had ever had a clinical breast exam.

- At 84%, women in Ward 7 had the lowest proportion than women residing in all other wards to have ever had a clinical breast exam.

Women were asked when they had their last clinical breast exam, and the majority had done so within the past year (75%). Low percentages of women in all demographic subgroups had their last clinical breast exam three years or more ago.

Cervical Cancer Screening

District women were asked if they had ever had a Pap test; 94% had, which is just below the Healthy People 2010 target of 97%.

- At 84%, women aged 18-24 had the smallest proportion of having had a Pap test. However, women in all other age groups had test rates of 93% or higher.

- By race/ethnicity, Hispanic women, and women of "other" races of having than Caucasian and African American women to have ever had a Pap test at 89% and 88% respectively. The highest proportions was among Caucasian and African American women at 96% and 94% respectively..

- Women with less than a high school degree, or a high school degree, had the lowest rates of having ever had a Pap test, 89% to 90%. A similar trend was seen by household income, as women in the two lowest household income groups (less than $15,000 and $15,000-$24,999) had the lowest rates of having ever had a Pap test, 91% for each.

- Ninety-nine percent of women in Ward 1 had ever had a Pap test, which was the highest rate for all wards. The rest of the Wards ranged from 91% to 97% of having ever had a Pap test.

Women were asked how long it had been since their last Pap test. As with mammograms and clinical breast exams, a majority of women had done so within the past three years (86%). However, this was still below the Healthy People 2010 goal of 90%.

- For women who had ever had a Pap test, those aged 65 and older (14%) had a greater percentage than women of all other age groups to have had it last performed five or more years ago (14%).

- By education and income, women with the lowest levels of education and household income highest percentage to have had their last Pap test five or more years ago; 10% of women with less than a high school degree and 8% of women with a household income below $15,000 stated such.

- By ward, women in Ward 2 (8%) had a greater proportion compared to women of all other wards (2% to 5%) to have had their last Pap test five or more years ago.

Hysterectomy

Female respondents who were not pregnant at the time of the interview were asked if they had ever had a hysterectomy. Overall, 16% of District adult women had the operation.

- As women's ages increased, so did the proportions that had a hysterectomy; 0% to 5% of women aged 18-44 years had the operation, compared to 31% of women aged 55-64 and 44% of women aged 65 years and older.

- African American women had more reports of having to have had a hysterectomy compared to women of all other race groups. Twenty-one percent of African American women had the operation, compared to less than 10% of women of all other races.

- The proportion of having a hysterectomy decreased as education and income increased. Over one-third (34%) of women with less than a high school degree had the operation, compared to only 10% of women with a college degree. By income, one-fourth, 25%, of women with a household income below $15,000 had the operation, compared to 9% of women with a household income of $75,000 or more.

- Women residing in Wards 4 and 5 had the highest reports of having had a hysterectomy—22% and 27%, respectively. Women in Wards 1, 3, and 6 had the lowest reports of having had the operation—12%, 11%, and 13% respectively.

Table 38. Having Mammogram, By Demographics and Ward *"A mammogram is an x-ray of each breast to look for breast cancer. Have you ever had a mammogram?"*			
	N	Yes	No
TOTAL	2382	61.4%	38.6%
AGE			
18-24	118	20.4%	79.6%
25-34	417	19.9%	80.1%
35-44	416	60.7%	39.3%
45-54	426	92.7%	7.3%
55-64	421	97.3%	2.7%
65+	513	96.7%	3.3%
RACE			
Caucasian	1011	51.1%	48.9%
African American	1104	70.7%	29.3%
Hispanic	86	32.1%	67.9%
Other	121	55.8%	44.2%
EDUCATION			
Less than High School	166	78.3%	21.7%
High School Graduate	464	65.7%	34.3%
Some College	445	58.8%	41.2%
College Graduate	1295	57.9%	42.1%
INCOME			
Less than $15,000	223	68.8%	31.2%
$15,000-$24,999	242	61.4%	38.6%
$25,000-$34,999	214	56.4%	43.6%
$35,000-$49,999	273	52.7%	47.3%
$50,000-$74,999	283	59.0%	41.0%
$75,000+	803	62.2%	37.8%
WARD			
Ward 1	140	48.9%	51.1%
Ward 2	139	60.6%	39.4%
Ward 3	348	73.1%	26.9%
Ward 4	299	74.8%	25.2%
Ward 5	239	74.4%	25.6%
Ward 6	216	58.4%	41.6%
Ward 7	216	68.2%	31.8%
Ward 8	184	61.9%	38.1%

Table 39. Time Since Last Mammogram, By Demographics and Ward

"How long has it been since you had your last mammogram?"

	N	Never	Past Year	Past 2 Years	Past 3 Years	Past 5 Years	5 or More
TOTAL	2364	38.9%	40.8%	11.6%	3.4%	2.8%	2.5%
AGE							
18-24	117	80.4%	12.5%	2.7%	1.5%	2.8%	0%
25-34	417	80.1%	10.4%	4.5%	1.4%	1.7%	2.0%
35-44	415	39.4%	34.5%	13.8%	4.9%	4.3%	3.1%
45-54	426	7.3%	66.2%	18.0%	4.0%	3.0%	1.6%
55-64	419	2.7%	69.5%	16.0%	4.8%	3.4%	3.5%
65+	504	3.4%	66.8%	17.8%	5.0%	2.7%	4.4%
RACE							
Caucasian	1004	49.2%	32.0%	10.8%	3.6%	2.3%	2.1%
African American	1096	29.6%	48.1%	13.0%	3.3%	3.2%	2.9%
Hispanic	86	67.9%	20.4%	2.2%	4.4%	1.6%	3.5%
Other	119	44.7%	35.5%	11.0%	2.1%	4.9%	1.7%
EDUCATION							
Less than High School	163	21.9%	51.7%	14.6%	4.6%	2.5%	4.7%
High School Graduate	460	34.8%	44.8%	11.2%	3.3%	4.0%	2.0%
Some College	442	41.4%	37.5%	11.6%	4.4%	2.7%	2.3%
College Graduate	1287	42.3%	38.6%	11.3%	2.9%	2.4%	2.5%
INCOME							
Less than $15,000	222	31.3%	44.6%	44.6%	5.0%	2.0%	3.3%
$15,000-$24,999	241	38.8%	37.5%	37.5%	4.5%	4.1%	3.1%
$25,000-$34,999	212	43.8%	38.7%	38.7%	4.9%	1.7%	1.9%
$35,000-$49,999	271	47.4%	35.1%	35.1%	2.6%	1.3%	1.4%
$50,000-$74,999	283	41.0%	39.3%	39.3%	0.6%	4.0%	3.6%
$75,000+	802	37.9%	42.1%	42.1%	3.4%	2.3%	2.3%
WARD							
Ward 1	139	51.3%	33.7%	9.8%	1.7%	1.0%	2.4%
Ward 2	139	39.4%	37.1%	15.1%	2.3%	3.5%	2.6%
Ward 3	347	26.9%	49.6%	13.9%	4.0%	3.8%	1.7%
Ward 4	297	25.3%	50.1%	14.3%	5.0%	3.9%	1.5%
Ward 5	236	25.9%	52.3%	13.7%	3.6%	2.3%	2.3%
Ward 6	215	41.6%	39.9%	10.3%	4.5%	1.0%	2.7%
Ward 7	216	31.8%	48.1%	13.6%	2.2%	1.2%	3.2%
Ward 8	181	38.4%	45.0%	9.4%	0.7%	3.6%	2.8%

Table 40. Conducting Clinical Breast Exams, By Demographics and Ward

"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?"

	N	Yes	No
TOTAL	2376	91.9%	8.1%
AGE			
18-24	118	87.7%	12.3%
25-34	419	91.5%	8.5%
35-44	416	95.4%	4.6%
45-54	425	93.7%	6.3%
55-64	421	96.2%	3.8%
65+	506	88.1%	11.9%
RACE			
Caucasian	1009	96.9%	3.1%
African American	1099	89.0%	11.0%
Hispanic	86	89.2%	10.8%
Other	121	89.2%	10.8%
EDUCATION			
Less than High School	165	89.4%	10.6%
High School Graduate	462	86.2%	13.8%
Some College	444	89.1%	10.9%
College Graduate	1293	96.2%	3.8%
INCOME			
Less than $15,000	222	85.1%	14.9%
$15,000-$24,999	240	86.5%	13.5%
$25,000-$34,999	214	86.2%	13.8%
$35,000-$49,999	272	95.8%	4.2%
$50,000-$74,999	281	96.6%	3.4%
$75,000+	804	96.3%	3.7%
WARD			
Ward 1	140	94.5%	5.5%
Ward 2	138	93.7%	6.3%
Ward 3	348	95.2%	4.8%
Ward 4	299	95.6%	4.4%
Ward 5	239	93.8%	6.2%
Ward 6	216	92.7%	7.3%
Ward 7	214	84.4%	15.6%
Ward 8	184	91.7%	8.3%

Table 41. Time Since Last Clinical Breast Exam, By Demographics and Ward *"How long has it been since you had your last clinical breast exam?"*							
	N	Never	Past Year	Past 2 Years	Past 3 Years	Past 5 Years	5 or More
TOTAL	2349	8.2%	75.2%	10.7%	2.9%	1.6%	1.4%
AGE							
18-24	118	12.3%	74.0%	7.8%	2.5%	3.4%	0%
25-34	419	8.5%	76.7%	11.3%	1.5%	0.5%	1.5%
35-44	414	4.6%	79.5%	11.2%	2.6%	1.5%	0.5%
45-54	422	6.3%	75.2%	10.9%	4.2%	2.2%	1.1%
55-64	418	3.8%	80.6%	8.4%	3.2%	1.9%	2.1%
65+	493	12.1%	66.7%	13.0%	4.2%	1.1%	2.9%
RACE							
Caucasian	998	3.1%	79.4%	11.8%	3.1%	1.2%	1.3%
African American	1088	11.1%	72.4%	9.9%	2.7%	2.0%	1.9%
Hispanic	86	10.8%	75.4%	9.3%	3.1%	1.4%	05
Other	119	10.9%	73.9%	10.7%	3.0%	1.2%	0.3%
EDUCATION							
Less than High School	161	10.8%	73.6%	10.4%	2.0%	1.6%	1.7%
High School Graduate	456	14.0%	69.6%	9.1%	3.1%	2.2%	2.0%
Some College	439	11.0%	72.0%	11.4%	3.2%	1.0%	1.4%
College Graduate	1282	3.8%	79.6%	11.1%	2.8%	1.6%	1.1%
INCOME							
Less than $15,000	220	15.0%	66.7%	7.1%	4.0%	3.0%	4.1%
$15,000-$24,999	240	13.5%	68.1%	10.9%	2.5%	2.6%	2.4%
$25,000-$34,999	241	13.8%	74.3%	8.6%	2.5%	0.1%	0.8%
$35,000-$49,999	271	4.2%	77.4%	14.2%	2.9%	0.5%	0.8%
$50,000-$74,999	278	3.4%	78.1%	12.2%	3.5%	1.4%	1.4%
$75,000+	802	3.7%	80.3%	12.0%	2.2%	0.8%	1.0%
WARD							
Ward 1	139	5.5%	82.4%	10.4%	0.4%	1.0%	0.3%
Ward 2	137	6.3%	76.1%	13.3%	1.8%	1.1%	1.4%
Ward 3	343	4.8%	79.4%	11.5%	2.7%	0.5%	1.0%
Ward 4	298	4.4%	74.7%	13.3%	3.6%	2.4%	1.5%
Ward 5	236	6.3%	71.2%	13.9%	3.9%	0.5%	4.2%
Ward 6	212	7.4%	77.2%	12.2%	2.2%	1.0%	0%
Ward 7	213	15.7%	73.5%	6.7%	1.7%	0.6%	1.8%
Ward 8	182	8.4%	80.6%	6.3%	1.9%	1.7%	1.1%

Table 42. Administering Pap Test, By Demographics and Ward *"A Pap test is a test for cancer of the cervix. Have you ever had a Pap test?"*			
	N	Yes	No
TOTAL	2374	93.6%	6.4%
AGE			
18-24	118	83.7%	16.3%
25-34	418	93.3%	6.7%
35-44	416	95.9%	4.1%
45-54	423	96.5%	3.5%
55-64	420	98.7%	1.3%
65+	508	94.2%	5.8%
RACE			
Caucasian	1010	95.5%	4.5%
African American	1095	93.5%	6.5%
Hispanic	86	88.6%	11.4%
Other	121	88.3%	11.7%
EDUCATION			
Less than High School	163	90.2%	9.8%
High School Graduate	464	89.2%	10.8%
Some College	444	93.2%	6.8%
College Graduate	1293	96.5%	3.5%
INCOME			
Less than $15,000	221	90.9%	9.1%
$15,000-$24,999	240	90.7%	9.3%
$25,000-$34,999	214	92.8%	7.2%
$35,000-$49,999	272	97.7%	2.3%
$50,000-$74,999	283	94.5%	5.5%
$75,000+	803	95.2%	4.8%
WARD			
Ward 1	140	99.2%	0.8%
Ward 2	139	92.6%	7.4%
Ward 3	348	96.0%	4.0%
Ward 4	298	96.7%	3.3%
Ward 5	238	97.4%	2.6%
Ward 6	216	91.3%	8.7%
Ward 7	214	92.2%	7.8%
Ward 8	184	92.1%	7.9%

Table 43. Time Since Last Pap Test, By Demographics and Ward

"How long has it been since you had your last Pap test?"

	N	Never	Past Year	Past 2 Years	Past 3 Years	Past 5 Years	5 or More
TOTAL	2330	6.5%	69.7%	12.4%	4.3%	3.0%	4.0%
AGE							
18-24	118	16.3%	68.8%	9.0%	4.1%	1.7%	0%
25-34	417	6.8%	79.3%	10.4%	2.4%	0.8%	0.3%
35-44	414	4.1%	78.3%	10.9%	3.3%	1.3%	2.0%
45-54	419	3.5%	70.7%	13.9%	4.4%	4.4%	3.1%
55-64	414	1.4%	70.0%	14.6%	4.7%	3.1%	6.3%
65+	484	6.1%	47.9%	16.6%	7.8%	7.7%	13.8%
RACE							
Caucasian	997	4.6%	73.0%	11.4%	4.4%	3.0%	3.6%
African American	1071	6.6%	66.8%	13.6%	4.7%	3.6%	4.7%
Hispanic	85	11.5%	74.7%	6.2%	3.7%	1.0%	2.9%
Other	118	11.9%	69.1%	13.6%	2.1%	0.9%	2.4%
EDUCATION							
Less than High School	158	10.0%	58.3%	13.5%	4.2%	4.5%	9.5%
High School Graduate	455	11.0%	64.3%	12.0%	6.5%	2.1%	4.2%
Some College	433	7.0%	68.3%	14.3%	3.9%	3.4%	3.1%
College Graduate	1275	3.6%	74.8%	11.6%	3.5%	3.1%	3.5%
INCOME							
Less than $15,000	216	9.2%	57.9%	13.9%	6.8%	4.1%	8.1%
$15,000-$24,999	235	9.6%	62.0%	13.1%	4.7%	6.0%	4.6%
$25,000-$34,999	210	7.3%	70.5%	12.6%	5.1%	1.8%	2.8%
$35,000-$49,999	268	2.3%	73.7%	15.8%	2.8%	3.4%	1.9%
$50,000-$74,999	282	5.5%	70.9%	11.7%	4.2%	1.9%	5.8%
$75,000+	799	4.8%	75.2%	12.5%	2.3%	2.5%	2.8%
WARD							
Ward 1	140	0.8%	78.9%	9.1%	6.0%	0.6%	4.6%
Ward 2	138	7.5%	60.2%	14.6%	3.2%	6.2%	8.2%
Ward 3	343	4.1%	72.2%	12.7%	3.6%	2.9%	4.6%
Ward 4	290	3.4%	66.5%	15.0%	4.2%	5.6%	5.3%
Ward 5	232	2.7%	64.8%	16.9%	7.6%	4.5%	3.5%
Ward 6	215	8.7%	73.0%	11.2%	4.3%	0.8%	2.0%
Ward 7	209	8.1%	71.2%	12.7%	2.8%	1.1%	4.2%
Ward 8	182	7.9%	72.8%	11.1%	0.7%	2.9%	4.5%

Table 44. Having Had A Hysterectomy, By Demographics and Ward *"Have you had a hysterectomy?"*			
	N	Yes	No
TOTAL	2321	15.6%	84.4%
AGE			
18-24	109	0%	100.0%
25-34	388	0.3%	99.7%
35-44	400	5.4%	94.6%
45-54	423	16.1%	83.9%
55-64	421	30.5%	69.5%
65+	511	43.7%	56.3%
RACE			
Caucasian	984	9.2%	90.8%
African American	1077	20.8%	79.2%
Hispanic	84	7.4%	92.6%
Other	117	9.9%	90.1%
EDUCATION			
Less than High School	163	33.7%	66.3%
High School Graduate	451	20.3%	79.7%
Some College	434	16.2%	83.8%
College Graduate	1263	10.2%	89.8%
INCOME			
Less than $15,000	217	24.6%	75.4%
$15,000-$24,999	236	21.2%	78.8%
$25,000-$34,999	211	15.5%	84.5%
$35,000-$49,999	267	12.4%	87.6%
$50,000-$74,999	279	16.6%	83.4%
$75,000+	777	9.0%	91.0%
WARD			
Ward 1	136	11.8%	88.2%
Ward 2	137	15.1%	84.9%
Ward 3	342	11.4%	88.6%
Ward 4	291	22.0%	78.0%
Ward 5	235	27.1%	72.9%
Ward 6	208	12.6%	87.4%
Ward 7	211	18.5%	81.5%
Ward 8	182	15.4%	84.6%

Excluding some types of skin cancer, prostate cancer is the most common cancer for men in the U.S. In 2003, over 185,000 men were diagnosed with prostate cancer. Prostate cancer is also the second leading cause of cancer deaths for men. [28] There are two tests men can take to identify if they have prostate cancer—a digital rectal exam and a prostate-specific antigen test (PSA test).

Male respondents aged 40 and older were asked a series of questions about prostate cancer screening, and if they had ever had prostate cancer.

PSA Tests

In the District of Columbia, more than two-thirds, 67%, of men aged 40 and older had ever had a PSA test, which is higher than the nationwide BRFSS rate of 54%. [29]

- Correspondingly, as men's age increased, so did the reports of having ever had a PSA test; 40% of men aged 40-44 had ever had the test, compared to 80% of men aged 55-64 and 88% of men aged 65 years and older.
- Caucasian men (71%) reported 5% more than African Americans (66%) to have ever had a PSA test.
- Men with a high school degree reported less than men of all other educational groups to have ever had the test—46%, compared to 71% to 73% for men of all other educational groups.
- Men with a household income of $75,000 or more had the highest percentage of having ever had a PSA test, at 74%. Men with a household income of $25,000-$34,999 reported the lowest percentage, at 57%. The other income ranges were in the 60% to 62%.
- Men residing in Ward 8 reported the lowest of having ever had a PSA test, at 59%.

Men aged 40 years and older were asked how long it had been since their last PSA test. Over half of which had been given the test within the past two years (59%); higher than the BRFSS national testing rate of 54%.[30] Very few men had been given the test five years or more ago.

Digital Rectal Exams

Men aged 40 and over were asked if they had ever had a digital rectal exam. Seventy-nine percent of District men had ever had the exam.

- Men aged 40-44 had the lowest percentage of having ever had the exam (66%), and men aged 55-64 reported the highest percentage of having ever had it (89%). The remaining age groups were at 76% to 85%.
- Proportionally, Caucasian men reported more than African American men to have ever had a digital rectal exam (88% versus 76%, respectively).
- Only 61% of men aged 40 years and older with a high school degree had ever had a digital rectal exam. This is compared to 86% of men who had attended at least some college, and 83% of men who had a college degree.

- Men with a household income of $25,000-$34,999 reported the lowest proportion of having ever had the exam, at 64%. However, in the two highest household income groups ($50,000-$74,999 and $75,000 or more), reported the highest proportions of having ever had the test—83% and 86%, respectively.

- Men in Ward 8 had the lowest proportion of having ever had a digital rectal exam (62%), compared to men in all other wards (range of 75% to 85%).

The majority of men aged 40 and over had their last digital rectal exam within the past three years (69%).

Prevalence of Prostate Cancer

Male respondents aged 40 years and older were asked if they had ever been told that they had prostate cancer. Overall, only 4% were told they ever had the disease.

- As age increases, the proportion being told you have prostate cancer increased; 12% among men aged 65 years and older, compared to 2% or less among all other age groups.

- The proportion of prostate cancer decreased as education increased. Six percent of men with less than a high school degree were told they had the disease, compared to 3% of men with a college degree.

- Ten percent of men aged 40 years and older with a household income of $35,000-$49,999 were told they had prostate cancer. This is compared to 5% or less of men in all other household income groups.

- The highest reports of being told you had prostate cancer was among men residing in Ward 2 (9%), and the lowest among men residing in Wards 3, 7 and 8 (less than 2% in each).

Table 45. Administering PSA Test, By Demographics and Ward

"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?"

	N	Yes	N
TOTAL	984	67.0%	33.0%
AGE			
40-44	156	39.6%	60.4%
45-54	273	59.3%	40.7%
55-64	252	79.3%	20.7%
65+	289	88.2%	11.8%
RACE			
Caucasian	527	70.9%	29.1%
African American	370	66.0%	34.0%
Hispanic	31	*	*
Other	37	*	*
EDUCATION			
Less than High School	66	70.6%	29.4%
High School Graduate	129	46.4%	53.6%
Some College	151	73.1%	26.9%
College Graduate	633	71.5%	28.5%
INCOME			
Less than $15,000	89	61.9%	38.1%
$15,000-$24,999	79	60.9%	39.4%
$25,000-$34,999	63	57.4%	42.6%
$35,000-$49,999	89	61.5%	38.5%
$50,000-$74,999	117	61.5%	38.5%
$75,000+	431	74.0%	26.0%
WARD			
Ward 1	71	69.3%	30.7%
Ward 2	91	79.2%	20.8%
Ward 3	167	76.0%	24.0%
Ward 4	128	65.65	34.4%
Ward 5	87	74.7%	25.3%
Ward 6	110	62.6%	37.4%
Ward 7	62	72.6%	27.4%
Ward 8	53	59.4%	40.6%

* Data not presented if the unweighted cell size was <50.

Table 46. Time Since Last PSA Test, By Demographics and Ward

"How long has it been since you had your last PSA test?"

	N	Never	Past Year	Past 2 Years	Past 3 Years	Past 5 Years	5 or More
TOTAL	973	33.4%	48.7%	10.1%	4.2%	2.3%	1.4%
AGE							
40-44	156	60.4%	30.3%	5.1%	2.0%	1.7%	0.7%
45-54	272	40.8%	37.7%	15.5%	3.9%	1.7%	0.4%
55-64	250	21.0%	58.3%	9.6%	7.8%	1.3%	2.1%
65+	281	12.2%	68.2%	9.0%	3.3%	4.6%	2.8%
RACE							
Caucasian	524	29.3%	48.6%	11.8%	6.1%	2.5%	1.7%
African American	363	34.4%	49.4%	10.4%	3.0%	1.7%	1.1%
Hispanic	31	*	*	*	*	*	*
Other	37	*	*	*	*	*	*
EDUCATION							
Less than High School	65	29.6%	52.3%	10.5%	2.3%	3.2%	2.0%
High School Graduate	127	54.2%	33.3%	6.0%	5.3%	0.9%	0.2%
Some College	148	27.3%	54.4%	12.5%	2.3%	2.5%	1.0%
College Graduate	628	28.8%	52.3%	10.0%	4.8%	2.3%	1.9%
INCOME							
Less than $15,000	88	38.7%	47.2%	9.2%	2.4%	1.3%	1.1%
$15,000-$24,999	78	39.9%	41.3%	8.1%	3.1%	6.7%	0.9%
$25,000-$34,999	62	42.8%	34.9%	12.8%	4.9%	3.8%	0.9%
$35,000-$49,999	88	38.8%	43.7%	12.6%	2.5%	1.7%	0.7%
$50,000-$74,999	115	39.1%	45.2%	8.9%	5.5%	0.7%	0.6%
$75,000+	429	26.1%	53.9%	10.6%	5.6%	2.3%	1.7%
WARD							
Ward 1	71	30.7%	45.2%	9.2%	6.0%	8.9%	0%
Ward 2	91	20.8%	54.4%	15.7%	4.0%	1.8%	3.3%
Ward 3	166	24.1%	53.6%	10.2%	8.9%	1.4%	1.8%
Ward 4	126	35.1%	50.4%	8.1%	4.4%	0.3%	1.7%
Ward 5	86	25.4%	60.5%	11.5%	0.9%	0%	1.7%
Ward 6	108	38.4%	45.0%	11.0%	4.8%	0.8%	0%
Ward 7	62	27.4%	56.5%	8.0%	0%	6.4%	1.6%
Ward 8	53	40.6%	47.2%	5.7%	6.5%	0%	0%

*Data not presented if the unweighted cell size was <50.

Table 47. Having Digital Rectal Exams, By Demographics and Ward

"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?"

	N	Yes	No
TOTAL	1016	79.0%	21.0%
AGE			
40-44	166	65.6%	34.4%
45-54	288	76.2%	23.8%
55-64	255	89.3%	10.7%
65+	292	84.9%	15.1%
RACE			
Caucasian	560	87.9%	12.1%
African American	370	75.9%	24.1%
Hispanic	31	*	*
Other	37	*	*
EDUCATION			
Less than High School	66	60.8%	39.2%
High School Graduate	130	69.9%	30.1%
Some College	152	86.0%	14.0%
College Graduate	663	83.3%	16.7%
INCOME			
Less than $15,000	92	69.3%	30.7%
$15,000-$24,999	79	73.5%	26.5%
$25,000-$34,999	63	63.6%	36.4%
$35,000-$49,999	88	73.7%	26.3%
$50,000-$74,999	123	82.6%	17.4%
$75,000+	455	86.0%	14.0%
WARD			
Ward 1	75	83.8%	16.2%
Ward 2	99	83.3%	16.7%
Ward 3	177	84.7%	15.3%
Ward 4	127	74.7%	25.3%
Ward 5	87	85.1%	14.9%
Ward 6	112	83.7%	16.3%
Ward 7	63	77.8%	22.2%
Ward 8	52	62.3%	37.7%

* Data not presented if the unweighted cell size was <50.

Table 48. Time Since Last Digital Rectal Exam, By Demographics and Ward

"How long has it been since you had your last digital rectal exam?"

	N	Never	Past Year	Past 2 Years	Past 3 Years	Past 5 Years	5 or More
TOTAL	1006	21.2%	51.4%	12.0%	5.9%	4.6%	5.0%
AGE							
40-44	166	34.4%	36.2%	13.3%	5.0%	5.3%	5.9%
45-54	286	23.9%	43.4%	13.9%	8.4%	4.4%	6.0%
55-64	253	10.8%	65.6%	10.3%	4.2%	6.1%	3.0%
65+	286	15.4%	61.7%	9.8%	4.8%	3.1%	5.1%
RACE							
Caucasian	554	12.3%	52.9%	16.6%	7.5%	5.6%	5.1%
African American	366	24.4%	51.0%	10.4%	5.5%	3.9%	4.9%
Hispanic	31	*	*	*	*	*	*
Other	37	*	*	*	*	*	*
EDUCATION							
Less than High School	66	39.2%	42.6%	10.6%	3.7%	2.0%	2.0%
High School Graduate	130	30.1%	44.9%	8.9%	4.7%	5.4%	6.0%
Some College	149	14.3%	55.1%	14.7%	5.8%	4.5%	5.5%
College Graduate	656	16.9%	54.7%	12.6%	6.0%	4.9%	5.0%
INCOME							
Less than $15,000	91	31.2%	45.0%	9.6%	4.3%	3.5%	6.5%
$15,000-$24,999	79	26.5%	51.1%	5.8%	9.3%	4.4%	2.9%
$25,000-$34,999	62	36.5%	34.2%	10.2%	11.2%	3.2%	4.8%
$35,000-$49,999	87	26.5%	50.4%	10.3%	2.3%	5.7%	4.9%
$50,000-$74,999	121	17.6%	47.5%	15.0%	7.4%	8.8%	3.6%
$75,000+	452	14.2%	57.2%	13.6%	5.6%	4.5%	5.0%
WARD							
Ward 1	75	16.2%	52.6%	8.8%	6.4%	11.1%	4.9%
Ward 2	96	17.0%	56.2%	12.5%	6.6%	4.2%	3.5%
Ward 3	177	15.3%	56.1%	14.6%	6.2%	4.7%	3.1%
Ward 4	125	25.8%	51.3%	8.9%	2.9%	3.3%	7.7%
Ward 5	87	14.9%	59.0%	9.0%	4.2%	4.1%	8.8%
Ward 6	111	16.4%	54.7%	17.4%	4.0%	6.6%	0.8%
Ward 7	63	22.2%	51.0%	17.5%	5.4%	1.2%	2.7%
Ward 8	52	37.7%	46.2%	5.1%	6.8%	4.1%	0%

Table 49. Prevalence of Having Prostate Cancer, By Demographics and Ward *"Have you ever been told by a doctor, nurse or other health professional that you had prostate cancer"*			
	N	Yes	No
TOTAL	1029	3.6%	96.4%
AGE			
40-44	167	0%	100.0%
45-54	291	0.7%	99.3%
55-64	260	2.0%	98.0%
65+	295	11.9%	88.1%
RACE			
Caucasian	565	4.4%	95.6%
African American	374	3.8%	96.2%
Hispanic	31	*	*
Other	38	*	*
EDUCATION			
Less than High School	68	5.8%	94.2%
High School Graduate	133	4.9%	95.1%
Some College	154	2.2%	97.8%
College Graduate	669	3.4%	96.6%
INCOME			
Less than $15,000	93	5.1%	94.9%
$15,000-$24,999	79	5.4%	94.6%
$25,000-$34,999	64	0.8%	99.2%
$35,000-$49,999	89	10.3%	89.7%
$50,000-$74,999	124	3.5%	96.5%
$75,000+	458	2.2%	97.8%
WARD			
Ward 1	77	3.9%	96.1%
Ward 2	99	9.2%	90.8%
Ward 3	178	2.4%	97.6%
Ward 4	129	5.0%	95.0%
Ward 5	88	3.2%	96.8%
Ward 6	113	5.4%	94.6%
Ward 7	63	1.6%	98.4%
Ward 8	54	0%	100.0%

* Data not presented if the unweighted cell size was <50.

Colorectal cancer, also known as colon cancer, affects men and women, primarily over the age of 50. Colon cancer is the third most common form of cancer for both men and women, and the second leading cause of cancer deaths. Screening tests for colon cancer include blood stool tests, sigmoidoscopy, and colonoscopy. It is believed that if these tests were performed regularly for all adults aged 50 and older, 60% of deaths from colon cancer could be prevented. [31]

Respondents aged 50 and older were asked a series of questions about colorectal cancer screening—whether or not they had been screened using a blood stool test, a sigmoidoscopy, or colonoscopy.

Home Blood Stool Test

District of Columbia adults aged 50 years and older were asked if they had ever taken a blood stool test using a special home kit. Half, 50%, of adults aged 50 years and older claimed to have ever taken the test.

- Slightly more women (50%) than men (48%) reported to have ever taken the test.
- The proportion of adults that had ever used a blood stool test kit at home increased with age, 39% of adults aged 50-54 had ever used the test, compared to 56% of adults aged 65 years and older.
- Less than half of African Americans (46%) reported having ever used the test, compared to more than half of the adults of all other race categories (54% to 57%).
- Among adults 50 years of age and older, the proportion that ever used the home test kit increased with higher educational attainment; 37% of adults with less than a high school degree had ever used the home kit, compared to 45% to 54% of adults with a high school degree or greater.
- Adults with the lowest household income (less than $15,000) had the lowest percentage having ever used the home kit, at 37%. Adults with the highest household incomes ($75,000 or more) had the highest rate of having taken the test at 59%.
- District of Columbia adults aged 50 years and older in Wards 7 and 8 reported the lowest proportions of having ever used the home kit—44% and 41%, respectively. The remaining Wards ranged between 48% and 60%

Adults aged 50 years and older were asked how long it had been since they last had a home blood stool test. Thirty-two percent had done so within the past two years, which is compared to only 24% nationwide for the BRFSS. [32]

- Compared to all other wards, Ward 3 reported the highest proportion of having had the test within the past 3 or more years (25%).

Sigmoidoscopy and Colonoscopy

Just less than two-thirds, 64%, of adults aged 50 years and older had ever had a sigmoidoscopy or colonoscopy, which is higher than the nationwide BRFSS average of 57%. [33]

- More women than men having had either test; 67% of women compared to 60% of men.

- As age increased, so did their percentage of having ever had either test; 43% of adults aged 50-54 had ever had a sigmoidoscopy or colonoscopy compared to 66% and 75% of adults aged 55-65 years and 65 years and older respectively.

- Caucasian adults had the highest reports of having ever had either test (73%), compared to 60% of African Americans and 52% of adults of "other" races.

- As education and income increased, so did the likelihood that adults aged 50 years and older had ever had a sigmoidoscopy or colonoscopy. Fifty-four percent of adults with a high school degree or less had ever had either test, compared to 68% or more of adults who had attended at least some college.

- By income, 56% or less of adults with a household income below $34,999 had ever had either test, compared to 73% of adults with a household income of $75,000 or greater.

- By Ward 53%, adults aged 50 years and over residing in Ward 8 had the lowest reports of having had the test than those in all other wards which ranged from 64% to 75%.

A majority of adults aged 50 years and older had the test within the past five years (57%). Few adults in any demographic subgroup had been given either test 10 years or more ago.

Table 50. Using A Blood Stool Test Home Kit, By Demographics and Ward

"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?

	N	Yes	N
TOTAL	1943	49.5%	50.5%
GENDER			
Male	735	48.3%	51.7%
Female	1208	50.4%	49.6%
AGE			
50-54	394	39.0%	61.0%
55-64	678	49.7%	50.3%
65+	788	55.9%	44.1%
RACE			
Caucasian	897	56.7%	43.3%
African American	874	46.1%	53.9%
Hispanic	42	*	*
Other	72	53.9%	46.1%
EDUCATION			
Less than High School	168	36.8%	63.2%
High School Graduate	340	45.2%	54.8%
Some College	343	53.7%	46.3%
College Graduate	1078	53.0%	47.0%
INCOME			
Less than $15,000	209	36.8%	63.2%
$15,000-$24,999	185	43.9%	56.1%
$25,000-$34,999	142	53.3%	46.7%
$35,000-$49,999	199	42.8%	57.2%
$50,000-$74,999	211	52.2%	47.8%
$75,000+	675	58.6%	41.4%
WARD			
Ward 1	108	55.9%	44.1%
Ward 2	152	48.1%	51.9%
Ward 3	365	60.1%	39.9%
Ward 4	276	53.3%	46.7%
Ward 5	204	54.4%	45.6%
Ward 6	176	53.4%	46.6%
Ward 7	157	44.2%	55.8%
Ward 8	126	41.0%	59.0%

* Data not presented if the unweighted cell size was <50.

Table 51. Time Since Last Home Blood Stool Test, By Demographics and Ward

"How long has it been since you had your blood stool test using a home kit?"

	N	Never	Past Year	Past 2 Years	Past 5 Years	5 or More
TOTAL	1908	51.3%	22.3%	10.1%	9.2%	7.2%
GENDER						
Male	726	52.2%	23.6%	10.0%	8.1%	6.1%
Female	1182	50.5%	21.3%	10.1%	10.0%	8.1%
AGE						
50-54	391	61.4%	17.0%	7.5%	6.7%	7.4%
55-64	664	51.0%	21.2%	11.1%	9.2%	7.4%
65+	773	44.8%	26.6%	10.3%	10.9%	7.5%
RACE						
Caucasian	882	43.9%	21.9%	12.2%	11.7%	10.4%
African American	859	54.6%	22.4%	9.2%	8.2%	5.5%
Hispanic	40	*	*	*	*	*
Other	71	46.5%	28.4%	8.2%	6.3%	10.6%
EDUCATION						
Less than High School	166	63.8%	19.0%	5.4%	7.2%	4.4%
High School Graduate	332	55.9%	21.9%	11.8%	5.2%	5.3%
Some College	339	46.8%	24.2%	8.6%	12.2%	8.2%
College Graduate	1057	47.8%	22.6%	11.2%	10.2%	8.3%
INCOME						
Less than $15,000	207	63.7%	14.6%	8.0%	8.5%	5.1%
$15,000-$24,999	183	56.6%	24.2%	9.2%	6.2%	3.9%
$25,000-$34,999	139	47.3%	23.8%	13.1%	13.1%	2.6%
$35,000-$49,999	195	58.1%	20.4%	8.5%	7.7%	5.2%
$50,000-$74,999	206	49.1%	20.7%	9.9%	11.4%	8.9%
$75,000+	663	41.9%	26.0%	11.5%	8.9%	11.7%
WARD						
Ward 1	104	45.3%	28.4%	12.6%	6.6%	7.0%
Ward 2	149	52.6%	18.1%	10.0%	10.5%	8.8%
Ward 3	361	40.4%	21.1%	13.8%	11.4%	13.3%
Ward 4	267	47.8%	27.0%	8.2%	9.9%	7.1%
Ward 5	201	46.1%	26.5%	10.9%	9.1%	7.4%
Ward 6	173	47.4%	26.6%	7.1%	14.5%	4.5%
Ward 7	155	56.3%	19.8%	10.1%	8.6%	5.3%
Ward 8	125	59.6%	16.2%	10.0%	9.2%	5.0%

*Data not presented if the unweighted cell size was <50.

Table 52. Having a Sigmoidoscopy and Colonoscopy, By Demographics and Ward

"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?"

	N	Yes	No
TOTAL	1941	64.1%	35.9%
GENDER			
Male	725	60.4%	39.6%
Female	1216	66.8%	33.2%
AGE			
50-54	391	43.0%	57.0%
55-64	676	65.9%	34.1%
65+	791	75.2%	24.8%
RACE			
Caucasian	900	73.2%	26.8%
African American	870	60.2%	39.8%
Hispanic	43	*	*
Other	72	52.3%	47.7%
EDUCATION			
Less than High School	167	54.1%	45.9%
High School Graduate	338	54.4%	45.6%
Some College	341	67.7%	32.3%
College Graduate	1081	69.8%	30.2%
INCOME			
Less than $15,000	210	53.7%	46.3%
$15,000-$24,999	184	56.0%	44.0%
$25,000-$34,999	143	51.9%	48.1%
$35,000-$49,999	194	62.6%	37.4%
$50,000-$74,999	209	63.7%	36.3%
$75,000+	677	73.2%	26.8%
WARD			
Ward 1	107	69.8%	30.2%
Ward 2	154	71.0%	29.0%
Ward 3	365	74.9%	25.1%
Ward 4	277	65.1%	34.9%
Ward 5	203	66.2%	33.8%
Ward 6	174	64.4%	35.6%
Ward 7	156	65.3%	34.7%
Ward 8	127	52.7%	47.3%

*Data not presented if the unweighted cell size<50.

Table 53. Time Since Last Sigmoidoscopy or Colonoscopy, By Demographics and Ward

"How long has it been since you had your last sigmoidoscopy or colonoscopy?"

	N	Never	Past Year	Past 2 Years	Past 5 Years	Past 10 Years	10 or More
TOTAL	1920	36.5%	20.6%	14.6%	21.7%	4.6%	2.1%
GENDER							
Male	721	40.0%	17.4%	15.7%	20.6%	4.1%	2.2%
Female	1199	33.8%	23.0%	13.7%	22.6%	5.0%	2.0%
AGE							
50-54	391	57.0%	12.4%	11.3%	13.8%	2.5%	3.0%
55-64	670	34.7%	20.0%	14.4%	23.5%	5.8%	1.7%
65+	779	25.3%	25.6%	16.4%	25.3%	5.1%	2.2%
RACE							
Caucasian	896	27.0%	17.3%	15.3%	29.7%	7.3%	3.4%
African American	858	40.5%	22.3%	14.0%	18.4%	3.3%	1.4%
Hispanic	43	*	*	*	*	*	*
Other	70	48.9%	19.0%	10.1%	17.5%	2.1%	2.4%
EDUCATION							
Less than High School	165	46.3%	23.8%	8.6%	18.2%	2.8%	0.3%
High School Graduate	335	46.2%	24.5%	13.1%	11.5%	3.0%	1.8%
Some College	334	33.4%	19.4%	15.6%	23.9%	5.5%	2.3%
College Graduate	1073	30.5%	19.1%	16.2%	26.2%	5.4%	2.6%
INCOME							
Less than $15,000	206	47.6%	20.3%	10.6%	14.9%	2.5%	4.1%
$15,000-$24,999	182	45.0%	26.0%	12.1%	13.5%	2.3%	1.1%
$25,000-$34,999	141	48.4%	16.3%	14.5%	14.6%	4.5%	1.6%
$35,000-$49,999	192	37.8%	17.4%	17.5%	22.6%	3.4%	1.3%
$50,000-$74,999	209	36.3%	22.4%	11.5%	23.2%	5.3%	1.2%
$75,000+	675	27.0%	18.6%	18.6%	28.3%	5.5%	2.0%
WARD							
Ward 1	107	30.2%	20.7%	18.4%	26.6%	2.4%	1.7%
Ward 2	15.	29.2%	19.2%	14.7%	26.2%	6.1%	4.5%
Ward 3	362	25.3%	17.8%	19.1%	27.6%	7.1%	3.0%
Ward 4	275	35.0%	21.8%	16.5%	18.5%	4.7%	3.4%
Ward 5	201	34.0%	24.3%	18.2%	17.7%	3.7%	2.2%
Ward 6	173	36.0%	24.5%	6.9%	27.2%	5.2%	0.2%
Ward 7	154	35.8%	21.8%	12.2%	23.6%	5.7%	0.95
Ward 8	127	47.3%	21.9%	10.2%	18.6%	1.0%	1.0%

*Data not presented if the unweighted cell size was <50

Asthma, a reversible obstructive lung disease, affects an estimated 20.5 million Americans. [34] Asthma is also the leading long-term disease of children. [35] While there is no cure for asthma, asthma can be controlled by taking medication and avoiding factors that cause an attack—such as dust mites, tobacco smoke, outdoor air pollution, pets, and mold. [36]

Asthma attacks may affect one's ability to attend work or school, and increases one's chance of using medical services. In 2002, children aged 5-17 missed 14.7 million days of school due to asthma, and employed adults aged 18 years and older missed 11.8 million days of work due to asthma. In 2002, there were 13.9 million outpatient asthma visits to physician offices or outpatient departments, 1.9 million visits to the emergency department, and 484,000 hospitalizations. [37]

District of Columbia respondents were asked if they had ever been diagnosed with asthma, and respondents who had were then asked if they still have asthma. Respondents were also asked if their child (randomly selected for the survey) had ever been diagnosed with asthma, and respondents who answered "yes" were then asked if the child still had asthma.

Adult Asthma

Overall, 10% of District adults were affected with asthma, and an additional 5% indicated that they had been diagnosed with asthma in the past, but no longer consider themselves to have asthma. This compares to 9% of current asthmatics nationwide according to the BRFSS. [38] The District's rate of 10% is the second highest prevalence nationwide of current asthmatics.

- More women reported to have asthma than men (12% versus 8% respectively).
- By age groups, adults aged 18-24 had the highest rate of asthma (15%), and those 55-64 years had the lowest (7%).
- African Americans had higher rates of asthma (11%) compared to adults of all other races (9% or less).
- The prevalence of asthma decreased as education increased; 13% of adults with a high school diploma or less had asthma, compared to 8% to 9% of adults with a more than a high school diploma.
- Adults in the two lowest household income groups had higher rates of asthma; 11% of adults with household incomes below $15,000 and 13% of adults with household incomes of $15,000-$24,999 had asthma. The higher income groups ranged from 8% to 10%.
- Adults in Wards 4, 5, and 8 had higher asthma prevalence rates of 11%, 12%, and 13%, respectively. Adults in Wards 2, 3, and 6 had lower rates of the disease, ranging between 7% and 8%.

Child Asthma

Respondents were asked if the selected child for the survey had ever been diagnosed with asthma, and whether or not the child still has asthma. As the number of respondents with children is small, the data from the 2005 and 2006 survey years were combined. Over this two-year period, 11% of children were current asthmatics, 4% were former asthmatics, and 85% of children had never been diagnosed with asthma.

- Slightly more boys than girls to were reported currently have asthma; 13% versus 10%, respectively.

- African American children had higher rates of asthma than children of all other races. Fourteen percent of African American children had asthma, compared to 7% of Caucasians, 7% of children of "other" races, and 4% of Hispanics.

- Coincidentally, as parents' education increased the rate that their child will have asthma decreased. For adults with less than a high school degree, 14% of their children had asthma. This compared to only 8% of children whose parents had a college degree.

- By income, only 7% of children in households with an income of $75,000 or more had asthma, compared to 16% of children in households with an income below $15,000.

- Children residing in Wards 1, 5, and 8 had the highest rates of asthma (14%, 18%, 19%, respectively), and children residing in Wards 2, 3, and 7 had the lowest rates of the disease (7%, 7%, and 8%, respectively).

Table 54. Prevalence of Adult Asthma, By Demographics and Ward

"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	4002	10.0%	5.3%	84.7%
GENDER				
Male	1547	8.1%	5.7%	86.1%
Female	2455	11.6%	4.9%	83.5%
AGE				
18-24	198	15.2%	8.1%	76.7%
25-34	664	11.8%	6.5%	81.8%
35-44	757	7.5%	4.3%	88.2%
45-54	742	10.5%	4.3%	85.2%
55-64	710	6.6%	5.7%	87.7%
65+	835	7.9%	3.1%	89.0%
RACE				
Caucasian	1888	9.2%	4.9%	85.9%
African American	1673	11.2%	4.9%	83.9%
Hispanic	147	7.4%	6.5%	86.1%
Other	202	7.3%	9.0%	83.7%
EDUCATION				
Less than High School	267	13.0%	3.9%	83.1%
High School Graduate	691	12.6%	4.1%	83.3%
Some College	673	8.2%	4.9%	87.0%
College Graduate	2348	9.0%	6.2%	84.8%
INCOME				
Less than $15,000	355	11.3%	2.6%	86.0%
$15,000-$24,999	370	13.1%	5.5%	81.5%
$25,000-$34,999	317	8.1%	4.7%	87.2%
$35,000-$49,999	416	9.7%	7.0%	83.3%
$50,000-$74,999	479	9.5%	5.8%	84.7%
$75,000+	1510	7.8%	6.0%	86.2%
WARD				
Ward 1	252	9.4%	7.1%	83.5%
Ward 2	272	8.3%	10.4%	81.3%
Ward 3	582	7.6%	3.9%	88.5%
Ward 4	459	11.4%	3.9%	84.7%
Ward 5	353	12.4%	3.8%	83.8%
Ward 6	380	6.7%	7.9%	85.4%
Ward 7	295	8.2%	6.5%	85.2%
Ward 8	263	13.3%	3.5%	83.1%

Table 55. Prevalence of of Childhood Asthma, By Demographics and Ward

"Has a doctor, nurse or other health professional ever said that the child has asthma?" and "Does the child still have asthma?" ***This table combines data from the 2005 and 2006 surveys.***

	N	Current	Former	Never
TOTAL	1693	11.4%	3.7%	84.9%
GENDER				
Male	835	12.6%	4.4%	82.9%
Female	847	10.1%	2.9%	87.0%
AGE				
8 or under	828	8.9%	1.8%	89.3%
9 to 17	736	13.9%	6.2%	79.9%
RACE				
Caucasian	622	6.6%	3.1%	90.3%
African American	888	14.4%	4.0%	81.7%
Hispanic	70	3.5%	2.7%	93.8%
Other	87	7.3%	4.3%	88.4%
EDUCATION				
Less than High School	120	14.4%	3.4%	82.2%
High School Graduate	393	15.1%	3.5%	81.5%
Some College	332	12.3%	5.2%	82.5%
College Graduate	845	7.7%	3.2%	89.4%
INCOME				
Less than $15,000	149	16.0%	4.8%	79.2%
$15,000-$24,999	193	13.8%	4.1%	82.1%
$25,000-$34,999	161	14.3%	2.0%	83.7%
$35,000-$49,999	158	14.6%	1.7%	83.7%
$50,000-$74,999	180	13.0%	6.3%	80.7%
$75,000+	721	6.9%	3.3%	89.8%
WARD				
Ward 1	102	14.1%	3.2%	82.7%
Ward 2	77	6.7%	1.8%	91.7%
Ward 3	237	6.5%	2.6%	90.9%
Ward 4	242	11.7%	4.8%	83.5%
Ward 5	163	17.7%	2.2%	80.1%
Ward 6	154	12.6%	4.2%	83.1%
Ward 7	185	8.4%	1.5%	90.0%
Ward 8	200	18.9%	7.5%	73.6%

For most healthy adults, influenza (the flu) and pneumonia are no longer the serious health risks they once were. However, these diseases can be dangerous for older Americans and adults with compromised immune systems. Each year, 5% to 20% of the population gets the flu, over 200,000 people are hospitalized from flu complications, and around 36,000 people die from the flu. The best way to prevent the flu is to obtain the flu shot or nasal flu spray. [39]

More than 40,000 people die every year from the pneumonia—which is more than all other vaccine-preventable diseases combined. The vaccine is given one time, and is recommended for all adults aged 65 and older, individuals with chronic illnesses, and those with compromised immune systems. [40]

Hepatitis B is a viral disease of the liver affecting 1.25 million Americans. This liver disease often results in infection, cirrhosis (scaring), cancer, liver failure, and death. Hepatitis B is spread through the transmission of infected blood, sexual intercourse without the use of condoms, sharing needles, needle sticks or sharps exposure, and from mother to child during birth. The vaccine is available to all individuals, adults, and children to prevent the spread of the disease. [41]

District of Columbia respondents were asked whether or not they had received the influenza, pneumonia, and hepatitis B vaccinations. First, respondents were asked whether they had received a flu shot or flu spray in the past 12 months. Next, they were asked whether or not they had ever had a pneumonia shot. The last two questions in this section of the survey asked respondents if they had ever had the hepatitis B vaccine, and if they participated in any behaviors that put them at risk for contracting hepatitis B.

Influenza and Pneumococcal Immunization Levels

In all, 34% percent of adults had a flu vaccination in the past 12 months, and 21% had ever had a pneumonia vaccination.

- Older adults tend to have higher rates of higher rates of vaccine coverage than younger adults. Sixty-two percent of adults age 65 years and older report having had a flu shot, a lower percentage than the national BRFSS mean of 70%, and the second lowest of all BRFSS states. [42] The pneumonia vaccination rate among seniors age 65 years and older in the District was 52%, which was much lower than the BRFSS rate nationwide (67%), and in fact was the lowest vaccination rate of all states. [43] For this age group, adults aged 65 years and older, both the influenza and pneumococcal rates are lower than the Healthy People 2010 goals (90% vaccination rate for each).

- As has been reported in prior years, adults are unsure as to whether or not they have ever had the pneumonia vaccination. Overall, 12% of the population answered "I don't know" when asked if they had, had a pneumonia shot. Further, adults between the ages of 18 - 24 had the second highest percentage of reported pneumonia vaccination, with 24% saying they have received this shot.

- Caucasians were most likely to have had the flu shot (40%), and Hispanics were least likely to have had the vaccine (25%). There was little difference by race as to whether or not adults had the pneumonia vaccine.

- Adults in the lowest and highest education subgroups were more likely to have had the flu shot, as 39% of adults with less than a high school degree and 36% of adults with a college degree received the flu shot. This is compared to 31% or less of adults with a high school degree or only some college who received the vaccine.

- Those with household incomes of $35,000-$49,999 All other income categories groups ranged from 32% to 35% coverage of flu shots. For the pneumonia vaccine, vaccination rates was highest among adults with household incomes below $15,000 at 28%;, compared to only 15% of adults with household incomes of $75,000 or more.

- Adults residing in Wards 2 and 3 had the higher rates of having had a flu shot at 40% and 43%, respectively. Adults in Wards 7 and 8 had the lowest rate of being vaccinated, at 28% and 29%, respectively. For the pneumonia vaccine, adults in Wards 2, 5, and 7 had the lowest rate of being vaccinated (24% to 25%), and the rest of the Wards rates ranges from 17% to 22%.

Hepatitis B

Respondents were asked if they had ever received the hepatitis B vaccine, as well as their participation in behaviors which put them at risk for contracting the disease. Less than one-half, 44%, of adults had received the vaccine—with almost equal vaccination rates for men and women.

- As age increased, the percentage of adults who reported they were vaccinated against the disease decreased. Almost three-fourths, 73%, of adults aged 18-24 had received the vaccine, compared to only 13% of adults aged 65 years and older.

- Caucasians were the highest percentage of respondents having had the vaccine, 52%, followed by Hispanics, 48%, adults of "other" races, 44%, and African Americans, 39%.

- Being vaccinated against hepatitis B increased as education increased. Whereas only 36% of adults with less than a high school degree were vaccinated, almost one-half (48%) of adults with a college degree were vaccinated.

- There was not a trend in vaccination rates by household income. However, adults with a household income of $15,000-$24,999 reported the lowest rates of vaccination (39%) and adults earning $75,000 or more had the highest percentage of all the income groups, (48%).

- There were some large differences in vaccination rates by Ward. Over half, 51%, of adults in Ward 2 were vaccinated, and just under half were vaccinated in Wards 3 and 8 (46% in each). At the opposite end of the spectrum, only 29% of adults in Ward 4 were vaccinated against hepatitis B.

- Fourteen percent of adults had participated in behaviors that put them at risk for hepatitis B. Men (21%), adults between the ages of 18-24 (23%) or 35-44 (18%), and adults residing in Wards 1 (21%) and 8 (18%) were highest in their demographic category to be at risk.

Table 56. Adult Influenza and Pneumococcal Immunization Rate, By Demographics and Ward

"A flu shot is an influenza vaccine injected in your arm. During the past 12 months, have you had a flu shot?" combine with "During the past 12 months, have you had a flu vaccine that was sprayed in your nose? The flu vaccine that is sprayed in the nose is also called FluMist ™ and A pneumonia shot or pneumococcal vaccine is usually given only once or twice in a person's lifetime and is different from the flu shot. Have you ever had a pneumonia shot?

	N	Had Flu Vaccine in Past Year	N	Ever Had Pneumonia Vaccine
		Yes		Yes
TOTAL	3938	33.8%	3534	20.9%
GENDER				
Male	1520	34.7%	1312	21.2%
Female	2418	33.1%	2222	20.6%
AGE				
18-24	193	27.0%	159	24.4%
25-34	654	22.0%	548	12.9%
35-44	745	25.9%	650	7.7%
45-54	734	34.4%	671	12.9%
55-64	699	39.6%	651	20.0%
65+	822	61.6%	771	52.0%
RACE				
Caucasian	1873	39.9%	1628	20.5%
African American	1635	30.6%	1515	20.9%
Hispanic	144	24.9%	132	18.3%
Other	196	33.1%	174	20.5%
EDUCATION				
Less than High School	261	38.6%	244	22.6%
High School Graduate	672	28.7%	624	24.7%
Some College	666	30.8%	614	22.6%
College Graduate	2321	36.3%	2038	18.3%
INCOME				
Less than $15,000	345	34.5%	315	28.1%
$15,000-$24,999	365	34.8%	343	22.1%
$25,000-$34,999	312	31.8%	282	23.1%
$35,000-$49,999	408	25.9%	376	16.5%
$50,000-$74,999	473	32.8%	419	19.2%
$75,000+	1505	34.7%	1329	15.1%
WARD				
Ward 1	252	30.6%	218	17.4%
Ward 2	272	39.8%	244	24.9%
Ward 3	578	42.7%	509	21.8%
Ward 4	459	35.5%	424	20.9%
Ward 5	356	33.3%	330	25.4%
Ward 6	380	33.3%	340	19.1%
Ward 7	297	27.6%	276	24.3%
Ward 8	262	28.5%	251	18.0%

Table 57. Hepatitis B Vaccination Rates, By Demographics and Ward *"Have you ever received the hepatitis B vaccine? The hepatitis B vaccine is completed after the third shot is given"*			
	N	Yes	N
TOTAL	3380	44.0%	56.0%
GENDER			
Male	1303	45.0%	55.0%
Female	2077	43.1%	56.9%
AGE			
18-24	176	72.9%	27.1%
25-34	552	60.9%	39.1%
35-44	621	45.5%	54.5%
45-54	645	34.8%	65.2%
55-64	601	30.0%	70.0%
65+	709	12.7%	87.3%
RACE			
Caucasian	1576	51.9%	48.1%
African American	1437	38.8%	61.2%
Hispanic	122	47.6%	52.4%
Other	173	44.1%	55.9%
EDUCATION			
Less than High School	241	35.9%	64.1%
High School Graduate	587	41.7%	58.3%
Some College	593	41.1%	58.9%
College Graduate	1944	47.8%	52.2%
INCOME			
Less than $15,000	308	41.8%	58.2%
$15,000-$24,999	334	38.6%	61.4%
$25,000-$34,999	266	46.5%	53.5%
$35,000-$49,999	357	41.8%	58.2%
$50,000-$74,999	415	40.2%	59.8%
$75,000+	1250	48.3%	51.7%
WARD			
Ward 1	221	43.1%	56.9%
Ward 2	245	51.4%	48.6%
Ward 3	483	45.5%	54.5%
Ward 4	385	28.9%	71.1%
Ward 5	316	35.7%	64.3%
Ward 6	325	39.4%	60.6%
Ward 7	262	37.9%	62.1%
Ward 8	238	46.1%	53.9%

Table 58. Risk for Hepatitis B, By Demographics and Ward

"Tell me if any of these states is true for you. Do not tell me which statement or statements are true for you, just if any of them are: You have hemophilia and have received clotting factor concentrate; you are a man who have had sex with other men, even just one time; you have taken street drugs by needle, even just one time; you traded sex for money or drugs, even just one time; You have tested positive for HIV; You have had sex (even just one time) with someone who would answer 'yes' to any of these statements; you had more than two sex partners in the past year. Are any of these statements trued for you?"

	N	Yes	No
TOTAL	3866	13.6%	86.4%
GENDER			
Male	1489	21.0%	79.0%
Female	2377	7.3%	92.7%
AGE			
18-24	194	22.5%	77.5%
25-34	647	14.4%	85.6%
35-44	742	18.0%	82.0%
45-54	715	14.3%	85.7%
55-64	683	9.2%	90.8%
65+	800	3.2%	96.8%
RACE			
Caucasian	1848	13.7%	86.3%
African American	1595	14.2%	85.8%
Hispanic	143	7.5%	92.5%
Other	197	15.6%	84.4%
EDUCATION			
Less than High School	251	16.3%	83.7%
High School Graduate	657	15.4%	84.6%
Some College	656	13.6%	86.4%
College Graduate	2285	12.5%	87.5%
INCOME			
Less than $15,000	341	13.1%	86.9%
$15,000-$24,999	353	17.1%	82.9%
$25,000-$34,999	307	14.8%	85.2%
$35,000-$49,999	406	15.5%	84.5%
$50,000-$74,999	467	10.3%	89.7%
$75,000+	1486	12.9%	87.1%
WARD			
Ward 1	251	20.5%	79.5%
Ward 2	270	17.8%	82.2%
Ward 3	577	8.0%	92.0%
Ward 4	450	9.2%	90.8%
Ward 5	354	11.6%	88.4%
Ward 6	382	13.3%	86.7%
Ward 7	293	11.3%	88.7%
Ward 8	260	18.2%	81.8%

Healthy People 2010 Objectives

- ***Reduce the proportion of adults who are obese to 15%***
- ***Increase the proportion of adults who are at a healthy weight to 60%.***

In the U.S., obesity and being overweight have been steadily growing. In 2003-2004, 32% of adults were obese, and 34% were overweight. [44] Obesity is related to numerous health problems, some of which include: high blood pressure, heart disease, diabetes, stroke, and decreased quality of life. Obesity also leads to premature death, and it is the second leading cause of preventable deaths. [45]

A healthy weight range is determined by the Body Mass Index (BMI), which is equal to weight in kilograms divided by height in meters squared. Based on their reported height and weight, the CDC calculated the BMI for respondents. Those with a BMI of 25 to 29 are considered overweight, and those with a BMI of 30 or higher are considered obese.

According to the BRFSS, nationwide, 38% of Americans were of a healthy weight—with District adults having the highest percentage of adults with a healthy weight BMI (45%).[46] Even though the District has the highest percentage of adults classified as being a "healthy weight," the percentage is much lower than the Healthy People 2010 target of 60%.

- Overall, 23% of District of Columbia adults were obese, and 32% were overweight. The District's prevalence of obesity is higher than the Healthy People 2010 goal of 15%.
- A higher percentage of women were obese, compared to men to be obese (25% versus 20%), but in the overweight category, men were higher than women (38% versus 26%).
- Overall, as adults' age increased, they were less likely to be of a healthy weight. Over half of adults aged 34 and younger were a healthy weight (over 52%), compared to 45% or less of adults aged 35 years and older.
- African Americans were almost four times as obese (34%) as Caucasians (9%), and more than twice as obese as Hispanics (14%). Adults in "other" racial groups had the second highest percentage (19%).
- The percentage of obese of District adults' increased as education and income decreased. One-third or more of adults in the lowest education and income groups were obese, compared to 15% or less of adults in the highest education and income groups.
- In Wards 2 and 3, adults had the healthiest BMI's—54% and 59%, respectively. Only one-fourth, 25%, of Ward 8 adults had a healthy BMI. Ward 4, 5, 7, and 8 adults were the highest in the District to be obese, with rates at 32% or greater.
- Caucasians and adults between the ages of 18-24 were the only demographic groups that met the Healthy People 2010 goal of 60% of adults at a healthy weight. Caucasians, Hispanics, adults aged 18-24, college graduates, adults with a household income of $75,000 or more, and adults residing in Ward 3 were the only groups that met the Healthy People 2010 goal of reducing the proportion of adults who are obese to 15%.

Table 59. BMI, , By Demographics and Ward

Calculated variable based on Body Mass Index (BMI). BMI is a function of respondent's reported height and weight. "Overweight" is equal to a BMI of 25 to 28, and "Obese" is equal to a BMI of 30 or higher.

	N	Healthy Weight	Overweight	Obese
TOTAL	3827	45.4%	32.1%	22.5%
GENDER				
Male	1531	41.6%	38.3%	20.1%
Female	2296	48.9%	26.4%	24.7%
AGE				
18-24	190	59.5%	26.5%	14.0%
25-34	639	51.7%	31.2%	17.1%
35-44	735	40.7%	35.7%	23.6%
45-54	713	39.7%	29.8%	30.5%
55-64	684	34.5%	33.9%	31.6%
65+	802	44.5%	33.1%	22.4%
RACE				
Caucasian	1827	62.0%	28.9%	9.1%
African American	1592	32.2%	34.2%	33.6%
Hispanic	140	50.3%	35.3%	14.4%
Other	194	55.8%	25.8%	18.5%
EDUCATION				
Less than High School	248	32.8%	31.4%	35.8%
High School Graduate	655	35.9%	32.1%	32.0%
Some College	652	37.1%	33.8%	29.1%
College Graduate	2258	54.6%	31.5%	13.9%
INCOME				
Less than $15,000	343	36.5%	30.4%	33.1%
$15,000-$24,999	357	41.7%	32.1%	26.3%
$25,000-$34,999	312	34.7%	36.2%	29.1%
$35,000-$49,999	400	39.5%	30.7%	29.8%
$50,000-$74,999	456	42.4%	33.5%	24.1%
$75,000+	1479	53.8%	31.0%	15.2%
WARD				
Ward 1	245	46.1%	30.2%	23.7%
Ward 2	269	53.7%	29.1%	17.3%
Ward 3	555	58.6%	29.0%	12.4%
Ward 4	447	36.5%	32.0%	31.5%
Ward 5	335	33.5%	34.6%	31.8%
Ward 6	368	41.6%	35.8%	22.6%
Ward 7	284	35.6%	32.5%	32.0%
Ward 8	249	25.1%	38.7%	36.1%

Healthy People 2010 Objectives

- ***Reduce the proportion of adults who engage in no leisure-time physical activity to 20%***

Routine exercise has been shown to reduce the risk of a variety of diseases, including: heart disease, stroke, colon cancer, diabetes, and high blood pressure. Regular physical activity also assists in maintaining healthy weight, bones, muscles, and joints. Additional benefits of physical activity include the reduction of pain associated with arthritis, and lessened symptoms of anxiety and depression. [47]

Respondents were asked whether they had participated in any physical exercise other than their regular job in the past month. Within the District, 78% of adults engaged in some form of physical exercise outside of work in the previous month, leaving 22% who had engaged in no physical exercise outside of work (slightly higher than the 20% goal for Healthy People 2010). Nationwide, adults exercised at a rate of 77% overall. [48]

- Men exercised outside of work more than women; 80% of men reported physical activity compared to 76% of women.

- Participation in physical activity decreased as age increased—81% of adults between the ages of 18-24 participated in some form of physical activity compared to 63% of adults aged 65 years and older.

- Caucasians reported engaging in physical activity outside of work (91%) more than African Americans (67%) Hispanics and adults of "other" races (79% and 86%, respectively).

- Adults' exercising outside of work increased as education and household income increased. Over 80% of adults who attended some college or had a household income of $50,000 or more exercised outside of work, compared to only 53% of adults with less than a high school degree and 53% of adults who had a household income below $15,000.

- Adults residing in Ward 3 had the highest percentage of residents to exercising outside of work, 91%, and adults in Wards 5 and 7 had the lowest percentage to do so, 69% and 68%, respectively.

Table 60. Recreational Exercise, By Demographics and Ward

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

	N	Yes	No
TOTAL	4019	77.9%	22.1%
GENDER			
Male	1557	80.0%	20.0%
Female	2462	76.1%	23.9%
AGE			
18-24	198	81.0%	19.0%
25-34	667	85.8%	14.2%
35-44	762	81.0%	19.0%
45-54	746	77.0%	23.0%
55-64	711	75.2%	24.8%
65+	839	62.9%	37.1%
RACE			
Caucasian	1896	91.2%	8.8%
African American	1679	67.3%	32.7%
Hispanic	147	78.7%	21.3%
Other	203	86.3%	13.7%
EDUCATION			
Less than High School	267	52.6%	47.4%
High School Graduate	695	59.8%	40.2%
Some College	677	81.7%	18.3%
College Graduate	2357	88.7%	11.3%
INCOME			
Less than $15,000	357	53.2%	46.8%
$15,000-$24,999	371	65.1%	34.9%
$25,000-$34,999	319	74.1%	25.9%
$35,000-$49,999	417	77.0%	23.0%
$50,000-$74,999	481	86.2%	13.8%
$75,000+	1517	90.5%	9.5%
WARD			
Ward 1	253	84.1%	15.9%
Ward 2	273	85.8%	14.2%
Ward 3	582	91.3%	8.7%
Ward 4	462	75.9%	24.1%
Ward 5	357	69.1%	30.9%
Ward 6	380	82.8%	17.2%
Ward 7	297	67.5%	32.5%
Ward 8	263	70.7%	29.3%

Healthy People 2010 Objectives

- ***Increase the proportion of adults who have never had a permanent tooth extracted because of dental caries or periodontal disease to 42%***
- ***Increase the proportion of children and adults who use the oral health care system each year to 56%***

Having good oral hygiene is important not only to maintain one's permanent teeth, but also to prevent numerous oral health problems—such as dental caries and tooth decay; gum, soft tissue, and jaw joint disease; mouth ulcers; impaired taste; and dry mouth. The effects of poor oral health hygiene are evidenced in the data, as one in 20 adults aged 40-59 are missing all of their permanent teeth; almost 25% of all adults have some form of facial pain in the past six months; and more than 164 million hours of work each year are lost due to oral health problems or dental visits. [49]

Respondents were asked a variety of questions about their oral health, including: how long it had been since they last visited a dentist or dental clinic for any reason, how long it had been since they last had a dental cleaning, and how many of their permanent teeth had been removed because of decay or disease.

Visits to a Dental Clinic

District respondents were asked how long it had been since they last visited a dentist or dental clinic for any reason. Adults who had been to a dental clinic at any point, and had all of their permanent teeth, were also asked how long it had been since their teeth were last cleaned by a dentist or dental hygienist. Seventy-one percent of District adults had been to a dentist for any reason within the past year.

- Women had a slightly percentage of reports for having visited for the dentist within the past year compared to men—73% of women versus 70% of men.

- Adults aged 35-44 and 55-64 had the highest percentage of all the age groups to have been to the dentist within the past year—74% and 75%, respectively. For all other age groups, 70% or less of adults had been within the past year. Adults aged 18-24 and 65 years and older were most likely to have last seen a dentist five years or more or never—11% and 13%, respectively.

- Caucasians were had the highest percentage reporting having seen a dentist within the past year (82%), and African Americans were had the least reporting have done so (64%).

- As education and household income increased, so did the reporting that an adult had visited a dentist for any reason within the past year. Buy education, 53% of adults with less than a high school degree had been to the dentist within the past year, compared to 81% of adults with a college degree. By income, 46% of adults with a household income below $15,000 had been to a dentist within the past year, compared to 83% of adults with a household income of $75,000 or more.

- Adults residing in Wards 7, and 8 were equally reported not seeing a dentist within the past year—65% in each. Adults residing in Ward 3 visited the dentist more often than any of the other wards (87%) within the past year.

Permanent Teeth

Respondents were asked the number of permanent teeth that had been removed because of tooth decay or gum disease. Over half, 60%, had not had any teeth removed, and just over one-fourth, 26%, had between one and five teeth removed. This exceeds the Healthy People 2010 goal of 42% of adults who have never had a permanent tooth extracted because of dental caries or periodontal disease.

- There were minor differences by gender for the number of teeth removed, with women having slightly more than men (42% versus 39%).

- The likelihood of having one's permanent teeth removed increased by age. Over 90% of adults aged 18-24 had all of their permanent teeth, compared to only 22% of adults aged 65 years and older.

- Caucasians reported the highest percentage of all other races to have all of their permanent teeth (79%)—compared to 67% of Hispanics, 64% of adults of "other" races, and only 45% of African Americans.

- As education and household income increased, so did the percentage of District adults having all of their permanent teeth. By education, one-third (33%) of adults with less than a high school degree had all of their permanent teeth, compared to almost three-fourths (71%) of adults with a college degree. By income, less than half (41%) of adults who had a household income below $15,000 had all of their permanent teeth, compared to 73% of adults with a household income of $75,000 or more.

  There was a wide variety in responses by ward. Adults in Ward 3 were the highest percentage to have all of their permanent teeth (76%), whereas less than half of adults residing in Wards 4, 5, 7, and 8 had all of their permanent teeth.

Dental Cleaning

Over two-thirds, 68%, of District adults had been to the dentist or dental hygienist to have their teeth cleaned within the past year. However, 10% of District adults had not been in five years or more.

- Women reported have having a dental cleaning within the past year, at 70% versus 65%.

- Caucasians had the highest percentage of all the racial groups have had their teeth cleaned within the past year (81%), and African Americans had the lowest percentage to have done so (58%).

- The percentage of adults who had their teeth cleaned within the past year increased dramatically by education and household income. While only 40% of adults who had less than a high school degree had been to the dentist for a cleaning within the past year, almost double the number of adults with a college degree had been (79%). There is a more pronounced difference by income; 38% of adults with a household income below $15,000 had their teeth cleaned within the past year, compared to 81% of adults with a household income of $75,000 or more.

- Ward 7 and 8 adults were the lowest percentage of residents to have been to the dentist or hygienist within the past year for a dental cleaning compared to adults of other wards—58% and 54%, respectively. This is compared to 75% or more of adults residing in Wards 1, 2, and 3 (75%, 79%, and 87%, respectively).

Table 61. Time Since Last Dental Visit, By Demographics and Ward

"How long has it been since you last visited a dentist or a dental clinic for any reason? Include visits to dental specialists, such as orthodontists?"

	N	Past Year	Past 2 Years	Past 5 Years	Five or More Years/Never
TOTAL	4001	71.4%	12.0%	8.5%	8.0%
GENDER					
Male	1554	69.5%	11.1%	8.8%	10.5%
Female	2447	73.1%	12.9%	8.2%	5.8%
AGE					
18-24	196	68.9%	10.9%	9.0%	11.3%
25-34	664	69.9%	15.9%	7.9%	6.3%
35-44	761	74.1%	10.9%	9.4%	5.7%
45-54	742	70.4%	13.2%	8.8%	7.6%
55-64	710	75.2%	9.5%	9.2%	6.0%
65+	833	69.7%	9.7%	8.0%	12.6%
RACE					
Caucasian	1894	81.6%	10.3%	5.3%	2.9%
African American	1667	64.4%	12.5%	10.8%	12.3%
Hispanic	147	68.8%	13.5%	11.1%	6.5%
Other	200	72.1%	16.3%	7.0%	4.6%
EDUCATION					
Less than High School	263	52.7%	17.9%	10.7%	18.7%
High School Graduate	687	59.9%	13.8%	12.8%	13.5%
Some College	675	66.8%	13.0%	11.4%	8.9%
College Graduate	2354	81.1%	10.1%	5.2%	3.6%
INCOME					
Less than $15,000	356	46.2%	15.2%	15.9%	22.7%
$15,000-$24,999	369	61.8%	13.4%	13.8%	11.0%
$25,000-$34,999	318	69.6%	14.1%	9.0%	7.3%
$35,000-$49,999	415	73.6%	11.9%	6.5%	8.1%
$50,000-$74,999	477	78.7%	11.7%	5.7%	3.9%
$75,000+	1518	82.6%	9.5%	5.1%	2.7%
WARD					
Ward 1	251	78.5%	12.7%	5.5%	3.2%
Ward 2	273	80.2%	10.9%	5.2%	3.7%
Ward 3	582	87.0%	8.0%	3.4%	1.7%
Ward 4	460	69.5%	15.6%	6.4%	8.5%
Ward 5	355	67.8%	11.8%	11.9%	8.5%
Ward 6	379	72.4%	15.3%	7.2%	5.0%
Ward 7	296	65.4%	8.8%	12.9%	12.8%
Ward 8	261	65.1%	15.2%	12.3%	7.4%

Table 62. Number of Teeth Removed, By Demographics and Ward

"How many of your permanent teeth have been removed because of tooth decay or gum disease? Include teeth lost to infection, but do not include teeth lost for other reasons, such as injury or orthodontics?"

	N	None	1 to 5	6 or more but not all	All
TOTAL	3935	59.6%	26.2%	9.8%	4.4%
GENDER					
Male	1526	60.8%	26.6%	8.7%	3.9%
Female	2409	58.5%	25.8%	10.8%	4.9%
AGE					
18-24	198	91.9%	7.0%	0.5%	0.5%
25-34	667	80.2%	18.0%	1.5%	0.3%
35-44	756	63.4%	32.3%	4.1%	0.2%
45-54	742	50.4%	33.8%	12.3%	3.4%
55-64	695	36.9%	39.3%	19.2%	4.6%
65+	789	21.6%	29.3%	28.3%	20.8%
RACE					
Caucasian	1864	78.7%	16.9%	3.6%	0.8%
African American	1641	45.1%	32.3%	15.1%	7.5%
Hispanic	143	66.5%	28.7%	4.8%	0%
Other	199	63.9%	24.7%	7.8%	3.6%
EDUCATION					
Less than High School	262	32.7%	29.2%	23.1%	14.9%
High School Graduate	670	49.5%	29.3%	13.4%	7.8%
Some College	659	51.9%	29.0%	14.0%	5.1%
College Graduate	2323	71.0%	23.4%	4.7%	0.9%
INCOME					
Less than $15,000	353	41.0%	25.9%	18.9%	14.3%
$15,000-$24,999	357	48.7%	27.8%	17.6%	5.9%
$25,000-$34,999	314	50.9%	31.2%	13.4%	4.6%
$35,000-$49,999	408	55.2%	31.6%	11.5%	1.7%
$50,000-$74,999	467	61.1%	27.3%	9.9%	1.7%
$75,000+	1506	72.4%	23.8%	3.4%	0.5%
WARD					
Ward 1	248	65.3%	24.7%	7.9%	2.1%
Ward 2	268	67.5%	21.6%	7.3%	3.7%
Ward 3	568	76.1%	17.6%	5.7%	0.6%
Ward 4	454	43.7%	35.7%	13.6%	7.0%
Ward 5	346	46.5%	27.6%	19.1%	6.8%
Ward 6	373	58.5%	29.9%	9.5%	2.2%
Ward 7	294	45.6%	33.9%	13.8%	6.7%
Ward 8	260	43.4%	37.6%	14.0%	5.0%

Table 63. Time Since Last Dental Cleaning, By Demographics and Ward *"How long has it been since you had your teeth cleaned by a dentist or dental hygienist?"*					
	N	Past Year	Past 2 Years	Past 5 Years	Five or More Years/Never
TOTAL	3805	67.7%	13.7%	8.6%	10.0%
GENDER					
Male	1485	65.2%	13.7%	8.3%	12.8%
Female	2320	69.8%	13.7%	8.9%	7.6%
AGE					
18-24	194	65.1%	13.2%	7.9%	13.8%
25-34	660	65.7%	16.8%	9.7%	7.9%
35-44	754	68.7%	14.5%	9.6%	7.2%
45-54	715	67.2%	14.0%	7.1%	11.7%
55-64	681	69.7%	10.9%	8.9%	10.4%
65+	709	69.7%	9.9%	8.1%	12.4%
RACE					
Caucasian	1873	80.6%	10.1%	5.8%	3.4%
African American	1507	57.9%	15.5%	10.8%	15.8%
Hispanic	144	66.1%	15.1%	11.4%	7.3%
Other	191	65.8%	18.6%	7.8%	7.8%
EDUCATION					
Less than High School	218	38.9%	24.8%	11.1%	25.2%
High School Graduate	608	54.3%	16.3%	10.8%	18.6%
Some College	631	61.6%	14.7%	13.1%	10.6%
College Graduate	2329	79.0%	10.8%	5.9%	4.3%
INCOME					
Less than $15,000	297	37.8%	18.7%	11.7%	31.8%
$15,000-$24,999	333	52.9%	16.3%	13.8%	17.1%
$25,000-$34,999	294	65.4%	15.0%	10.5%	9.2%
$35,000-$49,999	405	69.0%	13.4%	7.7%	9.8%
$50,000-$74,999	466	74.9%	13.5%	7.1%	4.5%
$75,000+	1511	81.1%	9.9%	5.6%	3.4%
WARD					
Ward 1	243	74.6%	13.2%	8.2%	4.0%
Ward 2	264	78.6%	11.4%	6.0%	4.0%
Ward 3	577	86.6%	7.9%	3.9%	1.7%
Ward 4	433	67.5%	16.5%	5.9%	10.2%
Ward 5	328	61.9%	15.6%	12.1%	10.4%
Ward 6	371	70.1%	14.6%	8.7%	6.5%
Ward 7	270	58.3%	12.8%	11.6%	17.3%
Ward 8	241	54.3%	21.6%	11.8%	12.3%

Healthy People 2010 Objectives

- *Reduce cigarette smoking by adults to 12%*
- *Increase smoking cessation attempts by adult smokers to 75% (who stopped smoking for one day or longer in the past year because they were trying to quit).*

Although the prevalence of tobacco use has declined over recent years, in the U.S., tobacco use is still the leading preventable cause of death, resulting in almost 440,000 deaths each year (38,000 of which are estimated to be from exposure to second-hand smoke). Smoking harms almost every organ in the body, resulting in cancer, cardiovascular disease, and respiratory disease. [50] Tobacco use also results in over $75 billion in direct medical costs. [51]

Bidis are flavored cigarettes from India and other Southeast Asian countries. They have higher concentrations of nicotine, tar, and carbon monoxide than traditional cigarettes sold in the U.S. The health effects of smoking bidis are similar to that of traditional cigarettes, including: cancer, coronary heart disease, heart attack, and chronic bronchitis. [52]

District respondents were asked whether or not they smoked cigarettes and bidis. If respondents currently smoked cigarettes, they were asked if they had tried to quit within the past 12 months. All respondents, regardless of smoking status, were asked what strategies they believed would be most successful to prevent smoking.

Current Smoking

District of Columbia respondents were first asked whether they had ever smoked 100 cigarettes or more in their life. Respondents who answered "yes" to this question were then asked if they still smoked cigarettes every day, some days, or not at all. Respondents who indicated that they smoked every day or some days are considered current smokers. Overall, 18% of District adults were current smokers. This is below the nationwide smoking rate reported by the BRFSS (20%), but higher than the 12% goal of Healthy People 2010.[53]

- Men reported higher rates of currently smoking compared to women, 21% versus 15%.
- Adults between the ages of 18-24 and 45-54 were the highest percentage of respondents to smoke, at 23% for each group. Adults aged 55 years and over were lowest percentage of reported smokers; 15% of adults aged 55-64 and 12% of adults aged 65 and over, smoked cigarettes.
- African Americans and adults of "other" races most often reported that they smoke cigarettes—23% and 21%, respectively.
- Cigarette smoking increased as education decreased; 39% of adults with less than a high school degree smoked, versus 10% of adults with a college degree.
- Adults in the lowest household income groups were also the highest percentage of smokers of cigarettes; 36% of adults with a household income below $15,000 smoked, and 27% of adults with a household income of $15,000-$24,999, smoked. This is compared to only 9% of adults with a household income of $75,000 or more.
- Adults in Wards 7 and 8 had the highest rates of smoking by Ward; 24% of adults in Ward 7 and 31% of adults in Ward 8 smoked. Adults in Wards 1 and 3 had the lowest rates of smoking 12% and 10%.

Quit Attempts

Current smokers were asked if they had, in the past 12 months, stopped smoking for one day or more because they were trying to quit. Overall, 56% of current smokers had tried to quit during the past year, less than the 75% target from Healthy People 2010.

- Women tried to quit smoking within the past year compared to men, 60% versus 52%.
- Adults aged 25-34, 45-54, and 65 and over were the age groups with the lowest percentage of residents who have tried to quit—51%, 52%, and 50% respectively.
- Caucasians had a lower percentage of respondents having tried to quit with the past year than African Americans 46% versus 62%.
- Adults with the highest levels of education were had the lowest percentage of respondents to have tried to quit, as only 45% of adults with some college and 50% of adults with a college degree tried to quit. This is compared to 69% of high school graduates who tried to quit smoking within the past year.
- Adults with household incomes of $15,000-$34,999 were most likely to have tried to quit smoking; 61% of adults with a household income of $15,000-$24,999, and 74% of adults with a household income of $25,000-$34,999, tried to quit.
- Adults in Ward 5 tried most often to quit (69%), and adults in Ward 6 tried the least to quit (51%).

Bidi Use

Bidis are small, thin, hand-rolled cigarettes from India and other Southeast Asian countries, and can come in flavors such as chocolate, cherry, or mango. The risk of bidis, as compared to the typical cigarette, is that bidis have higher concentrations of nicotine, tar, and carbon monoxide. [54]

- Only 2% of District adults had ever smoked a bidi, even for one or two puffs.
- Men had a slightly higher rate than women with regards to having smoked a bidi (2% versus 1%).
- The use of bidis decreased as age increased; 3% of adults aged 18-34 had smoked a bidi, compared to less than 1% of adults aged 55 years and over.
- Adults of "other" races were much more likely to have ever smoked a bidi (5%) compared to Caucasians (1%), African Americans (2%), and Hispanics (0%).
- Adults with some college reported at the highest rate to have smoked a bidi (4%) compared to adults of all other educational subgroups.
- There were very minor differences by household income.
- Although there were minor differences by ward, adults residing in Wards 1 and 7 had the highest rate of bidi smokers (3% each).

Smoking Prevention Strategies

District of Columbia respondents who had ever smoked a bidi were asked which strategy (from a list read to them by the interviewer) they thought would be most successful to prevent smoking. Options given to respondents included: clinical personnel, workshops, health fairs, media, educational materials, church, or a quit-line.

Twenty-eight percent of adults said that they "did not know" which strategy would be most successful, and another 5% of adults refused to answer this question. Of District adults who gave a response, the strategy they thought would be most successful was to say that the media would be most successful (31%) followed by clinical personnel (21%). Only 3% of adults stated that a quit-line would be successful in preventing smoking, and only 2% of health fairs would do so.

Table 64. Current Smokers and Quit Attempts, By Demographics and Ward

"Currently Smoke" is a calculated variable equal to respondents who smoked at least 100 cigarettes in their life and now smoke every day or some days. "Tried to Quit" equal respondents answer yes to: "During the past 12 months, have you stopped smoking for one day or longer because you were trying to quit smoking?"

	N	Currently Smoke Cigarettes	N	Tried to Quit Smoking in Past Year
TOTAL	3992	17.9%	607	55.8%
GENDER				
Male	1550	21.3%	260	52.4%
Female	2442	14.9%	347	59.9%
AGE				
18-24	196	23.3%	43	*
25-34	666	17.3%	95	50.8%
35-44	758	17.9%	105	61.6%
45-54	742	23.2%	167	51.9%
55-64	709	14.5%	102	68.6%
65+	828	12.0%	82	49.5%
RACE				
Caucasian	1885	11.6%	194	45.5%
African American	1669	22.5%	350	64.5%
Hispanic	144	13.3%	10	*
Other	203	20.8%	40	*
EDUCATION				
Less than High School	264	39.4%	79	55.0%
High School Graduate	687	26.3%	169	69.0%
Some College	677	20.4%	135	45.4%
College Graduate	2341	9.9%	218	49.5%
INCOME				
Less than $15,000	358	35.5%	112	48.6%
$15,000-$24,999	368	26.5%	92	60.6%
$25,000-$34,999	316	16.3%	54	74.3%
$35,000-$49,999	413	21.5%	74	49.4%
$50,000-$74,999	480	16.1%	68	53.4%
$75,000+	1510	9.4%	127	52.3%
WARD				
Ward 1	251	11.8%	29	*
Ward 2	268	17.8%	31	*
Ward 3	578	10.0%	53	53.7%
Ward 4	460	13.7%	65	61.9%
Ward 5	355	19.3%	58	68.5%
Ward 6	379	16.1%	57	50.7%
Ward 7	295	24.4%	62	58.4%
Ward 8	259	31.4%	75	58.6%

* Data not presented if the unweighted cell size was <50.

Table 65. Current Bidi Smokers, By Demographics and Ward *"A bidi is a flavored cigarette from India. Have you ever smoked a bidi, even one or two puffs?"*			
	N	Yes	No
TOTAL	3719	1.6%	98.4%
GENDER			
Male	1439	2.0%	98.0%
Female	2280	1.3%	98.7%
AGE			
18-24	188	2.9%	97.1%
25-34	625	2.6%	97.4%
35-44	720	1.7%	98.3%
45-54	684	1.2%	98.8%
55-64	650	0.6%	99.4%
65+	768	0.1%	99.9%
RACE			
Caucasian	1805	1.4%	98.6%
African American	1504	1.6%	98.4%
Hispanic	138	0%	100.0%
Other	192	5.2%	94.8%
EDUCATION			
Less than High School	235	1.7%	98.3%
High School Graduate	614	0.8%	99.2%
Some College	630	3.8%	96.2%
College Graduate	2225	1.1%	98.9%
INCOME			
Less than $15,000	318	0.4%	99.6%
$15,000-$24,999	331	1.1%	98.9%
$25,000-$34,999	295	2.7%	97.3%
$35,000-$49,999	389	2.4%	97.6%
$50,000-$74,999	448	1.2%	98.8%
$75,000+	1448	1.8%	98.2%
WARD			
Ward 1	247	2.8%	97.2%
Ward 2	269	2.3%	97.7%
Ward 3	576	0.5%	99.5%
Ward 4	459	2.0%	98.0%
Ward 5	354	1.4%	98.6%
Ward 6	375	2.3%	97.7%
Ward 7	291	2.5%	97.5%
Ward 8	261	1.2%	98.8%

Table 66. Strategies for Smoking Prevention, By Demographics and Ward

"Which strategy would be most successful to prevent smoking?"

	N	Clinical Personnel	Workshops	Health Fairs	Media *(TV, Radio, Advertisement, Mailing)*	Educational Material *(Flyers Pamphlets)*	Church	Quit-line
TOTAL	214	20.6%	7.8%	1.8%	31.2%	19.1%	16.3%	3.2%
GENDER								
Male	108	22.1%	5.7%	2.6%	23.0%	23.4%	18.2%	5.0%
Female	106	18.5%	10.9%	0.7%	43.4%	12.7%	13.3%	0.5%
AGE								
18-24	18	*	*	*	*	*	*	*
25-34	64	16.6%	3.5%	0.7%	40.6%	20.6%	11.3%	6.7%
35-44	49	*	*	*	*	*	*	*
45-54	39	*	*	*	*	*	*	*
55-64	27	*	*	*	*	*	*	*
65+	15	*	*	*	*	*	*	*
RACE								
Caucasian	104	23.5%	14.4%	0%	37.9%	22.4%	0.9%	0.9%
African American	83	22.4%	4.6%	0.7%	25.3%	20.2%	24.4%	2.4%
Hispanic	10	*	*	*	*	*	*	*
Other	17	*	*	*	*	*	*	*
EDUCATION								
Less than High School	15	*	*	*	*	*	*	*
High School Graduate	33	*	*	*	*	*	*	*
Some College	40	*	*	*	*	*	*	*
College Graduate	126	16.2%	12.0%	3.2%	41.0%	19.4%	5.2%	3.0%
INCOME								
Less than $15,000	17	*	*	*	*	*	*	*
$15,000-$24,999	17	*	*	*	*	*	*	*
$25,000-$34,999	18	*	*	*	*	*	*	*
$35,000-$49,999	27	*	*	*	*	*	*	*
$50,000-$74,999	28	*	*	*	*	*	*	*
$75,000	90	19.0%	6.8%	1.9%	47.1%	13.5%	8.7%	3.0%

*Data not presented if the unweighted cell size was <50.
Small numbers prohibit the display of the data by Ward.

Table 67. Smoked 100 Cigarettes In One's Lifetime, By Demographics and Ward *"Have you smoked at least 100 cigarettes in your entire life?"*			
	N	Yes	No
TOTAL	3994	40.0%	60.0%
GENDER			
Male	1550	44.6%	55.4%
Female	2444	36.1%	63.9%
AGE			
18-24	196	30.0%	70.0%
25-34	667	32.2%	67.8%
35-44	758	35.6%	64.4%
45-54	742	49.1%	50.9%
55-64	709	46.9%	53.1%
65+	829	51.6%	48.4%
RACE			
Caucasian	1886	39.6%	60.4%
African American	1669	40.6%	59.4%
Hispanic	144	38.5%	61.5%
Other	203	38.3%	61.7%
EDUCATION			
Less than High School	264	63.8%	36.2%
High School Graduate	687	41.3%	58.7%
Some College	677	39.2%	60.8%
College Graduate	2343	36.0%	64.0%
INCOME			
Less than $15,000	358	55.7%	44.3%
$15,000-$24,999	368	43.3%	56.7%
$25,000-$34,999	316	35.5%	64.5%
$35,000-$49,999	414	41.2%	58.8%
$50,000-$74,999	480	39.3%	60.7%
$75,000+	1510	37.0%	63.0%
WARD			
Ward 1	251	34.9%	65.1%
Ward 2	296	46.6%	53.4%
Ward 3	578	37.5%	62.5%
Ward 4	460	40.4%	59.6%
Ward 5	355	41.7%	58.3%
Ward 6	379	36.0%	64.0%
Ward 7	295	43.0%	57.0%
Ward 8	259	47.1%	52.9%

Table 68. Current Smoking Status, By Demographics and Ward *"Do you now smoke cigarettes every day, some days, or not at all?"*				
	N	Every Day	Some Days	Not at All
TOTAL	1699	26.4%	18.3%	55.3%
GENDER				
Male	727	27.6%	20.3%	52.1%
Female	972	25.1%	16.2%	58.7%
AGE				
18-24	58	38.2%	39.7%	22.1%
25-34	201	29.7%	24.2%	46.0%
35-44	257	30.5%	19.6%	49.9%
45-54	364	32.8%	14.6%	52.6%
55-64	349	18.0%	13.1%	69.0%
65+	431	14.3%	9.0%	76.8%
RACE				
Caucasian	804	13.4%	15.9%	70.8%
African American	723	36.9%	18.5%	44.6%
Hispanic	55	9.9%	24.6%	65.5%
Other	78	26.7%	27.7%	45.6%
EDUCATION				
Less than High School	152	44.3%	17.5%	38.2%
High School Graduate	316	44.5%	19.2%	36.3%
Some College	303	29.4%	22.7%	48.0%
College Graduate	918	11.0%	16.5%	72.5%
INCOME				
Less than $15,000	203	41.7%	22.1%	36.2%
$15,000-$24,999	174	45.5%	15.7%	38.8%
$25,000-$34,999	131	29.3%	16.5%	54.1%
$35,000-$49,999	178	27.7%	24.7%	47.6%
$50,000-$74,999	188	23.3%	17.8%	58.9%
$75,000+	601	9.9%	15.5%	74.6%
WARD				
Ward 1	100	21.1%	12.8%	66.1%
Ward 2	130	18.1%	20.2%	61.7%
Ward 3	241	10.4%	16.1%	73.4%
Ward 4	192	19.5%	14.3%	66.1%
Ward 5	154	26.3%	20.0%	53.8%
Ward 6	148	22.0%	22.7%	55.4%
Ward 7	135	43.1%	13.7%	43.2%
Ward 8	128	49.4%	17.3%	33.3%

Healthy People 2010 Objectives

- ***Reduce the proportion of adults engaging in binge drinking of alcoholic beverages to 6%***

Alcohol use has immediate and long-term health effects for society. Excessive alcohol use (heavy and binge drinking) has been shown to cause liver disease, myocardial infarction, stroke, dementia, cancer, unintentional injuries, intimate partner violence and child maltreatment, risky sexual behaviors, miscarriage and stillbirth, and alcohol poisoning. [35]

Excessive alcohol use is the third leading lifestyle-related cause of death. In 2001, alcohol use was attributed to over 75,000 deaths. In 2003, over two million hospitalizations and over four million emergency room visits were attributed to alcohol-related conditions. [55]

Binge drinking is defined as when men drink five or more, and women drink four or more, alcoholic drinks within a two-hour time period. While often thought of as a behavior of college students, 70% of binge drinking episodes occurred with adults aged 25 years and older. Binge drinkers are also much more likely to report driving under the influence of alcohol than non-binge drinkers. [56]

District respondents were asked a variety of questions about their alcohol intake during the past 30 days. This included whether or not they had at least one drink of any alcoholic beverage, how many days per week or per month they drank, how many alcoholic drinks they drank in a day on average, how many times they binge drank, and finally, the highest number of alcoholic drinks they consumed on any occasion.

Heavy Drinking

Heavy drinking is defined as drinking two or more drinks per day for men and one or more drink per day for women. The prevalence of heavy drinking for District of Columbia adults is 5.3%, just above the percentage nationwide reporting similar behaviors (4.9%). [57]

- Men and women were equally reported to be considered a heavy drinker; 5% for each.
- As age increased, heavy drinking decreased; 8% of adults aged 18-24 were heavy drinkers, compared to 4% of adults aged 55 years and older.
- Caucasians reporting being heavy drinkers at higher rates when (10%) compared to African Americans (2%); adults of "other" races (3%); and Hispanics (7%).
- Adults in the lowest and highest educational subgroups reported the highest rates of heavy drinking; 7% of adults with less than a high school degree and 7% of college graduates were classified as heavy drinkers.
- Adults with household incomes of $35,000-$49,999 and $75,000 and over responded most often that they were heavy drinkers, at rates of 7% for each. Adults with a household income of $25,000-$34,999 were least often reported be a heavy drinker (2%).
- Adults residing in Ward 2 had the highest rate of heavy drinking than adults in all other Wards, at 13%. This is compared to only 1% of adults in Ward 7 who were classified as such.

Binge Drinking

Binge drinking is defined as consuming five or more drinks (for men) and four or more drinks (for women) on one occasion. Overall, 16% of District adults engaged in binge drinking in the past month. This is slightly higher than the national average per the BRFSS of 15%, and much higher than the percentage of District of Columbia adults who heavily drank (5%). [58] This rate is also higher than the Healthy People 2010 goal of 6%.

- Men reported almost twice as often as women to binge drink (20% versus 12%).
- Binge drinking increased as age decreased. Twenty-four percent of adults aged 18-24, and 29% of adults aged 25-34, reported binge drinking—compared to 10% or less of adults aged 45 years and older.
- Caucasians (25%) binge drank at a higher rate compared to adults of all other races, and African Americans had the lowest rate of doing so (9%).
- College graduates (20%) reported most often that they binge drank, compared to adults of all other educational subgroups.
- Adults with the highest household incomes reported most often that they binge drank, as 18% or more of adults with a household income of $35,000 or higher reported binge drinking, compared to 14% or less of adults with a household income below $35,000.
- Adults in Ward 2 were the largest percentage of to binge drinkers (23%), whereas adults in Ward 4 were the lowest percentage to do so (9%).

Additional Data Highlights

- Fifty-nine percent of adults had consumed at least one drink of any alcoholic beverage in the past 30 days. This is higher than the nationwide BRFSS rate of 55%. [59]
- Forty-two percent of District adults had not consumed any alcohol within the past 30 days.
- Nineteen percent of District adults consumed alcohol less than day per week, and another 19% consumed alcohol between one and two days per week.
- Adults who drank most often to consumed (on average) two to three drinks on the days they drank (48%), followed by 42% who drank only one drink. Only 11% of adults consumed four or more drinks (on average) on the days they drank.
- Seventy-three percent of adults who drank consumed fewer than five or more drinks (for men) and fewer than four or more drinks (for women) on any one occasion in the past 30 days.
- Adults who drank were asked the largest number of drinks they consumed on any occasion in the past 30 days. Just over two-thirds, 68%, consumed no more than three drinks at any occasion. Eighteen percent consumed between four and five drinks, and 14% consumed six or more drinks.

Table 69. Binge Drinking and Heavy Drinking, By Demographics and Ward

"Heavy Drinking is a created variable from responses to the following questions: "During the past 30 days, how many days per week per month did you have at least one drink of any alcoholic beverage?" and "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?" Binge Drinking results are from responses to: "Considering all types of alcoholic beverages, how many times during the past 30 days did you have 5 or more drinks on one occasion?"

	N	Heavy Drinking		N	Binge Drinking	
		Not Heavy Drinker	Heavy Drinker		Not Binge Drinker	Binge Drinker
TOTAL	3854	94.7%	5.3%	3854	84.2%	15.8%
GENDER						
Male	1483	94.6%	5.4%	1488	79.6%	20.4%
Female	2371	94.8%	5.2%	2366	88.1%	11.9%
AGE						
18-24	193	91.9%	8.1%	191	75.7%	24.3%
25-34	647	92.8%	7.2%	648	70.9%	29.1%
35-44	739	96.4%	3.6%	734	85.6%	14.4%
45-54	718	95.3%	4.7%	721	89.7%	10.3%
55-64	680	96.3%	3.7%	679	93.5%	6.5%
65+	797	96.2%	3.8%	801	96.1%	3.9%
RACE						
Caucasian	1842	90.4%	9.6%	1837	74.6%	25.4%
African American	1593	97.7%	2.3%	1598	90.9%	9.1%
Hispanic	142	92.9%	7.1%	142	82.7%	17.3%
Other	193	97.0%	3.0%	193	85.3%	14.7%
EDUCATION						
Less than High School	253	93.0%	7.0%	255	87.3%	12.7%
High School Graduate	658	97.1%	2.9%	661	88.1%	11.9%
Some College	650	96.0%	4.0%	649	88.1%	11.9%
College Graduate	2277	93.5%	6.5%	2273	80.5%	19.55
INCOME						
Less than $15,000	339	94.9%	5.1%	338	89.4%	10.6%
$15,000-$24,999	353	96.4%	3.6%	351	87.7%	12.3%
$25,000-$34,999	304	97.7%	2.3%	307	85.8%	14.2%
$35,000-$49,999	405	93.1%	6.9%	406	81.9%	18.1%
$50,000-$74,999	467	95.8%	4.2%	468	81.9%	18.1%
$75,000+	1485	93.1%	6.9%	1483	80.5%	19.5%
WARD						
Ward 1	248	94.8%	5.2%	250	81.1%	18.9%
Ward 2	267	87.1%	12.9%	267	77.1%	22.9%
Ward 3	566	91.4%	8.6%	564	82.3%	17.7%
Ward 4	454	96.7%	3.3%	453	90.8%	9.2%
Ward 5	350	97.4%	2.6%	347	86.9%	13.1%
Ward 6	372	96.6%	3.4%	373	85.1%	14.9%
Ward 7	287	98.9%	1.1%	288	87.0%	13.0%
Ward 8	254	95.9%	4.1%	256	84.9%	15.1%

Table 70. Consumption of Alcohol In The Past 30 Days, By Demographics and Ward

"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?"

	N	Yes	No
TOTAL	3968	59.3%	40.7%
GENDER			
Male	1536	67.9%	32.1%
Female	2432	51.8%	48.2%
AGE			
18-24	198	59.9%	40.1%
25-34	659	71.4%	28.6%
35-44	749	66.6%	33.4%
45-54	743	58.9%	41.1%
55-64	702	53.3%	46.7%
65+	830	38.2%	61.8%
RACE			
Caucasian	1879	82.5%	17.5%
African American	1655	43.2%	56.8%
Hispanic	146	63.3%	36.7%
Other	200	59.1%	40.9%
EDUCATION			
Less than High School	263	39.2%	60.8%
High School Graduate	686	38.9%	61.1%
Some College	672	49.2%	50.8%
College Graduate	2331	75.4%	24.6%
INCOME			
Less than $15,000	350	40.9%	59.1%
$15,000-$24,999	368	39.2%	60.8%
$25,000-$34,999	316	43.8%	56.2%
$35,000-$49,999	411	58.5%	41.5%
$50,000-$74,999	478	62.8%	37.2%
$75,000+	1508	80.0%	20.0%
WARD			
Ward 1	252	71.3%	28.7%
Ward 2	270	71.9%	28.1%
Ward 3	580	79.7%	20.3%
Ward 4	461	52.2%	47.8%
Ward 5	357	45.2%	54.8%
Ward 6	380	64.9%	35.1%
Ward 7	296	39.7%	60.3%
Ward 8	260	40.7%	59.3%

Table 71. Number of Days Alcohol was Consumed, By Demographics and Ward

"During the past 30 days, how many days per week or per month did you have at least one drink of any alcoholic beverage?"

	N	None In Past 30 Days	<1 Day Per Week	1-2 Days Per Week	3-4 Days Per Week	5-7 Days Per Week
TOTAL	3895	41.9%	18.8%	19.0%	10.4%	9.8%
GENDER						
Male	1508	33.0%	19.5%	20.7%	13.0%	13.8%
Female	2387	49.6%	18.1%	17.6%	8.2%	6.5%
AGE						
18-24	194	42.0%	21.0%	21.8%	8.7%	6.5%
25-34	654	29.0%	21.6%	26.4%	13.7%	9.3%
35-44	742	34.1%	21.7%	22.2%	12.7%	9.3%
45-54	730	42.1%	18.9%	17.4%	11.7%	9.8%
55-64	684	48.7%	15.7%	15.3%	7.1%	13.2%
65+	811	64.1%	11.4%	6.8%	6.2%	11.7%
RACE						
Caucasian	1854	18.1%	19.2%	26.9%	18.3%	17.5%
African American	1619	58.4%	18.9%	13.4%	4.4%	4.9%
Hispanic	143	37.7%	18.4%	21.2%	13.8%	8.9%
Other	195	43.3%	16.5%	23.3%	10.3%	6.7%
EDUCATION						
Less than High School	258	62.8%	13.6%	14.0%	2.5%	7.1%
High School Graduate	672	62.6%	15.3%	12.7%	4.6%	4.8%
Some College	658	52.7%	17.5%	16.2%	5.0%	8.5%
College Graduate	2291	25.5%	21.6%	23.8%	16.2%	13.0%
INCOME						
Less than $15,000	344	61.6%	12.6%	14.8%	6.4%	4.3%
$15,000-$24,999	357	62.9%	13.6%	16.1%	2.7%	4.7%
$25,000-$34,999	314	56.9%	16.9%	15.2%	6.2%	4.7%
$35,000-$49,999	409	41.9%	21.2%	18.2%	7.8%	10.9%
$50,000-$74,999	469	39.2%	20.8%	22.8%	10.2%	7.0%
$75,000+	1494	20.4%	23.5%	23.6%	17.1%	15.4%
WARD						
Ward 1	250	30.3%	20.2%	21.8%	14.8%	12.8%
Ward 2	267	28.3%	13.1%	23.2%	16.1%	19.3%
Ward 3	571	21.7%	19.0%	22.7%	17.9%	18.7%
Ward 4	456	48.3%	22.2%	15.0%	6.7%	7.9%
Ward 5	352	55.7%	17.9%	11.6%	10.3%	4.6%
Ward 6	375	36.1%	21.3%	24.8%	10.2%	7.6%
Ward 7	292	61.2%	12.9%	17.4%	3.5%	5.0%
Ward 8	258	60.0%	19.9%	10.1%	2.5%	7.4%

Table 72. Average Number of Alcoholic Drinks Consumed, By Demographics and Ward

"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?"

	N	1	2-3	4-5	6+
TOTAL	2333	41.6%	47.8%	6.8%	3.8%
GENDER					
Male	1048	32.4%	53.5%	8.5%	5.6%
Female	1285	51.9%	41.4%	4.8%	1.9%
AGE					
18-24	115	26.5%	51.7%	14.6%	7.2%
25-34	475	32.4%	54.4%	9.1%	4.1%
35-44	522	44.0%	47.7%	4.2%	4.1%
45-54	441	48.9%	44.3%	4.0%	2.9%
55-64	393	51.4%	44.8%	2.6%	1.1%
65+	354	60.5%	33.1%	3.8%	2.5%
RACE					
Caucasian	1477	40.0%	49.6%	7.6%	2.8%
African American	611	44.1%	45.9%	5.5%	4.5%
Hispanic	95	39.1%	42.9%	8.7%	9.3%
Other	106	37.2%	55.8%	3.7%	3.4%
EDUCATION					
Less than High School	67	24.4%	49.7%	14.5%	11.5%
High School Graduate	227	40.4%	47.0%	7.4%	5.3%
Some College	297	40.4%	49.5%	5.3%	4.8%
College Graduate	1738	43.5%	47.4%	6.3%	2.7%
INCOME					
Less than $15,000	110	28.4%	54.2%	10.6%	6.8%
$15,000-$24,999	123	32.5%	55.4%	7.9%	4.3%
$25,000-$34,999	131	46.0%	40.1%	12.2%	1.8%
$35,000-$49,999	230	41.5%	48.9%	4.8%	4.7%
$50,000-$74,999	293	40.1%	46.8%	8.4%	4.7%
$75,000+	1204	43.7%	48.4%	6.0%	2.0%
WARD					
Ward 1	176	38.9%	53.8%	4.6%	2.8%
Ward 2	198	36.4%	52.0%	2.2%	9.5%
Ward 3	451	48.5%	42.8%	6.6%	2.2%
Ward 4	247	50.9%	44.3%	2.6%	2.2%
Ward 5	157	39.9%	51.5%	5.3%	3.3%
Ward 6	241	44.2%	46.5%	6.3%	3.0%
Ward 7	97	40.7%	51.0%	4.5%	3.9%
Ward 8	86	43.6%	39.4%	9.9%	7.1%

Table 73. Consumption of 4, 5, or More Alcoholic Drinks, By Demographics and Ward

"Considering all types of alcoholic beverages, how many times during the past 30 days did you have (5 for men or 4 for women) or more drinks on one occasion?"

	N	0	1	2-3	4-5	6+
TOTAL	2341	72.7%	10.9%	7.9%	3.8%	4.8%
GENDER						
Male	1056	69.3%	11.2%	9.3%	3.5%	6.7%
Female	1285	76.4%	10.5%	6.3%	4.1%	2.6%
AGE						
18-24	113	58.0%	10.4%	12.6%	8.7%	10.3%
25-34	476	58.9%	18.2%	11.7%	4.2%	7.1%
35-44	518	77.9%	9.0%	7.7%	3.1%	2.3%
45-54	445	82.1%	8.1%	4.7%	2.9%	2.3%
55-64	397	87.6%	6.2%	2.8%	1.3%	2.0%
65+	359	88.2%	5.2%	2.5%	1.7%	2.4%
RACE						
Caucasian	1475	69.2%	12.7%	8.9%	4.9%	4.3%
African American	621	77.7%	7.8%	6.7%	1.8%	6.1%
Hispanic	95	70.7%	15.6%	7.9%	2.5%	3.3%
Other	105	73.6%	8.6%	9.0%	7.9%	0.9%
EDUCATION						
Less than High School	69	65.6%	9.7%	11.5%	3.8%	9.4%
High School Graduate	234	67.6%	10.0%	10.6%	5.1%	6.7%
Some College	297	74.6%	6.7%	6.9%	4.4%	7.4%
College Graduate	1737	73.8%	12.2%	7.3%	3.3%	3.3%
INCOME						
Less than $15,000	109	69.6%	7.3%	5.3%	3.5%	14.3%
$15,000-$24,999	123	67.5%	8.7%	13.2%	4.4%	6.3%
$25,000-$34,999	135	66.2%	12.1%	11.0%	5.2%	5.4%
$35,000-$49,999	232	68.7%	10.6%	5.6%	7.3%	7.8%
$50,000-$74,999	293	69.5%	11.1%	12.2%	3.1%	4.1%
$75,000+	1204	75.5%	11.9%	7.0%	3.5%	2.1%
WARD						
Ward 1	178	73.9%	17.0%	5.2%	2.4%	1.6%
Ward 2	197	68.3%	12.8%	8.8%	2.0%	8.2%
Ward 3	449	77.8%	11.0%	6.8%	2.3%	2.1%
Ward 4	246	82.3%	6.8%	4.5%	4.3%	2.1%
Ward 5	154	69.8%	13.2%	7.8%	2.5%	6.7%
Ward 6	242	76.7%	13.4%	7.6%	1.0%	1.3%
Ward 7	98	64.5%	11.9%	11.2%	3.9%	8.5%
Ward 8	89	62.0%	8.9%	17.1%	5.4%	6.6%

Table 74. Largest Number of Alcoholic Drinks Consumed, By Demographics and Ward *"During the past 30 days, what is the largest number of drinks you had on any occasion?"*					
	N	1	2-3	4-5	6+
TOTAL	2266	20.6%	47.3%	18.1%	13.9%
GENDER					
Male	1019	13.6%	45.8%	20.3%	20.3%
Female	1247	28.5%	49.0%	15.7%	6.8%
AGE					
18-24	107	14.9%	34.2%	21.4%	29.5%
25-34	463	14.4%	39.6%	25.5%	20.5%
35-44	511	21.2%	51.7%	14.9%	12.2%
45-54	434	25.2%	54.7%	13.1%	6.9%
55-64	385	23.2%	60.0%	14.2%	2.6%
65+	337	32.8%	53.0%	12.2%	1.9%
RACE					
Caucasian	1443	15.6%	47.5%	20.3%	16.6%
African American	587	25.8%	48.8%	15.2%	10.2%
Hispanic	92	24.7%	40.3%	2.3%	13.7%
Other	102	20.6%	48.0%	15.9%	15.5%
EDUCATION					
Less than High School	67	17.2%	30.5%	31.1%	21.1%
High School Graduate	212	25.8%	41.7%	19.1%	13.4%
Some College	284	20.7%	51.4%	11.5%	16.4%
College Graduate	1700	19.9%	48.8%	18.5%	12.8%
INCOME					
Less than $15,000	97	19.7%	38.0%	21.2%	21.1%
$15,000-$24,999	117	11.2%	58.3%	11.6%	18.9%
$25,000-$34,999	130	27.8%	44.1%	13.8%	14.3%
$35,000-$49,999	222	20.7%	46.1%	17.7%	15.6%
$50,000-$74,999	286	20.0%	41.7%	23.1%	15.1%
$75,000+	1186	19.2%	50.7%	17.9%	12.2%
WARD					
Ward 1	172	14.7%	52.8%	18.2%	14.3%
Ward 2	196	13.1%	46.3%	25.9%	14.8%
Ward 3	440	22.0%	52.6%	15.7%	9.6%
Ward 4	243	26.3%	53.0%	11.2%	9.6%
Ward 5	151	14.2%	53.2%	17.2%	15.5%
Ward 6	238	20.6%	46.8%	22.6%	9.9%
Ward 7	92	21.1%	41.0%	21.2%	16.6%
Ward 8	83	29.0%	34.7%	18.4%	17.9%

Driving while impaired not only puts the driver at risk of injuring himself/herself, but also of injuring others. In 2006, the National Highway Transportation Safety Administration (NHTSA) found that every 31 minutes someone is killed from an alcohol-related motor vehicle crash, and every two minutes someone is non-fatally injured from an alcohol-related motor vehicle crash. [60]

The rate of drinking and driving is much higher than those arrested for such. Quinlan et al (2005) found that while 159 million adults self-reported that they drove while impaired by alcohol, only 1.4 million adults were arrested for driving while impaired by alcohol or narcotics (Department of Justice 2005). [61, 62]

Respondents who drank were asked how many times in the past 30 days they drove when they had too much to drink. Accounting for all respondents (including those who previously stated they did not have any alcoholic drinks in the past 30 days), a majority, 97%, stated that this never happened, and 2% stated this happened one time.

- Men were more often than women reported having driven while intoxicated—5% compared to only 2% of women.

- As age decreased, so did the likelihood that an adult drank and drove. Five percent of adults aged 18-24 had driven when they drank too much, compared to less than 1% of adults aged 65 and older.

- Hispanics and Caucasians more often reported having driven while drunk compared to African Americans and adults of "other" races. Five percent of Hispanics and 4% of Caucasians reported doing so, compared to 2% or less of adults of all other races.

- Adults with household incomes of $75,000 or more reported higher rates of drinking and driving, as 4% stated such. Adults with the highest levels of education were also a higher percentage of drinkers and drivers; 4% of adults with a college degree had driven when they had too much to drink.

- Adults in Wards 1 and 3 have driven when they had too much to drink—6% and 7%, respectively.

Table 75. Drinking and Driving, By Demographics and Ward

"During the past 30 days, how many times have you driven when you've had perhaps too much to drink?"
(non-drinkers, and adults who never drove or rode in a car are included as "none")

	N	None	1 time	2-3 time	4-5 times	6-10 times	11+ times
TOTAL	3910	97.0%	1.9%	0.8%	0%	0.1%	0.1%
GENDER							
Male	1505	95.2%	3.0%	1.4%	0.1%	0.1%	0.3%
Female	2405	98.5%	1.1%	0.3%	0%	0.1%	0%
AGE							
18-24	195	94.6%	1.7%	2.4%	0%	0.2%	1.0%
25-34	651	96.4%	2.7%	0.9%	0%	0%	0%
35-44	742	96.6%	2.6%	0.8%	0%	0%	0%
45-54	730	96.9%	2.5%	0.1%	0.2%	0.4%	0%
55-64	691	98.1%	1.3%	0.6%	0%	0%	0%
65+	812	99.4%	0.4%	0.1%	0.1%	0.1%	0%
RACE							
Caucasian	1859	95.6%	3.2%	1.1%	0.1%	0.1%	0%
African American	1620	97.9%	0.8%	0.9%	0%	0.1%	0.3%
Hispanic	145	95.2%	4.8%	0%	0%	0%	0%
Other	196	98.6%	1.4%	0%	0%	0%	0%
EDUCATION							
Less than High School	255	97.5%	1.8%	0.7%	0%	0%	0%
High School Graduate	666	97.8%	1.0%	0.7%	0.2%	0%	0.3%
Some College	664	97.1%	1.3%	1.0%	0%	0.2%	0.3%
College Graduate	2308	96.5%	2.6%	0.8%	0%	0.1%	0%
INCOME							
Less than $15,000	338	99.3%	0%	0.7%	0%	0%	0%
$15,000-$24,999	364	96.7%	0.6%	1.7%	0%	0.3%	0.6%
$25,000-$34,999	310	98.6%	0.7%	0%	0%	0%	0.7%
$35,000-$49,999	408	96.3%	1.6%	2.0%	0%	0%	0%
$50,000-$74,999	472	97.7%	1.3%	0.4%	0.4%	0.2%	0%
$75,000+	1492	95.6%	3.4%	0%	0%	0.1%	0%
WARD							
Ward 1	253	93.6%	5.2%	1.2%	0%	0%	0%
Ward 2	269	96.4%	3.0%	0.3%	0%	0.2%	0%
Ward 3	582	93.5%	5.6%	0.8%	0.1%	0%	0%
Ward 4	460	97.2%	1.4%	1.1%	0%	0.3%	0%
Ward 5	355	97.8%	1.9%	0%	0%	0.3%	0%
Ward 6	382	98.3%	0.8%	0.9%	0%	0%	0%
Ward 7	295	98.1%	1.2%	0.7%	0%	0%	0%
Ward 8	262	98.2%	0.7%	0.2%	0%	0%	0.8%

Healthy People 2010 Objectives

- ***Increase the use of safety belts to 92%***

Seat belt use has steadily increased since 2000, from 71%-80% (as reported in 2004). Seat belts save lives and money—an 80% use of seat belts translates into 15,200 lives saved and $50 billion saved from related traffic-related crashes, injuries, and deaths. [63] However, 80% is still lower than the Healthy People 2010 objective of 92%.

Respondents were asked how often they wore seat-belts when they drove, or rode in a car. Overall, 86% of adults "always" did so, and 8% "nearly always" did so. This is lower than the Healthy People 2010 goal of 92%.

- Women used seat-belts more than men; 88% of women "always" did so compared to 83% of men.
- Seatbelt use increased slightly as age increased; 82% of 18-24 year-olds "always" wore a seatbelt, compared to over 87% of adults aged 35 and over.
- African Americans reported "always" using seat-belts the fewest compared to adults of all other races (83%, compared to 87% or higher for all other adults).
- Seatbelt use increased as education and income increased, with 81% or less of adults in the lowest education and income groups reporting that they "always" used seat-belts, compared to over 88% of adults in the highest education and income groups.
- Adults in Ward 2 had the lowest rate of to "always" using a seatbelt, at 83%.

Table 76. Seatbelt Use, By Demographics and Ward *"How often do you use seat belts when you drive or ride in a car?"*							
	N	Never Ride	Always	Nearly Always	Sometimes	Seldom	Never
TOTAL	3896	0.9%	85.8%	7.9%	3.2%	0.6%	1.7%
GENDER							
Male	1502	0.8%	83.3%	9.5%	3.3%	0.5%	2.6%
Female	2394	1.0%	88.0%	6.5%	3.1%	0.6%	0.9%
AGE							
18-24	193	0%	81.8%	6.7%	7.7%	0%	3.8%
25-34	651	0.7%	83.6%	11.6%	2.9%	0.3%	0.8%
35-44	745	0.9%	87.2%	8.4%	2.7%	0.3%	0.5%
45-54	725	1.0%	87.5%	6.9%	2.3%	0.2%	2.1%
55-64	683	0.9%	87.6%	6.1%	2.4%	0.8%	2.0%
65+	809	1.8%	87.4%	4.9%	2.2%	1.9%	1.9%
RACE							
Caucasian	1863	0.1%	88.5%	8.6%	1.5%	0.5%	0.8%
African American	1608	1.4%	83.2%	7.8%	4.7%	0.7%	2.3%
Hispanic	144	0.5%	86.8%	8.1%	2.8%	0%	1.8%
Other	196	1.8%	87.9%	6.9%	2.1%	0.4%	0.9%
EDUCATION							
Less than High School	253	2.4%	80.7%	4.6%	9.3%	0.6%	2.6%
High School Graduate	659	1.4%	81.8%	8.6%	4.6%	0.8%	2.8%
Some College	663	1.3%	86.4%	6.0%	3.4%	0.6%	2.3%
College Graduate	2304	0.2%	88.1%	8.8%	1.7%	0.4%	0.8%
INCOME							
Less than $15,000	340	2.3%	80.3%	7.4%	4.9%	2.0%	3.1%
$15,000-$24,999	358	1.9%	82.6%	8.2%	4.3%	0.3%	2.7%
$25,000-$34,999	309	0.7%	83.0%	9.3%	4.7%	0.1%	2.2%
$35,000-$49,999	409	1.4%	85.9%	5.8%	2.7%	0.6%	3.6%
$50,000-$74,999	469	0%	90.6%	5.6%	2.1%	0.8%	0.9%
$75,000+	1492	0%	88.4%	9.1%	2.1%	0.1%	0.3%
WARD							
Ward 1	253	1.7%	91.3%	4.8%	1.5%	0.3%	0.4%
Ward 2	273	1.1%	83.4%	10.4%	1.7%	0%	3.4%
Ward 3	582	0.1%	89.1%	8.0%	1.9%	0.6%	0.3%
Ward 4	462	0.4%	86.2%	8.2%	2.6%	1.2%	1.4%
Ward 5	357	0.8%	85.2%	8.3%	2.3%	0.7%	2.7%
Ward 6	382	0%	89.4%	7.0%	2.9%	0.1%	0.6%
Ward 7	296	0.3%	84.1%	8.6%	5.8%	0.3%	0.9%
Ward 8	262	0%	84.2%	10.0%	5.1%	0.2%	0.6%

Millions of people in the U.S. are victims of sexual violence each year, and once assaulted, they are at an increased risk for being assaulted again. There are numerous short and long-term effects from sexual assault. Some of the short-term effects include: pregnancy, post traumatic stress disorder, withdrawal, and anxiety. Some of the long term effects include: depression, attempted or successful suicide, chronic pain, sexually transmitted disease, engaging in high-risk sexual behavior, using or abusing harmful substances, and strained relationships with family and friends. [64]

Respondents were asked if they had ever been sexually assaulted. Eight percent stated they had been.

- Women victims of a sexual assault at a much higher rate than men; 12% versus 2%.
- Adults aged 35-54 had the highest rate among the age groups of being sexually assaulted, at 10%. Less than 5% of adults aged 65 years and older were assaulted.
- African Americans were most often sexually assaulted (9%), and Caucasians were least often to report having been assaulted, (6%).
- College graduates had the lowest rate of having been sexually assaulted (6%) compared to adults in all other educational subgroups (9% or greater).
- Sexual assault increased as income decreased. Fifteen percent of adults with a household income below $15,000 (the largest percent-age for any demographic subgroup) had been sexually assaulted. This is compared to 6% of adults with a household income of $50,000 or more.
- Adults residing in Wards 1, 7, and 8 experienced the most sexual assaults—at 9% or more.

Table 77. Sexual Assault, By Demographics and Ward *"Have you ever been sexually assaulted?"*			
	N	Yes	No
TOTAL	3729	7.6%	92.4%
GENDER			
Male	1445	2.4%	97.6%
Female	2284	11.9%	88.1%
AGE			
18-24	187	8.6%	91.4%
25-34	628	6.9%	93.1%
35-44	718	9.5%	90.5%
45-54	687	9.5%	90.5%
55-64	654	7.5%	92.5%
65+	772	4.1%	95.9%
RACE			
Caucasian	1812	6.4%	93.6%
African American	1510	8.7%	91.3%
Hispanic	137	7.7%	92.3%
Other	192	7.3%	92.7%
EDUCATION			
Less than High School	233	8.7%	91.3%
High School Graduate	617	9.3%	90.7%
Some College	637	9.5%	90.5%
College Graduate	2228	6.0%	94.0%
INCOME			
Less than $15,000	318	14.9%	85.1%
$15,000-$24,999	333	11.6%	88.4%
$25,000-$34,999	296	8.8%	91.2%
$35,000-$49,999	392	6.6%	93.4%
$50,000-$74,999	449	5.8%	94.2%
$75,000+	1457	5.5%	94.5%
WARD			
Ward 1	250	9.0%	91.0%
Ward 2	271	6.8%	93.2%
Ward 3	579	6.0%	94.0%
Ward 4	462	6.7%	93.3%
Ward 5	356	7.1%	92.9%
Ward 6	378	6.7%	93.3%
Ward 7	295	9.1%	90.9%
Ward 8	261	10.6%	89.4%

Collecting information on Veteran status on the BRFSS began in 2002. It is important to understand the health status of veterans, as well as their specific behavioral risk factors. The information can also be used to develop programs that prevent and control health problems for this population. [65] Respondents were asked if they had ever served on active duty in the U.S. Armed Forces, either in the regular military, National Guard, or a military reserve unit. Ten percent of District of Columbia adults had ever served on active duty. [66]

Demographic differences are as follows:

- Men had a higher percentage than women to be a veteran—19% versus 2%.
- Served in the U.S. military increased as age increased. Only 2% of adults aged 18-24 were a veteran, compared to over one-fourth (26%) of adults aged 65 years and older.
- African Americans predominantly served in the military—at 12%. Hispanics were had the lowest percentage to do so (6%).
- Adults with some college education was the group with the highest percentage have served in the military—at 14%. High school graduates and college graduates had the lowest percentage to do so—8% and 9%, respectively.
- Adults residing in Ward 6 were the largest group to report having served in the military (15%). Ward 1 and 2 adults reported the fewest to do so (8% in each).

Table 78. Veteran Status, By Demographics and Ward

"Have you ever served on active duty in the United States Armed Forces, either in the regular military or a National Guard or military reserve unit?"

	N	Yes	No
TOTAL	3986	9.9%	90.1%
GENDER			
Male	1541	19.2%	80.8%
Female	2445	1.9%	98.1%
AGE			
18-24	198	2.3%	97.7%
25-34	664	3.8%	96.2%
35-44	752	7.3%	92.7%
45-54	745	8.6%	91.4%
55-64	703	15.9%	84.1%
65+	833	26.2%	73.8%
RACE			
Caucasian	1885	8.6%	91.4%
African American	1661	11.5%	88.5%
Hispanic	146	6.2%	93.8%
Other	201	9.2%	90.8%
EDUCATION			
Less than High School	263	10.2%	89.8%
High School Graduate	691	8.4%	91.6%
Some College	673	14.2%	85.8%
College Graduate	2341	9.1%	90.9%
INCOME			
Less than $15,000	353	9.5%	90.5%
$15,000-$24,999	370	10.6%	89.4%
$25,000-$34,999	317	9.2%	90.8%
$35,000-$49,999	411	10.9%	89.1%
$50,000-$74,999	478	13.6%	86.4%
$75,000+	1514	9.0%	91.0%
WARD			
Ward 1	252	7.5%	92.5%
Ward 2	273	8.2%	91.8%
Ward 3	582	10.1%	89.9%
Ward 4	462	11.1%	88.9%
Ward 5	356	11.5%	88.5%
Ward 6	382	15.3%	84.7%
Ward 7	296	10.7%	89.3%
Ward 8	262	11.2%	88.8%

In 2003, it was estimated that over one million persons in the U.S. had HIV or AIDS, and the CDC estimates that each year, 40,000 persons become infected with HIV. HIV testing is important as those who do not know they are infected can infect others unknowingly, and are also unable to take advantage of the multitude of drugs available to keep them healthy and extend their lives. While between 16 and 22 million persons are tested for HIV each year in the U.S., in 2003, it was estimated that about 300,000 persons did not know they were infected with the virus. [67]

Many clinics are now offering a rapid HIV test, which can provide an individual with their HIV status within five to 30 minutes of taking the test. With the standard screening test, if the individual does not follow-up themselves to learn the results, it may take weeks for an outreach worker to locate the person and tell them of their HIV status—which in itself can take up to several weeks. [68]

Respondents under the age of 65 were asked whether they had ever been tested for HIV, and if so, how long it had been since they were last tested, and if the test was done via a rapid HIV test.

Approximately two-thirds (64%) of District adults indicated that they had been tested.

- Men (63%) and women (64%) were equally likely to have been tested.
- Adults aged 25-44 were the age group with the highest percentage tested for HIV, at rates over 70%. Adults aged 55-64 and 18-24 had the lowest percentage to have been tested—45% and 55%, respectively.
- African Americans had the highest testing rates, at 71%, followed by Hispanics (66%), and then Caucasians (56%) and adults of "other" races (55%).
- College graduates were the educational sub-group to have the lowest rates for HIV, at 61%.
- Adults with a household income of $25,000-$34,999 most often reported having been tested (74%), and adults with a household income of $75,000 or more least often reported to have done so (60%).
- Ward 8 adults most often reported, than all other adults, to have had an HIV test, 78%. Adults in Wards 2 and 3 reported least often to have been tested—59% and 51%, respectively.

Additional Data Highlights

- Over half, 68%, of adults who had been tested received their last HIV test between the years of 2004-2006, and 18% had done so between the years 2000-2003.
- Adults who had an HIV test were most likely to receive the test at a private doctor or HMO (52%) or a clinic (20%). Very few, 0.4%, did so in their home or at a counseling and testing site (4%).
- For adults who had been tested, over one-fourth, 26%, had a rapid test.

Table 79. Prevalence of HIV Testing, By Demographics and Ward

"Have you ever been tested for HIV?" Do not count test you may have had as part of a blood donation. Include tests using fluid from your mouth.

	N	Yes	No
TOTAL	2977	63.7%	36.3%
GENDER			
Male	1161	63.2%	36.8%
Female	1816	64.2%	35.8%
AGE			
18-24	192	54.8%	45.2%
25-34	642	70.5%	29.5%
35-44	723	76.8%	23.2%
45-54	691	61.5%	38.5%
55-64	652	45.2%	54.8%
RACE			
Caucasian	1456	56.1%	43.9%
African American	1166	71.2%	28.8%
Hispanic	131	66.3%	33.7%
Other	165	55.0%	45.0%
EDUCATION			
Less than High School	145	68.3%	31.7%
High School Graduate	479	65.2%	34.8%
Some College	485	68.5%	31.5%
College Graduate	1858	61.0%	39.0%
INCOME			
Less than $15,000	226	68.4%	31.6%
$15,000-$24,999	245	69.1%	30.9%
$25,000-$34,999	228	74.0%	26.0%
$35,000-$49,999	315	68.2%	31.8%
$50,000-$74,999	383	63.6%	36.4%
$75,000+	1261	60.2%	39.8%
WARD			
Ward 1	213	60.2%	39.8%
Ward 2	202	58.5%	41.5%
Ward 3	414	51.2%	48.8%
Ward 4	325	62.9%	37.1%
Ward 5	256	66.0%	34.0%
Ward 6	313	63.6%	36.4%
Ward 7	215	67.8%	32.2%
Ward 8	221	77.5%	22.5%

Table 80. Time Since Last HIV Test, By Demographics and Ward *"Not including blood donations, in what month and year was your last HIV test?"*				
	N	Before 2000	2000-2003	2004-2006
TOTAL	1678	14.3%	17.6%	68.1%
GENDER				
Male	680	14.3%	17.2%	68.4%
Female	988	14.2%	17.9%	67.8%
AGE				
18-24	106	0%	15.1%	84.9%
25-34	418	8.3%	18.0%	73.7%
35-44	518	20.1%	18.1%	61.8%
45-54	384	23.6%	17.9%	58.5%
55-64	229	25.4%	19.4%	55.2%
RACE				
Caucasian	759	25.0%	25.0%	50.0%
African American	729	7.6%	13.0%	79.4%
Hispanic	84	16.4%	23.6%	60.1%
Other	82	16.0%	13.0%	71.1%
EDUCATION				
Less than High School	89	5.2%	4.5%	90.3%
High School Graduate	284	5.6%	10.7%	83.6%
Some College	290	9.7%	15.3%	74.9%
College Graduate	1012	21.0%	23.0%	56.0%
INCOME				
Less than $15,000	146	2.4%	8.5%	89.1%
$15,000-$24,999	156	11.1%	11.4%	77.5%
$25,000-$34,999	149	5.9%	12.8%	81.3%
$35,000-$49,999	188	9.1%	17.6%	73.3%
$50,000-$74,999	215	14.9%	18.8%	66.3%
$75,000+	681	25.0%	23.0%	52.0%
WARD				
Ward 1	119	12.2%	15.0%	72.7%
Ward 2	113	19.3%	23.5%	57.2%
Ward 3	199	35.8%	24.3%	39.9%
Ward 4	170	19.0%	21.1%	59.9%
Ward 5	151	10.8%	19.7%	69.5%
Ward 6	186	14.4%	16.2%	69.3%
Ward 7	134	8.5%	7.5%	83.9%
Ward 8	145	7.3%	9.3%	83.4%

Table 81. Place of Last HIV Test, By Demographics and Ward

"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?"

	N	Private doctor or HMO	Counseling and testing site	Hospital	Clinic	Home	Somewhere else
TOTAL	1819	52.2%	4.3%	15.1%	19.6%	0.4%	8.4%
GENDER							
Male	735	45.9%	2.7%	19.2%	22.2%	0.4%	9.7%
Female	1084	57.7%	5.8%	11.5%	17.3%	0.4%	7.3%
AGE							
18-24	109	33.8%	12.1%	19.4%	25.4%	0.4%	9.0%
25-34	434	57.0%	1.3%	13.5%	20.3%	0.6%	7.3%
35-44	549	57.0%	3.3%	12.0%	16.8%	0.2%	10.8%
45-54	417	50.6%	5.4%	18.0%	18.6%	0.7%	6.7%
55-64	284	49.4%	4.4%	19.4%	18.4%	0.2%	8.2%
RACE							
Caucasian	823	56.9%	4.6%	11.9%	16.3%	0.2%	10.0%
African American	791	50.1%	3.6%	16.7%	22.0%	0.5%	7.2%
Hispanic	90	42.7%	11.0%	15.0%	24.8%	0.7%	5.9%
Other	88	50.9%	1.5%	18.4%	15.1%	0.4%	13.7%
EDUCATION							
Less than High School	96	24.6%	2.7%	20.6%	44.5%	0%	7.6%
High School Graduate	309	49.9%	4.3%	18.3%	19.0%	1.0%	7.8%
Some College	305	49.4%	6.6%	14.9%	20.9%	0.7%	7.5%
College Graduate	1106	57.8%	3.6%	13.0%	16.2%	0.1%	9.1%
INCOME							
Less than $15,000	156	35.2%	2.3%	21.0%	36.7%	1.0%	3.8%
$15,000-$24,999	169	37.3%	3.6%	24.5%	25.6%	2.0%	7.1%
$25,000-$34,999	158	49.0%	3.8%	21.5%	21.5%	0%	4.2%
$35,000-$49,999	200	49.2%	2.3%	14.5%	22.5%	0%	11.6%
$50,000-$74,999	239	57.9%	2.8%	16.2%	11.4%	0.8%	11.0%
$75,000+	732	64.4%	3.8%	9.0%	12.9%	0%	9.9%
WARD							
Ward 1	133	61.1%	3.6%	12.2%	20.8%	0%	2.4%
Ward 2	127	55.4%	3.0%	9.3%	20.5%	0%	11.8%
Ward 3	217	56.7%	5.0%	7.1%	16.4%	0%	14.8%
Ward 4	192	52.6%	4.9%	13.3%	19.3%	0.7%	9.2%
Ward 5	164	58.3%	2.2%	11.8%	18.9%	1.6%	7.2%
Ward 6	196	57.5%	5.3%	11.4%	13.3%	0%	12.4%
Ward 7	144	50.2%	3.7%	16.8%	22.4%	0%	6.8%
Ward 8	158	44.0%	2.4%	15.3%	27.7%	0%	10.6%

Table 82. Rapid HIV Test, By Demographics and Ward *"Was it a rapid test where you could get your results within a couple of hours?"*			
	N	Yes	No
Total	761	25.8%	74.2%
GENDER			
Male	298	28.7%	71.3%
Female	463	23.5%	76.5%
AGE			
18-24	72	37.3%	62.7%
25-34	219	22.1%	77.9%
35-44	219	20.1%	79.9%
45-54	148	30.6%	69.4%
55-64	91	27.3%	72.7%
RACE			
Caucasian	232	20.4%	79.6%
African American	442	28.2%	71.8%
Hispanic	36	*	*
Other	39	*	*
EDUCATION			
Less than High School	66	43.1%	56.9%
High School Graduate	178	28.4%	71.6%
Some College	153	23.5%	76.5%
College Graduate	363	21.1%	78.9%
INCOME			
Less than $15,000	101	31.5%	68.5%
$15,000-$24,999	92	37.4%	62.6%
$25,000-$34,999	89	27.7%	72.3%
$35,000-$49,999	97	29.7%	70.3%
$50,000-$74,999	91	13.9%	86.1%
$75,000+	221	14.7%	85.3%
WARD			
Ward 1	56	29.8%	70.2%
Ward 2	46	*	*
Ward 3	44	*	*
Ward 4	72	21.8%	78.2%
Ward 5	74	19.9%	80.1%
Ward 6	89	19.4%	80.6%
Ward 7	77	29.2%	70.8%
Ward 8	94	30.5%	69.5%

*Data not presented if the unweighted cell size was <50.

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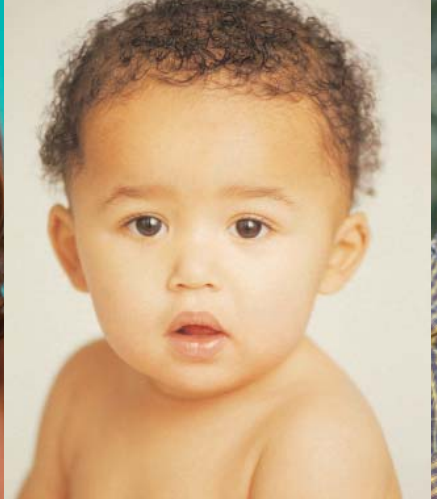


NOTICE OF NON-DISCRIMINATION

In accordance with the DC Human Rights Acts of 1977 as amended D.C. Code section 21401.01 et seq. ("the Act") the District of Columbia does not discriminate on the basis of race, color, religion, national origin, sex, age, marital status, personal appearance, sexual orientation, familial, status, family responsibilities, matriculation, political affiliation, disability, source of income, or place of residence or business. Discrimination in violation of the Act will not be tolerated. Violators will be subject to disciplinary actions.

Government of the District of Columbia
Adrian M. Fenty, Mayor

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