Behavioral Risk Factor Surveillance System

Delaware

New Castle

2011 County Data Report

	GENHLTH: Would you say that in general your health is:															
RESPONDENT NUMBER Excellent				lent	Very good		Good		Fair		Poor					
TOTAL	WEIGHTED	N	%	C.I. (95%)	N	%	C.I. (95%)	N	%	C.I. (95%)	N	%	C.I. (95%)	N	%	C.I. (95%)
2029	413,636	381	20.4	17.9-22.9	729	36.1	33.4-38.8	626	31.1	28.4-33.8	233	10.2	8.40-12.0	60	2.2	1.40-3.00

_RFHLTH: Adults with good or better health										
RESPONDE	NT NUMBER	Goo	d or Bet	ter Health	Fair or Poor Health					
TOTAL	WEIGHTED	N	%	C.I. (95%)	N	%	C.I. (95%)			
2029	413,636	1736	87.6	85.8-89.4	293	12.4	10.6-14.2			

	HLTHPLN1: Do you have any kind of health care coverage, including health insurance, prepaid plans such as HMOs, or government plans such as Medicare, or Indian Health Service?									
RESPONDE	NT NUMBER		Ye	s	No					
TOTAL WEIGHTED N % C.I. (95%) N % C.I. (9							C.I. (95%)			
2025 411,490 1876 91.0 89.0-93.0 149 9.0 7.00-11.0										

_HCVU651: Respondents aged 18-64 that have any form of health care coverage									
RESPONDE	NT NUMBER	Have h	Have health care coverage			Do not have health care coverage			
TOTAL	N	%	C.I. (95%)	N	%	C.I. (95%)			
1453	339,575	1315	89.8	87.6-92.0	138	10.2	8.00-12.4		

_TOTINDA: Adults that report doing physical activity or exercise during the past 30 days other than their regular job									
RESPONDE	Had physical activity or exercise			No physical activity or exercise in last 30 days					
TOTAL	N	%	C.I. (95%)	N	%	C.I. (95%)			
2008 408,769 1509 75.8 73.3-78.3 499 24.2 21.7-26.7									

NOTE:

_RFHYPE5: Adults who have been told they have high blood pressure by a doctor, nurse, or other health professional										
RESPONDE	NT NUMBER		No	1	Yes					
TOTAL	WEIGHTED	N	%	C.I. (95%)	N	%	C.I. (95%)			
2027	2027 412,890 1230 67.7 65.2-70.2 797 32.3 29.8-34.8									

BLOODC	BLOODCHO: Blood cholesterol is a fatty substance found in the blood. Have you EVER had your blood cholesterol checked?									
RESPONDE	No									
TOTAL	WEIGHTED	N	N % C.I. (95%) N % C.I. (95%							
1992	403,340	403,340 1782 82.5 79.8-85.2 210 17.5 14.8-20.2								

	_CHOLCHK: Cholesterol check within past five years											
						Did not have cholesterol checked in past 5 years			Have never had cholesterol checked			
TOTAL WEIGHTED N % C.I. (95%)				N	%	C.I. (95%)	N	%	C.I. (95%)			
1971	400,221	1709	80.1	77.4-82.8	52	2.3	1.30-3.30	210	17.6	14.9-20.3		

_RFCHOL: Adults who have had their cholesterol checked and have been told by a doctor, nurse, or other health professional that it was high									
RESPONDE		No	,	Yes					
TOTAL	N	%	C.I. (95%)	N	%	C.I. (95%)			
1775 331,883 1035 61.2 58.3-64.1 740 38.8 35.9-41.7									

CVDINFR4: (Ever told) you had a heart attack, also called a myocardial infarction?									
RESPONDE	NT NUMBER		Yes	s	No				
TOTAL	WEIGHTED	ITED N % C.I. (95%) N % C.I.					C.I. (95%)		
2029 413,661 87 2.6 2.00-3.20 1942 97.4 96.8-98.0									

NOTE:

CV	CVDCRHD4: (Ever told) you had angina or coronary heart disease?										
RESPONDE	NT NUMBER		Yes	5	No						
TOTAL	WEIGHTED	N	%	C.I. (95%)	N	%	C.I. (95%)				
2023 412,735 95 3.0 2.20-3.80 1928 97.0 96.2-97.8											

CVDSTRK3: (Ever told) you had a stroke.										
RESPONDE	NT NUMBER	Yes			No					
TOTAL	TOTAL WEIGHTED I			C.I. (95%)	N	%	C.I. (95%)			
2029 413,695 79 3.4 2.20-4.60 1950 96.6 95.4-97.8										

-	_LTASTH1: Adults who have ever been told they have asthma										
RESPONDE	NT NUMBER		No	,	Yes						
TOTAL	WEIGHTED	N % C.I. (95%)			N	%	C.I. (95%)				
2030	413,731	1765	86.7	84.7-88.7	265	13.3	11.3-15.3				

_C	_CASTHM1: Adults who have been told they currently have asthma										
RESPONDE	NT NUMBER		No		Yes						
TOTAL	WEIGHTED	N	%	C.I. (95%)	N	%	C.I. (95%)				
2027	413,342	1843	90.5	88.7-92.3	184	9.5	7.70-11.3				

_DRDXAR1: Respondents that have had a doctor diagnose them as having some form of arthritis									
RESPONDE	Diagn	osed w	ith arthritis	Not diagnosed with arthritis					
TOTAL	WEIGHTED	N % C.I. (95%)			N	%	C.I. (95%)		
2029	413,632	597 22.2 20.0-24.4 1432 77.8 75							

NOTE:

	DIABETE3: (Ever told) you have diabetes												
RESPONDENT NUMBER Yes			Yes, but female told only during pregnancy				No			No, pre-diabetes or borderline diabetes			
TOTAL	WEIGHTED	N	%	C.I. (95%)	N	%	C.I. (95%)	N	%	C.I. (95%)	N	%	C.I. (95%)
2027	413,163	220	8.5	7.10-9.90	13	13 0.9 0.30-1.50			89.3	87.5-91.1	29	1.4	0.80-2.00

	CHCSCNCR: (Ever told) you had skin cancer?										
RESPONDE	NT NUMBER		Yes	S	No						
TOTAL	WEIGHTED	N	C.I. (95%)	N	%	C.I. (95%)					
2029	413,701	174	5.7	4.70-6.70	1855	94.3	93.3-95.3				

	CHCOCNCR: (Ever told) you had any other types of cancer?										
RESPONDE	NT NUMBER		Yes	6	No						
TOTAL	WEIGHTED	N % C.I. (95%)			N	%	C.I. (95%)				
2029	413,555	193	7.2	5.80-8.60	1836	92.8	91.4-94.2				

CHCCOP	CHCCOPD: (Ever told) you have (COPD) chronic obstructive pulmonary disease, emphysema or chronic bronchitis?										
RESPONDE		Ye	S	No							
TOTAL	WEIGHTED	N % C.I. (95%)			N	%	C.I. (95%)				
2027	412,755	98	3.7	2.70-4.70	1929	96.3	95.3-97.3				

CHCKIDNY: (Ever told) you have kidney disease? Do NOT include kidney stones, bladder infection or incontinence.									
RESPONDE		Yes	S	No					
TOTAL	WEIGHTED	N % C.I. (95%			N	%	C.I. (95%)		
2029	413,588	61	2.5	1.70-3.30	1968	97.5	96.7-98.3		

NOTE:

CHCVISON: Has a doctor, nurse or other health professional ever said that you have vision impairment in one or both eyes, even when wearing glasses?											
RESPONDE		Yes			No			Respondent is blind			
TOTAL	WEIGHTED	N	N % C.I. (95%)		N	%	C.I. (95%)	N	%	C.I. (95%)	
2027	413,186	469	19.9	17.7-22.1	1553	79.8	77.6-82.0	5	0.3	0.00-0.70	

	ADDEPEV2: (Ever told) you that you have a depressive disorder, including depression, major depression, dysthymia, or minor depression?									
RESPONDE	NT NUMBER		Ye		No					
TOTAL	WEIGHTED	N % C.I. (95%)			N	%	C.I. (95%)			
2027	413,434	290	290 13.7 11.7-15.7 1737 86.3							

_RFSMOK3: Adults who are current smokers										
RESPONDE	NT NUMBER		No	,	Yes					
TOTAL	WEIGHTED	N	%	C.I. (95%)	N	%	C.I. (95%)			
2028	413,314	1694	78.8	76.1-81.5	334	21.2	18.5-23.9			

	_SMOKE	ER3: Fou	ır-level	smoker status	s: Every	_SMOKER3: Four-level smoker status: Everyday smoker, Someday smoker, Former smoker, Non-smoker											
RESPONDE	RESPONDENT NUMBER			oker - now very day			oker - now ome days	Former smoker			Never smoked						
TOTAL	WEIGHTED	N	%	C.I. (95%)	N	%	C.I. (95%)	N	%	C.I. (95%)	N	%	C.I. (95%)				
2028	413,314	236	15.4	13.0-17.8	98	5.9	4.30-7.50	647	26.5	24.1-28.9	1047	52.3	49.4-55.2				

	_BMI5CAT: Four-categories of Body Mass Index (BMI)												
RESPONDENT NUMBER Underweight Normal Weight Overweight Obese							se						
TOTAL	WEIGHTED	N	%	C.I. (95%)	N	%	C.I. (95%)	N	%	C.I. (95%)	N	%	C.I. (95%)
1939	395,406	42	2.0	1.20-2.80	698	37.0	34.1-39.9	699	35.9	33.0-38.8	500	25.1	22.6-27.6

NOTE:

	_PAINDEX: Physical Activity Index										
RESPONDE	NT NUMBER	Meet Aerobic Recommendations			Do Not Meet Aerobic Recommendations						
TOTAL	TOTAL WEIGHTED			C.I. (95%)	N	%	C.I. (95%)				
1920	392,342	964	51.2	48.1-54.3	956	48.8	45.7-51.9				

	_PASTRNG: Muscle Strengthening Recommendation										
RESPONDE	NT NUMBER	Meet muscle strengthening recommendations			Did not meet muscle strengthening recommendations						
TOTAL	N	%	C.I. (95%)	N	%	C.I. (95%)					
1967	401,347	634	33.1	30.2-36.0	1333	66.9	64.0-69.8				

	_PASTAER: Aerobic and Strengthening (2-level)										
RESPONDE	NT NUMBER	Met	Both G	uidelines	Did Not Meet Both Guidelines						
TOTAL	WEIGHTED	N	%	C.I. (95%)	N	%	C.I. (95%)				
1885 386,421 415 22.5 19.8-25.2 1470 77.5 74.8-80.2											

QLACTLM	QLACTLM2: Are you limited in any way in any activities because of physical, mental, or emotional problems?										
RESPONDENT NUMBER Yes No						•					
TOTAL WEIGHTED N % C.I. (95%)					N	%	C.I. (95%)				
1999	407,957	470	19.1	16.9-21.3	1529	80.9	78.7-83.1				

	USEEQUIP: Do you now have any health problem that requires you to use special equipment, such as a cane, a wheelchair, a special bed, or a special telephone?										
RESPONDENT NUMBER Yes No											
TOTAL WEIGHTED N % C.I. (95%) N % C.I. (95%)							C.I. (95%)				
2002	2002 408,245 177 6.5 5.10-7.90 1825 93.5 92.1-94.9										

NOTE:

_RFSE	_RFSEAT2: Always or Nearly Always Wear Seat Belts Calculated Variable									
RESPONDE	NT NUMBER	Always or Almost Always Wear Seat Belt			Sometimes, Seldom, or Never Wear Seat Belt					
TOTAL	TOTAL WEIGHTED			C.I. (95%)	N	%	C.I. (95%)			
2002	2002 408,257 1929 94.7 92.9-96.5 73 5.3 3.50-7.10									

_FLSH	_FLSHOT5: Adults aged 65+ who have had a flu shot within the past year										
RESPONDENT NUMBER Yes No											
TOTAL	WEIGHTED	N	%	C.I. (95%)	N % C.I. (95%)						
538	538 66,447 362 62.9 57.4-68.4 176 37.1 31.6-42.6										

_PNEUMO2: Adults aged 65+ who have ever had a pneumonia vaccination										
RESPONDE	NT NUMBER		Ye	5	No					
TOTAL	WEIGHTED	N	%	C.I. (95%)	N	%	C.I. (95%)			
522	522 64,570 381 68.1 62.6-73.6 141 31.9 26.4-37.4									

DRNKANY	DRNKANY5: Adults that report having had at least one drink of alcohol in the past 30 days.										
RESPONDENT NUMBER Yes No							•				
TOTAL	WEIGHTED	N	%	C.I. (95%)	N	%	C.I. (95%)				
1978	1978 404,426 1220 62.5 59.6-65.4 758 37.5 34.6-40.4										

_RFBIN	_RFBING5: Binge drinkers (males having five or more drinks on one occasion, females having four or more drinks on one occasion)										
RESPONDE	RESPONDENT NUMBER No Yes										
TOTAL	TOTAL WEIGHTED N % C.I. (95%) N % C.I. (95%)										
1968	1968 402,899 1637 77.7 75.0-80.4 331 22.3 19.6-25.0										

NOTE:

_RFDRH				having more t e than one dri			er day and
RESPONDE	NT NUMBER		No			Ye	5
TOTAL	WEIGHTED	C.I. (95%)	N	%	C.I. (95%)		
1966	400,296	1819	91.7	89.7-93.7	147	8.3	6.30-10.3

NOTE:

Behavioral Risk Factor Surveillance System

Delaware

Kent

2011 County Data Report

	GENHLTH: Would you say that in general your health is:															
RESPONDENT NUMBER Excellent				lent	Very good		Good		Fair			Poor				
TOTAL	WEIGHTED	N	%	C.I. (95%)	N	%	C.I. (95%)	N	%	C.I. (95%)	N	%	C.I. (95%)	N	%	C.I. (95%)
1414	121,805	191	13.9	11.0-16.8	455	32.6	28.9-36.3	503	37.5	33.4-41.6	184	11.7	9.30-14.1	81	4.3	3.10-5.50

_RFHLTH: Adults with good or better health										
RESPONDE	NT NUMBER	Goo	d or Bet	ter Health	Fair or Poor Health					
TOTAL	WEIGHTED	N	N % C.I. (95%)			%	C.I. (95%)			
1414	121,805	1149	84.0	81.5-86.5	265	16.0	13.5-18.5			

	HLTHPLN1: Do you have any kind of health care coverage, including health insurance, prepaid plans such as HMOs, or government plans such as Medicare, or Indian Health Service?									
RESPONDENT NUMBER Yes No										
TOTAL	TOTAL WEIGHTED N % C.I. (95%) N % C.I. (95%)									
1411	121,516	1298	1298 86.5 82.8-90.2 113 13.5 9.80-17.2							

_HCVU651: Respondents aged 18-64 that have any form of health care coverage										
RESPONDE	NT NUMBER	Have h	ealth ca	ire coverage	Do not have health care coverage					
TOTAL	WEIGHTED	N	%	C.I. (95%)	N	%	C.I. (95%)			
949 98,180 838 83.3 79.0-87.6 111 16.7 12.4-21.0										

_TOTINDA: Adults that report doing physical activity or exercise during the past 30 days other than their regular job									
RESPONDE	Had p	hysical exerc	activity or ise	No physical activity or exercise in last 30 days					
TOTAL	WEIGHTED	N	%	C.I. (95%)	N	%	C.I. (95%)		
1400 121,067 972 67.9 63.8-72.0 428 32.1 28.0-36.2									

NOTE:

_RFHYPE5: Adults who have been told they have high blood pressure by a doctor, nurse, or other health professional										
RESPONDE	NT NUMBER		No	1	Yes					
TOTAL	WEIGHTED	N	%	C.I. (95%)	N	%	C.I. (95%)			
1415 121,828 787 60.8 56.9-64.7 628 39.2 35.3-43.1										

BLOODC	BLOODCHO: Blood cholesterol is a fatty substance found in the blood. Have you EVER had your blood cholesterol checked?										
RESPONDENT NUMBER Yes No											
TOTAL	TOTAL WEIGHTED N % C.I. (95%) N % C.I. (95%)										
1399 119,900 1253 81.5 77.8-85.2 146 18.5 14.8-22.2											

	_CHOLCHK: Cholesterol check within past five years											
RESPONDENT NUMBER Had cholesterol checked in past 5 years					Did not have cholesterol checked in past 5 years			Have never had cholesterol checked				
TOTAL	WEIGHTED	D N % C.I. (95%) N				%	C.I. (95%)	N	%	C.I. (95%)		
1387	119,341	1216	79.7	76.0-83.4	25	1.7	0.90-2.50	146	18.6	14.9-22.3		

_RFCHOL: Adults who have had their cholesterol checked and have been told by a doctor, nurse, or other health professional that it was high										
RESPONDE	NT NUMBER		No		Yes					
TOTAL WEIGHTED N % C.I. (95%) N % C.I. (95%)										
1248 97,414 688 59.5 55.4-63.6 560 40.5 36.4-44.6										

CVDINFR4: (Ever told) you had a heart attack, also called a myocardial infarction?										
RESPONDE	NT NUMBER		Ye	6	No					
TOTAL	WEIGHTED	N	%	C.I. (95%)	5%) N % C.I. (95%)					
1413 121,754 72 4.1 2.30-5.90 1341 95.9 94.1-97.7										

NOTE:

CVDCRHD4: (Ever told) you had angina or coronary heart disease?									
RESPONDE	NT NUMBER		Yes	5	No				
TOTAL	WEIGHTED	N	%	C.I. (95%)	N	%	C.I. (95%)		
1410 121,464 93 4.5 3.30-5.70 1317 95.5 94.3-96.7									

CVDSTRK3: (Ever told) you had a stroke.										
RESPONDE	NT NUMBER		Yes	S	No					
TOTAL	WEIGHTED	N	%	C.I. (95%)	N	%	C.I. (95%)			
1414 121,778 57 2.4 1.60-3.20 1357 97.6 96.8-98.4										

_LTASTH1: Adults who have ever been told they have asthma										
RESPONDE	NT NUMBER		No	,	Yes					
TOTAL	WEIGHTED	N	C.I. (95%)	N	%	C.I. (95%)				
1408	121,322	1204	83.6	80.5-86.7	204	16.4	13.3-19.5			

_C	_CASTHM1: Adults who have been told they currently have asthma										
RESPONDE	NT NUMBER		No	,	Yes						
TOTAL	WEIGHTED	N	%	C.I. (95%)	N % C.I. (95%						
1407	121,274	1258	88.8	86.3-91.3	149	11.2	8.70-13.7				

_DRDXAR1: Respondents that have had a doctor diagnose them as having some form of arthritis									
RESPONDE	Diagr	osed w	ith arthritis	Not diagnosed with arthritis					
TOTAL	WEIGHTED	N % C.I. (95%)			N	%	C.I. (95%)		
1410	121,417	529	29.9	26.6-33.2	881	70.1	66.8-73.4		

NOTE:

	DIABETE3: (Ever told) you have diabetes												
RESPONDENT NUMBER Yes				5			le told only egnancy	No			No, pre-diabetes or borderline diabetes		
TOTAL	WEIGHTED	N	%	C.I. (95%)	N	%	C.I. (95%)	N	%	C.I. (95%)	N	%	C.I. (95%)
1415	121,828	208	12.1	9.90-14.3	7	0.3	0.10-0.50	1179	86.6	84.4-88.8	21	1.0	0.60-1.40

	CHCSCNCR: (Ever told) you had skin cancer?										
RESPONDE	NT NUMBER		Yes	6	No						
TOTAL	WEIGHTED	N	C.I. (95%)	N	%	C.I. (95%)					
1414	121,764	127	5.4	4.20-6.60	1287	94.6	93.4-95.8				

CHCOCNCR: (Ever told) you had any other types of cancer?											
RESPONDE	NT NUMBER		Yes	6	No						
TOTAL	WEIGHTED	N	C.I. (95%)	N	%	C.I. (95%)					
1413	121,350	139	6.5	4.70-8.30	1274	93.5	91.7-95.3				

CHCCOPD: (Ever told) you have (COPD) chronic obstructive pulmonary disease, emphysema or chronic bronchitis?										
RESPONDE	NT NUMBER		Ye	S	No					
TOTAL	WEIGHTED	N	C.I. (95%)	N	%	C.I. (95%)				
1415	121,828	130	6.7	5.10-8.30	1285	93.3	91.7-94.9			

CHCKIDNY: (Ever told) you have kidney disease? Do NOT include kidney stones, bladder infection or incontinence.									
RESPONDE		Yes	S	No					
TOTAL	WEIGHTED	N % C.I. (95%)			N	%	C.I. (95%)		
1414	121,813	45	2.7	1.50-3.90	1369	97.3	96.1-98.5		

NOTE:

CHCVISON	CHCVISON: Has a doctor, nurse or other health professional ever said that you have vision impairment in one or both eyes, even when wearing glasses?										
RESPONDE	Yes			No			Respondent is blind				
TOTAL	WEIGHTED	N	%	C.I. (95%)	N	%	C.I. (95%)	N	%	C.I. (95%)	
1413	121,760	332	20.9	17.6-24.2	1080	79.1	75.8-82.4	1	0.0	0.00-0.00	

ADDEPEV2: (Ever told) you that you have a depressive disorder, including depression, major depression, dysthymia, or minor depression?										
RESPONDE		Ye	5	No						
TOTAL	WEIGHTED	N % C.I. (95%)			N	%	C.I. (95%)			
1414	121,689	223	223 15.1 12.0-18.2 1191 84.9 81.8-88.0							

_RFSMOK3: Adults who are current smokers										
RESPONDE	NT NUMBER		No	,	Yes					
TOTAL	WEIGHTED	N	%	C.I. (95%)	N	%	C.I. (95%)			
1407	121,244	1131	74.9	70.8-79.0	276	25.1	21.0-29.2			

	_SMOKE	ER3: Fou	ır-level	smoker status	s: Every	day sm	oker, Someda	ay smoke	er, Form	ner smoker, N	lon-smok	er	
RESPONDENT NUMBER Current smoker - no smokes every day			Current smoker - now smokes some days			Former smoker			Never smoked				
TOTAL	WEIGHTED	N	%	C.I. (95%)	N	%	C.I. (95%)	N	%	C.I. (95%)	N	%	C.I. (95%)
1407	121,244	219	19.6	15.7-23.5	57	5.5	3.30-7.70	450	27.2	23.9-30.5	681	47.7	43.8-51.6

	_BMI5CAT: Four-categories of Body Mass Index (BMI)												
RESPONDENT NUMBER Underweight				eight	Normal Weight		Overweight			Obese			
TOTAL	WEIGHTED	N	%	C.I. (95%)	N	%	C.I. (95%)	N	%	C.I. (95%)	N	%	C.I. (95%)
1329 114,586 12 0.9 0.30-1.50 394 30.7 26.6-34.8 457 35.0 31.1-38.9 466 33.4 29.7-37									29.7-37.1				

NOTE:

	_PAINDEX: Physical Activity Index									
RESPONDE	Meet Aerobic Recommendations			Do Not Meet Aerobic Recommendations						
TOTAL	WEIGHTED	N	%	C.I. (95%)	N	%	C.I. (95%)			
1330	581	40.5	36.6-44.4	749	59.5	55.6-63.4				

	_PASTRNG: Muscle Strengthening Recommendation									
RESPONDE	Meet muscle strengthening recommendations			Did not meet muscle strengthening recommendations						
TOTAL WEIGHTED		N	%	C.I. (95%)	N	%	C.I. (95%)			
1374	379	32.8	28.5-37.1	995	67.2	62.9-71.5				

	_PASTAER: Aerobic and Strengthening (2-level)										
RESPONDE	Met	Both G	uidelines	Did Not Meet Both Guidelines							
TOTAL	WEIGHTED	N	%	C.I. (95%)	N	%	C.I. (95%)				
1310	113,460	232	19.7	16.4-23.0	1078	80.3	77.0-83.6				

QLACTLM2	2: Are you limit			any activities al problems?	because	of phys	sical, mental,	
RESPONDE	NT NUMBER		Ye	S	No			
TOTAL	WEIGHTED	N	%	C.I. (95%)	N	%	C.I. (95%)	
1392	120,327	391	391 25.3 22.0-28.6 1001 74.7					

	USEEQUIP: Do you now have any health problem that requires you to use special equipment, such as a cane, a wheelchair, a special bed, or a special telephone?										
RESPONDE	NT NUMBER		Yes	6	No						
TOTAL	WEIGHTED	N	C.I. (95%)	N	%	C.I. (95%)					
1395	1395 120,735 163 8.3 6.50-10.1 1232 91.7 89.9-93.5										

NOTE:

_RFSE	_RFSEAT2: Always or Nearly Always Wear Seat Belts Calculated Variable									
RESPONDE		s or Alm Vear Se	nost Always at Belt	Sometimes, Seldom, or Never Wear Seat Belt						
TOTAL	TOTAL WEIGHTED			C.I. (95%)	N	%	C.I. (95%)			
1391	120,520	1358	96.9	95.3-98.5	33	3.1	1.50-4.70			

_FLSH	_FLSHOT5: Adults aged 65+ who have had a flu shot within the past year										
RESPONDE	NT NUMBER		Ye	5	No						
TOTAL	WEIGHTED	N % C.I. (95%) N % C				C.I. (95%)					
434	434 21,763 276 59.3 52.8-65.8 158 40.7 34.2-47						34.2-47.2				

_PNEUMO2: Adults aged 65+ who have ever had a pneumonia vaccination										
RESPONDE	Yes			No						
TOTAL	WEIGHTED	N	%	C.I. (95%)	N	%	C.I. (95%)			
419 20,866 307 69.6 62.9-76.3 112 30.4 23.7-37.										

DRNKANY	DRNKANY5: Adults that report having had at least one drink of alcohol in the past 30 days.										
RESPONDE	NT NUMBER	Yes			No						
TOTAL	WEIGHTED	N	%	C.I. (95%)	N	%	C.I. (95%)				
1371 119,213 685 52.1 48.0-56.2 686 47.9 43.8-52.0											

_RFBIN	_RFBING5: Binge drinkers (males having five or more drinks on one occasion, females having four or more drinks on one occasion)										
RESPONDE	NT NUMBER		No	,	Yes						
TOTAL	WEIGHTED	WEIGHTED N % C.I. (95%)					C.I. (95%)				
1362 118,307 1196 83.8 80.3-87.3 166 16.2 12.7-19.7											

NOTE:

_RFDRH	_RFDRHV4: Heavy drinkers (adult men having more than two drinks per day and adult women having more than one drink per day)									
RESPONDE	NT NUMBER	No			Yes					
TOTAL	WEIGHTED	N	%	C.I. (95%)	N	%	C.I. (95%)			
1366	1366 117,975 1297 95.4 94.0-96.8 69 4.6 3.20-6.00									

NOTE:

Behavioral Risk Factor Surveillance System

Delaware

Sussex

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	GENHLTH: Would you say that in general your health is:															
RESPONDENT NUMBER Excellent Very good					ood	Good			Fair			Poor				
TOTAL	WEIGHTED	N	%	C.I. (95%)	N	N % C.I. (95%)			%	C.I. (95%)	N	%	C.I. (95%)	N	%	C.I. (95%)
1330	156,963	204	15.5	12.8-18.2	456	34.2	30.7-37.7	423	31.7	28.2-35.2	172	12.6	10.2-15.0	75	6.0	4.20-7.80

_RFHLTH: Adults with good or better health										
RESPONDE	NT NUMBER	Goo	d or Bet	ter Health	Fair or Poor Health					
TOTAL	WEIGHTED	N	%	C.I. (95%)	N	%	C.I. (95%)			
1330 156,963 1083 81.4 78.5-84.3 247 18.6 15.7-21.5										

	HLTHPLN1: Do you have any kind of health care coverage, including health insurance, prepaid plans such as HMOs, or government plans such as Medicare, or Indian Health Service?										
RESPONDE	NT NUMBER		Ye		No						
TOTAL WEIGHTED N % C.I. (95%) N % C.I. (95%)							C.I. (95%)				
1330	1330 156,625 1212 86.2 83.1-89.3 118 13.8 10.7-16.9										

_HCVU651: Respondents aged 18-64 that have any form of health care coverage										
RESPONDE	NT NUMBER	Have h	ealth ca	re coverage	Do not have health care coverage					
TOTAL WEIGHTED N 9				C.I. (95%)	N	%	C.I. (95%)			
762 111,084 655 82.2 78.1-86.3 107 17.8 13.7-21.9										

_TOTINDA: Adults that report doing physical activity or exercise during the past 30 days other than their regular job									
RESPONDE	Had p	hysical exerc	activity or ise	No physical activity or exercise in last 30 days					
TOTAL	N	%	C.I. (95%)	N	%	C.I. (95%)			
1320 156,300 938 68.6 65.1-72.1 382 31.4 27.9-34.9									

NOTE:

_RFHYPE5: Adults who have been told they have high blood pressure by a doctor, nurse, or other health professional									
RESPONDE	NT NUMBER		No	,	Yes				
TOTAL	WEIGHTED	N	%	C.I. (95%)	N	%	C.I. (95%)		
1329	156,718	720	720 61.6 58.3-64.9 609 38.4 35.1-41.7						

BLOODCHO: Blood cholesterol is a fatty substance found in the blood. Have you EVER had your blood cholesterol checked?									
RESPONDE	NT NUMBER		Yes	5	No				
TOTAL	WEIGHTED	N	N % C.I. (95%) N % C.I. (95%)						
1305	152,266 1213 88.5 85.4-91.6 92 11.5 8.40-14.6								

	_CHOLCHK: Cholesterol check within past five years										
RESPONDENT NUMBER Had cholesterol checked in past 5 years						Did not have cholesterol checked in past 5 years			Have never had cholesterol checked		
TOTAL	WEIGHTED N % C.I. (95%) N % C.				C.I. (95%)	N	%	C.I. (95%)			
1296	151,314	1166	85.7	82.6-88.8	38	2.7	1.50-3.90	92	11.6	8.50-14.7	

_RFCHOL: Adults who have had their cholesterol checked and have been told by a doctor, nurse, or other health professional that it was high									
RESPONDE	NT NUMBER		No	,	Yes				
TOTAL	WEIGHTED	N	%	C.I. (95%)	N	%	C.I. (95%)		
1208	1208 134,425 599 54.9 51.2-58.6 609 45.1 41.4-48.8								

CVDINFR4: (Ever told) you had a heart attack, also called a myocardial infarction?										
RESPONDE	NT NUMBER		Yes	s	No					
TOTAL	WEIGHTED	N	N % C.I. (95%) N % C.I. (95%							
1327	1327 156,742 98 6.8 4.80-8.80 1229 93.2 91.2-95.2									

NOTE:

CVDCRHD4: (Ever told) you had angina or coronary heart disease?									
RESPONDE	NT NUMBER	Yes			No				
TOTAL	WEIGHTED	N	%	C.I. (95%)	N	%	C.I. (95%)		
1326 156,654 86 5.6 4.20-7.00 1240 94.4 93.0-95.8									

CVDSTRK3: (Ever told) you had a stroke.										
RESPONDE	NT NUMBER		Yes	S	No					
TOTAL	WEIGHTED	N	%	C.I. (95%)	N	%	C.I. (95%)			
1329 156,907 60 3.4 2.40-4.40 1269 96.6 95.6-97.6										

-	_LTASTH1: Adults who have ever been told they have asthma										
RESPONDE		No	,	Yes							
TOTAL	WEIGHTED	N	%	C.I. (95%)	N	%	C.I. (95%)				
1331	157,105	1174	86.8	84.3-89.3	157	13.2	10.7-15.7				

_C.	_CASTHM1: Adults who have been told they currently have asthma										
RESPONDE	RESPONDENT NUMBER				Yes						
TOTAL	WEIGHTED	N	%	C.I. (95%)	N	N %					
1330	157,008	1215 90.9		88.7-93.1	115	9.1	6.90-11.3				

_DRDXAR1: Respondents that have had a doctor diagnose them as having some form of arthritis									
RESPONDE	Diagn	osed w	ith arthritis	Not diagnosed with arthritis					
TOTAL	WEIGHTED	N % C.I. (95%)			N	%	C.I. (95%)		
1329	156,914	515 33.6 30.3-36.9 814 66.4 63.							

NOTE:

	DIABETE3: (Ever told) you have diabetes												
RESPONDENT NUMBER Yes				but female told only uring pregnancy No			No, pre-diabetes or borderline diabetes						
TOTAL	WEIGHTED	N	%	C.I. (95%)	N	%	C.I. (95%)	N	%	C.I. (95%)	N	%	C.I. (95%)
1330	156,989	174	10.7	8.70-12.7	5	0.3	0.10-0.50	1128	87.8	85.8-89.8	23	1.3	0.70-1.90

	CHCSCNCR: (Ever told) you had skin cancer?										
RESPONDE	NT NUMBER		Yes	S	No						
TOTAL	WEIGHTED	N % C.I. (95%)			N	%	C.I. (95%)				
1330	157,024	175	9.5	7.70-11.3	1155	90.5	88.7-92.3				

	CHCOCNCR: (Ever told) you had any other types of cancer?										
RESPONDE	RESPONDENT NUMBER			6	No						
TOTAL	WEIGHTED	N % C.I. (95%)			N	%	C.I. (95%)				
1330	157,058	147	9.0	7.20-10.8	1183	91.0	89.2-92.8				

CHCCOP	CHCCOPD: (Ever told) you have (COPD) chronic obstructive pulmonary disease, emphysema or chronic bronchitis?										
RESPONDE		Ye	S	No							
TOTAL	WEIGHTED	N % C.I. (95%)			N	%	C.I. (95%)				
1328	156,823	124	8.1	6.30-9.90	1204	91.9	90.1-93.7				

CHCKIDNY: (Ever told) you have kidney disease? Do NOT include kidney stones, bladder infection or incontinence.									
RESPONDE		Yes	S	No					
TOTAL	WEIGHTED	N	%	C.I. (95%)	N %		C.I. (95%)		
1327	156,257	39	2.2	1.40-3.00	1288	97.8	97.0-98.6		

NOTE:

CHCVISON	CHCVISON: Has a doctor, nurse or other health professional ever said that you have vision impairment in one or both eyes, even when wearing glasses?										
RESPONDE		Yes			No		Respondent is blind				
TOTAL	WEIGHTED	N	%	C.I. (95%)	N	%	C.I. (95%)	N	%	C.I. (95%)	
1328	156,871	362	26.4	23.1-29.7	964	73.6	70.3-76.9	2	0.0	0.00-0.00	

	ADDEPEV2: (Ever told) you that you have a depressive disorder, including depression, major depression, dysthymia, or minor depression?									
RESPONDE		Ye		No						
TOTAL	WEIGHTED	N % C.I. (95%)			N	%	C.I. (95%)			
1332	157,169	189	189 14.8 12.1-17.5 1143 85.2 82.5-87.							

	_RFSMOK3: Adults who are current smokers										
RESPONDE		No	,	Yes							
TOTAL	WEIGHTED	N % C.I. (95%)			N	%	C.I. (95%)				
1327	156,702	1098	79.0	75.9-82.1	229	21.0	17.9-24.1				

	_SMOKE	ER3: Fou	ır-level	smoker status	s: Every	_SMOKER3: Four-level smoker status: Everyday smoker, Someday smoker, Former smoker, Non-smoker											
RESPONDENT NUMBER				oker - now very day			oker - now me days	Former smoker			Never smoked						
TOTAL	WEIGHTED	N	%	C.I. (95%)	N	%	C.I. (95%)	N	%	C.I. (95%)	N	%	C.I. (95%)				
1327	156,702	173	16.3	13.4-19.2	56	4.7	3.10-6.30	499	33.9	30.6-37.2	599	45.1	41.4-48.8				

	_BMI5CAT: Four-categories of Body Mass Index (BMI)												
RESPONDENT NUMBER Underweight			eight	Normal Weight			Overweight			Obese			
TOTAL	WEIGHTED	N	%	C.I. (95%)	N	%	C.I. (95%)	N	%	C.I. (95%)	N	%	C.I. (95%)
1262 149,495 24 1.7 0.70-2.70 400 31.4 27.9-34.9 450 33.3 30.0-36.6 388 33.7									30.2-37.2				

NOTE:

	_PAINDEX: Physical Activity Index										
RESPONDE	NT NUMBER	Meet Aerobic Recommendations			Do Not Meet Aerobic Recommendations						
TOTAL WEIGHTED		N	%	C.I. (95%)	N	%	C.I. (95%)				
1261	149,023	615	46.9	43.2-50.6	646	53.1	49.4-56.8				

	_PASTRNG: Muscle Strengthening Recommendation									
RESPONDE	Meet muscle strengthening recommendations			Did not meet muscle strengthening recommendations						
TOTAL WEIGHTED		N	%	C.I. (95%)	N	%	C.I. (95%)			
1305	154,853	355	29.5	26.0-33.0	950	70.5	67.0-74.0			

	_PASTAER: Aerobic and Strengthening (2-level)										
RESPONDE	Met	Both G	uidelines	Did Not Meet Both Guidelines							
TOTAL	WEIGHTED	N	N % C.I. (95%)			%	C.I. (95%)				
1246	147,549	237	19.4	16.5-22.3	1009	80.6	77.7-83.5				

QLACTLM2	2: Are you limit			any activities al problems?	because	of phys	sical, mental,		
RESPONDE	NT NUMBER		Ye	S	No				
TOTAL	N	%	C.I. (95%)	N	%	C.I. (95%)			
1318	318 155,451 368 24.8 21.9-27.7 950 75.2 72.3-78.1								

	USEEQUIP: Do you now have any health problem that requires you to use special equipment, such as a cane, a wheelchair, a special bed, or a special telephone?									
RESPONDE	NT NUMBER		Yes	S	No					
TOTAL	WEIGHTED	N	%	C.I. (95%)	N	%	C.I. (95%)			
1318	1318 156,073 155 8.6 6.80-10.4 1163 91.4 89.6-93.2									

NOTE:

_RFSE	_RFSEAT2: Always or Nearly Always Wear Seat Belts Calculated Variable									
RESPONDE	NT NUMBER	Always or Almost Always Wear Seat Belt			Sometimes, Seldom, or Never Wear Seat Belt					
TOTAL	TOTAL WEIGHTED		%	C.I. (95%)	N	%	C.I. (95%)			
1319	156,306	1282	95.9	94.3-97.5	37	4.1	2.50-5.70			

_FLSH	_FLSHOT5: Adults aged 65+ who have had a flu shot within the past year										
RESPONDE	NT NUMBER		Yes	6	No						
TOTAL	TOTAL WEIGHTED			C.I. (95%)	N	%	C.I. (95%)				
540 42,880 375 66.7 62.0-71.4 165 33.3 28.6-38.0											

_PNEU	_PNEUMO2: Adults aged 65+ who have ever had a pneumonia vaccination										
RESPONDE	NT NUMBER		Ye	5	No						
TOTAL	TOTAL WEIGHTED			C.I. (95%)	N	%	C.I. (95%)				
524 41,441 394 72.1 67.4-76.8 130 27.9 23.2-32.6											

DRNKANY!	DRNKANY5: Adults that report having had at least one drink of alcohol in the past 30 days.										
RESPONDE	NT NUMBER		Yes	6	No						
TOTAL	TOTAL WEIGHTED			C.I. (95%)	N	%	C.I. (95%)				
1296 152,143 717 56.3 52.6-60.0 579 43.7 40.0-47.4											

_RFBIN	_RFBING5: Binge drinkers (males having five or more drinks on one occasion, females having four or more drinks on one occasion)										
RESPONDE	NT NUMBER	No			Yes						
TOTAL	N	%	C.I. (95%)	N	%	C.I. (95%)					
1287 150,889 1132 82.7 79.6-85.8 155 17.3 14.2-20.4											

NOTE:

_RFDRH	_RFDRHV4: Heavy drinkers (adult men having more than two drinks per day and adult women having more than one drink per day)									
RESPONDE	NT NUMBER	No			Yes					
TOTAL	WEIGHTED	N	%	C.I. (95%)	N	%	C.I. (95%)			
1290	151,321	1214	1214 92.8 90.8-94.8 76 7.2 5.20-							

NOTE: