



What Kentucky adults think should be state's top priorities

In the most recent **Kentucky Health Issues Poll (KHIP)**, the Foundation for a Healthy Kentucky and Interact for Health asked Kentucky adults about issues facing the state. KHIP asked, "How important is it to you that the next Governor and the Kentucky Legislature work on each of the following issues in the next year?"

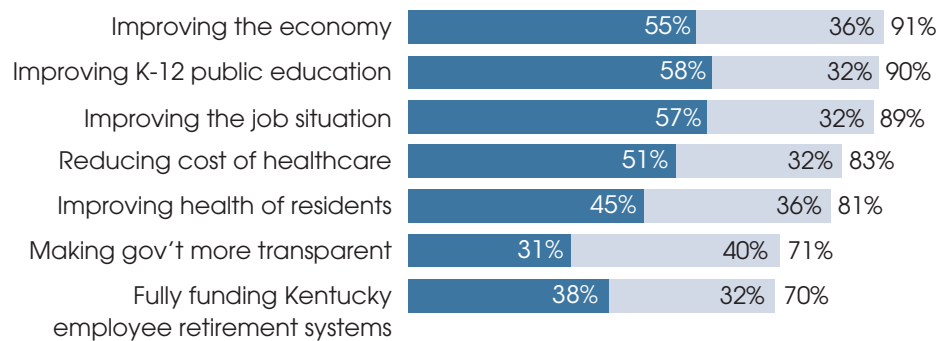
Economy, education, jobs are top priorities

About 9 in 10 Kentucky adults said it is extremely or very important for policymakers to work to improve Kentucky's economy (91%), the quality of K-12 public education (90%) and the job situation (89%).

Healthcare costs, health high priorities

More than 8 in 10 Kentucky adults said it is extremely or very important for policymakers to work to reduce the cost of healthcare (83%) and improve the health of Kentucky residents (81%).

How important is it to you that the next Governor and the Kentucky Legislature work on each of the following issues in the next year?



■ Extremely important ■ Very important

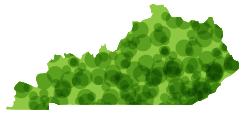
Parties agree on top priorities; Democrats more likely to cite health

Kentuckians identifying as Democrats, Republicans or Independents agreed that the economy, K-12 public education and the job situation were the most important issues for policymakers. However, nearly 9 in 10 Democrats (88%) said that reducing the cost of healthcare was extremely or very important. This compares with nearly 8 in 10 Republicans (78%) who said this.

Nine in 10 Democrats (91%) said that improving the health of Kentucky residents was extremely or very important. About 7 in 10 Republicans (71%) said this.

Other important issues

A significant majority of respondents said that other issues were also important. Kentucky adults said it is important for policymakers to work to make government more transparent (71%) and to fully fund the Kentucky employee retirement systems (70%).



Impact and views of Affordable Care Act among Kentuckians

In 2010 the Patient Protection and Affordable Care Act (ACA) became law. Since then the **Kentucky Health Issues Poll (KHIP)** has asked Kentucky adults their opinions about and experiences with the healthcare reform law.

Under the ACA, Kentuckians can compare and enroll in insurance plans via kynect, Kentucky's online marketplace for health insurance. They can also use kynect to apply for Kentucky's expanded Medicaid program and the Kentucky Children's Health Insurance Program (KCHIP).

In the first year of kynect, 413,410 Kentuckians enrolled in new health insurance coverage.¹ The third enrollment period on kynect.ky.gov ends Dec. 15, 2015.

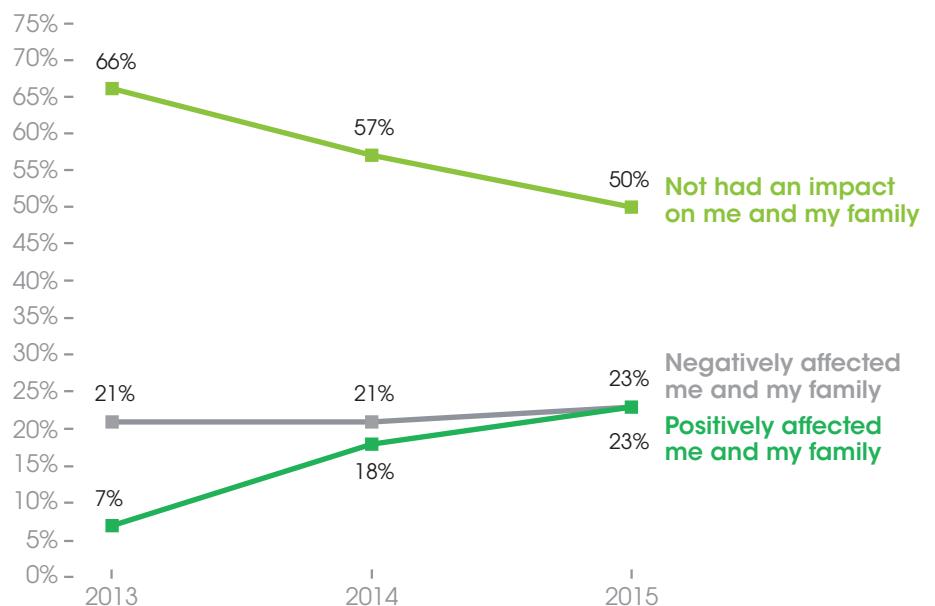
Half report no personal impact from law

Five in 10 Kentucky adults (50%) reported that the ACA had not had an effect on their family. This is down from 66% in 2013.

The percentage of Kentucky adults who reported that the law had a

¹ kyhealthnow: Advancing Our State of Wellness Report, November 2015. Retrieved Nov. 17, 2015 from <http://governor.ky.gov/SiteCollectionDocuments/kyhealthnowAR.pdf>.

Overall, which of the following statements would you say best describes the impact of the health reform law on you and your family personally? The health reform law has ...



* Percentages do not add to 100% because the responses "don't know" and "both positive and negative" are not included.

positive impact has risen. In 2015, more than 2 in 10 adults (23%) reported that the law had a positive effect. This compares with fewer than 1 in 10 adults (7%) in 2013. The percentage of adults who reported a negative impact from the law (23%) has remained stable.

Nearly 4 in 10 Kentucky adults living at or below 138% of the Federal Poverty Level² (FPL)

² In 2014, 138% of the Federal Poverty Level was \$32,913 for a family of four.

(37%) reported a positive impact from the ACA. This compares with nearly 3 in 10 adults living between 138% and 200% FPL (27%) and about 1 in 10 adults living above 200% FPL (12%).

4 in 10 adults view the law favorably

About 4 in 10 Kentucky adults (41%) reported favorable views of the ACA. More than 4 in 10 adults

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(46%) reported unfavorable views of the law. About 1 in 10 (14%) reported that they didn't know. The percentage of respondents who view the law favorably has increased since 2010. The percentage of respondents who view the law unfavorably is similar to 2010.

In 2015, a majority of Democrats (61%) had favorable views of the law, while a majority of Republicans (66%) had unfavorable views. Among Independents 42% reported unfavorable views and 43% reported favorable views.

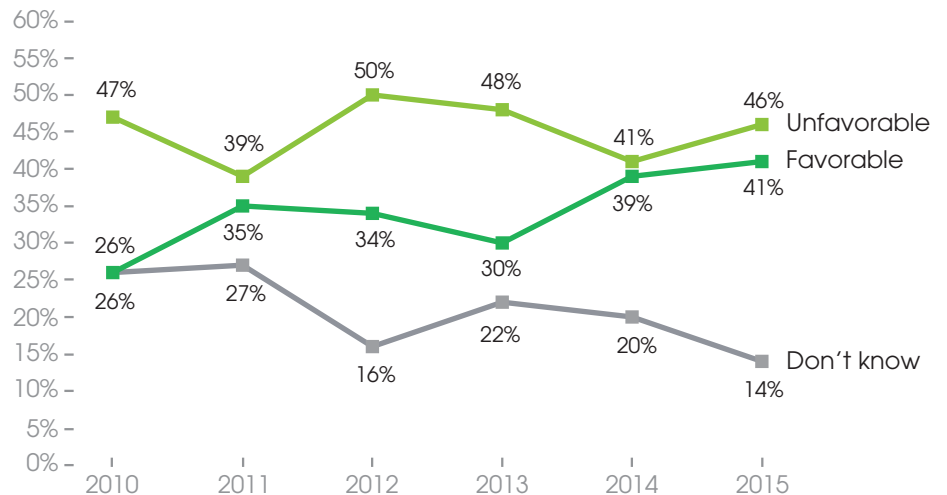
The views in Kentucky in 2015 were similar to national views of the healthcare law. The September 2015 Kaiser Health Tracking Poll reported that 45% had unfavorable views, 41% had favorable views and 14% did not know/refused.³

5 in 10 did not have enough information about the ACA

Five in 10 Kentucky adults (51%) reported not having enough

³ Henry J. Kaiser Family Foundation. Kaiser Health Tracking Poll, September 2015. Retrieved Nov. 17, 2015 from <http://kff.org/health-reform/poll-finding/kaiser-health-tracking-poll-september-2015/>.

Given what you know about the health reform law, do you have a generally favorable or generally unfavorable opinion of it? (Percentages may not add to 100% because of rounding.)



information to understand how the ACA will affect them.⁴ This percentage has declined since 2010 when 7 in 10 adults (72%) reported not having enough information.

The percentage of adults who felt they did not have enough information was the same across political affiliations. Among Republicans, Democrats and Independents, 52% of each group

⁴ KHIP asked: "As you may know, a health reform bill called the Affordable Care Act was signed into law in 2010. Do you feel you have enough information about the health reform law to understand how it will impact you personally, or not?"

reported they did not have enough information.

Responses varied when Kentucky adults were asked how much they had heard about kynect.⁵ Nearly 4 in 10 Kentucky adults (35%) reported hearing a lot about kynect. About 2 in 10 had heard some (22%), and 4 in 10 had heard only a little or nothing at all (43%).

⁵ KHIP asked: "As you may know, the healthcare law creates health insurance exchanges or marketplaces where people who don't get coverage through their employers can shop for insurance and compare prices and benefits. How much, if anything, have you heard about this new health insurance marketplace, also known as kynect, or Kentucky's Healthcare Connection in your state?"



Most Kentucky adults favor a statewide smoke-free law

The **Kentucky Health Issues Poll (KHIP)**, sponsored by Interact for Health and the Foundation for a Healthy Kentucky, has tracked Kentuckians' opinions about a statewide, smoke-free law for the past five years. A law that provides for smoke-free indoor air in workplaces (private and government), restaurants and bars is called a comprehensive law. In the United States, 26 states and the District of Columbia have such laws;¹ Kentucky does not.

Majority of adults support smoke-free law

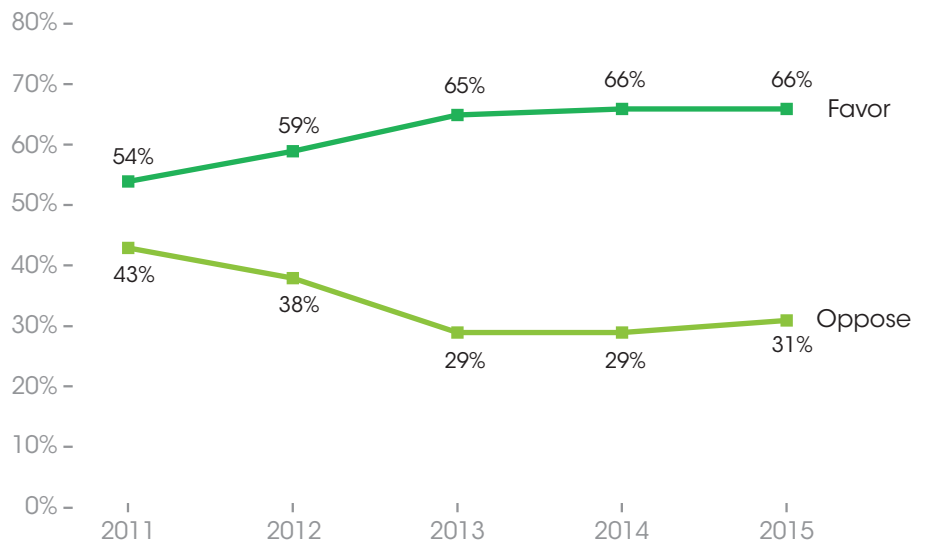
Support was high in 2015 for a comprehensive statewide law in Kentucky that would provide for smoke-free indoor air in most public places. Two-thirds of Kentucky adults (66%) favored this type of law. About 3 in 10 (31%) opposed such a law.

Support steady since 2013 for smoke-free law

Support for a comprehensive statewide smoke-free law has been steady

¹ Department of Health and Human Services, Centers for Disease Control and Prevention. State Smoke-free Indoor Air Fact Sheet. Retrieved Dec. 1, 2015, from <https://chronicdata.cdc.gov/Legislation/STATE-System-Smokefree-Indoor-Air-Fact-Sheet/vqg2-kkcg>.

Would you favor or oppose a state law in Kentucky that would prohibit smoking in most public places, including workplaces, public buildings, offices, restaurants and bars? (Percentages do not add to 100% because the response "don't know" is not included.)



at nearly 7 in 10 Kentucky adults since 2013. Likewise, about 3 in 10 Kentucky adults have opposed such a law each year since 2013.

Most Democrats, Republicans and Independents favor law

Majorities of Democrats (69%), Republicans (67%) and Independents (58%) reported support for a statewide smoke-free law. (See graph on next page.)

Support differs by smoking, health status

Nearly 8 in 10 Kentucky adults who have never smoked (77%) favored a smoke-free law. About 7 in 10 former smokers (69%) also supported a law. More than 4 in 10 current smokers (43%) favored a comprehensive smoke-free law. One in 4 Kentucky adults (26%) reported being a current smoker. (See graph on next page.)

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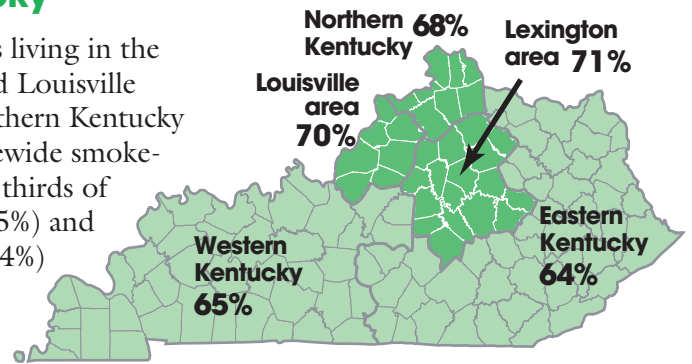
Support for this type of statewide law differed by health status.² More than 7 in 10 Kentucky adults who reported excellent or very good health (74%) supported a smoke-free law. About 6 in 10 Kentucky adults who reported good health (62%) or fair or poor health (58%) favored such a law.

² KHIP asked: "Would you say that, in general, your health is excellent, very good, good, fair or poor?"

Support strong across Kentucky

About 7 in 10 adults living in the Lexington (71%) and Louisville (70%) areas and Northern Kentucky (68%) favored a statewide smoke-free law. Nearly two-thirds of adults in Western (65%) and Eastern Kentucky (64%) also supported a statewide smoke-free law.

Percentage of adults who favor a statewide smoke-free law, by region



Percentage of adults who favor a state law in Kentucky that would prohibit smoking in most public places, including workplaces, public buildings, offices, restaurants and bars

Kentucky adults **66%**

By political party identification

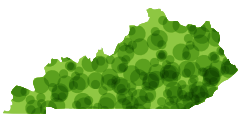
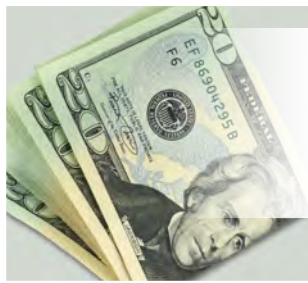


By smoking status



By general health status





Most Kentuckians favor raising minimum wage to \$10.10

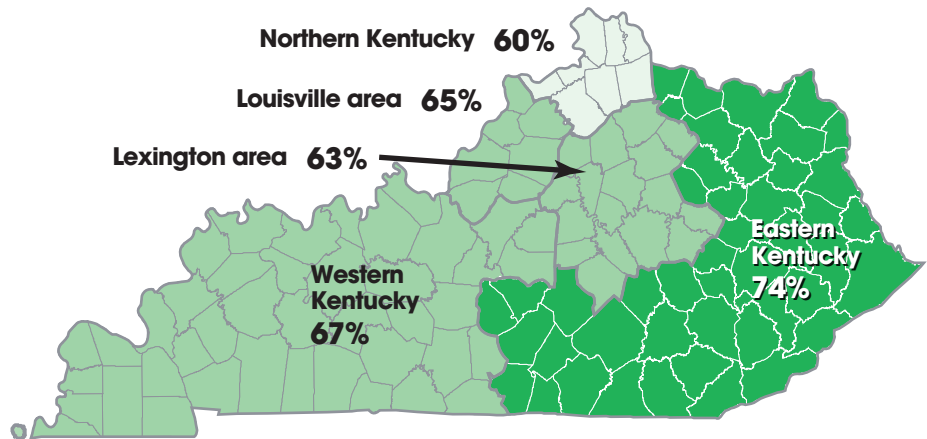
The current minimum wage in Kentucky for most workers is \$7.25. This is about \$15,000 per year for a full-time employee. A July 2015 executive order by Governor Steve Beshear raised the minimum wage to \$10.10 per hour for state employees. However, this increase was repealed by an executive order from newly elected Governor Matt Bevin in December 2015. Both Lexington and Louisville have recently passed minimum wage increases for public and most private workers.¹ Currently, 29 states and Washington, D.C., have minimum wages above the federal minimum wage of \$7.25 per hour.²

The 2015 **Kentucky Health Issues Poll (KHIP)** asked “Do you favor or oppose the Commonwealth of Kentucky increasing the minimum wage for all workers to \$10.10 per hour?” Nearly 7 in 10 adults (68%) in Kentucky favored such an increase.

¹Reuters: *Lexington becomes second Kentucky city to approve minimum wage hike.* Nov. 19, 2015. <http://www.reuters.com/article/us-wage-lexington-idUSKCN0T909W20151120>

² National Conference of State Legislatures, *State Minimum Wages: 2016 Minimum Wage by State.* Retrieved from: <http://www.ncsl.org/research/labor-and-employment/state-minimum-wage-chart.aspx>

Percentage of adults who favor an increase of the minimum wage for all workers in Kentucky to \$10.10 per hour



By political party identification



Majority support in all regions, political parties

Support for a minimum wage increase was seen across the state. At least 6 in 10 adults favored the change in each region. Support was highest in Eastern Kentucky, where more than 7 in 10 adults (74%) favored an increase.

About 5 in 10 Republicans (51%)

favored increasing the minimum wage to \$10.10. Support was much higher among Democrats (84%) and Independents (77%).

Older or less-educated adults and women more likely to favor increase

While a majority of all groups favored an increase, support was

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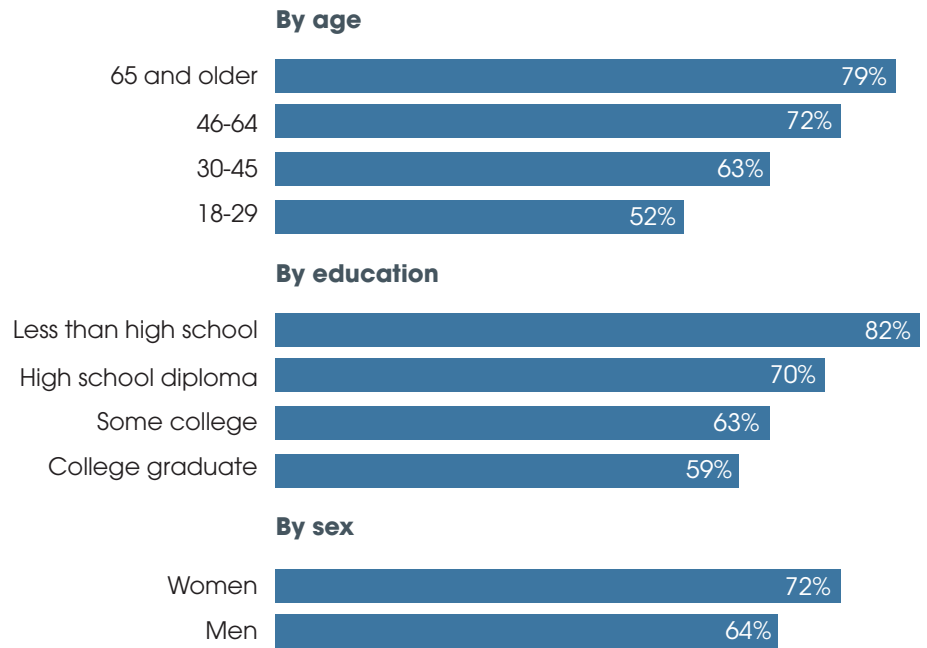
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higher among certain groups. Older adults were more likely to favor raising the minimum wage. About 5 in 10 adults ages 18 to 29 favored an increase (52%). This compares with nearly 8 in 10 adults ages 65 and older (79%).

Likewise, adults with less education were more likely to support a minimum wage hike. More than 8 in 10 adults who did not graduate from high school (82%) supported a minimum wage of \$10.10. Seven in 10 high school graduates (70%) supported a higher minimum wage. About 6 in 10 adults with some college (63%) or a college degree (59%) supported an increase.

Women were more likely than men to support a wage increase. About 7 in 10 women (72%) supported a higher minimum wage, compared with more than 6 in 10 men (64%).

Percentage of adults who favor an increase of the minimum wage for all workers in Kentucky to \$10.10 per hour



Heroin use and prescription drug misuse in Kentucky

Kentucky ranks second in the nation along with New Mexico for the most drug overdose deaths per capita. Only West Virginia has more overdose deaths.¹ Drug overdose deaths in Kentucky quadrupled from 241 in 2000 to 1,077 in 2014.² Since 2008, more Kentucky adults have died each year from drug overdoses than from motor vehicle accidents.³

The 2015 **Kentucky Health Issues Poll (KHIP)** asked Kentucky adults about the influence of drug misuse on their family members and friends.

More than 1 in 10 knows someone who has had problems because of heroin use

KHIP asked, “Have any of your family members or friends

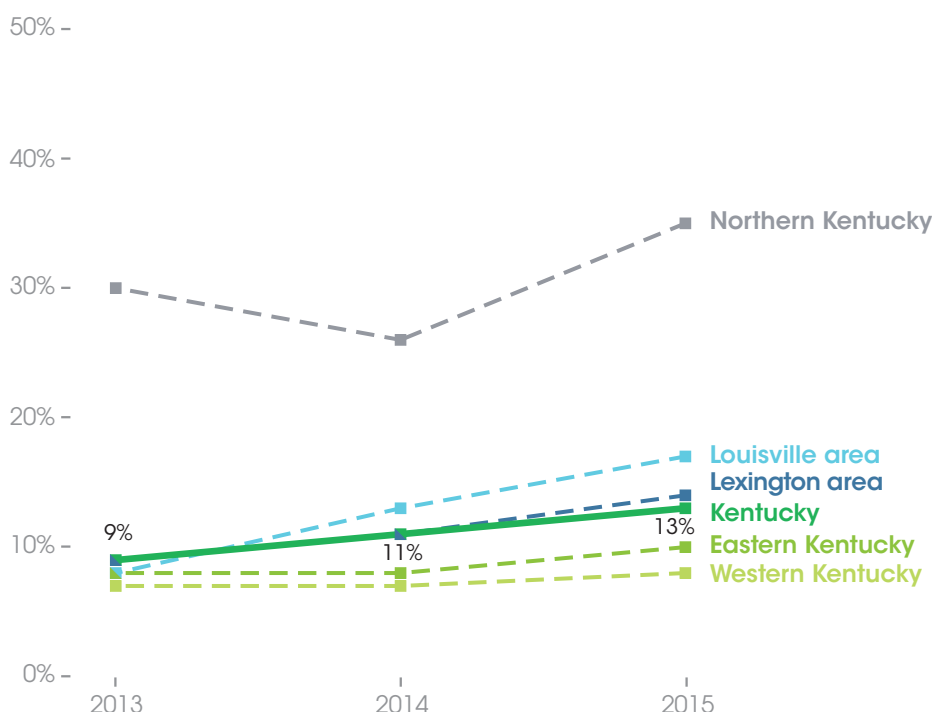
¹ Trust for America's Health (June 2015). The Facts Hurt: A State-By-State Injury Prevention Policy Report. Retrieved Dec. 17, 2015 from <http://www.healthy-americans.org/reports/injuryprevention15/>.

² Centers for Disease Control and Prevention, National Center for Health Statistics. Multiple Cause of Death 1999-2014 on CDC WONDER Online Database, released 2015. Accessed at <http://wonder.cdc.gov/mcd-icd10.html> on Jan. 13, 2016.

³ Kentucky Injury Prevention and Research Center and Kentucky Department of Public Health (October 2015). Kentucky Special Emphasis Report: Drug Overdose Deaths, 2000-2014. Retrieved Dec. 17, 2015 from <http://www.mc.uky.edu/kiprc/>.

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Percentage of adults reporting that they had family members or friends who had experienced problems as a result of using heroin



experienced problems as a result of using heroin?” More than 1 in 10 Kentucky adults (13%) said yes. This is about the same as in 2014 (11%), but it is an increase since 2013, when only 9% of adults knew someone who had problems due to heroin use.

Responses varied by region. More than 3 in 10 Northern Kentucky adults (35%) reported that they knew someone who had problems

due to heroin use. That compares with nearly 2 in 10 Louisville area adults (17%). About 1 in 10 adults knew someone who had problems because of heroin use in the Lexington area (14%), in Eastern Kentucky (10%) and in Western Kentucky (8%). Since 2013, the percentage of adults who said yes to this question has remained stable in Eastern and Western Kentucky, but has risen in other regions.

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Young adults more likely to know someone who has used heroin

Young adults are more likely than older adults to report having friends or family members who had problems as a result of using heroin. One in 4 adults ages 18 to 29 (25%) reported knowing someone who had problems due to heroin use. This compares with about 1 in 10 adults 30 to 45 (12%), 46 to 64 (10%), and 65 and older (7%).

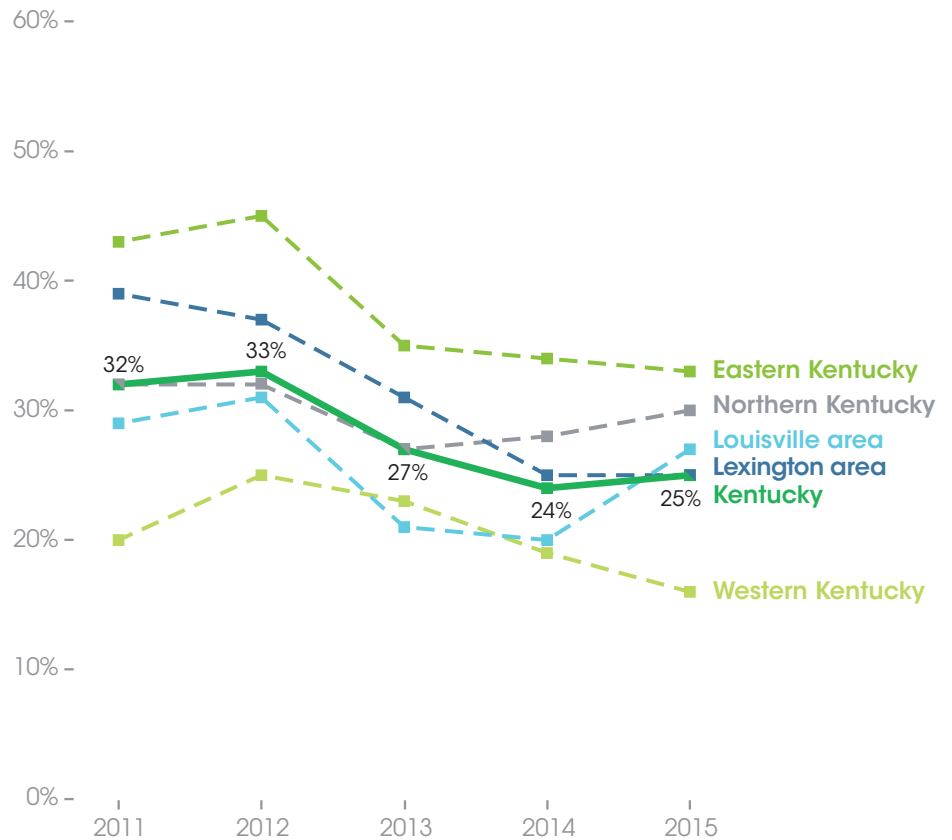
Responses to this question did not vary significantly by sex, race, education or income.

1 in 4 knows someone who had misused prescription drugs

KHIP also asked, “Have any of your family members or friends experienced problems as a result of abusing prescription pain relievers such as OxyContin, Vicodin, Percocet or codeine?” One in 4 Kentucky adults (25%) said yes.

Western Kentucky adults were less likely than adults in other regions to report knowing someone who had problems due to prescription drug misuse. Fewer than 2 in 10 Western Kentucky adults (16%) reported this. That compares with about 3 in 10 adults in Eastern Kentucky (33%), Northern Kentucky (30%) and the Louisville area (27%), and more than 2 in 10 adults in the Lexington area (25%).

Percentage of adults reporting that they had family members or friends who had experienced problems as a result of using prescription drugs



Since 2014, the percentage of adults who reported this has risen from 20% to 27% in the Louisville area, but has remained steady in other regions.

Some adults more likely to know someone who had misused prescription drugs

White adults (26%) were three times more likely than African American adults (9%) to report knowing someone who had problems due to prescription drug

abuse. Likewise, adults earning less than 200% of the Federal Poverty Level (FPL)⁴ (29%) were more likely than adults earning more than 200% FPL (23%) to report this.

About 3 in 10 adults ages 18 to 45 (32%) knew someone who had problems due to prescription drug misuse. This compares with about 2 in 10 adults 46 to 64 (23%) and fewer than 2 in 10 adults 65 and older (16%).

⁴ In 2014, 200% of the Federal Poverty Level was \$47,700 for a family of four.



Most favor raising age to buy tobacco; split on tax increase

The **Kentucky Health Issues Poll (KHIP)**, sponsored by Interact for Health and the Foundation for a Healthy Kentucky, asked Kentucky adults their opinions about two tobacco policies. Do you favor or oppose raising the minimum legal age to buy tobacco products from 18 to 21 years of age? Do you favor or oppose raising the state's excise tax on a pack of cigarettes by \$1?

These policies can deter young people from starting to smoke cigarettes.¹ More than one in 4 Kentucky adults (26%) reported being a smoker. Nationally, 18.1% of adults reported smoking cigarettes.²

Kentucky adults favor raising age to buy tobacco to 21

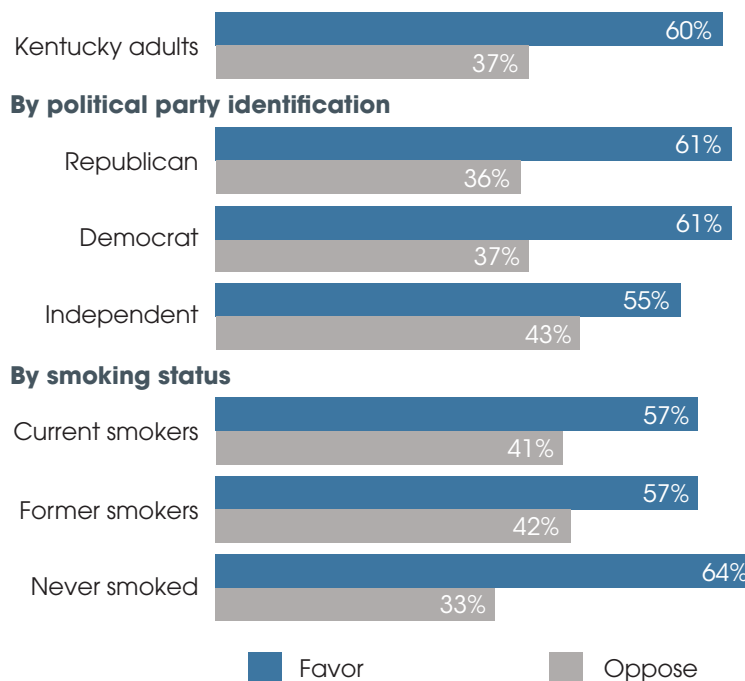
Raising the minimum legal age to buy tobacco products would likely delay young adults from starting to smoke and, in the long run, reduce

¹ Centers for Disease Control and Prevention, Best Practices for Comprehensive Tobacco Control Programs (Section I. State and Community Interventions), 2014. Retrieved from: <http://1.usa.gov/1RL9try>

² Centers for Disease Control and Prevention, Behavioral Risk Factor Surveillance System Survey Data. Atlanta, Georgia: U.S. Department of Health and Human Services, 2014. Retrieved from: <http://1.usa.gov/1PADDxR>

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Do you favor or oppose increasing the minimum legal age to purchase tobacco products from 18 years of age to 21 years of age?* (Percentages do not add to 100% because the responses "no opinion" and "don't know" are not included.)



* KHIP asked: "Some people favor increasing the minimum legal age to purchase tobacco products from 18 years of age to 21 years of age, while others do not. What about you? Do you favor or oppose increasing the minimum legal age to purchase tobacco products from 18 years of age to 21 years of age?"

smoking-related health problems.³ Only one state, Hawaii, has raised the minimum legal age for buying tobacco products to 21. At present, 115 local jurisdictions in nine states

³ Institute of Medicine of the National Academies, Public Health Implications of Raising the Minimum Age of Legal Access to Tobacco Products, March 2015. Retrieved from <http://bit.ly/1NlIGxj>

have enacted laws to raise the age to 21.⁴ Six in 10 Kentucky adults (60%) favored raising the legal age to buy tobacco to 21.

⁴ Campaign for Tobacco-Free Kids, Increasing the Minimum Legal Sale Age for Tobacco Products to 21, Jan. 2016. Retrieved from <http://bit.ly/1OZ5QbW>

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Majorities of all political parties favor raising legal age to buy tobacco

Majorities of Republicans (61%), Democrats (61%) and Independents (55%) all favored raising the minimum legal age to buy tobacco products from 18 to 21.

Majorities of smokers, former smokers and nonsmokers favor raising minimum age

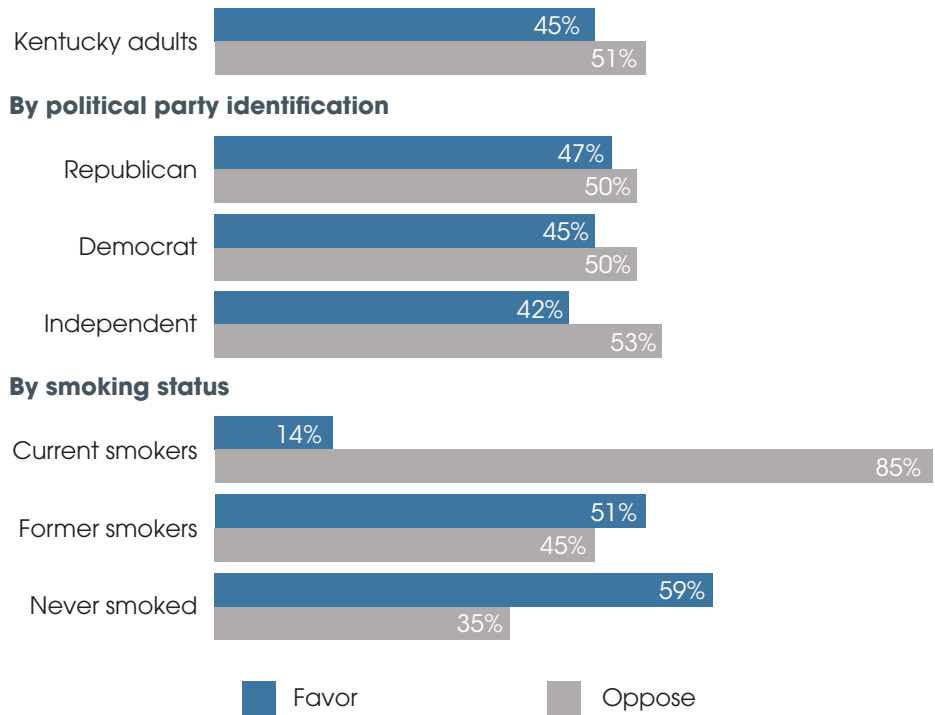
Fifty-seven percent of current cigarette smokers and 57% of former smokers favored raising the minimum legal age to buy tobacco products from 18 to 21. Likewise, a majority of Kentucky adults who never smoked (64%) favored this change.

Adults divided on tax; holds across political party lines

In Kentucky the excise tax on a pack of cigarettes is 60 cents per pack. Kentucky is one of 11 states with an excise tax of 60 cents or less.⁵ Kentucky adults were nearly evenly divided when asked if the tax should be raised by \$1, with slightly more opposing the increase. Fifty-one percent opposed and 45% favored increasing the tax. Likewise, Democrats, Republicans and Independents reported similar divisions about raising the tax.

⁵ Centers for Disease Control and Prevention, STATE System Excise Tax Fact Sheet, 2015. Retrieved from: <https://chronicdata.cdc.gov/Legislation/STATE-System-Excise-Tax-Fact-Sheet/tsmn-nssw>

Do you favor or oppose increasing the excise tax on a pack of cigarettes by \$1?* (Percentages do not add to 100% because the responses "no opinion" and "don't know" are not included.)



* KHIP asked: "The Commonwealth of Kentucky currently places BOTH a sales tax AND a \$0.60 cent per pack excise tax on the sale of cigarettes. One proposal would raise the current excise tax on a pack of cigarettes by \$1.00. This would bring the total excise tax on a pack of cigarettes to \$1.60 per pack. Do you favor or oppose increasing the excise tax on a pack of cigarettes by \$1.00?"

Current smokers oppose raising excise tax

More than 8 in 10 current smokers (85%) opposed raising Kentucky's excise tax on cigarettes by \$1. Former smokers were split about raising the tax. About 4 in 10 former smokers (45%) opposed raising the tax, while 5 in 10 (51%) favored raising it. Adults who reported never having smoked were most likely to favor raising the tax. One in four Kentucky adults reported being a current smoker (26%) or a former smoker (26%), and nearly half (47%) reported they had never smoked.



State's uninsured rate at 13%; unstable insurance declines

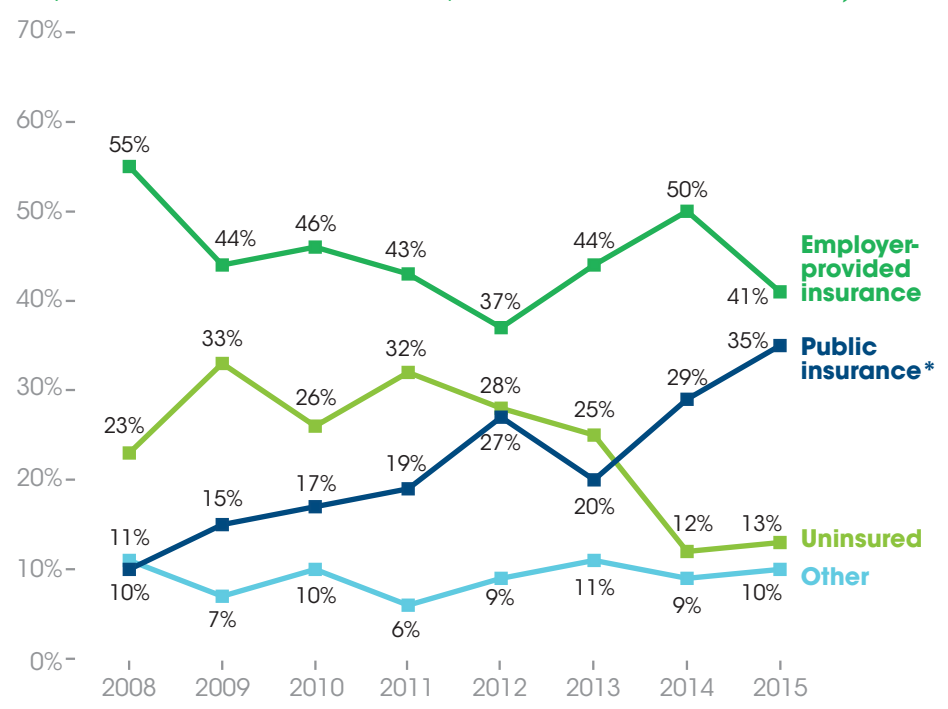
Having health insurance is an important factor in being able to get needed healthcare. Since 2008 the **Kentucky Health Issues Poll (KHIP)** has asked about health insurance coverage among Kentucky adults. Because nearly all Kentuckians 65 and older are insured (98%), this summary focuses on Kentucky adults ages 18 to 64.

Employer-provided insurance drops; more adults have public insurance

The rate of uninsured Kentucky adults dropped by half from 25% in 2013 to 12% in 2014 as the Affordable Care Act went into effect. This was the second highest drop in uninsurance in the nation.¹ The rate remained stable at 13% in 2015.

After rising since 2012, the percentage of adults insured through an employer dropped in 2015. Four in 10 Kentucky adults ages 18 to 64 (41%) reported being insured through

Type of insurance coverage for Kentucky adults ages 18-64 (Percentages may not add to 100% because the response "don't know" is not included.)



* Medicare, Medicaid, military benefits and combinations of the three.

their employer or their spouse's employer in 2015.

More than 3 in 10 Kentucky adults (35%) received some type of public insurance in 2015. This is an increase from 29% in 2014. Public insurance includes Medicare, Medicaid, military benefits and combinations of the three. Kentucky is one of 28 states

that expanded Medicaid eligibility in 2014 to people earning up to 138% of the Federal Poverty Level (FPL).²

One in 10 adults ages 18 to 64 (10%) reported having some other type of health insurance.

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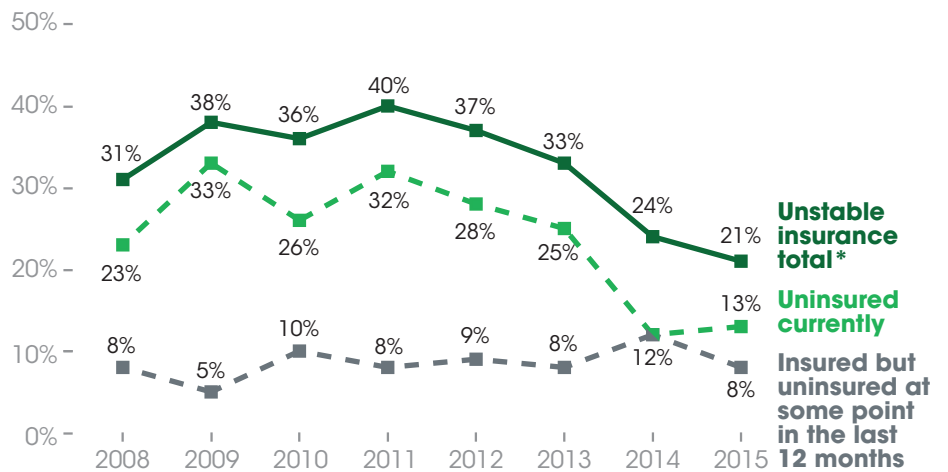
²In 2014, 138% of the Federal Poverty Level was \$32,913 for a family of four; 200% was \$47,700.

¹ Gallup. (2015). *In U.S., Uninsured Rates Continue to Drop in Most States*. Retrieved from <http://www.gallup.com/poll/184514/uninsured-rates-continue-drop-states.aspx>.

Unstable insurance rate continues to drop

Having continuous insurance coverage for the past 12 months is an important factor in accessing healthcare. This is known as stability of health insurance. KHIP found that fewer than 1 in 10 adults ages 18 to 64 who were insured at the time of KHIP (8%) lacked insurance sometime in the past year. Since 2011, the percentage of Kentucky adults ages 18 to 64 reporting unstable insurance has dropped significantly.

Percentage of Kentucky adults ages 18-64 with unstable insurance*

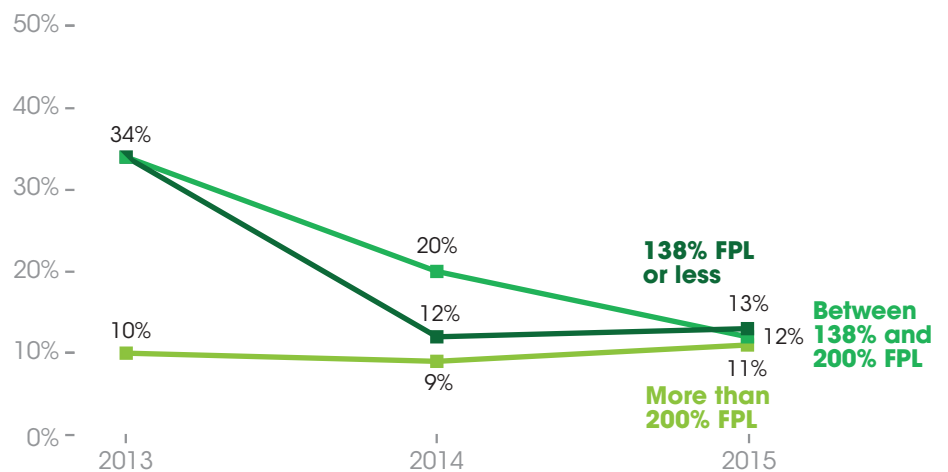


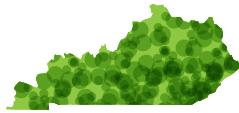
* Unstable insurance is defined as lacking insurance any time in the last 12 months, including currently.

Percentage of uninsured lower-income adults continues to fall

Because Kentucky expanded Medicaid, more lower-income adults have become eligible for insurance in recent years. Since 2013, the percentage of adults ages 18 to 64 earning less than 200% FPL who are uninsured has fallen from more than 3 in 10 adults to only 1 in 10 adults. Uninsurance rates are now about the same for all Kentucky adults regardless of income, reducing one potential barrier to receiving needed healthcare.

Percentage of uninsured Kentucky adults ages 18-64, by poverty status





The challenges Kentuckians face to improve their health

There are many ways to assess a person's health. One way is to ask people to evaluate their own health. The **Kentucky Health Issues Poll (KHIP)** asked Kentucky adults "Would you say that, in general, your health is excellent, very good, good, fair or poor?" Research has found a powerful link between people's response to this question and the predicted length and quality of their lives.

To better understand health improvement, KHIP also asked Kentucky adults to name the most important thing they could do to improve their health.

3 in 10 adults report fair or poor health

In 2015, 4 in 10 Kentucky adults (43%) reported that their health was excellent or very good. Fewer than 3 in 10 (26%) said that their health was good. About 3 in 10 (31%) said their health was fair or poor. These percentages are about the same as in 2014. Kentucky ranks only 46th out of 50 states in the percentage of adults reporting excellent or very good health.¹

¹ American's Health Rankings, United Health Foundation. (2015). *High Health Status, United States*. Retrieved from http://www.americashealthrankings.org/ALL/Health_Status.

Self-reported health status among Kentucky adults



Exercise, better diet are most common changes named

KHIP asked respondents to name the *most important* thing they could do to improve their health status by one level (for example, from good to very good). Responses varied widely, but most could be placed into several broad categories.

Nearly 3 in 10 adults said they could **increase exercise** to improve their health. This was the most common response. Respondents' specific answers in this category included activities such as walking, running or weightlifting, or simply saying they should be more active.

According to the Centers for Disease Control and Prevention, regular exercise can help reduce the risk of cardiovascular disease, diabetes and some cancers, and

increase a person's chance of living longer.²

Nearly 2 in 10 adults said they could **improve diet** to improve their health. This was the second most common response. Respondents' specific answers included eating more vegetables, eating less fast food and eating less sugar.

About 1 in 10 adults said one of the following actions was the most important they could take to improve their health:

- Improving their access to healthcare (such as getting better health insurance or medical care)
- Improving their personal medical condition (such as recovering from surgery)
- Quitting smoking.

Continued on back

² Centers for Disease Control and Prevention. (2015). *Physical Activity and Health*. Retrieved from <http://www.cdc.gov/physicalactivity/everyone/health/index.html>.

Current health status affects what's needed to improve health

The most common changes identified to improve health differed based on respondents' current health status. Adults with excellent, very good or good health cited more exercise and improved diet most frequently.

On the other hand, adults with fair or poor health most commonly cited a current health problem as their most pressing need. Specific answers included needing surgery; needing to recover from diabetes, cancer, depression or another medical condition; or generally needing to get well. The second most common response was related to improved access to healthcare. Among other things, respondents cited a need for more frequent doctor's visits, better health insurance or better medical care.

Time, money, motivation most common barriers to improving health

Next, KHIP asked, "What is the *greatest* barrier to making that change?" Nearly 2 in 10 adults said time was the greatest barrier. They either did not have enough time or were too busy to make the needed

health change. Another nearly 2 in 10 adults said they did not have the necessary willpower, motivation or attitude to change their health.

About 1 in 10 adults said they could not afford to make the change that would improve their health. They cited the high cost of healthy food and being unable to afford health insurance. Another 1 in 10 said a current health problem was the greatest barrier.

Most see health change as difficult

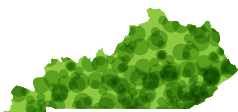
KHIP also asked Kentucky adults how difficult it would be to make the health change they had identified. Nearly 7 in 10 adults (65%) said the change would be difficult or very difficult. About 3 in 10 (32%) said it would be easy or very easy.

Adults with lower income were more likely to report difficulty in making a positive health change. About 6 in 10 adults earning more than 200% of the Federal Poverty Level (FPL)³ (61%) said making a positive health change would be difficult or very difficult. About 7 in 10 adults earning 200% FPL or less (71%) said this.

³In 2014, 200% of the Federal Poverty Level (FPL) was \$47,700 for a family of four.

Percentage of adults who reported it would be difficult or very difficult to make the health change they had identified





Support strong in Kentucky for 100% tobacco-free schools

Only 28% of Kentucky's school districts have protected students, staff members, teachers and guests from second-hand smoke by enacting 100% tobacco-free school policies.¹ Kentucky ranks 50th, the worst, in the percentage of secondary school campuses that prohibit tobacco use in all locations at all times.² Nationally, 65% of schools have such a policy.³

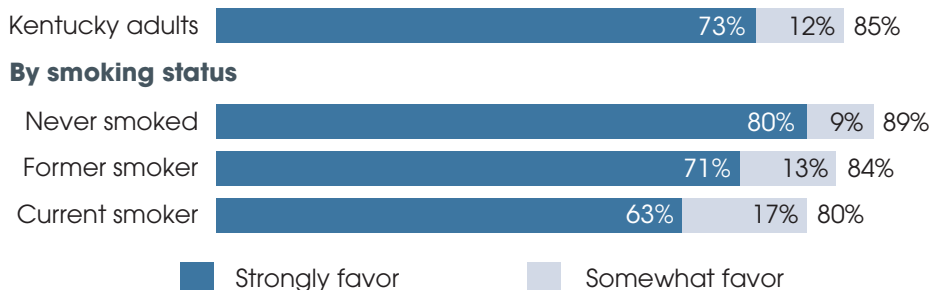
To learn Kentucky adults' opinions about this topic, the **Kentucky Health Issues Poll (KHIP)** asked, "Research indicates that the younger a person is when they first try tobacco, the more susceptible they are to becoming addicted. To help keep kids from smoking, some school systems are adopting tobacco-free campus policies that would prohibit the use of tobacco by students, staff, parents or guests while they are on school grounds or

¹ Kentucky Department of Education and Kentucky Department for Public Health, Tobacco Prevention and Cessation Program, Kentucky's 100% Tobacco Free School Districts, Dec. 2015. Retrieved from: <http://bit.ly/1WXlynG>.

² U.S. Department of Health and Human Services, Centers for Disease Control and Prevention, School Health Profiles 2014: Characteristics of Health Programs Among Secondary Schools, 2015. Retrieved from: <http://1.usa.gov/1jQZOkp>.

³ U.S. Department of Health and Human Services, Centers for Disease Control and Prevention, School Health Policies and Practices: Trends over time 2000-2014. Retrieved from: <http://1.usa.gov/1TWaa00>.

Percentage of Kentucky adults who favor tobacco-free campus policies



at school-sponsored activities, such as field trips and sporting events. Would you favor or oppose schools adopting tobacco-free campus policies in your community?"

Most support 100% tobacco-free schools

More than 8 in 10 Kentucky adults (85%) favored schools in their communities adopting tobacco-free campus policies. This is similar to 2013 when KHIP found that 84% of Kentucky adults favored such a policy.

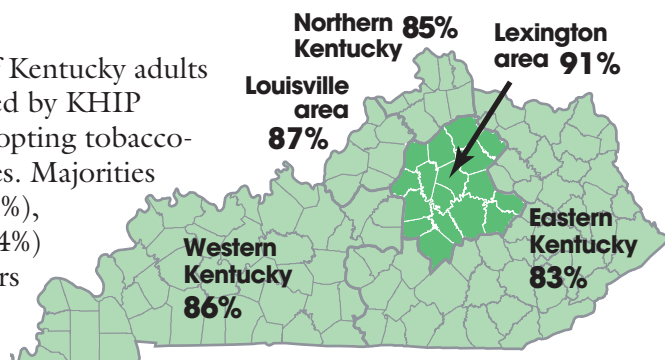
Large majorities of Kentucky adults in all groups tracked by KHIP favored schools adopting tobacco-free campus policies. Majorities of nonsmokers (89%), former smokers (84%) and current smokers (80%) favored such a policy.

Likewise, more than 8 in 10 Independents (88%), Republicans (87%) and Democrats (83%) favored schools in their own communities adopting tobacco-free policies.

Support strong in all regions of Kentucky

In all regions, large majorities of adults supported tobacco-free policies on school campuses.

Percentage of adults who favor tobacco-free campus policies



These findings unless otherwise noted are from the Kentucky Health Issues Poll, funded by the Foundation for a Healthy Kentucky and Interact for Health. The Kentucky Health Issues Poll was conducted Sept. 17-Oct. 7, 2015, by the Institute for Policy Research at the University of Cincinnati. A random sample of 1,608 adults from throughout Kentucky was interviewed by telephone. This included 986 landline interviews and 622 cell phone interviews with cell phone users. In 95 of 100 cases, the statewide estimates will be accurate to ±2.4%. There are other sources of variation inherent in public opinion studies, such as non-response, question wording, or context effects that can introduce error or bias. For more information about the Kentucky Health Issues Poll, please visit www.healthy-ky.org or www.interactforhealth.org/kentucky-health-issues-poll.



Costs still a barrier to getting care for 2 in 10 Kentucky adults

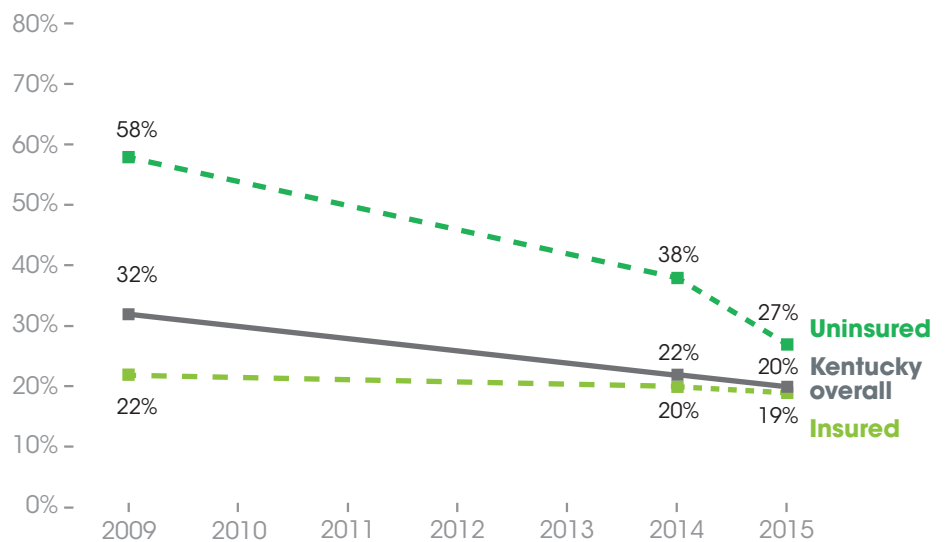
Most people rely on health insurance to help pay for medical visits and healthcare. However, even with health insurance, medical care can be expensive. According to the Kaiser Family Foundation, in the United States the average annual cost per person for out-of-pocket health expenses was \$1,036 in 2014. This includes costs for any expenses¹ not covered by insurance.²

These high out-of-pocket costs can become a barrier that prevents people from receiving the care they need. The 2015 **Kentucky Health Issues Poll (KHIP)** asked about the financial burden of adults' healthcare costs.

Two in 10 households delayed or did not get care due to cost

KHIP asked, "In the past 12 months, was there a time when you or another member of your

In the past 12 months, was there a time when you or another member of your household needed medical care but did not get it, or delayed getting it because of the cost? (Graph shows the percentage of adults who said "yes.")



household needed medical care but did not get it, or delayed getting it because of the cost?" In 2015, 2 in 10 adults (20%) had delayed or gone without medical care due to cost in the previous year. This is about the same as in 2014 (22%). However, it is much lower than in 2009, when 32% of adults said yes.

care (16%). Delaying care was also more common among uninsured adults (27%) than insured adults (19%), but this is an improvement for uninsured adults. In 2015 they were much less likely to report going without care than they were in 2014 (38%) or 2009 (58%).

Nearly 3 in 10 adults had trouble paying medical bills

KHIP also asked "In the past 12 months, did you or another family

¹ Including coinsurance and deductibles.

² Kaiser Family Foundation. (2015). Peterson-Kaiser Health System Tracker. [Interactive tool providing up-to-date information on U.S. health spending by federal and local governments, private companies and individuals.] *U.S. Health Expenditures 2000-2014 On All Types of Services by Out of Pocket (per capita \$)*. Retrieved from www.healthsystemtracker.org/interactive/health-spending-explorer.

Adults earning 138% or less of the Federal Poverty Level (FPL)³ (29%) were more likely than adults earning more than 138% FPL to have delayed or gone without medical

³ In 2014, 138% of the Federal Poverty Level was \$32,913 for a family of four.

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member in your household have any problems paying medical bills, or not?" In 2015, nearly 3 in 10 adults (28%) reported having problems paying medical bills in the previous year. In 2014, 31% of adults reported this. (This question was not asked in 2009.)

Responses to this question did not differ by insurance status. About 3 in 10 insured (27%) and uninsured adults (31%) had trouble paying medical bills in the previous year. This is another improvement for uninsured adults. In 2015 they were much less likely than in 2014 (47%) to report having had trouble paying medical bills.

In the past 12 months, did you or another family member in your household have any problems paying medical bills, or not? (Graph shows the percentage of adults who said "yes.")

