

2011 Minority Health Assessment Report

The Portland Public Health Division's Minority Health Program administered a Minority Health Assessment to 541 members of the racial, ethnic, and language minority communities between August 1, 2011, and December 31, 2011. In addition, American-born individuals were included in this assessment to serve as a comparison group.

A convenience sample was used for this survey, which means that whoever was available and eligible to take the survey did. As a result, the distribution of respondents likely differs from the true distribution of the total population, especially in terms of ethnic groups. However, United States Census Bureau does not have recent data that enumerate the populations being surveyed, most notably that which reflects the recent influx of refugees. Therefore, we cannot adjust for ethnicity, but have stratified results by ethnicity when possible.

Section 1. Demographics

96% of respondents listed their zip code of residence, and these were grouped by county, with the exception of Portland residents, who were placed in their own group due to large numbers (Table 1). Again, because this is a convenience sample, we do not know if this distribution accurately reflects the true geographic distribution of these communities.

Table 1. Place of Residence

Residence	Count	Percent
City of Portland	474	88%
Cumberland County (excluding Portland)	40	7%
York County	7	1%
No response	20	4%

99% of respondents had an ethnic group listed (Table 2). The most frequently cited ethnicities were Somali, Sudanese, and Latino, with each accounting for 10% or more of the total sample. American-born individuals (American-born category includes but not limited to the following: Those born in the United States by immigrants and refugees, Caucasians, African Americans, Native Americans, and other self-identified individuals) comprised 10% of the total and were included to serve as a comparison group.

Table 2. Ethnicity

Ethnic Group	Count	Percent
Somali	102	19%
Sudanese	92	17%
Latino	76	14%
American-born	53	10%
Burundi	46	9%
Congolese	39	7%
Rwandese	36	7%
Bosnian	30	6%
Croatian	13	2%
No response	4	1%
Other	50	9%

Additional analyses were conducted among the nine most common ethnic groups in the survey (shown in Table 3). Table 3 displays data related to participants' age and acculturation levels. The median age among the various groups ranges from 32 years for Somalis to 39 years for Croatians.

Congolese (Democratic Republic of Congo -DRC) and Rwandese have lived in the United States for the least number of years at 5.6 and 3.5 years, respectively. They also report the highest English literacy rates, with 29% of Congolese and 28% of Rwandese able to read and write in English.

Table 3. Age and Acculturation Indicators

Ethnic Group	Median Age	Average number of years living in the United States	Average percent of life in the United States	Percent unable to read and write in English
Somali	32	8.3	26%	54%
Sudanese	32	8.5	28%	53%
Burundian	35	2.4	7%	43%
Overall	36	11.9	32%	42%
American-born	36	42.9	100%	0%
Congolese (DRC)	38	5.6	15%	29%
Rwandese	37	3.5	9%	28%
Latino	38	13.9	35%	53%
Bosnian	39	9.4	23%	48%
Croatian	39	9.7	24%	46%

With the exception of Somalia, the four African ethnic groups (Sudanese, Burundian, Rwandese, and Congolese) had the highest proportion of college graduates of all surveyed minority populations.

Table 4. Highest Level of Education Attained

Ethnic Group	n	Less than high school	High school diploma or GED	Some college	College degree or higher
American-born	53	2%	13%	13%	72%
Sudanese	82	17%	22%	24%	37%
Burundian	46	15%	26%	26%	33%
Rwandese	36	22%	28%	25%	25%
Overall	529	26%	29%	21%	24%
Congolese	38	42%	18%	21%	18%
Latino	76	39%	37%	12%	12%
Bosnian	30	10%	47%	33%	10%
Croatian	13	15%	46%	31%	8%
Somali	102	38%	38%	24%	0%

Congolese and Rwandese respondents, despite their high English fluency and high college attendance rates, have the largest average household sizes and some of the lowest annual household incomes, with over 80% earning less than \$20,000 (Table 5). Given this information it would be interesting to look into how their academic background and English fluency is being utilized in their current employment situation. Occupation type was not asked in this survey, but should be looked at in future assessments.

Table 5. Household Size and Income

Ethnic Group	n	Average household size	Less than \$10,000	\$10,000 to \$20,000	\$20,000 to \$29,999	\$30,000 to \$49,999	Over \$50,000
Congolese	37	3.9	59%	22%	5%	14%	0%
Rwandese	32	3.5	72%	22%	6%	0%	0%
Latino	74	2.9	22%	36%	12%	11%	19%
Overall	513	2.8	35%	23%	17%	15%	11%
Burundian	44	2.6	84%	11%	5%	0%	2%
American-born	52	2.5	19%	6%	12%	23%	40%
Somali	96	2.5	29%	36%	29%	8%	0%
Bosnian	29	2.1	14%	10%	10%	41%	24%
Sudanese	85	2.0	31%	24%	31%	14%	1%
Croatian	12	1.8	0%	8%	25%	50%	17%

Section 2. Health

Lack of health insurance is an issue for 19% of respondents (Table 7). With the exception of American-born individuals, Bosnians and Croatians, over 57% of respondents in the remaining ethnic groups have government provided health insurance.

Table 6. Health Insurance Status (multiple answers possible)

Ethnic Group	n	Uninsured	Private insurance	Medicaid/MaineCare	Medicare
Bosnian	27	41%	70%	26%	15%
Croatian	13	38%	46%	15%	15%
Latino	62	32%	18%	39%	19%
Burundian	42	31%	10%	67%	21%
Sudanese	74	23%	31%	35%	27%
Overall	488	19%	30%	39%	26%
American-born	52	17%	75%	6%	8%
Rwandese	36	17%	22%	39%	28%
Congolese	36	6%	22%	50%	42%
Somali	98	3%	10%	51%	38%

Respondents were asked to rate the health of their community and their own health on a Likert four-point scale, where 1 equals “Very unhealthy” and 4 equals “Very healthy.” Most ethnic groups, as well as the overall sample, rated their personal health higher than that of their community. Of this group, respondents rated their personal health with a 7% higher score than that of their community, with the Sudanese having the greatest difference at 24% (Table 7).

Conversely, Somalis, American-born individuals, and Burundians rated their community health higher than that of their personal health. Of this group respondents rated their personal health with a -3% lower than that of their community, with the Burundians having the greatest difference at -5%.

Table 7. Perceptions of Community and Personal Health

Ethnic Group	Average Community Health Rating	Average Personal Health Rating	Difference Between Personal and Community Health Ratings
American-born	3.10	3.06	-1%
Rwandan	3.03	3.06	1%
Latino	2.99	2.99	0%
Burundian	2.91	2.78	-5%
Overall	2.88	2.99	4%
Congolese	2.85	2.92	3%
Croatian	2.85	3.00	5%
Bosnian	2.83	2.90	2%
Somali	2.76	2.70	-2%
Sudanese	2.70	3.36	24%

When asked to identify the most important factors that contribute to a healthy community; low crime and safe neighborhoods were selected by all respondents, while Croatians listed it as their most important factor (Table 8). Over half of ethnic groups (Burundian, Congolese, Rwandese, and Latino), as well as the overall sample, listed access to healthcare as the most important factor, and all others, except Sudanese placed it among their top five.

Sudanese, Bosnians and Croatians all listed a good place to raise children as the most important factor for a healthy community. A good place to raise children is listed third among overall respondents and is listed as an important factor by all other ethnic groups except for Somalis. Good schools ranked fourth among overall respondents and seven ethnic groups also rate it highly. Finally, a clean environment is cited as the fifth most popular factor overall, and figures into the top five among two ethnic groups.

Table 8. Most Important Factors for a Healthy Community, by Ethnicity (Up to 3 Answers Possible)

Overall (n=533)		
1	Access to health care (e.g., family doctor)	42%
2	Low crime/safe neighborhoods	40%
3	Good place to raise children	35%
4	Good schools	34%
5	Clean environment	29%

Somali (n=102)		
1	Clean environment	67%
2	Access to health care (e.g., family doctor)	61%
3	Healthy behaviors and lifestyles	35%
4	Low crime/safe neighborhoods	28%
5	Parks and recreation	21%

Sudanese (n=88)		
1	Good place to raise children	39%
2t	Low crime/safe neighborhoods	36%
2t	Parks and recreation	36%
4t	Good schools	34%
4t	Clean environment	34%

Latino (n=75)		
1	Access to health care (e.g., family doctor)	41%
2	Religious or spiritual values	39%
3	Good schools	35%
4	Low crime/safe neighborhoods	32%
5	Good place to raise children	29%

American-born (n=53)		
1	Good schools	64%
2	Low crime/safe neighborhoods	43%
3	Good place to raise children	38%
4	Good jobs and healthy economy	28%
5t	Access to health care (e.g., family doctor)	26%
5t	Strong family life	26%
5t	Healthy behaviors and lifestyles	26%

Burundian (n=44)		
1	Access to health care (e.g., family doctor)	75%
2	Low crime/safe neighborhoods	59%
3	Good place to raise children	34%
4	Good schools	25%
5	Good jobs and healthy economy	20%

Congolese (n=39)		
1	Access to health care (e.g., family doctor)	64%
2	Good place to raise children	62%
3	Low crime/safe neighborhoods	49%
4	Good jobs and healthy economy	28%
5	Good schools	26%

Rwandese (n=36)		
1	Access to health care (e.g., family doctor)	64%
2	Low crime/safe neighborhoods	42%
3	Good schools	39%
4	Good place to raise children	33%
5	Excellent race relations	28%

Bosnian (n=30)		
1	Good place to raise children	57%
2	Good jobs and healthy economy	47%
3	Low crime/safe neighborhoods	43%
4	Strong family life	40%
5t	Good schools	23%
5t	Access to health care (e.g., family doctor)	23%

Croatian (n=12)		
1t	Good place to raise children	67%
1t	Low crime/safe neighborhoods	67%
3t	Strong family life	33%
3t	Healthy behaviors and lifestyles	33%
5	Good jobs and healthy economy	25%

Diabetes is cited as the most important health problem among five ethnic groups (Latino, Burundian, Congolese, Rwandese and Somali) as well as the overall sample. With the exceptions of American-born and Bosnians, all other ethnic groups also listed diabetes as a top concern. Mirroring this is the fact that American-born individuals and Bosnians report the highest numbers of participants with private insurance, (approximately 70% for these two ethnic groups) which is 40% higher than the overall group response and 24% higher than any other ethnic group.

Dental problems ranked second among the overall sample, with five ethnic groups (Somali, Sudanese, Latino, Bosnian, and Croatian) citing it as a concern and two (Somali and Sudanese) raking it as a top problem. Somali and Sudanese respondents also report the highest numbers, over 89%, of individuals on public insurance, which is 24% higher than the overall population.

High blood pressure ranked third overall, and all ethnic groups, except Croatians, listed it as a concern. Cancer ranked fourth, and was amongst the top five for five ethnic groups with American-born individuals listing it as a top concern. Finally, mental health problems ranked fifth overall, with three groups listing it as a problem and Croatians listing it as their top concern.

Table 9. Most Important Health Problems in the Community, by Ethnicity (Up to 3 Answers Possible)

Overall (n=529)		
1	Diabetes	48%
2	Dental problems	37%
3	High blood pressure	35%
4	Cancer	30%
5	Mental health problems	25%

American-born (n=53)		
1	Cancer	53%
2	Aging problems	49%
3	Heart disease and stroke	40%
4	High blood pressure	32%
5	Lung disease/asthma	26%

Somali (n=102)		
1t	Dental problems	73%
1t	Diabetes	73%
3	Cancer	45%
4	Mental health problems	29%
5	High blood pressure	23%

Burundian (n=45)		
1	Diabetes	78%
2	High blood pressure	64%
3t	Aging problems	27%
3t	Hepatitis	27%
5	HIV/AIDS	20%

Sudanese (n=89)		
1	Dental problems	47%
2	High blood pressure	46%
3	Teenage pregnancy	37%
4	Domestic violence	31%
5	Diabetes	30%

Congolese (n=39)		
1	Diabetes	64%
2	High blood pressure	44%
3	Aging problems	33%
4	Hepatitis	31%
5	Dental problems	28%

Latino (n=71)		
1	Diabetes	44%
2	Cancer	34%
3	Dental problems	31%
4t	Domestic violence	24%
4t	High blood pressure	24%

Rwandese (n=34)		
1	Diabetes	71%
2t	Cancer	35%
2t	High blood pressure	35%
4	Hepatitis	26%
5	Aging problems	24%

Bosnian (n=30)		
1	Aging problems	60%
2	Mental health problems	47%
3	Heart disease and stroke	43%
4	Dental problems	37%
5t	Cancer	27%
5t	High blood pressure	27%

Croatian (n=12)		
1	Mental health problems	75%
2t	Aging problems	50%
2t	Lung disease/asthma	50%
4t	Dental problems	17%
4t	Diabetes	17%
4t	Domestic violence	17%
4t	Firearm-related injuries	17%
4t	Heart disease and stroke	17%

All but Latino and Croatian respondents selected lack of exercise as one of the most important risky behaviors in their community (Table 10). Three ethnic groups and the overall sample also have it as their top risky behavior. Alcohol abuse ranks second overall and, with the exception of Somalis, all ethnic groups listed it as a community concern with Latinos, American-born individuals and Croatians citing it as a top concern. Latinos, American-born individuals and Croatians have also been living in the United States the longest, with a median of 13.9 years.

Being overweight ranked third overall, and all but Sudanese listed it as a concern, with Bosnians listing it as their top concern. Poor eating habits ranked fourth with all but two ethnic groups listing it as important with Burundians listing it as a top concern. Drug abuse was cited fifth, with seven groups listing it as a concern. Sudanese also ranked dropping out of school as a top community risky behavior.

Table 10. Most Important Risky Behaviors in the Community, by Ethnicity (Up to 3 Answers Possible)

Overall (n=516)		
1	Lack of exercise	50%
2	Alcohol abuse	46%
3	Being overweight	40%
4	Poor eating habits	35%
5	Drug abuse	33%

American-born (n=53)		
1	Alcohol abuse	57%
2	Tobacco use	45%
3	Being overweight	42%
4	Drug abuse	40%
5t	Lack of exercise	36%
5t	Poor eating habits	36%

Somali (n=95)		
1	Lack of exercise	77%
2	Being overweight	63%
3	Not getting immunized	58%
4	Tobacco use	36%
5	Poor eating habits	18%

Burundian (n=45)		
1	Poor eating habits	64%
2	Lack of exercise	62%
3	Alcohol abuse	53%
4	Being overweight	42%
5	Drug abuse	29%

Sudanese (n=82)		
1	Dropping out of school	63%
2	Alcohol abuse	59%
3	Drug abuse	44%
4	Lack of exercise	41%
5	Poor eating habits	38%

Congolese (n=39)		
1	Lack of exercise	64%
2	Poor eating habits	62%
3	Being overweight	41%
4	Alcohol abuse	36%
5	Dropping out of school	28%

Latino (n=72)		
1	Alcohol abuse	65%
2	Drug abuse	50%
3	Tobacco use	38%
4	Being overweight	31%
5	Racism	29%

Rwandese (n=34)		
1	Lack of exercise	65%
2	Poor eating habits	50%
3	Alcohol abuse	47%
4	Being overweight	38%
5	Drug abuse	29%

Bosnian (n=30)		
1	Being overweight	73%
2	Alcohol abuse	60%
3	Poor eating habits	53%
4	Lack of exercise	47%
5	Drug abuse	40%

Croatian (n=13)		
1	Alcohol abuse	85%
2	Tobacco use	54%
3	Drug abuse	46%
4t	Being overweight	31%
4t	Dropping out of school	31%

When asked to indicate the health problem or risky behavior most important to them personally, a lack of exercise emerges as the top answer overall, as well as for Rwandese and Bosnians. All ethnic groups, except for Burundians, Congolese, and Croatians, have lack of exercise in their top five. Dental problems rank second, with Latinos citing it as a top concern and three others listing it as an important problem. Diabetes ranked third, with Somalis naming it as their top health problem and three others listing it as a concern. Other top answers were aging problems, such as arthritis and hearing or vision loss (American-born), dropping out of school (Sudanese), and tobacco use (Croatian).

Table 11. Most Important Health Problems and Risky Behaviors for the Individual, by Ethnicity (Up to 3 Answers Possible)

Overall (n=527)		
1	Lack of exercise	37%
2	Dental problems	28%
3	Diabetes	25%
4t	Poor eating habits	24%
4t	Being overweight	24%

American-born (n=53)		
1	Aging problems	40%
2	Lack of exercise	38%
3	Alcohol use	34%
4	Cancer	26%
5	Being overweight	21%

Somali (n=101)		
1	Diabetes	58%
2	Dental problems	52%
3	Being overweight	48%
4	Lack of exercise	29%
5t	Cancer	13%
5t	Lung disease/asthma	13%
5t	Mental health problems	13%

Burundian (n=45)		
1	Aging problems	49%
2	Alcohol use	40%
3	Being overweight	38%
4	Cancer	31%
5	Child abuse/neglect	24%

Sudanese (n=90)		
1	Dropping out of school	47%
2	Alcohol use	41%
3	Poor eating habits	33%
4t	Dental problems	29%
4t	Lack of exercise	29%

Congolese (n=38)		
1	Lung disease/asthma	66%
2	Rape/sexual assault	58%
3	Aging problems	33%
4	Alcohol use	32%
5	Diabetes	29%

Latino (n=70)		
1	Dental problems	36%
2	Lack of exercise	31%
3	Alcohol use	19%
4t	Being overweight	19%
4t	Cancer	17%

Rwandese (n=36)		
1	Lack of exercise	61%
2	Poor eating habits	36%
3	Diabetes	25%
4	Cancer	19%
5	Being overweight	17%

Bosnian (n=30)		
1	Lack of exercise	47%
2	Aging problems	43%
3	Being overweight	37%
4t	Alcohol use	23%
4t	Dental problems	23%
4t	Heart disease and stroke	23%
4t	Mental health problems	23%

Croatian (n=12)		
1	Tobacco use	58%
2t	Alcohol use	42%
2t	Drug use	42%
4	Diabetes	33%
5	Aging problems	25%

We also looked at health ratings by demographics, such as gender, relationship status, education, and annual income. Overall, respondents grouped by demographics rate their personal health with a 4% higher score than that of their community, with individuals with a college degree or higher and those making between \$20,000 to \$29,999 having the greatest difference at 10% each. Only respondents with less than a high school diploma rated their personal health lower than that of their community by -1%. While individuals on government insurance rated their personal health equal to that of their community.

Table 12. Health Ratings, by Gender

Gender	Average Community Health Rating	Average Personal Health Rating	Difference Between Personal and Community Health Ratings
Male	2.88	3.02	5%
Female	2.86	2.94	3%

Table 13. Health Ratings, by Relationship Status

Relationship Status	Average Community Health Rating	Average Personal Health Rating	Difference Between Personal and Community Health Ratings
Married	2.89	2.94	2%
Not married	2.88	3.00	4%

Table 14. Health Ratings, by Household Status

Household Status	Average Community Health Rating	Average Personal Health Rating	Difference Between Personal and Community Health Ratings
Cohabiting	2.93	3.01	3%
Living alone	2.79	2.88	3%

Table 15. Health Ratings, by Education Level

Highest Education Level	Average Community Health Rating	Average Personal Health Rating	Difference Between Personal and Community Health Ratings
Less than high school	2.87	2.83	-1%
High school diploma or GED	2.92	2.97	1%
Some college	2.82	2.95	5%
College degree or higher	2.89	3.20	10%

Table 16. Health Ratings, by Annual Household Income

Annual Household Income	Average Community Health Rating	Average Personal Health Rating	Difference Between Personal and Community Health Ratings
Less than \$10,000	2.88	2.94	2%
\$10,000 to \$20,000	2.86	2.88	1%
\$20,000 to \$29,999	2.74	3.00	10%
\$30,000 to \$49,999	2.97	3.08	4%
Over \$50,000	3.04	3.22	6%

Table 17. Health Ratings, by Insurance Status

Insurance Status	Average Community Health Rating	Average Personal Health Rating	Difference Between Personal and Community Health Ratings
Uninsured	2.90	3.03	5%
Government insurance	2.88	2.87	0%
Private insurance	2.95	3.14	6%

When asked to identify the most important factors that contributed to a healthy community, access to healthcare was listed as a top factor by nine demographic groups and was chosen as a top response by all groups except those whose annual household income was between \$20,000 to \$29,999 and \$30,000 to \$49,999 (Table 22). Low crime and safe neighborhoods was the second most popular choice with seven groups naming it as the most important factor, while all had placed it among their top five. Other top ranking community factors were good place to raise children and good schools which were each ranked as a top response by two groups.

Table 18. Most Important Factors for a Healthy Community, by Gender (Up to 3 Answers Possible)

Male (n=258)			Female (n=256)		
1	Access to health care	45%	1	Low crime/safe neighborhoods	39%
2	Low crime/safe neighborhoods	41%	2	Access to health care	38%
3	Good place to raise children	35%	3t	Good place to raise children	36%
4	Good schools	31%	3t	Good schools	36%
5	Clean environment	30%	5	Clean environment	28%

Table 19. Most Important Factors for a Healthy Community, by Relationship Status (Up to 3 Answers Possible)

Married (n=287)			Not married (n=215)		
1	Access to health care	47%	1	Low crime/safe neighborhoods	47%
2	Low crime/safe neighborhoods	35%	2	Good schools	40%
3	Good place to raise children	34%	3	Access to health care	38%
4	Clean environment	32%	4	Good place to raise children	35%
5	Good schools	31%	5	Clean environment	25%

Table 20. Most Important Factors for a Healthy Community, by Household Status (Up to 3 Answers Possible)

Cohabiting (n=336)			Living alone (n=112)		
1t	Access to health care	43%	1t	Low crime/safe neighborhoods	44%
1t	Low crime/safe neighborhoods	43%	1t	Access to health care	44%
3	Good place to raise children	40%	3	Good schools	30%
4	Good schools	35%	4	Clean environment	28%
5	Good jobs and healthy economy	27%	5	Good place to raise children	25%

Table 21. Most Important Factors for a Healthy Community, by Highest Education Level (Up to 3 Answers Possible)

Less than high school (n=137)		
1	Access to health care	55%
2	Good place to raise children	37%
3	Clean environment	36%
4	Low crime/safe neighborhoods	30%
5	Good schools	28%

Some college (n=111)		
1	Low crime/safe neighborhoods	44%
2	Access to health care	39%
3	Good place to raise children	34%
4	Good schools	33%
5	Good jobs and healthy economy	32%

High school diploma or GED (n=148)		
1	Low crime/safe neighborhoods	47%
2	Access to health care	42%
3t	Good place to raise children	35%
3t	Good schools	35%
5	Clean environment	27%

College degree or higher (n=127)		
1	Good schools	41%
2	Low crime/safe neighborhoods	39%
3	Good place to raise children	34%
4	Good jobs and healthy economy	32%
5	Access to health care	31%

Table 22. Most Important Factors for a Healthy Community, by Annual Household Income (Up to 3 Answers Possible)

Less than \$10,000 (n=176)		
1	Access to health care	57%
2	Low crime/safe neighborhoods	43%
3	Good place to raise children	35%
4	Clean environment	34%
5	Good schools	30%

\$20,000 to \$29,999 (n=85)		
1	Low crime/safe neighborhoods	36%
2t	Clean environment	31%
2t	Affordable housing	31%
4	Good schools	29%
5	Good jobs and healthy economy	27%

\$10,000 to \$20,000 (n=116)		
1	Access to health care	46%
2	Low crime/safe neighborhoods	41%
3	Clean environment	35%
4	Good schools	27%
5	Good place to raise children	26%

\$30,000 to \$49,999 (n=76)		
1	Good place to raise children	46%
2	Good schools	41%
3	Good jobs and healthy economy	37%
4	Low crime/safe neighborhoods	36%
5	Strong family life	33%

Over \$50,000 (n=54)		
1	Good schools	54%
2	Good place to raise children	44%
3	Low crime/safe neighborhoods	41%
4	Good jobs and healthy economy	35%
5	Access to health care	30%

Table 23. Most Important Factors for a Healthy Community, by Insurance Status (Up to 3 Answers Possible)

Uninsured (n=96)		
1	Access to health care	38%
2t	Low crime/safe neighborhoods	34%
2t	Good jobs and healthy economy	34%
4	Good schools	33%
5	Good place to raise children	28%

Private insurance (n=143)		
1	Good place to raise children	43%
2	Low crime/safe neighborhoods	42%
3	Good schools	41%
4	Good jobs and healthy economy	35%
5	Access to health care	31%

Government insurance (n=312)		
1	Access to health care	50%
2	Low crime/safe neighborhoods	38%
3	Good place to raise children	34%
4	Clean environment	32%
5	Good schools	30%

When asked to identify the most important health problems in the community, diabetes was listed as a top factor by twelve demographic groups and was chosen as an important problem by all groups except those whose annual household income was between \$30,000 to \$49,999 and over \$50,000 (Table 28).

Respondents with a college degree or higher (Table 27), private insurance (Table 29), and individuals with an annual household income between \$20,000 to \$29,999 (Table 28) listed high blood pressure as a top health problem, while all other respondents placing it among their top five. Mental health problems were listed as a top concern for respondents with an annual household income between \$30,000 to \$49,999 (Table 28) and those who are uninsured (Table 29), while thirteen groups listed it as a significant concern. Other top responses were cancer (Private Insurance, Table 29) and aging problems such as arthritis and hearing and vision loss (Over \$50,000, Table 28).

Table 24. Most Important Health Problems in the Community, by Gender (Up to 3 Answers Possible)

Male (n=254)			Female (n=256)		
1	Diabetes	48%	1	Diabetes	49%
2	Dental problems	39%	2	Dental problems	35%
3	High blood pressure	34%	3	High blood pressure	34%
4	Cancer	30%	4	Cancer	31%
5	Mental health problems	26%	5	Aging problems	26%

Table 25. Most Important Health Problems in the Community, by Relationship Status (Up to 3 Answers Possible)

Married (n=286)			Not married (n=210)		
1	Diabetes	53%	1	Diabetes	43%
2	Dental problems	39%	2t	Cancer	34%
3	High blood pressure	35%	2t	High blood pressure	34%
4	Cancer	30%	4	Dental problems	33%
5	Mental health problems	26%	5	Mental health problems	23%

Table 26. Most Important Health Problems in the Community, by Household Status (Up to 3 Answers Possible)

Cohabiting (n=331)			Living alone (n=112)		
1	Diabetes	49%	1	Diabetes	45%
2	Cancer	33%	2	High blood pressure	36%
3	Dental problems	32%	3	Dental problems	35%
4	High blood pressure	31%	4	Cancer	31%
5	Mental health problems	26%	5	Mental health problems	26%

Table 27. Most Important Health Problems in the Community, by Highest Education Level (Up to 3 Answers Possible)

Less than high school (n=133)		
1	Diabetes	59%
2	Dental problems	50%
3	High blood pressure	29%
4	Cancer	27%
5	Aging problems	22%

Some college (n=109)		
1	Diabetes	46%
2	Dental problems	37%
3	Cancer	32%
4	Mental health problems	29%
5	High blood pressure	28%

High school diploma or GED (n=147)		
1	Diabetes	47%
2	High blood pressure	37%
3	Dental problems	36%
4	Cancer	32%
5	Mental health problems	29%

College degree or higher (n=129)		
1	High blood pressure	43%
2	Diabetes	41%
3	Cancer	32%
4	Aging problems	29%
5	Mental health problems	23%

Table 28. Most Important Health Problems in the Community, by Annual Household Income (Up to 3 Answers Possible)

Less than \$10,000 (n=176)		
1	Diabetes	70%
2	Dental problems	39%
3	High blood pressure	35%
4	Cancer	26%
5	Mental health problems	23%

\$20,000 to \$29,999 (n=83)		
1	High blood pressure	46%
2	Dental problems	45%
3	Diabetes	41%
4	Mental health problems	31%
5	Cancer	27%

\$10,000 to \$20,000 (n=117)		
1	Diabetes	54%
2	Dental problems	46%
3	High blood pressure	35%
4	Cancer	32%
5	Aging problems	25%

\$30,000 to \$49,999 (n=76)		
1	Mental health problems	37%
2	Cancer	33%
3	High blood pressure	29%
4	Lung disease/asthma	28%
5t	Dental problems	26%
5t	Heart disease and stroke	26%

Over \$50,000 (n=53)		
1	Aging problems	38%
2	Cancer	36%
3	Domestic violence	32%
4	High blood pressure	28%
5	Heart disease and stroke	26%

Table 29. Most Important Health Problems in the Community, by Insurance Status (Up to 3 Answers Possible)

Uninsured (n=96)		
1	Mental health problems	33%
2	Diabetes	32%
3t	Aging problems	29%
3t	Dental problems	29%
5	High blood pressure	26%

Private insurance (n=144)		
1t	Cancer	35%
1t	High blood pressure	35%
3	Aging problems	33%
4	Diabetes	31%
5	Dental problems	26%

Government insurance (n=314)		
1	Diabetes	62%
2	Dental problems	41%
3	High blood pressure	38%
4	Cancer	29%
5	Mental health problems	24%

All respondents selected alcohol abuse and lack of exercise as two of the most important risky behaviors in the community. Both responses were each also named the top risky behavior by ten of the eighteen demographic groups, with females (Table 30) and cohabitating (Table 32) individuals listing both responses as a top response. Other responses that were frequently included in top five responses were being overweight (with seventeen listing it as a top response), drug abuse (with sixteen), and poor eating habits (with fourteen).

Table 30. Most Important Risky Behaviors in the Community, by Gender (Up to 3 Answers Possible)

Male (n=246)			Female (n=251)		
1	Lack of exercise	50%	1t	Lack of exercise	49%
2	Alcohol abuse	43%	1t	Alcohol abuse	49%
3	Being overweight	37%	3	Being overweight	43%
4	Drug abuse	35%	4	Poor eating habits	37%
5	Poor eating habits	34%	5	Drug abuse	31%

Table 31. Most Important Risky Behaviors in the Community, by Relationship Status (Up to 3 Answers Possible)

Married (n=281)			Not married (n=207)		
1	Lack of exercise	55%	1	Alcohol abuse	50%
2	Being overweight	43%	2	Lack of exercise	44%
3	Alcohol abuse	41%	3	Being overweight	40%
4	Poor eating habits	35%	4	Drug abuse	34%
5	Drug abuse	32%	5	Poor eating habits	33%

Table 32. Most Important Risky Behaviors in the Community, by Household Status (Up to 3 Answers Possible)

Cohabitating (n=328)			Living alone (n=109)		
1t	Alcohol abuse	48%	1	Lack of exercise	56%
1t	Lack of exercise	48%	2	Poor eating habits	50%
3	Being overweight	41%	3	Alcohol abuse	46%
4	Drug abuse	37%	4	Being overweight	43%
5	Poor eating habits	33%	5	Tobacco use	28%

Table 33. Most Important Risky Behaviors in the Community, by Highest Education Level (Up to 3 Answers Possible)

Less than high school (n=131)		
1	Lack of exercise	60%
2	Being overweight	42%
3	Alcohol abuse	38%
4	Poor eating habits	34%
5	Tobacco use	30%

Some college (n=108)		
1	Lack of exercise	50%
2t	Alcohol abuse	41%
2t	Being overweight	41%
3t	Drug abuse	39%
3t	Poor eating habits	39%

High school diploma or GED (n=142)		
1	Alcohol abuse	46%
2t	Being overweight	45%
2t	Lack of exercise	45%
4	Drug abuse	35%
5	Poor eating habits	31%

College degree or higher (n=126)		
1	Alcohol abuse	59%
2	Lack of exercise	46%
3	Poor eating habits	39%
4	Being overweight	33%
5t	Drug abuse	30%
5t	Tobacco use	30%

Table 34. Most Important Risky Behaviors in the Community, by Annual Household Income (Up to 3 Answers Possible)

Less than \$10,000 (n=174)		
1	Lack of exercise	61%
2	Poor eating habits	45%
3	Being overweight	43%
4	Alcohol abuse	41%
5	Drug abuse	28%

\$20,000 to \$29,999 (n=81)		
1	Alcohol abuse	46%
2	Lack of exercise	41%
3	Dropping out of school	40%
4t	Drug abuse	36%
4t	Tobacco use	36%

\$10,000 to \$20,000 (n=112)		
1	Lack of exercise	55%
2	Alcohol abuse	40%
3t	Being overweight	38%
3t	Poor eating habits	38%
5	Drug abuse	32%

\$30,000 to \$49,999 (n=75)		
1	Alcohol abuse	57%
2t	Being overweight	41%
2t	Lack of exercise	41%
4	Tobacco use	35%
5	Drug abuse	33%

Over \$50,000 (n=53)		
1	Alcohol abuse	53%
2	Being overweight	47%
3	Drug abuse	42%
4	Tobacco use	34%
5	Lack of exercise	32%

Table 35. Most Important Risky Behaviors in the Community, by Insurance Status (Up to 3 Answers Possible)

Uninsured (n=94)		
1	Alcohol abuse	65%
2	Drug abuse	46%
3	Lack of exercise	36%
4	Being overweight	35%
5	Poor eating habits	33%

Private insurance (n=140)		
1	Alcohol abuse	53%
2	Being overweight	45%
3	Lack of exercise	42%
4t	Drug abuse	36%
4t	Poor eating habits	36%

Government insurance (n=307)		
1	Lack of exercise	58%
2	Being overweight	45%
3	Poor eating habits	40%
4	Alcohol abuse	36%
5	Drug abuse	26%

All respondents identified lack of exercise as a health problem or risky behavior most important to them personally, while sixteen chose it as a top response. Other top responses were diabetes (Table 39 - less than high school), and dental problems and poor eating habits were both chosen as a top response by respondents with an annual income between \$20,000 to \$29,999 (Table 40). Being overweight was listed as an important problem by sixteen groups, but was never chosen as a top response.

Table 36. Most Important Health Problems and Risky Behavior for the Individual, by Gender (Up to 3 Answers Possible)

Male (n=253)			Female (n=255)		
1	Lack of exercise	37%	1	Lack of exercise	37%
2t	Diabetes	29%	2	Dental problems	27%
2t	Dental problems	29%	3	Being overweight	26%
4	Poor eating habits	24%	4	Poor eating habits	25%
5	Being overweight	23%	5	Diabetes	21%

Table 37. Most Important Health Problems and Risky Behavior for the Individual, by Relationship Status (Up to 3 Answers Possible)

Married (n=285)			Not married (n=208)		
1	Lack of exercise	37%	1	Lack of exercise	37%
2	Diabetes	30%	2	Dental problems	30%
3	Dental problems	27%	3t	Being overweight	25%
4	Being overweight	25%	3t	Poor eating habits	25%
5	Poor eating habits	23%	5	Alcohol use	20%

Table 38. Most Important Health Problems and Risky Behavior for the Individual, by Household Status (Up to 3 Answers Possible)

Cohabiting (n=329)			Living alone (n=112)		
1	Lack of exercise	38%	1	Lack of exercise	40%
2	Diabetes	26%	2	Dental problems	34%
3	Poor eating habits	25%	3	Being overweight	26%
4	Dental problems	24%	4	Poor eating habits	25%
5	Being overweight	23%	5	Diabetes	20%

Table 39. Most Important Health Problems and Risky Behavior for the Individual, by Highest Education Level (Up to 3 Answers Possible)

Less than high school (n=135)		
1	Diabetes	38%
2	Dental problems	37%
3	Lack of exercise	31%
4	Being overweight	25%
5	Aging problems	19%

Some college (n=109)		
1	Lack of exercise	39%
2	Dental problems	31%
3	Poor eating habits	26%
4	Diabetes	25%
5	Being overweight	24%

High school diploma or GED (n=143)		
1	Lack of exercise	36%
2	Being overweight	31%
3	Dental problems	28%
4	Diabetes	22%
5	Poor eating habits	20%

College degree or higher (n=126)		
1	Lack of exercise	42%
2	Poor eating habits	35%
3	Alcohol use	25%
4t	Cancer	18%
4t	High blood pressure	18%

Table 40. Most Important Health Problems and Risky Behavior for the Individual, by Annual Household Income (Up to 3 Answers Possible)

Less than \$10,000 (n=177)		
1	Lack of exercise	36%
2	Diabetes	33%
3	Dental problems	32%
4	Being overweight	28%
5	Poor eating habits	24%

\$20,000 to \$29,999 (n=83)		
1t	Dental problems	34%
1t	Poor eating habits	34%
3	Lack of exercise	28%
4	Dropping out of school	27%
5t	Alcohol use	25%
5t	Diabetes	25%

\$10,000 to \$20,000 (n=115)		
1	Lack of exercise	43%
2t	Diabetes	30%
2t	Dental problems	30%
4	Being overweight	27%
5	Poor eating habits	22%

\$30,000 to \$49,999 (n=74)		
1	Lack of exercise	34%
2t	Dental problems	22%
2t	Poor eating habits	22%
4	Tobacco use	20%
5t	Alcohol use	19%
5t	Being overweight	19%

Over \$50,000 (n=54)		
1	Lack of exercise	41%
2	Being overweight	28%
3	Aging problems	26%
4	Alcohol use	24%
5t	Cancer	22%
5t	Tobacco use	22%

Table 41. Most Important Health Problems and Risky Behavior for the Individual, by Insurance Status
(Up to 3 Answers Possible)

Uninsured (n=95)		
1	Lack of exercise	33%
2	Alcohol use	29%
3	Poor eating habits	27%
4	Aging problems	18%
5	Being overweight	17%

Private insurance (n=144)		
1	Lack of exercise	40%
2	Poor eating habits	30%
3	Being overweight	24%
4	Alcohol use	22%
5	Cancer	19%

Government insurance (n=311)		
1	Lack of exercise	38%
2t	Dental problems	32%
2t	Diabetes	32%
4	Being overweight	26%
5	Poor eating habits	23%