POTTER AND RANDALL COUNTY COMMUNITY HEALTH ASSESSMENT 2013

Prepared for:
Amarillo Department of Health

By:

Tyamesheia Young
Paul Ruggiere
Jesseca Short
Survey Research Center
University of North Texas

May 16, 2013

TABLE OF CONTENTS

LIST OF FIGURES

LIST OF TABLES

I. INTRODUCTION

With the financial support of Northwest Texas Health System, the University of North Texas Survey Research Center (SRC) designed and administered a community health assessment for the Amarillo Department of Health. The 2013 survey was conducted in February and March and is the fourth health survey that SRC has conducted for the city. The results of the survey provide an assessment of the well-being of citizens in the area and offer comparisons to national and state surveys where available.

Specific areas covered by the survey included:

- Access to health care;
- Treatment patterns for both adults and children, and;
- Health status.

The report is divided into five sections: introduction, methodology, sample characteristics, findings, and conclusions.

II. METHODOLOGY

Sample

The primary objective in drawing the sample was to get a representative sample of Potter and Randall County residents as a whole. Marketing Systems Group, SRC's primary sample supplier, estimates that 45 percent of the residents of Potter County and 39 percent of the residents of Randall County live in a household that is not served by a landline telephone. It was therefore important that both landline and cellphone sampling frames were used in this study.

A random digit dialing (RDD) methodology was used for each sampling frame. RDD was used as the method of sample generation because it offers the best coverage of active telephone numbers, and it reduces sample bias. The RDD method ensures that unlisted telephone numbers will be included and the sampling frame will be as current as possible, thus maximizing the probability that new residents will be included.

While numbers drawn were expected to be in one of the target counties, screening questions were used to verify that respondents lived in a target county. Screening questions were also asked of cell phone users to make sure the person was not driving and was in a safe place to respond to the survey. Phone numbers for the cell phone frame were dialed manually to comply with FCC regulations.

Questionnaire

The survey instrument for the 2013 survey was designed after consultation with the Department of Health staff. The instrument used in the 2013 survey incorporated many of the questions used in the 2010 survey so that comparisons of the results of the two surveys could be made. Some questions from 2010 were removed to make room for additional questions that were added. The BRFSS is commissioned by the Center for Disease Control nationwide. Since several of the questions in this questionnaire were copied from the BRFSS, it offers an opportunity to compare several local findings to state and national findings. (See Appendix A for a copy of the questionnaire.)

Data Collection

SRC's trained interviewers administered the survey. Training for all interviewers consisted of three basic elements. First, interviewers were informed about details of the survey. Such items as the reasons for doing the survey, the concept of a random sample, and the administration of the survey were discussed. Second, telephone-interviewing methods were presented. The interviewer's approach, methods of conducting an interview, interviewing problems, and standard procedures were covered. Finally, the trainees were familiarized with the questionnaire. Each question was discussed and the specific instructions on the questionnaire were explained. The interviewers were provided with written material on the interviewing process, and they were instructed to conduct several practice interviews.

All interviewing was conducted from SRC's telephone bank in Denton, Texas. An experienced telephone supervisor was on duty at all times to supervise the administration of the sample, monitor for quality control, and handle any other contingencies. Shifts of interviewers were used throughout the day and evening, both weekdays and weekends. All telephone numbers in the sample were tried at least eight times, using a rotating schedule of callbacks to ensure that a number had been tried on weekends, during weekday evenings, and during the day. Interviews were conducted between February 22 and March 11. As shown in Table 1, more cell phone interviews were conducted than landline interviews. When examining the household

status, a number of cellphone only, landline only and dual-use households were interviewed. This classification was an important component of the weighting methods described in the next section.

Table 1
Completed Interviews by Sampling Frame

	Potter County	Randall County
Sample Frame		
Cell phone interviews	203	222
Landline interviews	176	199
Total interviews	379	421
Household status		
Cell phone only	143	131
Dual use	170	240
Landline only	66	50
Total interviews	379	421

Sample Weighting Method

Virtually, all survey data are weighted before they can be used to produce reliable estimates of population parameters. The weighting method compensates for the selection probabilities of sampled units. Specifically, a cell-phone-only household will have a different selection probability than a household that has cell phones and a landline. Weighting also attempts to compensate for practical limitations of a sample survey, such as differential nonresponse and undercoverage of specified groups.

The weighting process for this survey therefore involved two major steps. The first step computes design weights to reflect unequal selection probabilities for different the cell phone and landline sampling frames and selection of one adult per household. In the second step, design weights were adjusted so that in the resulting final weights would produce a sample that reflects expected demographic totals for gender, race-ethnicity, age, and educational attainment.

Analysis and Reporting

The data file was analyzed using SPSS. All findings are weighted findings and sample sizes unless noted otherwise Frequency distributions for each survey questions and demographic characteristics were developed. Cross-tabulations of each question by selected demographic characteristics were then calculated.

The data are presented in tabular form with some descriptive comments and only preliminary interpretation and evaluation. The objectives were to secure overall perceptions and to identify particular health concerns for detailed evaluation by Department of Health staff. The analysis of the data involved two steps. First, the observed frequencies or percentages for each question were calculated. These frequencies are displayed in the report as the percent responding “yes” or “no” or “excellent,” “good,” “fair,” or “poor” to a question.

Upon completion of the first step, each question was then cross-tabulated with the seven descriptive characteristics indicated below. In order to ensure enough responses for valid cross-tabulations, demographic categories with a small number of responses were combined with other categories where noted below:

- Age
- Gender
- Ethnicity (Asian, Native Hawaiian/Other Pacific Islander, American Indian/Alaska Native, and Other were combined)
- Language of the interview
- Have children under 18 living in the household
- Education (less than high school and some high school were combined)
- Income (two highest categories were combined for comparison purposes)
- County

The eight characteristics comprise a set of independent variables that could help to explain variations among the responses of the respondents. In those instances where differences between demographic groups were statistically significant, the findings are detailed in tables or in text. If no demographic differences are discussed, one can assume that there were no differences between demographic groups on the question addressed.

Starting in 2004, the CDC began to experiment with cell phone sampling frames in the BRFSS. These pilot studies were used to refine cell phone sampling methods and weighting methods. The revised methods were then implemented for the 2011 BRFSS survey that was released in 2012. The CDC acknowledged that the inclusion of cellular phones and the refinement in weighting methods will likely have the effect of increasing the prevalence of some risk factors. The same is true of the Texas BRFSS and the 2013 Potter and Randall County assessment. The CDC makes the following recommendation:

> State and federal public health officials have expressed concern that trend line shifts in BRFSS prevalence estimates resulting from these changes in methods might be misinterpreted by the public, policy makers or legislators as real changes in the health behaviors of states' populations. This, in turn, could have adverse ramifications for public health funding and other support. The risk for misinterpretation can be reduced by a careful assessment of the changes in BRFSS health indicators in each state, and establishment of a proactive communication plan to explain the causes of discontinuities to public health officials, policy makers, legislators, and other nonscientific audiences.
>
> Interpretation of changes in prevalence from one year to the next is a difficult task, especially in years where methods are adjusted. Communication plans should emphasize that 1) shifts in prevalence estimates for 2011 might not represent trends in risk factor prevalence in the population but instead merely reflect improved methods of measuring risk factors, 2) occasional improvements in methods, with accompanying effects on results, have been a necessary part of all public health surveillance systems, including population surveys, and 3) the changes in BRFSS methods are especially important to keep up with changes in telephone use in the U.S. population and to take advantage of improved statistical procedures.[1]

Also when comparing between years, the reader should not only keep in mind the differences in methods, but also recognize that both Potter and Randall County were included in the 2013 assessment. In 2007 and 2010, only Potter County was surveyed.

[1] "Methodologic Changes in the Behavioral Risk Factor Surveillance System in 2011 and Potential Effects on Prevalence Estimates," June 8, 2012 / 61(22); 410-413.
http://www.cdc.gov/mmwr/preview/mmwrhtml/mm6122a3.htm

III. SAMPLE CHARACTERISTICS

Table 2
Sample Characteristics[1]

	Percentage Responding		
	Total	Potter	Randall
Age of respondent			
18 to 24	14.7	14.0	15.3
25 to 34	19.1	20.6	17.7
35 to 44	17.2	18.0	16.4
45 to 54	18.8	18.9	18.7
55 to 64	14.3	13.3	15.1
65 to 74	8.5	7.8	9.2
75 and older	7.4	7.4	7.5
Gender			
Female	50.6	49.1	51.9
Male	49.4	50.9	48.1
Race/ethnicity*			
White	65.5	51.9	77.7
African American	5.7	8.6	3.2
Hispanic	21.2	30.3	13.2
Asian	2.4	3.6	1.4
Native Hawaiian/Other Pacific Islander	0.1	0.1	0.0
American Indian/Alaska Native	4.5	4.5	4.6
Other	0.5	1.1	0.0
Language of interview			
English	94.4	89.8	98.6
Spanish	5.6	10.2	1.4
Education			
Less than high school	4.9	7.5	2.5
Some high school	11.7	17.5	6.5
High school graduate	26.5	29.5	23.9
Some college	36.5	32.1	40.4
College grad or more	20.4	13.4	26.6

- As shown in Table 2, half of the respondents in the sample were between the ages of 35 and 64 (50.3 percent) and were female (50.6 percent). Most of the respondents were White (65.5 percent), completed the interview in English (94.4 percent), and had some college experience or a degree (56.9 percent). “Less than high school and some high school were combined into one category, “less than high school graduate,” when running crosstabs in the remainder of the report.

[1] All data are weighted.
[*] All respondents reporting that they were Hispanic or Latino were categorized as “Hispanic” regardless of which race they selected.

Table 2
Sample Characteristics (Continued)

Demographic	Percentage Responding		
	Total	Potter	Randall
Income			
Under $15,000	19.5	24.6	14.7
$15,001 to $25,000	13.6	18.0	9.7
$25,001-$50,000	25.7	30.5	21.4
$50,001-$75,000	17.2	13.7	20.5
$75,001-$100,000	12.1	6.7	17.1
Over $100,000	11.9	6.6	16.7
Have children under 18 living in household			
Yes	40.8	44.4	37.5
No	59.2	55.6	62.5

- Forty-three percent of the respondents had incomes between $25,001 and $75,000. Twenty-four percent had incomes over $75,000. Forty-one percent of the sample had children under age 18 living in the household.

IV. FINDINGS

Access to Health Care

Figure 1
Respondent's State of Health

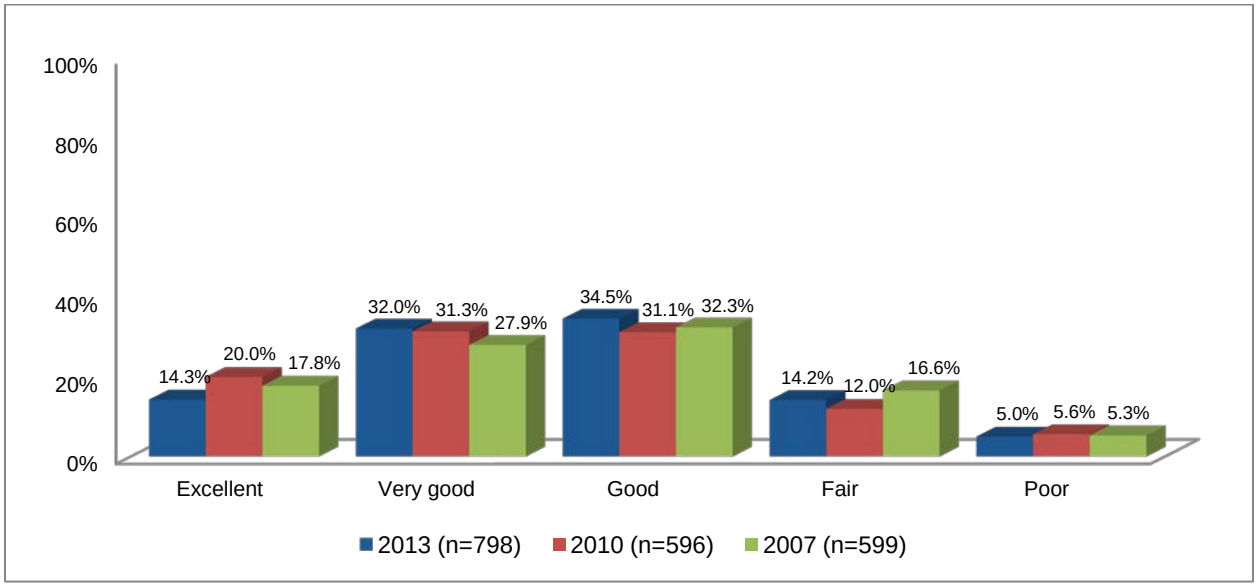


Table 3
"At Risk" Comparisons:
Respondent's State of Health

	Percentage At Risk
Nationwide 2011[1]	17.2
Texas 2011	19.0
ADH Service Area 2013	19.2

- Respondents were asked if, in general, their health was excellent, very good, good, fair or poor. As shown in Figure 1, 80.8 percent of the respondents reported their health was either excellent (14.3 percent), very good (32.0 percent) or good (34.5 percent).
- Those who reported that their health was either fair or poor were considered to be "at risk" and are shown in Table 3. The most recent data that was available for Texas and the nation is shown. The percentage of at risk respondents for the ADH service area Department of Health (ADH) service area 2013 is higher than respondents in nationwide (17.2 percent) and similar to Texas (19.0 percent) BRFSS surveys in 2011.

[1] Unless otherwise stated, Nationwide and Texas comparison data came from the Centers for Disease Control and Prevention (CDC). *Behavioral Risk Factor Surveillance System Survey Data*. Atlanta, Georgia: U.S. Department of Health and Human Services, Centers for Disease Control and Prevention, 2008 and 2009. Website: http://apps.nccd.cdc.gov/brfss/display.asp?cat=HS&yr=2011&qkey=8001&state=US

- The percentage of respondents who reported their health was either fair or poor ("at risk") decreased as education and income increased, generally increased as the age of the respondents increased. The percentage was higher among female respondents, African American respondents, respondents who completed the interview in Spanish, and respondents in Potter County (see Table 4).

Table 4
State of Health in General
By Selected Demographics

	Percentage At Risk
ADH Service Area	19.2
Education	
Less than HS grad	31.0
High school grad	18.9
Some college	18.6
College grad or more	11.6
Gender	
Female	22.2
Male	16.6
Age of respondent	
18 to 24	5.3
25 to 34	17.9
35 to 44	27.2
45 to 54	14.3
55 to 64	26.3
65 to 74	18.5
75 or older	33.3
Race/ethnicity	
White	15.2
Hispanic	23.3
African American	31.3
Other	18.7
Language of interview	
English	17.6
Spanish	49.4
Income	
Less than $15,000	37.9
$15,001 to $25,000	27.3
$25,001 to $50,000	20.2
$50,001 to $75,000	5.8
$75,001 to $100,000	10.0
Over $100,000	7.2
County	
Potter	24.1
Randall	14.8

Figure 2
Health Care Coverage

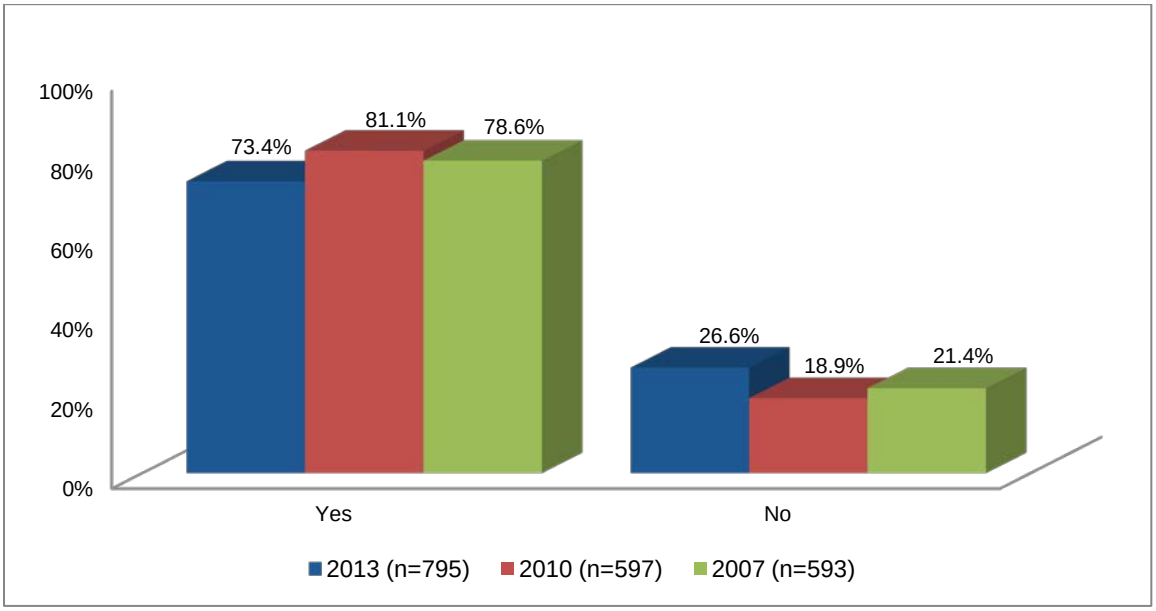


Table 5
"At Risk" Comparisons:
Health Care Coverage

	Percentage At Risk
Nationwide 2011	17.9
Texas 2011	29.8
ADH Service Area 2013	26.6

- Respondents were asked if they had any kind of health care coverage, including health insurance, prepaid plans such as HMOs, or government plans such as Medicare. As shown in Figure 2, 73.4 percent of the respondents reported they did have health care coverage.
- Twenty-seven percent of respondents reported they had no health insurance and were considered "at risk" (see Table 5). The ADH service area 2013 percentage is lower than Texas in 2011 but higher than Nationwide data in 2011.
- As shown in Table 6, the percentage of respondents who were at risk (had no health insurance) decreased as the age of the respondent, education and income increased and was higher among Hispanic respondents, respondents with children under 18 living in the household, and those who completed the interview in Spanish. A greater percentage of respondents living in Potter County stated they did not have insurance.

Table 6
Health Care Coverage
By Selected Demographics

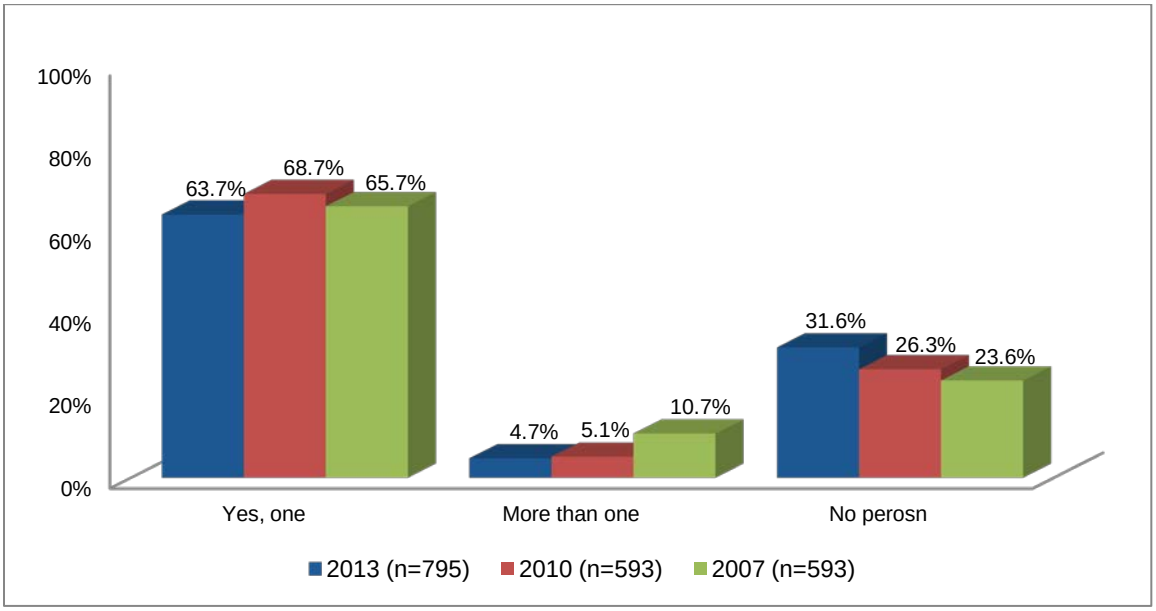
	Percentage responding	
	Yes	No
ADH Service Area	73.4	26.6
Education		
Less than HS grad	51.3	48.7
High school grad	69.7	30.3
Some college	75.8	24.2
College grad or more	90.9	9.1
Gender		
Female	76.6	23.4
Male	69.5	30.5
Age of respondent		
18 to 24	56.4	43.6
25 to 34	54.7	45.3
35 to 44	67.3	32.7
45 to 54	80.4	19.6
55 to 64	86.8	13.2
65 to 74	97.9	2.1
75 or older	92.5	7.5
Race/ethnicity		
White	81.6	18.4
Hispanic	50.0	50.0
African American	58.6	41.4
Other	58.9	41.1
Language of interview		
English	76.0	24.0
Spanish	25.9	74.1
Children under 18 in household		
Yes	65.3	34.7
No	78.5	21.5
Income		
Less than $15,000	58.5	41.5
$15,001 to $25,000	51.5	48.5
$25,001 to $50,000	69.8	30.2
$50,001 to $75,000	78.2	21.8
$75,001 to $100,000	98.2	1.8
Over $100,000	97.3	2.7
County		
Potter	64.7	35.3
Randall	81.2	18.8

Table 7
Type of Primary Health Insurance

	Percentage responding		
	2013 (n=573)	2010 (n=483)	2007 (n=465)
Health insurance through someone's work or union (includes HMO)	62.1	59.8	63.3
Medicare	20.8	19.2	22.5
Health insurance bought directly by yourself or family	8.6	13.4	6.0
Medicaid or public aid	4.4	4.0	3.1
Veteran's Administration/Military	1.3	2.7	2.2
Insurance through J.O. Wyatt or a District Clinic	2.6	0.6	2.0
Other	0.3	0.3	1.0

- Respondents who indicated they had some kind of health care coverage were asked to identify the type of primary health insurance. As shown in Table 7, 62.1 percent of the respondents with health care coverage had health insurance through someone's work or union (includes HMO). Twenty-one percent had Medicare.

Figure 3
Have Personal Doctor or Health Care Provider



- Respondents were asked if they had one person that they thought of as their personal doctor or health care provider. As shown in Figure 3, 63.7 percent of the respondents had a single personal doctor, while 4.7 percent reported they had more than one personal doctor. Over one-quarter (31.6 percent) indicated they did not have one person they thought of as their personal doctor.
- The percentage of respondents who had one person they thought of as their personal doctor or health care provider increased as the age of the respondent, education, and income increased, and was higher among female respondents, white respondents, and respondents who completed the interview in English (see Table 8). Respondents with children under 18 living in the household were more likely to report not having a personal doctor or health care provider compared to respondents without children under 18 living in the household.

Table 8
Have Personal Doctor or Health Care Provider
By Selected Demographics

	Percentage responding		
	One person	More than one person	No one person
ADH Service Area	63.7	4.7	31.6
Age of respondent			
18 to 24	33.9	4.1	62.0
25 to 34	45.8	2.1	52.1
35 to 44	65.8	1.1	33.1
45 to 54	63.1	10.7	26.2
55 to 64	88.2	4.7	7.1
65 to 74	92.0	1.3	6.7
75 or older	83.0	9.0	8.0
Gender of respondent			
Female	73.8	4.6	21.6
Male	53.1	4.7	42.2
Race/ethnicity			
White	70.5	4.4	25.2
African American	64.4	2.0	33.6
Hispanic	44.1	7.0	49.0
Other	58.4	3.2	38.4
Have children under 18 in household			
Yes	55.3	3.4	41.4
No	69.4	5.6	25.1
Education			
Less than HS grad	41.8	3.5	54.7
High school grad	61.9	5.5	32.6
Some college	65.8	5.4	28.8
College grad or more	79.9	3.2	16.8
Income			
Less than $15,000	55.8	2.7	41.5
$15,001 to $25,000	55.2	3.9	41.0
$25,001 to $50,000	55.8	4.5	39.7
$50,001 to $75,000	65.7	2.8	31.5
$75,000 to $100,000	83.9	5.7	10.4
Over $100,000	81.9	9.6	8.5
Language of interview			
English	65.5	4.7	29.8
Spanish	32.3	3.4	64.2

Figure 4
Needed to See Doctor But Could Not Due to Cost

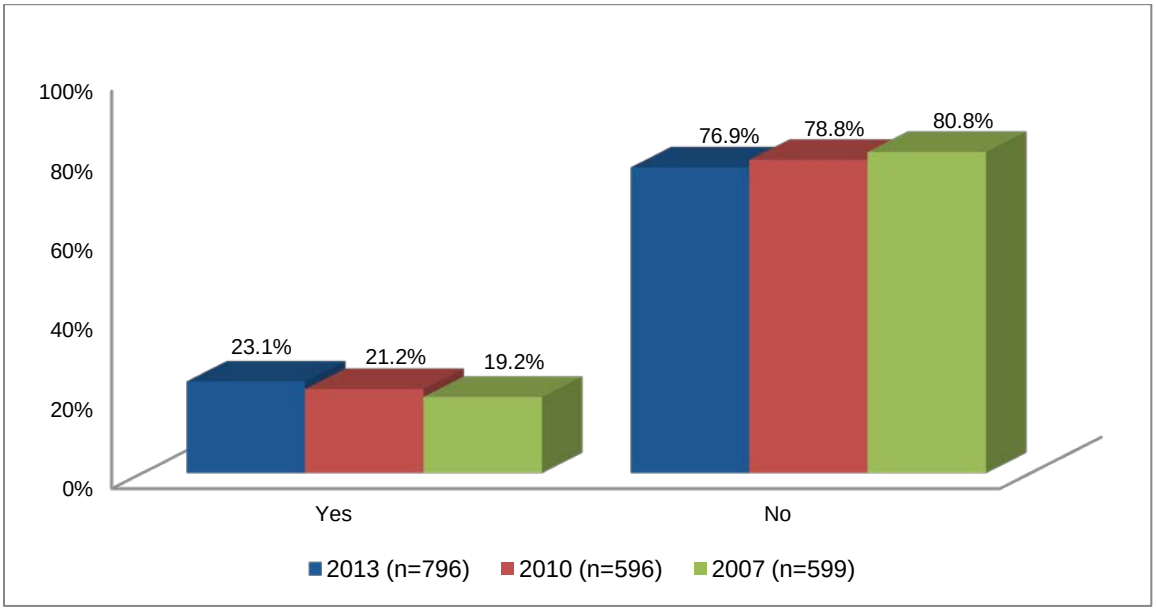


Table 9
"At Risk" Comparisons:
Needed to See Doctor But Could Not Due to Cost

	Percentage At Risk
Nationwide 2009[1]	14.9
Texas 2009	19.7
ADH Service Area 2013	23.1

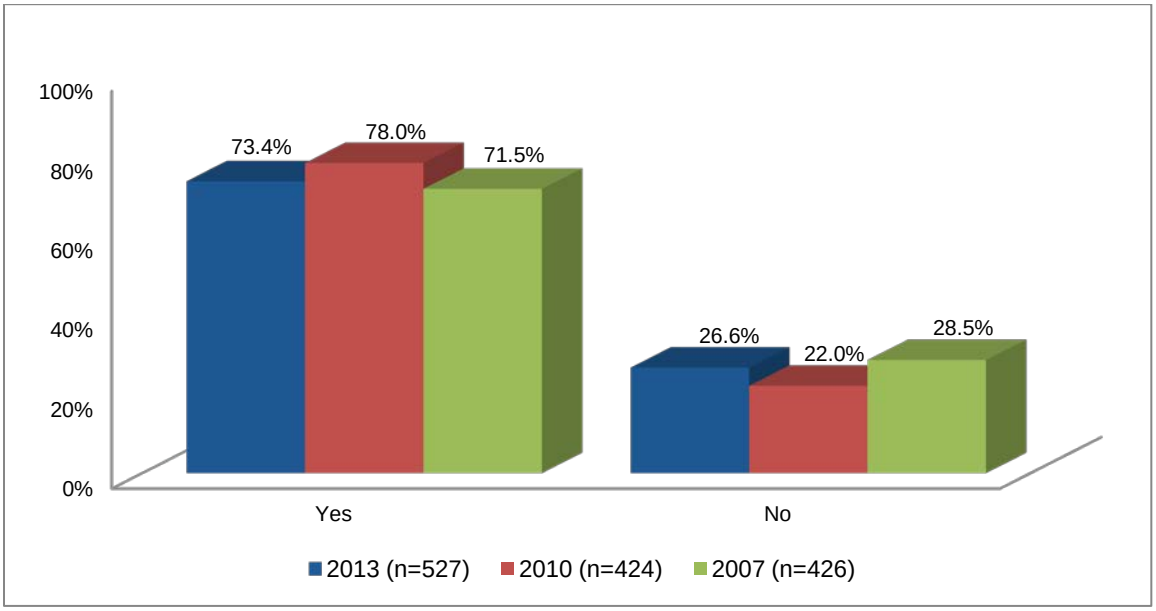
- Respondents were asked if there was a time in the past 12 months when they needed to see a doctor but could not because of cost. As shown in Figure 4, 23.1 percent of the respondents answered "yes."
- The "at risk" percentage for ADH service area 2013 was higher than Texas 2009 and Nationwide 2009 (see Table 9).
- The percentage of respondents who were at risk generally decreased as education, age of the respondent and income increased and was higher among respondents who have children under 18 living in the household and respondents living in Potter county (see Table 10).

[1] More recent National and Texas findings for this question were not available.
The Nationwide and Texas 2009 comparison data for this question was found at:
http://www.dshs.state.tx.us/chs/brfss/query/brfss_dbquery2.asp.

Table 10
Needed to See Doctor But Could Not Due to Cost
By Selected Demographics

	Percentage responding	
	Yes	No
ADH Service Area	23.1	76.9
Education		
Less than HS grad	34.0	66.0
High school grad	21.2	78.8
Some college	25.9	74.1
College grad or more	13.1	86.9
Gender		
Female	27.0	73.0
Male	19.7	80.3
Age of respondent		
18 to 24	22.4	77.6
25 to 34	30.0	70.0
35 to 44	34.6	65.4
45 to 54	23.1	76.9
55 to 64	18.7	81.3
65 to 74	12.8	87.2
75 or older	4.4	95.6
Race/ethnicity		
White	16.0	84.0
Hispanic	30.6	69.4
African American	41.0	59.0
Other	32.5	67.5
Language of interview		
English	21.7	78.3
Spanish	51.1	48.9
Children under 18 in household		
Yes	33.4	66.6
No	16.4	83.6
Income		
Less than $15,000	33.1	66.9
$15,001 to $25,000	31.8	68.2
$25,001 to $50,000	34.5	65.5
$50,001 to $75,000	12.3	87.7
$75,001 to $100,000	13.3	86.7
Over $100,000	4.7	95.3
County		
Potter	31.6	68.4
Randall	15.6	84.4

Figure 5
Spouse or Partner Has Health Insurance



- Respondents were asked if their spouse or partner had health insurance. Seventy-three percent of the respondents with a spouse or partner answered "yes" (see Figure 5).
- As shown in Table 11, the percentage of respondents whose spouse or partner had health insurance was higher among female respondents and respondents age 35 to 44. The percentage increased as education and income increased.

Table 11
Spouse or Partner Has Health Insurance
By Selected Demographics

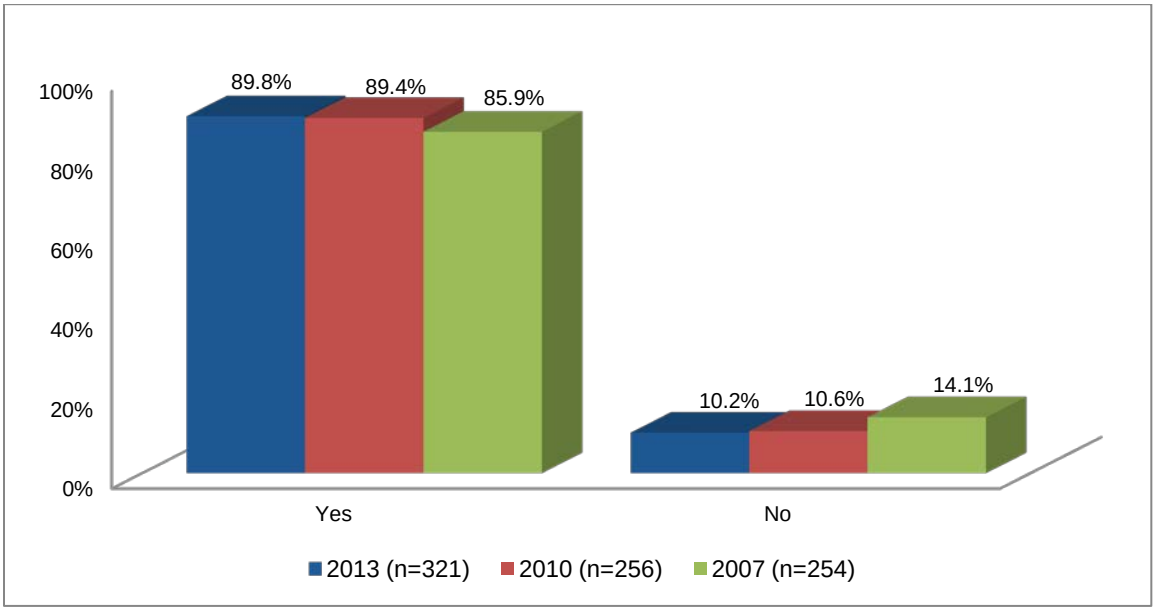
	Percentage responding	
	Yes	No
ADH Service Area	73.4	26.6
Education		
Less than HS grad	78.6	21.4
High school grad	88.2	11.8
Some college	94.4	5.6
College grad or more	95.1	4.9
Gender		
Female	93.3	6.7
Male	85.8	14.2
Age of respondent		
18 to 24	87.7	12.3
25 to 34	93.4	6.6
35 to 44	94.8	5.2
45 to 54	85.7	14.3
55 to 64	57.7	42.3
65 to 74	45.0	55.0
75 or older	92.5	7.5
Income		
Less than $15,000	80.1	19.9
$15,001 to $25,000	89.1	10.9
$25,001 to $50,000	83.6	16.4
$50,001 to $75,000	98.8	1.2
More than $75,000	97.0	3.0

Table 12
Spouse/Partner's Type of Primary Health Insurance

	Percentage responding		
	2013 (n=387)	2010 (n=328)	2007 (n=302)
Health insurance through someone's work or union (includes HMO)	66.2	71.9	78.5
Medicare	14.0	10.9	11.6
Health insurance bought directly by yourself or family	7.0	9.4	5.0
Medicaid or public aid	3.6	5.1	1.5
Insurance through a J.O. Wyatt or District Clinic	3.2	0.0	0.8
Veteran's Administration/Military	2.5	1.8	2.5
Not Applicable	3.3	-	-
COBRA	-	0.2	0.0
Other	0.2	-	-

- Respondents who indicated their spouse or partner had some kind of health care coverage were asked to specify the type of primary health insurance. As shown in Table 12, 66.2 percent of those respondents indicated they had health insurance through someone's work or union (includes HMO). Fourteen percent had Medicare.

Figure 6
Children Have Health Insurance



- Respondents with children were asked if their children had health insurance. As shown in Figure 6, 89.8 percent of those respondents reported their children did have health insurance.
- The percentage of respondents whose children had health insurance was higher among respondents who graduated college, respondents age 35 to 44, and those whose income was $75,001 to $100,000 (see Table 13).

Table 13
Children Have Health Insurance
By Selected Demographics

	Percentage responding	
	Yes	No
ADH Service Area	89.8	10.2
Education		
Less than HS grad	78.6	21.4
High school grad	88.2	11.8
Some college	94.4	5.6
College grad or more	95.1	4.9
Gender		
Female	93.3	6.7
Male	85.8	14.2
Age of respondent		
18 to 24	87.7	12.3
25 to 34	93.4	6.6
35 to 44	94.8	5.2
45 to 54	85.7	14.3
55 to 64	57.7	42.3
65 to 74	45.0	55.0
Income		
Less than $15,000	92.5	7.5
$15,001 to $25,000	80.1	19.9
$25,001 to $50,000	89.1	10.9
$50,001 to $75,000	83.6	16.4
$75,001 to $100,000	98.8	1.2
Over $100,000	97.0	3.0

Table 14
Children's Type of Primary Health Insurance

	Percentage responding		
	2013 (n=271)	2010 (n=229)	2007 (n=214)
Health insurance through someone's work or union (includes HMO)	48.9	60.8	61.9
Medicaid or public aid	39.4	23.0	31.5
Health insurance bought directly by yourself or family	5.0	13.6	3.9
CHIP	3.5	-	-
Insurance through a J.O. Wyatt or District Clinic	0.5	0.0	0.6
Medicare	0.5	1.8	1.5
Veteran's Administration/Military	0.2	-	-
Not Applicable	1.2	-	-
Other	1.2	0.7	0.6

- Respondents who indicated their children had health insurance were asked the type of primary health insurance. As shown in Table 14, 48.9 percent of respondents with children reported their child was covered by health insurance through someone's work or union (includes HMO). Thirty-nine percent had Medicaid or public aid.

Treatment Patterns

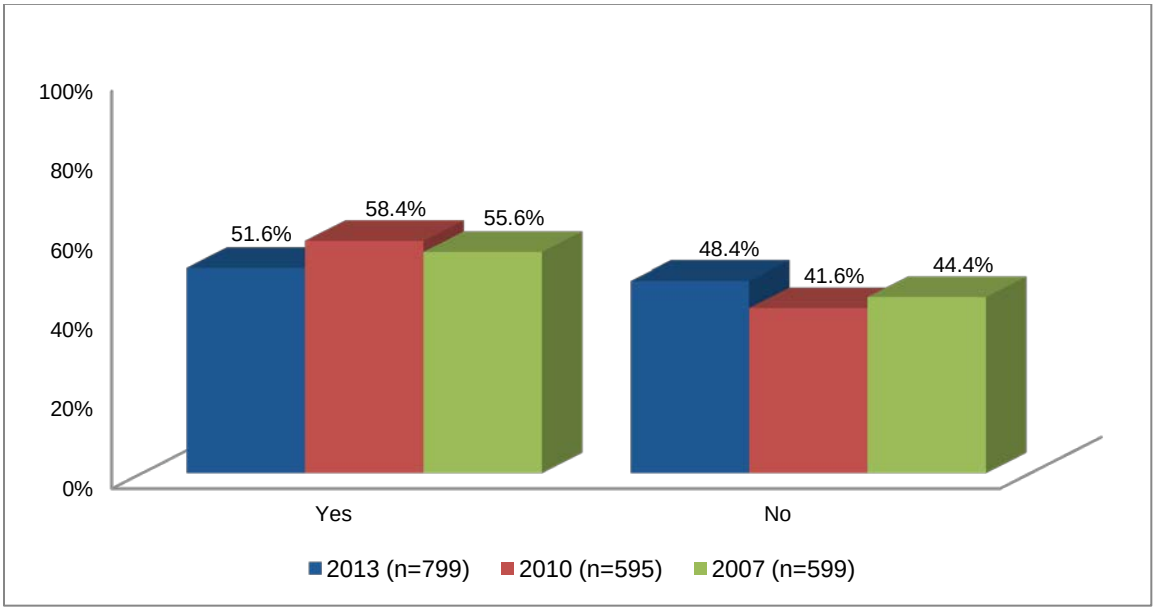
Adults

Table 15
Type of Health Care Most Likely to Use

	Percentage responding		
	2013 (n=786)	2010 (n=584)	2007 (n=585)
Doctor or HMO	51.5	60.8	58.9
Urgent Care Center	19.2	12.4	10.1
Hospital Emergency Room	13.9	12.7	16.3
J.O. Wyatt Clinic	8.9	5.3	5.2
Nurse Practitioner	-	3.0	3.6
Veteran's Hospital	2.3	1.6	1.7
Would not use any source	1.5	1.3	1.6
Other	1.2	0.8	1.6
Texas Tech	1.1	-	-
A clinic	-	1.1	-
A hospital	-	0.6	-
Regence health center	0.3	-	-
Depends on circumstances	0.1	0.2	0.9

- Respondents were asked if they or an adult member of their household were in need of health care which of the sources listed in Table 15 would they be most likely to use. Fifty-two percent of the respondents indicated they would use a doctor or HMO if they were in need of health care. Nineteen percent would use an urgent care center and 13.9 percent would use a hospital emergency room. Nine percent would use the J. O. Wyatt Clinic. Seven percent or less would use any of the other options mentioned.

Figure 7
Visited Doctor for Checkup

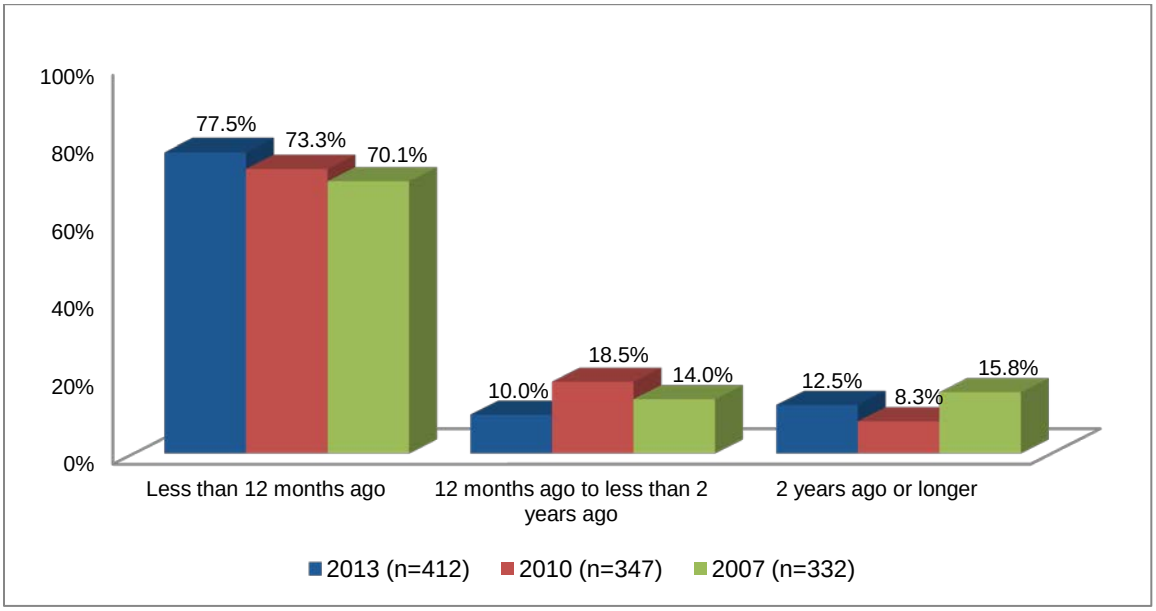


- Respondents were told, “Some people visit a doctor or clinic for a checkup even though they are feeling healthy. Have you ever done that for yourself?” As shown in Figure 7, 51.6 percent of the respondents reported getting a checkup even though they felt healthy.
- As shown in Table 16, the percentage of respondents who got a checkup even though they felt healthy generally increased up to age 64 then decreased with age, education and income increased, and was higher among female respondents and White respondents.

Table 16
Visited Doctor for Checkup
By Selected Demographics

	Percentage responding	
	Yes	No
ADH Service Area	51.6	48.4
Age of respondent		
18 to 24	43.9	56.1
25 to 34	35.3	64.7
35 to 44	44.1	55.9
45 to 54	60.7	39.3
55 to 64	71.9	28.1
65 to 74	62.7	37.3
75 or older	51.1	48.9
Race/ethnicity		
White	56.0	44.0
African American	50.1	49.9
Hispanic	44.6	55.4
Other	35.3	64.7
Gender		
Female	58.5	41.5
Male	44.4	55.6
Education		
Some high school or less	41.2	58.8
High school grad	46.1	53.9
Some college	52.0	48.0
College grad or more	66.7	33.3
Income		
Less than $15,000	38.6	61.4
$15,001 to $25,000	55.6	44.4
$25,001 to $50,000	45.6	54.4
$50,001 to $75,000	49.6	50.4
$75,001 to $100,00	62.1	37.9
Over $100,000	79.5	20.5

Figure 8
Most Recent Checkup

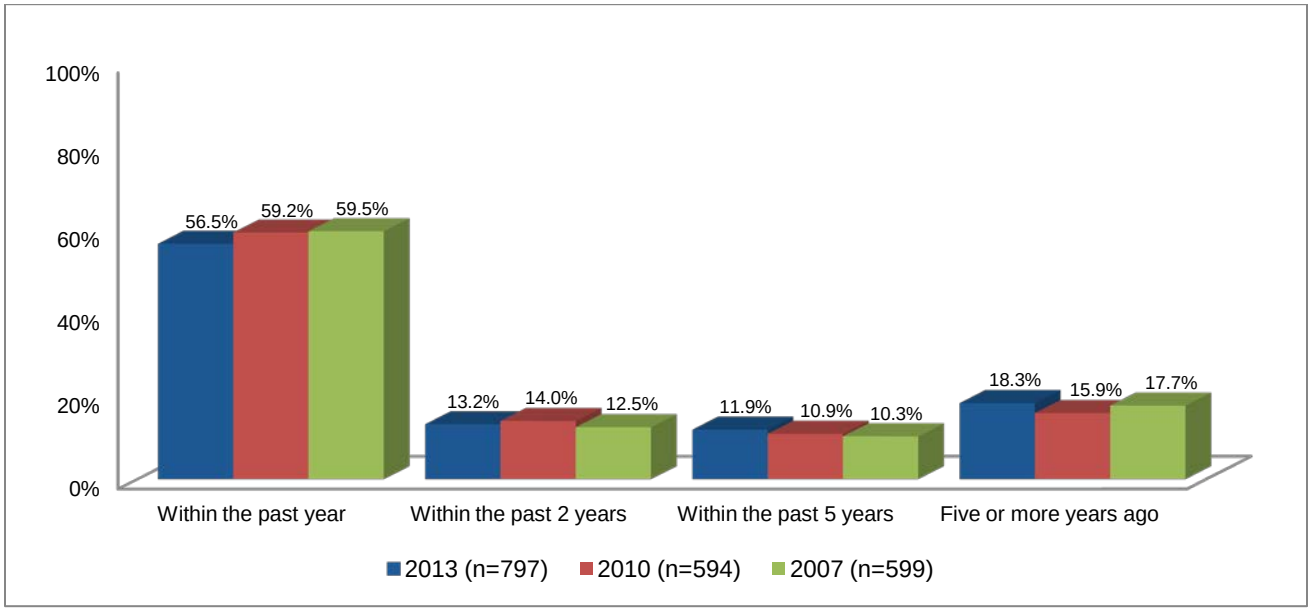


- Respondents who indicated they got a checkup even when they felt healthy were asked how long ago their most recent checkup was. As shown in Figure 8, 77.5 percent reported their last checkup was less than 12 months ago. Twenty three percent reported their checkup was either less than 2 years ago (10.0 percent) or longer than 2 years ago (12.5 percent).
- The percentage of respondents who got their most recent checkup less than 12 months ago was higher among female respondents, African American respondents, and respondents without children (see Table 17). Percentage varied by income.

Table 17
Most Recent Checkup
By Selected Demographics

	Percentage responding		
	Less than 12 months	Less than 2 years	Longer than 2 years
ADH Service Area	77.5	10.0	12.5
Gender of respondent			
Female	84.7	5.5	9.7
Male	67.8	15.8	16.4
Race/ethnicity			
White	77.4	11.3	11.3
African American	100.0	0.0	0.0
Hispanic	82.7	0.0	17.3
Other	38.1	33.3	12.7
Have children under 18 in household			
Yes	71.8	10.3	17.9
No	80.9	9.7	9.3
Income			
Less than $15,000	88.9	0.0	11.1
$15,001 to $25,000	81.1	5.7	13.2
$25,001 to $50,000	75.9	8.4	15.7
$50,001 to $75,000	73.8	13.1	13.1
$75,000 to $100,000	69.8	20.8	9.4
Over $100,000	83.6	6.0	10.4

Figure 9
Last Visited Dentist



- Respondents were asked how long it had been since they last visited a dentist or a dental clinic (including dental specialists such as orthodontists) for any reason. As shown in Figure 9, 56.5 percent of the respondents reported visiting a dentist or dental clinic within the past year.
- The percentage of respondents who reported they had visited a dentist or a dental clinic within the past year increased as education and income increased, and was higher among respondents living in Randall County, female respondents and respondents without children under 18 in the household (see Table 18).

Table 18
Last Visited Dentist
By Selected Demographics

	Percentage responding			
	Within past year	Less than 2 years	Less than 5 years	5 years or more
ADH Service Area	56.5	13.2	11.9	18.3
Age of respondent				
18 to 24	67.9	13.6	7.7	10.8
25 to 34	47.7	16.6	12.4	23.3
35 to 44	36.7	19.8	23.5	19.9
45 to 54	66.5	11.2	6.2	16.0
55 to 64	60.3	10.5	11.2	18.0
65 to 74	62.5	5.2	8.5	23.8
75 or older	59.3	9.3	12.3	19.0
Gender of respondent				
Female	60.6	11.3	12.2	15.9
Male	51.7	15.4	11.7	21.1
Education				
Less than HS grad	32.8	10.4	18.1	38.7
High school grad	57.0	12.0	10.0	21.0
Some college	55.1	18.5	12.9	13.6
College grad or more	76.6	8.3	7.9	7.2
Race/ethnicity				
White	63.0	12.5	9.7	14.8
African American	46.8	17.2	17.5	18.5
Hispanic	49.3	13.1	13.7	24.0
Other	23.9	19.4	23.3	33.4
Language of interview				
English	57.0	13.6	11.8	17.6
Spanish	42.7	8.4	15.1	33.9
Children under 18 in household			16.6	18.3
Yes	51.4	13.7		
No	59.5	13.1	8.8	18.6
Income				
Less than $15,000	35.0	13.8	13.9	37.4
$15,001 to $25,000	45.2	16.7	20.3	17.8
$25,001 to $50,000	51.1	13.0	16.0	19.9
$50,001 to $75,000	54.1	18.4	10.0	17.6
$75,001 to $100,000	70.8	17.7	5.8	5.8
More than $100,000	87.9	3.5	6.1	2.5
County			13.8	23.4
Potter	46.8	16.1		
Randall	65.4	10.7	10.2	13.8

Table 19
Type of Dental Care Most Likely to Use

	Percentage responding		
	2013 (n=771)	2010 (n=584)	2007 (n=576)
Private dentist	81.4	80.9	82.8
Community Dental Clinic	-	9.6	6.1
J.O. Wyatt Dental Clinic	5.9	3.1	4.3
South Plains Health Provider/RHN	3.9	1.5	2.1
Hospital Emergency Room	2.9	1.6	0.7
Dental School	1.0	-	-
Veteran's Hospital	0.8	0.4	0.3
Out of the country	0.4	-	-
Other	1.6	1.8	2.2
Would not use any source	2.1	1.1	1.6

- When respondents were asked if they or an adult member of their household were in need of dental care which of the sources listed in Table 19 they would be most likely to use, a large majority (81.4 percent) indicated they would use a private dentist.

Figure 10
Had Flu Vaccination in Past 12 Months[1]
(n=799)

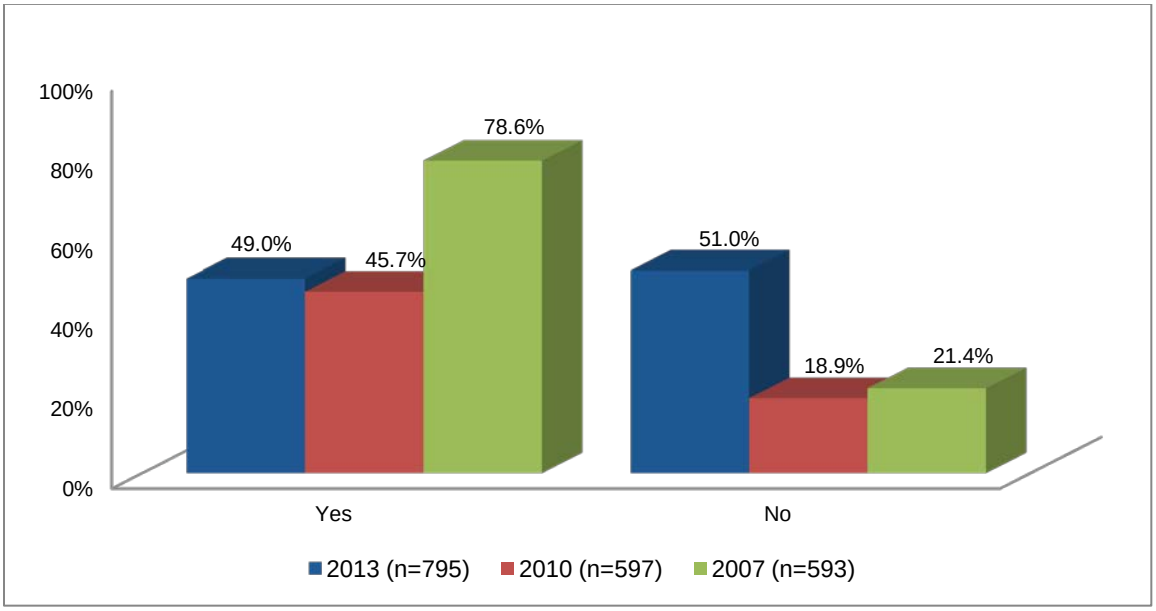


Table 20
"At Risk" Comparisons:
No Flu Vaccination

	Percentage At Risk
Nationwide 2011[1]	38.7
Texas 2011	40.9
ADH Service Area 2013	51.0

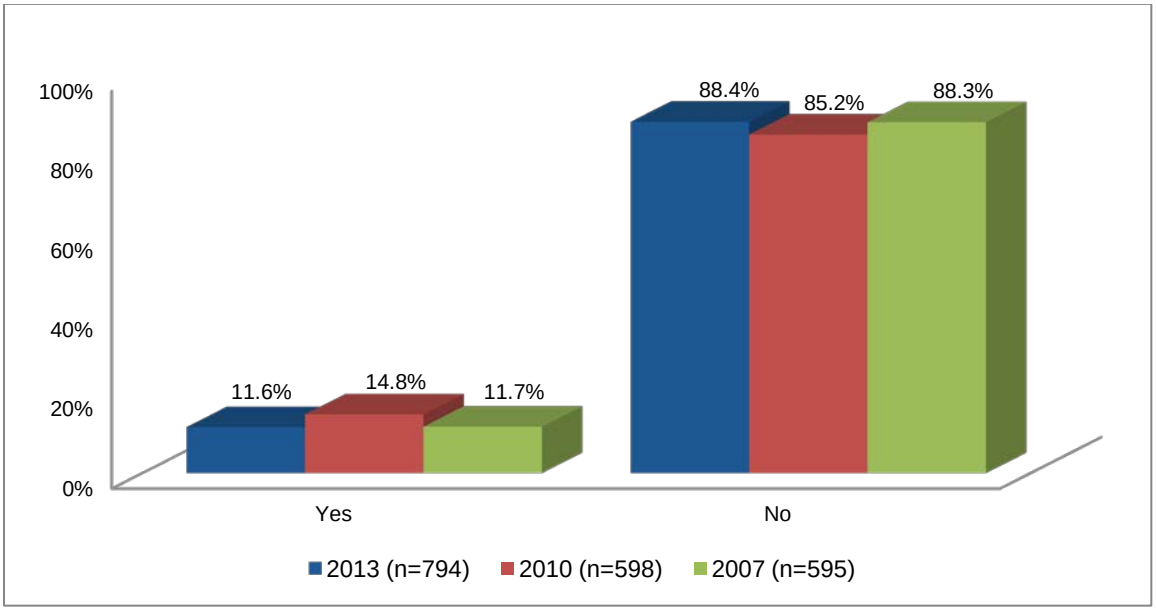
- Respondents were asked if they had gotten a flu shot (influenza vaccine) injected into their arm or flu vaccine sprayed in their nose in the past 12 months. As shown in Figure 14, 49.0 percent of the respondents reported getting a flu shot in the past 12 months.
- Fifty-one percent of respondents reported they did not get a flu vaccine in the past 12 months and were considered "at risk" (see Table 20). The ADH service area 2013 percentage is higher than Texas in 2011 and nationwide data in 2011.
- The percentage of respondents who were at risk because they had not gotten a flu vaccine in the past 12 months decreased as the age of the respondent increased, and was higher among male respondents, respondents who were less than high school graduates, and respondents with children under 18 living in the household, (Table 21). The percentage varied with income.

[1] The 2007 results reflect the flu shot only, respondents were not asked if they had the flu vaccine that is sprayed in their nose.
[1] The Nationwide and Texas 2009 comparison data for this question was found at: http://www.dshs.state.tx.us/chs/brfss/query/brfss_dbquery2.asp.

Table 21
Had Flu Shot in Past 12 Months
By Selected Demographics

	Percentage responding	
	Yes	No
ADH Service Area	49.0	51.0
Age of respondent		
18 to 24	34.7	65.3
25 to 34	39.8	60.2
35 to 44	51.7	48.3
45 to 54	41.4	58.6
55 to 64	58.8	41.2
65 to 74	60.0	40.0
75 or older	81.8	18.2
Gender		
Female	54.2	45.8
Male	43.6	56.4
Education		
Less than HS grad	31.5	68.5
High school grad	50.2	49.8
Some college	53.2	46.8
College grad or more	54.5	45.5
Income		
Less than $15,000	44.0	56.0
$15,001 to $25,000	46.5	53.5
$25,001 to $50,000	45.5	54.5
$50,001 to $75,000	30.4	69.6
$75,001 to $100,000	63.3	36.7
Over $100,000	70.2	29.8
Children under 18 in household		
Yes	41.7	58.3
No	54.0	46.0

Figure 11
Adult in Household Sought Mental Health Care Services in Past Two Years



- Respondents were asked if they or a member of their household had sought mental health care services in the last two years. Twelve percent of the respondents answered "yes" (see Figure 11).
- As shown in Table 22, the percentage of respondents who reported seeking mental health care services in the last two years was higher among respondents who attended college, female respondents, respondents age 35 to 44, respondents who completed the interview in English, and respondents with children under 18 living in the household.

Table 22
Adult in Household Sought Mental Health Care Services in Past Two Years
By Selected Demographics

	Percentage responding	
	Yes	No
ADH Service Area	11.6	88.4
Education		
Did not grad HS	3.0	97.0
High school grad	9.5	90.5
Some college	13.9	86.1
College grad or more	17.2	82.8
Gender		
Female	15.9	84.1
Male	7.2	92.8
Age of respondent		
18 to 24	8.4	91.6
25 to 34	12.8	87.2
35 to 44	21.7	78.3
45 to 54	7.5	92.5
55 to 64	11.4	88.6
65 to 74	10.9	89.1
75 or older	2.3	97.7
Language of interview		
English	12.2	87.8
Spanish	1.3	98.7
Children under 18 in household		
Yes	15.1	84.9
No	9.1	90.9

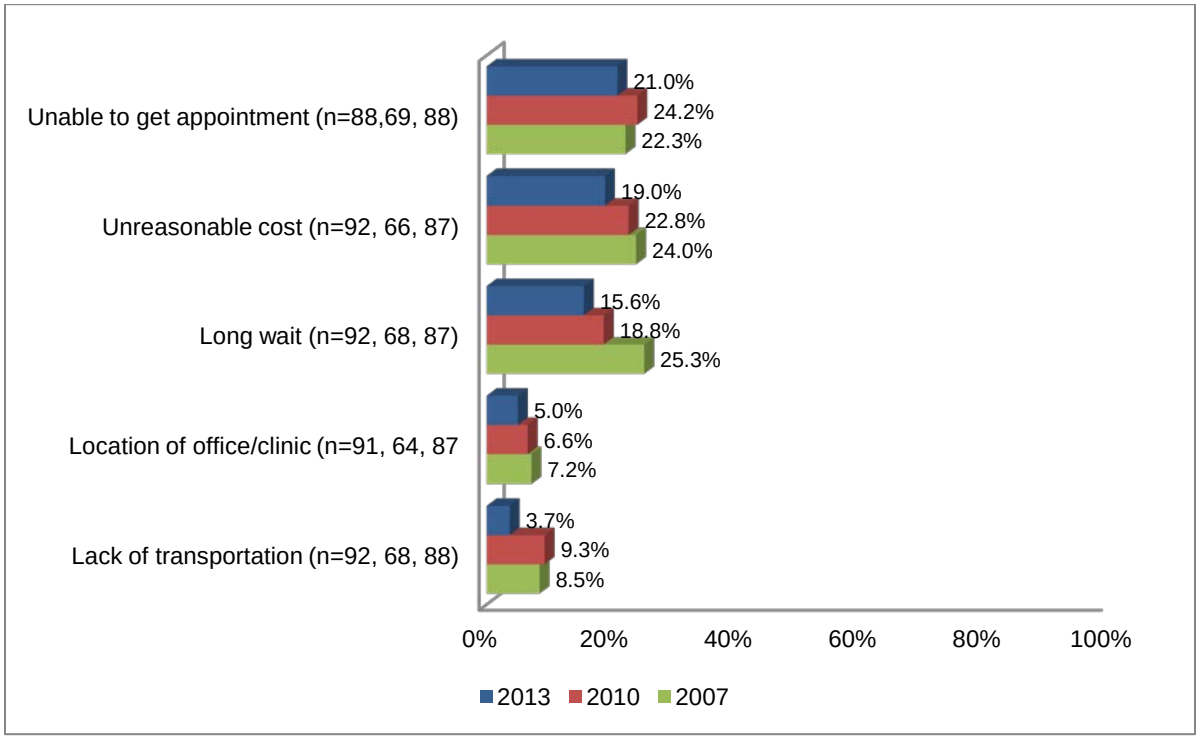
Table 23
Type of Mental Health Care Most Likely to Use

	Percentage responding		
	2013 (n=668)	2010 (n=542)[1]	2007 (n=526)
Private provider	62.4	63.9	63.4
Texas Panhandle Mental Health/Mental Retardation (TPMHMR)	19.4	19.6	15.5
J.O. Wyatt Clinic	8.5	5.1	6.0
Veteran's Hospital	2.7	-	-
General Hospital	1.7	-	-
General Clinic	0.8	-	-
Texas Tech	0.7	-	-
Pavilion	0.5	-	-
Depends on insurance/cost	0.5	-	-
Church	0.2	-	-
Other	2.6	11.3	15.0
None of the above	0.3	-	-

- Respondents were asked which provider they would most likely use if they or an adult member of their household was in need of mental health care. Sixty-two percent of the respondents reported they would most likely use a private provider while 19.4 percent would use Texas Panhandle Mental Health/Mental Retardation (see Table 23).

[1] Nine percent or 56 respondents answered "don't know" to this question in 2010.

Figure 12
Problems Experienced with Mental Health Care Received



- Respondents who sought mental health care in the past two years were asked if they experienced any of the problems listed in Figure 12. The most common problem reported by respondents who sought mental health care was the inability to get an appointment (21.0 percent).

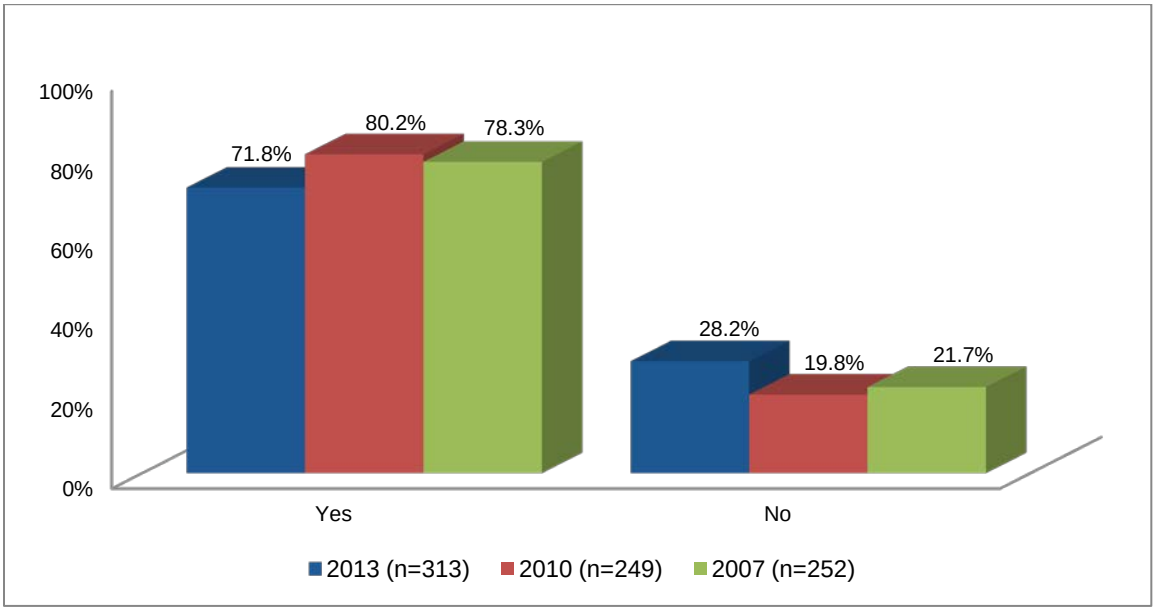
Children

Table 24
Type of Health Care Most Likely to Use (Child)

	Percentage responding		
	2013 (n=776)	2010 (n=562)	2007 (n=569)
Doctor or HMO	63.4	73.5	65.7
Urgent Care Center	13.4	8.1	7.2
Hospital Emergency Room	10.9	8.1	13.1
J.O. Wyatt Clinic	9.7	4.1	3.6
Nurse Practitioner	-	4.5	4.0
Texas Tech Health Science Center	1.1	-	0.7
Veteran's Hospital	0.5	0.2	0.5
Women's and Children's Clinic	-	0.3	-
Northwest Hospital	-	0.0	1.2
Other	0.1	0.7	1.6
Depends on circumstances	0.5	-	1.0
Would not use any source	0.6	0.3	1.5

- Respondents were asked if a child living with them needed health care, which of the sources listed in Table 24 they would be most likely to use. Sixty-three percent of the respondents indicated they would use a doctor or HMO. Twenty-four percent would use either a hospital emergency room (10.9 percent) or Urgent Care Center (13.4 percent). Ten percent of respondents would use J.O. Wyatt Clinic. Less than 3 percent would use any of the other options.

Figure 13
Sought Health Care for Child in Past Two Years

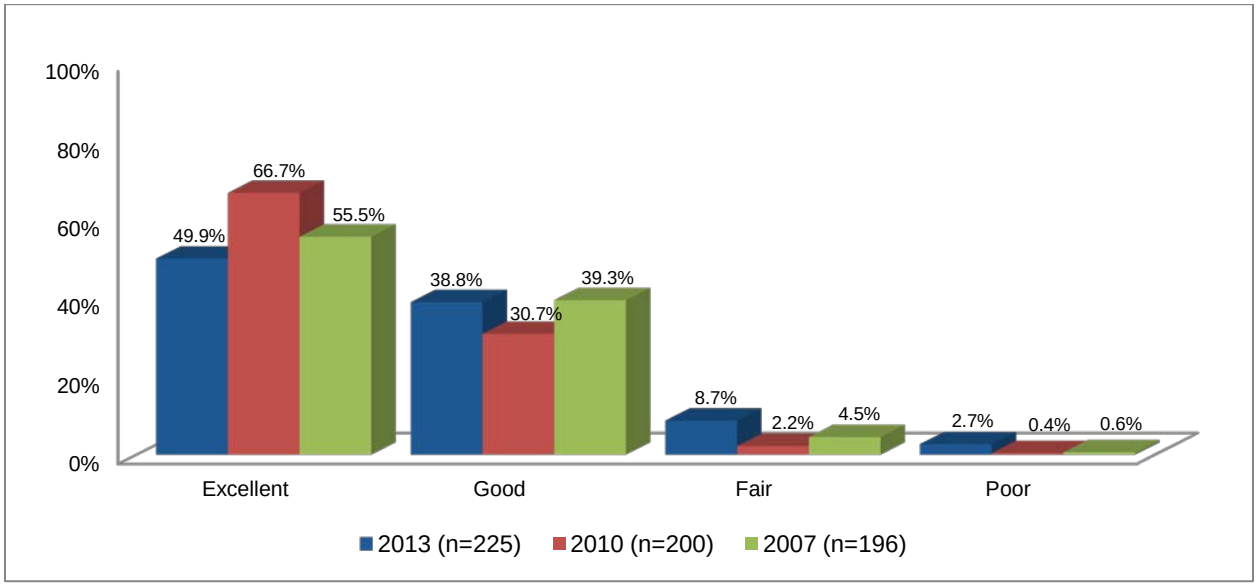


- Respondents were asked if they or an adult in their household had sought health care for a child from that source within the past two years. Seventy-two percent of those respondents answered "yes" (see Figure 13).
- As shown in Table 25, the percentage of respondents who had sought health care for a child increased as education increased and was higher among White respondents. The percentage varied with age and income.

Table 25
Sought Health Care for Child in Past Two Years
By Selected Demographics

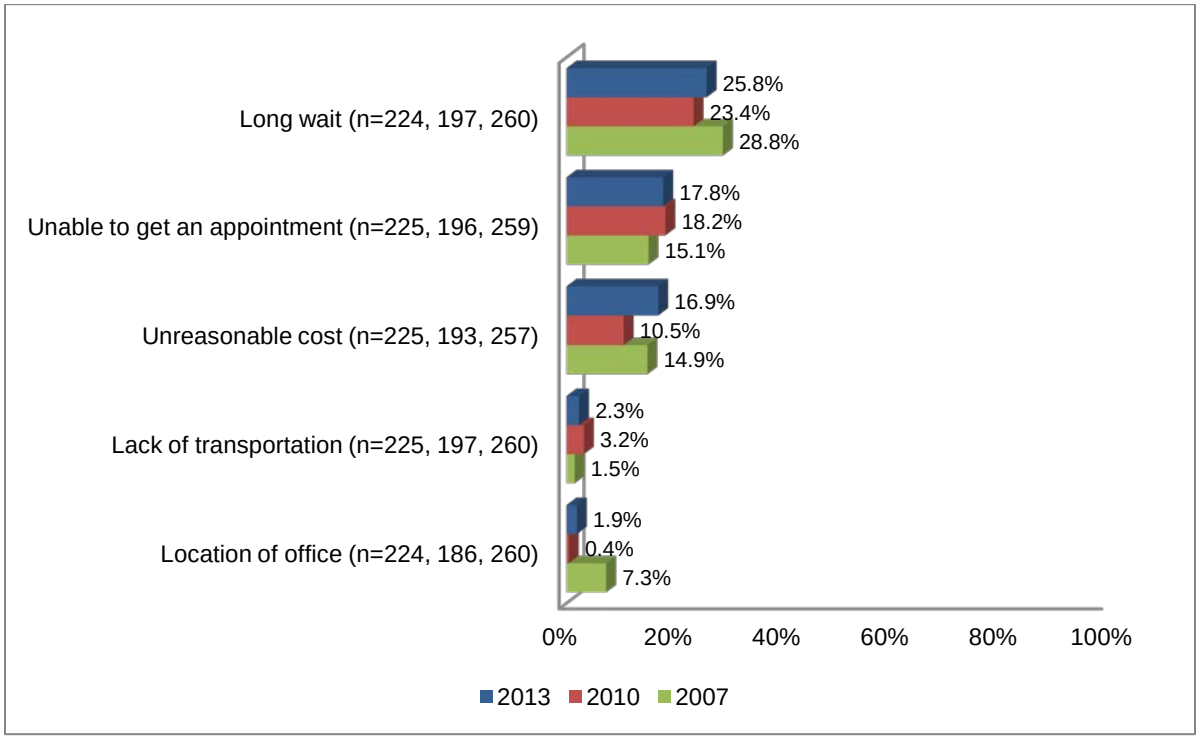
	Percentage responding	
	Yes	No
ADH Service Area	71.8	28.2
Education		
Less than HS grad	65.2	34.8
High school grad	69.2	30.8
Some college	69.1	30.9
College grad or more	86.4	13.6
Age of respondent		
18 to 24	27.2	72.8
25 to 34	86.8	13.2
35 to 44	73.8	26.2
45 to 54	79.7	20.3
55 to 64	54.1	45.9
65 to 74	28.9	71.1
Race/ethnicity		
White	79.6	20.4
African American	46.9	53.1
Hispanic	65.8	34.2
Other	43.4	56.6
Income		
Less than $15,000	42.6	57.4
$15,001 to $25,000	51.8	48.2
$25,001 to $50,000	79.0	21.0
$50,001 to $75,000	72.4	27.6
$75,001 to $100,000	95.5	4.5
Over $100,000	84.6	15.4

Figure 14
Ratings of Health Care Services Received (Child)



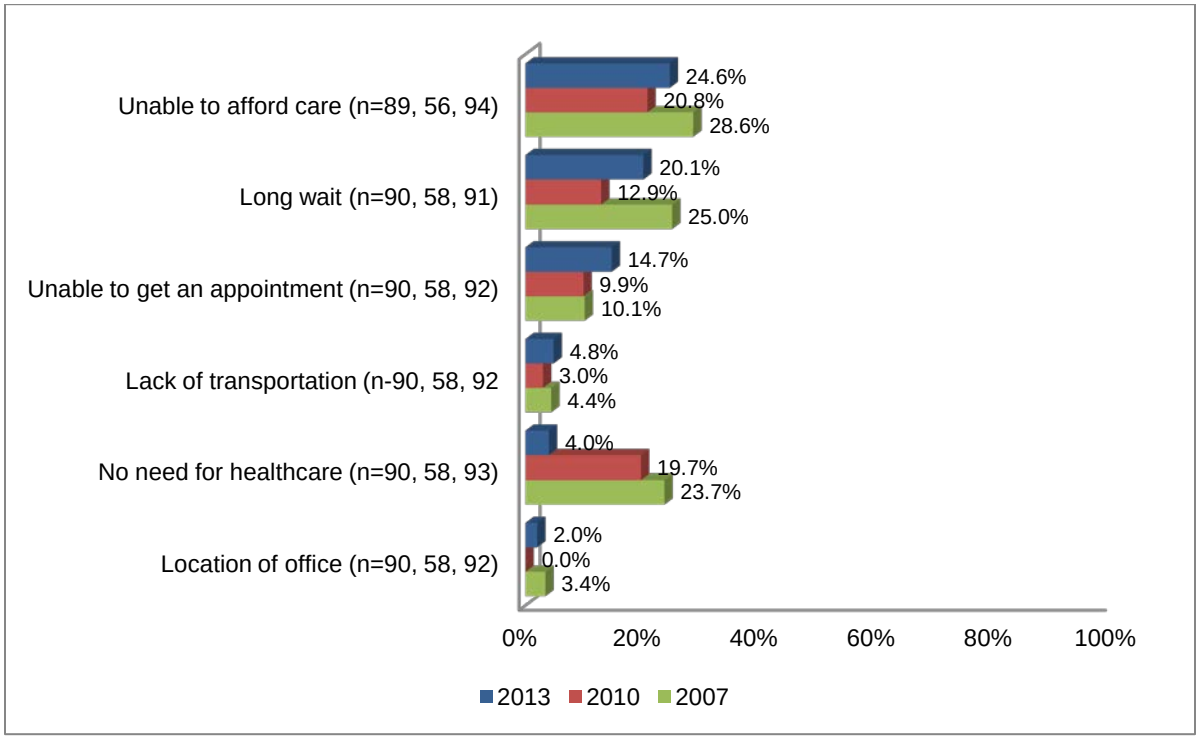
- Respondents who had sought health care for their child from their preferred source within the past two years were asked to rate the care the child received. As shown in Figure 14, 88.7 percent of those respondents rated that care as either excellent (49.9 percent) or good (38.8 percent).

Figure 15
Problems Experienced with Health Care Received (Child)



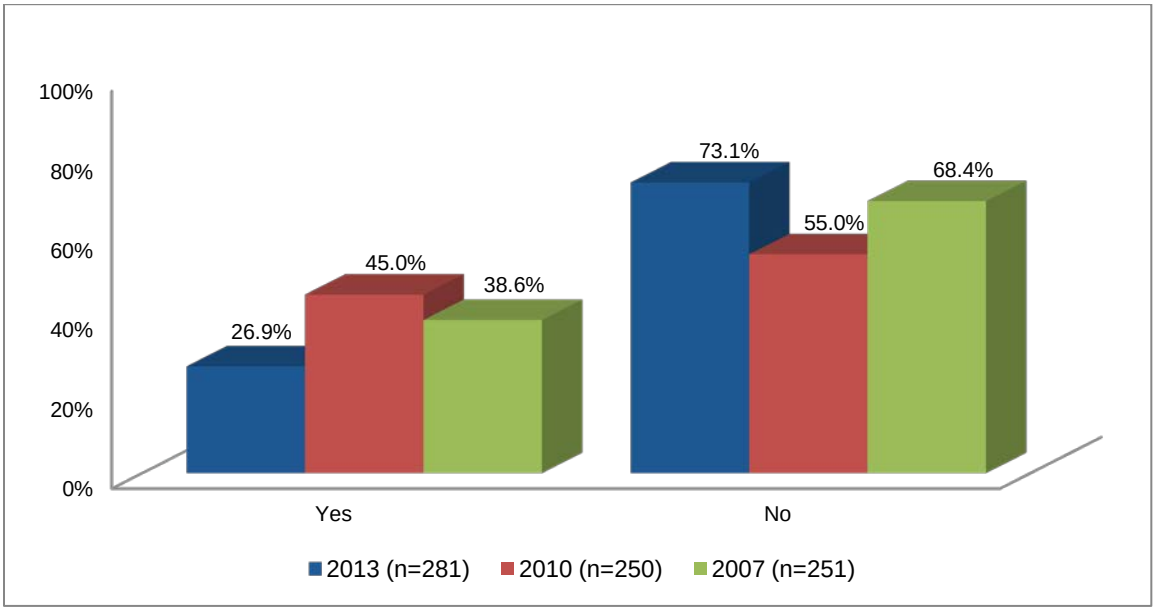
- Respondents who sought health care for their child in the past two years were asked if they encountered any of the problems listed in Figure 15. The most common problem experienced by respondents when they sought health care for their child (25.8 percent) was too long a wait.

Figure 16
Reasons Prevented Child from Getting Health Care



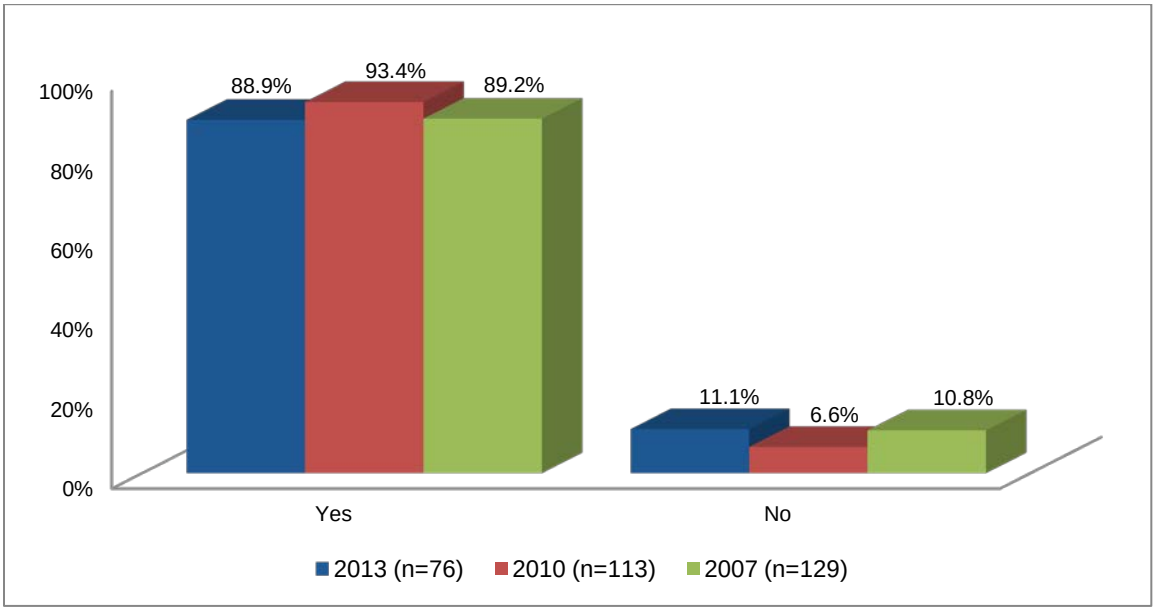
- Respondents who did not seek health care for their child in the past two years were asked if they were prevented from getting health care due to any of the problems listed in Figure 16. The most common problems that prevented respondents from getting health care for their child were: unable to afford health care (24.6 percent) and long wait (20.1 percent).

Figure 17
Child Needed Vaccinations in Past 12 Months



- Respondents with children were asked if a doctor, nurse, or medical assistant had told them that within the past 12 months one of their children needed vaccinations. As shown in Figure 17, 26.9 percent of those respondents reported being told their child(ren) needed vaccinations within the past 12 months.

Figure 18
Child Got Needed Vaccinations



- Respondents with children who were told their child needed vaccinations were asked if the child got the vaccinations. As shown in Figure 18, 88.9 percent of those respondents reported that their child(ren) got the needed vaccinations.

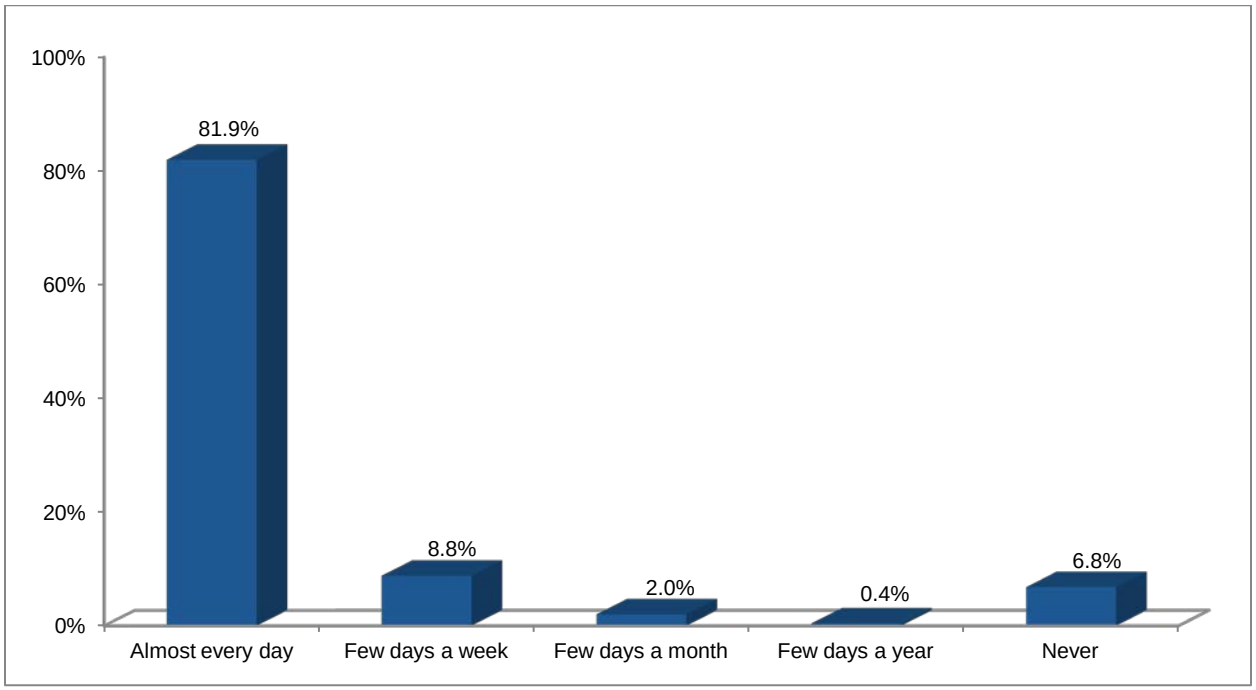
Table 26
Facility Where Child Got Immunized

	Percentage responding		
	2013 (n=67)	2010 (n=105)	2007 (n=71)
Private health care provider	46.0	79.9	51.0
Health Department	17.6	3.5	-
Pharmacy	16.8	-	-
Northwest Women's and Children's Clinic	16.4	6.3	22.9
Clinic	1.8	5.5	-
Texas Tech University Health Science Center	1.4	3.3	8.2
RHN	-	0.0	6.5
Care Van	-	0.0	3.3

- Respondents whose children received vaccinations were asked where they went to get their children immunized. Forty-six percent reported they went to a private health care provider for the immunizations (see Table 26). Thirty-four percent of the respondents indicated they went to the health department (17.6 percent) or Northwest Women's and Children's Clinic (16.4 percent). Seventeen percent stated they went to a pharmacy for their child's immunizations. Less than 4 percent mentioned any other facility.

Driving

Figure 19
Drive a Motor Vehicle
(n=800)

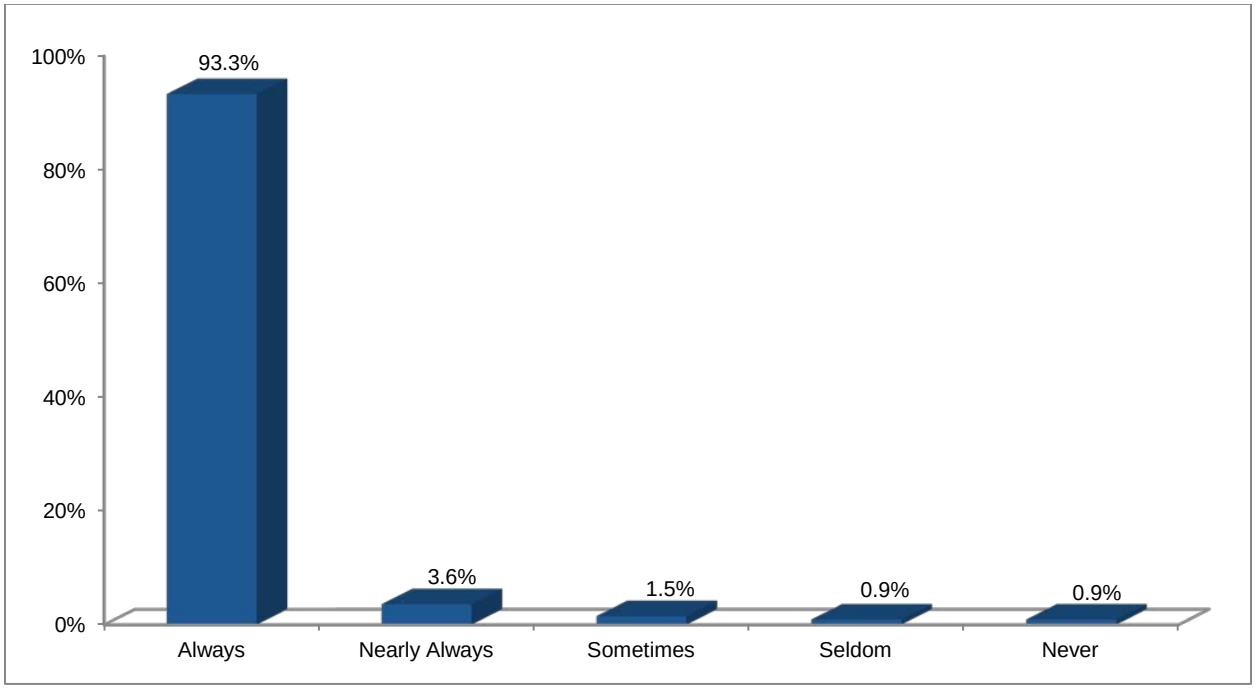


- Respondents were asked how often they drive a motor vehicle, regardless of whether it was for work or for personal use. As shown in Figure 19, 81.9 percent of respondents reported driving almost every day.
- The percentage of respondents who reported driving a motor vehicle almost every day increased with education and income (see Table 27). Percentages were higher among male respondents, African American respondents, respondents with children in the household and respondents in Randall County.

Table 27
Drive a Motor Vehicle
By Selected Demographics

	Percentage responding		
	Almost everyday	Few days a week	Few days a month or less
ADH Service Area	81.9	8.8	9.2
Education			
Less than HS grad	74.5	9.3	16.3
High school grad	77.3	9.0	13.7
Some college	85.5	8.5	6.0
College grad or more	87.7	8.2	4.2
Gender			
Female	76.4	12.0	11.6
Male	87.4	5.4	7.3
Age of respondent			
18 to 24	81.7	8.7	9.6
25 to 34	89.0	5.7	5.3
35 to 44	88.0	3.3	8.7
45 to 54	89.9	2.1	8.0
55 to 64	81.9	10.7	7.4
65 to 74	66.9	19.6	13.5
75 or older	45.7	29.6	24.7
Race/ethnicity			
White	79.5	11.5	9.0
African American	93.5	1.1	5.4
Hispanic	88.8	3.8	7.4
Other	71.1	5.7	23.2
Children under 18 in household			
Yes	89.8	4.8	5.4
No	76.3	11.4	12.3
Income			
Less than $15,000	65.8	13.7	20.4
$15,001 to $25,000	73.8	11.5	14.7
$25,001 to $50,000	85.5	7.7	6.8
$50,001 to $75,000	93.7	3.3	3.0
$75,001 to $100,000	94.0	5.9	0.0
Over $100,000	98.3	1.7	0.0
County			
Potter	80.7	6.1	13.1
Randall	82.9	11.2	5.9

Figure 20
Use Seat Belts When Driving or Riding in a Car
(n=800)



- Respondents were asked how often they used seat belts when driving or riding in a car. As shown in Figure 20, 93.3 percent of respondents reported always using a seat belt while in a car.

Table 28
Activities While Driving

	Percentage responding				
	On all driving trips	On most driving trips	On some driving trips	Rarely	Never
Talk to other passengers in vehicle (n=745)	24.3	18.8	34.7	16.0	6.3
Eat or drink (n=745)	5.3	13.0	34.5	29.4	17.9
Make or accept phone calls (n=741)	4.8	8.0	20.3	28.7	38.2
Read, such as a book, newspaper, iPad, or Kindle (n=746)	0.2	0.3	1.0	5.9	92.5
Read emails or text messages (n=746)	0.8	0.9	8.4	17.0	73.0
Send text messages or emails (n=746)	1.1	0.4	5.4	17.2	75.9
Interact with children in the back seat (n=745)	5.4	7.6	18.5	19.3	49.2
Do personal grooming such as putting on make-up, shaving, or looking at yourself in the mirror (n=746)	0.4	0.5	6.1	10.6	82.4
Adjust car radio (n=744)	15.9	14.0	31.8	22.2	16.1
Change CDs, DVDs, or tapes (n=744)	1.6	3.9	14.4	29.1	51.0

- Respondents who reported they drive a car at least a few days a year were asked how often they did the activities listed in Table 28 when driving. The most frequent activities done on all driving trips were talking to other passengers (24.3 percent) and adjusting the car radio (15.9 percent).

Talk to other passengers while driving

- The percentages of drivers who talked to other passengers while driving on all, most, or some driving trips increased as education increased and generally decreased as age increased (see Table 29). Percentages were higher among Hispanic respondents, respondents who completed the interview in English, those with children under 18 living in the household, and respondents living in Randall County. Responses varied by income

Eat or drink while driving

- The percentage of drivers who ate or drank while driving on all, most, or some driving trips varied by education, age of driver, and income and was higher among male drivers, African American drivers, and those with children under 18 living in the household (see Table 30)

Make or accept phone calls while driving

- The percentage of drivers who made or accepted phone calls while driving on all, most, or some driving trips varied by education and income and was higher among male drivers, Hispanic drivers, and those who completed the interview in Spanish (see Table 31).

Read emails or text messages while driving

- The percentage of drivers who read emails or text messages while driving on all, most, or some driving trips was higher among those with a high school diploma or GED, male drivers, drivers age 18 to 34, and African American drivers (see Table 32).

Send emails or text messages while driving

- The percentage of drivers who sent emails or text messages while driving on all, most, or some driving trips was higher among male drivers, drivers age 18 to 34, Hispanic drivers, and drivers without children under 18 living in the household (see Table 33).

Interact with children in the back seat while driving

- The percentage of drivers who interacted with children in the back seat while driving on all, most, or some driving trips was higher among those who completed some college, female drivers, drivers age 25 to 54, Hispanic drivers, drivers with children under 18 living in the household, and those whose income is $75,001 to $100,000 (see Table 34).

Personal grooming while driving

- The percentage of drivers who did personal grooming while driving on all, most, or some driving trips was higher among those who completed some college, female drivers, drivers whose income is less than $15,000, and those who live in Potter County (see Table 35).

Adjust radio while driving

- The percentage of drivers who adjusted their radio while driving on all, most, or some driving trips was higher among those who completed college, female drivers, drivers age 18 to 44, those whose income is over than $100,000, and drivers with children under 18 in the household (see Table 36).

Change CDs, DVDs, or tapes while driving

- The percentage of drivers who changed a CD, DVD, or tape while driving on all, most, or some driving trips was higher among those who completed some college, drivers age 18 to 44, African American drivers, and those who live in Potter County (see Table 37).

Table 29
Frequency of Talking to Other Passengers While Driving
By Selected Demographics

	Percentage Responding				
	On all driving trips	On most driving trips	On some driving trips	Rarely	Never
Education					
Less than high school grad	18.5	13.9	44.8	10.2	12.6
High school grad	29.4	20.0	25.4	18.4	6.8
Some college	24.6	18.1	36.3	15.0	6.0
College grad or more	21.0	22.2	36.0	19.4	1.4
Age of respondent					
18 to 24	26.5	26.3	35.9	8.6	2.7
25 to 34	31.1	18.7	39.3	5.7	5.3
35 to 44	31.9	15.0	32.9	20.1	0.0
45 to 54	17.2	18.6	35.4	16.5	12.4
55 to 64	18.6	17.5	33.5	21.2	9.2
65 to 74	18.7	20.5	33.4	21.5	6.0
75 or older	17.0	13.0	25.4	34.2	10.4
Race/ethnicity					
White	25.0	20.4	34.3	16.1	4.2
African American	19.7	10.3	20.7	28.7	20.7
Hispanic	25.1	17.2	43.8	5.5	8.4
Other	18.0	18.0	26.7	29.6	7.7
Language of interview					
English	25.4	19.7	33.2	16.3	5.5
Spanish	3.1	3.8	60.5	11.9	20.7
Children under 18 in household					
Yes	29.9	20.7	34.3	11.0	4.0
No	19.9	17.4	35.0	19.6	8.0
Income					
Less than $15,000	24.5	14.4	40.2	13.2	7.7
$15,001 to $25,000	19.6	14.6	31.9	19.4	14.5
$25,001 to $50,000	21.8	14.3	39.2	20.6	4.2
$50,001 to $75,000	26.1	23.4	32.7	9.9	7.9
$75,001 to $100,000	30.2	14.7	38.9	12.9	3.3
Over $100,000	28.7	29.4	23.7	16.8	1.4
County					
Potter	19.6	19.2	35.7	17.4	8.1
Randall	28.3	18.4	33.9	14.8	4.7

Table 30
Frequency of Eating or Drinking While Driving
By Selected Demographics

	Percentage Responding				
	On all driving trips	On most driving trips	On some driving trips	Rarely	Never
Education					
Less than high school grad	5.3	7.2	27.9	25.6	34.0
High school grad	6.6	14.5	32.8	28.7	17.6
Some college	4.9	14.2	34.3	31.7	14.9
College grad or more	4.2	12.9	41.6	29.7	11.7
Gender					
Female	4.6	8.5	35.1	34.3	17.5
Male	5.9	17.3	33.7	24.7	18.4
Age of respondent					
18 to 24	0.0	11.2	39.8	29.7	19.4
25 to 34	5.6	10.3	42.4	24.1	17.5
35 to 44	5.7	22.4	36.7	24.6	10.6
45 to 54	6.8	13.8	33.2	33.6	12.6
55 to 64	7.9	16.1	32.3	27.1	16.5
65 to 74	4.0	5.5	23.0	43.1	24.3
75 or older	6.0	0.0	15.1	33.2	45.7
Race/ethnicity					
White	6.3	15.7	35.0	28.3	14.8
African American	6.9	0.9	51.8	26.5	13.9
Hispanic	1.4	9.3	32.5	31.0	25.8
Other	6.3	9.8	23.5	34.5	25.9
Language of interview					
English	5.6	13.7	33.3	29.8	17.6
Spanish	0.0	0.0	53.2	23.5	23.3
Children under 18 in household					
Yes	3.1	16.3	37.6	30.5	12.5
No	6.8	10.5	32.1	28.8	21.9
Income					
Less than $15,000	4.1	6.5	32.4	33.0	23.9
$15,001 to $25,000	4.1	9.6	28.8	32.9	24.5
$25,001 to $50,000	5.3	4.9	42.0	28.9	18.9
$50,001 to $75,000	7.9	19.7	37.5	25.5	9.4
$75,001 to $100,000	6.5	21.3	33.7	28.8	9.6
Over $100,000	2.9	21.6	34.2	29.4	11.9

Table 31
Frequency of Making or Accepting Phone Calls While Driving
By Selected Demographics

	Percentage Responding				
	On all driving trips	On most driving trips	On some driving trips	Rarely	Never
Age of respondent					
18 to 24	1.8	7.1	28.0	29.7	33.4
25 to 34	5.3	4.2	22.1	31.5	36.9
35 to 44	9.0	9.3	24.7	38.2	18.8
45 to 54	4.0	14.8	18.5	22.8	39.9
55 to 64	5.4	7.4	21.6	24.7	41.0
65 to 74	3.5	6.9	8.3	25.3	56.0
75 or older	0.4	1.4	4.3	24.8	69.0
Gender					
Male	2.9	6.1	16.4	29.3	45.4
Female	6.6	9.9	24.2	28.2	31.0
Race/ethnicity					
White	6.4	9.5	19.3	27.1	37.8
African American	0.0	0.0	12.6	52.5	35.0
Hispanic	1.8	5.7	28.3	25.2	39.0
Other	2.8	8.4	11.7	33.4	43.7
Language of interview					
English	5.0	8.1	19.3	28.4	39.3
Spanish	0.0	6.5	38.2	34.8	20.5
Education					
Less than high school grad	0.0	6.6	14.7	28.0	50.8
High school grad	8.4	4.1	18.7	29.0	39.8
Some college	5.0	9.1	19.3	27.1	39.5
College grad or more	3.3	11.9	28.2	32.1	24.5
Income					
Less than $15,000	0.3	3.6	16.9	30.8	48.4
$15,001 to $25,000	0.0	9.5	21.0	25.8	43.7
$25,001 to $50,000	6.0	6.5	15.7	31.2	40.6
$50,001 to $75,000	4.6	15.7	29.1	19.1	31.5
$75,001 to $100,000	15.4	11.6	18.3	35.1	19.7
More than $100,00	5.5	6.1	24.1	37.5	26.8

Table 32
Frequency of Reading Emails or Text Messages While Driving
By Selected Demographics

	Percentage Responding		
	On some to all driving trips	Rarely	Never
Education			
Less than high school grad	3.0	22.3	74.7
High school grad	11.9	9.6	78.5
Some college	11.4	20.0	68.7
College grad or more	10.7	16.5	72.9
Gender			
Female	7.4	15.1	77.5
Male	12.6	18.7	68.7
Age of respondent			
18 to 24	29.9	24.4	45.7
25 to 34	15.3	24.2	60.5
35 to 44	4.5	19.3	76.1
45 to 54	5.8	15.7	78.5
55 to 64	4.1	12.8	83.1
65 to 74	0.8	3.9	95.2
75 or older	0.4	0.9	98.6
Race/ethnicity			
White	9.7	15.1	75.1
African American	13.9	6.1	80.0
Hispanic	12.1	21.7	66.3
Other	4.3	29.4	66.3

Table 33
Frequency of Sending Emails or Text Messages While Driving
By Selected Demographics

	Percentage Responding		
	On all to some driving trips	Rarely	Never
Gender			
Female	5.6	14.5	80.0
Male	8.3	20.0	71.7
Age of respondent			
18 to 24	25.7	31.5	42.8
25 to 34	7.0	27.9	65.1
35 to 44	5.1	19.0	75.8
45 to 54	2.6	13.5	83.8
55 to 64	2.6	7.4	90.1
65 to 74	0.0	1.1	98.9
75 or older	0.0	1.8	98.2
Race/ethnicity			
White	5.7	14.3	80.1
African American	4.7	21.3	73.9
Hispanic	13.9	22.2	64.0
Other	0.0	27.9	72.1
Children under 18 in household			
Yes	5.5	24.0	70.5
No	7.9	12.4	79.7

Table 34
Frequency of Interacting with Children in the Back Seat While Driving
By Selected Demographics

	Percentage Responding		
	On to all to some driving trips	Rarely	Never
Education			
Less than high school grad	21.9	16.6	61.5
High school grad	33.4	18.5	48.1
Some college	36.2	17.5	46.2
College grad or more	28.6	24.8	46.6
Gender			
Female	37.6	17.6	44.8
Male	25.6	20.7	53.7
Age of respondent			
18 to 24	31.6	8.4	60.0
25 to 34	52.7	20.7	26.6
35 to 44	45.2	19.1	35.7
45 to 54	26.5	22.1	51.4
55 to 64	21.0	22.8	56.2
65 to 74	8.0	23.9	68.1
75 or older	1.3	16.2	82.5
Race/ethnicity			
White	30.9	21.1	48.0
African American	20.6	15.7	63.7
Hispanic	43.6	16.3	40.0
Other	14.3	14.6	71.1
Children under 18 in household			
Yes	60.1	18.8	21.1
No	11.1	19.4	69.5
Income			
Less than $15,000	30.9	13.5	55.6
$15,001 to $25,000	34.7	15.0	50.2
$25,001 to $50,000	24.5	22.4	53.2
$50,001 to $75,000	30.8	20.5	48.7
$75,001 to $100,000	53.9	21.9	24.2
Over $100,000	27.0	28.4	44.6

Table 35
Frequency of Personal Grooming While Driving
By Selected Demographics

	Percentage Responding		
	On some to all driving trips	Rarely	Never
Education			
Less than high school grad	7.7	5.6	86.7
High school grad	5.9	8.7	85.4
Some college	8.7	10.7	80.6
College grad or more	5.0	16.9	78.0
Gender			
Female	9.1	12.4	78.4
Male	4.9	8.9	86.2
Income			
Less than $15,000	12.7	5.8	81.6
$15,001 to $25,000	4.6	12.3	83.1
$25,001 to $50,000	7.3	11.9	80.7
$50,001 to $75,000	8.3	5.9	85.8
$75,001 to $100,000	6.8	16.7	76.5
Over $100,000	1.7	18.7	79.6
County			
Potter	8.3	12.3	79.4
Randall	5.9	9.2	84.9

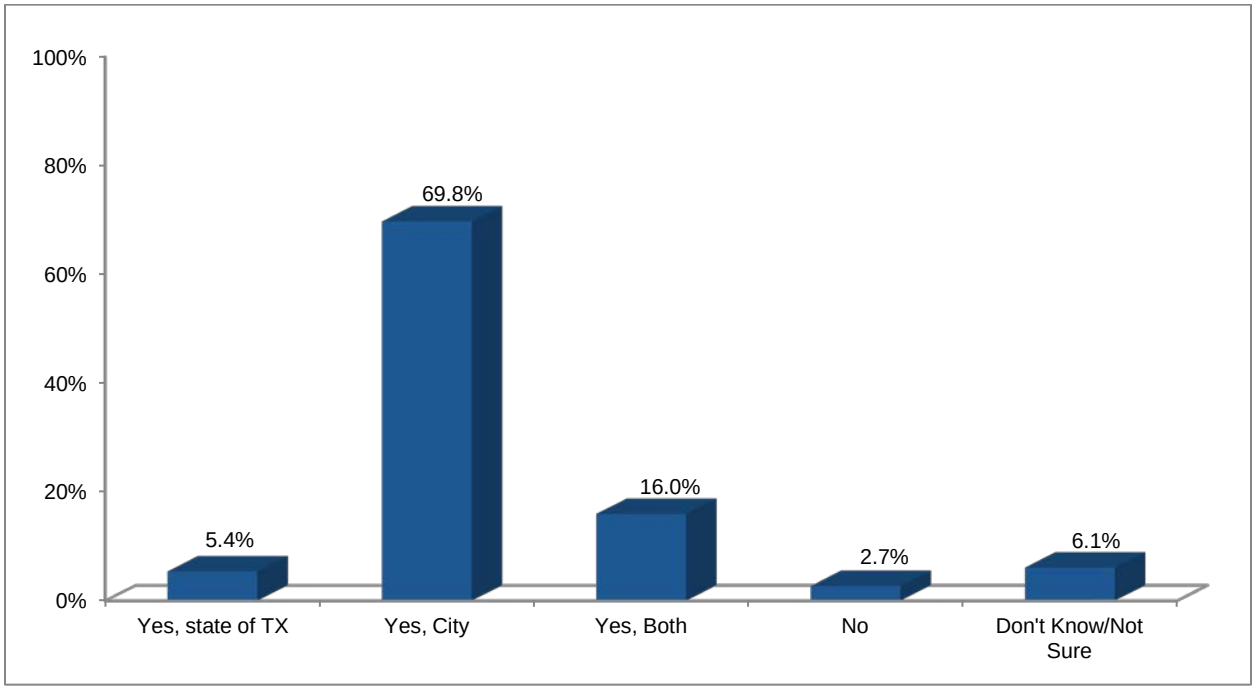
Table 36
Frequency of Adjusting the Car Radio While Driving
By Selected Demographics

	Percentage Responding				
	On all driving trips	On most driving trips	On some driving trips	Rarely	Never
Education					
Less than high school grad	3.6	12.5	34.7	20.2	29.0
High school grad	21.5	11.0	30.6	20.2	16.7
Some college	14.3	13.6	33.4	25.0	13.7
College grad or more	20.9	19.5	28.5	21.4	9.7
Gender					
Female	10.8	13.3	32.4	22.8	20.7
Male	20.9	14.6	31.3	21.7	11.6
Age of respondent					
18 to 24	32.0	18.5	32.8	7.9	8.7
25 to 34	19.0	18.5	33.0	14.4	15.1
35 to 44	21.9	12.0	39.8	21.0	5.2
45 to 54	9.3	10.7	34.2	31.6	14.2
55 to 64	9.2	15.8	30.1	24.7	20.2
65 to 74	3.7	10.4	27.2	39.2	19.5
75 or older	2.8	5.4	8.7	27.2	55.9
Language of interview					
English	16.4	14.5	30.6	22.3	16.2
Spanish	6.2	5.7	52.8	20.4	14.9
Children under 18 in household					
Yes	22.2	11.9	32.6	22.1	11.2
No	11.3	15.4	31.3	22.3	19.7
Income					
Less than $15,000	21.4	8.9	30.1	17.1	22.5
$15,001 to $25,000	10.0	13.2	30.6	31.5	14.7
$25,001 to $50,000	15.4	10.9	37.8	20.1	15.9
$50,001 to $75,000	16.2	12.2	32.5	23.4	15.6
$75,001 to $100,000	16.1	9.7	40.0	28.0	6.3
Over $100,000	21.2	24.5	26.1	21.9	6.4

Table 37
Frequency of Changing CDs, DVDs, or Tapes While Driving
By Selected Demographics

	Percentage Responding		
	On all to some driving trips	Rarely	Never
Education			
Less than high school grad	11.1	21.5	67.5
High school grad	20.2	27.2	52.5
Some college	22.5	29.1	48.4
College grad or more	22.2	36.2	41.6
Age of respondent			
18 to 24	39.1	13.6	47.3
25 to 34	24.6	25.9	49.5
35 to 44	21.4	39.1	39.5
45 to 54	12.4	36.4	51.2
55 to 64	14.2	31.2	54.5
65 to 74	13.6	30.4	56.0
75 or older	2.9	17.0	80.1
Race/ethnicity			
White	15.8	31.6	52.6
African American	32.7	11.0	56.4
Hispanic	25.6	28.9	45.5
Other	32.8	22.0	45.2
County			
Potter	23.6	22.6	53.8
Randall	16.7	34.7	48.6

Figure 21
State or City has Law Banning Talking on Cell Phone While Driving
(n=800)

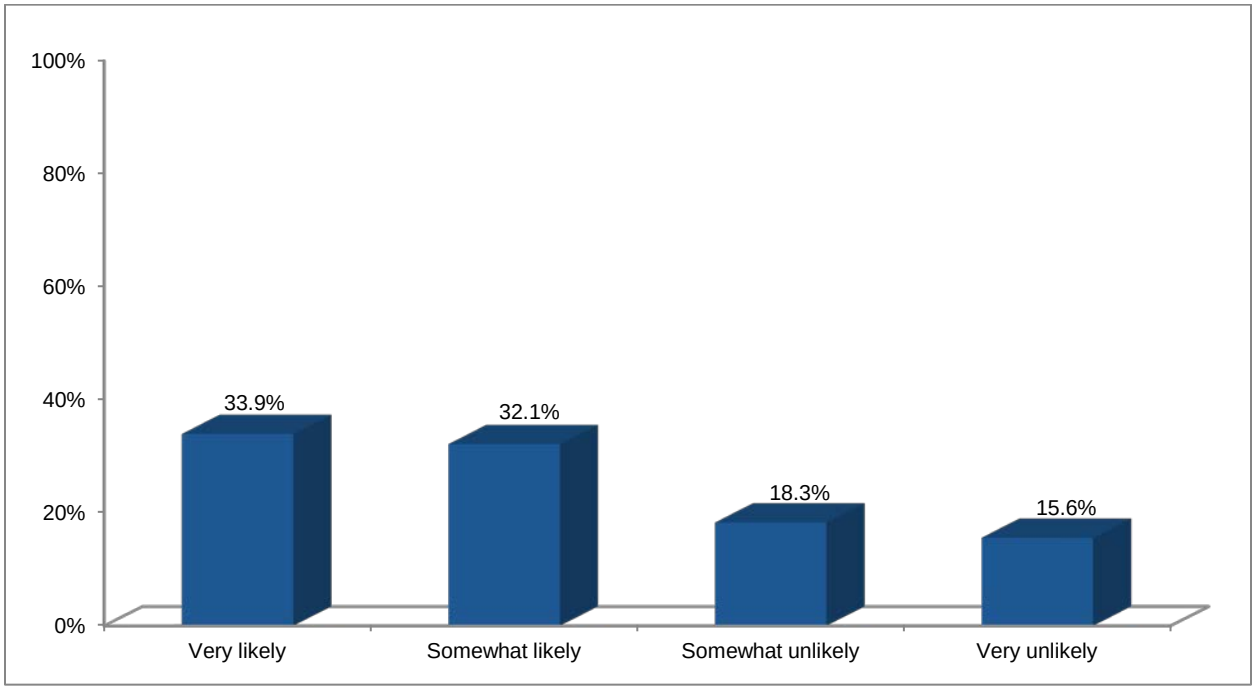


- Respondents were asked if their state or city has a law banning talking on a handheld cell phone while driving. As shown in Figure 21, 69.8 percent of respondents reported their city has a law banning talking on a cell phone while driving.
- The percentage of respondents reporting their city has a law banning talking on a handheld cell phone while driving increased as education, income, and respondents up to age 74 then increased. Percentages were higher among respondents who completed the interview in English, those who did not have children under 18 living in the household, and respondents living in Randall County (see Table 38).

Table 38
State or City has Law Banning Talking on Cell Phone While Driving
By Selected Demographics

	Percentage Responding				
	Yes, State of TX	Yes, City	Yes, Both	No	DK/NS
Education					
Less than high school grad	13.4	45.6	27.7	4.6	8.8
High school grad	6.7	67.0	16.2	4.5	5.6
Some college	3.3	72.9	16.9	0.7	6.3
College grad or more	1.4	86.7	5.2	2.5	4.2
Age of respondent					
18 to 24	9.9	52.5	23.7	1.9	12.0
25 to 34	4.3	69.5	16.1	1.8	8.3
35 to 44	4.3	67.9	20.9	1.6	5.2
45 to 54	7.2	71.9	15.8	3.3	1.7
55 to 64	4.2	75.8	14.4	2.7	3.2
65 to 74	3.8	84.4	6.0	2.4	3.4
75 or older	2.8	70.7	7.1	8.0	11.3
Language of interview					
English	4.6	70.6	16.6	2.7	5.5
Spanish	21.3	50.2	8.9	2.8	16.8
Children under 18 in household					
Yes	6.6	65.2	22.0	1.7	4.5
No	4.7	72.4	12.2	3.4	7.3
Income					
Less than $15,000	10.5	49.3	25.4	0.7	14.1
$15,001 to $25,000	6.3	65.8	14.4	1.5	12.0
$25,001 to $50,000	3.4	68.6	19.2	3.6	5.2
$50,001 to $75,000	2.5	76.6	14.8	5.4	0.6
$75,001 to $100,000	4.1	82.4	12.9	0.6	0.0
Over $100,000	0.0	96.7	2.6	0.4	0.3
County					
Potter	8.3	59.3	21.1	3.1	8.1
Randall	2.8	79.2	11.4	2.3	4.3

Figure 22
Likelihood Person Talking on Cell Phone While Driving
Will Get a Ticket over Next Six Months
(n=696)

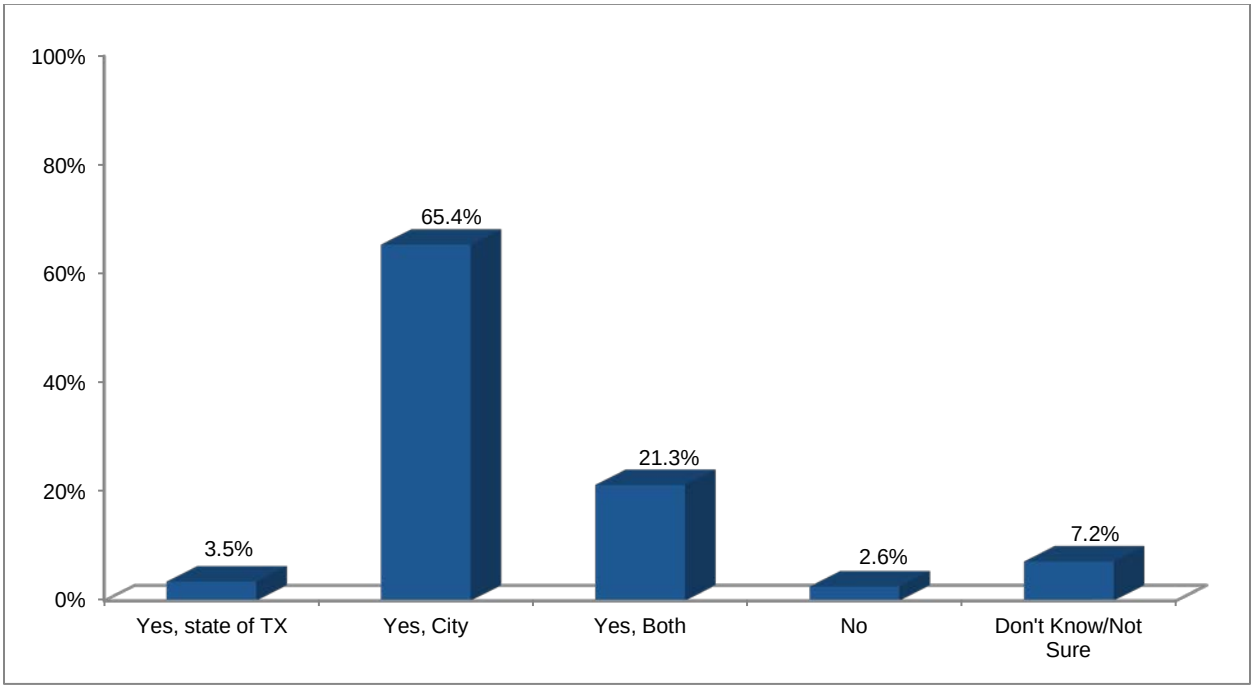


- Respondents who stated they were aware that their state or city has a law banning talking on a cell phone while driving were presented the following scenario: "Assume that over the next six months someone frequently talks on a handheld cell phone while driving. How likely do you think that person would be to receive a ticket for talking on a cell phone while driving?" As shown in Figure 22, 66.0 percent of respondents reported it would be either very likely (33.9 percent) or somewhat likely (32.1 percent) that a person talking on their cell phone while driving would receive a ticket.
- The percentage of respondents who believed it would be very likely for a person frequently talking on their cell phone over the next six months to get a ticket decreased as education, age of respondent and income increased (see Table 39). Percentages were also higher among female respondents, African American respondents, respondents who completed the interview in Spanish, and respondents living in Potter County.

Table 39
Likelihood Person Talking on Cell Phone While Driving
Will Get a Ticket over Next Six Months
By Selected Demographics

	Percentage Responding			
	Very Likely	Somewhat Likely	Somewhat unlikely	Very unlikely
Education				
Less than high school grad	48.1	30.2	7.8	13.9
High school grad	34.3	36.8	15.9	13.0
Some college	35.7	30.4	21.0	12.9
College grad or more	20.3	30.3	24.3	25.1
Gender				
Female	42.2	31.0	16.2	10.5
Male	25.9	33.1	20.2	20.8
Age of respondent				
18 to 24	41.3	39.4	11.8	7.6
25 to 34	33.1	28.9	22.8	15.1
35 to 44	40.6	25.7	14.3	19.5
45 to 54	35.1	32.7	19.1	13.2
55 to 64	27.0	32.1	16.5	24.4
65 to 74	25.0	38.7	25.0	11.3
75 or older	29.0	31.0	21.8	18.2
Race/ethnicity				
White	27.9	33.1	20.7	18.3
African American	58.6	20.7	15.1	5.6
Hispanic	46.5	35.6	7.0	10.9
Other	35.9	22.7	32.6	8.8
Language of interview				
English	32.4	33.0	19.2	15.5
Spanish	66.6	15.4	.0	18.0
Income				
Less than $15,000	38.8	36.7	5.6	18.8
$15,001 to $25,000	51.7	28.4	12.5	7.4
$25,001 to $50,000	34.3	33.2	23.4	9.1
$50,001 to $75,000	26.3	32.3	24.4	17.0
$75,001 to $100,000	22.3	38.3	14.7	24.7
Over $100,000	19.7	22.8	28.5	29.0
County				
Potter	39.4	32.1	13.7	14.8
Randall	29.4	32.0	22.2	16.3

Figure 23
State or City has Law Banning Texting or Emailing While Driving
(n= 800)

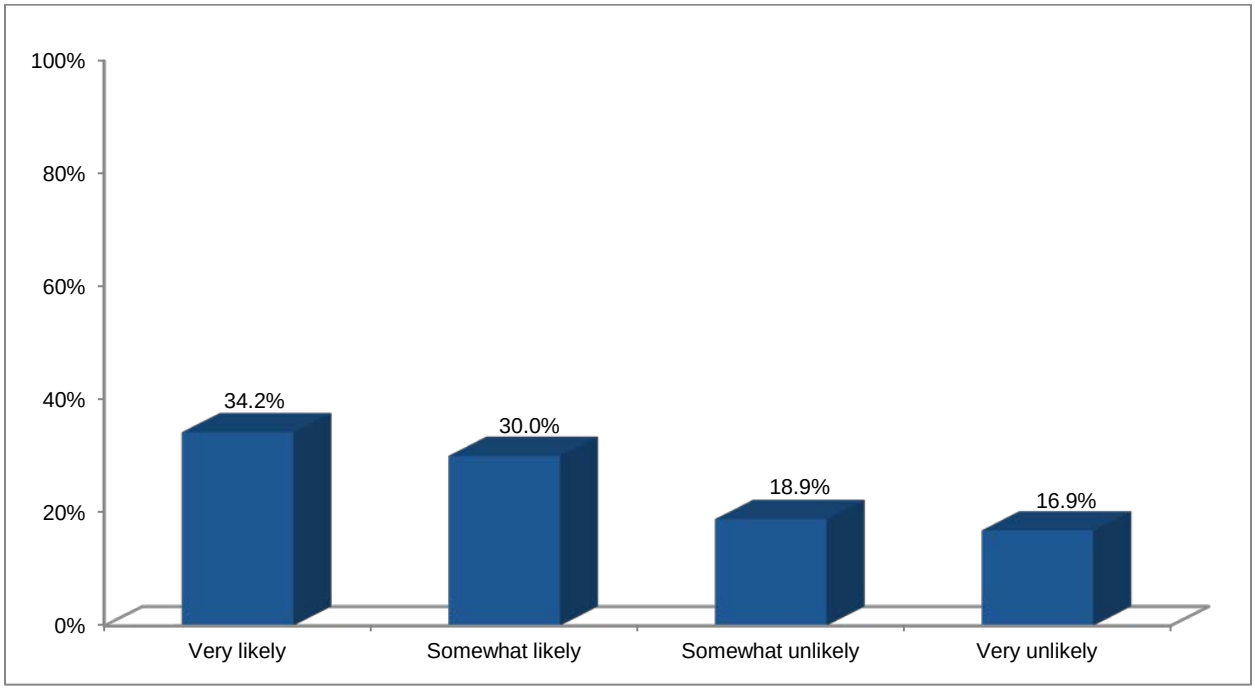


- Respondents were asked if their state or city has a law banning texting or emailing while driving. As shown in Figure 23, 65.4 percent of respondents reported their city has a law banning texting or emailing while driving.
- As shown in Table 40, the percentage citing that their city had a law banning texting or emailing while driving generally increased with education, age, and income. Percentages were higher among female respondents, White respondents, respondents who completed the interview in English, and respondents living in Randall County.

Table 40
State or City has Law Banning Texting or Emailing While Driving
By Selected Demographics

	Percentage Responding				
	Yes, State of TX	Yes, City	Yes, Both	No	DK/NS
Education					
Less than high school grad	10.5	37.2	36.2	2.2	14.0
High school grad	1.2	64.4	23.6	4.7	6.0
Some college	3.1	68.8	20.9	1.2	6.1
College grad or more	2.0	82.9	7.2	2.7	5.1
Gender					
Female	4.3	66.5	18.5	2.1	8.6
Male	3.0	63.6	24.4	3.1	5.9
Age of respondent					
18 to 24	3.9	50.2	36.9	2.1	6.9
25 to 34	3.7	69.5	19.7	1.0	6.1
35 to 44	1.5	62.3	25.1	3.4	7.8
45 to 54	8.1	63.2	19.3	4.9	4.4
55 to 64	1.2	75.1	18.0	0.9	4.8
65 to 74	2.0	79.0	9.9	1.3	7.8
75 or older	3.0	59.4	12.0	4.8	20.8
Race/ethnicity					
White	2.8	75.0	13.5	2.3	6.3
African American	0.9	43.5	36.0	4.3	15.3
Hispanic	7.9	48.4	33.3	3.4	7.0
Other	0.7	44.2	46.1	1.5	7.4
Language of interview					
English	3.0	65.8	21.6	2.6	7.0
Spanish	14.2	53.1	18.2	3.4	11.0
Income					
Less than $15,000	5.1	51.1	28.2	4.4	11.2
$15,001 to $25,000	0.7	61.2	21.3	0.2	16.6
$25,001 to $50,000	3.9	65.1	25.0	2.3	3.7
$50,001 to $75,000	3.5	69.3	18.8	1.8	6.6
$75,001 to $100,000	0.0	80.9	15.4	2.4	1.3
Over $100,000	1.4	83.6	11.3	2.4	1.3
County					
Potter	6.3	56.5	24.7	3.1	9.3
Randall	1.1	73.4	18.3	2.1	5.2

Figure 24
Likelihood Person Sending Texts or Emails While Driving
Will Get a Ticket over Six Months
(n=681)



- Respondents who stated they were aware that their state or city has a law banning texting or emailing while driving were presented the following scenario: "Assume that over the next six months someone frequently sends text messages or emails while driving. How likely do you think that person would be to receive a ticket for sending texts or emails while driving?" As shown in Figure 24, 64.2 percent of respondents reported it would be either (34.2 percent) very likely or (30.0 percent) somewhat likely that a person texting or emailing while driving would receive a ticket.
- The percentage of respondents who believed it would be very likely for a person frequently texting or emailing while driving over the next six months to get a ticket decreased as education and income increased and was higher among female respondents, African American respondents, respondents who completed the interview in Spanish, and respondents living in Potter County (see Table 41). Percentages varied by age.

Table 41
Likelihood Person Talking on Cell Phone While Driving
Will Get a Ticket over Next Six Months
By Selected Demographics

	Percentage Responding			
	Very Likely	Somewhat Likely	Somewhat unlikely	Very unlikely
Education				
Less than high school grad	54.6	23.0	15.3	7.1
High school grad	36.9	33.7	16.2	13.1
Some college	32.7	33.9	17.7	15.7
College grad or more	18.6	23.7	26.8	30.9
Gender				
Female	39.7	33.9	14.5	11.9
Male	29.1	26.3	23.1	21.5
Age of respondent				
18 to 24	39.8	30.9	22.9	6.4
25 to 34	35.8	26.7	20.4	17.0
35 to 44	39.4	24.3	14.3	22.0
45 to 54	28.5	38.1	18.2	15.2
55 to 64	31.5	26.8	19.7	22.0
65 to 74	29.5	32.9	22.0	15.6
75 or older	35.5	33.1	8.5	22.9
Race/ethnicity				
White	29.0	30.7	18.4	22.0
African American	60.5	25.5	8.8	5.2
Hispanic	43.5	35.4	13.8	7.3
Other	38.0	15.0	40.6	6.4
Language of interview				
English	32.9	30.5	19.0	17.6
Spanish	59.2	23.2	16.0	1.6
Income				
Less than $10,000	45.9	26.6	13.2	14.3
$15,001 to $25,000	44.7	32.6	14.6	8.1
$25,001 to $50,000	33.8	32.0	23.2	11.0
$50,001 to $75,000	22.7	34.4	18.5	24.4
$75,001 to $100,000	27.6	35.8	13.2	23.4
Over $100,000	19.3	22.0	29.5	29.2
County				
Potter	39.7	30.8	16.8	12.7
Randall	29.5	29.4	20.7	20.4

Health Issues

Figure 25
Participated in Physical Activity in Past Month

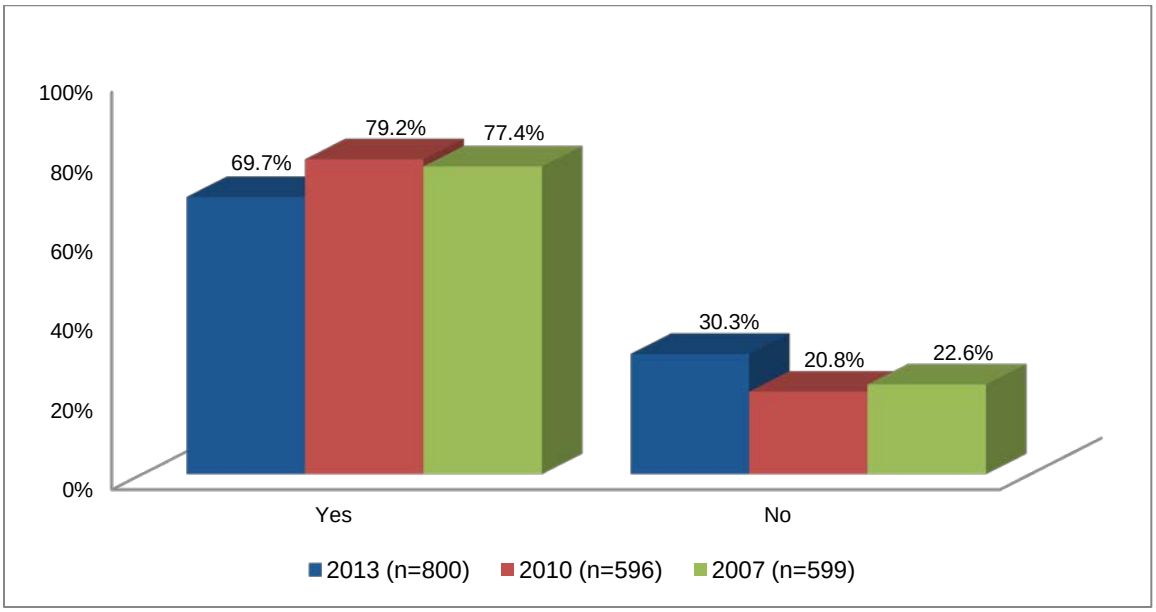


Table 42
"At Risk" Comparisons:
Participated in Physical Activities

	Percentage At Risk
Nationwide 2011[1]	20.9
Texas 2011	19.0
ADH Service Area 2013	30.3

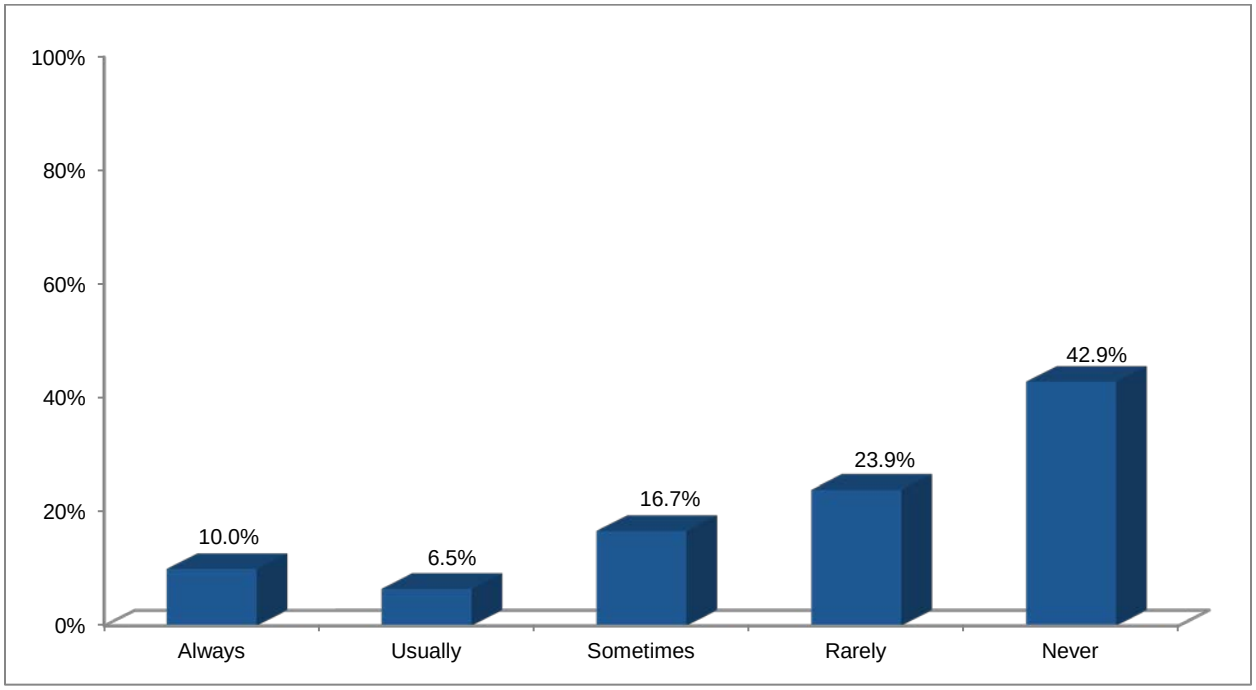
- Respondents were asked if, during the last month, they participated in any physical activities or exercises such as running, calisthenics, gardening, or walking for exercise. As shown in Figure 25, 69.7 percent of the respondents indicated they did participate in physical activities or exercises.
- The percentage of respondents at risk because they did not participate in physical activities or exercises in the past month was higher for ADH service area respondents than Nationwide 2011 and Texas 2011 respondents (see Table 42).
- The percentage of respondents who reported participating in physical activities or exercises during the past month decreased as the age of the respondent increased, increased as education and income increased, and was higher among male respondents and respondents living in Randall County (see Table 43).

[1] BRFSS survey asked respondents if they participated in enough aerobic and muscle strengthening exercises to meet guidelines.
http://apps.nccd.cdc.gov/brfss/display.asp?state=TX&cat=PA&yr=2011&qkey=8291&grp=0&SUBMIT4=Go

Table 43
Participated in Physical Activities
By Selected Demographics

	Percentage responding	
	Yes	No
ADH Service Area	69.7	30.3
Age of respondent		
18 to 24	76.9	23.1
25 to 34	70.4	29.6
35 to 44	77.7	22.3
45 to 54	64.4	35.6
55 to 64	62.7	37.3
65 to 74	70.5	29.5
75 or older	58.0	42.0
Gender of respondent		
Female	65.1	34.9
Male	74.0	26.0
Education		
Less than HS grad	49.4	50.6
High school grad	73.0	27.0
Some college	69.4	30.6
College grad or more	81.8	18.2
Income		
Less than $15,000	55.2	44.8
$15,001 to $25,000	54.5	45.5
$25,001 to $50,000	72.6	27.4
$50,001 to $75,000	76.5	23.5
$75,001 to $100,000	86.9	13.1
Over $100,000	87.7	12.3
County		
Potter	63.9	36.1
Randall	74.9	25.1

Figure 26
Worried or Stressed about Having Money for Nutritious Meals
(n=796)



- Respondents were asked how often in the past 12 months they were worried or stressed about having enough money to buy nutritious meals. As shown in Figure 26, 33.2 percent of respondents were either always (10.0 percent), usually (6.5 percent) or sometimes (16.7 percent) were stressed or worried about having money to buy nutritious meals.
- As shown in Table 44 the percentage of respondents who indicated they were always, usually, or sometimes stressed or worried about having money to pay for nutritious meals in the past 12 months decreased as education and income increased. Percentages were higher among female respondents, respondents age 35 to 44, Hispanic respondents, those who completed the interview in Spanish, those with children under 18 in the household and respondents living in Potter County.

Table 44
Stressed or Worried about Having Money for Nutritious Meals
By Selected Demographics

	Percentage Responding				
	Always	Usually	Sometimes	Rarely	Never
ADH Service Area	10.0	6.5	16.7	23.9	42.9
Education					
Less than high school grad	15.5	15.8	23.7	19.9	25.1
High school grad or GED	11.9	4.0	18.4	24.8	40.9
College 1 to 3 years	8.8	4.1	16.2	27.7	43.3
College 4 years or more	5.1	6.7	10.2	19.3	58.7
Gender					
Female	11.9	6.8	20.4	21.5	39.5
Male	8.1	6.4	13.2	26.4	45.9
Age of respondent					
18 to 24	2.9	6.8	19.0	33.9	37.4
25 to 34	12.7	8.2	17.1	17.7	44.3
35 to 44	14.9	5.5	22.4	31.0	26.2
45 to 54	9.4	9.3	14.3	31.2	35.8
55 to 64	11.9	6.3	12.4	15.5	53.8
65 to 74	8.2	3.6	14.8	15.6	57.8
75 or older	5.9	1.5	16.1	11.0	65.5
Race/ethnicity					
White	9.7	5.3	13.2	24.3	47.5
African American	14.3	3.6	19.5	7.3	55.3
Hispanic	10.1	11.7	28.1	24.5	25.6
Other	10.2	5.8	14.1	32.5	37.5
Language of interview					
English	9.5	5.3	16.1	24.3	44.8
Spanish	18.7	26.8	28.9	17.2	8.4
Children under 18 in household					
Yes	12.1	9.4	19.9	28.0	30.6
No	8.5	4.6	14.7	21.0	51.1
Income					
Less than $10,000	17.6	12.3	29.5	16.2	24.5
$15,001 to $25,000	19.9	10.5	19.8	15.5	34.3
$25,001 to $50,000	9.0	8.4	18.8	28.3	35.5
$50,001 to $75,000	8.0	3.1	9.7	28.6	50.6
$75,001 to $100,000	3.0	5.4	7.7	33.2	50.8
Over $100,000	1.4	0.5	2.8	23.6	71.7
County					
Potter	11.6	8.2	20.4	23.1	36.7
Randall	8.5	5.0	13.5	24.7	49.4

Figure 27[1]
Body Mass Index

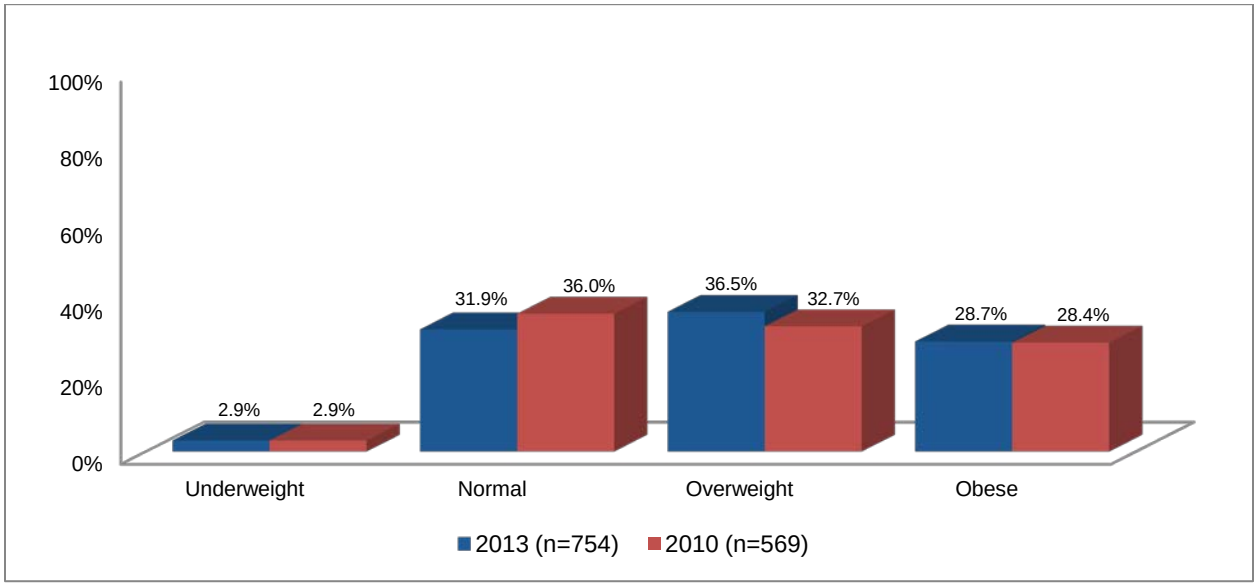


Table 45
"At Risk" Comparisons:
Body Mass Index

	Percentage At Risk
Nationwide 2011	63.5
Texas 2009	65.8
ADH Service Area 2013	65.2

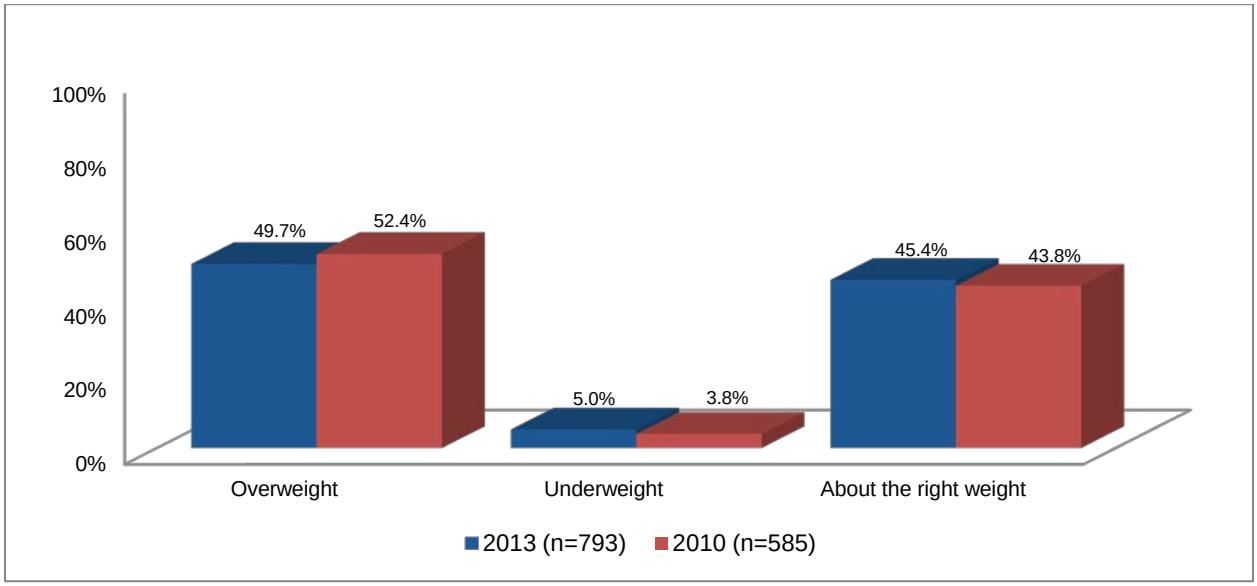
- All respondents were asked for their height and weight. Using the Centers for Disease Control formula[2], the Body Mass Index was computed and categorized for each respondent for which there was adequate data. As shown in Figure 27, 65.2 percent of the respondents were either overweight (36.5 percent) or obese (28.7 percent).
- The percentage of ADH service area 2010 respondents who were at risk because they were overweight or obese was similar to Nationwide 2011 and Texas 2011 respondents (see Table 45).
- The percentage of respondents who were overweight or obese was higher among respondents age 45 to 54, and among male respondents (see Table 46). Percentages varied among income and education categories.

[1] Forty-six respondents were missing height, weight or both and there BMI could not be computed
[2] The CDC formula [[weight / (height * height)] x 703] and other information can be found at http://www.cdc.gov/healthyweight/assessing/bmi/adult_BMI/index.html.

Table 46
Body Mass Index
By Selected Demographics

	Percentage responding			
	Underweight	Normal	Overweight	Obese
ADH Service Area	2.9	31.9	36.5	28.7
Age of respondent				
18 to 24	8.7	39.1	32.2	20.0
25 to 34	0.7	44.7	36.9	17.7
35 to 44	3.0	23.3	44.4	29.3
45 to 54	0.7	21.7	35.5	42.0
55 to 64	1.9	26.4	32.1	39.6
65 to 74	3.1	34.4	34.4	28.1
75 or older	3.6	39.3	37.5	19.6
Gender of respondent				
Female	4.3	36.7	31.8	27.2
Male	1.8	27.5	40.9	29.8
Education				
Less than high school grad	0.8	34.4	37.6	27.2
High school grad	4.0	39.3	33.8	22.9
Some college	4.0	26.8	35.1	34.1
College grad or more	1.3	28.9	42.1	27.6
Income				
Less than $15,000	6.0	39.8	28.6	25.6
$15,001 to $25,000	4.4	31.9	34.1	29.7
$25,001 to $50,000	2.8	38.1	32.4	26.7
$50,001 to $75,000	0.8	15.7	43.8	39.7
More than $75,000	0.0	30.1	39.8	30.1

Figure 28
Weight by Self-Report

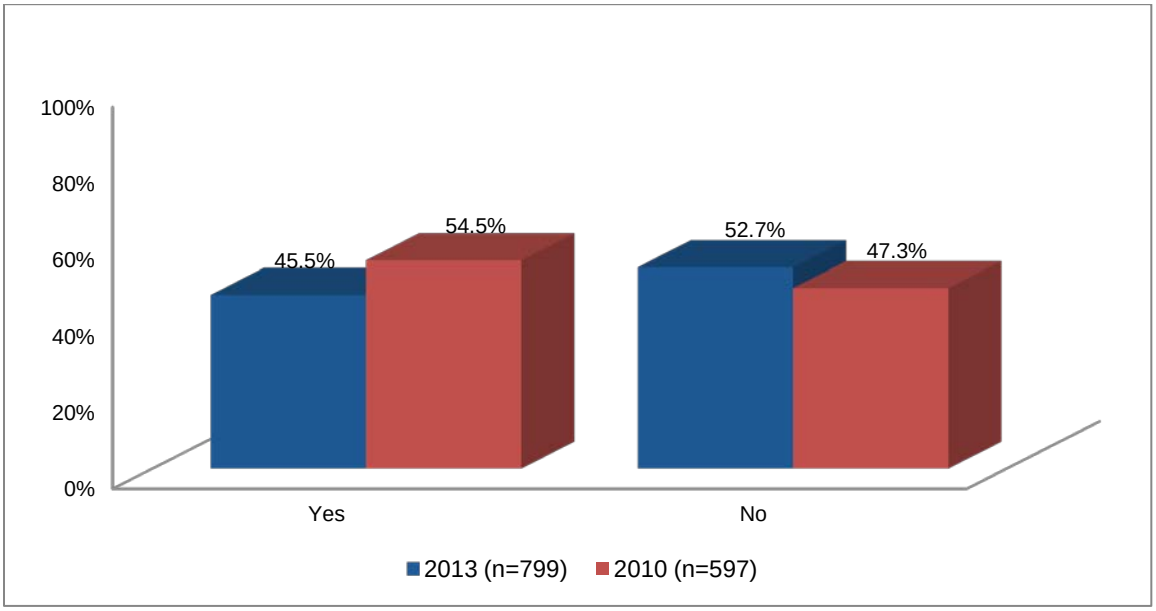


- Respondents were asked if they considered themselves overweight, underweight, or about the right weight. As shown in Figure 27, 49.7 percent of the respondents reported they were overweight. Forty-five percent indicated they were about the right weight.
- The majority of people in the underweight, normal and obese categories generally recognized their weight status. However, a majority of the people classified as overweight (51.6 percent) thought that they were about the right weight (see Table 47).

Table 47
Actual BMI Compared to Perception of Weight

BMI Actual	Self-Perception		
	Underweight	About the right weight	Overweight
Underweight	63.6	36.4	0.0
Normal	10.9	76.1	13.0
Overweight	0.0	51.6	48.4
Obese	0.0	5.6	94.4

Figure 29
Tried to Lose Weight in Past 12 Months



- Respondents were asked if they had tried to lose weight in the past 12 months. As shown in Figure 29, 45.5 percent of the respondents answered "yes."
- The percentage of respondents who reported trying to lose weight in the past 12 months was higher among respondents age 55 to 64, female respondents, respondents with a college degree or more, and respondents whose income was $75,001 to $100,000 (see Table 48).

Table 48
Tried to Lose Weight in Past 12 Months
By Selected Demographics

	Percentage responding	
	Yes	No
ADH Service Area	46.5	54.5
Age of respondent		
18 to 24	46.3	53.7
25 to 34	43.9	56.1
35 to 44	40.6	59.4
45 to 54	49.0	51.0
55 to 64	58.3	41.7
65 to 74	43.6	56.4
75 or older	26.4	73.6
Gender		
Female	49.1	50.9
Male	41.6	58.4
Education		
Less than HS grad	34.2	65.8
High school grad	42.1	57.9
Some college	49.8	50.2
College grad or more	51.1	48.9
Less than $15,000	42.8	57.2
$15,001 to $25,000	34.7	65.3
$25,001 to $50,000	46.7	53.3
$50,001 to $75,000	50.7	49.3
$75,001 to $100,000	56.6	43.4
Over $100,000	43.1	56.9

Table 49
Method Used to Lose Weight

	Percentage Responding Yes[1]	
	2013 (n=363)	2010 (n=316)
Exercised	55.5	57.8
Ate less food (amount)	30.0	35.2
Changed eating habits (didn't eat late at night, ate several small meals a day)	15.0	10.3
Ate few carbohydrates	12.6	8.6
Ate less sugar, candy, sweets	11.0	9.6
Switched to food with lower calories	-	10.8
Ate less fat	9.7	11.1
Ate more fruits, vegetables, salads	8.8	9.3
Joined a weight loss program such as Weight Watchers, Jenny Craig, Tops or Overeaters Anonymous	6.9	5.6
Ate "diet" foods or products	5.7	2.3
Ate less junk food	5.7	4.8
Followed a special diet such as Dr. Atkins, South Beach, other high protein or low carbohydrate diet, cabbage soup diet, Ornish, Nutrisystem, Body-for-Life	4.5	6.4
Took other pills, medicines, herbs, or supplements not needing a prescription	3.4	1.5
Used a liquid diet formula such as Slimfast or Optifast	2.5	0.4
Drank a lot of water	2.4	3.7
Skipped meals	1.1	1.9
Other, specify	0.2	9.3
Took diet pills prescribed by a doctor	0.1	0.3
Started to smoke or began to smoke again	0.0	0.0
Took laxatives or vomited	0.0	0.0

- Respondents who indicated they had tried to lose weight during the past 12 months were asked what method they used to lose weight. As shown in Table 49, 55.5 percent reported exercising and 30.0 percent said they ate less food. Fifteen percent changed their eating habits.

[1] Because each of these methods was asked as a separate question, the percentages will not total to 100.0 percent.

Figure 30
Been Told You Have Diabetes

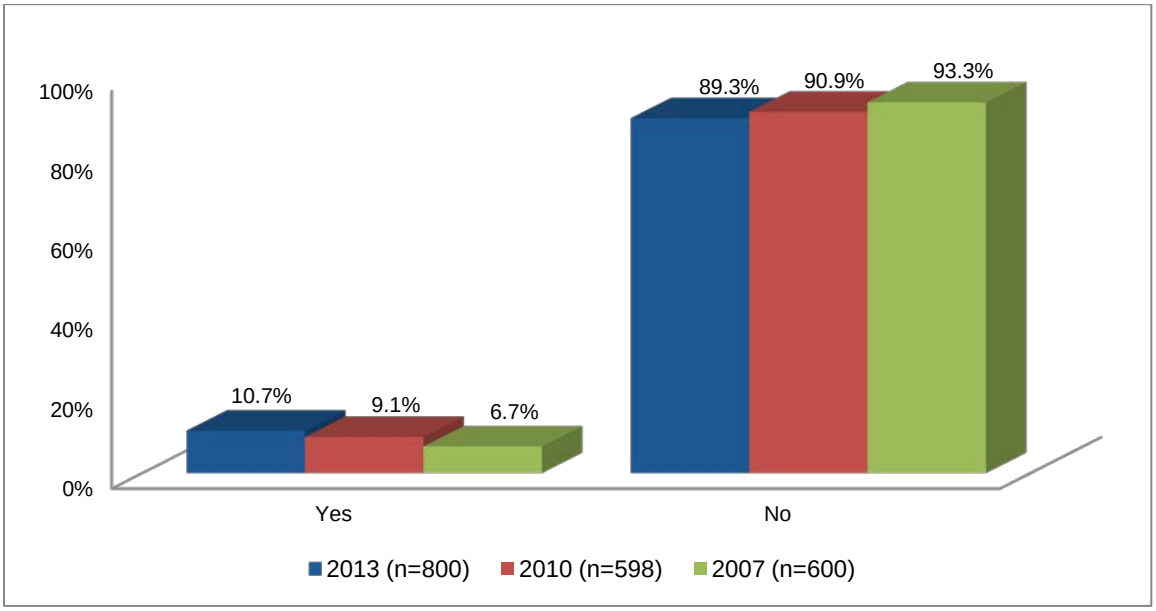


Table 50
"At Risk" Comparisons:
Diabetes

	Percentage At Risk
Nationwide 2010	8.7
Texas 2010	9.7
ADH Service Area 2013	10.7

- All respondents were asked if a doctor had told them they had diabetes. As shown in Figure 29, 10.7 percent of the respondents said they had (this excludes women who had gestational diabetes only).
- A comparable percentage of the 2013 ADH service area respondents had been told they had diabetes when compared to 2010 Nationwide (8.7 percent) and 2010 Texas (9.7 percent) data (see Table 50).
- As shown in Table 51, the percentage of respondents who were at risk of diabetes increased as the age of the respondent increased, and was higher among Hispanic respondents, and respondents without children under 18 living in the household.
- Women who had ever been told they had diabetes were asked if they had been told they had diabetes when they were pregnant. Four (0.4 percent) of the 48 respondents answered "yes." These four women were not included in the "at risk" percentage.
- When asked if they had ever been told by doctor they had pre-diabetes or borderline diabetes, 4.8 percent of the 711 respondents without diabetes answered "yes." The percentage was 8.6 among African American respondents (see Table 52).

Table 51
Have Diabetes
By Selected Demographics

	Percentage responding	
	Yes	No
ADH Service Area	10.7	89.3
Age of respondent		
18 to 24	4.1	95.9
25 to 34	5.4	94.6
35 to 44	6.1	93.9
45 to 54	16.9	83.1
55 to 64	17.7	82.3
65 to 74	11.9	88.1
75 or older	24.1	75.9
Race/ethnicity		
White	12.2	87.8
Hispanic	20.9	79.1
African American	4.9	95.1
Other	14.3	85.7
Have children under 18 in household		
Yes	8.3	91.7
No	13.2	86.8

Table 52
Have Pre-Diabetes or Borderline Diabetes
By Selected Demographics

	Percentage responding	
	Yes	No
ADH Service Area	4.8	95.2
Race/ethnicity		
White	4.2	95.8
Hispanic	0.0	100.0
African American	8.6	91.4
Other	2.6	97.4

Figure 31
Been Told You Had a Heart Attack

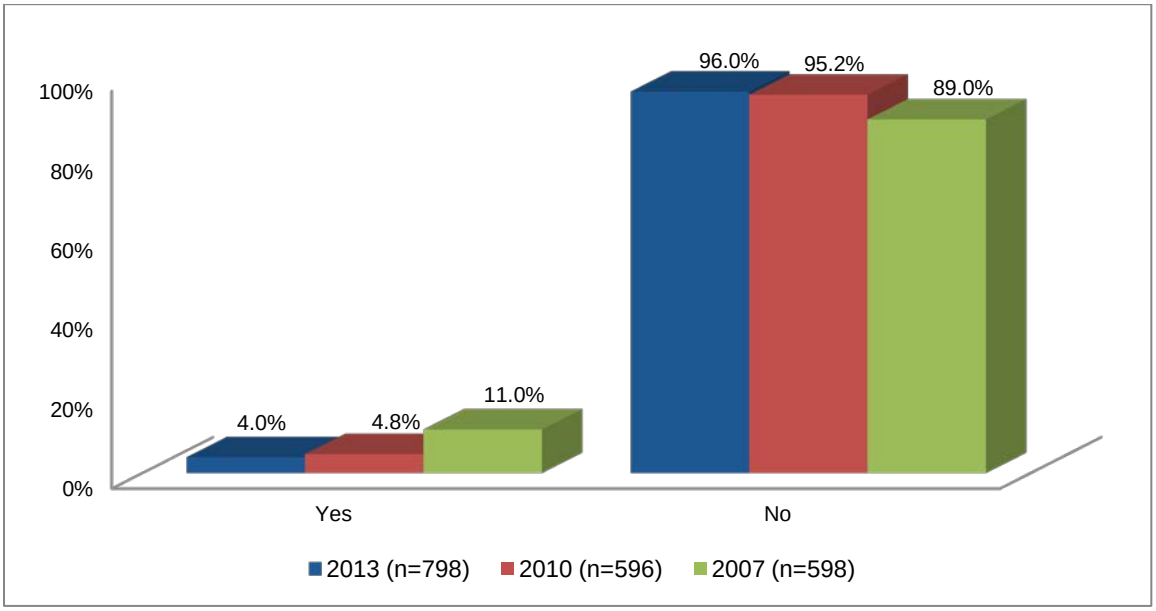


Table 53
"At Risk" Comparisons:
Heart Attack

	Percentage At Risk
Nationwide 2010	4.1
Texas 2010	4.3
ADH Service Area 2013	4.0

- Respondents were asked if a doctor, nurse, or other health professional had ever told them they had had a heart attack. As shown in Figure 31, 4.0 percent of the respondents indicated they had had a heart attack.
- The percentage of ADH service area 2013 respondents who were at risk because they were told they had a heart attack was similar to Nationwide 2010 and Texas 2010 respondents (see Table 53).
- The percentage of respondents who had been told they had had a heart attack increased as the age of the respondent increased (see Table 54).

Table 54
Been Told You Had a Heart Attack
By Selected Demographics

	Percentage responding	
	Yes	No
ADH Service Area	4.0	96.0
Age of respondent		
18 to 24	0.0	100.0
25 to 34	0.0	100.0
35 to 44	2.2	97.8
45 to 54	4.2	95.8
55 to 64	6.7	93.3
65 to 74	10.6	89.4
75 or older	13.1	86.9

Figure 32
Been Told You Had Angina or Coronary Heart Disease

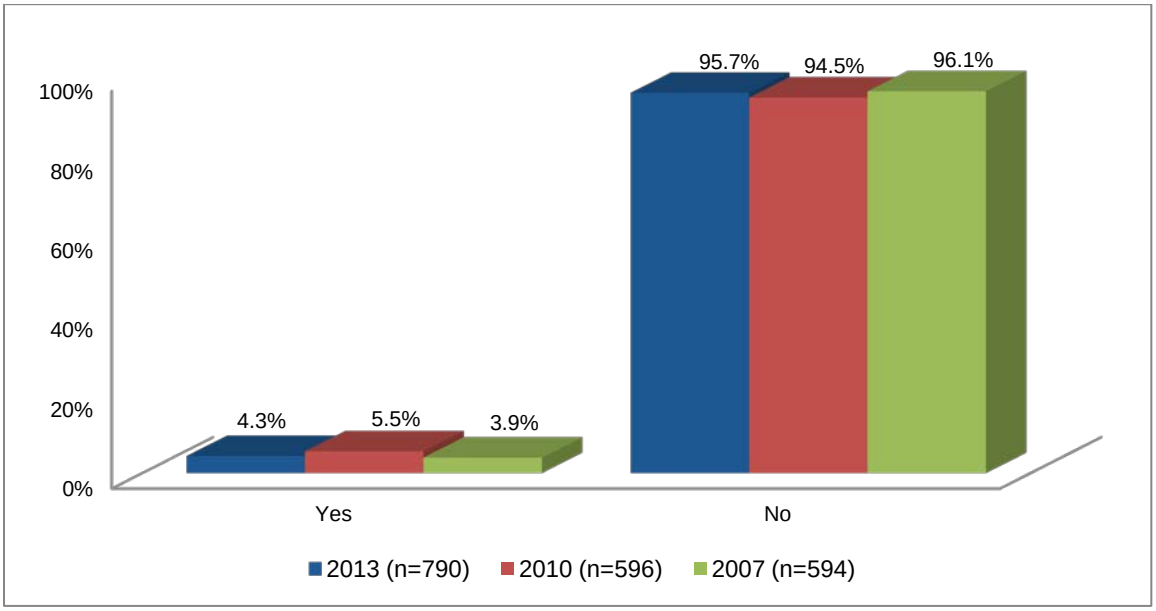


Table 55
"At Risk" Comparisons:
Angina or Coronary Heart Disease

	Percentage At Risk
Nationwide 2010	4.1
Texas 2010	4.4
ADH Service Area 2013	4.3

- Respondents were asked if a doctor, nurse, or other health professional had ever told them they had angina or coronary heart disease. Four percent answered "yes" (see Figure 32).
- The percentage of respondents who were at risk because they had angina or coronary heart disease was similar among ADH service area 2013 respondents, Nationwide 2010 and Texas 2010 respondents (see Table 55).
- The percentage of respondents who had been told they had angina or coronary heart disease increased as the age of the respondent increased (see Table 56).

Table 56
Had Angina or Coronary Heart Disease
By Selected Demographics

	Percentage responding	
	Yes	No
ADH Service Area	4.3	95.7
Age of respondent		
18 to 24	0.0	100.0
25 to 34	0.0	100.0
35 to 44	0.0	100.0
45 to 54	4.2	95.8
55 to 64	6.7	93.3
65 to 74	17.8	82.2
75 or older	14.1	85.9

Figure 33
Been Told You Had a Stroke

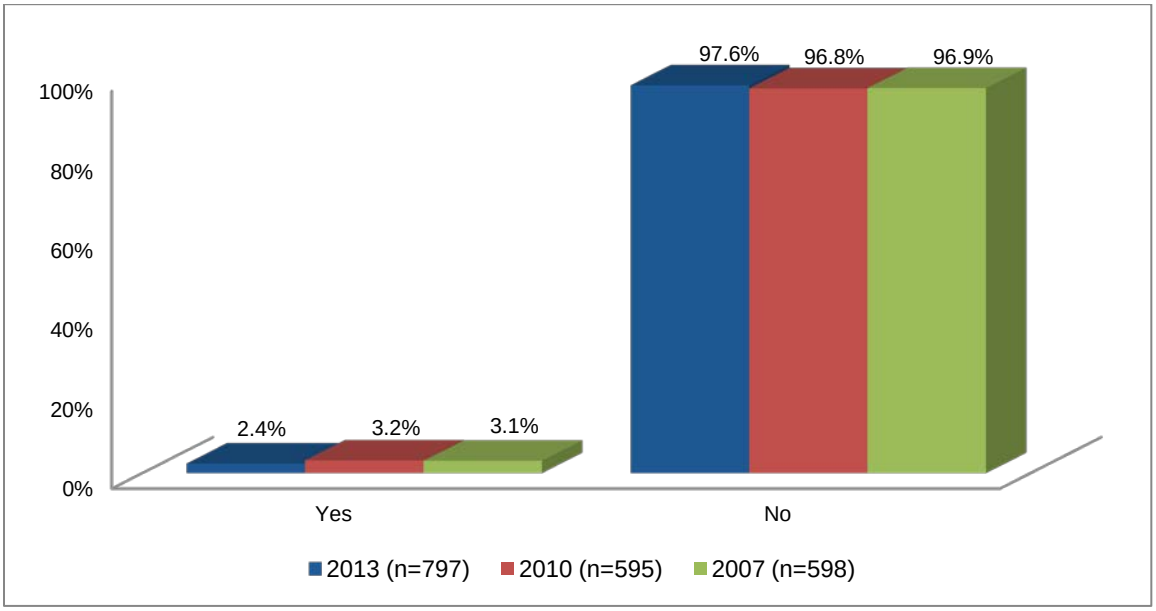


Table 57
"At Risk" Comparisons:
Stroke

	Percentage At Risk
Nationwide 2010	2.6
Texas 2010	2.8
ADH Service Area 2013	2.4

- Respondents were asked if a doctor, nurse, or other health professional had ever told them they had a stroke. As shown in Figure 32, 2.4 percent of the respondents indicated they had been told they had a stroke.
- The percentage of respondents who were at risk because they had a stroke was similar among ADH service area 2013 respondents than Nationwide 2010 and Texas 2010 respondents (see Table 57).

Figure 34
Been Told You Had Asthma

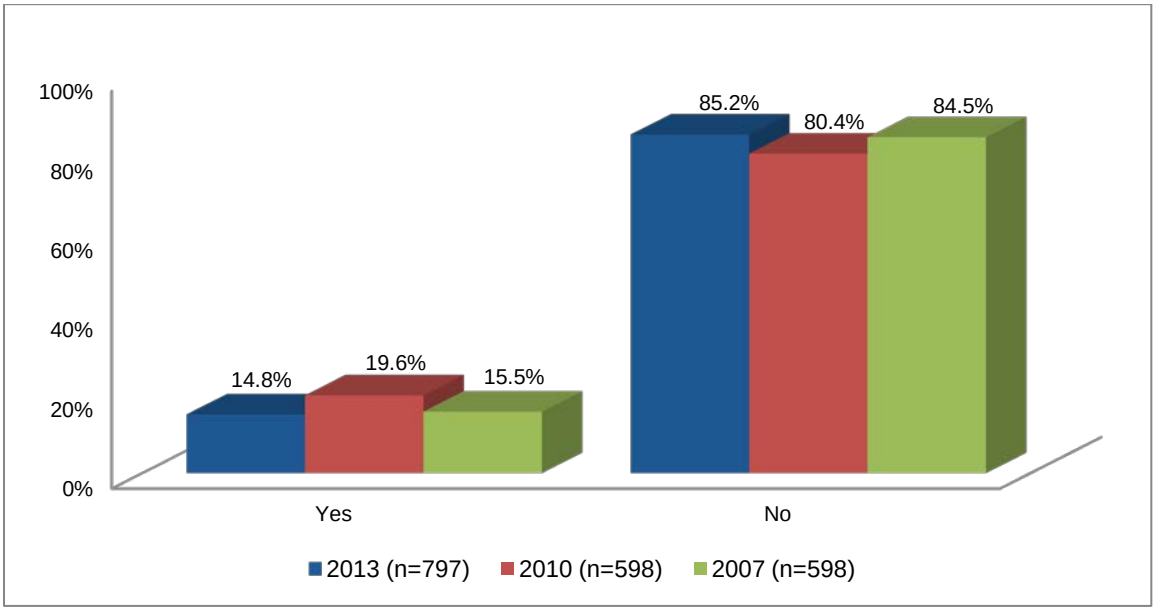


Table 58
"At Risk" Comparisons:
Currently Have Asthma

	Percentage At Risk
Nationwide 2010	9.0
Texas 2010	7.4
ADH Service Area 2013	8.7

- Respondents were asked if a doctor, nurse, or other health professional had ever told them they had asthma. As shown in Figure 34, 14.8 percent of the respondents had been told they had asthma.
- When asked if they still had asthma, 69 of the 118 respondents who had ever been told they had asthma answered "yes" (58.7 percent). This equals 8.7 percent ("at risk") of all 797 respondents who answered the questions (see Table 58). This is higher than the Texas percentage (7.4 percent) but lower than the nationwide percentage (9.0 percent) in 2010.
- As shown in Table 59, the percentage of respondents who had ever been told they had asthma varied by age and was higher among respondents that completed the interview in English.
- The percentage of respondents who reported they currently had asthma was higher among female respondents, and respondents with an income less than $15,001 to $25,000 (see Table 60).

Table 59
Ever Had Asthma
By Selected Demographics

	Percentage responding	
	Yes	No
ADH Service Area	14.8	85.2
Age of respondent		
18 to 24	19.8	80.2
25 to 34	17.6	82.4
35 to 44	8.0	92.0
45 to 54	15.7	84.3
55 to 64	18.5	81.5
65 to 74	14.6	85.4
75 or older	4.3	95.7
Language of interview		
English	15.7	84.3
Spanish	0.0	100.0

Table 60
Currently Have Asthma
By Selected Demographics

	Percentage At Risk
ADH Service Area	8.7
Gender of respondent	
Female	11.2
Male	6.3
Income	
Less than $15,000	14.6
$15,001 to $25,000	14.4
$25,001 to $50,000	3.8
$50,001 to $75,000	7.3
$75,001 to $100,000	11.6
Over $100,000	1.2

Figure 35
Smoked at Least 100 Cigarettes in Entire Life

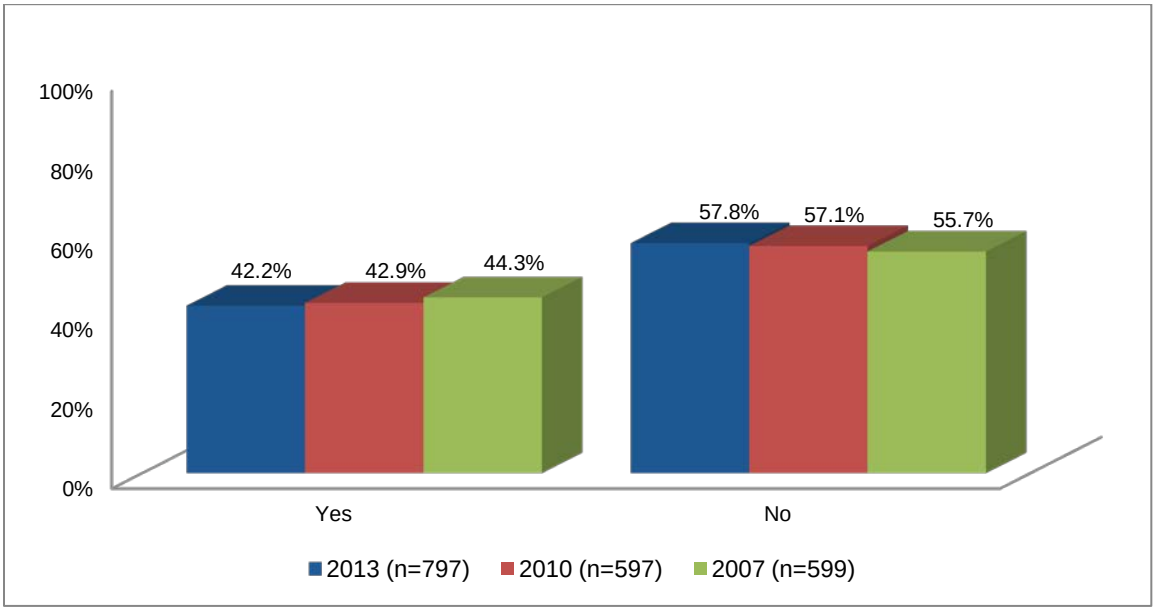


Table 61
"At Risk" Comparisons:
Smoked at Least 100 Cigarettes in Entire Life

	Percentage At Risk
Nationwide 2009[1]	46.1
Texas 2009	41.0
ADH Service Area 2013	42.2

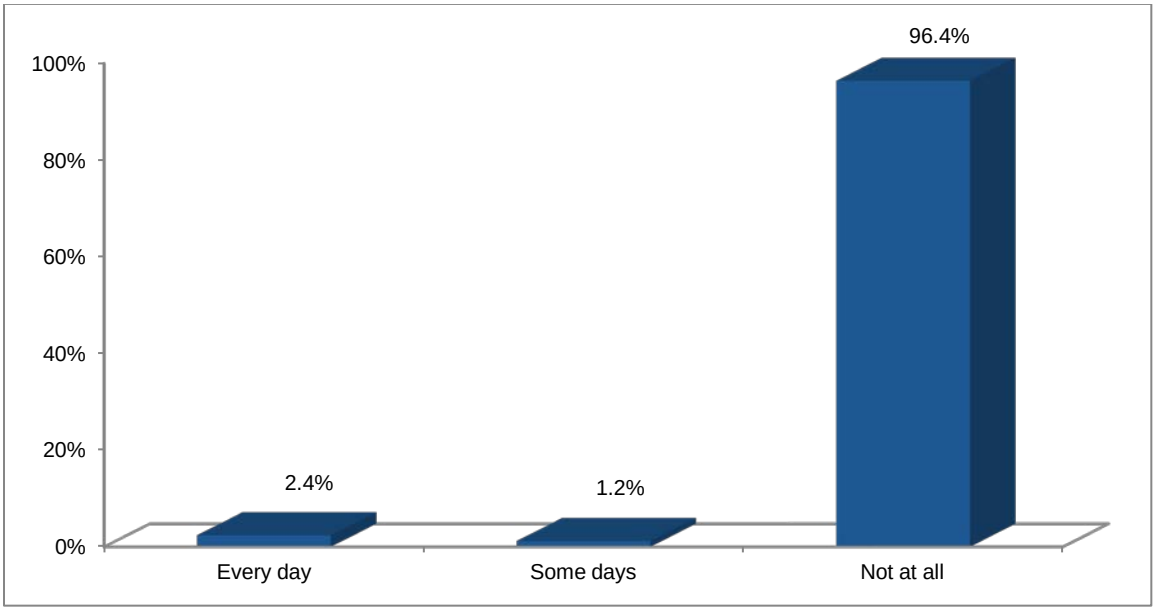
- Respondents were asked if they had smoked at least 100 cigarettes (5 packs) in their life time. As shown in Figure 35, 42.2 percent reported having smoked at least 100 cigarettes in their life.
- The percentage of ADH service area 2013 respondents who are "at risk" appears lower than the Nationwide 2009 respondents and similar to Texas 2009 respondents (see Table 61).
- Smoking at least 100 cigarettes in their life ("at risk") decreased as education and income increased and was higher among respondents age 65 to 74 (see Table 62).

[1] The Nationwide and Texas 2009 comparison data for this question was found at: http://www.dshs.state.tx.us/chs/brfss/query/ brfss_dbquery2.asp.

Table 62
Smoked at Least 100 Cigarettes in Entire Life
By Selected Demographics

	Percentage responding	
	Yes	No
ADH Service Area	42.2	57.8
Education		
Less than HS grad	56.1	43.9
High school grad	42.0	58.0
Some college	42.7	57.3
College grad or more	29.8	70.2
Age of respondent		
18 to 24	33.0	67.0
25 to 34	45.4	54.6
35 to 44	31.8	68.2
45 to 54	47.0	53.0
55 to 64	47.0	53.0
65 to 74	55.9	44.1
75 or older	39.4	60.6
Income		
Less than $15,000	50.4	49.6
$15,001 to $25,000	53.5	46.5
$25,001 to $50,000	39.5	60.5
$50,001 to $75,000	36.2	63.8
$75,001 to $100,000	35.7	64.3
Over $100,000	36.9	63.1

Figure 36
Currently Use Chewing Tobacco
(n=797)



- Respondents were asked if they currently used chewing tobacco, snuff, or snus every day, some days or not at all. As shown in Figure 36, 3.6 percent use chewing tobacco (2.4 percent) every day while (1.2 percent) use chewing tobacco some days.

Figure 37
Currently Smoke Cigarettes

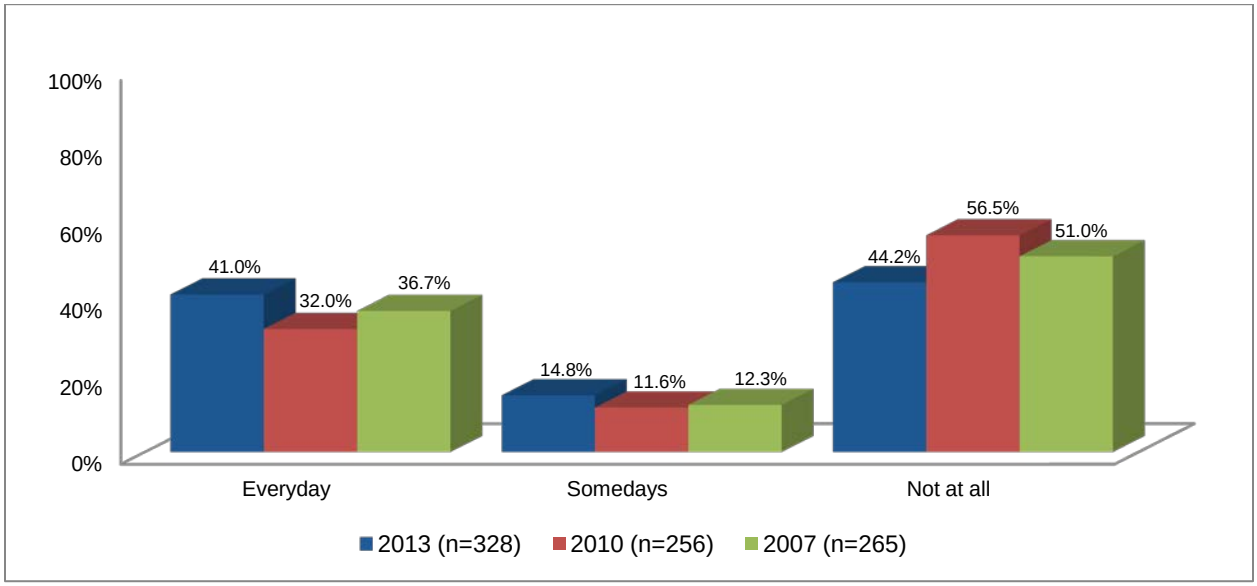


Table 63
"At Risk" Comparisons:
Smoke Every Day or Some Days

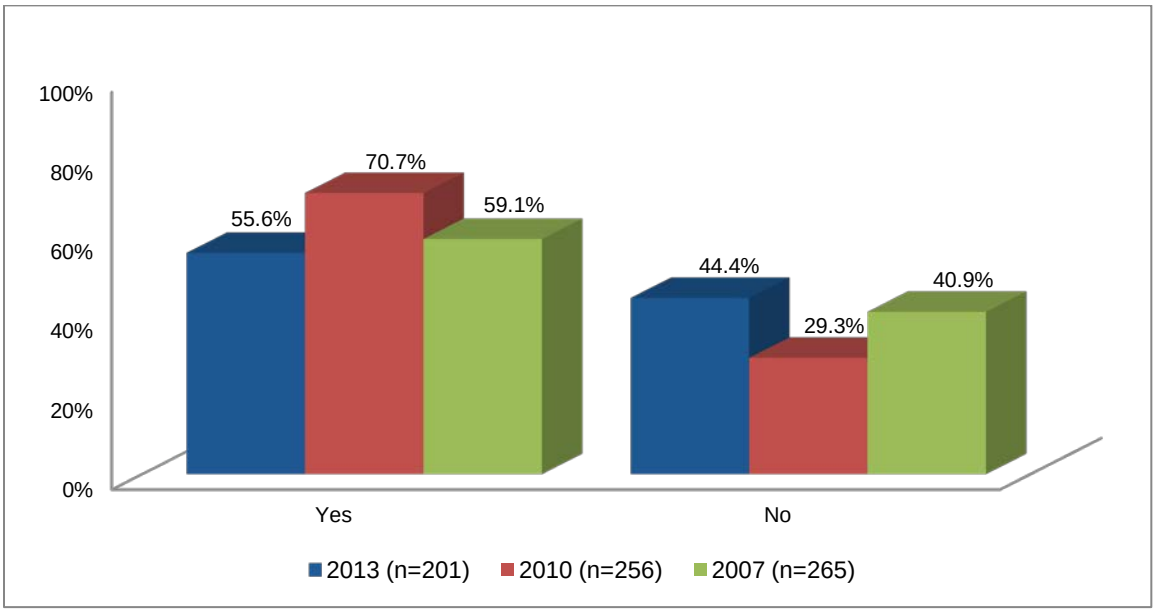
	Percentage At Risk
Nationwide 2011	21.1
Texas 2011	19.2
ADH Service Area 2013	23.1

- Respondents who had smoked at least 100 cigarettes in their entire life were asked if they still smoked every day, some days or not at all. As shown in Figure 37, 41.0 percent of them still smoked every day while 14.8 percent smoked some days. Forty-four percent no longer smoked cigarettes.
- An "at risk" person is defined as one who has smoked at least 100 cigarettes in their entire life and still smokes every day or some days (184 respondents/797 total = 23.1 percent) (see Table 63).The percentage at risk appeared to be greater in the ADH service area 2013 compared to Nationwide and Texas 2012.
- The percentage of respondents at risk due to smoking every day or some days generally decreased as the age of the respondent increased, education and income increased, and was higher among male respondents and respondents who completed the interview in English (see Table 64).

Table 64
Currently Smoke Every Day or Some Days
By Selected Demographics

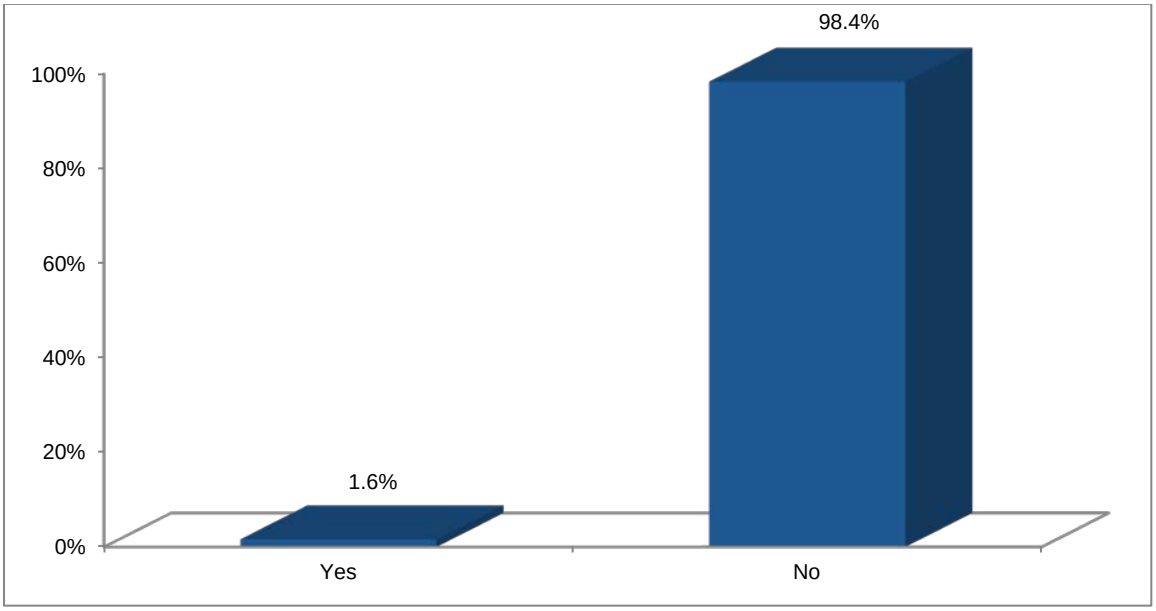
	Percentage At Risk
	Yes
ADH Service Area	23.1
Education	
Less than HS grad	33.8
High school grad	24.5
Some college	24.7
College grad or more	10.4
Gender	
Female	19.9
Male	26.7
Age of respondent	
18 to 24	29.4
25 to 34	23.0
35 to 44	24.0
45 to 54	26.9
55 to 64	21.2
65 to 74	20.4
75 or older	7.9
Language of interview	
English	24.2
Spanish	8.2
Income	
Less than $15,000	34.9
$15,001 to $25,000	28.9
$25,001 to $50,000	19.5
$50,001 to $75,000	26.3
$75,001 to $100,000	17.4
Over $100,000	6.3
County	
Potter	24.8
Randall	21.8

Figure 38
Tried to Quit Smoking in Past 12 Months



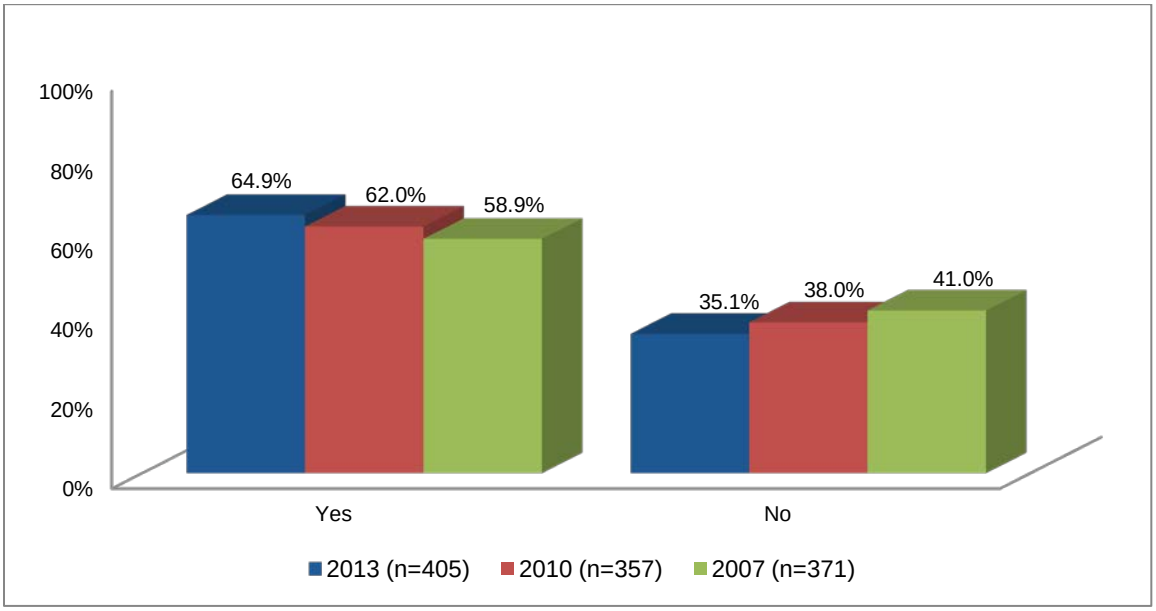
- Respondents who were still smoking either every day or some days were asked if, in the past 12 months, they had stopped smoking for one day or longer because they were trying to quit smoking. As shown in Figure 38, 55.6 percent of these respondents answered "yes."

Figure 39
Driving after Drinking
(n=794)



- Respondents were asked how many times they had driven when they had had perhaps too much to drink, during the past 30 days. As shown in Figure 39, 1.6 percent, 13 respondents, reported driving after drinking too much.
- Among the 13 respondents who stated that they had driven after drinking too much, 71.5 percent reported doing it one or two times. Two had driven after drinking too much 5 times. One respondent reported 10 times and another reported 25 times. The median response was two times.

Figure 40
Ever Had a Mammogram



- Female respondents were asked if they had ever had a mammogram, an x-ray of each breast to look for breast cancer. As shown in Figure 40, 64.9 percent of the female respondents reported having had a mammogram.
- As shown in Table 65 the percentage of the female respondents who had ever had a mammogram generally increased as the age of the respondent increased, and was higher among respondents of "other" ethnicity, and respondents with income $75,001 to $100,000.

Table 65
Ever Had a Mammogram
By Selected Demographics

	Percentage responding	
	Yes	No
ADH Service Area	64.9	35.1
Age of respondent		
18 to 24	23.4	76.6
25 to 34	13.1	86.9
35 to 44	58.5	41.5
45 to 54	94.2	5.8
55 to 64	95.5	4.5
65 to 74	93.8	6.2
75 or older	96.6	3.4
Race/ethnicity		
White	69.5	30.5
African American	69.2	30.8
Hispanic	46.4	53.6
Other	76.0	24.0
Income		
Less than $15,000	51.5	48.5
$15,001 to $25,000	51.7	48.3
$25,001 to $50,000	63.6	36.4
$50,001 to $75,000	74.7	25.3
$75,001 to $100,000	75.5	24.5
Over $100,000	70.0	30.0

Figure 41
Time Since Last Mammogram

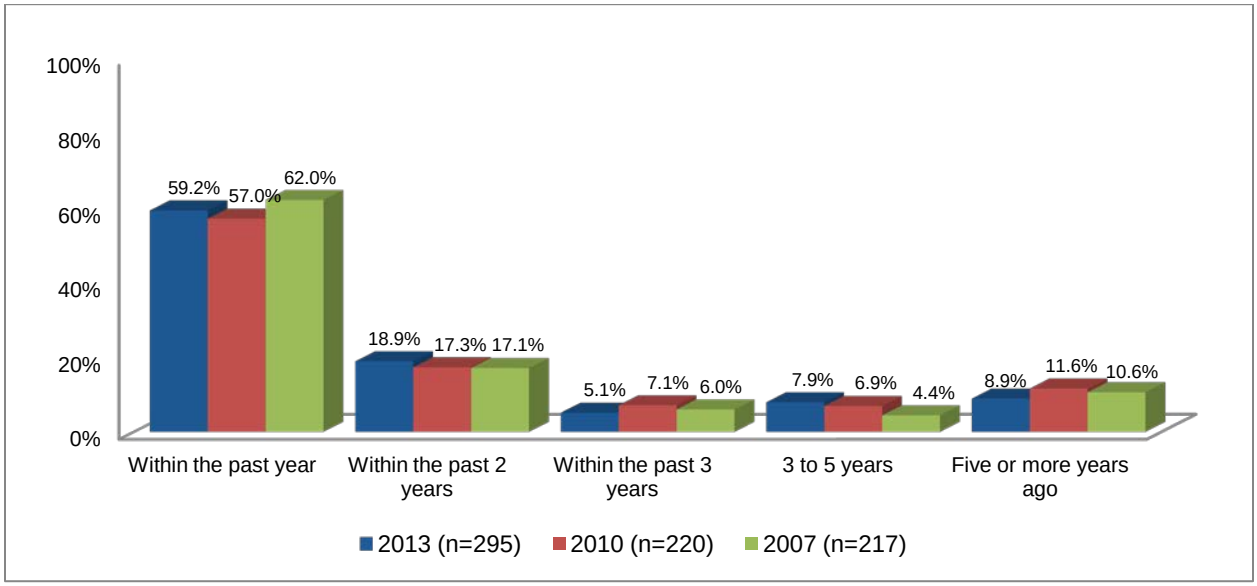


Table 66
"At Risk" Comparisons:
Time Since Last Mammogram
(Women age 40+ and no mammogram in past 2 years)

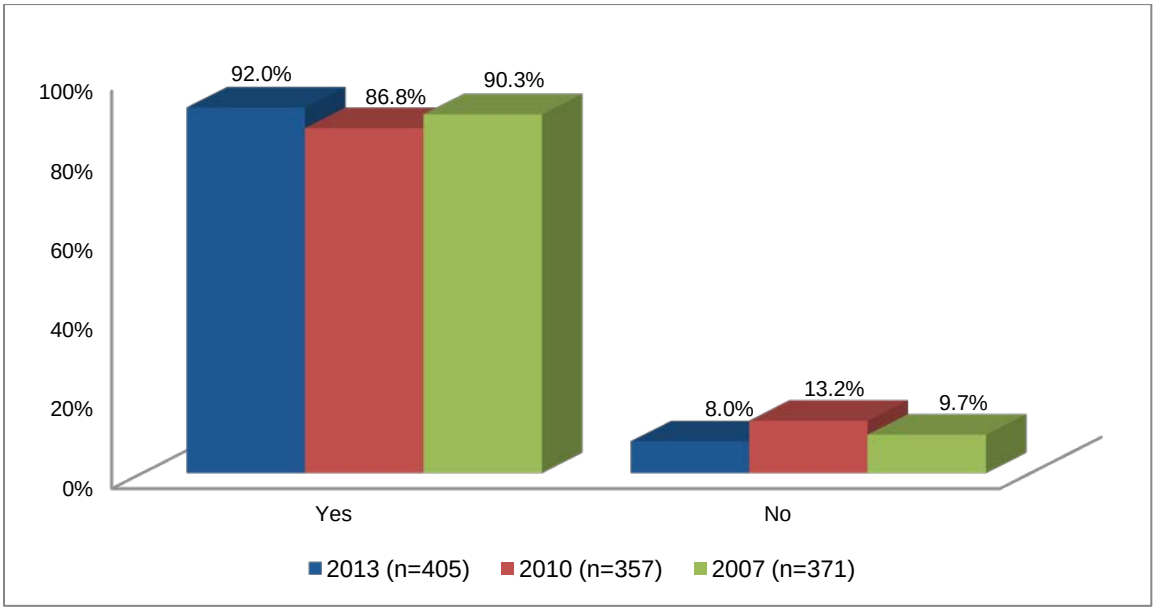
	Percentage At Risk
Nationwide 2010	24.8
Texas 2010	29.9
ADH Service Area 2013	26.8

- Female respondents of all ages who reported having had a mammogram were asked how long it had been since they got their last one. As shown in Figure 41, 78.1 percent reported having a mammogram either within the past year (59.2 percent) or within the past two years (18.9 percent).
- Women over 40 what never had a mammogram or had not had one within the past two years were classified as "at risk" When only female respondents age 40 and older were asked how long it had been since they got their last mammogram, 26.8 percent of them reported that it had been longer than 2 years (see Table 66).
- As shown in Table 67, the percentage of female respondents who had a mammogram more than 2 years ago generally increased as age increased and was higher among respondents of "other" ethnicity.

Table 67
Time Since Last Mammogram
By Selected Demographics

	Percentage responding		
	Within the Past Year	Within the Past 2 Years	More than 2 years
ADH Service Area	59.2	18.9	21.9
Age of respondent			
18 to 24	13.4	69.1	17.5
25 to 34	34.4	31.9	33.8
35 to 44	69.2	3.4	27.4
45 to 54	64.2	20.0	15.7
55 to 64	63.3	16.3	20.4
65 to 74	57.9	21.7	20.5
75 or older	55.9	13.5	30.6
Race/ethnicity			
White	58.2	17.7	24.1
African American	59.5	40.5	0.0
Hispanic	69.4	13.9	16.6
Other	36.3	23.9	39.8

Figure 42
Ever Had a Pap Test



- Female respondents were asked if they had ever had a Pap test, a test for cancer of the cervix. As shown in Figure 42, 92.0 percent of those respondents answered "yes."
- The percentage of female respondents who reported ever having had a Pap test increased as education, age, and income increased and was higher among white respondents (see Table 68).

Table 68
Ever Had a Pap Test
By Selected Demographics

	Percentage responding	
	Yes	No
ADH Service Area	92.0	8.0
Education		
Did not grad HS	88.2	11.8
High school grad	86.2	13.8
Some college	94.8	5.2
College grad or more	96.7	3.3
Age of respondent		
18 to 24	73.6	26.4
25 to 34	88.1	11.9
35 to 44	97.0	3.0
45 to 54	97.4	2.6
55 to 64	97.9	2.1
65 to 74	96.1	3.9
75 or older	91.8	8.2
Race/ethnicity		
White	94.6	5.4
African American	75.4	24.6
Hispanic	89.5	10.5
Other	89.6	10.5
Income		
Less than $15,000	89.3	10.7
$15,001 to $25,000	88.1	11.9
$25,001 to $50,000	96.2	3.8
$50,001 to $75,000	95.8	4.2
$75,001 to $100,000	98.4	1.6
Over $100,000	82.0	18.0

Figure 43
Time Since Last Pap Test

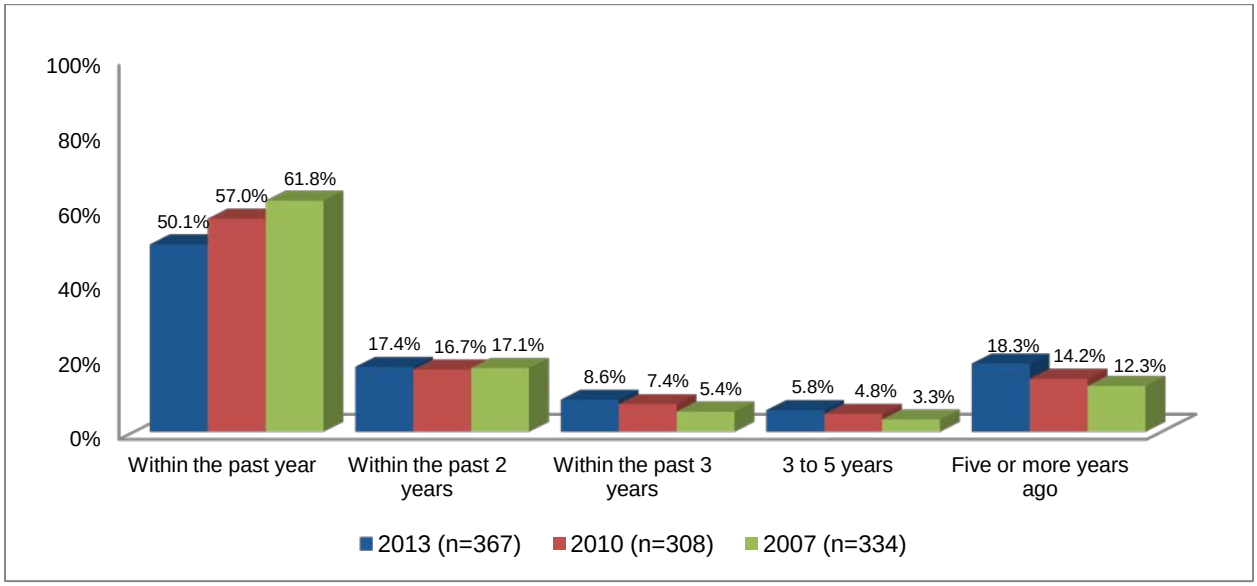


Table 69
"At Risk" Comparisons:
Time Since Last Pap Test
(Women age 18+ and no Pap in past 3 years)

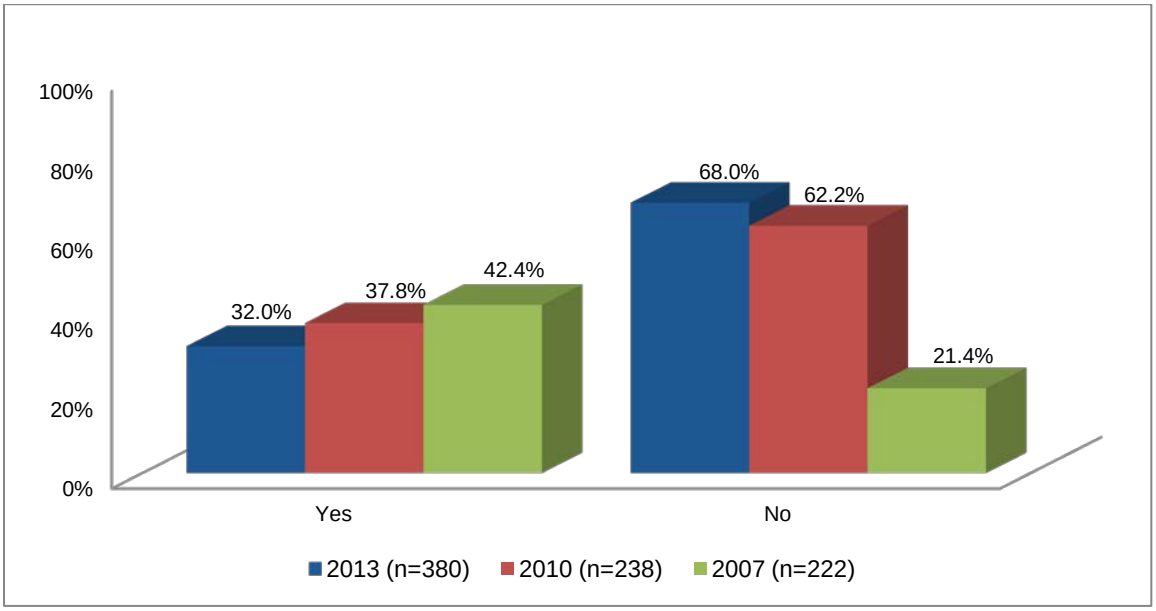
	Percentage At Risk
Nationwide 2010	19.0
Texas 2010	20.6
ADH Service Area 2013	29.9

- Female respondents who reported having had a Pap test were asked how long it had been since they got their last one. As shown in Figure 43, 67.5 percent of those respondents reported they had gotten their last Pap test within the past year (50.1 percent) or within the past 2 years (17.4 percent).
- Women who had never had a pap test or had not had one within the past three years were classified as "at risk." The percentage of at risk women is higher for ADH service area 2013 respondents than Nationwide 2010 and Texas 2010 respondents (see Table 69).
- The percentage of female respondents over 18 years of age who were at risk because they had not had a Pap test in the past three years increased as the age of the respondent increased, and was greater among respondents that completed the interview in English and those with children under 18 living in the household (see Table 70).

Table 70
At Risk Women 18+ and No Pap Test in Past 3 Years
By Selected Demographics

	Percentage At Risk
ADH Service Area	49.7
Age of respondent	
18 to 24	29.7
25 to 34	28.1
35 to 44	18.0
45 to 54	23.2
55 to 64	28.5
65 to 74	45.6
75 or older	45.9
Language of interview	
English	31.5
Spanish	1.9
Children under 18 in household	
Yes	19.2
No	37.5

Figure 44
Ever Had a Prostate-Specific Antigen Test

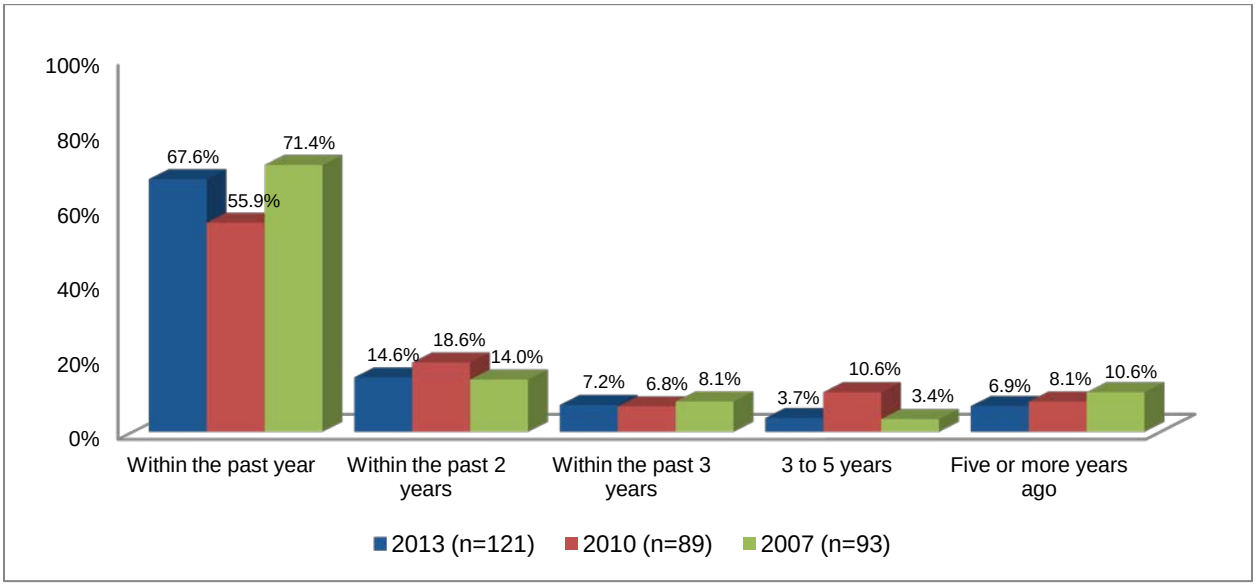


- Male respondents were asked if they had ever had a Prostate-Specific Antigen (PSA) test, a test for prostate cancer. As shown in Figure 44, 32.0 percent of those respondents answered "yes."
- The percentage of the male respondents who reported ever having had a PSA test generally increased as the age of the respondent, education and income increased, and was higher among African American respondents, respondents without children under 18 living in the household, and respondents who completed the interview in English (see Table 71).

Table 71
Ever Had Prostate-Specific Antigen (PSA) Test
By Selected Demographics

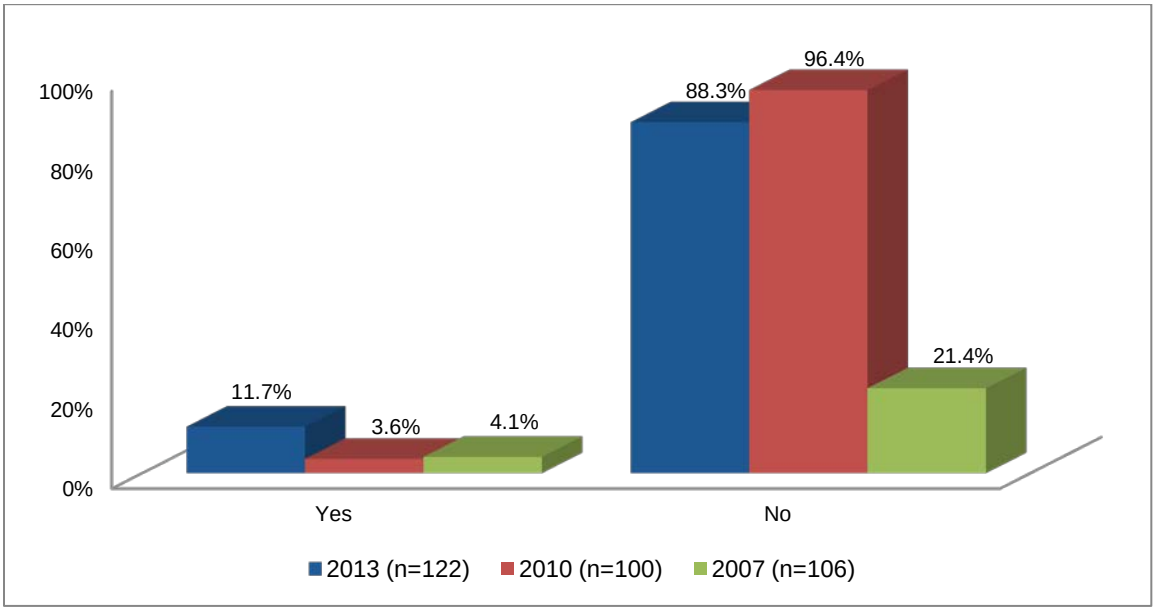
	Percentage responding	
	Yes	No
ADH Service Area	32.0	68.0
Education		
Less than HS grad	18.1	81.9
High school grad	24.1	75.9
Some college	32.4	67.6
College grad or more	55.6	44.4
Age of respondent		
18 to 24	0.0	100.0
25 to 34	0.0	100.0
35 to 44	22.5	77.5
45 to 54	38.8	61.2
55 to 64	79.4	20.6
65 to 74	81.4	18.6
75 or older	86.6	13.4
Race/ethnicity		
White	39.0	61.0
African American	52.9	47.1
Hispanic	13.0	87.0
Other	12.8	87.2
Language of interview		
English	33.6	66.4
Spanish	7.5	92.5
Children under 18 in household		
Yes	14.8	85.2
No	43.0	57.0
Income		
Less than $15,000	22.6	77.4
$15,001 to $25,000	20.6	79.4
$25,001 to $50,000	27.0	73.0
$50,001 to $75,000	27.7	72.3
$55,001 to $100,000	38.0	62.0
Over $100,000	60.1	39.9

Figure 45
Time Since Last PSA Test



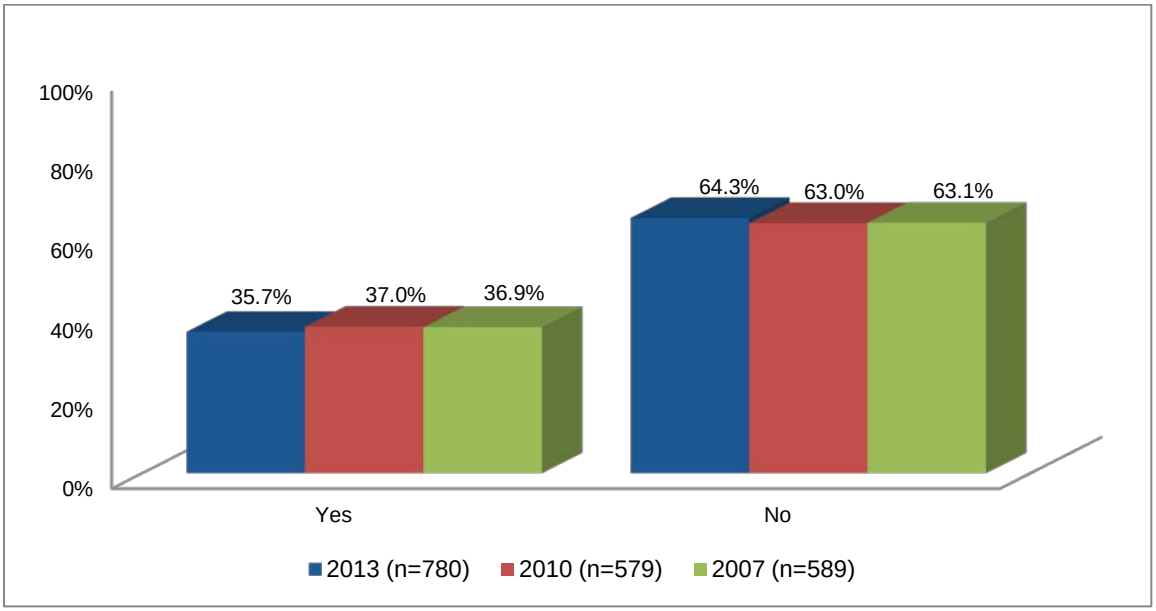
- Male respondents who reported having had a PSA test were asked how long it had been since they had the test. As shown in Figure 45, 82.2 percent of those respondents indicated they had a PSA test within the past year (67.6 percent) or within the past 2 years (14.6 percent).

Figure 46
Had Prostate Cancer



- Male respondents who had ever had a PSA test were asked if they had ever been told by a doctor, nurse, or other health professional that they had prostate cancer. As shown in Figure 46, 11.7 percent of those respondents answered "yes."

Figure 47
Ever Been Tested for HIV



- Respondents were asked if they had ever been tested for HIV, including testing fluid from their mouth (not counting tests as part of a blood donation). As shown in Figure 47, 35.7 percent indicated they had been tested for HIV.
- The percentage of respondents who reported being tested for HIV generally decreased as the age of the respondent increased and decreased as income increased. Percentages were higher among female respondents, African American respondents, respondents with children under 18 living in the household and respondents living in Potter County (see Table 72).
- Fifty-six percent of those who had been tested for HIV were tested from between January, 2010 to March 2013 (see Table 73).

Table 72
Ever Been Tested for HIV
By Selected Demographics

	Percentage responding	
	Yes	No
ADH Service Area	35.7	64.3
Gender		
Female	41.2	58.8
Male	30.4	69.6
Age of respondent		
18 to 24	26.7	73.3
25 to 34	61.2	38.8
35 to 44	46.3	53.7
45 to 54	38.2	61.8
55 to 64	23.1	76.9
65 to 74	13.8	86.2
75 or older	8.2	91.8
Race/ethnicity		
White	34.7	65.3
African American	46.5	53.5
Hispanic	41.1	58.9
Other	21.3	78.7
Children under 18 in household		
Yes	50.5	49.5
No	25.6	74.4
Income		
Less than $15,000	40.8	59.2
$15,001 to $25,000	46.1	53.9
$25,001 to $50,000	40.5	59.5
$50,001 to $75,000	36.5	63.5
$75,001 to $100,000	24.5	75.5
Over $100,000	27.3	72.7
County		
Potter	40.6	59.4
Randall	31.2	68.8

Table 73
Last HIV Test

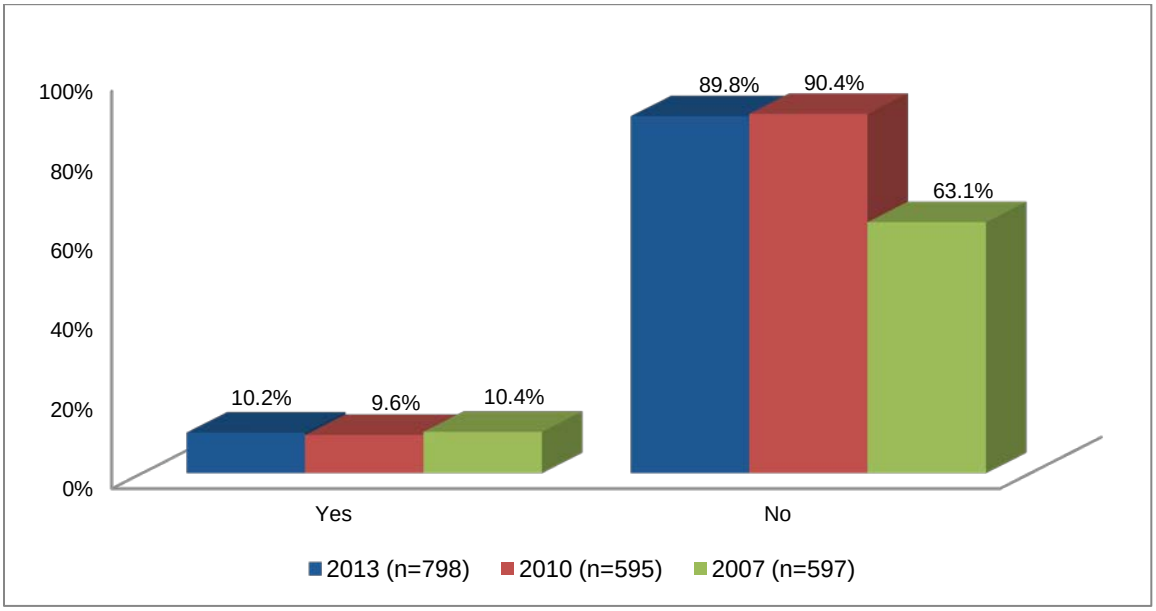
	Percentage responding		
	2013 (n=210)	2010 (n=181)	2007 (n=192)
2011 to present	9.6	-	-
2010	46.5	12.5	-
2008 - 2009	10.6	27.1	-
2006 - 2007	8.2	16.3	42.3
2004 - 2005	4.9	7.6	16.9
2002 - 2003	7.2	5.2	5.8
1997 - 2001	4.8	5.1	8.5
1987 - 1996	7.8	18.0	15.8
Before 1987	0.4	8.0	9.7

Table 74
Provider of Last HIV Test

	Percentage responding		
	2013 (n=279)	2010 (n=211)	2007 (n=211)
Health Department Clinic	33.8	13.3	27.5
Private doctor or HMO office	32.0	42.2	37.8
Somewhere else	13.2	16.3	13.1
Hospital	10.8	16.6	12.4
Counseling and testing site	5.1	5.5	5.3
Jail or prison (or other correctional facility)	2.1	2.4	1.8
At home	1.9	2.3	1.7
Drug treatment facility	1.0	1.4	0.3

- Respondents who had been tested for HIV were asked where they had their last HIV test. As shown in Table 74, 33.8 percent of those respondents got their HIV test from a health department clinic. Thirty-two percent got their test from a private doctor or HMO office.

Figure 48
Respondent is Caregiver for Elderly Person

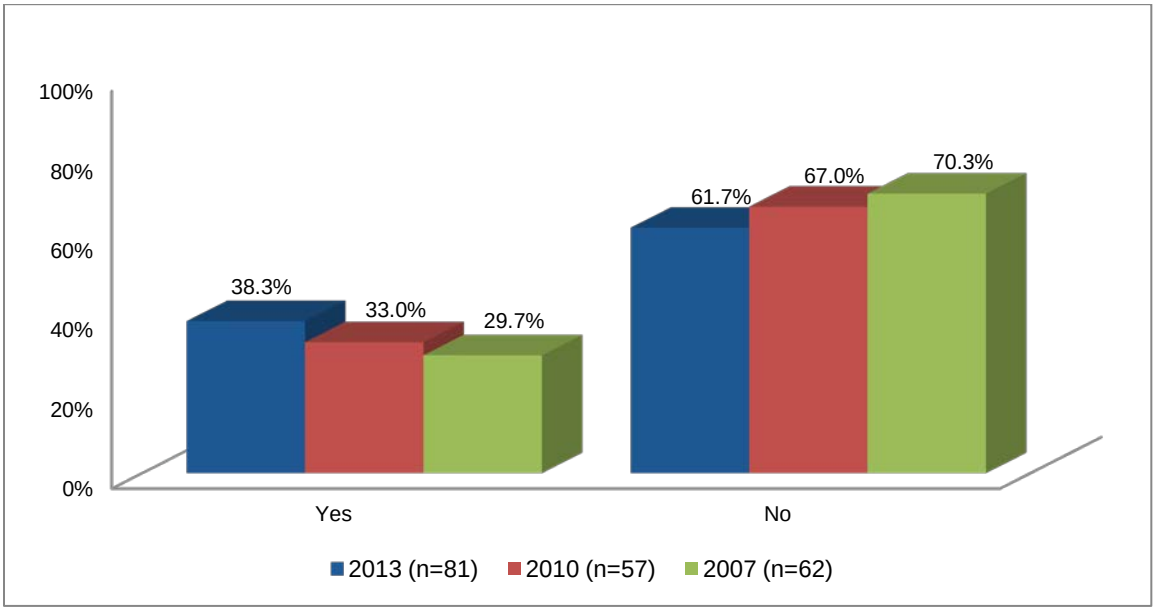


- When asked if they were a family caregiver for someone that is elderly (age 65 or older), 10.2 percent of the respondents answered “yes” (see Figure 48).
- The percentage of respondents who reported they were a caregiver for an elderly person was higher among respondents age 65 to 74, those without children under 18 living in the household, and respondents whose income is $15,001 to $25,000 (see Table 75).

Table 75
Respondent is Caregiver for Elderly Person
By Selected Demographics

	Percentage responding	
	Yes	No
ADH Service Area	10.2	89.8
Age of respondent		
18 to 24	4.4	95.6
25 to 34	0.2	99.8
35 to 44	12.5	87.5
45 to 54	8.3	91.7
55 to 64	17.2	82.8
65 to 74	23.7	76.3
75 or older	10.1	89.9
Have children under 18 in household		
Yes	4.1	95.9
No	10.1	89.9
Income		
Less than $15,000	7.5	92.5
$15,001 to $25,000	18.9	81.1
$25,001 to $50,000	7.9	92.1
$50,001 to $75,000	13.0	87.0
$75,001 to $100,000	7.1	92.9
Over $100,000	9.9	90.1

Figure 49
Family Member Has Significant Memory Problems



- Respondents who reported being a family caregiver for someone elderly were asked if that elderly person had significant memory problems that cause the respondents, concern. As shown in Figure 49, 38.3 percent of those respondents indicated that the person did have significant memory problems that caused concern.

Table 76
Specific Caregiver Needs Not Being Met

	Percentage responding		
	2013 (n=61)	2010 (n=52)	2007 (n=52)
Financial support	30.5	23.3	29.4
Emotional support	18.6	5.9	19.4
Medical support	13.6	8.3	9.0
Physical support	4.6	-	-
All of the these	-	8.0	21.0
None of these	31.4	46.0	16.3
Other	1.5	8.6	5.0

- Respondents who were caregivers were asked to identify specific needs that are not being met where they wish they could have assistance. As shown in Table 76, 30.5 percent of these respondents needed financial support. Nineteen percent needed emotional support. Thirty-one percent required no support.

V. CONCLUSIONS

In February and March 2013, the Survey Research Center conducted a health survey and needs assessment of the residents of the service area. Data collected from this survey was compared where possible to findings of the 2011 Texas and Nationwide Behavioral Risk Factor Surveillance System surveys. Other years for Texas and Nationwide finding were used when 2011 was not available

Eighty-one percent of the service area respondents reported their state of health was either excellent (14.3 percent), very good (32.0 percent) or good (34.5 percent). Nineteen percent reported their health was either fair (14.2 percent) or poor (5.0 percent) and were considered "at risk." In general, respondents with lower education and income and those between the ages of 35 and 44 were more likely to be at risk. Fifty-two percent of the respondents reported getting a checkup even though they felt healthy. Over three-quarters (77.5 percent) of those had gotten a checkup within the last 12 months.

Seventy-three percent of the respondents had some kind of health care coverage. Twenty-seven percent did not and were considered "at risk." Sixty-two percent of those with coverage had health insurance through someone's work or union. Twenty-one percent had Medicare. Sixty-four percent of the respondents had a single personal doctor, while 4.7 percent reported they had more than one personal doctor. Twenty-three percent of the respondents reported needing to see a doctor in the past 12 months but did not because of cost. Seventy-three percent of respondents reported their spouse or partner had health insurance while 89.8 percent of those with children under 18 living in the household reported their child had health insurance. Forty percent of the children with insurance had Medicaid or public aid. However, 3.5 percent of the children had CHIPS.

When asked the type of health care they would most likely use, 51.5 percent of the respondents said a doctor or HMO. A doctor or HMO (63.4 percent) was also the most likely provider respondents would use if their child needed health care. Respondents expressed the most common problem experienced with health care received for their child was the long wait (25.8 percent). Meanwhile, the most common reason that prevented children from getting needed health care was lack of transportation (24.6 percent).

Forty-nine percent of the respondents had gotten a flu vaccine in the past 12 months. When 26.9 percent of the respondents with children were told within the past 12 months that their child needed vaccinations, 88.9 percent of those respondents reported their child had gotten the vaccinations. Forty-six percent of those went to a private health care provider for the immunizations.

Twelve percent of respondents reported that an adult in their household had sought mental health care in the past two years. Respondents were more likely to use a private provider (62.4 percent) than TPMHMR (19.4 percent) or the J.O. Wyatt Clinic (8.5 percent) for mental health care.

Seventy percent of the respondents indicated they participated in physical activities or exercises in the past month. Using height and weight, the Body Mass Index was calculated. 61.4 percent of respondents were either overweight (34.4 percent) or obese (27.0 percent). Less than half of all respondents had tried to lose weight in the past 12 months (45.5 percent).

Eighty-two percent reported that they drive a motor vehicle almost every day, while 8.8 percent drive a motor vehicle a few days a week. Respondents were asked how often they read emails or text messages while driving. Seventy-three percent of respondents reported they never read mails or text messages while driving. Seventy-six percent responded that they

never send emails or text messages while driving. The respondents were asked if the state or the city had a law banning texting or emailing while driving. Sixty five percent of the respondents indicated the city had a law banning texting or emailing while driving, 21.3 percent of those respondents reported both the state and the city had a law banning texting and emailing while driving.

Respondents were asked if they had ever had certain examinations. Sixty-five percent of female respondents reported having had a mammogram. Twenty-seven percent were "at risk" because they were age 40 or older and had not had a mammogram within the past two years. Ninety-two percent of female respondents reported having a Pap test. Thirty percent were "at risk" because they had not had a Pap test within the past three years. Thirty-two percent of male respondents reported having a Prostate-Specific Antigen test and 82.2 percent of them had the test within the past two years. Thirty-six percent of all respondents been tested for HIV and 56.1 percent of those respondents had been tested since January 2010. Thirty-four percent of those that had been tested for HIV got tested at a health department and 32.0 percent went to a private doctor.

Forty-two percent were at risk because they had smoked at least 100 cigarettes and they continued to smoke every day or some days. Fifty-six percent of these respondents had stopped smoking for one day or longer in the past 12 months because they were trying to quit. The number of times respondents reported driving after they had had perhaps too much to drink in the past 30 days was 3.1.

The data in this report can be used as a benchmark for the community compared to National and Texas surveys. It can also be used as a benchmark for future survey comparisons.

Appendix a: survey instrument

Hello, my name is _____. Amarillo's Public Health Department is conducting a survey of area residents and I would like to talk with the person in the household age 18 or older who had the most recent birthday.

(TO RESPONDENT) The Health Department is conducting a survey to assess health care issues and needs. I want to stress that this survey is being conducted by the Amarillo Public Health Department and not by a candidate for political office. The questions that I want to ask you will take only a few minutes and your answers will be useful to the city staff and commission. All of your answers will be kept confidential. The survey will take about 10 to 15 minutes to complete. This project has been approved by the UNT Institutional Review Board. If you have any questions about the study you may call 800-687-7055

<<INTERVIEWER: IF YES, PRESS 1 TO CONTINUE WITH ENGLISH SURVEY
PRESS 2 TO CONTINUE WITH SPANISH SURVEY
IF NO, PRESS CNTRLEND

SKP QSKIP1

NOTE: A SUBSAMPLE WILL RECEIVE THE FOLLOWING INTRODUCTION SO THAT AN ADEQUATE NUMBER OF MALE RESPONDENTS BETWEEN THE AGES OF 18 TO 65 ARE INCLUDED.

Q: INTRO2 **********

Hello, my name is _____. Amarillo's Public Health Department is conducting a survey of area residents and I would like to talk with a MALE in the household age 18 to 65 with the most recent birthday.

(INTERVIEWER: IF MALE IS NOT AVAILABLE, SCHEDULE A CALLBACK)
(IF NO MALE IN THE HOUSEHOLD, TERMINATE INTERVIEW)

(TO RESPONDENT) The Health Department is conducting a survey to assess health care issues and needs. I want to stress that this survey is being conducted by the Amarillo Public Health Department and not by a candidate for political office. The questions that I want to ask you will take only a few minutes and your answers will be useful to the city staff and commission. All of your answers will be kept confidential. The survey will take about 10 to 15 minutes to complete. This project has been approved by the UNT Institutional Review Board. If you have any questions about the study you may call 800-687-7055

<<INTERVIEWER: IF YES, PRESS 1 TO CONTINUE WITH ENGLISH SURVEY
PRESS 2 TO CONTINUE WITH SPANISH SURVEY
IF NO, PRESS CNTRLEND

Questions used for weighting:

CELL1. Are we speaking with you on a cell phone? (IF NO SKP CELL5)
CELL2. Are you driving or doing anything that requires your full attention right now? (IF YES, ASK; "When would be a better time to call you? Who should we ask for?)
CELL3. Before we begin, I want to make sure this is a good time for you to talk and that you are in a safe and private place to use your cell phone. If at any point you want to go to another room or if you want to use a different phone where I could call you back, just let me know. (IF NO, SKP ALTNUM)
CELL4. In your household, are you also reachable by a landline phone in addition to this or any other cell phones you may have? INTERVIEWER: "YES" WILL INCLUDE VOICE-OVER INTERNET PROTOCOL (VOIP) AVAILABLE FROM CABLE COMPANIES. (SKP TO Q1)
CELL5. In addition to this landline phone are you also reachable by a cell phone in your household?

1. What is your zip code?

1.79012
2. 79015
3. 79016
4. 79042
5. 79091
6. 79101
7. 79102
8. 79103
9. 79104
10. 79105
11. 79106
12. 79107
13. 79108
14. 79109
15. 79110
16. 79111
17. 79114
18. 79118
19. 79119
20. 79121
21. 79124
22. OTHER (TERMINATE)
88. DON'T KNOW/NOT SURE (TERMINATE)
99. REFUSED (TERMINATE)

1A. What county do you live in?

1. Potter
2. Randall
3. Other county (terminate)

2. Would you say that in general your health is—

1. Excellent
2. Very good
3. Good
4. Fair
5. Poor
8. DON'T KNOW/NOT SURE
9. REFUSED

3. Do you have any kind of health care coverage, including health insurance, prepaid plans such as HMOs, or government plans such as Medicare?

1. Yes
2. No
8. DON'T KNOW/NOT SURE
9. REFUSED

If ans > 1 skp Q4

3A. Is your health insurance primarily:

1. Health insurance through someone's work or union (includes HMO)
2. Health insurance bought directly by yourself or family
3. Medicare, a government plan that pays health care bills for people aged 65 and over and for some disabled people
4. Medicaid or public aid
5. Insurance through JO Wyatt or a District Clinic
6. Other, _____
8. DON'T KNOW/NOT SURE
9. REFUSED

4. Do you have ONE person you think of as your personal doctor or health care provider?

1. Yes (SKIP TO Q5)
2. No
8. DON'T KNOW/NOT SURE (SKIP TO Q5)
9. REFUSED (SKIP TO Q5)

4A. Is there more than one, or is there no person who you think of as your personal doctor or health care provider?"

1. Yes, more than one
2. No person thought of as personal doctor
8. DON'T KNOW/NOT SURE
9. REFUSED

5. Was there a time in the past 12 months when you needed to see a doctor but could not because of cost?

1. Yes
2. No
8. DON'T KNOW/NOT SURE
9. REFUSED

6. Does your spouse or partner have health insurance?

1. YES (ASK 6A)
2. NO
3. DOES NOT HAVE A SPOUSE OR PARTNER (SKIP TO Q7)
8. DON'T KNOW/NOT SURE
9. REFUSED

6A. Is that insurance primarily:

1. Health insurance through someone's work or union (includes HMO)
2. Health insurance bought directly by yourself or family
3. Medicare, a government plan that pays health care bills for people aged 65 and over and for some disabled people
4. Medicaid or public aid
5. Insurance through a District Clinic
6. Other, _____
8. DON'T KNOW/NOT SURE
9. REFUSED

7. Do you have any children age 18 or younger living in your household?

1. YES
2. NO (SKIP TO 9)
8. DON'T KNOW/NOT SURE
9. REFUSED

8. Do you have health insurance for your children?

1. YES (ASK 7A)
2. NO (SKP Q9)
8. DON'T KNOW/NOT SURE (SKP Q9)
9. REFUSED(SKP Q9)

8A. Is that insurance primarily:

1. Health insurance through someone's work or union (includes HMO)
2. Health insurance bought directly by yourself or family
3. Medicare, a government plan that pays health care bills for people aged 65 and over and for some disabled people
4. Medicaid or public aid
5. Insurance through JO Wyatt or a District Clinic
6. Other, _____
8. DON'T KNOW/NOT SURE
9. REFUSED

9. If you or an adult member of your household are in need of healthcare which of the following would you most likely use?

1. Private doctor
2. J.O. Wyatt or District Clinic
3. Hospital Emergency Room
4. Urgent Care Center
5. Other (SPECIFY)
6. Would not use any source
8. DON'T KNOW/NOT SURE
9. REFUSED

10. Some people visit a doctor or clinic for a checkup even though they are feeling healthy. Have you ever done that for yourself?

1. YES (ASK 10A)
2. NO
8. DON'T KNOW/NOT SURE
9. REFUSED

10A. Was your most recent checkup

1. Less than 12 months ago
2. Less than 2 years ago
3. Longer than 2 years ago
8. DON'T KNOW/NOT SURE
9. REFUSED

11. If a child living with you needed health care which of the following would you most likely use?

1. Private Doctor
2. J.O. Wyatt or District Clinic
3. Hospital Emergency Room
4. Urgent Care Center
5. Other
6. Would not use any source
8. DON'T KNOW/NOT SURE
9. REFUSED

(IF Q7 > 1 SKIP TO Q13)

12. Have you or an adult in your household sought health care for a child from that source within the past two years?

1. YES (ASK 12A-B)
2. NO (ASK 12C)
8. DON'T KNOW/NOT SURE
9. REFUSED

12A. Would you say the care your child received there is generally excellent, good, fair, or poor?

1. Excellent
2. Good
3. Fair
4. Poor
8. DON'T KNOW/NOT SURE
9. REFUSED

12B. Did you experience any of the following when you sought health care for your child?

Problem	Yes	No	NR/DK
Unable to get appointment when I needed one	1	2	9
Lack of transportation to the provider's office or clinic	1	2	9
Location of the provider's office or clinic	1	2	9
Unreasonable cost of services	1	2	9
Too long of a wait	1	2	9

12C. Did any of the following reasons prevent you from getting health care for your child?

Problem	Yes	No	NR/DK
No need for health care (GO TO Q13)	1	2	9
Unable to get appointment	1	2	9
Unable to afford care	1	2	9
Lack of transportation to the provider's office or clinic	1	2	9
Location of the provider's office or clinic	1	2	9
Too long of a wait	1	2	9

13. How long has it been since you last visited a dentist or a dental clinic for any reason? Include visits to dental specialists, such as orthodontists.

Read only if necessary:

1. Within the past year (anytime less than 12 months ago)
2. Within the past 2 years (1 year but less than 2 years ago)
3. Within the past 5 years (2 years but less than 5 years ago)
4. Five or more years ago
5. Never
8. DON'T KNOW/NOT SURE
9. REFUSED

14. If you or an adult member of your household are in need of dental care which of the following would you most likely use?

1. Private Dentist
2. J.O. Wyatt Dental Clinic
3. Hospital Emergency Room
4. Regence Health Network or RHN
5. Other (SPECIFY)
6. Would not use any source
8. DON'T KNOW/NOT SURE
9. REFUSED

15. A flu shot is an influenza vaccine injected into your arm. During the past 12 months, have you had a flu shot?

1. Yes
2. No
8. DON'T KNOW/NOT SURE
9. REFUSED

15a. During the past 12 months, have you had a flu vaccine that was sprayed in your nose? The flu vaccine that is sprayed in the nose is also called FluMist™.

1. Yes
2. No
8. DON'T KNOW/NOT SURE
9. REFUSED

If Q7 > 1 skip to Q17

16. Has a doctor, nurse, medical assistant, or school representative told you within the past 12 months that one of your children needed vaccinations?

1. YES (ASK 16A)
2. NO
8. DON'T KNOW/NOT SURE
9. REFUSED

16A. Did your child receive the vaccinations?

1. YES (ASK 16B)
2. NO
8. DON'T KNOW/NOT SURE
9. REFUSED

16B. Where did you go to get you children immunized?

1. Northwest Womens' and Childrens' Clinic
2. Health Department
3. Private healthcare provider
4. Pharmacy
5. Other, _____
8. DON'T KNOW/NOT SURE
9. REFUSED

17. How tall are you without shoes?
1. ENTER HEIGHT
8. DON'T KNOW/NOT SURE
9. REFUSED

18. How much do you weigh without clothes or shoes? (If you are currently pregnant, how much did you weigh before your pregnancy?)

1. ENTER WEIGHT
8. DON'T KNOW/NOT SURE
9. REFUSED

19. Do you consider yourself now to be . . . [If you are currently pregnant, what did you consider yourself to be before you were pregnant?]

1. Overweight
2. Underweight
3. About the right weight
8. DON'T KNOW/NOT SURE
9. REFUSED

20. During the past 12 months, have you tried to lose weight?

1. YES
2. NO
8. DON'T KNOW/NOT SURE
9. REFUSED

IF (ANS > 1) SKP Q22

21. How did you try to lose weight? CODE ALL THAT APPLY

1. ATE LESS FOOD (AMOUNT SWITCHED TO FOODS WITH LOWER CALORIES
2. ATE LESS FAT
3. ATE FEWER CARBOHYDRATES
4. EXERCISED
5. SKIPPED MEALS
6. ATE "DIET" FOODS OR PRODUCTS
7. USED A LIQUID DIET FORMULA SUCH AS SLIMFAST OR OPTIFAST
8. JOINED A WEIGHT LOSS PROGRAM SUCH AS WEIGHT WATCHERS, JENNY CRAIG, TOPS, OR OVEREATERS ANONYMOUS
9. FOLLOWED A SPECIAL DIET SUCH AS DR. ATKINS, SOUTH BEACH, OTHER HIGH PROTEIN OR LOW CARBOHYDRATE DIET, CABBAGE SOUP DIET, ORNISH, NUTRISYSTEM, BODY-FOR-LIFE
11. TOOK DIET PILLS PRESCRIBED BY A DOCTOR
12. TOOK OTHER PILLS, MEDICINES, HERBS, OR SUPPLEMENTS NOT NEEDING A PRESCRIPTION
13. STARTED TO SMOKE OR BEGAN TO SMOKE AGAIN
14. TOOK LAXATIVES OR VOMITED
15. DRANK A LOT OF WATER
16. ATE MORE FRUITS, VEGETABLES, SALADS
17. ATE LESS SUGAR, CANDY, SWEETS
18. CHANGED EATING HABITS (DIDN'T EAT LATE AT NIGHT, ATE SEVERAL SMALL MEALS A DAY)
19. ATE LESS JUNK FOOD OR FAST FOOD
20. OTHER (SPECIFY
88. DON'T KNOW/NOT SURE
99. REFUSED

22. During the past month, other than your regular job, did you participate in any physical activities or exercises such as running, calisthenics, golf, gardening, or walking for exercise?

1. Yes
2. No

8. DON'T KNOW/NOT SURE
9. REFUSED

23. How often in the past 12 months would you say you were worried or stressed about having enough money to buy nutritious meals? Would you say you were worried or stressed---

1 Always
2 Usually
3 Sometimes
4 Rarely
5 Never
7. NOT APPLICABLE
8. DON'T KNOW/NOT SURE
9. REFUSED

24. INTERVIEWER: KEY GENDER OF RESPONDENT

1. FEMALE
2. MALE

25. Have you ever been told by a doctor that you have diabetes?

1. Yes (ASK 25A)
2. No (GO TO Q25B)
8. DON'T KNOW/NOT SURE (GO TO Q26)
9. REFUSED (GO TO Q26)

(IF Q24 > 1 SKIP TO Q26)
25A. "Was this only when you were pregnant?"

1. Yes (GO TO Q26)
2. No
8. DON'T KNOW/NOT SURE (GO TO Q26)
9. REFUSED (GO TO Q26)

25B. Have you ever been told by a doctor that you have pre-diabetes or borderline diabetes?

1. Yes
2. No
8. DON'T KNOW/NOT SURE
9. REFUSED

26. Has a doctor, nurse or other health professional ever told you that you had a heart attack, also called a myocardial infarction?

1. Yes
2. No
8. DON'T KNOW/NOT SURE
9. REFUSED

27. Has a doctor, nurse or other health professional ever told you that you had angina or coronary heart disease?

1. Yes
2. No

8. DON'T KNOW/NOT SURE
9. REFUSED

28. Has a doctor, nurse or other health professional ever told you that you had a stroke?

1. Yes
2. No
8. DON'T KNOW/NOT SURE
9. REFUSED

29. Have you ever been told by a doctor, nurse, or other health professional that you had asthma?

1. Yes
2. No (SKIP TO Q30)
8. DON'T KNOW/NOT SURE (SKIP TO Q30)
9. REFUSED (SKIP TO Q30)

29A. Do you still have asthma?

1. Yes
2. No
8. DON'T KNOW/NOT SURE
9. REFUSED

30. Have you smoked at least 100 cigarettes in your entire life?
NOTE: 5 packs = 100 cigarettes

1. Yes
2. No
8. DON'T KNOW/NOT SURE
9. REFUSED

Q30A. Do you currently use chewing tobacco, snuff, or snus every day, some days, or not at all?
(NOTE: Snus rhymes with "goose" (Swedish for snuff) is a moist smokeless tobacco, usually sold in small pouches that are placed under the lip against the gum.)

1 Every day
2 Some days
3 Not at all
8. DON'T KNOW/NOT SURE
9. REFUSED

IF (Q30 > 1 AND Q30A > 2) SKP Q31

30B. During the past 12 months, have you stopped smoking or using tobacco products for one day or longer because you were trying to quit using tobacco?

1. Yes
2. No
8. DON'T KNOW/NOT SURE
9. REFUSED

31. During the past 30 days, how many times have you driven when you've had perhaps too much to drink?

_ _ Number of times
None
8. DON'T KNOW/NOT SURE
9. REFUSED

IF Q24 > 1 SKIP TO Q34

32. A mammogram is an x-ray of each breast to look for breast cancer. Have you ever had a mammogram?

1. Yes
2. No [Go to Q33]
8. DON'T KNOW/NOT SURE [Go to Q33]
9. REFUSED [Go to Q33]

32A. How long has it been since you had your last mammogram?

Read only if necessary:
1. Within the past year (anytime less than 12 months ago)
2. Within the past 2 years (1 year but less than 2 years ago)
3. Within the past 3 years (2 years but less than 3 years ago)
4. Within the past 5 years (3 years but less than 5 years ago)
5. 5 or more years ago
8. DON'T KNOW/NOT SURE
9. REFUSED

33. A Pap test is a test for cancer of the cervix. Have you ever had a Pap test?

1. Yes
2. No [Go to Q34]
8. DON'T KNOW/NOT SURE [Go to Q34]
9. REFUSED [Go to Q34]

33A. How long has it been since you had your last Pap test?

Read only if necessary:
1. Within the past year (anytime less than 12 months ago)
2. Within the past 2 years (1 year but less than 2 years ago)
3. Within the past 3 years (2 years but less than 3 years ago)
4. Within the past 5 years (3 years but less than 5 years ago)
5. 5 or more years ago
8. DON'T KNOW/NOT SURE
9. REFUSED

IF (Q24 = 1) SKP Q35
34. A Prostate-Specific Antigen test, also called a PSA test, is a blood test used to check men for prostate cancer. Have you ever had a PSA test?

1. Yes
2. No [Go to Q35]
8. DON'T KNOW/NOT SURE [Go to Q35]
9. REFUSED [Go to Q35]

34A. How long has it been since you had your last PSA test?

Read only if necessary:
1. Within the past year (anytime less than 12 months ago)
2. Within the past 2 years (1 year but less than 2 years)
3. Within the past 3 years (2 years but less than 3 years)
4. Within the past 5 years (3 years but less than 5 years)
5. 5 or more years ago
8. DON'T KNOW/NOT SURE
9. REFUSED

34B. Have you ever been told by a doctor, nurse, or other health professional that you had prostate cancer?

1. Yes
2. No
8. DON'T KNOW/NOT SURE
9. REFUSED

35. Have you ever been tested for HIV, including testing fluid from your mouth? Do not count tests you may have had as part of a blood donation.

1. Yes
2. No [SKIP TO Q36]
8. DON'T KNOW/NOT SURE [SKIP TO Q36]
9. REFUSED [SKIP TO Q36]

35A. Not including blood donations, in what month and year was your last HIV test?
NOTE: If response is before January 1985, code "Don't know."
_ _ /_ _ _ _ Code month and year
7 7/ 7 7 7 7 Don't know / Not sure
9 9/ 9 9 9 9 Refused

35B. Where did you have your last HIV test — at a private doctor or HMO office, at a counseling and testing site, at a hospital, at a clinic, in a jail or prison, at a drug treatment facility, at home, or somewhere else?

1. Private doctor
2. Counseling and testing site
3. Hospital
4. Health Department Clinic
5. Jail or prison (or other correctional facility)
6. Drug treatment facility
7. At home
8. Somewhere else
88. DON'T KNOW/NOT SURE
99. REFUSED

36. Have you or a member of your household sought mental health care services in the last 2 years?
1. Yes
2. No
8. DON'T KNOW/NOT SURE
9. REFUSED

37. If you or an adult member of your household were/are in need of mental healthcare, which of the following would you most likely use?

1. Texas Panhandle Centers, formerly TPMHMR
2. Private provider
3. J.O. Wyatt Clinic
4. Other
8. DON'T KNOW/NOT SURE
9. REFUSED
(IF Q36 > 1 SKIP TO Q39)

38. Did you experience any of the following when you sought mental health care?

Problem	Yes	No	NR/DK
Unable to get appointment when I needed one	1	2	9
Lack of transportation to the provider's office or clinic	1	2	9
Location of the provider's office or clinic	1	2	9
Unreasonable cost of services	1	2	9
Too long of a wait	1	2	9

39. Are you a family caregiver of someone that is elderly (age 65 or older)?

1. Yes
8. DON'T KNOW/NOT SURE (SKP Q42)
9. REFUSED (SKP Q42)

40. Does that family member have significant memory problems that causes you concern?

1. Yes
2. No
8. DON'T KNOW/NOT SURE
9. REFUSED

41. Please identify specific needs that are not being met for you as a caregiver that you wish you could have assistance.

1. Medical support
2. Emotional support
3. Financial support
4. Other(please specify)
8. DON'T KNOW/NOT SURE
9. REFUSED

42. How often do you drive a motor vehicle, regardless of whether it is for work or for personal use? Almost every day, a few days a week, a few days a month, a few days a year, or do you never drive?

1. Almost every day (or more)
2. Few days a week
3. Few days a month
4. Few days a year
5. Never
6. Other (**SPECIFY**)
8. DON'T KNOW/NOT SURE
9. REFUSED

43. How often do you use seat belts when you drive or ride in a car? Would you say—

1 Always
2 Nearly always
3 Sometimes
4 Seldom
5 Never
7 Don't know / Not sure
8 Never drive or ride in a car
88. DON'T KNOW/NOT SURE

99. REFUSED

(IF Q42 = 5) SKP Q45
44. I'm going to read a list of activities, and for each I'd like you to tell me how often YOU do each while driving? For each, please tell me if you do the activity [**READ 1-5**]? How often do you…

1. On all driving trips
2. On most driving trips
3. On some driving trips
4. Rarely
5. Never
8. DON'T KNOW/NOT SURE
9. REFUSED

44A. Talk to other passengers in the vehicle
44B. Eat or drink
44C. Make or accept phone calls
44D. Read, such as a book, newspaper, iPad or Kindle
44E. Read emails or text messages
44F. Send text messages or emails
44G. Interact with children in the back seat
44H. Do personal grooming, such as put on make-up, shave, or look at yourself in the mirror
44I. Adjust the car radio
44J. Change CDs, DVDs, or tapes

45. Does your state or city have a law banning talking on a handheld cell phone while driving? (IF ANS IS YES ASK, "Is that city, state or both?")

1. Yes, state of Texas
2. Yes, City (Amarillo, Canyon, other)
3. Yes, both
4. No (SKIP TO 47)
8. DON'T KNOW/NOT SURE (SKIP TO 47)
9. REFUSED (SKIP TO 47)

46. Assume that over the next six months someone frequently TALKS on a handheld cell phone while driving. How likely do you think that person would be to receive a ticket for talking on a cell phone while driving?

1. Very likely
2. Somewhat likely
3. Somewhat unlikely
4. Very unlikely
8. DON'T KNOW/NOT SURE
9. REFUSED

47. Does your state or city have a law banning TEXTING OR E-MAILING while driving? (IF ANS IS YES ASK, "Is that city, state or both?")

1. Yes, state of Texas
2. Yes, City (Amarillo, Canyon, other)
3. Yes, both
4. No (SKIP TO Q49)
98. DON'T KNOW/NOT SURE (SKIP TO Q49)
99. REFUSED (SKIP TO Q49)

48. Assume that over the next six months someone frequently sends text messages or emails while driving. How likely do you think that person would be to receive a ticket for sending text messages or e-mails while driving?
1. Very likely
2. Somewhat likely
3. Somewhat unlikely
4. Very unlikely
8. DON'T KNOW/NOT SURE
9. REFUSED

49. What is your age?
_ _ Code age in years
8. DON'T KNOW/NOT SURE
9. REFUSED

50. Are you Hispanic or Latino?
1. Yes
2. No
8. DON'T KNOW/NOT SURE
9. REFUSED

51. Which one or more of the following would you say is your race? (Check all that apply)
1. White
2. Black or African American
3. Asian
4. Native Hawaiian or Other Pacific Islander
5. American Indian or Alaska Native
6. Other [specify]_____
8. DON'T KNOW/NOT SURE
9. REFUSED

52. What is the last grade in school you completed?
1. Less Than High School
2. Some High School
3. High School Grad
4. Some College
5. College Grad Or More
8. DON'T KNOW/NOT SURE
9. REFUSED

53. What was your total household income last year?
1. Less than $15,000
2. $15,001-25,000
3. $25,001-50,000
4. $50,001-$75,000
5. $75,001-$100,000
6. Over $100,000
8. DON'T KNOW/NOT SURE
9. REFUSED

INTERVIEWER READ: Thank you very much for your time and cooperation. We believe this project will help city health officials provide better services to all citizens.

APPENDIX B: WEIGHTING METHODOLOGY

WEIGHTING METHODOLOGY REPORT
Potter County Survey 2013

Design Overview:

This study has secured a total of 379 interviews with adults 18 or older residing in Potter County, Texas. In order to provide a probability-based sample representative of all adults in the County, a dual-frame random digit dial (RDD) sampling methodology was use, whereby both landline and cellular telephone numbers were included in the sample. Specifically, a total of 203 interviews were conducted with cellular respondents while the remaining 176 interviews were conducted with respondents reached on landlines.

Weighting:

Virtually, all survey data are weighted before they can be used to produce reliable estimates of population parameters. While reflecting the selection probabilities of sampled units, weighting also attempts to compensate for practical limitations of a sample survey, such as differential nonresponse and undercoverage. The weighting process for this survey essentially entailed two major steps. The first step consisted of computation of *design weights* to reflect unequal selection probabilities for different sampling strata and selection of one adult per household[1]. In the second step, design weights were adjusted so that in the resulting final weights would aggregate to reported demographic totals for gender, race-ethnicity, age, and educational attainments.

For the second step, final weights were adjusted simultaneously along the above demographic dimensions using the *WgtAdjust* procedure of SUDAAN. The needed population totals for this purpose were obtained from the 5-year aggregate American Community Survey. It should be noted that survey data for a number of demographic questions, such as age, and education, included missing values. All such missing values were first imputed using a *hot-deck* procedure before construction of the survey weights. As such, respondent counts reflected in the following tables correspond to the post-imputation step.

Table 1. First raking dimension for weight adjustments by age

Age	Respondents		Population	
18 to 24	32	8.4%	12,158	14.0%
25 to 34	42	11.1%	17,952	20.6%
35 to 44	32	8.4%	15,694	18.0%
45 to 54	65	17.2%	16,495	18.9%
55 to 64	94	24.8%	11,624	13.3%
65 to 74	55	14.5%	6,797	7.8%
75+	59	15.6%	6,404	7.4%
Total	**379**	**100.0%**	**87,124**	**100.0%**

Table 2. Second raking dimension for weight adjustments by race/ethnicity

Race/Ethnicity	Respondents		Population	
Hispanic	73	19.3%	26,090	29.9%
NH White	271	71.5%	48,093	55.2%
NH Other	35	9.2%	12,941	14.9%
Total	**379**	**100.0%**	**87,124**	**100.0%**

[1] Since for this survey the number of adults in each household was not available, this adjustment was not applied.

Table 3. Third raking dimension for weight adjustments by gender and education

Gender	Education	Respondents		Population	
Male	Less than HS	23	6.1%	11,640	13.4%
	HS or Equivalent	53	14.0%	13,666	15.7%
	College 1 to 3 years or Tech	38	10.0%	13,262	15.2%
	College 4 years or more	30	7.9%	5,765	6.6%
Female	Less than HS	46	12.1%	10,191	11.7%
	HS or Equivalent	71	18.7%	11,994	13.8%
	College 1 to 3 years or Tech	68	17.9%	14,695	16.9%
	College 4 years or more	50	13.2%	5,911	6.8%
Total		**379**	**100.0%**	**87,124**	**100.0%**

Table 4. Fourth raking dimension for weight adjustments by telephone status

Phone Status	Respondents		Population	
Cell-Only	142	37.5%	39,467	45.3%
Others	237	62.5%	47657	54.7%
Total	**379**	**100.0%**	**87,124**	**100.0%**

Variance Estimation for Weighted Data:

Survey estimates can only be interpreted properly in light of their associated sampling errors. Since weighting often increases variances of estimates, use of standard variance calculation formulae with weighted data can result in misleading statistical inferences. With weighted data, two general approaches for variance estimation can be distinguished. One method is *Taylor Series linearization* and the second is *replication*. There are several statistical software packages that can be used to produce design-proper estimates of variances using linearization or replication methodologies, including SAS or SUDAAN.

An Approximation Method for Variance Estimation can be used to avoid the need for special software packages. Researchers who do not have access to such tools for design-proper estimation of standard errors can approximate the resulting variance inflation due to weighting and incorporate that in subsequent calculations of confidence intervals and tests of significance. With w_i representing the final weight of the i^{th} respondent, the inflation due to weighting, which is commonly referred to as *Design Effect*, can be approximated by:

$$\delta = 1 + \frac{\sum_{i=1}^{n} \frac{(w_i - \bar{w})^2}{n-1}}{\bar{w}^2}$$

For calculation of a confidence interval for an estimated percentage, $\hat{p}$, one can obtain the conventional variance of the given percentage $S^2(\hat{p})$, multiply it by the approximated design effect, δ, and use the resulting quantity as adjusted variance. That is, the adjusted variance $\hat{S}^2(\hat{p})$ would be given by:

$$\hat{S}^2(\hat{p}) \approx \frac{\hat{p}(1-\hat{p})}{n-1}\left(\frac{N-n}{N}\right) \times \delta$$

Subsequently, the (100-α) percent confidence interval for *P* would be given by:

$$\hat{p} - z_{\alpha/2}\sqrt{\frac{\hat{p}(1-\hat{p})}{n-1}\left(\frac{N-n}{N}\right)\times\delta} \leq P \leq \hat{p} + z_{\alpha/2}\sqrt{\frac{\hat{p}(1-\hat{p})}{n-1}\left(\frac{N-n}{N}\right)\times\delta}$$

WEIGHTING METHODOLOGY REPORT
Randall County Survey 2013

Design Overview:

This study has secured a total of 421 interviews with adults 18 or older residing in Potter County, Texas. In order to provide a probability-based sample representative of all adults in the County, a dual-frame random digit dial (RDD) sampling methodology was use, whereby both landline and cellular telephone numbers were included in the sample. Specifically, a total of 222 interviews were conducted with cellular respondents while the remaining 199 interviews were conducted with respondents reached on landlines.

Weighting:

Virtually, all survey data are weighted before they can be used to produce reliable estimates of population parameters. While reflecting the selection probabilities of sampled units, weighting also attempts to compensate for practical limitations of a sample survey, such as differential nonresponse and undercoverage. The weighting process for this survey essentially entailed two major steps. The first step consisted of computation of *design weights* to reflect unequal selection probabilities for different sampling strata and selection of one adult per household[1]. In the second step, design weights were adjusted so that in the resulting final weights would aggregate to reported demographic totals for gender, race-ethnicity, age, and educational attainments.

For the second step, final weights were adjusted simultaneously along the above demographic dimensions using the *WgtAdjust* procedure of SUDAAN. The needed population totals for this purpose were obtained from the 5-year aggregate American Community Survey. It should be noted that survey data for a number of demographic questions, such as age, and education, included missing values. All such missing values were first imputed using a *hot-deck* procedure before construction of the survey weights. As such, respondent counts reflected in the following tables correspond to the post-imputation step.

Table 1. First raking dimension for weight adjustments by age

Age	Respondents		Population	
18 to 24	25	5.9%	13,762	15.3%
25 to 34	40	9.5%	15,943	17.7%
35 to 44	34	8.1%	14,756	16.4%
45 to 54	75	17.8%	16,834	18.7%
55 to 64	98	23.3%	13,606	15.1%
65 to 74	79	18.8%	8,241	9.2%
75+	70	16.6%	6,775	7.5%
Total	**421**	**100.0%**	**89,917**	**100.0%**

Table 2. Second raking dimension for weight adjustments by race/ethnicity

Race/Ethnicity	Respondents		Population	
Hispanic	49	11.6%	11,821	13.1%
NH White	357	84.8%	73,755	82.0%
NH Other	15	3.6%	4,341	4.8%
Total	**421**	**100.0%**	**89,917**	**100.0%**

[1] Since for this survey the number of adults in each household was not available, this adjustment was not applied.

Table 3. Third raking dimension for weight adjustments by gender and education

Gender	Education	Respondents		Population	
Male	Less than HS	11	2.6%	4,493	5.0%
	HS or Equivalent	34	8.1%	10,851	12.1%
	College 1 to 3 years or Tech	49	11.6%	16,608	18.5%
	College 4 years or more	84	20.0%	11,268	12.5%
Female	Less than HS	14	3.3%	3,606	4.0%
	HS or Equivalent	55	13.1%	10,698	11.9%
	College 1 to 3 years or Tech	79	18.8%	19,722	21.9%
	College 4 years or more	95	22.6%	12,671	14.1%
Total		**421**	**100.0%**	**89,917**	**100.0%**

Table 4. Fourth raking dimension for weight adjustments by telephone status

Phone Status	Respondents		Population	
Cell-Only	130	30.9%	35,067	39.0%
Others	291	69.1%	54850	61.0%
Total	**421**	**100.0%**	**89,917**	**100.0%**

Variance Estimation for Weighted Data:

Survey estimates can only be interpreted properly in light of their associated sampling errors. Since weighting often increases variances of estimates, use of standard variance calculation formulae with weighted data can result in misleading statistical inferences. With weighted data, two general approaches for variance estimation can be distinguished. One method is *Taylor Series linearization* and the second is *replication*. There are several statistical software packages that can be used to produce design-proper estimates of variances using linearization or replication methodologies, including SAS or SUDAAN.

An Approximation Method for Variance Estimation can be used to avoid the need for special software packages. Researchers who do not have access to such tools for design-proper estimation of standard errors can approximate the resulting variance inflation due to weighting and incorporate that in subsequent calculations of confidence intervals and tests of significance. With w_i representing the final weight of the i^{th} respondent, the inflation due to weighting, which is commonly referred to as *Design Effect*, can be approximated by:

$$\delta = 1 + \frac{\sum_{i=1}^{n} \frac{(w_i - \bar{w})^2}{n-1}}{\bar{w}^2}$$

For calculation of a confidence interval for an estimated percentage, $\hat{p}$, one can obtain the conventional variance of the given percentage $S^2(\hat{p})$, multiply it by the approximated design effect, δ, and use the resulting quantity as adjusted variance. That is, the adjusted variance $\hat{S}^2(\hat{p})$ would be given by:

$$\hat{S}^2(\hat{p}) \approx \frac{\hat{p}(1-\hat{p})}{n-1}\left(\frac{N-n}{N}\right) \times \delta$$

Subsequently, the (100-α) percent confidence interval for *P* would be given by:

$$\hat{p} - z_{\alpha/2}\sqrt{\frac{\hat{p}(1-\hat{p})}{n-1}\left(\frac{N-n}{N}\right)\times\delta} \leq P \leq \hat{p} + z_{\alpha/2}\sqrt{\frac{\hat{p}(1-\hat{p})}{n-1}\left(\frac{N-n}{N}\right)\times\delta}$$