

PUBLIC HEALTH IMPROVEMENT PARTNERSHIP

LOCAL PUBLIC HEALTH INDICATORS

The Public Health Indicators workgroup - part of the Washington State Public Health Improvement Partnership - selected 35 local public health indicators to measure community-based results and outcomes of the state's public health system. The indicators are a mix of health status and health determinants. They measure six key aspects of public health:

Community Context

- Communicable Disease
- Prevention and Health Promotion
- Maternal and Child Health
- Access to Care
- Environmental Health

Following is the list of indicators by category, and a brief statement of the rationale and data source for each one.

COMMUNITY CONTEXT

Percent of people living at or below the U.S. federal poverty level

People living in poverty have poorer health status and die at younger ages than people with more financial resources. (*U.S. Census Small Area Income and Poverty Estimates*)

COMMUNICABLE DISEASE

Rate of reported Chlamydia infections per 100,000 women ages 15–24

Reported rates of this disease are highest among young women. (*Sexually Transmitted Disease Registry*)

Percent of reported Chlamydia infections that received treatment in women ages 15–24

A focus on investigating and treating reported cases of Chlamydia helps to limit the spread of disease and prevent recurrence. (*Sexually Transmitted Disease Registry*)

Percent of adults age 18 or older who report receiving a flu shot during the past 12 months

Flu shots are effective in reducing the number of people who get influenza, as well as influenza deaths and hospitalizations. (*Behavioral Risk Factor Surveillance System – BRFSS*)



Percent of children ages 19–35 months with complete vaccination records on file in the Child Profile Immunization Registry (4-DTP, 3-Polio, 1-MMR, 3-Hib, 3-HepB, 1-Varicella, 4-PCV)

Childhood immunizations have provided one of the greatest improvements in public health by controlling serious conditions such as measles, polio, diphtheria, and tetanus. (*Child Profile Immunization Registry*)

PREVENTION AND HEALTH PROMOTION

Expected years of healthy life at age 20

This is a widely used measure of quality of life. (*BRFSS and Death Certificate*)

Percent of adults age 18 or older who smoked at least 100 cigarettes in their lifetime and are current smokers

Cigarette smoking is a leading cause of premature, preventable disease and death in Washington. (*BRFSS*)

Percent of adults age 18 or older who report moderate physical activity (30 minutes a day, 5 times a week) or vigorous activity (20 minutes a day, 3 times a week) in work or leisure

Physical activity improves life expectancy, functional independence, and quality of life, and reduces the risk of developing many chronic conditions. (*BRFSS*)

Percent of adults age 18 or older who have body mass index 30 kg/m² or higher

An unhealthy weight is a leading cause of preventable, premature mortality and morbidity. (*BRFSS*)

Percent of adults age 18 or older who report eating fruits and vegetables 5 or more times per day

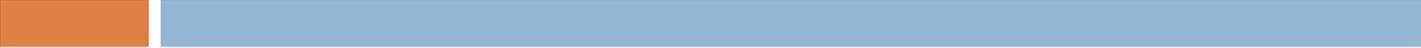
A nutritious diet, including sufficient consumption of fruits and vegetables, can reduce major risk factors for chronic diseases. (*BRFSS*)

Percent of adults age 18 or older who report binge drinking (5 drinks for men; 4 drinks for women) on at least 1 occasion in last 30 days

Binge drinking increases risk of morbidity and mortality from injury. (*BRFSS*)

Percent of adults age 18 or older who have ever been told by a doctor that they have diabetes

Diabetes is among the top 10 causes of death. Adult onset diabetes can be prevented through maintaining a healthy weight, being physically active, and eating a healthy diet. (*BRFSS*)



Percent of adults age 18 or older who report 14 or more days of poor mental health in the past month

Poor mental health is a major source of distress, disability, suicide and social burden. (BRFSS)

Rate of hospitalization for falls per 100,000 adults age 65 or older

Falls among older adults are the leading cause of injury-related hospitalizations in Washington. (*Comprehensive Hospital Abstract Reporting System, Oregon Hospital Discharge Data*)

ENVIRONMENTAL HEALTH

Percent of inspected permanent food establishments with 35 or more critical violations

Food service establishments with this level of violations pose the highest risk for causing food-borne outbreaks. (*DOH Division of Environmental Health*)

Percent of identified on-site sewage failures with corrective action initiated within 2 weeks

It is important to correct on-site sewage system failures when first detected to prevent surface and ground water contamination and risk to public health. (*DOH Division of Environmental Health*)

Percent of days meeting the Washington State Department of Ecology 24-hour average healthy air goal of ≤ 20 ug/m³ for particulate matter 2.5 microns in diameter or less (PM_{2.5})

Studies show serious negative health effects of exposure to PM_{2.5} (particulate matter of 2.5 microns or less). A safe level of exposure has not been established. The Department of Ecology established the goal of 20 ug/c³ to protect public health. (*Washington State Department of Ecology, Washington Tracking Network*)

MATERNAL AND CHILD HEALTH

Percent of women giving birth who received prenatal care starting in the first trimester of pregnancy

Early and continuous prenatal care long been recognized as an important way to improve the health of mothers and to prevent adverse birth outcomes. (*Birth Certificate*)

Percent of women giving birth who smoked any time during pregnancy

Tobacco smoking during pregnancy is the most important preventable cause of low birth weight. (*Birth Certificate*)



Pregnancy rate per 1,000 women ages 15-17

Teen pregnancy rates are used to evaluate teen pregnancy prevention efforts. Teen mothers are at high risk of dropping out of high school, and children born to teenage mothers are high risk of living in poverty and suffering adverse birth outcomes. (*Birth Certificate*)

Percent of live born singleton births with birth weight less than 2,500 grams

Low birth weight is a major contributor to infant morbidity and mortality. (*Birth Certificate*)

Percent of 10th graders who report physical activity 60 minutes a day, 5 or more days a week

Some immediate effects of physical activity include building and maintaining healthy bones and lean muscles, controlling weight, reducing feelings of depression and anxiety, and promoting psychological well-being. (*Healthy Youth Survey HYS*)

Percent of 10th graders who report smoking cigarettes in the last 30 days

Tobacco use, a leading cause of premature, preventable disease and death in Washington, often begins in adolescence. (*HYS*)

Percent of 10th graders in the top 15% body mass index by reported height and weight, based on CDC growth charts

Overweight and obese adolescents are at increased risk of adult obesity, a leading cause of preventable morbidity and mortality. (*HYS*)

Percent of 10th graders who report alcohol consumption in the past 30 days

Alcohol is often a factor in the four leading causes of death among 15–20-year-olds: vehicle crashes, homicides, suicides, and other unintentional injuries. (*HYS*)

Percent of 10th graders who report feeling sad or hopeless almost every day for two weeks in a row over the past year

Youth who report feeling sad or hopeless are at high risk of engaging in behaviors that negatively affect health. (*HYS*)

Rate of hospitalization for unintentional injury per 100,000 children ages 0–17

Unintentional injury is a leading cause of hospitalization and mortality among children. (Comprehensive Hospital Abstract Reporting System, Oregon Hospital Discharge Data)



ACCESS TO CARE

Percent of adults age 18 or older who report needing to see a doctor within the past year but could not due to cost

Inability to cover costs of health care may result in delays in treating health conditions, many of which have less serious consequences when treated early. (BRFSS)

Percent of adults age 18 or older who report having a personal doctor or health care provider

Having a personal doctor or health care provider supports prevention, early detection and treatment of disease. (BRFSS)

Percent of adults age 18 or older who report visiting a dentist, dental hygienist or dental clinic within the past year

Regular preventive dental care can reduce the development of disease and facilitate early diagnosis and treatment. (BRFSS)

Percent of women age 50 or older who report receiving a mammogram within the past 2 years

Breast cancer screening facilitates early detection and treatment of breast cancer, resulting in improved survival. (BRFSS)

Percent of women age 21 or older who report receiving a Pap smear test within the past 3 years

Cervical cancer screening allows for early detection and treatment of cervical cancer, resulting in improved survival. (BRFSS)

Percent of adults age 50 or older who had a blood stool test in the past year, sigmoidoscopy in the past 5 years, or colonoscopy in the past 10 years

Screening for colorectal cancer facilitates prevention, early detection and treatment, resulting in reduced incidence of disease and improved survival for those with colorectal cancer. (BRFSS)

Percent of adults ages 18-64 who currently report having health insurance

Health insurance facilitates receipt of preventive services and early diagnosis and treatment of disease. (BRFSS)

Percent of children ages 0-17 whose parents report they have health insurance

Health insurance facilitates receipt of preventive services and early diagnosis and treatment of disease. (BRFSS)