

# 2016 Weld County Community Health Survey

Key Findings - Part V  
Risky 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
5. 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:

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

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

In addition to the key findings reports, there are several survey-related data products available. To access these products go to [www.weldhealth.org](http://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 [kronauge@weldgov.com](mailto:kronauge@weldgov.com) if you have comments or questions.

## Risky Lifestyle Behaviors Finding Summary

- Countywide, 5 in 10 residents reported they were current alcohol users whereas statewide, 6 in 10 reported they had at least one alcoholic drink in the past 30 days.
- Alcohol use was reported more often among residents who were younger or had more education.
- 31% of residents reported at least one episode of binge drinking in the previous month.
- Nearly 1 in 6 people in Weld County use tobacco. The adult smoking rate in Weld County was lower than the state and U.S. rates.
- Smoking was more prevalent among lower income residents.
- Cigarette smoking has decreased in Weld County since 2007. The percent of residents who chew tobacco decreased slightly from 2013 to 2016.
- Countywide, about 10% of residents reported current marijuana use, which is lower than Colorado's rate of 14%.
- Marijuana use among 18 to 34-year-old has nearly doubled from about 8% in 2013 to about 15% in 2016.

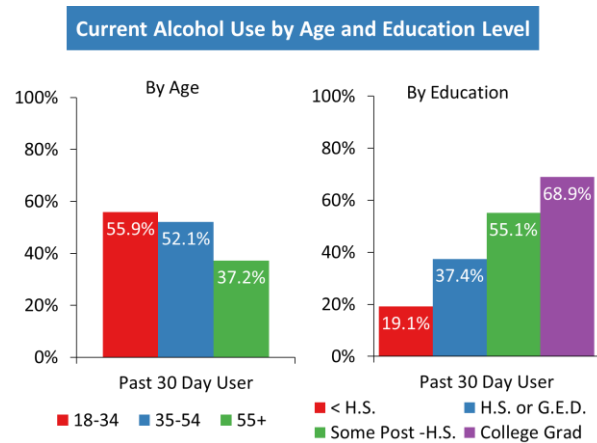
- Most residents who used marijuana reported they had used marijuana ten or more times in the 30 days prior to being surveyed.
- Among Weld County drivers, 9 in 10 said they always used a seatbelt when driving.
- Countywide, 76% residents talk on the phone while driving but 82% of 18 to 34-year-old residents said they talked on the phone and drove.
- Countywide, 4 in 10 Weld County residents reported they texted or emailed while driving whereas six in ten 18 to 34-year-old residents texted or emailed while driving.
- More than 8 in 10 Weld County drivers reported they never drive after drinking alcohol and more than 9 in 10 drivers say they never drive after using marijuana.

## Key Findings

### Alcohol

Alcohol is Colorado's most frequently abused substance, and is associated with health risks including injury, violence, liver disease, and cancer. Countywide, 48.9% of residents reported they were current alcohol users. Statewide, 61% had at least one alcoholic drink in the past 30 days. Alcohol use was reported more often among residents who were younger or had more education (Figure 1).

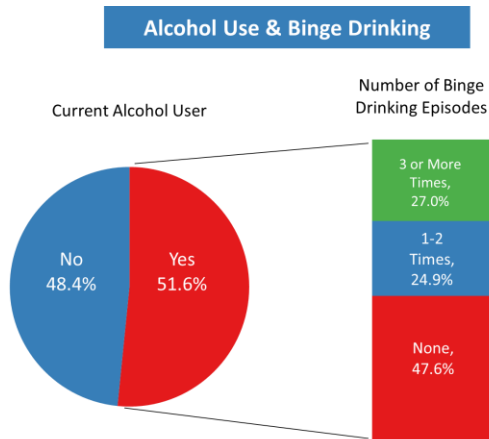
Figure 1



An episode of binge drinking is defined as five or more drinks on one occasion for men, and four or more drinks on one occasion for women. 31% of residence reported at least one episode of binge drinking in the previous month (Figure 2). This is much higher

than the statewide binge drinking rate of 18%.

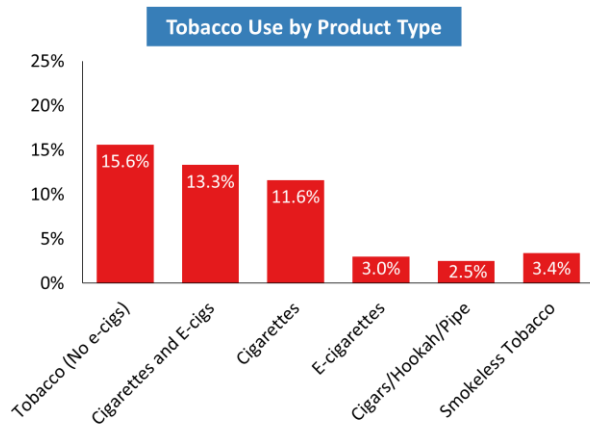
Figure 2



### Tobacco

Reducing illness, disability and death related to tobacco use and secondhand smoke exposure is a goal of Healthy People 2020. The Community Health Survey asked residents whether they had used certain tobacco product some days, every day, or not at all. Those who used a product some days or every day were considered current users of that product. Nearly one in six people in Weld County use tobacco (17%; Figure 3). The adult smoking rate in Weld County (15%) was lower than the rate across Colorado (16%) and the U.S. (18%).

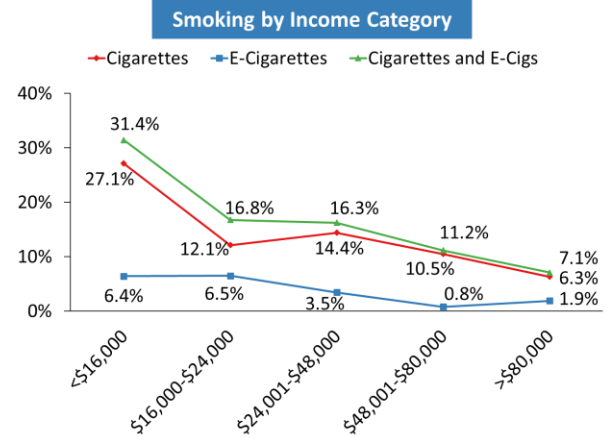
Figure 3



Smoking was more prevalent among lower income residents: 31% of those whose household income is less than \$16,000 per year

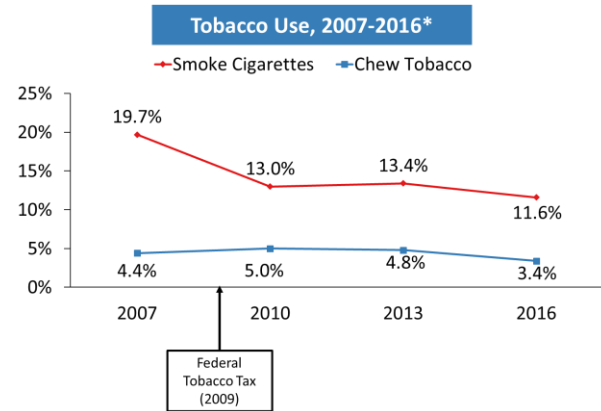
smoke cigarettes or e-cigarettes (Figure 4).

Figure 4



Cigarette smoking has decreased in Weld County since the federal tobacco tax was implemented in 2009. In 2007, 19.7% of residents smoked cigarettes; in 2010 and 2013, only about 13% of residents smoked cigarettes and in 2016 only 11.6% residents smoked cigarettes (Figure 5). The percent of residents who chew tobacco has decreased slightly from 4.8% to 3.4% from 2013 to 2016 (Figure 5).

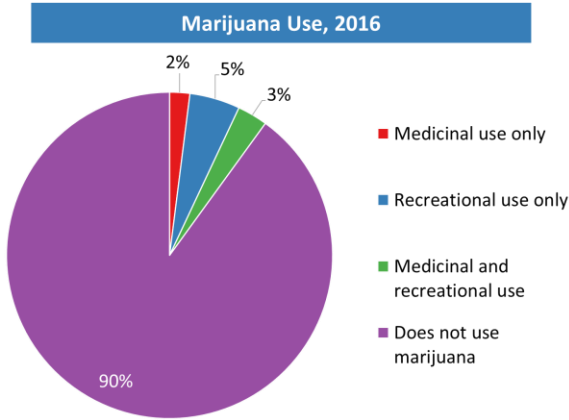
Figure 5



### Marijuana

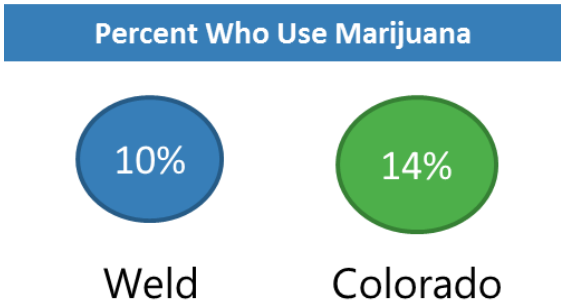
Countywide, 10% of residents reported current marijuana use; about 5% are recreational marijuana users; 2% are medicinal users; and 3% use marijuana medicinally and recreationally (Figure 6).

Figure 6



Weld County's marijuana use rate is lower than Colorado's (14%; Figure 7).

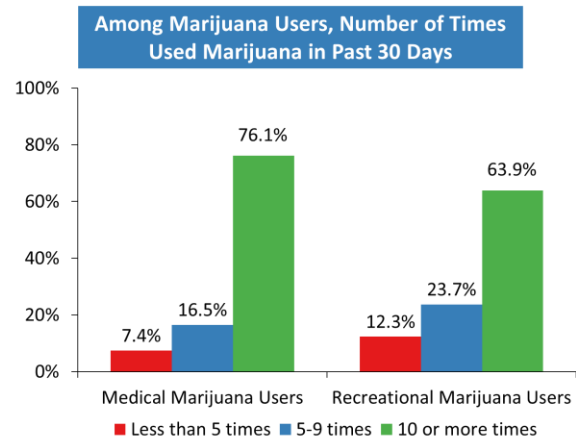
Figure 7



About 1 in 7 (14.9%) 18 to 34-year-olds reported current marijuana use compared to 8.4% of 35 to 54-year-olds and 5.2% of adults 55 years or older. The rate of marijuana use among 18 to 34-year-olds nearly doubled since 2013 when it was about 8%. Some income groups report using marijuana more than others. Marijuana use among people with a household income less than \$16,000 was 15% compared to only 6% among people with household incomes greater than \$80,000 per year.

Most residents who used marijuana for medicinal or recreational use reported they had used marijuana ten or more times in the 30 days prior to being surveyed; 76% of medical marijuana users and 64% of recreational marijuana users (Figure 8).

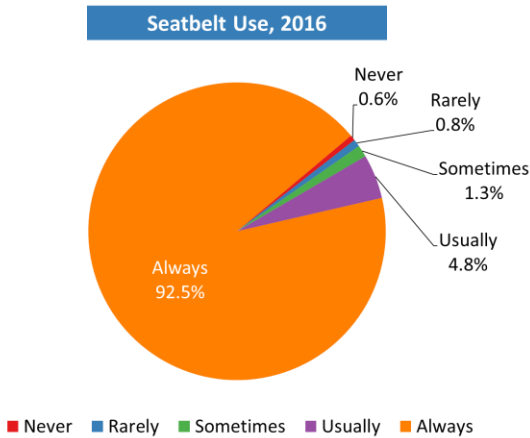
Figure 8



Driving Behaviors

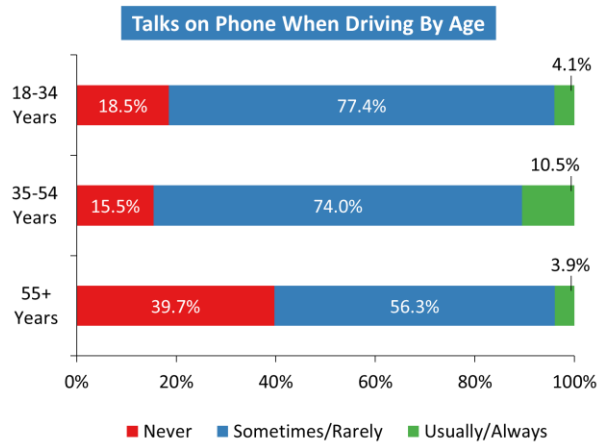
Among Weld County drivers, 93% always use a seatbelt when driving (Figure 9). This percentage went up slightly compared to 2013 when 88% said they always use their seatbelt.

Figure 9



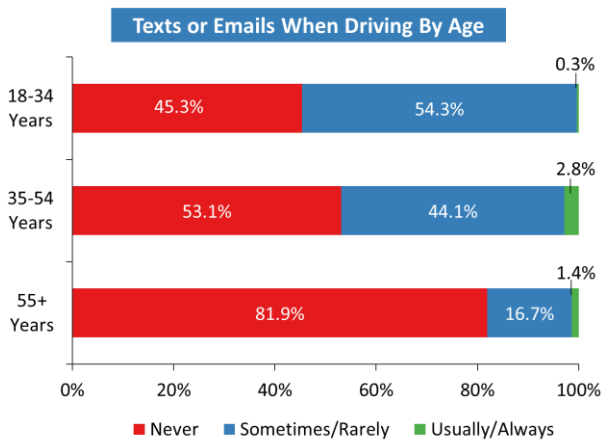
Countywide, 76% of residents talk on the phone while driving. However, 82% of 18 to 34-year-old residents said they talked on the phone and drove (at least rarely; Figure 9) whereas 60% of residents 55 years or older said they talked on the phone while driving (Figure 10).

Figure 10



Countywide, 41% of Weld County residents texted or emailed while driving whereas 55% of 18 to 34-year-old residents texted or emailed while driving (at least rarely; Figure 10). In comparison, 18% of residents 55 years or older texted or emailed while driving (Figure 11).

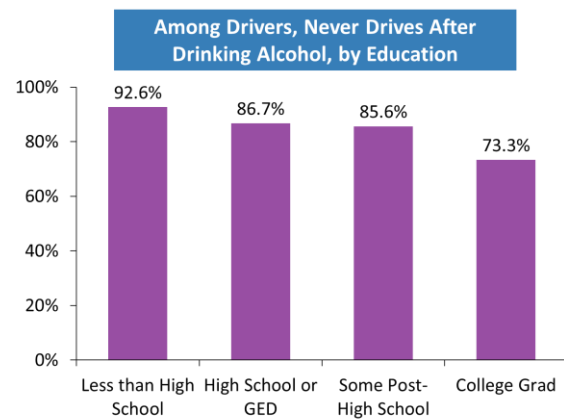
Figure 11



More than eight in ten (84%) Weld County drivers reported they never drive after drinking alcohol, and 16% of drivers reported they rarely or sometimes drive after drinking alcohol. Less than one percent reported they usually or always drive after drinking alcohol.

Over 9 in 10 drivers with less than a high school education reported they never drive after drinking alcohol, whereas only about 3 in 4 drivers who had graduated from college reported they never drive after drinking (Figure 12).

Figure 12



Even fewer drivers reported driving after using marijuana. Of all Weld County drivers, 96% reported they never drive after using marijuana.

## Conclusions

Among the risky lifestyle behaviors reported here, binge drinking among adult residents is a behavior of concern that needs further examination. Although tobacco use, especially cigarette smoking, in Weld County declined, it appears that some current and new users are shifting to e-cigarette consumption making it more difficult to understand tobacco use trends. Interestingly, marijuana use in Weld County is below Colorado’s rate. However, the rate among younger adults has nearly doubled since 2013. Although the percentage of residents using seatbelts has gone up since 2013, there is room for improvement. Finally, many residents are engaging in the risky driving behaviors of texting, emailing or talking on the phone while driving. While these behaviors are not unique to Weld County residents, the high rates are especially concerning given that traffic fatalities and injuries are such a problem in the county and statewide.

In conclusion, these results related to risky lifestyle behaviors, 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.