

**West Side
community health
assessment**

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West Side community health assessment

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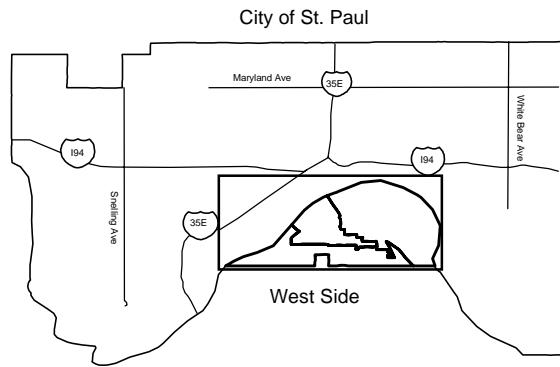
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Health Survey Areas

West Side of St. Paul



Key findings

This community health assessment reports findings from a survey of 252 adults (age 18 years and older) residing in randomly-selected households on selected low-income blocks in the West Side neighborhood of St. Paul, Minnesota. The survey, with a 66 percent response rate, was conducted in-person and by telephone in English, Spanish, and Hmong between October 1999 and March 2000.

The sample is 62 percent female, with an average age of 42 years. Fifty-six percent of respondents are white, 29 percent Chicano/Hispanic/Latino, and 15 percent of other races. Half of respondents are married, and 46 percent have children in their household under age 18. The average household size is 3.1 people. Thirty-nine percent of households with members age 18 to 65 years have two or more people working full-time, and 16 percent of respondents have less than a high-school diploma. The average respondent has lived on the West Side for about 15 years.

Compared to the 1990 Census and to a 1993 West Side survey, this sample is younger, more racially/ethnically diverse, slightly more educated, and has lived for a shorter time on the West Side.

Health care access and use

Eighty-six percent of respondents said they and others in their household currently have health insurance, but 28 percent said that at some point in the past year, household members were without insurance. (For comparison, in 1998 surveys, 92% of Minnesotan and 87% of U.S. respondents said they had health care coverage.) *Respondents under age 30 (77%) and Chicano/Latino/Hispanics (75%) were less likely than others both to have health insurance currently and to have had it continuously over the past year.* Over a third (38%) said family members were unable to see a doctor when necessary during the past year, most commonly because of scheduling problems or cost. Half of those unable to go to the doctor were able to overcome the obstacles, usually by rescheduling appointments or getting off work, and 13 percent of them said affordable health insurance would help them obtain necessary health care.

Respondents mentioned 48 different clinics, health centers, and doctors when asked where they usually go for health care, led by HealthPartners (20 percent of respondents), and West Side Health Center (10%). One-third said they had used West Side Health Center at least once. *Chicano/Latino/Hispanics were much more likely than others to have ever visited WSHC (70% vs. 17%), and more likely to use it as their primary health care provider (26% vs. 3%).*

Fourteen percent of respondents said they use interpreters when visiting health care centers, and 62 percent of them said interpreter assistance works well "most of the time," down from the 95 percent satisfaction rate found in 1993.

Seventy-seven percent of female respondents said they have an annual Pap smear, 45 percent an annual mammogram, and 59 percent said they do monthly self-breast exams. Thirty-five percent said they've never had a mammogram, and 10 percent said either that their last Pap smear was more than two years ago or they'd never had one. (For comparison, in 1998 surveys, 51% of Minnesotan adult women and 41% of U.S. adult women said they had never had a mammogram.) *White/non-Hispanics were less likely than Chicano/Latino/Hispanics and other races/ethnicities to report having an annual Pap smear (69% of white/non-Hispanics compared to 86% of others).*

Health status

Eighty-six percent of respondents said their health is good, very good, or excellent. (In 1998 surveys, 90% of Minnesotan and 85% of U.S. respondents rated their health as good, very good, or excellent.) They report their family members' health is somewhat better: 92 percent in good, very good, or excellent health. Unlike in 1993, there were no significant age or racial/ethnic differences in reported general health.

Eleven percent said their physical health was not good on 14 or more days in the last month; 6 percent said their mental health was not good on 14 or more days of the last 30. (Compared to 13% of respondents said their physical health was not good on 8 or more days, compared to 11% of both Minnesotan and U.S. respondents in 1998 surveys. And 9% said their mental health was not good on 8 or more days, compared to 11% of both Minnesotan and U.S. respondents.) The average respondent in this survey had three days of poor physical health, and two days of poor mental health in the last month. *High school graduates reported, on average, twice as many days of poor mental health as non-high school grads.*

Chronic health problems

One-fifth of respondents said they or other adults in their household have been told they have (or have had) one or more of the following chronic health problems: arthritis, migraines, high cholesterol, chronic back pain, asthma, or depression. *Respondents who rated their general health as good, very good, or excellent were less likely than those in fair or poor health to suffer from arthritis, asthma, chronic back pain, depression, diabetes, heart attack before age 50, memory loss, and migraine headaches.*

Thirteen percent of respondents said they or another member of their household have been told by a health care provider that they have diabetes. (For comparison, 6% of both Minnesotan and U.S. respondents to a 1998 survey said they *themselves* had been told by a doctor that they have diabetes.) Of those, 78 percent said they restrict their diet, 50 percent take pills, and 44 percent take insulin to control the disease. Fifty-three percent of respondents said they have blood relatives with diabetes. *Chicano/Latino/Hispanics were more likely than others to have been told they have diabetes (20% compared to 10%).*

Seventy-one percent of respondents said they had had their blood pressure taken within the past six months, and another 19 percent within the past year. (This compares to 58% of Minnesotan and 72% of U.S. respondents to a 1998 survey saying they'd had their blood pressure taken with the past 6 months, and 24% of Minnesotan and 15% of U.S. respondents within the past year.) Eighteen percent said they've been told they have high blood pressure. (Compared to 21% of Minnesotan and 23% of U.S. respondents in 1997.)

Half of respondents said they consider themselves or other adults in their household to be overweight, and 13 percent of respondents from households with children said that children in their household are overweight. Forty-two percent said they'd tried to lose weight within the past three to six months, most commonly by reducing food intake or through exercise. (Twenty-seven percent of Minnesotan and 36% of U.S. respondents said in 1998 surveys that they were currently trying to lose weight.)

Ten percent of respondents said their households sometimes do not have enough to eat; one percent said this is often true. Twenty-five percent of households with children under 18 said they participate in WIC.

Health behaviors

The percent of respondents saying they have fruits and vegetables daily varied from 53 percent for green salad to 82 percent for vegetables other than salad. Twenty percent of respondents said that in a typical week they never get at least 30 minutes of moderate physical exercise. Nineteen percent said they do so every day of the week. The average respondent exercises this much 3.2 days a week.

Twenty-seven percent of respondents said they smoke cigarettes, and 11 percent said another adult in their household smokes. (For comparison, in 1998 surveys, 18% of Minnesotan and 23% of U.S. respondents said they currently smoked cigarettes.)

Chicano/Latino/Hispanic respondents were less likely than others to say they smoke cigarettes (14% compared to 33%), but more likely to report that others in their household smoke (21% compared to 7%). Seventy-one percent of smokers said they would like to quit (down from 83% in 1993). Four percent of respondents said someone in their household drinks three or more drinks every day, and 5 percent said drinking or drug use has caused problems for their family or household in the past year.

Three-quarters of respondents said that contraceptive use is an acceptable form of birth control or family planning in their family, and most of them (92%) said they know where to go to meet their contraceptive needs. Two-thirds of adults in households whose oldest child is 14 to 17 years speak to them about birth control, as do 43 percent of parents whose eldest is 11 to 13 years old. Under half of respondents (44%) said there is a neighborhood source of information or help for problems with HIV/AIDS, and half didn't know if one exists; similar responses were found concerning neighborhood help and information about sexually-transmitted diseases. Eighty-three percent of parents whose eldest child is 14 to 17 years said they speak to them about HIV, AIDS, and other sexually-transmitted diseases.

Fourteen percent of respondents said they have firearms at home, and nearly one-third of them (31%) said they don't store them in a locked place or with a trigger lock. *White/non-Hispanics were more likely than others to say they have firearms at home (20% compared to 6%).*

Knowledge of health resources

Thirty-one percent of respondents said there is a place in their neighborhood that provides help for problems with alcohol or drug use, 27 percent for alcohol problems alone, 18 percent for tobacco use problems, 12 percent of opium use, and 16 percent for problems with other drugs. Neighborhood House was mentioned as a possible source of help by 14 percent of respondents, CLUES by 12 percent, and Alcoholics Anonymous by 12 percent.

One-third of those surveyed said there is a place in the neighborhood for help with violence or personal safety issues; the police were most commonly mentioned source of such help, followed by Neighborhood House, CLUES, Casa Esperanza, and church.

Asked where they and other household members got their health information, 60 percent of respondents said doctors or nurses. HMO newsletters were cited by 24 percent, books and the library by 19 percent, newspapers and magazines by 18 percent, and health

clinics by 17 percent. (Open-ended responses grouped into categories.) *Older respondents were more likely than younger ones to say they depend on doctors and nurses for health information (85% of respondents 60 years and over compared to 56% of those under 60), and less likely to depend on magazines and newspapers, (22% of those 30 years and older compared to 7% of those under 30).*

Respondents were also read a list of health topics and asked if they would like to learn more about them. Responses ranged from a high of 45 percent wanting to know more about exercise down to 20 percent wanting to learn about quitting smoking. Of those saying they'd attend a program to learn more about various health topics, over half said they'd attend such a program at a school, library, church, West Side Health Center, Neighborhood House, or CLUES.

Introduction and background

In August 1999, West Side Community Health Services drew together key health and human service providers from St. Paul's West Side neighborhood to discuss and develop a community plan to help West Side residents achieve better health. A survey to assess health care access and use, chronic health problems, health behaviors, and knowledge of health resources of West Side residents was identified as a fundamental part of this plan.

The current survey is a follow-up to a similar health assessment of West Side residents conducted in 1993 and provides several points of comparison to that earlier study. Its results are intended to provide useful, accurate information for health care policy and program planning.

Study sample and method

From late October 1999 to early March 2000, a randomly-selected sample of 252 adults age 18 years and older residing within the West Side neighborhood of St. Paul completed interviews, either in-person (79%) or by telephone (21%). According to respondents, nearly all households (98%) have telephones at home (not counting cell phones), and 43 percent have cell phones.

The sample was derived from West Side addresses in three specified health planning districts. Interview quotas were set for each district proportionate to total population based on 1990 U.S. Census figures: 23 percent of the 250 target interviews (58) from District 1, 36 percent (90) from District 2, and 41 percent (102) from District 3.

To ensure sampling of low-income households, each district was mapped block by block, and blocks were designated eligible for selection if, according to 1998-99 Saint Paul Public School data, the proportion of children living on that block approved for free or reduced-price school lunch equaled or exceeded 30 percent. These eligible blocks were then randomly selected for interviewing, and households within each chosen block were enumerated, and then randomly selected until the quota for the district was met. Within each household, respondents were self-selected. The District 1 and 3 quotas were both exceeded by one interview, resulting in a total sample of 252. The margin of error for a sample of this size is plus or minus 6 percent.

Surveys were conducted in the respondent's language of choice, including English, Spanish, and Hmong. If respondents preferred, interviews were conducted by telephone after the initial in-person contact.

Contacts were made at different times of day and on different days of the week, including Saturday mornings and afternoons, and Sunday afternoons and evenings.

The overall response rate for this survey is 65.9 percent; 36 (9%) of the selected households refused to participate, and 36 (9%) could not be reached despite repeated attempts.

Instrument development

In consultation with the West Side Health Coalition, Wilder Research Center developed a structured questionnaire based largely on the National Health and Nutrition Examination Survey III, and the Minnesota Department of Health 1993 Behavioral Risk Factor Questionnaire. In addition, a number of items were included regarding demographics, physical activity, nutrition, use of food programs, and barriers to health care access. The instrument was available in English, Hmong, and Spanish.

Limitations of survey

Beyond the margin of error inherent in any sampling technique, there are several limitations to the current survey that should be considered when using these data to draw conclusions about West Side residents as a whole. While the response rate is adequate (and somewhat higher than in 1993), men were under-represented due to the self-selection of respondents within households. In addition, many of the questions in this survey touch on very personal topics, and respondents may not have provided wholly candid responses.

Comparative data

Where appropriate and available, comparative data are provided for Minnesota and U.S. populations. These data are drawn from the 1997 and 1998 Behavioral Risk Factor Surveillance System surveys administered and supported by the Division of Adult and Community Health, National Center for Chronic Disease Prevention and Health Promotion, Centers for Disease Control.

Respondent and household characteristics

The sample was comprised of more women than men (62% and 38%, respectively), and respondents ranged in age from 18 to 89 years, with an average age of 42 years. Asked their race, 56 percent of respondents said they are white (fewer than the 74% in the 1993 study), 29 percent self-identified as Chicano/Latino/Hispanic, 8 percent as African American, 4 percent as Asian, and 4 percent as another race. Asked in a separate question if they are of Chicano, Latino, or Hispanic origin, 31 percent of respondents said they are. Asked to specify, 22 percent said they are Mexican, 5 percent Mexican-American, 3 percent Chicano-Hispanic, 2 percent Puerto Rican, and others as Dominican, Cuban, or from Spain.

Fifty percent of respondents said they are married, 46 percent are single (including divorced), and 3 percent widowed. The average household size is 3.1 people, with a range from 1 to 11. In half the homes, respondents said a spouse or other domestic partner is present, 46 percent said they have a child under 18 years at home, 10 percent said other relatives are present, 2 percent live with their parents or in-laws, and 14 percent said non-relatives live with them.

Asked their highest grade completed in school, 16 percent said less than a high-school diploma, 35 percent high school graduation or GED, 31 percent some college or vocational school, and 17 are college graduates. Thirty-nine percent of respondents with members age 18 to 65 years said their households have two or more people working full-time, 10 percent have one full-time and one or more part-time, 39 percent have one full-time and no part-time, 6 percent have only part-time workers, and 8 percent have no employed household members. Eight percent of households have seasonally-employed household members.

Thirty-seven percent of respondents said they have lived on the West Side for fewer than five years, 39 percent have lived there from 5 to 20 years, and the remaining 24 percent have lived on the West Side for 21 years or longer. The average respondent has lived on the West Side for 14.7 years, down from 19 years in the 1993 survey.

The fact that this sample has a lower percentage of whites (56%) than the 1993 survey (74%) and the 1990 Census (69%), a higher proportion of Chicano/Latino/Hispanics (29% compared to 18% and 25%, respectively), more blacks and fewer Asian, as well as a lower median age (39 years compared to 44 years in the 1993 survey) may indicate a demographic trend on the West Side toward a younger, more Hispanic, and less Asian population than earlier in the decade.

1. RESPONDENT AND HOUSEHOLD CHARACTERISTICS

	N=252
Gender	
Female	62%
Male	38%
Age	
18-24 years	8%
25-34 years	29%
35-44 years	26%
45-64 years	28%
65 years and older	10%
Mean	42 years
Range	18-89 years
Race/Ethnicity	
White	56%
Chicano/Latino/Hispanic	29%
African American	8%
Asian	4%
Hmong	2%
Cambodian	1%
Filipino	1%
Laotian	<1%
Middle Eastern	2%
Other	2%
Of Chicano, Latino, or Hispanic Origin?	31%
Mexican	22%
Mexican-American	5%
Chicano-Hispanic	3%
Puerto Rican	2%
Cuban	1%
Dominican Republic	<1%
El Salvadoran	<1%
Spain	<1%
Marital Status	
Married	50%
Single (includes divorced)	46%
Widowed	3%

1. RESPONDENT AND HOUSEHOLD CHARACTERISTICS (CONTINUED)

	N=252
Education	
Never attended	1%
K-8	6%
Some high school	10%
High school graduate/GED	35%
Some college or vocational	31%
Completed 4-year college/BA	17%
Other	<1%
Employment (in households with members 18-65 years)	
N=238	
2 or more full-time	39%
1 full-time only	39%
Part-time with 1 full-time	10%
Part-time only	6%
No one working	8%
One or more household member is seasonally employed	8%
Telephones	
Have telephone at home (not cell)	98%
Has cell phone	43%
Household Size	
Average	3.1 persons
Range	1-11 persons
Relationship of Other Household Members	
Spouse or other partner present	50%
Children under 18 years present	46%
Parent/in-law present	2%
Other relatives present	10%
Non-relatives present	14%
Years of Residence on West Side	
N=252	
0-1 year	17%
2-4 years	20%
5-10 years	21%
11-20 years	18%
21 years or longer	24%
Range	0-89 years
Mean	14.7 years

Health care access and use

Health insurance and recent health care use

Eighty-six percent of respondents said that they and members of their household currently have health insurance, but 28 percent said that at some time in the past year household members were not insured. (For comparison, 90% of Minnesota adults aged 18 to 64 years, and 84% of U.S. adults aged 18 to 64 years report having health insurance in 1998 [National Center for Chronic Disease Prevention and Health Promotion, Centers for Disease Control.]

Older respondents were more likely to have health insurance (96% of those 50 years and older, compared to 85% of 30 to 49 year olds, and 77% of under 30 year olds). Chicano/Latino/Hispanics were less likely to have health insurance than others (75% compared to 91% of white/non-Hispanics, and 92% of other races/ethnicities).

Younger people were also more likely than older to say household members had not had health insurance at some time during the past year (42% of under 30 year olds, 27% of 30-59 year olds, and 9% of 60+ year olds). Chicano/Latino/Hispanics were twice as likely than others to report lack of insurance during the past year (44% compared to 21%).

Asked the date of their most recent visit with a doctor or other health professional, nearly 90 percent said within the past year, 6 percent within the past one to two years, 4 percent between two and five years ago, and 3 percent said five or more years in the past. Those 50 years and older were more likely than other respondents to have seen a doctor within the last year (93% compared to 84%). Seventeen percent of respondents said a household member had been hospitalized overnight or longer within the past year, and the average number of reported hospitalizations for these respondents or other members of their households over the past year was 0.4 times (compared to 1.8 times reported in 1993). Chicano/Latino/Hispanics and white/non-Hispanics were less likely than respondents of other races and ethnicities to report having been in the hospital one or more times in the last year: 16 percent, 14 percent, and 33 percent, respectively.

2. HEALTH INSURANCE AND RECENT HEALTH CARE USE

Health Insurance	N=252
Members of household currently have health insurance	86%
Members of household did not have health insurance at some time during the past 12 months.	28%
Last Visit With a Doctor or Health Professional	
Within past year	87%
Within past 1-2 years	6%
Within past 2-5 years	4%
5 or more years ago	3%
Never	0%
Hospitalization in Past Year	
Number of times in past year	0.4
Household with member(s) hospitalized overnight or longer	17%

Barriers to health care access

Overall, 38 percent of respondents reported that there were times in the past year when they or other household members were unable to see a doctor when they necessary. Scheduling problems were most common impediment (19% of households); cost was a barrier for 13 percent; lack of trust of doctors was the reason for 8 percent; language barriers were mentioned by 6 percent; transportation problems, child-care difficulties, lack of respectful health care providers, lack of insurance, and other barriers were mentioned by 20 percent of respondents. Responses were similar with regard to barriers for children needing to see the doctor.

Slightly over half (52%) of respondents saying they'd faced barriers said their households were able to overcome those obstacles, most commonly by rescheduling appointments, getting off of work, bringing someone to interpret, or getting insurance coverage through a job or the state. Thirteen percent of those facing barriers said that affordable health insurance would help them get the health care they need, 3 percent said a different doctor would help, 2 percent said transportation, another 2 percent said insurance coverage for non-traditional health care; 6 percent suggested other types of additional assistance, ranging from interpreters to loans to a free or low-cost clinic.

3. BARRIERS TO HEALTH CARE ACCESS

	Adult N=252	Children N=118
Households Where a Family Member Was Unable to See Doctor When Needed in Past Year Due to:		
Scheduling problems	19%	17%
Cost	13%	14%
Not trusting doctors	8%	3%
Language barrier	6%	6%
Transportation	5%	8%
No one to take children	5%	3%
Can't find culturally respectful healthcare provider	2%	1%
Other (grouped into categories):		
Lack of insurance		3%
Want a different doctor		2%
Doctor won't see respondent		1%
Additional reasons		2%
	N=252	
Unable For Any Reason, Child or Adult		38%
		N=96
Households Were Able to Overcome Problems or Obstacles		52%
How obstacles were overcome: (open-ended responses, grouped into categories.)		
		N=50
Rescheduled appointment		30%
Got off work		10%
Brought someone to interpret		8%
Got job with insurance		8%
Got Medicare/MinnCare		6%
Other		16%
Additional Forms of Assistance That Could Help Obtain Necessary Health Care: (Open-ended responses, grouped into categories.)		
		N=96
Affordable insurance		13%
Different doctor		3%
Transportation		2%
Insurance to cover non-traditional treatments		2%
Other		6%

Health care providers and special assistance

Many different clinics, health centers, and doctors were mentioned when respondents were asked where they usually go for health care. HealthPartners was cited by 20 percent, La Clinica/West Side Health Center by 10 percent, Aspen Medical by 8 percent, Regions Hospital by 7 percent, and unspecified clinics by 6 percent. A total of 43 other clinics were mentioned, each by 5 percent or less of the respondents. (In 1993, 13% of respondents listed private doctor, 12% Group Health, 8% Ramsey Clinic, 7% Gorman Clinic, and 6% Aspen Medical, 6% United Health Services, and 5% Westview Clinic. Twenty-five additional clinics were cited.)

4. USUAL HEALTH CARE PROVIDERS AMONG WEST SIDE RESIDENTS

	N=252
HealthPartners	20%
La Clinica/West Side Health Center	10%
Aspen	8%
Regions	7%
clinic, unspecified	6%
Gorman Clinic	5%
Westview Clinic	5%
United Family Health clinic	5%
Allina	2%
Bethesda	2%
Children's Hospital	2%
East Metro	2%
Fairview	2%
Group Health (on Riverside)	2%
Downtown Saint Paul	1%
Family member is a doctor	1%
Highland Family Physicians Clinic	1%
Health Center	1%
Model Cities	1%
Oak Point Clinic, Eagan	1%
Park Nicollet	1%
Parkway Family Physicians	1%
River Valley Clinic, Woodbury	1%

4. USUAL HEALTH CARE PROVIDERS AMONG WEST SIDE RESIDENTS (CONTINUED)

	N=252
Saint Paul East Side	1%
Women's Health Clinic	1%
Alternative medicine	<1%
Boynton Health Center (U of M)	<1%
Como Park Clinic	<1%
Central Medical	<1%
Doctors Professional building	<1%
East Metro MN Health Clinic	<1%
Face to Face	<1%
Gallery building	<1%
HealthEast	<1%
Health Start Clinic	<1%
Metro East	<1%
Pediatricians for Health	<1%
Pace Pediatrics, Shoreview	<1%
People Center (Mpls)	<1%
Professional Building	<1%
Ramsey Family Physicians	<1%
Rice Street Clinic	<1%
Saint Paul Interns	<1%
South Saint Paul	<1%
Saint Paul Clinic	<1%
Urgent Care	<1%
West Saint Paul Dr. Richardson	<1%
Payne Avenue Medical Assoc.	<1%

Use of the West Side Health Center

One-third of respondents said they had used West Side Health Center at least once. Chicano/Latino/Hispanic respondents were much more likely than white/non-Hispanic respondents to have ever visited WSHC (70% and 15%, respectively), and more likely than those of other race/ethnicities (22%).

Ten percent of respondents said they use WSHC as their primary health care provider. Again, Chicano/Latino/Hispanics were more likely to say they do so (26%) than

white/non-Hispanics (2%) or others (8%). Younger people were more likely to use the Center primarily (21% of under 30 year old respondents compared to 7% of those 30 years and older). Respondents who have lived 10 or fewer years on the West Side were more likely than longer-term residents to use the Center as their primary provider (16% and 3%, respectively).

Just over a fifth (22%) of respondents said that the West Side Health Center serves anyone who seeks help there (down from 34 percent in 1993). Twenty percent said it serves West Side residents, 19 percent said it serves Hispanics and Latinos, 7 percent said it serves non-English-speaking people, and 6 percent said it serves the uninsured.

5. USE OF THE WEST SIDE HEALTH CENTER

Use of West Side Health Center	N=252
Ever used West Side Health Center	33%
Use WSHC as primary care center	10%
Whom Residents Think the WSHC Serves (Open-ended responses, grouped into categories.)	
Anyone who seeks help there	22%
West Side residents	20%
Hispanics/Latinos	19%
Low-income residents	10%
Non-English-speaking (those needing interpreters)	7%
Uninsured	6%
Hmong	2%
Insured	2%
Those without anywhere else to go	1%
Families	<1%
Asian	<1%
English-speaking	<1%
Asians	<1%
Don't know	34%

Use of health care interpreters

Fourteen percent of respondents said their households use interpreter assistance when visiting a health care center. Thirty-five percent of Chicano/Latino/Hispanic households said they do (up from 18% in 1993), 1 percent of White/non-Hispanic households do, and 17 percent of other racial/ethnic households do.

Sixty-two percent of respondents using interpreters said that interpreter assistance works out okay “most of the time,” 35 percent said “sometimes,” and 3 percent said it never works out okay. These responses indicate a much lower level of satisfaction than in 1993, when 95 percent of households using interpreters said it usually works out. Asked whether they would prefer a bilingual health care professional to an interpreter, 74 percent of those using interpreters said they would prefer a bilingual health care professional, 12 percent said they prefer an interpreter, and 15 percent said either is fine.

6. USE OF HEALTH CARE INTERPRETERS

	N=252
Households Who Use Assistance of Interpreters	14%
Chicano, Latino, Hispanic households	35%
White/non-Hispanic	1%
Other	17%
The Assistance of Interpreters Works Out Okay...	N=34
Most of the time	62%
Sometimes	35%
Never	3%
Would Prefer...	N=34
Bilingual health care professional	74%
Interpreter	12%
Either	15%

Non-western health care

Thirty percent of respondents said their families use natural or herbal medicine (up from 13% in 1993), 4 percent said they use traditional healers, including shamans and Curanderos. Nearly one-third (31%) said they use chiropractic, massage therapy, or acupuncture.

Chicano/Latino/Hispanics and white/non-Hispanics were less likely than those of other races/ethnicities to use traditional healers (4%, 1%, and 17%, respectively). High school graduates were also less likely to use traditional healers than non-high school graduates (2% compared to 14%). Chicano/Latino/Hispanics were less likely than non-Hispanics to use chiropractic, massage or acupuncture (22% compared to 35%).

7. NON-WESTERN HEALTH CARE

	N=252
Use natural or herbal medicine	30%
Use shaman, Curandero, or traditional healer	4%
Use chiropractic, massage therapy, or acupuncture	31%

Women's health

Forty-five percent of female respondents said they have a mammogram once a year, 3 percent said their most recent mammogram was within the past year, 8 percent said one to two years ago, and 5 percent said two to five years ago. Thirty-five percent said they have never had a mammogram. (For comparison, in 1998, 35% of Minnesota women aged 50 years or older, and 25% of U.S. women aged 50 years or older reported not having had a mammogram in the last two years [National Center for Chronic Disease Prevention and Health Promotion, Centers for Disease Control.]) Older respondents were more likely than younger to say they have annual mammograms (78% of those 50 years or older, compared to 37% of 30 to 49 year olds, and 21% of under 30 year olds). Eighty-seven percent of those under 30 years said they never had a mammogram, compared to 56 percent of 30 to 49 year olds, and 30 percent of respondents 50 years and older.

Fifty-nine percent of female respondents said they do a monthly self-breast exam. There are no significant differences among age groups, unlike in 1993, when women age 30 to 49 were more likely than those younger or older to do monthly exams.

Slightly over three-quarters (77%) of female respondents said they have a Pap smear once a year, 4 percent said they had one within the past 12 months, 8 percent one to two years ago, 4 percent two to three years ago, and 5 percent three or more years ago. One percent said they've never had a Pap smear. White/non-Hispanics were less likely than Chicano/Latino/Hispanics and other race/ethnicities to report having an annual Pap smear (69% of white/non-Hispanics, compared to 85% of Chicano/Latino/Hispanics, and 89% of other racial/ethnic groups).

8. WOMEN'S HEALTH**N=156**

Has Mammogram...	
Once a year	45%
Within past year	3%
Within past 2 years	8%
Within past 3 years	4%
Within past 5 years	1%
Five or more years ago	4%
Never	35%
Don't know	1%
Does Monthly Self-Breast Exam	59%
Has Pap Smear...	
Once a year	77%
Within past year	4%
Within past 2 years	8%
Within past 3 years	4%
Within past 5 years	1%
Five years or more ago	4%
Never	1%

Immunizations

Most respondents with children said their children have received immunizations for measles/mumps/rubella (97%), diphtheria/tetanus/pertussis (96%), polio (98%), and whooping cough (95%), similar to 1993 responses. For Hepatitis B, 86 percent of respondents with children said their children have been immunized against Hepatitis B, and 10 percent did not know. In 1993, fewer respondents (73%) said their children had received Hepatitis B shots. Five respondents who said their children had not received certain immunizations explained that their child had had all immunizations appropriate to their child's age (3 respondents), that life was too busy (1), or that they didn't have insurance to pay for the shots (1).

Just over a third of respondents (35%) said they had received a flu shot in the past year, and 16 percent said they had received a shot to prevent pneumonia. Respondents 50 years and older were more likely than younger respondents to have received a pneumonia

shot (38% and 8%, respectively), and younger people were also less likely to have received a flu shot in the past year (18% of those under 30 years, 26% of respondents 30 to 49 years, and 63% of respondents 50 years and older).

9. IMMUNIZATIONS

	N=114		
Immunization of Children	Yes	No	Don't know
Measles/mumps/rubella -MMR	97%	3%	0%
Diphtheria/tetanus/pertussis - DTP	96%	1%	3%
Polio	98%	2%	0%
Hepatitis B	86%	4%	10%
Whooping cough	95%	2%	4%
Immunization of Adults	N=252		
Received flu shot in the past 12 months	35%		
Received shot to prevent pneumonia	16%		

Health status

General health status

Eighty-six percent of respondents said they are in good, very good or excellent health; 11 percent said their health is fair, and 2 percent said they are in poor health. The health status of their other family members was reported as slightly better: 92 percent in good, very good or excellent health. Unlike in 1993, older respondents did not report significantly worse health than younger (85% of those age 50 and over said they're in good, very good or excellent health, compared to 93% of those under 30 years, and 84% of 30 to 49 year olds). There also were no significant ethnic/racial differences in reported general health, unlike in 1993.

When asked how many days in the last 30 their physical health (including sickness and injury) was *not* good, about 57 percent said "0" days and 31 percent said from one to seven. Two percent reported their physical health was not good on 8 to 13 days, and 11 percent said it was not good on 14 or more days. The mean number of poor physical health days for this sample is three.

Asked how many days in the last 30 their mental health (including stress, depression, and problems with emotions) was *not* good, 66 percent said "0" days, 25 percent said from one to seven, 3 percent said from 8 to 13 days, and 6 percent said 14 days or more out of the last 30. The mean number of poor mental health days is two. High school graduates reported, on average, twice as many days of poor mental health as non-high school graduates.

10. GENERAL HEALTH STATUS

Respondent General Health	N=252
Excellent	28%
Very good	27%
Good	31%
Fair	11%
Poor	2%
General Health of Other Family Members	N=204
Excellent	26%
Very good	34%
Good	32%
Fair	6%
Poor	2%
Perception of Physical Health	N=252
How many days during the past 30 days was your physical health not good?	
0	57%
1-7	31%
8-13	2%
14 or above	11%
Average	3.4 days
Perception of Mental Health	N=252
How many days during the past 30 days was your mental health not good?	
0	66%
1-7	25%
8-13	3%
14 or above	6%
Average	2.4 days

Chronic health problems

Chronic health problems

One-fifth of respondents said they or other adults in their household have been told by a health care provider that they have (or have had) at least one of the following chronic health problems: arthritis, migraine headaches, high cholesterol, chronic back pain, asthma, or depression. Other common problems include severe allergies (14%), memory loss or forgetfulness (10%), cancers other than skin (6%) or heart attack before the age of 50 (3%). Sixteen percent of respondents report they have blood relatives who have had a heart attack before the age of 50, and 5 percent said they don't know.

Respondents of age 50 years or over were more likely than younger respondents to report having arthritis, high cholesterol, chronic back pain, diabetes, and memory loss.

Chicano/Latino/Hispanic respondents were less likely than white/non-Hispanics and other race/ethnicities to report asthma, chronic back pain, and severe allergies. Members of other races/ethnicities were most likely to report these chronic health problems.

Women were twice as likely as men to report arthritis and migraine headaches.

Respondents who rated their general health as good, very good, or excellent were less likely than those in fair or poor health to say they'd been told by a health professional that they had arthritis (19% and 46%), asthma (16% and 39%), chronic back pain (17% and 44%), depression (17% and 36%), diabetes (10% and 30%), heart attack under age 50 (1% and 12%), memory loss (6% and 30%), and migraine headaches (19% and 42%).

11. CHRONIC HEALTH PROBLEMS

Commonly Reported Chronic Health Problems	N=252	
Arthritis	22%	
Migraine headaches	22%	
High cholesterol	21%	
Chronic back pain	21%	
Asthma	19%	
Depression	19%	
Severe allergies	14%	
Memory loss or forgetfulness	10%	
Other cancer	6%	
Heart attack before the age of 50	3%	
Lung disease such as emphysema	2%	
Skin cancer	2%	
Stroke	2%	
Hepatitis B	1%	
TB	1%	
	Yes	Don't Know
Blood relatives who have had a heart attack before the age of 50	16%	5%

12. DEMOGRAPHIC DIFFERENCES IN CHRONIC HEALTH PROBLEMS

N=252

Age	Under 30 years	30-49 years	50+ years
Arthritis	10%	9%	53%
High cholesterol	12%	11%	43%
Chronic back pain	10%	21%	30%
Diabetes	5%	9%	25%
Memory loss	5%	5%	20%

Race/Ethnicity	Chicano/ Latino/ Hispanic	White/Non- Hispanic	Other
Asthma	10%	20%	36%
Chronic back pain	10%	24%	31%
Diabetes	20%	9%	11%
Severe allergies	8%	15%	26%

Gender	Female	Male
Arthritis	28%	14%
Migraine headaches	27%	14%

General Health Status	Good, Very Good, or Excellent	Poor or Fair
Arthritis	19%	46%
Asthma	16%	39%
Chronic back pain	17%	44%
Depression	17%	36%
Diabetes	10%	30%
Heart attack under age 50	1%	12%
Memory loss	6%	30%
Migraine headaches	19%	42%

Diabetes and high blood pressure

Thirteen percent of respondents said a member of their household has been told by a health professional that they have diabetes. Of those diabetics, 78 percent said they restrict their diet, 50 percent take diabetes pills, and 44 percent take insulin in order to control diabetes. Slightly over half (53%) of respondents say they have blood relatives who have had diabetes. Again, respondents 50 years and over were more likely than younger respondents to have said they have diabetes (25% compared to 7%). Non-high school graduates were more likely to say they have diabetes than those with high school degrees (28% compared to 10%). Chicano/Latino/Hispanics were more likely to have said they have diabetes than those not of Chicano/Latino/Hispanic origin (20% compared to 10%). High school graduates were more likely to report controlling their diet in order to control diabetes (90% compared to 58% of non-graduates). Women were more likely than men to report controlling their diet to control diabetes (87% and 56%).

Seventy-one percent of respondents said they had had their blood pressure taken within the past 6 months, 19 percent within the past year, 4 percent in the past two years, and 5 percent two or more years ago. Eighteen percent said they have been told they have high blood pressure, and 26 percent said that at least one member of their household has been told they have high blood pressure.

Seventy-six percent of respondents told by health professionals that they had high blood pressure also said they were told to take prescribed medications to treat the condition; 94 percent said they followed that advice. Fifty-nine percent were told to reduce salt/sodium intake, and 78 percent complied. About half were told to increase physical activity (52%), or control/lose weight (48%), and about three-quarters followed the advice. A fifth were told to decrease alcohol intake, and 78 percent said they complied. Fifteen percent were told to quit smoking, and 14 percent of those respondents followed the advice.

13. DIABETES AND HIGH BLOOD PRESSURE

Diabetes		N=252	
A member of the household has diabetes		13%	
To control the diabetes, residents:		N=32	
Control diet		78%	
Take diabetes pills		50%	
Take insulin		44%	
		N=252	
Blood relatives who have had diabetes		53%	
High Blood Pressure		N=252	
Last had blood pressure taken:			
Within past 6 months		71%	
Within past year		19%	
Within past 2 years		4%	
Two years or more ago		5%	
Never		<1%	
Residents with high blood pressure		18%	
		N=46	
Those With High Blood Pressure Have Been Told To:		Told To	Followed Advice
Take prescribed medication		76%	94%
Reduce salt/sodium intake		59%	78%
Increase physical activity		52%	71%
Control or lose weight		48%	77%
Decrease alcohol intake		20%	78%
Quit smoking		15%	14%
		N=252	
Households with at least one member with high blood pressure			26%

Overweight and weight loss

Half of respondents said they consider themselves or other adults in their households to be overweight, and 13 percent of respondents from households with children said that children in their household are overweight. (For comparison, according to the latest guidelines for overweight, 60% of Minnesota adults, and 55% of U.S. adults were overweight by self-reported height and weight in 1998 [National Center for Chronic Disease Prevention and Health Promotion, Centers for Disease Control.])

Forty-two percent of respondents said that they or other adults in their households had tried to lose weight within the past three to six months. Seventy-nine percent of those trying to lose weight did so by reducing food intake, 74 percent through exercise, 67 percent by reducing calories, 10 percent with diet pills, 3 percent at weight-loss clinics, and 10 percent using other techniques.

Female respondents were more likely than male to report that they or someone in their household is overweight (56% and 41%, respectively), and also more likely to report having tried to lose weight (47% and 32%). Women were also more likely than men to report controlling their diet to control diabetes (87% and 56%).

14. OVERWEIGHT AND WEIGHT LOSS

	N=252
Households with overweight adults	50%
	N=119
Households with overweight children	13%
	N=252
Households with adults who have tried to lose weight in past 3-6 months	42%
Weight Loss Methods Include:	N=105
Reducing food intake	79%
Exercise	74%
Reducing calories	67%
Weight loss clinics	3%
Diet pills	10%
Other	10%

Health behaviors and knowledge of health resources

Nutrition and physical activity

Eighty-nine percent of respondents said their households have enough to eat, 10 percent said sometimes they do not have enough, and 1 percent said they often do not have enough food. Older respondents were more likely than younger to say they have enough to eat (96% of those 50 years and older compared to 86%). White/non-Hispanics were most likely to say they have enough to eat (94%), compared to Chicano/Latino/Hispanics (88%), and other race/ethnicities (72%).

Eighty-two percent of respondents said they have cooked or fresh vegetables other than salad on a typical day, 75 percent said this about fruit, and 74 percent about fruit or vegetable juice, and 53 percent said they have green salad on a typical day. The average number of reported daily servings varied between 1.1 and 1.8 for these foods.

Twenty-five percent of respondents from households with children under 18 years said they participate in WIC, 3 percent of respondents from households with members age 60 and above said they participate in Meals-on-Wheels, but none participate in Senior Dining. Two percent of all respondents said their households participate in the Fare Share program.

Twenty percent of respondents said that during an average week they never get at least 30 minutes of moderate or vigorous physical exercise in a day. Twenty-five percent said they get this much exercise one or two days a week, another 19 percent on three or four days, 16 percent on five or six days, and 19 percent on every day of the week. On average, respondents said they get this much exercise 3.2 days a week.

Asked about physical activity during their free time, about two-thirds of respondents say they go for a walk or exercise once or more a week, 48 percent garden or do yard work at least weekly, and 14 percent play sports once or more a week. Fifty-three percent say they never play sports, 31 percent never garden or do yard work, 18 percent never exercise, and 14 percent say they never go for a walk during their free time.

15. NUTRITION AND PHYSICAL ACTIVITY

Nutrition	N=252
Households have enough to eat	89%
Households sometimes do not have enough to eat	10%
Households often do not have enough to eat	1%

On a Typical Day, Residents Have:	N=252	Average Number of Servings
Cooked or fresh vegetables (other than salad)	82%	1.7
Fresh, frozen, canned or dried fruit	75%	1.8
Fruit or vegetable juices	74%	1.8
Green salad	53%	1.1

Families with Children Participate in:	N=116
WIC (Women, Infants & Children)	25%

Families with Seniors (over 60 years) Participate in:	N=40
Senior Dining	0%
Meals on Wheels	3%

Families Participate in:	N=252
Fare Share	2%

Physical Activity	N=252
In an average week, number of days respondent gets at least 30 minutes of moderate or vigorous physical activity	
0	20%
1	10%
2	15%
3	15%
4	4%
5	12%
6	4%
7	19%
Average	3.2 days

During Free Time, Respondents:	Once or More a Week	Once or More a Month	Once or More a Year	Never
Go for a walk	66%	18%	2%	14%
Exercise	64%	16%	2%	18%
Garden, do yard work	48%	16%	4%	31%
Play sports	14%	17%	16%	53%

Substance use

Thirty-nine percent of respondents said that at least one adult in their household smokes cigarettes, and 27 percent said they themselves smoke. Chicano/Latino/Hispanic respondents were less likely than others to say they smoke cigarettes (14% compared to 33%), but more likely to report that other adult(s) in their household smoke (21% compared to 7%). High school graduates were more likely than non-graduates to report smoking cigarettes (30% vs. 14%) but less likely to report that others in their household smoke (8% vs. 26%).

Ninety-four percent of respondents who smoke said they smoke daily, and nearly half (48%) have quit smoking for one day or longer. Seventy-one percent said they would like to quit smoking cigarettes (down from 83% in 1993).

Four percent of respondents said someone in their household drinks three or more drinks every day, and 5 percent said drinking or drug use has caused problems for their family or household in the past year.

Nearly one-third of respondents (31%) said there is a place in their neighborhood that provides help for problems with alcohol or drug use, and 57 percent said they didn't know if there was. Asked specifically about help with problems with alcohol use, 27 percent said yes, and 60 percent said they didn't know. Eighteen percent said they could find neighborhood help for problems with tobacco use while 68 percent didn't know. Twelve percent said local help was available for problems with opium use but nearly three-quarters (72%) didn't know. Sixteen percent said help was available in their neighborhood for problems with other drugs, but 69 percent didn't know.

Of those who said there was a place in their neighborhood where family members could receive help for serious problems with alcohol or drug use, 14 percent mentioned Neighborhood House, 12 percent said CLUES, 12 percent said Alcoholics Anonymous meetings, 6 percent said Regions Hospital, and 5 percent or less mentioned unspecified hospitals, clinics, or churches, West Side Health Center, HealthPartners, Hispanos en Minnesota, or other agencies.

16. SUBSTANCE USE

Tobacco, Alcohol, and Other Drug Use		N=252
Household with an adult who smokes cigarettes		39%
Respondent smokes cigarettes		27%
		N=69
Smokers who smoke daily		94%
Smokers who have quit smoking for one day or longer		48%
Smokers who would like to quit		71%
		N=252
Households with an adult who drinks 3 or more drinks every day		4%
During the past year, drinking or drug use has caused problems for the family or household		5%
		N=252
Is there a place in the neighborhood where family members could receive help for problems with:	Yes	Don't know
Alcohol or drug use	31%	57%
Alcohol use	27%	60%
Opium	12%	72%
Other drugs	16%	69%
Tobacco use	18%	68%
A place in the neighborhood to receive help with alcohol or drug use: (multiple response)		N=77
Neighborhood House		14%
CLUES		12%
Alcoholics Anonymous meetings		12%
Regions Hospital		6%
Hospital, unspecified		5%
Clinic, unspecified		5%
Church		4%
La Clinica/WSHC		4%
HealthPartners		3%
Hispanos en Minnesota		3%
Buena Esperanza		1%
Catholic Charities		1%
Chicano/Latina Club		1%
Counselor		1%
Fairview		1%
Family Health Service		1%
Health Board at Neighborhood Center		1%
River of Life		1%
Wilder		1%
House		1%

Violence or personal safety

One-third of respondents said there is a place in their neighborhood for help with serious problems related to violence or personal safety; 54 percent did not know if such help was available. Those responding that there is such a place were asked to specify the place: 24 percent of them mentioned the police, 18 percent said Neighborhood House, and 5 percent or fewer said CLUES, Casa Esperanza, church, Women's Health Clinic, and numerous other agencies and individuals.

17. VIOLENCE OR PERSONAL SAFETY

	N=252	
	Yes	Don't know
Is There a Place in the Neighborhood Where Family Members Could Receive Help for Problems with Violence or Personal Safety?	33%	54%
Where? (multiple response, grouped into categories)	N=83	
Police	24%	
Neighborhood House	18%	
CLUES	5%	
Casa Esperanza	4%	
Church	4%	
Women's Health Clinic	2%	
Community center	2%	
Hospital	2%	
Doctor	2%	
Lewis House	1%	
Chicano/Latino Club	1%	
West Side Safe Neighborhood Coalition	1%	
Battered women's shelters	1%	
Crisis center	1%	
Somewhere in Westside	1%	
Boys and Girls Club	1%	
Dorothy Day	1%	
La Clinica	1%	
Wilder Foundation	1%	
1st Call for Help	1%	
Social Services	1%	
Group Health	1%	
Case manager	1%	
Counselor	1%	
House	1%	
Friends	1%	

Family planning, HIV/AIDS, and sexually-transmitted diseases

Three-quarters of respondents said that contraceptive use is an acceptable form of birth control or family planning in their family. White/non-Hispanic respondents were more likely than others to say this (84% compared to 66% of Chicano/Latino/Hispanics, and 69% of other race/ethnicities). High school graduates were more likely than non-high school graduates to say contraceptives are acceptable (81% compared to 54%). Most (92%) of those who said it is acceptable said they know where to go to meet their contraceptive needs. Thirteen percent of respondents whose eldest child is from 8 to 10 years said they speak to their children about birth control and contraceptives; 43 percent whose eldest child is from 11 to 13 years do so, and 66 percent of those whose eldest child is from 14 to 17 said they do so (compared to 88% in 1993).

Forty-four percent of respondents said there is a place in their neighborhood where family members can receive information or help for problems with HIV/AIDS; 52 percent did not know if there is. Forty-five percent felt this way about help with sexually-transmitted diseases, and 50 percent didn't know. Forty-four percent of respondents whose eldest child is from 8 to 10 years said they speak to their children about HIV/AIDS or other STDs (compared to 63% in 1993); 67 percent whose eldest child is from 11 to 13 years do so, and 83 percent of those whose eldest child is from 14 to 17 said they do so.

18. FAMILY PLANNING, HIV/AIDS, AND SEXUALLY-TRANSMITTED DISEASES

	N=252		
In the family, contraceptive use is an acceptable form of birth control or family planning.	75%		
	N=189		
Knows where to go to meet contraceptive needs.	92%		
	Age of Oldest Child		
	8-10	11-13	14-17
Adults of the family speak to the children about birth control and contraceptives.	13%	43%	66%
	N=252		
There is a place in the neighborhood where family members could received information or help for problems with...	Yes	Don't know	
HIV/AIDS	44%	52%	
Sexually-transmitted diseases or illnesses	45%	50%	
	Age of Oldest Child		
	8-10	11-13	14-17
Adults speak to the children about HIV and AIDS or other sexually-transmitted diseases.	44%	67%	83%

Firearms

Fourteen percent of residents said they have firearms at home, and of those, 69 percent said their firearms are stored in a locked place or with a trigger lock. White/non-Hispanic respondents were more likely than others to say they have firearms at home (20% of white/non-Hispanics compared to 7% of Chicano/Latino/Hispanics, and 6% of other race/ethnicities).

19. FIREARMS

	N=252
Has firearms in home (including handguns, pistols, rifles, and automatic and semi-automatic weapons).	14%
	N=35
Firearms are all stored in a locked place or stored with a trigger lock.	69%

Health information and health promotion programs

Asked to mention where they and other household members get health information, 60 percent of respondents said from doctors or nurses, 24 percent from HMO newsletters, 19 percent from books and at the library, 18 percent from newspapers or magazines, 17 percent from their health clinic, 13 percent from the internet, 12 percent from friends, and 12 percent from family, 11 percent from television, and another 11 percent from brochures or fliers, 10 percent from employers, and 6 percent or less from a variety of other sources including pharmacists, nurse lines, radio, schools and elsewhere. Less than 1 percent said they get information from traditional healers. Respondents 60 years or older were more likely than those younger than 60 years of age to say they depend on doctors and nurses for health information (85% and 56%, respectively). Respondents 30 years and older were more likely than those under 30 to get health information from newspapers and magazines (22% and 7%).

Respondents were also asked if they would like to learn more about specific topics. Forty-five percent said they would like to learn more about exercise, 43 percent about nutrition, and another 43 percent about relaxation. Thirty-eight percent said they want to learn more about communicating with children and teens, 29 percent about care-giving support groups, and 20 percent about quitting smoking. Eleven percent of respondents listed other topics they'd like to learn more about, ranging from stress management and drug education to aromatherapy.

Those who said they would attend a program about these various topics of interest were then asked if they would go to that program at a number of possible sites. Eighty-seven percent said they'd go to a school, and 86 percent to a library. Eighty-three percent said they'd attend a program at a church, 79 percent at the West Side Health Center, and 74 percent at Neighborhood House. Fifty-six percent said they'd attend such programs at CLUES. Respondents also suggested community centers, gymnasiums, hospitals and clinics, work and the YMCA as other places they would attend such programs.

20. HEALTH INFORMATION AND HEALTH PROMOTION PROGRAMS

Source of Health Information (multiple responses, grouped into categories)	N=252
Doctor or nurse	60%
HMO newsletters	24%
Library/books	19%
Newspapers or magazines	18%
Clinic/Health Center	17%
The web/internet	13%
Friends	12%
Relative	12%
Television	11%
Brochure, flier	11%
Employers/Work	10%
Pharmacist	6%
Nurse line	6%
Radio	4%
Schools	4%
No one	3%
county	3%
Chiropractor	2%
research	2%
WIC	2%
Phone book	1%
Magazines	1%
University	1%
Hospital	1%
Self (health professional)	1%
Traditional healer	<1%

20. HEALTH INFORMATION AND HEALTH PROMOTION PROGRAMS (CONTINUED)

Interest in Community Health Promotion Programs	
(multiple responses, grouped into categories)	
N=252	
Residents would like to learn more about:	
Exercise	45%
Nutrition	43%
Relaxation	43%
Communicating with children and teens	38%
Quitting smoking	20%
Care-giving support groups	29%
Other	11%
Would go to such programs at:	
N=163	
A school	87%
Library	86%
A church	83%
West Side Health Center	79%
Neighborhood House	74%
CLUES	56%

Additional concerns and needs about family health

Asked if there were any other concerns about their own or their family's health, 4 percent of respondents mentioned single-parenting issues, 3 percent said affordable health care, and 2 percent each cited depression, dieting, nutrition, exercise, asthma, and lack of insurance. Many other issues were mentioned by just one or two people.

Respondents were also asked if there was anything else that they or their family needs to improve their overall health. Eight percent said exercise, 5 percent said better nutrition, 2 percent each said they need health insurance, to lose weight, to stop smoking, and help dealing with stress. Other issues ranging from having trouble sleeping to needing assistance with keeping children active were each mentioned by one or two people.

21. ADDITIONAL CONCERNS AND NEEDS ABOUT FAMILY HEALTH

Anything Else That Concerns You About Your Health or Your Family's Health? (open-ended responses, grouped into categories)	N=252
Single parenting	4%
Affordable health care	3%
Depression	2%
Dieting/weight	2%
Healthy eating/nutrition	2%
Exercise	2%
Asthma	2%
Lack of insurance	2%
Diabetes	1%
Spouse ill	1%
Hepatitis	1%
Cholesterol	1%
Family history of early death	1%
Anything Else That You or Your Family Needs to Improve Your Overall Health? (open-ended responses, grouped into categories)	
Exercise	8%
Nutrition	5%
Need health insurance	2%
Lose weight	2%
Smoking less/quitting	2%
Stress	2%
Cost of prescriptions	1%
Medical treatment	1%
Sleep	1%
Difficult to find provider in area to accept insurance plan	1%
Difficult to get in to see the doctor	1%