

Kentucky adults say obesity, cancer are most important health issues

The **Kentucky Health Issues Poll (KHIP)**, funded by the Foundation for a Healthy Kentucky and Interact for Health, asked Kentucky adults to name the most important health care issue facing Kentucky's men, women and children. Respondents could provide any answer.

Obesity cited as top issue for children

One in 4 Kentucky adults (25%) said obesity was the most important health issue facing children. In Kentucky, 19% of high school students were obese in 2015.¹ Problems with health insurance or health care (10%), cancer (8%) and hunger/malnutrition (6%) were also mentioned.

About 1 in 3 Kentucky adults (32%) mentioned other health issues facing children. These included diabetes, mental health issues, common cold/flu, lack of preventative screenings or vaccinations, substance use, and others. Another 19% reported they did not know the most important health issue facing Kentucky's children.

¹ Centers for Disease Control and Prevention, 2015 Kentucky Youth Behavior Survey, Accessed Dec. 1, 2016. <http://bit.ly/2h8tBsH>

Top four health care issues identified as the most important for men, women and children in Kentucky*

	CHILDREN		WOMEN		MEN
1	Obesity 25%		Cancer 39%		Cancer 21%
2	Problems with health insurance or health care 10%		Heart disease 11%		Heart disease 20%
3	Cancer 8%		Problems with health insurance or health care 10%		Problems with health insurance or health care 12%
4	Hunger/malnutrition 6%		Obesity 9%		Obesity 10%

* KHIP asked three open-ended questions: "What is the most important health care issue facing men in Kentucky?"; "What is the most important health care issue facing women in Kentucky?"; and "What is the most important health care issue facing children in Kentucky?"

For women, cancer named top health issue

Nearly 4 in 10 Kentucky adults (39%) identified cancer as the most important health issue facing women in Kentucky. Three in 10 (30%) specified breast cancer, and 1 in 10 (9%) said cancer generally. This was followed by heart disease (11%), problems with health insurance or health care (10%) and obesity (9%). Cancer and heart disease are the leading causes of death for women in Kentucky.²

Another 19% of Kentucky adults

named other health issues such as diabetes, smoking, substance use, prenatal and reproductive health, mental health issues, and others. Twelve percent reported not knowing.

Cancer, heart disease named men's top issues

About 2 in 10 Kentucky adults identified either cancer (21%) or heart disease (20%) as the

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² CDC's WISQARS™ (Web-based Injury Statistics Query and Reporting System), 2014 Leading Causes of Death, Kentucky, All Races, Females, Males. Accessed Dec. 1, 2016. <http://bit.ly/2iICzN9>

most important issue facing men. Problems with insurance (12%) and obesity (10%) were also mentioned. Cancer and heart disease are also the leading causes of death for men in Kentucky.³

Another 24% of Kentucky adults named other health issues such as diabetes, substance use, smoking,

³Ibid.

mental health issues, and others. Fourteen percent said they did not know.

New concerns compared with 2010

Two issues were mentioned much more often in 2016 than in 2010, the last year KHIP asked these questions. Mentions of health care and health insurance problems more than doubled.

In 2010, no more than 4% of respondents cited those issues as the most important for women (4%), men (2%) or children (2%). In 2016, at least 10% of Kentucky adults mentioned those issues for women (10%), men (12%) and children (10%). Also, less than 1% of adults mentioned hunger/malnutrition as an issue for Kentucky's children in 2010, compared with 6% in 2016.

Released: JANUARY 2017

Impact and opinions of Affordable Care Act among Kentucky adults

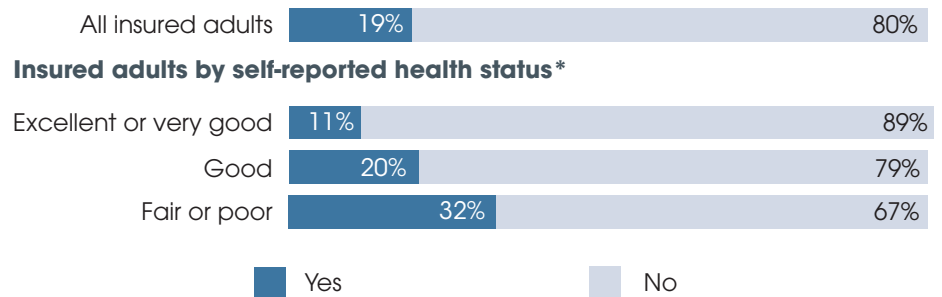
The **Kentucky Health Issues Poll (KHIP)** has tracked Kentucky adults' views about the Patient Protection and Affordable Care Act (ACA) since it became law in 2010.

Under the ACA, from 2013 to 2016 more than 600,000 Kentuckians enrolled in insurance coverage through Medicaid and the Kentucky Children's Health Insurance Program (KCHIP).¹ They applied both through kynect, the Kentucky-based online marketplace at kynect.ky.gov, and through kynectors, people who helped applicants in person.

Governor Matt Bevin dismantled kynect in October 2016 after getting federal approval to do so. Since Nov. 1, 2016, eligible Kentuckians enroll in health plans on the federal marketplace at healthcare.gov or on benefind.ky.gov for Medicaid and KCHIP. Bevin also submitted an 1115 Medicaid waiver proposal to the federal government in August 2016. The waiver proposed significant changes, such as work requirements, small

¹ Centers for Medicaid and Medicare Services. Medicaid & CHIP: July 2016 Monthly Applications, Eligibility Determinations and Enrollment Report of Sept. 27, 2016. Accessed Dec. 12, 2016, from <http://bit.ly/2iBwJg6>.

Are you concerned that you may lose your (health insurance) coverage within the next 12 months? (Percentages may not add to 100% because the response "don't know" is not included.)



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

monthly premiums and incentive accounts, among others.²

KHIP 2016 was conducted in the weeks before the presidential election and asked questions about experiences with and opinions about the ACA.

2 in 10 insured adults concerned about losing insurance

When KHIP was conducted, 90% of Kentucky adults reported that they were insured. Of these, about 2 in 10 (19%) reported being concerned about losing coverage in the next 12 months.

² Commonwealth of Kentucky, Office of the Governor, Kentucky HEALTH. Accessed Dec. 12, 2016, from <http://bit.ly/2ibGD4Y>.

Eight in 10 (80%) reported not being concerned. Responses differed by self-reported health status. Insured Kentucky adults reporting fair or poor health were more likely to be concerned (32%) than those reporting good (20%) and excellent or very good health (11%).

Equal shares report impact from ACA

Five in 10 Kentucky adults (51%) reported that the ACA had not had an effect on their families. More than 2 in 10 reported either a positive impact (23%) or a negative impact (23%). This is unchanged from 2015. (See graph on next page.)

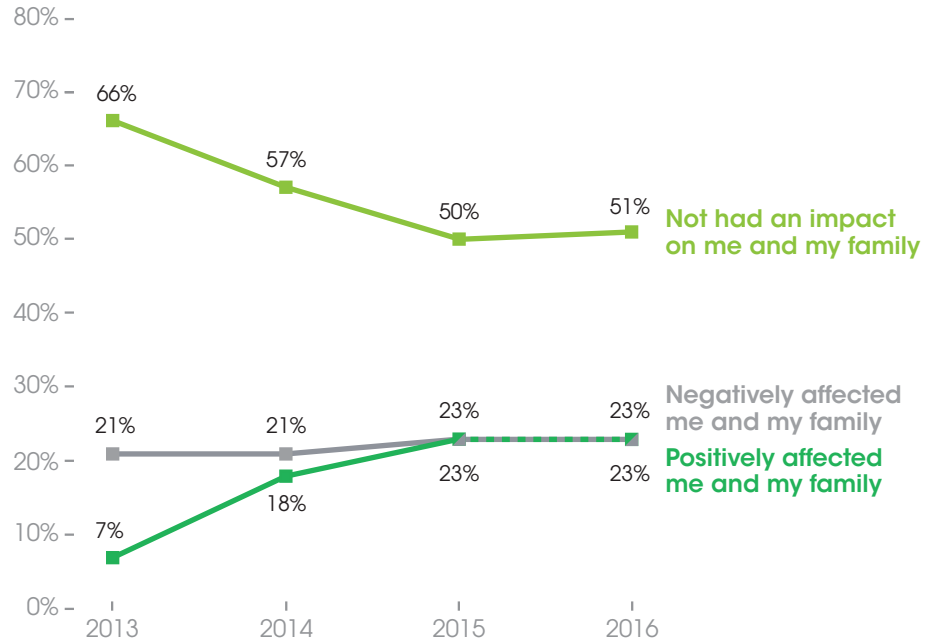
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Opinions about ACA unchanged from 2015

The 2016 KHIP found that opinions about the ACA were stable compared with 2015. A similar percentage of Kentucky adults reported unfavorable (46%) and favorable opinions (40%) in both years. The views in Kentucky were similar to national views of the health care law during this time period.³

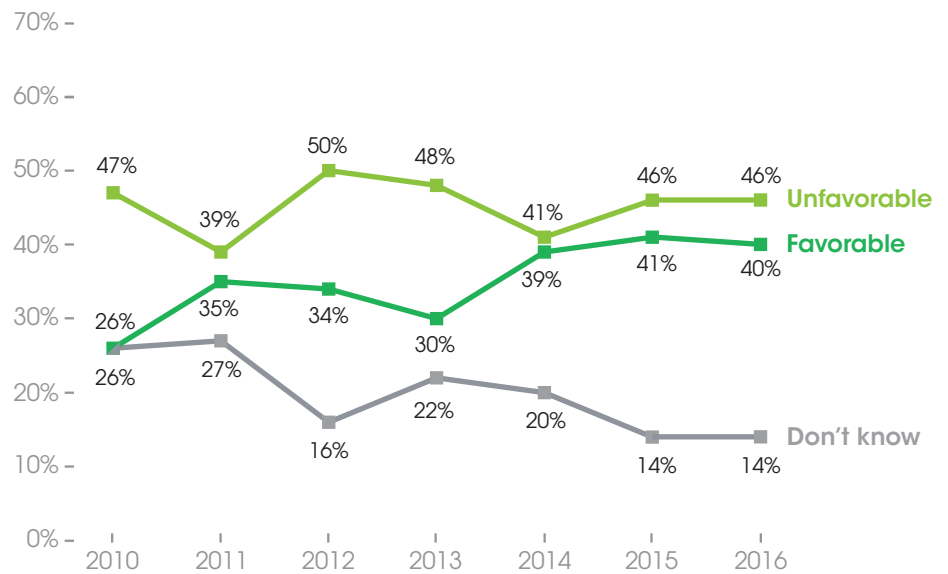
³The Henry J. Kaiser Family Foundation. Kaiser Health Tracking Poll, November 2016. Accessed Dec. 12, 2016, from <http://kaiserf.am/2hTJu4S>.

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.

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.)



Released: APRIL 2017

Most Kentucky adults support a comprehensive smoke-free law

The **Kentucky Health Issues Poll (KHIP)** has tracked Kentucky adults' opinions about a statewide smoke-free law for the past six years. A law that provides for smoke-free indoor air in workplaces (private and government), restaurants and bars is called a comprehensive law. The District of Columbia and 27 states have such laws.¹

Kentucky does not have a comprehensive statewide law. Local ordinances protect only 1 in 3 Kentuckians (33%) from secondhand-smoke exposure.²

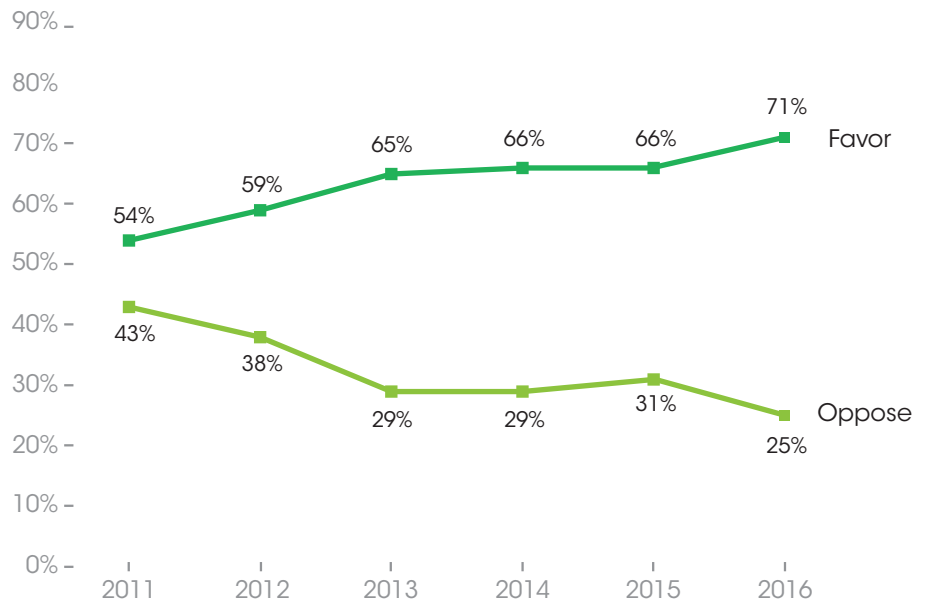
Majority supports smoke-free law

In 2016 KHIP found the highest level of support for a comprehensive statewide law in Kentucky since the poll began asking this question. More than 7 in 10 Kentucky adults (71%) favored such a law. Fewer than 3 in 10 (25%) opposed such a law.

¹ Department of Health and Human Services, Centers for Disease Control and Prevention. State Smoke-free Indoor Air Fact Sheet. Retrieved Dec. 19, 2016, from <http://bit.ly/1Rcxaj0>.

² University of Kentucky, College of Nursing, Kentucky Center for Smoke-free Policy. Percent of the Kentucky Population Covered by 100% Smoke-free Laws, Updated Oct. 1, 2016. Accessed Dec. 19, 2016, from <http://bit.ly/2niDMJw>.

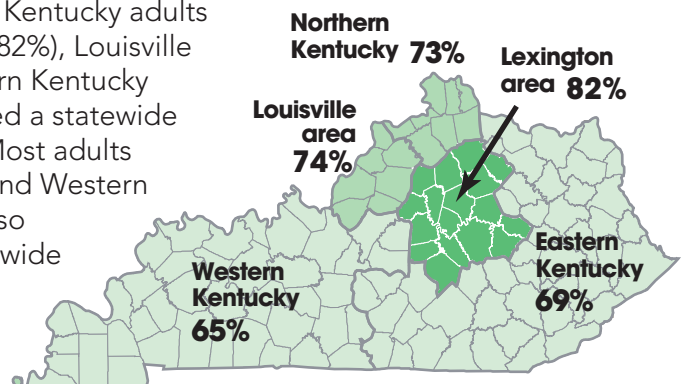
Would you favor or oppose a state law in Kentucky that would prohibit smoking in most public places, including workplaces, public buildings, offices, restaurants and bars? (Percentages do not add to 100% because the response "don't know" is not included.)



Support strong across Kentucky

More than 7 in 10 Kentucky adults in the Lexington (82%), Louisville (74%) and Northern Kentucky (73%) areas favored a statewide smoke-free law. Most adults in Eastern (69%) and Western Kentucky (65%) also supported a statewide smoke-free law.

Percentage of adults who favor a state law in Kentucky that would prohibit smoking in most public places, by region



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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. 11-Oct. 19, 2016, by the Institute for Policy Research at the University of Cincinnati. A random sample of 1,580 adults from throughout Kentucky was interviewed by telephone. This included 827 landline interviews and 753 cell phone interviews with cell phone users. In 95 of 100 cases, the statewide estimates will be accurate to $\pm 2.5\%$. 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.

Most Democrats, Independents and Republicans favor law

Majorities of Democrats (76%), Independents (72%) and Republicans (68%) reported support for a statewide smoke-free law.

Support differs by smoking status

More than 8 in 10 Kentucky adults who have never smoked (85%) favored a smoke-free law. Seven in 10 former smokers (73%) also supported a law. About 4 in 10 current smokers (41%) favored a smoke-free law. The 2016 KHIP found that 21% of Kentucky adults reported being current smokers.

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 71%



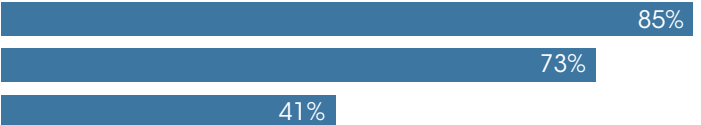
By political party identification

Democrat	76%
Independent	72%
Republican	68%



By smoking status

Never smoked	85%
Former smoker	73%
Current smoker	41%



Released: JANUARY 2017

Nearly 4 in 10 Kentucky young adults have tried an e-cigarette

An electronic nicotine delivery system, also known as an electronic cigarette or e-cigarette, uses a battery and a heating element to deliver nicotine vapor to the user. Using such a device is widely known as “vaping.” The 2016 **Kentucky Health Issues Poll (KHIP)** asked Kentucky adults about their experiences with e-cigarettes and opinions about their safety.

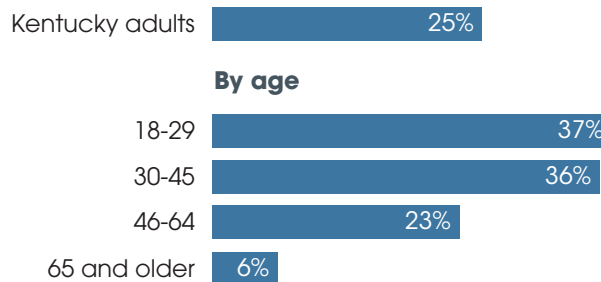
One in 4 Kentucky adults (25%) said that they had ever used an e-cigarette. This is about the same as in 2014 (24%).

Younger adults, adults with less income more likely to use e-cigarette

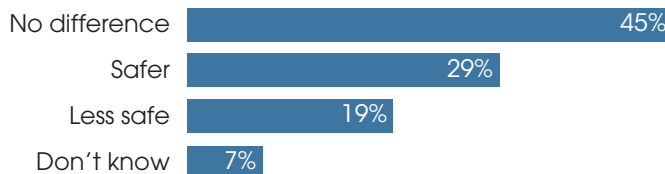
E-cigarette use was much more common among adults ages 45 and younger. About 4 in 10 adults ages 18 to 29 (37%) and 30 to 45 (36%) had ever tried an e-cigarette. This compares with 2 in 10 adults ages 46 to 64 (23%), and fewer than 1 in 10 adults ages 65 and older (6%).

Adults with lower incomes were more likely to have tried an e-cigarette. About 3 in 10 adults earning 200% or less of the Federal Poverty Guidelines (FPG)¹

Have you ever used an electronic cigarette or e-cigarette? (Graph shows those saying “yes.”)



From what you have seen and heard, would you say that e-cigarettes are safer to use than tobacco cigarettes, less safe to use than tobacco cigarettes or there is no difference?



had tried an e-cigarette (33%). That compares with 2 in 10 adults earning more than 200% FPG (19%). (See graph on next page.)

Some nonsmokers have tried e-cigarette

There is some evidence that e-cigarette use among young adults can lead to use of tobacco cigarettes.² Other research suggests that current smokers

may use e-cigarettes as an aid to cut down on traditional tobacco use.³ KHIP found that 7% of adults who had never smoked tobacco cigarettes said that they had tried an e-cigarette. In

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² Primack, B.A., Soneji, S., Stoolmiller, M., Fine, M.J., & Sargent, J.D. (2015). Progression to traditional cigarette smoking after electronic cigarette use among US adolescents and young adults. *JAMA Pediatrics*, 169 (11), 1018-1023.

³ Hartmann-Boyce, J., McRobbie, H., Bullen, C., Begh, R., Stead, L.F., & Hajek, P. (2016). Electronic cigarettes for smoking cessation. *Cochrane Database of Systematic Reviews*, 2016, (9), 1-96. doi: 10.1002/14651858.CD010216.pub3.

¹ In 2015, 200% of the Federal Poverty Guidelines was \$48,500 for a family of four.

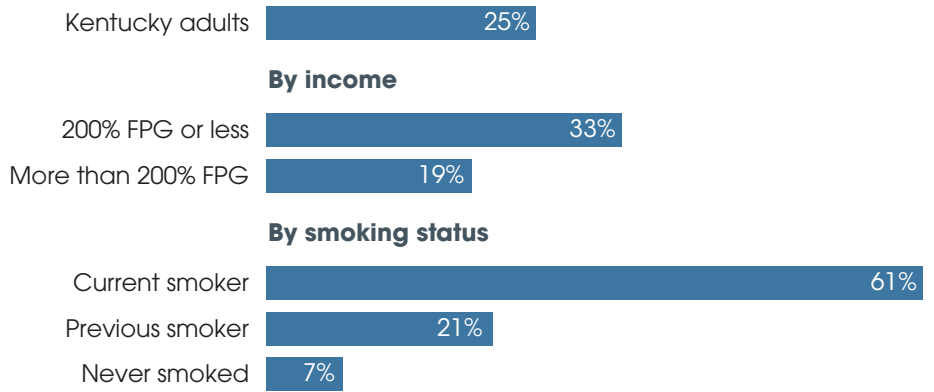
addition, 6 in 10 current smokers (61%) and 2 in 10 previous smokers (21%) had tried an e-cigarette.

Opinions about safety of e-cigarettes vary

KHIP asked adults whether they would say that e-cigarettes were safer, less safe or about the same as tobacco cigarettes. Three in 10 Kentucky adults (29%) said e-cigarettes were safer than tobacco cigarettes. About 2 in 10 (19%) said they were less safe. Almost half (45%) said there was no difference between the two. (See graph on first page.)

More than 4 in 10 adults who had tried an e-cigarette (44%) said they were safer than tobacco cigarettes. That compares with 2 in 10 adults who had never used an e-cigarette (24%). Adults who had never used an e-cigarette (50%) were more likely than adults who had tried e-cigarettes (31%) to say there was no safety difference between the two.

Have you ever used an electronic cigarette or e-cigarette? (Graph shows those saying "yes.")



Most Kentucky adults favor raising minimum age to buy tobacco to 21

The **Kentucky Health Issues Poll (KHIP)**, sponsored by Interact for Health and the Foundation for a Healthy Kentucky, asked Kentucky adults their opinions about raising the minimum legal age to buy tobacco to 21. Policies limiting access to tobacco products can deter young people from starting to use tobacco. In the long term, these policies will reduce the incidence of tobacco-related health problems and overall smoking rates.¹ In 2016, KHIP found that 21% of Kentucky adults reported being current cigarette smokers.

California and Hawaii have raised the minimum legal age to buy tobacco products to 21.²

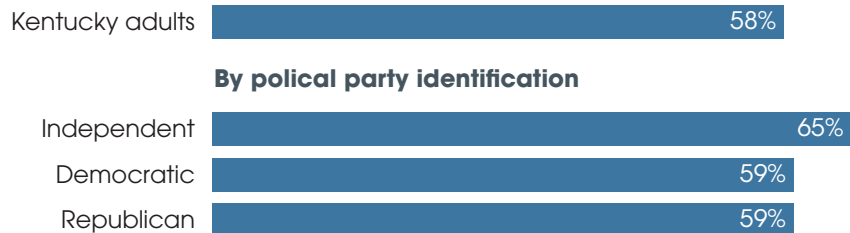
Most Kentucky adults favor raising age to 21

Nearly 6 in 10 Kentucky adults (58%) favored raising the legal age to buy tobacco to 21. This

¹ Institute of Medicine of the National Academies, Public Health Implications of Raising the Minimum Age of Legal Access to Tobacco Products, March 2015. Accessed Dec. 21, 2016, from <http://bit.ly/29rpH98>.

² Campaign for Tobacco-Free Kids, Increasing the Minimum Legal Sale Age for Tobacco Products to 21, Dec 2016. Accessed Dec. 21, 2016, from <http://bit.ly/2389F6N>.

Percentage of Kentucky adults who favor raising the minimum legal age to buy tobacco products from 18 to 21*



* 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?"

was similar to 2015 (60%).

Support across political parties

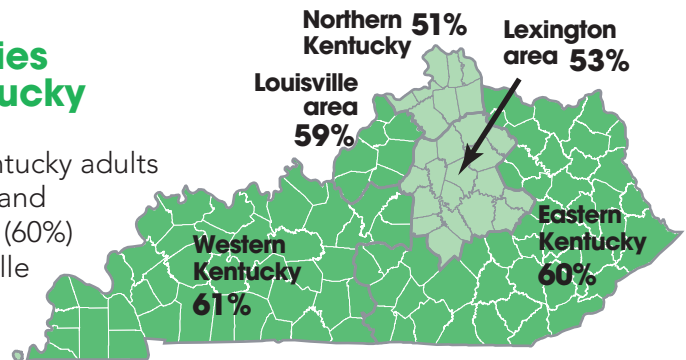
Majorities of Independents (65%), Democrats (59%) and Republicans (59%) all favored raising the minimum legal age to buy tobacco products from 18 to 21.

Support varies across Kentucky

About 6 in 10 Kentucky adults in Western (61%) and Eastern Kentucky (60%) and in the Louisville area (59%) favored raising

the legal age to buy tobacco to 21. About half of adults in the Lexington area (53%) and Northern Kentucky (51%) favored raising the age to 21.

Percentage of Kentucky adults who favor raising the minimum legal age to buy tobacco products from 18 to 21, by region



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. 11-Oct. 19, 2016, by the Institute for Policy Research at the University of Cincinnati. A random sample of 1,580 adults from throughout Kentucky was interviewed by telephone. This included 827 landline interviews and 753 cell phone interviews with cell phone users. In 95 of 100 cases, the statewide estimates will be accurate to $\pm 2.5\%$. 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.

Released: FEBRUARY 2017

Uninsured rate for Kentucky adults at 12%; public 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 questions to learn about health insurance coverage among Kentucky adults. Because nearly all Kentuckians 65 and older (97%) are insured, this summary focuses on Kentucky adults ages 18 to 64.

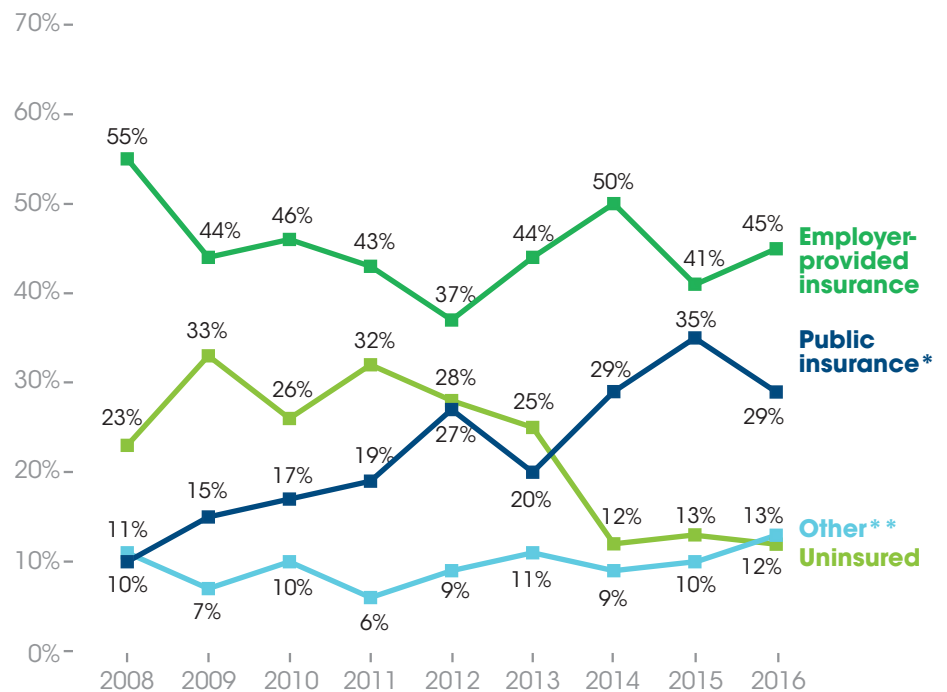
Uninsured rate stable; fewer adults have public insurance

The rate of uninsured adults in Kentucky decreased by half between 2013 (25%) and 2014 (12%) as the Affordable Care Act went into effect. The percentage of uninsured adults has remained stable since then. In 2016, KHIP found that 12% of Kentucky adults were uninsured. Kentucky's adult uninsured rate was similar to the nation's. In early 2016, 12% of adults ages 18 to 64 nationwide were uninsured.¹

More than 4 in 10 Kentucky adults (45%) reported that they received

¹Early Release of Selected Estimates Based on Data from the National Health Interview Survey. Released Sept. 27, 2016. Retrieved from <http://bit.ly/2lrpmGU>.

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.

** For 2008 through 2014 this category includes adults who purchased their own plan, had insurance from another source or didn't know their insurance source. Starting in 2015 this category also includes adults who were covered on a parent's health insurance plan.

health insurance through an employer. This is about the same as in 2015 (41%).

About 3 in 10 Kentucky adults received some type of public insurance in 2016 (29%). That is down from 35% in 2015. Public insurance includes Medicare,

Medicaid, military benefits and combinations of the three. Kentucky is one of 28 states that in 2014 expanded Medicaid eligibility to people earning up to 138% of the Federal Poverty Guidelines.²

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²In 2015, 138% of the Federal Poverty Guidelines was \$33,465 for a family of four.

About 1 in 10 adults (13%) reported getting their health insurance from some other source. This includes adults who purchased their own plan (6%) or were covered on a parent's insurance (4%).

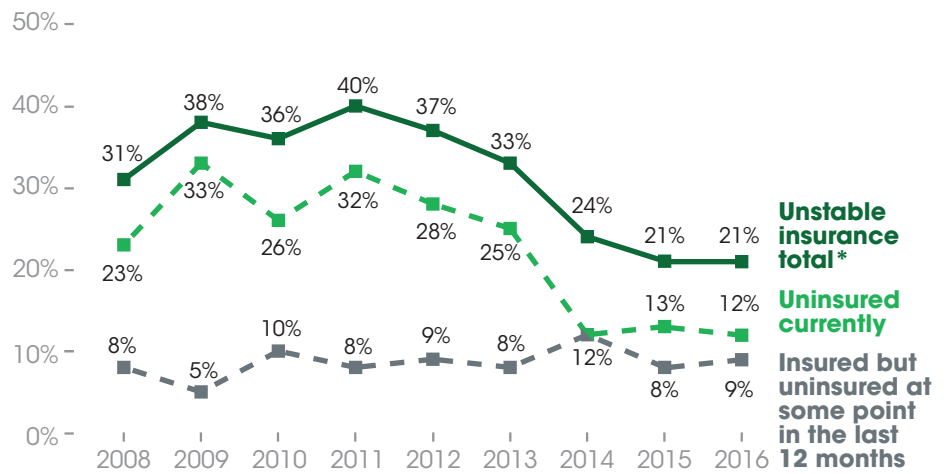
1 in 4 young adults covered under a parent's plan

About 1 in 4 Kentucky adults ages 18 to 26 (24%) reported that they were insured through a parent's plan. The Affordable Care Act allows adults up to age 26 to be covered on a parent's health insurance plan.

Percentage of adults with unstable insurance continues to improve

Having continuous insurance coverage for the past 12 months is an important factor in accessing health care. 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 (9%) lacked insurance sometime in the past year. This is similar to 2015. Since 2011, the percentage of Kentucky adults ages 18 to 64 reporting unstable insurance has dropped by nearly half.

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.

Released: FEBRUARY 2017

2 in 10 Kentucky households cite cost as a barrier to medical care

Since 2014 when most of the provisions of the Affordable Care Act (ACA) were implemented, many more adults have acquired health insurance in Kentucky. However, many Kentucky adults still report cost as a barrier to needed health care.

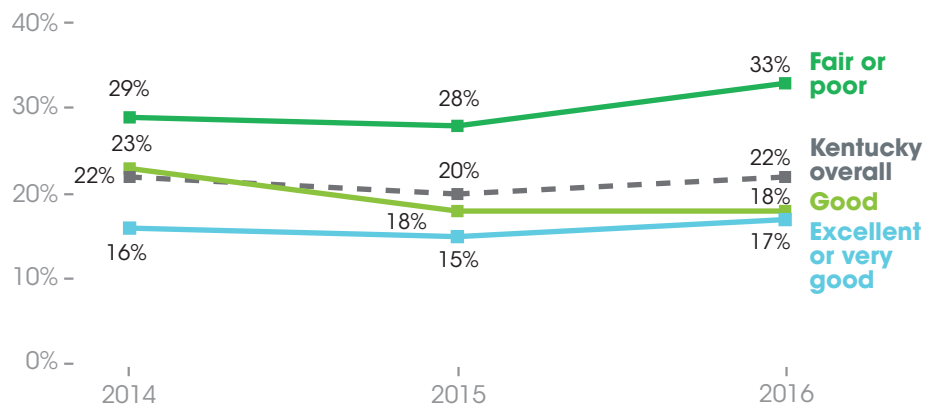
The 2016 **Kentucky Health Issues Poll (KHIP)** asked, "In the past 12 months, was there a time when you or another member of your household needed medical care but did not get it, or delayed getting it, because of the cost?"

Adults in fair or poor health more likely to report delayed care

Overall for 2016, 2 in 10 Kentucky adults (22%) reported that a person in their household delayed or missed getting needed medical care due to the cost, about the same as in 2015 (20%) and 2014 (22%).

More than 3 in 10 adults with fair or poor health (33%) reported delayed or missed care due to cost. That compares with 17% of adults in excellent or very good health.

Percentage of adults reporting that, in the past 12 months, they or someone in their household delayed or did not get needed medical care because of the cost, by self-reported health status*



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

Lower-income and uninsured adults more likely to delay care

Uninsured Kentucky adults and those who earned 200% or less of the federal poverty guidelines (FPG)¹ were more likely to report going without or delaying needed medical care because of the cost. More than 3 in 10 uninsured adults (34%) reported delaying or going without care, compared with 2 in 10 insured

adults (20%). Nearly 3 in 10 adults earning 200% FPG or less (28%) reported delayed care, compared with fewer than 2 in 10 earning more than 200% FPG (17%).

Delaying care did not differ by education, sex or race. However, adults ages 65 and older (10%) were much less likely than adults ages 18 to 64 (24%) to report delaying or forgoing care. Nearly all adults ages 65 and older (97%) had health insurance; the vast majority had Medicare.

¹ In 2015, 200% of the Federal Poverty Guidelines was \$48,500 for a family of four.

Released: MARCH 2017

Fruits, vegetables easy to access, but cost an issue for some Kentuckians

Healthy eating is critical to living a healthy life. In 2013 and 2016, the **Kentucky Health Issues Poll (KHIP)** asked Kentucky adults about their access to and consumption of healthy foods.

Most report easy access to healthy foods

The vast majority of Kentucky adults (80%) agreed that it is easy to buy healthy foods such as whole-grain foods, low-fat options, and fruits and vegetables in their neighborhoods. This was similar to 2013 (81%).

Access to healthy food differed by household income. Nearly 9 in 10 Kentucky adults in households earning more than 200% of the Federal Poverty Guidelines¹ (FPG) (87%) reported easy access. That compares with more than 7 in 10 Kentucky adults with household incomes of 200% FPG or less (74%).

Cost poor for some Kentucky adults

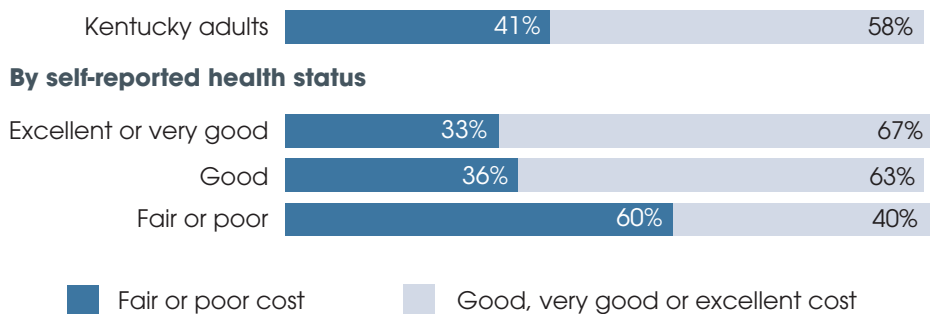
KHIP also asked about the cost of fruits and vegetables.² The

¹ In 2015, 200% of the Federal Poverty Guidelines was \$48,500 for a family of four.

It is easy to purchase healthy foods in my neighborhood such as whole-grain foods, low-fat options, and fruits and vegetables.
(Graph shows only those who strongly agreed or agreed.)



How would you rate the cost of fruits and vegetables? (Percentages may not add to 100% because the response "don't know" is not included.)



perceived cost of fruits and vegetables varied widely by self-reported health status.³ Kentucky adults reporting fair or poor health were more likely to report fair or poor produce costs (60%) compared with adults reporting

² KHIP asked, "And thinking about your primary source for fruits and vegetables ... how would you rate the cost of fruits and vegetables they have available? Would you rate it excellent, very good, good, fair or poor?"

³ KHIP asked, "Would you say that in general your health is ... excellent, very good, good, fair or poor?"

excellent or very good health (33%). This variation in perceived cost was similar to 2013.

Four in 10 do not meet fruit and vegetable recommendations

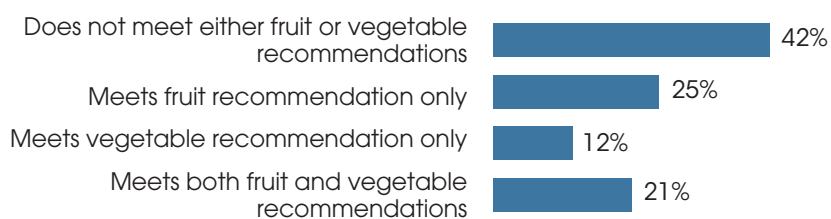
The U.S. Department of Health and Human Services and the U.S. Department of Agriculture offer dietary guidelines for healthy

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eating.⁴ They suggest that half of each plate be made up of fruits and vegetables.

About 4 in 10 adults (42%) did not eat the recommended amount of *either* fruits or vegetables. More than 2 in 10 adults (25%) ate the recommended daily amount of *fruits only* while about 1 in 10 adults (12%) ate the recommended daily amount of *vegetables only*. Two in 10 Kentucky adults (21%) ate the recommended daily amount of *both* fruits and vegetables. This is unchanged from 2013.

Percentage of Kentucky adults who meet dietary recommendations



⁴ U.S. Department of Health and Human Services and the U.S. Department of Agriculture (USDA). Dietary Guidelines for Americans 2010 and 2015. Accessed Jan. 12, 2017, from <https://health.gov/dietaryguidelines/>.

Released: MARCH 2017

Physical activity and neighborhood conditions for exercise in Kentucky

Being physically active is one of the most valuable things a person can do to maintain good health. The U.S. Office of Disease Prevention and Health Promotion states, "All adults should avoid inactivity. Some physical activity is better than none, and adults who participate in any amount of physical activity gain some health benefits."¹ The **Kentucky Health Issues Poll (KHIP)**, sponsored by Interact for Health and the Foundation for a Healthy Kentucky, asked Kentucky adults about neighborhood conditions and physical activity.

8 in 10 adults report being physically active

KHIP asked, "In general, would you say you are very, somewhat, not very or not at all physically active?" Eight in 10 Kentucky adults (79%) said they were very physically active (30%) or somewhat physically active (49%).

Responses varied by self-reported health status.² Nine

¹ Office of Disease Prevention and Health Promotion. (2008). *2008 Physical Activity Guidelines for Americans* (ODPHP Publication No. U0036). Washington DC: U.S. Government Printing Office. Retrieved from <https://health.gov/paguidelines/guidelines/>.

Percentage of adults who say that, in general, they are very or somewhat physically active



in 10 adults with excellent, very good or good health (88%) said they were very or somewhat physically active. This compared with 5 in 10 adults in fair or poor health (54%).

Responses also varied by household income. More than 8 in 10 adults earning more than 200% of the Federal Poverty Guidelines (FPG)³ reported that they were very or somewhat physically active (84%). This compared with less than 8 in 10 adults earning 200% FPG or less (76%).

Most adults report good neighborhood conditions for exercise

KHIP asked about neighborhood conditions for physical activity.

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

³ In 2015, 200% of the Federal Poverty Guidelines was \$48,500 for a family of four.

Respondents were asked "How would you rate your neighborhood as a place to walk, jog or bike?" Three in 4 Kentucky adults (76%) rated their own neighborhood excellent, very good or good. One in 4 adults (24%) rated their neighborhood fair or poor.

KHIP asked, "How would you rate the condition of sidewalks and shoulders in your neighborhood?" Half of Kentucky adults (51%) said sidewalks and shoulders were excellent, very good or good. About 4 in 10 (44%) said they were fair or poor.

KHIP also asked, "How safe is it to walk, jog or bike in your neighborhood?" Nearly 5 in 10 Kentucky adults (46%) said it was very safe, and more than 3 in 10 (35%) said it was somewhat safe. About 2 in 10 adults (19%)

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said their neighborhood was somewhat unsafe or not at all safe for exercise.

Ratings of conditions for exercise vary by region, income

Adults' ratings of their neighborhood as a place to walk, jog or bike varied by region. More than 8 in 10 adults in the Louisville area (84%) rated their neighborhood excellent, very good or good. That compares with about 8 in 10 Lexington area (81%), Western Kentucky (78%) and Northern Kentucky (77%) adults, and 6 in 10 Eastern Kentucky adults (61%).

Responses also varied by income. About 7 in 10 adults earning less than 200% FPG (71%) rated their neighborhood excellent, very good or good as a place to walk, jog or bike. This compares with

Percentage of adults who think that increasing level of physical activity would improve their overall health



nearly 8 in 10 adults earning more than 200% FPG (79%).

Most think increasing physical activity would improve health

KHIP asked, "Do you think increasing your level of physical activity would improve your overall health, make your overall health worse or not make much difference in your overall health?"

Nearly 7 in 10 Kentucky adults

(67%) said that increasing their level of exercise would improve their overall health. More than 2 in 10 (25%) said it would make no difference. Fewer than 1 in 10 (7%) said it could make their health worse.

Adults with more education were more likely to say that increased activity would improve their health. Those with less education were more likely to say it would make no difference.

Ownership and storage of firearms among adults in Kentucky

In 2015, 694 Kentuckians died due to injury by firearms. Kentucky was 13th in the nation with 15.2 firearm deaths per 100,000 people. This is higher than the national rate of 11.1 deaths per 100,000.¹ Firearms that are not properly handled or stored can pose a significant threat to the health of adults and children.

Interact for Health and the Foundation for a Healthy Kentucky asked about the presence and storage of firearms in the home on the latest **Kentucky Health Issues Poll (KHIP)**.

More than half of adults report firearm in home

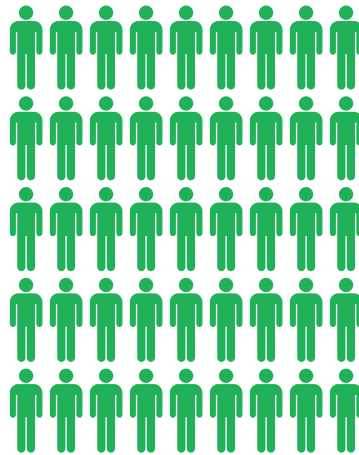
KHIP asked, "Are any firearms kept in or around your home?"² More than half of Kentucky adults (55%) said they had a firearm in or around their home. The last time KHIP asked

¹ Centers for Disease Control and Prevention, National Center for Health Statistics. (2016). *Firearm mortality by state: 2015* [Data File]. Retrieved from <http://bit.ly/2nk0J2z>.

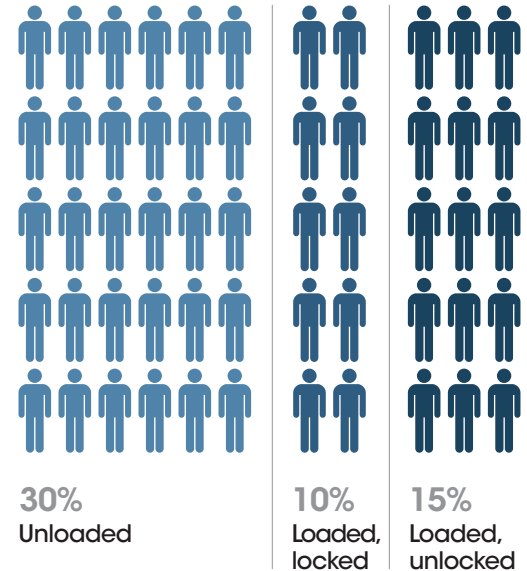
² KHIP said, "In your answers, please include weapons such as pistols, shotguns and rifles; but not BB guns, starter pistols or guns that cannot fire. Include those kept in a garage, outdoor storage area or motor vehicle."

Kentucky adults with ...

No firearm in home **45%**



A firearm in the home **55%**



this question in 2011, 45% of Kentucky adults said yes.

KHIP asked adults who said they had a firearm around their home, "Are any of these firearms now loaded?" One in 4 Kentucky adults (25%) said they had a loaded firearm around their home. KHIP also asked, "Are any of these loaded firearms also unlocked?" Fifteen percent of all adults in Kentucky had a loaded, unlocked firearm in or around their home.

6 in 10 Kentucky households with children have firearms

The American Academy of Pediatrics (AAP) has taken the position that it is best not to have a firearm at all in a home with a child. If there is a firearm in the home, AAP recommends the firearm be unloaded and securely locked in storage away from the

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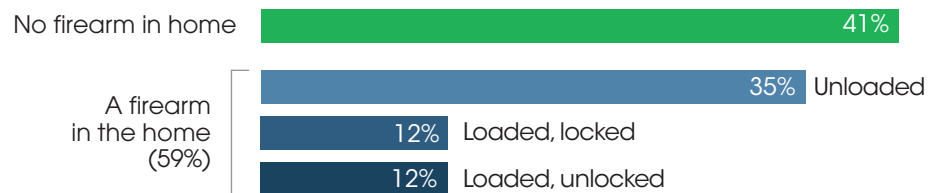
ammunition.³ In 2015, nearly 1,500 children nationwide died due to injury from a firearm.⁴

Among Kentucky adults who live in a home with a child, 6 in 10 (59%) reported having a firearm in or around the home. This is higher than in 2011 when 4 in 10 adults in homes with children (44%) had a firearm. One in 4 of these homes with children (24%) report having a loaded firearm in the home. More than 1 in 10 adults in homes with children (12%) report having a firearm in the home that is both loaded and unlocked.

³ Dowd, M.D. & Sege, R.D. (2012). Firearm-related injuries affecting the pediatric population. *Pediatrics*, 130 (5). Retrieved from <http://bit.ly/1gQYMTQ>.

⁴ Centers for Disease Control and Prevention, National Center for Injury Prevention and Control. (2016). *Fatal Injury Reports 1999-2015, National or Regional*. Retrieved from <http://bit.ly/2mq0Mut>.

Kentucky adults with a child in the home who have ...



Men, higher-income and non-urban adults more likely to report firearm around home

Men (62%) were more likely than women (48%) to report having a firearm around their home. Responses also varied by household income. About 6 in 10 Kentucky adults earning more than 200% of the Federal Poverty Guidelines (FPG)⁵ (62%) and between 138% and 200% FPG (60%) reported a firearm around

their home. This compares with fewer than 5 in 10 adults (47%) in households earning less than 138% FPG.

Fewer than 4 in 10 Kentucky adults in urban counties (37%) reported having a firearm in or around their home. This compares with more than 6 in 10 adults in suburban (63%) and rural (62%) counties.

⁵ In 2015, 138% of Federal Poverty Guidelines was \$33,465 for a family of four, and 200% FPG was \$48,500 for a family of four.

Kentucky adults familiar with needle exchanges more likely to favor them

A November 2016 analysis by the Centers for Disease Control and Prevention found that 54 of Kentucky's 120 counties were vulnerable to an outbreak of infectious diseases such as HIV or Hepatitis C among people who inject drugs.¹ Injection drug users are at increased risk of contracting such diseases.

Needle exchange programs, also known as syringe exchange programs, are an effective way to reduce this risk. A needle exchange program allows people who inject drugs to exchange used syringes for new, sterile syringes. Research has shown that such programs can help reduce the spread of HIV and Hepatitis C² and do not increase the frequency or initiation of drug use.³ Currently 20 areas in Kentucky have syringe exchange programs.⁴

¹ Van Handel, M.M., Rose, C.E., Hallisey, E.J., et al. (2016). County-level vulnerability assessment for rapid dissemination of HIV or HCV infections among persons who inject drugs, United States. *Journal of Acquired Immune Deficiency Syndromes*, 73 (3), 323-331.

² Des Jarlais, D.C., Nugent, A., Solberg, A., Feelemyer, J., Mermin, J., & Holtzman, D. (2015). Syringe service programs for persons who inject drugs in urban, suburban, and rural areas - United States, 2013. *MMWR Morb Mortal Wkly Rep* 64 (48), 1337-1341. Retrieved from <http://bit.ly/2nlK9t3>.

How familiar are you with needle exchange programs?



Do you favor or oppose needle exchange programs?



The **Kentucky Health Issues Poll (KHIP)**, sponsored by Interact for Health and the Foundation for a Healthy Kentucky, asked Kentucky adults about their familiarity with and opinions about needle exchange programs.

More than half familiar with needle exchanges

KHIP asked, "I'd like to ask you about needle exchange programs offering clean needles to IV drug users in exchange for used needles.

³ Institute of Medicine. Preventing HIV infection among injecting drug users in high-risk countries: An assessment of the evidence. (2006). Washington, D.C.: National Academies Press. Retrieved from <http://bit.ly/2ndZGNR>.

⁴ Kentucky Cabinet for Health and Family Services: Department for Public Health. (2017) *HIV Prevention Program*. Retrieved March 13, 2017, from <http://bit.ly/2ouSb5X>.

How familiar are you with needle exchange programs which have been implemented in a number of cities across the Commonwealth?" Nearly 6 in 10 adults (56%) said they were very or somewhat familiar with these programs. About 4 in 10 (44%) said they were not very or not at all familiar with them.

More than 6 in 10 adults ages 46 to 64 (63%) were very or somewhat familiar with needle exchange programs. That compares with about 5 in 10 adults in other age groups. Adults in urban areas (64%) were more likely to be familiar with these programs than adults in suburban (50%) or rural (53%) areas.

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More adults favor than oppose needle exchanges; adults more likely to favor if more familiar

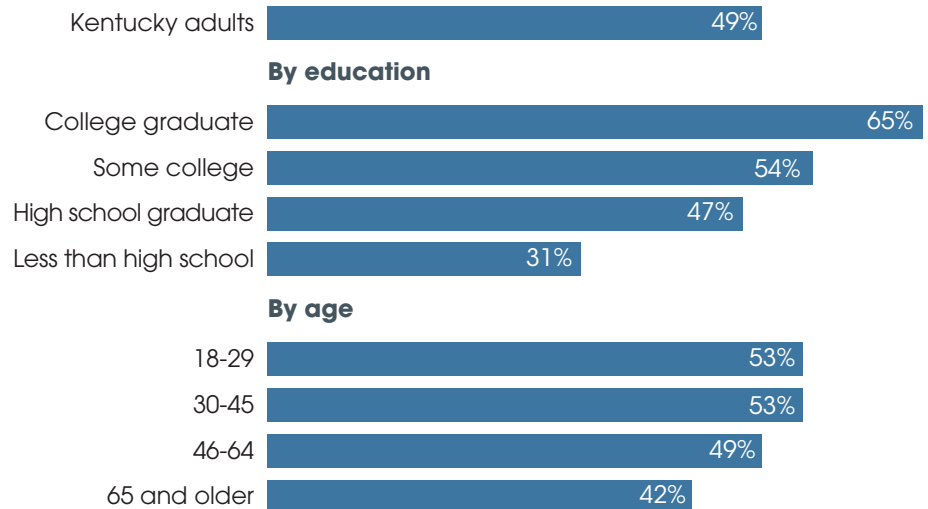
KHIP also asked adults if they favored or opposed needle exchange programs.⁵ Nearly half of Kentucky adults (49%) said they favor such programs. This was higher than the 4 in 10 adults who said they oppose such programs (43%). About 1 in 10 said they neither opposed or favored such programs or were not sure (8%).

Nearly 6 in 10 adults who were **very** or **somewhat familiar** with needle exchange program favored such programs (59%). Fewer than 4 in 10 (37%) were opposed.

Fewer than 4 in 10 adults who were **not very** or **not at all familiar**

⁵ KHIP asked, "Some people favor needle exchange programs because they feel these programs help reduce the spread of AIDS. Others oppose needle exchange programs because they feel these programs send the message that it's okay to use illegal drugs. What about you ... do you favor or oppose needle exchange programs?"

Percentage of Kentucky adults who favor needle exchange programs



with needle exchange programs favored such programs (37%). Five in 10 (50%) were opposed and more than 1 in 10 (13%) were not sure.

Older adults less likely to favor needle exchange; no variation by income

About 5 in 10 adults ages 18 to 29 (53%), 30 to 45 (53%) and 46 to 64

(49%) favored needle exchange programs. Support dropped to 4 in 10 adults older than 64 (42%).

Support did not vary by household income. About half of adults at all income levels favored needle exchange programs.

Support for needle exchange programs increased as education increased. (See graph above.)

Released: APRIL 2017

Most Kentucky adults aware of mental health support services

According to the Centers for Disease Control and Prevention, nearly 1 in 5 Kentucky adults (19%) report ever being told by a health provider that they have a form of depression.¹ In Kentucky, as with the nation, fewer than half (47%) of adults with a mental illness receive mental health treatment or counseling.² The **Kentucky Health Issues Poll (KHIP)**, sponsored by Interact for Health and the Foundation for a Healthy Kentucky, asked Kentucky adults about experiences with depression and access to mental health support services and treatment.

7 in 10 say they know where to find help

Nearly 7 in 10 Kentucky adults reported knowing who to contact for services or treatment for depression (68%). Three in 10 (30%) reported not knowing who to contact. KHIP asked, "Suppose a family member or friend asked you for help finding services or treatment for depression. Would

¹ Centers for Disease Control and Prevention. BRFSS Prevalence & Trends Data. 2015. Retrieved March 1, 2017, from <http://bit.ly/2nb3mAw>.

² Substance Abuse and Mental Health Services Administration. Behavioral Health Barometer: Kentucky, 2015. Retrieved March 1, 2017, from <http://bit.ly/2orNzfh>.

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. 11-Oct. 19, 2016, by the Institute for Policy Research at the University of Cincinnati. A random sample of 1,580 adults from throughout Kentucky was interviewed by telephone. This included 827 landline interviews and 753 cell phone interviews with cell phone users. In 95 of 100 cases, the statewide estimates will be accurate to $\pm 2.5\%$. There are other sources of variation inherent in public opinion studies, such as nonresponse, 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.

Has a family member or friend ever behaved in a way that made you think they had a serious problem with depression? (Graph shows those who said "yes.")



you know who to contact to help them find services or treatment?" About 7 in 10 women (71%) and men (66%) said they knew who to contact. Younger adults ages 18 to 29 (63%) and older adults ages 65 and older (58%) were less likely than adults ages 30 to 64 (74%) to know about services or treatment for depression.

Among Kentucky adults who said they knew who to contact, 4 in 10 would tell a person with depression to seek help from a mental health professional or behavioral health center (40%). About 4 in 10 would recommend seeing a doctor or seeking help from a hospital or local health clinic (37%). Two in 10 adults (22%) would recommend social services help, such as a church, human resource employee assistance programs or helplines.

Many see problems with depression

Half of Kentucky adults (49%) know a friend or family member they perceived to have a serious problem with depression. Women (53%) were more likely than men (45%) to report knowing someone they thought was depressed. Adults ages 65 and older (34%) were less likely than adults ages 18 to 64 (54%) to report knowing someone they perceived to be depressed. Kentucky adults in households earning 200% of the Federal Poverty Guidelines (FPG)³ or less (56%) were more likely than those with household incomes more than 200% FPG (45%) to know someone with depression.

³ In 2015, 200% of the Federal Poverty Guidelines was \$48,500 for a family of four.

Released: MAY 2017

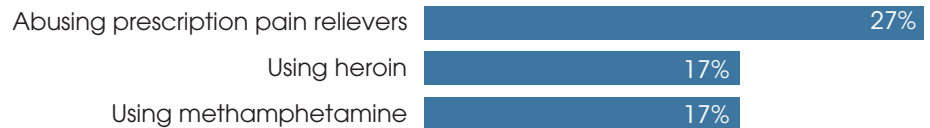
Heroin, methamphetamine use and prescription drug abuse in Kentucky

In 2015, 1,219 people died from drug overdoses in Kentucky. This is nearly five times as many as in 2000 when 246 people died from drug overdoses. Most of these deaths were from opioid use: either the misuse of prescription pain medications or the use of heroin.¹

The 2016 **Kentucky Health Issues Poll (KHIP)**, sponsored by Interact for Health and the Foundation for a Healthy Kentucky, asked Kentucky adults about the impact of drug use on their family and friends. KHIP asked about the abuse of prescription pain medication, heroin use and methamphetamine use.

¹ Akers, D., Rock, P., Slavova, S., & Bunn, T. (2016). *Drug Overdose Deaths in Kentucky, 2000-2015*. Retrieved from <http://bit.ly/2pLsOhV> on March 20, 2017.

"Have any of your family members or friends experienced problems as a result of ..." (Graph shows those who said "yes.")



3 in 10 know someone with problems due to abuse of pain drugs

KHIP 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?" Nearly 3 in 10 Kentucky adults (27%) said yes. This percentage has varied since KHIP first asked the question in 2011. (See graph on next page.)

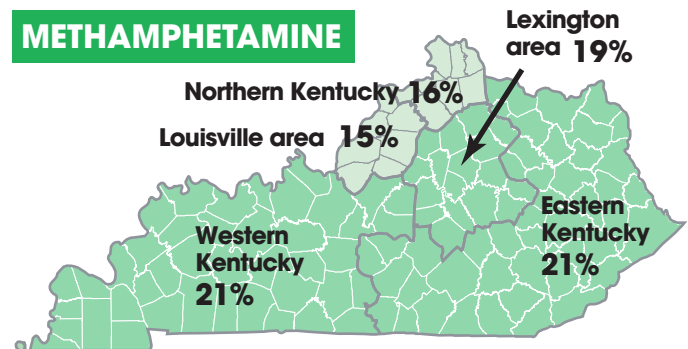
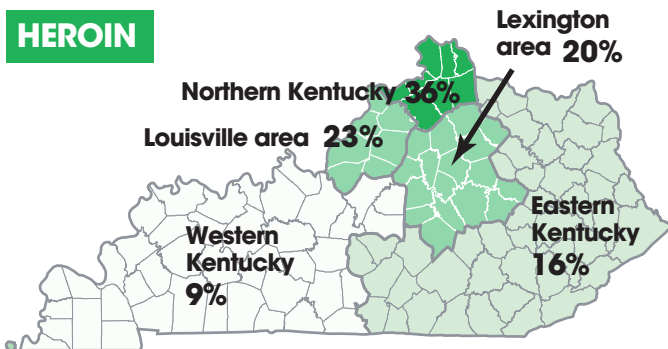
Adults in rural counties (30%) were more likely to say yes than adults in urban (22%) or suburban counties (26%).

Nearly 2 in 10 know someone with problems due to heroin

KHIP also asked, "Have any of your family members or friends experienced problems as a result of using heroin?" Nearly 2 in 10 adults (17%) said yes.

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



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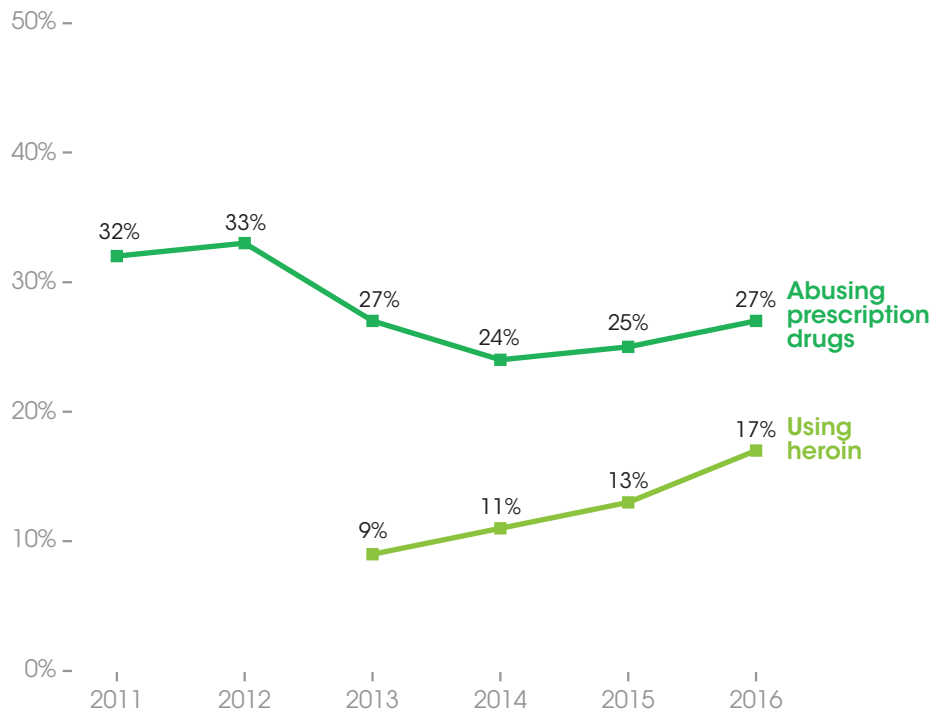
This percentage has steadily increased since KHIP started asking this question in 2013. Responses were about the same in urban (16%), suburban (18%) and rural (17%) counties.

Nearly 4 in 10 adults in Northern Kentucky (36%) said they had a family member or friend with problems due to heroin. (See graph on first page.) This is higher than the percentage of adults who said yes in Louisville (23%), Lexington (20%) and Eastern Kentucky (16%). Fewer than 1 in 10 adults in Western Kentucky (9%) said they had a family member or friend with problems due to heroin.

Nearly 2 in 10 know someone with problems due to methamphetamine

KHIP asked, "Have any of your family members or friends experienced problems as a result of using methamphetamine?" Nearly 2 in 10 Kentucky adults (17%) said yes. This is a slight increase from 2013 (15%). Adults in rural counties (20%) were more likely to say yes than adults in urban (15%) or suburban (10%) counties. There was little variation by region. (See graph on first page.)

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



Percentage of adults by region reporting that they had family members or friends who had experienced problems as a result of abusing ...

