2016 Weld County Community Health Survey

Key Findings - Part III Healthy Lifestyle Behaviors



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Introduction

We are pleased to present the results of the 2016 Weld County Community Health Survey (CHS) to the community. It is a primary source of meaningful, local-level health data for Weld County residents. Every three years a random sample of households from four geographic areas is selected by mail to complete the survey. The North region includes Windsor, Eaton, Ault, and other communities to the north; the Southwest Region includes Firestone, Frederick, Johnstown, Mead, Milliken, Platteville, and more; the Southeast region includes Dacono, Erie, Ft. Lupton, Kersey, La Salle, and more; and the Central Region includes Greeley and Evans. In 2016, over 2,000 adult residents or about 1% of the total adult population completed the survey either on paper or online. Results from this survey provide local-level data on health status, health behaviors, and health concerns and needs of residents in Weld County. This survey is part of the Health Department's continuous effort to understand resident's health and encourage ongoing community dialogue about health issues and concerns through the collection of information and data.

The Importance of Local Level Data

There is a variety of health data available at the county level that are used to inform health strategic planning and policies. However, county level averages can mask important differences in health behaviors and outcomes between certain groups of people. For example, health insurance rates vary widely around the county. The 2016 CHS found the countywide uninsured rate was 7%. In the Greeley/Evans region, about 8% were uninsured, however, in the Southeast region, only 5% were uninsured, a rate lower than the county rate. Furthermore, the uninsured rate among the working age (18 to 64-year-old) Hispanic population living in Weld County was found to be 14%, a rate about twice the county rate. Based on these findings, resources can be targeted where they are needed most. This is just one example of how local level data can be used to highlight the areas of need and potentially help direct resources.

It is at the local level where health improvement interventions are implemented. But if we don't have an accurate picture of the health of local communities and the issues that impact local community health, then it is difficult to develop and monitor effective interventions to improve health and quality of life of residents. It is equally difficult to set priorities and targets to direct efforts where they are needed most, to create community-level solutions that respond to the every-day realities of local residents,

and to decrease health disparities where they exist.

It is with this in mind that the community health survey was initiated in 2007 in order to achieve the following objectives:

- Assess the health status of county residents,
- Understand important variations in health measures within the county, and
- > See if certain population groups were disproportionately more (or less) healthy than other groups.

How Data Were Analyzed

Systematic data analysis is necessary to identify and understand current and emerging trends in health behaviors, disease incidence, and other factors in order to understand the magnitude of health problems and their potential causes, as well as aid in designing and evaluating programs and interventions.

In addition to examining countywide population estimates, the survey sample data were examined by:

- 1. Region
- 2. Age group
- 3. Hispanic or Latino origin
- 4. Education level
- Income level
- 6. Federal poverty status level
- 7. Health insurance status

Wherever possible, countywide data were also compared against state and national data and over time. Data were analyzed using SPSS or Sudaan. Several statistical techniques were used to analyze the survey data including simple point estimates, confidence intervals, rates, ratios, and group difference tests.



About the Key Findings Reports

There are five community health survey key findings reports. They are:

- ١. **Health Status and Conditions**
- II. Health Insurance, Access, and Use
- **Healthy Lifestyle Behaviors** (including healthy III. eating and active living, community priority issues) – this report
- IV. Social-Emotional Wellbeing (community priority issue)
- ٧. Risky Lifestyle Behaviors (including alcohol, tobacco, marijuana, and distracted driving)

Each report contains a finding summary, key findings, and conclusions section.

In addition to the key findings reports, there are several surveyrelated data products available. To access these products go to www.weldhealth.org. Weld County Department of Health and Environment staff welcomes questions and comments about the survey and findings from the public. Please call 970-407-2221 or email ckronauge@weldgov.com if you have comments or questions.

Healthy Lifestyle Behaviors Finding Summary

- Countywide, about 8 in 10 residents did not meet the recommendation for fruit and vegetable consumption of five or more servings per day.
- Between 2013 and 2016, the percentage of Weld County residents who consumed 3 or more servings of vegetables decreased slightly.
- About 8 in 10 Weld County adults consumed at least one serving of fruit per day.
- Countywide, just under half of residents consumed one or more sugar sweetened beverages per day.
- Many more Hispanic residents consumed sugar sweetened beverages at least once per day compared to non-Hispanic residents.
- Sugar sweetened beverage consumption was higher among people who lived in Greeley/Evans compared to other county regions and those whose income was less than \$16,000.
- Countywide, about 3 in 4 residents reported they participated in physical activity for exercise in the past month. This was about the same as the nationwide percentage (74%) but

- lower than the percentage for Colorado residents (82%).
- Among all residents, about 3 in 10 said they were moderately active, about 5 in 10 were highly active, and about 2 in 10 engaged in little to no activity in the week prior to completing the survey.

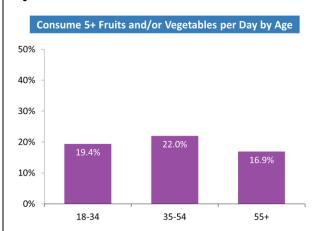
Key Findings

Fruit and Vegetable Consumption

The national recommendation is at least five total servings of fruit and vegetables be consumed per day, including at least three servings of vegetables and two servings of fruit. Fruit and vegetable consumption can help maintain health by reducing the risk of overweight, obesity and chronic diseases including cancer, hypertension and type 2 diabetes. The 2016 Community Health Survey asked residents to report the average number of servings of fruit (not counting juice) and vegetables they consumed per day.

Countywide, 20% met and 80% did not meet the recommendations for fruit and vegetable consumption.

Figure 1

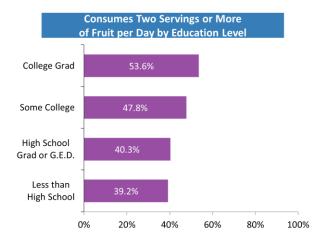


Fruit and vegetable consumption varies by age. About 1 in 5 adults aged 18 to 34 years consumed the recommended amount whereas only 1 in 6 adults aged 55 years or older consumed 5 and/or more fruits and vegetables a day (Figure 1).

Residents with at least a college degree most often met the daily recommendation of at least 2 servings of fruit per day (53.6%; Figure 2).

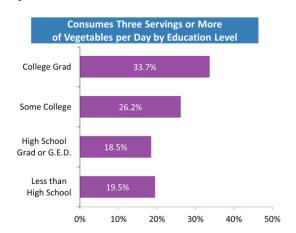


Figure 2



The percentage of Weld County residents who consumed 3 or more servings of vegetables per day decreased slightly from 27% in 2013 to 25% in 2016.

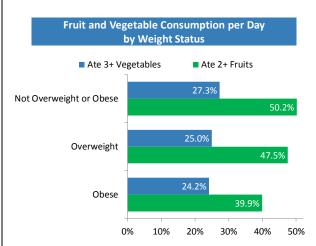
Figure 3



Only about 1 in 3 residents with a college degree met the daily recommendation of 3 or more servings of vegetables per day (Figure 3). Younger adults (aged 18 to 34 years) more often met the daily recommendation of 3 or more servings of vegetables per day (28%) than those who were 35 to 54 years old (26%) or 55 years and older (21%).

Fruit and vegetable consumption also varied by weight status. Residents who are not overweight or obese consume more fruits (50%) and vegetables (27%) compared to obese residents (40% and 24%, respectively; Figure 4).

Figure 4



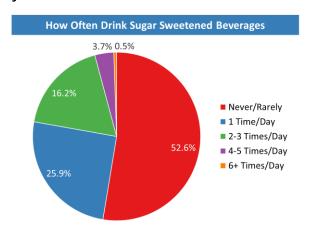
Countywide, 42% of people expressed some level of concern about access to affordable, fresh foods and 22% reported they were very concerned. This concern was even more common among residents living at or below 100% of the federal poverty level* (57%).

Sugar Sweetened Beverage Consumption

Reducing consumption of calories from added sugars is an objective of Healthy People 2020. Daily consumption of sugar sweetened beverages is associated with chronic health conditions such as diabetes and cardiovascular disease.

In the 2016 CHS, a sugar sweetened beverage was defined as any drink with added sugar, syrups or sweeteners but not diet, sugarfree, or 100% fruit juices. Countywide, 47% of people consumed one or more sugar-sweetened beverages per day (Figure 5).

Figure 5





Sugar sweetened beverage consumption was higher among people who lived in Greeley/Evans (49%; Figure 6) and residents whose income was less than \$16,000 per year (63%).

Figure 6

Drink Sugar Sweetened Beverages at Least Once Per Day by Region

North	45.5%
Southwest	46.7%
Southeast	44.6%
Greeley/Evans	49.1%

More Hispanic residents (69%) consumed sugar sweetened beverages at least once per day compared to non-Hispanic residents (40%; Figure 7).

Figure 7

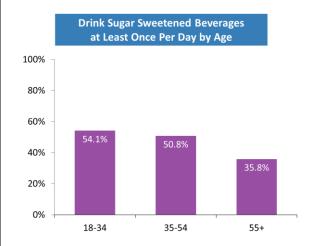
Drinks Sugar Sweetened Beverages at Least Once Per Day by Ethnicity



Hispanic **Not Hispanic** VS.

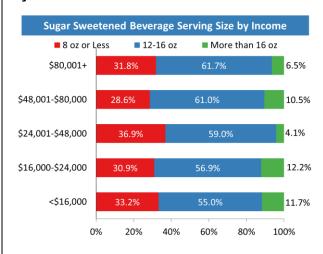
Sugar sweetened beverage consumption also varied by age. Over half (54%) of adults between 18 to 34 years drank sugar sweetened beverages at least once per day whereas about onethird (36%) of adults 55 years or older drank sugar sweetened beverages (Figure 8).

Figure 8



Most people from each annual household income group who drank sugar sweetened beverages reported they typically drank a 12-16 ounce serving size (Figure 9). About one third from each income group reported they typically drank 8-ounce servings or smaller (Figure 9).

Figure 9



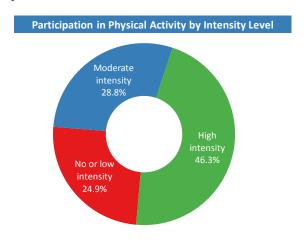
Physical Activity

Moderate physical activity adds up to as much as 150 minutes of qualifying activity per week (or less if some activity is more vigorous). Countywide, 74% of residents participated in physical activity for exercise in the past month. This was about the same as the nationwide percentage (74%) and lower than percentage for



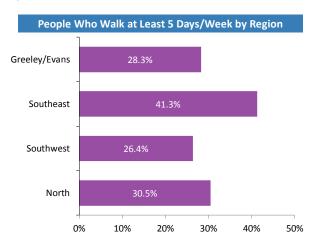
Colorado residents (82%). In 2013, a similar percentage (75%) of residents reported participating in physical activity for exercise.

Figure 10



In terms of actual physical activity level, almost three in ten (29%) were active with moderate intensity and another 46% were active with high intensity (Figure 10).

Figure 11



Residents in the Southeast region most often reported walking at least 5 days per week (41%), whereas residents in the Southwest region least often reported walking at least 5 days per week (26%; Figure 11).

Conclusions

Even though increased fruit and vegetable consumption has been shown to help maintain and improve one's health, only about 2 in 10 residents meet the recommended quideline of three or more servings of vegetables and two or more servings of fruit per day.

Another concern is the consumption of sugar sweetened beverages. Many residents consume sugar sweetened beverages at least once per day and in larger quantities. Also, consumption rates are higher among Hispanic residents, those living in the Greeley/Evans areas, and low-income residents.

On a positive note, many people report participating in physical activity for exercise. Also, many residents report they are active at a moderate or high level.

In conclusion, these results related to healthy eating and active living, as well as the other key findings from the 2016 Community Health Survey, will be used by Weld County and its partners to further shape Weld County's community health improvement plan, the Health Department's strategic plan, and the community's priorities in order to help Weld County's ongoing health improvement efforts.

