### HEALTH RISK BEHAVIORS WITHIN THE STATE OF MICHIGAN





### 2020 BEHAVIORAL RISK FACTOR SURVEY 34th Annual Report





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# 2020 Behavioral Risk Factor Survey

# Health Risk Behaviors within the State of Michigan

Michigan.gov/Brfs

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### Printed December 2021



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Tian Y and McKane P. 2021. Health Risk Behaviors within the State of Michigan: 2020 Behavioral Risk Factor Survey. 34th Annual Report. Lansing, MI: Michigan Department of Health and Human Services, Lifecourse Epidemiology and Genomics Division.

This publication was supported in part through Cooperative Agreement DP15-1513 and DP20-2007 from the Centers for Disease Control and Prevention. Its contents are solely the responsibility of the authors and do not necessarily represent the official views of the Centers for Disease Control and Prevention.

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## **BRFSS** Methods

The Michigan Behavioral Risk Factor Survey (MiBRFS) is an annual, statewide telephone survey of Michigan adults aged 18 years and older that is conducted through a collaborative effort between the Population Health Surveillance Branch (PHSB) of the Centers for Disease Control and Prevention (CDC), the Michigan State University Institute for Public Policy and Social Research (IPPSR), and the Michigan Department of Health and Human Services (MDHHS). Michigan Behavioral Risk Factor Surveillance System (MiBRFSS) data contributes to the CDC Behavioral Risk Factor Surveillance System (BRFSS) that is conducted within every state, the District of Columbia, and several U.S. territories.

In 2020, the MiBRFS collected data from both landline and cell phone respondents. The sample of landline telephone numbers was selected using a list-assisted, random-digit-dialed methodology with a disproportionate stratification based on phone bank density, and whether or not the phone numbers were directory listed. The sample of cell phone numbers was randomly selected from dedicated cellular telephone banks sorted on the basis of area code and exchange.

A weighting methodology known as iterative proportional fitting or raking was used in 2020 to allow for the incorporation of cell phone data and to improve the accuracy of prevalence estimates based on MiBRFS data. Estimates based on this weighting methodology were weighted to adjust for the probabilities of selection and a raking adjustment factor that adjusted for the distribution of the Michigan adult population by telephone source (landline or cell phone), detailed race/ethnicity, education level, marital status, age by gender, gender by race/ethnicity, age by race/ethnicity, and renter/owner status.

Due to the BRFSS methodology changes that were implemented in 2011, the 2020 MiBRFS estimates provided within this report should only be compared to estimates from 2011-2020 and not to estimates from years prior to 2011.

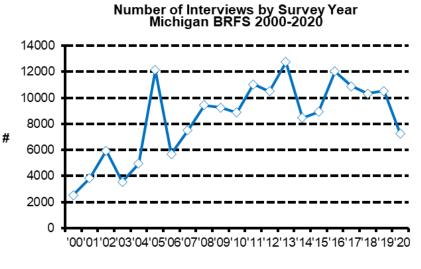
Prevalence estimates and asymmetric 95% confidence intervals (95% CIs) were calculated using SAS-Callable SUDAAN (version 11.0.1), a statistical computing program that was designed for analyzing data from multistage sample surveys.<sup>1</sup> If the 95% CIs for two estimates from different subpopulations or survey years did not overlap, they were considered to be statistically different. Unless otherwise specified, respondents who answered that they did not know or refused to answer were not included in the calculation of estimates. For comparison purposes, the median estimates from all 50 states and the District of Columbia were used as national estimates.

In addition to this report, the MiBRFSS releases several additional publications each year. These publications provide statewide health estimates for Michigan adults as well as estimates among demographic and geographic subpopulations. MiBRFSS Surveillance Briefs are also published on a quarterly basis and highlight new topical data from the MiBRFSS, including data from MiBRFSS state-added questions. All of these publications can be found on the MiBRFSS website (Michigan.gov/Brfs).

#### Sample Results for the 2020 MiBRFS

The total sample size for the 2020 MiBRFS was 7,269 (landline = 2,205; cell phone = 5,064). The response rate for the landline portion of the 2020 MiBRFS was 50.5%, while the response rate for the cell phone portion of the survey was 46.7%. The overall weighted response rate (landline and cell phones combined) for the 2020 MiBRFS was 48.3%. The overall weighted U.S. median response rate for 2020 was 47.9%.<sup>2</sup>

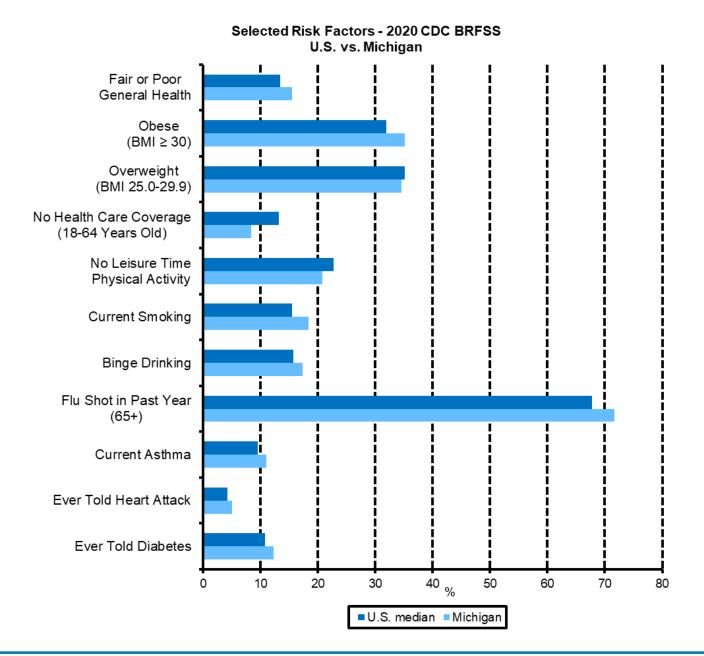
Over the past several years, MDHHS has been able to maintain an annual MiBRFS sample size of at least 7,000 completed interviews. A larger annual sample size increases the utility of the survey by providing more precise estimates, allowing for an increased number of topics to be covered each year, and enables the calculation of estimates for more demographic and geographic subpopulations.



# Summary

This report presents estimates from the 2020 MiBRFS, a statewide landline and cell phone survey of Michigan residents aged 18 years and older. It is the only source of state-specific, population-based estimates of the prevalence of various health behaviors, medical conditions, and preventive health care practices among Michigan adults. The survey findings are used by public health agencies, academic institutions, nonprofit organizations, and others to develop programs that promote the health of Michigan citizens.

All of the results from the 2020 MiBRFS presented within this report have been weighted as described in the methods section and can be interpreted as prevalence estimates among the Michigan adult population. Due to the BRFSS methodology changes that took place in 2011, these estimates should only be compared to MiBRFS estimates from 2011-2020 and not to MiBRFS estimates from years prior to 2011.



## Summary, continued

### **Public Health Implications of Findings**

A number of themes emerge from the findings of the 2020 MiBRFS that have implications for public health.

#### ✗ Michigan continues to make strides in increasing access to health care coverage. ▮

In 2020, an estimated 8.4% (95% CI: 7.3-9.6) of Michigan adults aged 18-64 years reported not having any form of health care coverage. This represents a significant decrease of 8.2 percentage points since 2012 (16.6%). From 2012 to 2020, the prevalence of no health care coverage decreased among males (2012: 18.9% vs. 2020: 10.5%) and females (2012: 14.2% vs. 2020: 6.3%), as well as white, non-Hispanic (2012: 15.1% vs. 2020: 7.4%) and Black, non-Hispanic adults (2012: 24.3% vs. 2020: 9.7%). The Healthy Michigan Plan, which was implemented on April 1, 2014, makes health care benefits available to individuals at a low cost. As the Healthy Michigan Plan continues, we hope to observe further decreases in the number of Michigan adults aged 18-64 years who report not having any form of health care coverage.

### 💥 Multiple chronic conditions continue to be a problem among Michigan adults.

In 2020, an estimated 10.0% of Michigan adults have ever been told by a doctor that they had some form of cardiovascular disease (CVD). These include heart attack (5.1%), angina or coronary heart disease (5.0%), and stroke (3.5%). Black, non-Hispanic adults were significantly more likely to have ever been told they had a coronary heart disease compared to white, non-Hispanic adults (5.5% and 3.0%, respectively). All three CVD measures increased in prevalence as household income decreased, and all three CVD measures were statistically more likely to be present among adults with disabilities. An estimated 12.4% of Michigan adults have ever been told that they had cancer of any type. Among adults with disabilities, 19.7% also had ever been told they had cancer, significantly greater than those with no disabilities (9.8%).

### 🔀 Racial disparities in weight status among Michigan adults has decreased.

In 2020, an estimated 35.2% of Michigan adults were classified as being obese (BMI  $\ge$  30.0). In 2014, the disparity in obesity had diminished with the prevalence of obesity among Black, non-Hispanic adults (33.6%) being similar to that of white, non-Hispanic adults (30.2%). The racial disparity had re-emerged in 2015 with 40.2% of Black, non-Hispanic adults reporting obesity compared to only 29.8% of white, non-Hispanic adults. In 2020, there is a significant difference in prevalence of obesity between Black, non-Hispanic (42.7%) and white, non-Hispanic adults (34.2%). In addition to targeting Michigan's high burden populations, the Michigan Nutrition, Physical Activity and Obesity Program continues to develop initiatives that focus on improving nutrition and increasing physical activity among the Michigan population.

### Smoking and secondhand smoke exposure have stabilized, but more progress is needed.

In 2020, an estimated 18.4% of Michigan adults reported that they currently smoke cigarettes on a regular basis. Unfortunately, this means that one in every five Michigan adults currently smoke cigarettes. Even with the passage of the Michigan Smoke-Free Air Law on May 1, 2010, secondhand smoke exposure continues to be a problem in Michigan with an estimated 18.4% of adults reporting that they were exposed to secondhand smoke in their home or in a car within the past seven days. When focusing only on non-smokers, the prevalence of secondhand smoke exposure during the past seven days decreases to 9.9 (95% CI: 8.3-11.8). With a sustained emphasis on smoking cessation and smoke-free regulations, the MDHHS Tobacco Program anticipates that the prevalence of smoking and secondhand smoke exposure will start to decrease again within the coming years.

### ₭ E-cigarettes is an emerging issue within the state's young adult population.

In 2020, an estimated 6.4% of Michigan adults reported that they used e-cigarettes. E-cigarette usage was significantly higher than the state average among 18-24 year olds with 21.1% reporting usage (95% CI: 16.5-26.5). Among current smokers, the prevalence of e-cigarette use was 10.4% (95% CI: 7.5-14.1) compared to 4.2% (95% CI: 3.2-5.4) among never smokers.

## Summary, continued

### Future of the Michigan Behavioral Risk Factor Survey

The target sample size for the 2021 MiBRFS is 7,500 total completed interviews. Of these 7,500 interviews, 2,250 will be completed with landline respondents, while the remaining 5,250 will be completed with cell phone respondents. The 2021 questionnaire will include approximately 100 state-added questions on numerous topics, including adverse childhood experience, binge drinking, cognitive decline, cancer survivorship, caregiving, food security, hepatitis C, home/self-measured blood pressure, lung cancer screening, other tobacco questions, prescription drug use, radon awareness, and so on. The full 2021 MiBRFS questionnaire is available on the MiBRFSS website (Michigan.gov/Brfs).

The BRFSS continues to adapt to challenges and expand its utility. The representativeness and validity of MiBRFS estimates has been improved. For example, due to the drastic increase in the utilization of cell phone communication, the BRFSS now collects over half of the data from cell phone respondents. Furthermore, the CDC has implemented a new raking weighting methodology so that BRFSS estimates are more representative than ever before. Michigan has also expanded the utility of the MiBRFS through the following projects:

- The maintenance of a larger MiBRFS sample size will allow for more precise estimates among racial/ethnic populations, especially when multiple years of data are combined.
- Standalone BRFS-like oversample surveys of minority subpopulations are conducted on an annual basis as funding is available. The results of these minority oversample surveys are available on the MiBRFSS website.
- Since 2005, questions have been included that randomly select one child in each household and obtain demographic characteristics of that child. This information allows us to ask health-related questions about this child and then to calculate estimates for childhood conditions, such as asthma.
- An Asthma Call-Back survey that follows up on children and adults who were identified as having asthma during the MiBRFS interview has been conducted since 2005, allowing for collection of more detailed information on asthma management, clinical care, and impact of the disease on people's lives. It is anticipated that this methodology could be useful for other subpopulations in the future.
- MiBRFSS estimates are used as progress indicators for federal grants focusing on the prevention and control of diabetes, heart disease, obesity and their associated risk factors (CDC 1422/1305).
- The MiBRFSS is a main source of data for a number of the chronic disease and health promotion indicators that are routinely updated and readily available on the MDHHS website.
- The MiBRESS is the source for seven of the 20 indicators included within the Michigan Health and Wellness
  Dashboard (https://midashboard.michigan.gov/health-and-wellness). This project provides a quick assessment of
  the health and wellness of Michigan residents.
- Several BRFSS indicators are used in the Robert Wood Johnson County Health Rankings. These rankings measure the overall health of nearly all counties within the United States and rank them within states.

In conclusion, the MiBRFS continues to serve the needs of public health officials, health care providers, researchers, and local and state level policy makers, while presenting a number of opportunities for expanding our understanding of the risk factors and preventive behaviors for the major causes of disease and disability in Michigan.

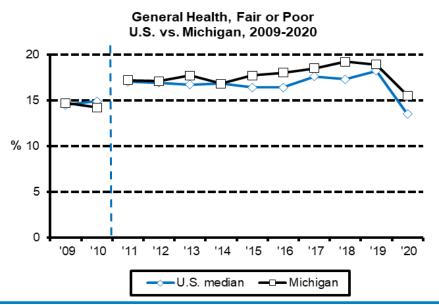
# **General Health Status**

Self-assessed health is a measure of how a person perceives their own health. Self-assessed health status has been validated as a useful indicator of health among different populations and allows for broad comparisons across a variety of health conditions.<sup>3</sup>

- In 2020, an estimated 15.5% of Michigan adults reported that their general health was either fair or poor, with a significant decrease from 18.9% (17.8-19.9) in 2019.
- Fair or poor general health increased with age and decreased with increasing household income level.
- Male adults (13.3%) reported a significantly lower prevalence of fair or poor general health than female adults (17.7%).
- White, non-Hispanic adults (14.5%) reported a significantly lower prevalence of fair or poor general health than Black, non-Hispanic adults (21.9%).
- The prevalence of fair or poor general health was similar by health insurance status.
- Adults with disabilities (38.1%) reported a significantly higher prevalence of fair to poor health than adults without disabilities (7.1%).
- The BRFSS methodology changes that were implemented in 2011 resulted in a spike in the prevalence of fair or poor general health among Michigan adults, but since these changes, the prevalence of fair to poor general health has remained within the 15% -20% range.
- In 2020, the prevalence of fair or poor general health among Michigan adults (15.5%) was higher that that of the U.S. median prevalence (13.5%).

	General Health, Fair or Poor		
Demographic Characteristics	%	95% Confidence Interval	
Total	15.5	(14.4-16.7)	
Age			
18 - 24	6.8	(4.7-9.7)	
25 - 34	10.1	(7.9-12.8)	
35 - 44	12.6	(9.9-15.8)	
45 - 54	18.7	(15.4-22.5)	
55 - 64	19.4	(16.8-22.3)	
65 - 74	20.9	(18.1-24.0)	
75 +	21.7	(18.6-25.2)	
Gender			
Male	13.3	(11.8-14.9)	
Female	17.7	(16.1-19.4)	
Race/Ethnicity			
White, non-Hispanic	14.5	(13.3-15.8)	
Black, non-Hispanic	21.9	(18.4-26.0)	
Other, non-Hispanic	13.7	(9.6-19.1)	
Hispanic	16.9	(11.5-24.0)	
Household Income			
< \$20,000	33.8	(29.5-38.5)	
\$20,000 - \$34,999	20.2	(17.2-23.6)	
\$35,000 - \$49,999	14.6	(11.9-17.8)	
\$50,000 - \$74,999	13.2	(10.8-16.1)	
≥ \$75,000	5.3	(4.2-6.5)	
Health Insurance			
Insured	15.7	(14.6-16.9)	
Uninsured	13.4	(9.9-17.9)	
Disability Status			
No disabilities	7.1	(6.2-8.0)	
Adults with disabilities	38.1	(35.1-41.1)	

<sup>a</sup> Among all adults, the proportion reporting that their health, in general, was either fair or poor.



### Due to methodology changes that took place in 2011, BRFSS estimates from 2011 and moving forward cannot be compared to BRFSS estimates from 2010 and earlier.

#### General Health, Fair or Poor<sup>a</sup>

# Quality of Life

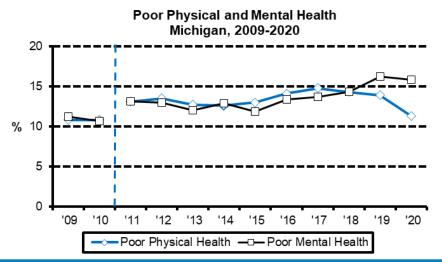
Physically and mentally unhealthy days measure the number of days within the past 30 days that individuals rate their physical and mental health as not good. Poor physical and mental health was defined as 14 or more days within the past 30 days in which the adult respondents rated their physical and mental health as not good.

- In 2020, an estimated 11.3% of Michigan adults reported poor physical health and 15.8% reported poor mental health.
- Poor physical health increased with age, while poor mental health decreased with age.
- Both poor physical health and poor mental health decreased with increasing household income level.
- Females reported higher prevalence of poor mental health (20.0%) than males (11.4%).
- The prevalence of both poor physical health and poor mental health was similar by race/ ethnicity.
- Adults with disabilities (29.9% and 32.1%, respectively) were more likely to have reported both poor physical health and poor mental health than adults without disabilities (4.4% and 9.6%, respectively).
- The BRFSS methodology changes that were implemented in 2011 resulted in a spike in the prevalence of poor physical and mental health among Michigan adults, but the prevalence of poor physical health has increased from 2011 to 2017, and then decreased from 2017 to 2020. The prevalence of poor mental health decreased from 2019 to 2020.

	Poor	Physical Health <sup>a</sup>	Poo	or Mental Health <sup>b</sup>
Demographic Characteristics	%	95% Confidence Interval	%	95% Confidence Interval
Total	11.3	(10.4-12.4)	15.8	(14.7-17.0)
Age				
18 - 24	3.0	(1.9-4.9)	21.0	(17.2-25.3)
25 - 34	7.5	(5.4-10.2)	20.8	(17.4-24.7)
35 - 44	9.7	(7.4-12.6)	18.7	(15.6-22.2)
45 - 54	14.6	(11.5-18.4)	15.8	(13.1-19.0)
55 - 64	16.7	(14.2-19.4)	12.1	(10.1-14.5)
65 - 74	14.0	(11.7-16.6)	12.2	(10.1-14.7)
75 +	13.0	(10.6-15.8)	8.4	(6.6-10.7)
Gender		( , , , , , , , , , , , , , , , , , , ,		
Male	10.1	(8.7-11.6)	11.4	(10.0-12.9)
Female	12.5	(11.2-14.0)	20.0	(18.3-21.7)
Race/Ethnicity		. ,		. ,
White, non-Hispanic	11.3	(10.3-12.5)	15.8	(14.5-17.1)
Black, non-Hispanic	12.1	(9.2-15.9)	16.4	(13.0-20.4)
Other, non-Hispanic	11.9	(8.1-17.0)	16.5	(12.0-22.4)
Hispanic	9.1	(5.2-15.3)	14.9	(10.0-21.6)
Household Income		. ,		, , , , , , , , , , , , , , , , , , ,
< \$20,000	25.5	(21.5-30.1)	29.3	(24.9-34.0)
\$20,000 - \$34,999	14.2	(11.7-17.2)	17.4	(14.4-20.8)
\$35,000 - \$49,999	9.9	(7.7-12.6)	14.0	(11.0-17.7)
\$50,000 - \$74,999	8.3	(6.4-10.7)	13.3	(10.9-16.1)
≥ \$75,000	4.9	(4.0-6.1)	10.2	(8.7-12.0)
Health Insurance				
Insured	11.7	(10.7-12.8)	15.8	(14.7-17.1)
Uninsured	7.0	(4.6-10.4)	15.5	(11.4-20.8)
Disability Status				
No disabilities	4.4	(3.7-5.2)	9.6	(8.6-10.7)
Adults with disabilities	29.9	(27.1-32.8)	32.1	(29.2-35.1)

<sup>a</sup> Among all adults, the proportion reporting 14 or more days of poor physical health, which includes physical illness and injury, during the past 30 days.

physical illness and injury, during the past 30 days. <sup>b</sup> Among all adults, the proportion reporting 14 or more days of poor mental health, which includes stress, depression, and problems with emotions during the past 30 days.



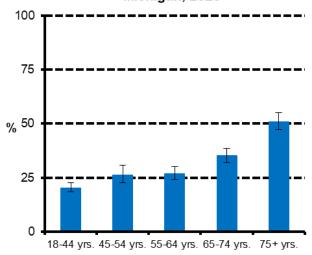
# Disability

Through the Americans with Disabilities Act, an individual with a disability is defined as a person who has a physical or mental impairment that substantially limits one or more major life activities, a person who has a history of such an impairment, or a person who is perceived by others as having such an impairment.<sup>4</sup>

- In 2020, an estimated 27.5% of Michigan adults reported being disabled, which was defined as having serious difficulty hearing, visual impairment, difficulty concentrating, remembering, or making decisions, difficulty walking or climbing stairs, difficulty dressing or bathing, or difficulty doing errands alone.
- The prevalence of disability increased with age and decreased with increasing household income level.
- Females reported higher prevalence of disability (29.7%) than males (25.3%).
- Black, non-Hispanic adults (33.0%) reported a significantly higher prevalence of disability than white, non-Hispanic adults (26.7%).
- The prevalence of disability was similar by health insurance status.
- When assessing disability by age group, Michigan adults 75 years and older reported more disability (51.1%) when compared to all other age groups.

	Total Disability <sup>a</sup>		
Demographic Characteristics	%	95% Confidence Interval	
Total	27.5	(26.2-28.9)	
Age			
18 - 24	20.4	(16.7-24.7)	
25 - 34	19.7	(16.3-23.7)	
35 - 44	21.5	(18.1-25.3)	
45 - 54	26.6	(22.8-30.9)	
55 - 64	27.2	(24.2-30.3)	
65 - 74	35.3	(32.0-38.7)	
75 +	51.1	(47.2-55.1)	
Gender			
Male	25.3	(23.3-27.4)	
Female	29.7	(27.8-31.6)	
Race/Ethnicity			
White, non-Hispanic	26.7	(25.2-28.2)	
Black, non-Hispanic	33.0	(28.5-37.8)	
Other, non-Hispanic	26.4	(20.7-33.1)	
Hispanic	27.7	(20.6-36.1)	
Household Income			
< \$20,000	54.0	(50.3-57.7)	
\$20,000 - \$34,999	35.1	(32.2-38.2)	
\$35,000 - \$49,999	26.6	(23.6-29.8)	
\$50,000 - \$74,999	21.8	(19.2-24.7)	
≥ \$75,000	14.4	(12.9-16.1)	
Health Insurance			
Insured	27.8	(26.4-29.3)	
Uninsured	24.6	(19.3-30.8)	

<sup>a</sup> Among all adults, the proportion who reported having serious difficulty hearing, visual impairment, difficulty concentrating, remembering, or making decisions, difficulty walking or climbing stairs, difficulty dressing or bathing, or difficulty doing errands alone.



#### Disability by Age Group Michigan, 2020

## Weight Status

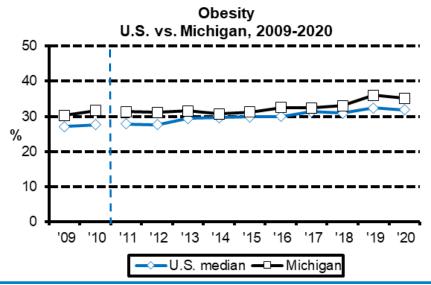
Overweight and obesity have been proven to increase the risk of many diseases and health conditions such as high blood pressure, diabetes, coronary heart disease, stroke, gallbladder disease, high cholesterol, and some forms of cancer.<sup>5</sup> The medical care costs associated with adult obesity in the U.S. is projected to be in the \$150 billion range.<sup>6</sup> Overweight is defined as having a body mass index (BMI) between 25.0 and 29.9, and obesity is defined as a BMI greater than or equal to 30.0.

- In 2020, an estimated 35.2% of Michigan adults were classified as obese, with an additional 34.6% of Michigan adults being classified as overweight. The prevalence of obesity in Michigan is slightly higher than the U.S. median prevalence (31.9%), while the prevalence of overweight is comparable to that of the U.S. median (35.2%).
- The prevalence of obesity increased through the 45-54 year age group and then decreased among older age groups.
- The prevalence of obesity was similar by gender and health insurance status.
- Black, non-Hispanic adults (42.7%) and Hispanic adults (46.7%) reported a significantly higher prevalence of obesity than white, non-Hispanic adults (34.2%).
- Adults with disabilities (43.4%) were more likely to be classified as obese than adults without disabilities (31.9%).
- The Healthy People (HP) 2020 target for obesity among adults is set at 30.5%. The obesity prevalence among Michigan adults in 2020 was 35.2%, 4.7 percentage points to meet this goal.<sup>7</sup>

	Obese <sup>a</sup>		
Demographic Characteristics	%	95% Confidence Interval	
Total	35.2	(33.7-36.7)	
Age			
18 - 24	19.1	(15.0-23.9)	
25 - 34	33.2	(29.2-37.4)	
35 - 44	40.2	(36.0-44.5)	
45 - 54	43.5	(39.5-47.5)	
55 - 64	37.3	(34.1-40.6)	
65 - 74	40.3	(37.0-43.6)	
75 +	28.8	(25.3-32.5)	
Gender			
Male	33.4	(31.4-35.5)	
Female	37.1	(35.0-39.2)	
Race/Ethnicity			
White, non-Hispanic	34.2	(32.7-35.9)	
Black, non-Hispanic	42.7	(38.0-47.7)	
Other, non-Hispanic	22.6	(17.4-28.7)	
Hispanic	46.7	(37.6-56.0)	
Household Income			
< \$20,000	38.2	(33.7-43.0)	
\$20,000 - \$34,999	40.6	(36.7-44.6)	
\$35,000 - \$49,999	41.2	(36.6-45.9)	
\$50,000 - \$74,999	37.1	(33.4-40.9)	
≥ \$75,000	31.4	(29.0-33.9)	
Health Insurance			
Insured	35.4	(33.9-37.0)	
Uninsured	33.1	(27.3-39.5)	
Disability Status		()	
No disabilities	31.9	(30.2-33.6)	
Adults with disabilities	43.4	(40.3-46.5)	

Note: BMI, body mass index, is defined as weight (in kilograms) divided by height (in meters) squared [weight in kg/(height in meters)<sup>2</sup>]. Weight and height were selfreported. Pregnant women were excluded.

<sup>a</sup> Among all adults, the proportion of respondents whose BMI was greater than or equal to 30.0.



# No Health Care Coverage (Among Adults 18 - 64 Years)

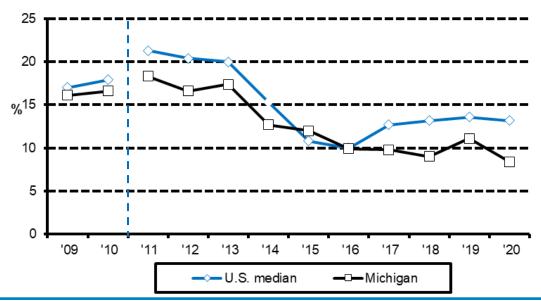
Adults who do not have health care coverage are less likely to access health care services and are more likely to delay getting needed medical attention.8

- In 2020, an estimated 8.4% of Michigan adults aged 18-64 years reported having no health care coverage. The prevalence of no health care coverage among Michigan adults 18-64 years of age is lower than the U.S. median prevalence (13.2%).
- The prevalence of no health care coverage decreased with age and increasing household income level.
- Males (10.5%) reported a significantly higher prevalence of no health care coverage than females (6.3%).
- Hispanic adults (14.4%) reported a higher prevalence of no health care coverage than white, non-Hispanic adults (7.4%).
- The prevalence of no health care coverage was similar by disability status.
- The HP 2020 target for health care coverage is to have 100% of adults insured by 2020. The prevalence of no health care coverage among Michigan adults 18-64 years of age in 2020 was 8.4%, 8.4 percentage points to reach this goal.

	No Health Care Coverage Among Adults 18-64 Years <sup>a</sup>		
Demographic Characteristics	%	95% Confidence Interval	
Total	8.4	(7.3-9.6)	
Age			
18 - 24	9.3	(6.9-12.4)	
25 - 34	11.3	(8.5-14.7)	
35 - 44	7.7	(5.6-10.4)	
45 - 54	7.2	(5.2-10.0)	
55 - 64	6.6	(5.1-8.5)	
Gender			
Male	10.5	(8.8-12.4)	
Female	6.3	(5.2-7.7)	
Race/Ethnicity			
White, non-Hispanic	7.4	(6.2-8.7)	
Black, non-Hispanic	9.7	(6.9-13.5)	
Other, non-Hispanic	8.8	(5.7-13.5)	
Hispanic	14.4	(9.3-21.6)	
Household Income			
< \$20,000	10.2	(7.2-14.3)	
\$20,000 - \$34,999	13.9	(10.7-18.0)	
\$35,000 - \$49,999	12.3	(9.2-16.4)	
\$50,000 - \$74,999	7.8	(5.7-10.7)	
≥ \$75,000	2.8	(2.0-3.9)	
Disability Status			
No disabilities	8.5	(7.3-9.9)	
Adults with disabilities	7.9	(5.9-10.4)	

<sup>a</sup> Among adults aged 18-64 years, the proportion who reported having no health care coverage, including health insurance, prepaid plans such as HMOs, or government plans, such as Medicare or Indian Health Services.

#### No Health Care Coverage Among Adults Aged 18 to 64 Years U.S. vs. Michigan, 2009-2020



## Limited Health Care Coverage

Two additional indicators related to health care access are: 1) not having a personal doctor or health care provider and 2) having had a time during the past 12 months when an individual needed to see a doctor but could not because of the cost. Increases in access to primary care have been shown to substantially improve health-related outcomes.<sup>9</sup>

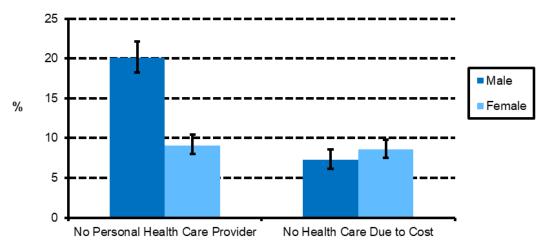
- In 2020, an estimated 14.5% of Michigan adults reported not having a personal health care provider, while 7.9% reported not seeing the doctor within the past 12 months due to cost.
- The prevalences of both of these indicators decreased with age and increasing household income level.
- Males (20.1%) were more likely than females (9.1%) to not have a personal health care provider.
- Hispanic adults (23.9% and 13.4%, respectively) were more likely not to have a personal health care provider and not to have seen a doctor within the past 12 months due to cost when compared to white, non-Hispanic adults (13.2% and 7.1%, respectively).
- Uninsured adults (50.1% and 25.7%, respectively) were more likely not to have a personal health care provider and not to have seen a doctor within the past 12 months due to cost when compared to insured adults (11.7% and 6.7%, respectively).
- Adults with disabilities (13.7%) were more likely than adults without disabilities (5.6%) not to have seen a doctor within the past 12 months due to cost.

		Personal Health are Provider <sup>a</sup>		o Health Care ss Due to Cost <sup>b</sup>
Demographic Characteristics	%	95% Confidence Interval	%	95% Confidence Interval
Total	14.5	(13.3-15.7)	7.9	(7.1-8.8)
Age				
18 - 24	23.9	(19.8-28.4)	10.5	(7.9-13.9)
25 - 34	29.8	(25.8-34.0)	12.0	(9.5-15.1)
35 - 44	18.7	(15.4-22.4)	8.9	(6.9-11.5)
45 - 54	11.2	(9.1-13.9)	7.6	(5.8-10.0)
55 - 64	6.9	(5.4-8.9)	7.3	(5.8-9.3)
65 - 74	3.9	(2.8-5.4)	4.3	(3.1-6.0)
75 +	3.5	(2.1-5.6)	2.9	(1.8-4.5)
Gender				
Male	20.1	(18.2-22.1)	7.3	(6.1-8.6)
Female	9.1	(8.0-10.4)	8.6	(7.5-9.8)
Race/Ethnicity				
White, non-Hispanic	13.2	(11.9-14.5)	7.1	(6.2-8.1)
Black, non-Hispanic	14.2	(10.9-18.2)	9.0	(6.9-11.8)
Other, non-Hispanic	23.2	(17.8-29.7)	11.7	(8.5-16.0)
Hispanic	23.9	(17.3-32.0)	13.4	(8.7-20.1)
Household Income				
< \$20,000	19.9	(16.1-24.3)	14.3	(11.2-17.9)
\$20,000 - \$34,999	17.1	(14.1-20.5)	13.9	(11.3-17.0)
\$35,000 - \$49,999	14.7	(11.7-18.3)	8.1	(6.0-10.8)
\$50,000 - \$74,999	11.3	(8.9-14.1)	7.5	(5.7-9.9)
≥ \$75,000	11.5	(9.7-13.5)	2.9	(2.0-4.1)
Health Insurance				
Insured	11.7	(10.7-12.8)	6.7	(5.9-7.5)
Uninsured	50.1	(43.4-56.7)	25.7	(20.7-31.4)
Disability Status				
No disabilities	15.5	(14.1-17.0)	5.6	(4.8-6.5)
Adults with disabilities	12.1	(10.0-14.4)	13.7	(11.7-16.0)

<sup>a</sup> Among all adults, the proportion reporting that they did not have anyone that they thought of as their personal doctor or health care provider

<sup>b</sup> Among all adults, the proportion reporting that in the past 12 months, they could not see a doctor when they needed to due to the cost.

#### Health Care Access Indicators by Gender Michigan, 2020



# No Leisure Time Physical Activity

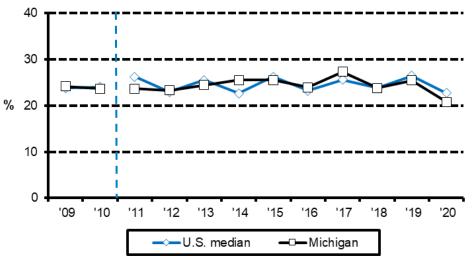
Regular physical activity among adults has been shown to reduce the risk of many diseases including cardiovascular disease, diabetes, colon and breast cancers, and osteoporosis. Keeping physically active also helps to control weight, maintain healthy bones, muscles, and joints, and relieve symptoms of depression.<sup>10</sup>

- In 2020, an estimated 20.8% of Michigan adults reported no leisure time physical activity within the past month. The prevalence of no leisure time physical activity among Michigan adults is comparable to the U.S. median prevalence (22.7%) for this indicator.
- The prevalence of no leisure time physical activity increased with age and decreased with increasing household income level.
- The prevalence of no leisure time physical activity was similar by gender.
- Black, non-Hispanic adults (30.9%) reported a significantly higher prevalence of no leisure time physical activity than white, non-Hispanic adults (19.1%).
- The HP 2020 target for no leisure time physical activity among adults is set at 32.6%. The prevalence of no leisure time physical activity among Michigan adults in 2020 was 20.8%, 11.8 percentage points to meet this goal.<sup>7</sup>

		Leisure Time sical Activity <sup>a</sup>
Demographic Characteristics	%	95% Confidence Interval
Total	20.8	(19.6-22.1)
Age		
18 - 24	11.9	(9.1-15.2)
25 - 34	17.2	(13.9-21.1)
35 - 44	19.1	(15.8-22.8)
45 - 54	23.0	(19.7-26.6)
55 - 64	21.2	(18.6-24.1)
65 - 74	23.9	(21.0-26.9)
75 +	31.2	(27.7-34.9)
Gender		
Male	19.2	(17.5-21.0)
Female	22.4	(20.7-24.2)
Race/Ethnicity		
White, non-Hispanic	19.1	(17.8-20.4)
Black, non-Hispanic	30.9	(26.5-35.5)
Other, non-Hispanic	18.4	(13.9-24.0)
Hispanic	21.2	(15.2-28.9)
Household Income		
< \$20,000	32.5	(28.1-37.2)
\$20,000 - \$34,999	26.9	(23.5-30.5)
\$35,000 - \$49,999	22.3	(19.0-26.0)
\$50,000 - \$74,999	17.6	(14.8-20.7)
≥ \$75,000	11.3	(9.7-13.1)
Health Insurance		
Insured	20.3	(19.1-21.5)
Uninsured	26.5	(20.5-33.6)
Disability Status		
No disabilities	15.1	(13.8-16.5)
Adults with disabilities	35.3	(32.6-38.2)

<sup>a</sup> Among all adults, the proportion reporting they had not participated in any leisure time physical activities or exercises such as running, calisthenics, golf, gardening, or walking for exercise during the past month.

#### No Leisure Time Physical Activity U.S. vs. Michigan, 2009-2020



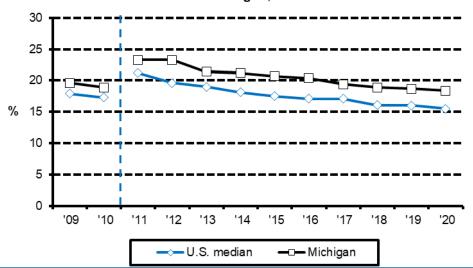
# **Cigarette Smoking**

Cigarette smoking is the leading cause of preventable death in the U.S., accounting for more than 480,000 deaths each year.<sup>11</sup>

- ♦ In 2020, an estimated 18.4% of Michigan adults reported that they currently smoke cigarettes on a regular basis. The prevalence of current smoking among Michigan adults was higher than the U.S. median prevalence (15.5%).
- Current smoking prevalence was highest among adults aged 35-44, and lower among both the oldest and youngest age groups.
- Current smoking decreased with increasing household income level.
- Current smoking prevalence was similar by gender and race/ethnicity.
- Adults with disabilities (27.7%) were more likely to have reported current smoking than adults without disabilities (14.8%).
- Uninsured adults (26.8%) were more likely to have reported current smoking than insured adults (17.8%).
- The HP 2020 target for current smoking among adults is set at 12.0%. The current smoking prevalence among Michigan adults in 2020 was 18.4%, 6.4 percentage points to meet this goal.<sup>7</sup>
- The BRFSS methodology changes that were implemented in 2011 resulted in a spike in the prevalence of current smoking among Michigan adults, but the prevalence of current smoking has declined by 4.9 percentage points since 2011.

	Current Smoking <sup>a</sup>		
Demographic Characteristics	%	95% Confidence Interval	
Total	18.4	(17.1-19.7)	
Age			
18 - 24	10.8	(7.9-14.6)	
25 - 34	22.6	(19.1-26.6)	
35 - 44	24.5	(20.8-28.5)	
45 - 54	23.9	(20.3-27.9)	
55 - 64	21.7	(18.9-24.9)	
65 - 74	13.4	(11.2-15.9)	
75 +	4.9	(3.5-6.8)	
Gender			
Male	19.7	(17.8-21.7)	
Female	17.1	(15.6-18.8)	
Race/Ethnicity			
White, non-Hispanic	17.9	(16.5-19.4)	
Black, non-Hispanic	19.5	(15.8-24.0)	
Other, non-Hispanic	18.1	(13.5-24.0)	
Hispanic	20.1	(13.9-28.1)	
Household Income			
< \$20,000	34.5	(30.0-39.4)	
\$20,000 - \$34,999	23.9	(20.4-27.7)	
\$35,000 - \$49,999	20.9	(17.4-24.9)	
\$50,000 - \$74,999	16.1	(13.4-19.2)	
≥ \$75,000	10.3	(8.7-12.3)	
Health Insurance			
Insured	17.8	(16.5-19.1)	
Uninsured	26.8	(21.7-32.7)	
Disability Status			
No disabilities	14.8	(13.6-16.2)	
Adults with disabilities	27.7	(24.9-30.7)	

<sup>a</sup> Among all adults, the proportion reporting that they had ever smoked at least 100 cigarettes (5 packs) in their life and that they smoke cigarettes now, either every day or on some days.



#### Current Cigarette Smoking U.S. vs. Michigan, 2009-2020

## **E-Cigarette Use**

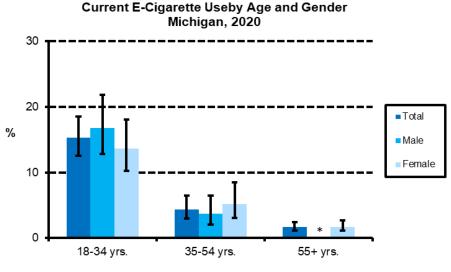
E-cigarette use (also known as "vaping") is a form of tobacco use that is rapidly increasing among youth and young adults. While ecigarette smoke may contain fewer toxic chemicals than regular cigarettes, they still contain many harmful substances, including nicotine, heavy metals, and chemicals that cause cancer. E-cigarettes are especially dangerous for youth, young adults, and pregnant women.<sup>12</sup>

- In 2020, an estimated 6.4% of Michigan adults reported that ٠ they currently smoked e-cigarettes on a regular basis. The prevalence of current e-cigarette use among Michigan adults was higher than the U.S. median prevalence (4.6%).
- Current e-cigarette use was highest among the 18-24 year ٠ old age group (21.1%).
- The prevalence of current e-cigarette use was similar by ٠ gender, household income level, health insurance status, and disability status.
- Among current smokers, the prevalence of e-cigarette use is 10.4% (7.5-14.1), compared to 8.5% (6.4-11.2) among former smokers and 4.2% (3.2-5.4) among never smokers.
- Males aged 18-34 years had the highest prevalence of ٠ current e-cigarette use (16.8%) among the age and gender groups.

	Current E-Cigarette Use <sup>a</sup>		
Demographic Characteristics	%	95% Confidence Interval	
Total	6.4	(5.5-7.6)	
Age			
18 - 24	21.1	(16.5-26.5)	
25 - 34	10.9	(7.8-15.1)	
35 - 44	6.0	(3.7-9.8)	
45 - 54	<sup>b</sup>	b	
55 - 64	2.8	(1.8-4.5)	
65 - 74	<sup>b</sup>	b	
75 +	<sup>b</sup>	b	
Gender			
Male	6.9	(5.5-8.7)	
Female	6.0	(4.7-7.5)	
Race/Ethnicity		, ,	
White, non-Hispanic	6.7	(5.6-8.0)	
Black, non-Hispanic	6.1	(3.4-10.8)	
Other, non-Hispanic	<sup>b</sup>	b	
Hispanic	<sup>b</sup>	b	
Household Income			
< \$20,000	5.9	(3.6-9.4)	
\$20,000 - \$34,999	9.1	(6.1-13.3)	
\$35,000 - \$49,999	6.7	(4.2-10.5)	
\$50,000 - \$74,999	4.5	(3.0-6.7)	
≥ \$75,000	5.8	(4.2-7.9)	
Health Insurance	0.0	()	
Insured	6.3	(5.3-7.5)	
Uninsured	7.8	(4.5-13.0)	
Disability Status	-	\[	
No disabilities	5.7	(4.7-6.9)	
Adults with disabilities	8.6	(6.3-11.5)	

<sup>a</sup> Among all adults, the proportion reporting that they currently use e-cigarettes or

other electronic vaping products, either every day or on some days. <sup>b</sup> Suppressed due to a denominator < 50 and/or a relative standard error > 30%.



\*Suppressed due to a denominator of < 50 and/or a relative standard error > 30%

## Hookah Use

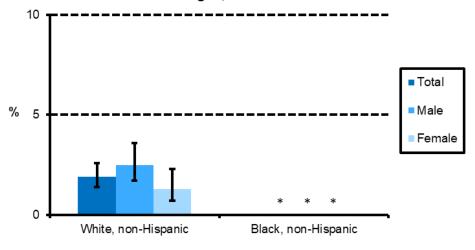
Hookah (water pipe) use has become a popular tobacco smoking method within the U.S., with increasing popularity among the college student population. Hookah use should not be considered as a safe alternative to smoking cigarettes. The charcoal used to heat the tobacco and the smoke generated from hookahs contain many toxic agents that are known to cause lung, bladder, and oral cancers.<sup>13</sup>

- In 2020, an estimated 2.4% of Michigan adults reported that they smoked tobacco using a hookah on one or more days out of the previous month.
- Current hookah use was highest among the 18-24 year old age group (6.0%).
- The prevalence of current hookah use was similar by gender, household income level, and disability status.

Current Hookah Use <sup>a</sup>		
%	95% Confidence Interval	
2.4	(1.8-3.1)	
6.0	(3.5-10.2)	
3.6	(2.1-6.2)	
	b	
	<sup>b</sup>	
<sup>b</sup>	b	
b	b	
<sup>b</sup>	<sup>b</sup>	
2.9	(2.1-4.1)	
1.8	(1.2-2.8)	
1.9	(1.4-2.6)	
<sup>b</sup>	b	
<sup>b</sup>	b	
<sup>b</sup>	b	
<sup>b</sup>	<sup>b</sup>	
<sup>b</sup>	b	
<sup>b</sup>	b	
3.2	(1.8-5.6)	
1.8	(1.1-3.1)	
2.4	(1.8-3.1)	
<b></b> b	b	
2.4	(1.8-3.3)	
2.3	(1.4-3.9)	
	%         2.4         6.0         3.6 <sup>b</sup> <sup>b</sup> <sup>b</sup> 2.9         1.8         1.9 <sup>b</sup> <sup>b</sup> 3.2         1.8         2.4	

 <sup>a</sup> Among all adults, the proportion reporting smoking tobacco using a hookah, narghile, or water pipe on one or more days during the previous thirty days.
 <sup>b</sup> Suppressed due to a denominator of < 50 and/or a relative standard error > 30%.

#### Current Hookah Use by Race and Gender Michigan, 2020





## Secondhand Smoke Exposure

Among adults who have never smoked, secondhand smoke exposure causes an estimated 34,000 heart disease deaths and 7,300 lung cancer deaths within the U.S. each year.<sup>11</sup>

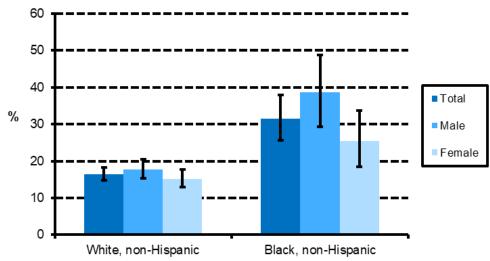
- In 2020, an estimated 18.4% of Michigan adults reported that they were exposed to secondhand smoke in their home or car within the past seven days.
- Secondhand smoke exposure decreased with both increasing age and household income level.
- Males (20.9%) were more likely than females (16.1%) to report secondhand smoke exposure.
- Black, non-Hispanic adults (30.0%) reported a significantly higher prevalence of secondhand smoke exposure than white, non-Hispanic adults (16.3%).
- Uninsured adults and adults with disabilities (36.2% and 28.4%, respectively) were more likely to have reported recent secondhand smoke exposure than insured adults and adults without disabilities (17.0% and 14.6%, respectively).
- White, non-Hispanic females reported the lowest prevalence of recent secondhand smoke exposure at 15.2%, while Black, non-Hispanic males reported the highest prevalence (38.6%).

	Secondhand Smoke Exposure		
Demographic Characteristics	%	95% Confidence Interval	
Total	18.4	(16.8-20.1)	
Age			
18 - 24	21.2	(16.6-26.8)	
25 - 34	25.5	(20.8-30.9)	
35 - 44	23.0	(18.1-28.7)	
45 - 54	18.2	(14.5-22.7)	
55 - 64	18.9	(15.5-23.0)	
65 - 74	11.8	(9.3-14.9)	
75 +	7.7	(5.3-11.1)	
Gender			
Male	20.9	(18.5-23.5)	
Female	16.1	(14.1-18.3)	
Race/Ethnicity			
White, non-Hispanic	16.3	(14.7-18.1)	
Black, non-Hispanic	30.0	(24.4-36.3)	
Other, non-Hispanic	18.2	(12.1-26.5)	
Hispanic	17.7	(10.6-28.0)	
Household Income			
< \$20,000	35.2	(29.2-41.7)	
\$20,000 - \$34,999	24.1	(19.6-29.3)	
\$35,000 - \$49,999	21.4	(17.0-26.6)	
\$50,000 - \$74,999	14.4	(11.1-18.5)	
≥ \$75,000	9.8	(7.9-12.2)	
Health Insurance			
Insured	17.0	(15.4-18.7)	
Uninsured	36.2	(28.7-44.4)	
Disability Status			
No disabilities	14.6	(13.0-16.4)	
Adults with disabilities	28.4	(24.8-32.3)	

#### Secondhand Smoke Exposure<sup>a</sup>

<sup>a</sup> Among all adults, the proportion reporting being exposed to secondhand smoke in their home or a car within the past seven days.

#### Secondhand Smoke Exposure by Race and Gender Michigan, 2020



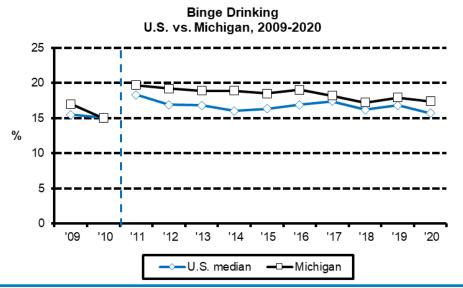
# **Alcohol Consumption**

Excessive alcohol use contributes to approximately 88,000 deaths each year within the U.S.<sup>14</sup> Binge drinking is defined as consuming five or more alcoholic drinks per occasion (for men) or four or more alcoholic drinks per occasion (for women) at least once in the past month. Heavy drinking is defined as consuming an average of more than two alcoholic drinks per day for men or more than one alcoholic drink per day for women in the past month.

- In 2020, an estimated 55.6% (95% CI: 54.1-57.2) of Michigan adults reported some form of alcohol consumption within the past month. Furthermore, an estimated 17.4% of Michigan adults reported binge drinking on at least one occasion within the past month, and 6.8% (95% CI: 6.0-7.6) reported heavy drinking over the past month.
- Binge drinking was more prevalent within the younger age groups and decreased significantly within the older age groups.
- The prevalence of binge drinking is highest within the 25-34 year old age group (25.3%), followed by the 18-24 year old (25.2%) and 35-44 year old (22.7%) age groups.
- Males (22.0%) reported a significantly higher prevalence of binge drinking than females (13.1%).
- The prevalence of binge drinking was similar by race/ethnicity.
- Adults with disabilities (14.7%) reported a significantly lower prevalence of binge drinking than adults without disabilities (18.6%).
- The prevalence of binge drinking among Michigan adults has decreased slightly since the BRFSS methodology changes in 2011, but remains higher than the U.S. median prevalence (15.7% in 2020).

	Binge Drinking <sup>a</sup>				
Demographic Characteristics	%	95% Confidence Interval			
Total	17.4	(16.3-18.7)			
Age					
18 - 24	25.2	(20.9-30.1)			
25 - 34	25.3	(21.9-29.2)			
35 - 44	22.7	(19.2-26.6)			
45 - 54	19.8	(16.8-23.2)			
55 - 64	14.7	(12.4-17.4)			
65 - 74	7.7	(6.1-9.7)			
75 +	2.4	(1.5-3.6)			
Gender		, , , , , , , , , , , , , , , , , , ,			
Male	22.0	(20.2-24.0)			
Female	13.1	(11.6-14.7)			
Race/Ethnicity					
White, non-Hispanic	18.0	(16.7-19.4)			
Black, non-Hispanic	14.6	(11.3-18.7)			
Other, non-Hispanic	12.0	(8.5-16.7)			
Hispanic	25.4	(17.6-35.2)			
Household Income					
< \$20,000	16.4	(13.0-20.5)			
\$20,000 - \$34,999	14.5	(11.8-17.8)			
\$35,000 - \$49,999	21.2	(17.2-25.9)			
\$50,000 - \$74,999	19.0	(16.2-22.2)			
≥ \$75,000	21.2	(19.0-23.6)			
Health Insurance					
Insured	17.2	(16.0-18.5)			
Uninsured	20.8	(16.2-26.3)			
Disability Status					
No disabilities	18.6	(17.2-20.1)			
Adults with disabilities	14.7	(12.6-17.1)			

<sup>a</sup> Among all adults, the proportion reporting consumption of five or more drinks per occasion (for males) or four or more drinks per occasion (for women) at least once in the previous month.



### **Motor Vehicle Safety**

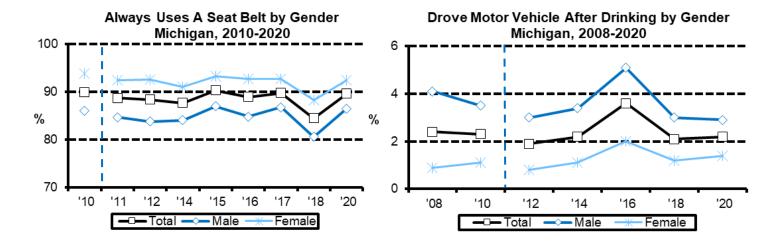
Seat belt use has been proven to save lives and prevent injuries. In 2018, 22,697 people died in the U.S. in motor vehicle traffic crashes, of which only 53.0% were restrained. In 2017, seat belts saved an estimated 14,955 lives among motor vehicle occupants 5 years of age and older within the United States.<sup>15, 16</sup>

- In 2020, an estimated 89.6% of Michigan adults reported always using their seat belt when driving or riding in a car.
- Seat belt use increased slightly with age and with increasing household income.
- Males reported a significantly lower prevalence of seat belt use (86.5% vs. 92.5%) compared to females.
- The prevalence of seat belt use was similar by race/ethnicity.
- Adults with health insurance (90.2%) were more likely than uninsured adults (80.4%) to always wear their seat belt.
- The prevalence of seat belt use among Michigan adults has remained steady since the BRFSS methodology changes in 2011, and is consistently higher among females than males.
- Since the BRFSS methodology changes in 2011, the prevalence of driving a motor vehicle after drinking among Michigan adults increased from 2012 to 2016 and then decreased from 2016 to 2020, and was higher among males than females.

	Α	lways Uses a Seat belt <sup>a</sup>	Drove Motor Vehicle After Drinking <sup>b</sup>	
Demographic Characteristics	%	95% Confidence Interval	%	95% Confidence Interval
Total	89.6	(88.5-90.6)	2.2	(1.7-2.8)
Age				
18 - 24	81.3	(76.9-85.0)	<sup>c</sup>	<sup>c</sup>
25 - 34	84.3	(80.4-87.6)	3.3	(1.9-5.6)
35 - 44	88.8	(85.5-91.5)	<sup>c</sup>	C
45 - 54	93.0	(90.7-94.7)	<b></b> b	<sup>b</sup>
55 - 64	94.1	(92.4-95.5)	2.1	(1.2-3.7)
65 - 74	91.4	(89.2-93.2)	2.0	(1.2-3.5)
75 +	93.7	(91.3-95.5)	c	<sup>C</sup>
Gender		· · · · ·		
Male	86.5	(84.7-88.2)	2.9	(2.1-3.9)
Female	92.5	(91.1-93.6)	1.4	(0.9-2.3)
Race/Ethnicity				
White, non-Hispanic	90.0	(88.7-91.1)	1.7	(1.3-2.3)
Black, non-Hispanic	88.5	(85.0-91.3)	<sup>c</sup>	C
Other, non-Hispanic	90.2	(84.8-93.8)	c	<sup>c</sup>
Hispanic	88.0	(80.8-92.7)	c	<sup>c</sup>
Household Income				
< \$20,000	87.8	(84.1-90.7)	<sup>c</sup>	C
\$20,000 - \$34,999	88.0	(84.8-90.6)	<sup>c</sup>	c
\$35,000 - \$49,999	86.1	(82.5-89.1)	<sup>c</sup>	<sup>c</sup>
\$50,000 - \$74,999	90.6	(88.0-92.6)	2.6	(1.5-4.4)
≥ \$75,000	91.9	(90.1-93.4)	1.8	(1.1-2.9)
Health Insurance				
Insured	90.2	(89.1-91.1)	2.2	(1.7-2.9)
Uninsured	80.4	(73.1-86.0)	<b></b> c	C
Disability Status				
No disabilities	89.8	(88.5-91.0)	1.9	(1.4-2.5)
Adults with disabilities	88.9	(86.7-90.8)	3.3	(2.0-5.4)

<sup>a</sup> Among all adults, the proportion reporting that they always used a seat belt within driving or riding in a car.

<sup>b</sup> Among adults who reporting drinking any alcohol within the past 30 days, the proportion who reported that they had driven when they'd had too much to drink at least once in the previous month. <sup>c</sup>Suppressed due to a denominator of < 50 and/or a relative standard error > 30%.



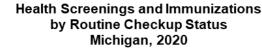
## Routine Checkup in Past Year

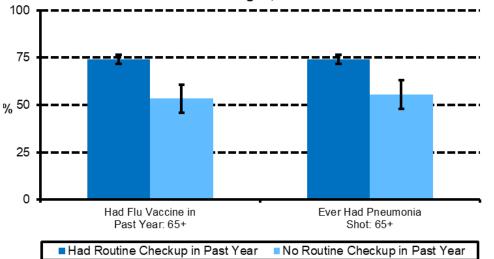
A yearly routine checkup is a great way to remain proactive about one's health. The benefits of having an annual checkup include early diagnosis and treatment of existing conditions and prevention of future medical problems.<sup>17</sup>

- In 2020, an estimated 76.6% of Michigan adults reported having a routine medical checkup within the past year.
- The prevalence of having a routine checkup within the past year increased with age.
- Males (71.8%) reported a significantly lower prevalence of having a routine checkup within the past year than females (81.2%).
- The prevalence of having had a routine checkup within the past year was similar by race/ethnicity.
- Insured adults and adults with disabilities (78.9% and 82.1%, respectively) were more likely to have had a routine checkup within the past year than uninsured adults and adults without disabilities (45.2% and 74.6%, respectively).
- Michigan adults 65+ years who had a routine checkup within the past year were more likely to have had a flu vaccine within the past year [74.2% vs. 53.4%], and to have ever had a pneumonia vaccine [74.2% vs. 55.5%] when compared to those who had not had a routine checkup within the past year.

	Had a Routine Checkup Within The Past Year <sup>a</sup>			
Demographic Characteristics	%	95% Confidence Interval		
Total	76.6	(75.2-77.9)		
Age				
18 - 24	69.5	(64.7-74.0)		
25 - 34	64.3	(60.0-68.4)		
35 - 44	70.7	(66.6-74.5)		
45 - 54	75.4	(71.9-78.6)		
55 - 64	81.7	(78.9-84.1)		
65 - 74	87.9	(85.7-89.8)		
75 +	91.2	(88.9-93.0)		
Gender				
Male	71.8	(69.6-73.9)		
Female	81.2	(79.5-82.7)		
Race/Ethnicity				
White, non-Hispanic	76.6	(75.1-78.0)		
Black, non-Hispanic	82.0	(77.9-85.5)		
Other, non-Hispanic	68.6	(61.9-74.6)		
Hispanic	72.8	(64.7-79.7)		
Household Income				
< \$20,000	75.5	(70.9-79.6)		
\$20,000 - \$34,999	77.7	(74.0-81.0)		
\$35,000 - \$49,999	73.6	(69.3-77.4)		
\$50,000 - \$74,999	77.0	(73.6-80.1)		
≥ \$75,000	77.9	(75.6-80.1)		
Health Insurance				
Insured	78.9	(77.6-80.2)		
Uninsured	45.2	(38.7-51.8)		
Disability Status				
No disabilities	74.6	(73.0-76.2)		
Adults with disabilities	82.1	(79.5-84.4)		

<sup>a</sup> Among all adults, the proportion reporting a routine medical checkup within the past year.





### **Breast Cancer Screening**

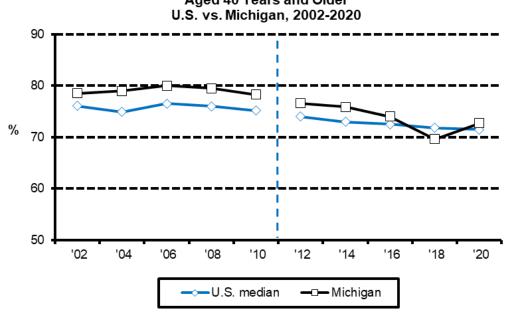
Breast cancer is currently the second leading cause of cancer death among women within the United States.<sup>18</sup> In 2019, there were 1,387 deaths among Michigan women due to breast cancer.<sup>19</sup> Early detection of breast cancer can occur through the use of screening tools such as mammography and clinical breast exams.

- In 2020, an estimated 72.7% of Michigan women 40 years and older reported having a mammogram within the past two years.
- Breast cancer screening measures increased with household income level, but were similar by race/ethnicity.
- Breast cancer screening measures were similar by race/ethnicity and health insurance status.
- The HP 2020 target for having received a mammogram within the past two years among women aged 40 years and older is set at 81.1%.<sup>7</sup> The prevalence for this indicator among Michigan women 40 years and older (72.7%) will need to increase by 8.4 percentage points in order to meet HP 2020 target.
- In 2020, the prevalence of having had a mammogram within the past two years among Michigan women 40 years and older is slightly higher than the U.S. median prevalence for this indicator.

_	Had Mammogram in Past Two Years <sup>a</sup>			
Demographic Characteristics	%	95% Confidence Interval		
Total	72.7	(70.5-74.7)		
Age				
40 - 49	63.4	(57.8-68.7)		
50 - 59	78.4	(74.0-82.2)		
60 - 69	79.2	(75.5-82.5)		
70 +	67.9	(63.9-71.6)		
Race/Ethnicity				
White, non-Hispanic	72.1	(69.8-74.3)		
Black, non-Hispanic	76.1	(68.3-82.5)		
Other, non-Hispanic	66.7	(52.1-78.7)		
Hispanic	<sup>b</sup>	b		
Household Income				
< \$20,000	60.4	(53.2-67.2)		
\$20,000 - \$34,999	72.4	(66.6-77.6)		
\$35,000 - \$49,999	72.9	(67.2-78.0)		
\$50,000 - \$74,999	76.0	(70.1-81.1)		
≥ \$75,000	78.2	(74.3-81.6)		
Health Insurance				
Insured	73.0	(70.8-75.1)		
Uninsured	64.6	(51.3-75.9)		
Disability Status				
No disabilities	74.8	(72.3-77.2)		
Adults with disabilities	68.4	(64.1-72.4)		

<sup>a</sup> Among women aged 40 years and older, the proportion who reported having a mammogram in the past two years.

<sup>b</sup> Suppressed due to a denominator of < 50 and/or a relative standard error > 30%.



#### Had a Mammogram in the Past Two Years Among Women Aged 40 Years and Older U.S. vs. Michigan, 2002-2020

## **Cervical Cancer Screening**

Current guidelines for cervical cancer screening recommend that women 21 to 65 years of age receive a Pap test at least every three years. Women 30 to 65 years of age can also choose to lengthen their testing interval by having a Pap test and HPV testing combined every five years.

- In 2020, an estimated 89.3% of Michigan women aged 18 years and older reported ever having a Pap test, while 68.7% reported having a Pap test within the past three years.
- The prevalence of appropriate cervical cancer ٠ screening increased with age until falling off in the oldest age group.
- The prevalence of having appropriate cervical cancer screening was similar by race/ethnicity.
- The prevalence of appropriate cervical cancer ٠ screening increased with household income level.
- Insured women (69.5%) were more likely to report appropriate cervical cancer screening than uninsured women (56.2%).
- The HP 2020 target for the proportion of ٠ women 21 to 65 years of age who have received a Pap test within the past three years is set at 84.5%.<sup>7</sup> The prevalence of this indicator among Michigan women aged 21 to 65 years will need to increase by 15.8 percentage points in order to meet the HP 2020 target.

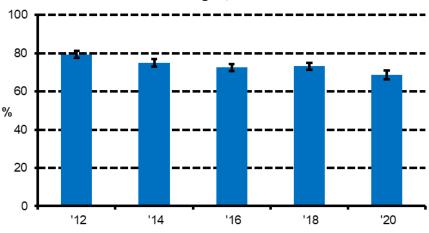
	Evei	Ever had a Pap Test <sup>a</sup>		Had Appropriately Timed Pap Test <sup>b</sup>	
Demographic Characteristics	%	95% Confidence Interval	%	95% Confidence Interval	
Total	89.3	(87.4-90.9)	68.7	(66.4-70.9)	
Age					
18 - 29	64.7	(58.9-70.1)	58.2	(52.3-63.9)	
30 - 39	<sup>c</sup>	c	83.4	(77.6-87.9)	
40 - 49	<sup>c</sup>	c	85.5	(80.6-89.4)	
50 - 59	<sup>c</sup>	c	80.0	(75.0-84.2)	
60 - 69	<sup>c</sup>	c	68.4	(63.1-73.2)	
70 +	<sup>c</sup>	c	27.9	(23.6-32.7)	
Race/Ethnicity					
White, non-Hispanic	91.0	(89.0-92.6)	67.6	(65.0-70.1)	
Black, non-Hispanic	84.7	(78.3-89.4)	75.4	(68.7-81.0)	
Other, non-Hispanic	77.3	(65.0-86.2)	62.4	(50.2-73.1)	
Hispanic	<sup>c</sup>	c	73.3	(61.0-82.9)	
Household Income					
< \$20,000	85.1	(79.6-89.4)	61.0	(53.8-67.7)	
\$20,000 - \$34,999	89.9	(85.3-93.2)	64.7	(58.5-70.4)	
\$35,000 - \$49,999	89.1	(83.3-93.1)	63.7	(56.4-70.5)	
\$50,000 - \$74,999	<sup>c</sup>	c	77.1	(71.7-81.8)	
≥ \$75,000	90.6	(86.6-93.5)	75.4	(71.2-79.2)	
Health Insurance					
Insured	90.0	(88.2-91.6)	69.5	(67.2-71.8)	
Uninsured	78.0	(67.4-85.9)	56.2	(45.1-66.8)	
Disability Status					
No disabilities	89.7	(87.6-91.5)	71.2	(68.6-73.7)	
Adults with disabilities	87.8	(83.6-91.0)	61.9	(56.8-66.8)	

Note: Data includes diagnostic tests and excludes women who have had a hysterectomy.

Among women aged 18 years and older, the proportion who reported ever having a Pap test. <sup>b</sup> Among women aged 18 years and older, the proportion who reported having a Pap test within the

previous three years.

Suppressed due to a denominator of < 50 and/or a relative standard error > 30%.



### Had a Pap Test in the Past Three Years Among Women Aged 18 Years and Older Michigan, 2012-2020

### **Prostate Cancer Screening**

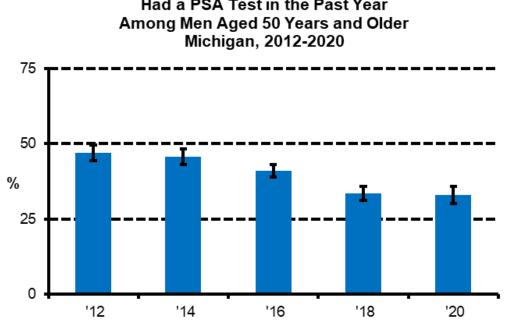
Prostate cancer is the second leading cause of cancer deaths among males in Michigan; there were 980 deaths in 2019 (17.7 deaths per 100,000 male population, age adjusted).19

- In 2020, an estimated 53.8% of Michigan men aged 50 years and older reported discussing the advantages of a Prostate-Specific Antigen (PSA) test with their doctor, while 32.9% reported having had a PSA test within the past year.
- The prevalence of having had a PSA test 4 within the past year increased with age and household income level.
- The prevalence of having a PSA test within ٠ the past year was similar by race/ethnicity and disability status.
- Since 2012, the prevalence of receiving a PSA ٠ test within the past year has remained similar to the prevalence in 2012 and 2014, and then decreased from 2014 to 2020.

	Ever Discussed Advantages of PSA Test With Doctor <sup>a</sup>		Had PSA Test in Past Year <sup>b</sup>	
Demographic Characteristics	%	95% Confidence Interval	%	95% Confidence Interval
Total	53.8	(50.7-56.8)	32.9	(30.2-35.7)
Age				
50 - 59	42.9	(37.6-48.4)	18.6	(14.9-23.1)
60 - 69	56.6	(51.7-61.3)	36.1	(31.6-40.8)
70 +	63.6	(58.5-68.4)	46.9	(41.9-52.0)
Race/Ethnicity				
White, non-Hispanic	54.4	(51.2-57.6)	34.4	(31.5-37.4)
Black, non-Hispanic	54.8	(44.0-65.2)	28.0	(19.6-38.2)
Other, non-Hispanic	44.6	(27.7-62.8)	<sup>c</sup>	C
Hispanic	40.6	(21.5-63.1)	<b></b> <sup>c</sup>	c
Household Income				
< \$20,000	33.9	(24.8-44.5)	14.9	(9.6-22.5)
\$20,000 - \$34,999	50.4	(42.7-58.2)	31.5	(24.5-39.5)
\$35,000 - \$49,999	55.3	(47.5-62.9)	28.7	(22.4-36.1)
\$50,000 - \$74,999	56.4	(49.3-63.1)	38.8	(32.1-46.0)
≥ \$75,000	60.0	(55.1-64.8)	36.7	(32.1-41.5)
Health Insurance				
Insured	55.1	(52.0-58.2)	34.0	(31.2-36.9)
Uninsured	26.9	(16.3-41.1)	<sup>c</sup>	c
Disability Status				
No disabilities	55.8	(52.3-59.3)	33.7	(30.5-37.1)
Adults with disabilities	49.8	(44.0-55.6)	31.1	(26.2-36.4)

<sup>a</sup> Among men aged 50 years and older, the proportion ever discussing the advantages of a PSA test with a doctor , nurse, or other health professional. <sup>b</sup> Among men aged 50 years and older, the proportion who reported having a PSA test within the past

year. <sup>5</sup> Suppressed due to a denominator of < 50 and/or a relative standard error > 30%.



# Had a PSA Test in the Past Year

## **Colorectal Cancer Screening**

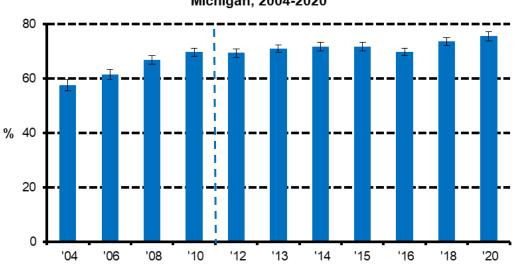
In 2019, colorectal cancer was the second leading cause of cancer-related death in Michigan with 1.743 deaths.<sup>19</sup> Fecal occult blood tests, sigmoidoscopy, and colonoscopy are screening procedures that are performed to detect colorectal cancer in the early stages. Appropriate colorectal cancer screening consists of a fecal occult blood test within the past year, a sigmoidoscopy within the past five years, or a colonoscopy within the past 10 years.

- In 2020, an estimated 55.6% of Michigan ٠ adults aged 50 years and older reported having a sigmoidoscopy or colonoscopy within the past five years, while 75.6% reported appropriate colorectal cancer screening.
- The prevalence of appropriate colorectal cancer screening was similar by gender and race/ethnicity, but increased with household income level.
- Insured adults (76.9%) were more likely than ٠ uninsured adults (48.3%) to have reported receiving appropriate colorectal cancer screening.
- The prevalence of appropriate colorectal cancer screening among Michigan adults 50 years and older has remained stable since the 2011 BRFSS methodology changes.

		Had Sigmoidoscopy or Colonoscopy in Past 5 Years <sup>a</sup>		Had Appropriate Colorectal Cancer Screening <sup>b</sup>	
Demographic Characteristics	%	95% Confidence Interval	%	95% Confidence Interval	
Total	55.6	(53.6-57.5)	75.6	(73.9-77.3)	
Age					
50 - 59	50.5	(46.7-54.2)	66.8	(63.2-70.2)	
60 - 69	59.2	(56.0-62.4)	80.9	(78.1-83.4)	
70 +	57.0	(53.8-60.2)	79.2	(76.6-81.7)	
Gender					
Male	53.8	(50.8-56.8)	75.0	(72.4-77.4)	
Female	57.2	(54.5-59.7)	76.2	(73.8-78.5)	
Race/Ethnicity					
White, non-Hispanic	56.2	(54.1-58.3)	76.3	(74.5-78.1)	
Black, non-Hispanic	54.7	(47.7-61.5)	74.8	(68.3-80.3)	
Other, non-Hispanic	40.3	(29.2-52.5)	65.1	(53.1-75.5)	
Hispanic	58.3	(41.7-73.3)	73.8	(56.2-86.0)	
Household Income				х <i>У</i>	
< \$20,000	48.0	(41.6-54.6)	68.3	(61.9-74.2)	
\$20,000 - \$34,999	48.9	(43.9-54.0)	71.2	(66.1-75.8)	
\$35,000 - \$49,999	52.4	(47.2-57.6)	73.9	(69.1-78.1)	
\$50,000 - \$74,999	63.7	(59.0-68.2)	80.5	(76.4-84.0)	
≥ \$75,000	59.2	(55.8-62.6)	78.4	(75.4-81.2)	
Health Insurance		· · ·			
Insured	56.7	(54.7-58.7)	76.9	(75.2-78.5)	
Uninsured	32.3	(22.7-43.7)	48.3	(37.4-59.5)	
Disability Status				· · ·	
No disabilities	56.9	(54.6-59.2)	76.0	(74.0-78.0)	
Adults with disabilities	53.5	(49.6-57.2)	75.2	(71.8-78.3)	

<sup>a</sup> Among adults aged 50 years and older, the proportion reporting having a sigmoidoscopy or colonos-

<sup>b</sup> Among adults aged 50 years and older, the proportion reporting having a fecal occult blood test within the past year, a sigmoidoscopy within the past five years, or a colonoscopy within the past ten years.



Due to methodology changes that took place in 2011, BRFSS estimates from 2011 and moving forward cannot be compared to BRFSS estimates from 2010 and earlier.

#### Appropriate Colorectal Cancer Screening Among Adults Aged 50 Years and Older Michigan, 2004-2020

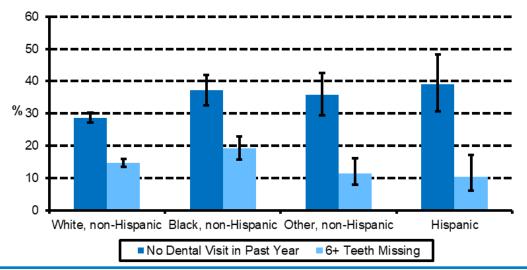
# **Oral Health**

Oral health is an important part of one's general health and quality of life. Regular dental care includes preventive dental services such as teeth cleaning, and permits early diagnosis and treatment of tooth decay and periodontal diseases.<sup>21</sup>

- In 2020, an estimated 30.8% of Michigan adults reported not having had a dental visit within the past year.
- The prevalence of not having had a dental visit within the past year was similar by age.
- The prevalence of not having had a dental visit within the past year decreased with increasing household income.
- Males (32.9%) were more likely to have reported not having a dental visit within the past year compared to females (28.7%).
- Black, non-Hispanic adults (37.2%) reported a higher prevalence of no dental visit within the past year than white, non-Hispanic adults (28.7%).
- Uninsured adults and disabled adults (50.7% and 41.6%, respectively) were more likely to have not had a dental visit within the past year compared to insured adults and non-disabled adults (29.3% and 26.5%, respectively).
- The prevalence of having six or more teeth missing was greater among Black, non-Hispanic adults (19.1%) than both white, non-Hispanics (14.7%) and Hispanic adults (10.4%).

	No Dental Visit in Past Year <sup>a</sup>			
Demographic Characteristics	%	95% Confidence Interval		
Total	30.8	(29.3-32.2)		
Age				
18 - 24	29.1	(24.5-34.2)		
25 - 34	36.9	(32.8-41.2)		
35 - 44	33.9	(30.0-38.1)		
45 - 54	29.7	(26.2-33.6)		
55 - 64	30.0	(27.0-33.1)		
65 - 74	25.9	(23.0-29.1)		
75 +	27.7	(24.0-31.7)		
Gender				
Male	32.9	(30.8-35.1)		
Female	28.7	(26.8-30.7)		
Race/Ethnicity				
White, non-Hispanic	28.7	(27.2-30.3)		
Black, non-Hispanic	37.2	(32.6-42.0)		
Other, non-Hispanic	35.8	(29.5-42.6)		
Hispanic	39.1	(30.6-48.3)		
Household Income				
< \$20,000	48.6	(43.8-53.4)		
\$20,000 - \$34,999	40.1	(36.1-44.1)		
\$35,000 - \$49,999	33.7	(29.4-38.4)		
\$50,000 - \$74,999	24.4	(21.3-27.8)		
≥ \$75,000	18.3	(16.3-20.5)		
Health Insurance				
Insured	29.3	(27.9-30.8)		
Uninsured	50.7	(44.0-57.4)		
Disability Status		· · · ·		
No disabilities	26.5	(24.9-28.2)		
Adults with disabilities	41.6	(38.6-44.7)		

<sup>a</sup> Among all adults, the proportion who reported that they had not visited a dentist or dental clinic for any reason in the previous year.



#### Oral Health Risk Factors by Race/Ethnicity Michigan, 2020

# Immunizations Among Adults 65 Years of Age and Older

Adult immunizations against influenza and pneumococcal disease are important health indicators that need to be routinely monitored since morbidity and mortality are associated with both of these diseases within different demographic groups.<sup>22</sup>

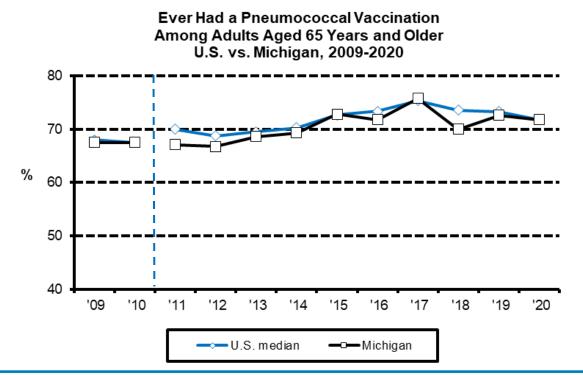
- In 2020, an estimated 71.7% of Michigan adults ages 65 years and older reported receiving a flu vaccine within the past year, while an estimated 71.8% of this population reported ever receiving a pneumonia vaccine.
- There was a significant increase for the prevalence of having a flu vaccine in the past year from 60.7% (58.6-62.8) in 2019 to 71.7% (69.4-73.9).
- The prevalence of both having a flu vaccine in the past year and ever having a pneumonia vaccine were similar by gender, household income status, and disability status.
- White, non-Hispanic adults (74.0%) were more likely than Black, non-Hispanic adults (56.4%) to ever have received a pneumonia vaccine.

	Had Flu Vaccine in Past Year <sup>a</sup>		Ever Had Pneumonia Vaccine <sup>b</sup>	
Demographic Characteristics	%	95% Confidence Interval	%	95% Confidence Interval
Total	71.7	(69.4-73.9)	71.8	(69.4-74.2)
Age				
65 - 74	72.4	(69.4-75.2)	68.4	(65.1-71.5)
75 +	70.7	(66.8-74.2)	77.0	(73.2-80.5)
Gender				
Male	71.6	(67.8-75.0)	66.6	(62.7-70.3)
Female	71.8	(68.8-74.7)	76.0	(72.9-78.9)
Race/Ethnicity				
White, non-Hispanic	72.9	(70.4-75.2)	74.0	(71.5-76.4)
Black, non-Hispanic	65.2	(55.6-73.6)	56.4	(46.6-65.7)
Other, non-Hispanic	69.9	(51.7-83.5)	62.8	(41.1-80.4)
Hispanic	<sup>c</sup>	c	<b></b> <sup>c</sup>	C
Household Income				
< \$20,000	66.2	(58.3-73.4)	70.3	(62.2-77.4)
\$20,000 - \$34,999	68.4	(62.7-73.5)	70.8	(65.3-75.7)
\$35,000 - \$49,999	67.6	(61.3-73.3)	68.3	(61.5-74.3)
\$50,000 - \$74,999	78.8	(73.2-83.6)	79.9	(74.2-84.6)
≥ \$75,000	80.0	(75.5-83.8)	76.1	(71.2-80.3)
Disability Status				
No disabilities	71.6	(68.6-74.3)	70.4	(67.4-73.3)
Adults with disabilities	72.5	(68.5-76.2)	73.9	(69.7-77.8)

<sup>a</sup> Among adults aged 65 years and older, the proportion reporting that they had a flu vaccine, either by injection in the arm or spraved in the pase during the past 12 months.

injection in the arm or sprayed in the nose during the past 12 months. <sup>b</sup> Among adults aged 65 years and older, the proportion reporting that they ever had a pneumococcal vaccine.

<sup>c</sup> Suppressed due to a denominator < 50 and/or a relative standard error > 30%.



# **HIV Testing**

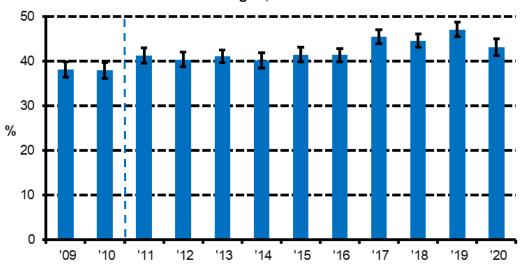
Early awareness of an HIV infection through HIV testing can prevent further spread of the disease, and an early start on antiretroviral therapy can increase the quality of life among those who are living with HIV/AIDS.<sup>23</sup>

- In 2020, an estimated 43.2% of Michigan adults reported ever being tested for HIV.
- Females (48.1%) reported a significantly higher prevalence of HIV testing than males (38.4%).
- Black, non-Hispanic adults (65.9%) reported a significantly higher prevalence of HIV testing than both white, non-Hispanic (38.4%) and Hispanic adults (52.2%).
- The prevalence of HIV testing decreased with increasing household income level.
- Adults with disabilities (52.8%) were more likely to have been tested for HIV than adults without disabilities (40.1%).
- Since the BRFSS methodology changes that were implemented in 2011, the prevalence of HIV testing among Michigan adult has remained stable from 2011 to 2016, and then increased from 2016 to 2020.

	Ever Had an HIV Test <sup>a</sup>			
Demographic Characteristics	%	95% Confidence Interval		
Total	43.2	(41.3-45.1)		
Age				
18 - 24	30.0	(25.2-35.3)		
25 - 34	45.4	(41.0-49.9)		
35 - 44	54.2	(49.9-58.6)		
45 - 54	50.7	(46.5-54.8)		
55 - 64	35.1	(31.9-38.5)		
Gender				
Male	38.4	(35.7-41.1)		
Female	48.1	(45.4-50.8)		
Race/Ethnicity				
White, non-Hispanic	38.4	(36.3-40.5)		
Black, non-Hispanic	65.9	(60.2-71.2)		
Other, non-Hispanic	40.0	(32.8-47.6)		
Hispanic	52.2	(42.7-61.5)		
Household Income				
< \$20,000	57.4	(51.5-63.0)		
\$20,000 - \$34,999	48.8	(43.5-54.2)		
\$35,000 - \$49,999	41.3	(35.3-47.5)		
\$50,000 - \$74,999	44.4	(39.9-49.1)		
≥ \$75,000	38.2	(35.3-41.3)		
Health Insurance				
Insured	43.6	(41.6-45.6)		
Uninsured	39.5	(32.8-46.7)		
Disability Status		· · · ·		
No disabilities	40.1	(38.0-42.3)		
Adults with disabilities	52.8	(48.6-57.0)		

<sup>a</sup> Among adults aged 18-64 years, the proportion reporting that they ever had been tested for HIV, apart from tests that were part of a blood donation.

#### Ever Had an HIV Test Among Adults Aged 18-64 Years Michigan, 2009-2020



## Asthma in Adults

Asthma is a chronic inflammatory disorder of the lungs, characterized by wheezing, coughing, difficulty breathing, and chest tightness. Allergies, a family history of asthma or allergy, low birth weight, and exposure to tobacco smoke are just a few of the potential risk factors that are associated with the development of asthma.<sup>24</sup>

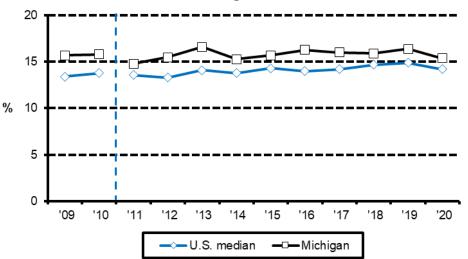
- In 2020, an estimated 15.4% of Michigan adults reported that they were ever diagnosed with asthma and 11.0% reported that they currently have asthma.
- The prevalence of both lifetime and current asthma decreased with age and increasing household income level.
- Females reported a significantly higher prevalence than males for both lifetime (female vs male 18.8% vs. 11.9%) and current asthma (14.6% and 7.3%).
- The prevalence of both lifetime and current asthma was similar by race/ethnicity and health insurance status.
- Adults with disabilities reported a significantly higher prevalence than adults without disabilities for both lifetime (with disabilities vs no disabilities 22.8% vs. 18.0%) and current asthma (12.6% vs. 8.4%).
- In 2020, the prevalence of ever being diagnosed with asthma among Michigan adults (15.4%) was higher than the U.S. median prevalence (14.2%).

	Lif	etime Asthma <sup>a</sup>	Cı	urrent Asthma <sup>b</sup>
Demographic Characteristics	%	95% Confidence Interval	%	95% Confidence Interval
Total	15.4	(14.4-16.6)	11.0	(10.1-12.0)
Age				
18 - 24	15.7	(12.5-19.6)	10.8	(8.2-14.0)
25 - 34	18.9	(15.5-22.8)	12.3	(9.4-16.0)
35 - 44	15.7	(12.9-19.0)	9.6	(7.4-12.2)
45 - 54	16.9	(14.1-20.0)	12.9	(10.5-15.8)
55 - 64	15.2	(13.0-17.6)	11.5	(9.6-13.6)
65 - 74	13.6	(11.5-16.0)	10.8	(8.9-13.1)
75 +	9.8	(7.9-12.1)	8.0	(6.2-10.2)
Gender				
Male	11.9	(10.5-13.5)	7.3	(6.1-8.7)
Female	18.8	(17.2-20.4)	14.6	(13.2-16.1)
Race/Ethnicity				
White, non-Hispanic	15.0	(13.8-16.3)	10.5	(9.5-11.6)
Black, non-Hispanic	17.3	(14.0-21.1)	13.5	(10.7-17.0)
Other, non-Hispanic	17.4	(12.8-23.1)	13.2	(9.2-18.5)
Hispanic	14.3	(9.5-20.8)	10.5	(6.5-16.4)
Household Income				
< \$20,000	22.2	(18.5-26.4)	16.6	(13.4-20.4)
\$20,000 - \$34,999	15.8	(13.1-19.0)	11.9	(9.5-14.8)
\$35,000 - \$49,999	14.5	(11.4-18.1)	11.2	(8.5-14.6)
\$50,000 - \$74,999	12.4	(10.3-15.0)	8.6	(6.8-10.8)
≥ \$75,000	13.3	(11.6-15.1)	9.1	(7.7-10.6)
Health Insurance				
Insured	15.6	(14.5-16.7)	11.1	(10.2-12.1)
Uninsured	14.2	(9.3-21.0)	10.5	(6.2-17.4)
Disability Status				
No disabilities	12.6	(11.5-13.9)	8.4	(7.4-9.5)
Adults with disabilities	22.8	(20.3-25.5)	18.0	(15.7-20.5)

<sup>a</sup> Among all adults, the proportion reporting that they were ever told by a doctor, nurse, or other health care professional that they had asthma.

care professional that they had asthma. <sup>b</sup> Among all adults, the proportion reporting that they still have asthma.

#### Lifetime Adult Asthma U.S. vs. Michigan, 2009-2020



# Asthma in Children

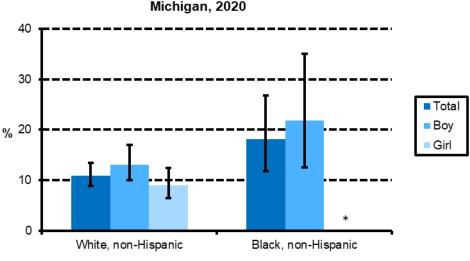
Although asthma can affect people of all ages, in most cases it begins during childhood. More than 22 million people in the U.S. are known to have asthma, and about 6 million of these people are children. Children with a family history of asthma and allergy are at a higher risk of developing asthma during childhood.<sup>25</sup>

- Based on proxy information provided by the adult respondent, the estimated proportion of Michigan children aged 0-17 years who were ever told by a doctor that they had asthma for 2020 was 12.4%, and an estimated 8.4% currently have asthma.
- The prevalence of lifetime asthma increased with age, and the prevalence of current asthma increased with age until 10-14 years of age and then dropped slightly within the 15-17 year-old age group.
- The prevalence of both lifetime and current asthma among children decreased with increasing household income level.
- The prevalence of both lifetime and current asthma was similar by gender and race/ethnicity.

	Lifetime Asthma <sup>a</sup>		ifetime Asthma <sup>a</sup> Cur	
Demographic Characteristics	%	95% Confidence Interval	%	95% Confidence Interval
Total	12.4	(10.4-14.7)	8.4	(6.9-10.3)
Age				
0 - 4	<sup>c</sup>	C	c	c
5 - 9	13.5	(9.9-18.2)	11.3	(8.0-15.6)
10 - 14	17.2	(12.9-22.6)	11.9	(8.2-17.1)
15 - 17	17.1	(11.9-23.9)	9.5	(6.6-13.7)
Gender				
Boy	14.3	(11.3-17.8)	9.4	(7.1-12.2)
Girl	10.8	(8.2-13.9)	7.7	(5.6-10.4)
Race/Ethnicity				
White, non-Hispanic	10.9	(8.9-13.4)	7.2	(5.6-9.3)
Black, non-Hispanic	18.1	(11.8-26.8)	13.3	(8.3-20.7)
Other, non-Hispanic	12.9	(7.6-21.1)	8.4	(4.8-14.3)
Hispanic	12.5	(7.3-20.6)	8.7	(4.7-15.5)
Household Income				
< \$20,000	17.8	(11.5-26.5)	14.5	(8.8-22.9)
\$20,000 - \$34,999	17.7	(11.1-26.8)	13.7	(8.5-21.5)
\$35,000 - \$49,999	13.7	(8.5-21.3)	10.5	(6.2-17.1)
\$50,000 - \$74,999	11.8	(7.7-17.8)	6.9	(3.9-12.1)
$\geq$ \$75,000	9.4	(7.1-12.5)	5.6	(3.9-8.0)

<sup>a</sup> Estimated proportion of Michigan children aged 0-17 years ever told by a doctor, nurse, or other health care professional that they had asthma, using proxy information from the adult respondent.
<sup>b</sup> Estimated proportion of Michigan children aged 0-17 years who still have asthma, using proxy information from the adult respondent.

<sup>c</sup> Suppressed due to a denominator < 50 and/or a relative standard error > 30%.



Lifetime Child Asthma by Race and Gender

#### \*Suppressed due to a denominator of < 50 and/or a relative standard error > 30%.

# **Chronic Obstructive Pulmonary** Disease (COPD)

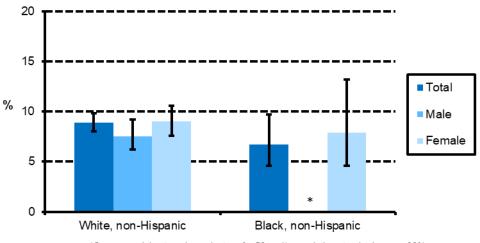
Chronic obstructive pulmonary disease (COPD) is a progressive disease that usually results in coughing, wheezing, shortness of breath, chest tightness, and other symptoms. Cigarette smoking is the leading cause of COPD.26

- In 2020, an estimated 8.3% of Michigan adults reported ever being told by a doctor that they had COPD.
- The prevalence of COPD increased with age and decreased ٠ with increasing household income level.
- Female adults (9.5%) were more likely to have been ٠ diagnosed with COPD than male adults (7.1%).
- The prevalence of COPD was similar by race/ethnicity. ٠
- Adults with disabilities (19.1%) were more likely to have been diagnosed with COPD than adults without disabilities (4.4%).
- The prevalence of COPD was similar by gender for white, non-Hispanic adults.
- In 2020, the prevalence of COPD among Michigan adults (8.3%) was higher than the U.S. median prevalence (6.2%).

	Ever Told COPD, Emphysema, or Chronic Bronchitis <sup>a</sup>		
Demographic Characteristics	%	95% Confidence Interval	
Total	8.3	(7.6-9.2)	
Age			
18 - 24	b	b	
25 - 34	3.7	(2.4-5.8)	
35 - 44	5.4	(3.7-7.8)	
45 - 54	7.7	(5.6-10.5)	
55 - 64	11.5	(9.5-13.8)	
65 - 74	15.6	(13.3-18.3)	
75 +	15.8	(13.2-18.9)	
Gender			
Male	7.1	(6.1-8.3)	
Female	9.5	(8.4-10.8)	
Race/Ethnicity			
White, non-Hispanic	8.9	(8.0-9.8)	
Black, non-Hispanic	6.7	(4.6-9.7)	
Other, non-Hispanic	7.0	(4.2-11.4)	
Hispanic	b	b	
Household Income			
< \$20,000	19.2	(15.8-23.2)	
\$20,000 - \$34,999	11.7	(9.4-14.5)	
\$35,000 - \$49,999	8.8	(6.9-11.3)	
\$50,000 - \$74,999	4.9	(3.6-6.6)	
≥ \$75,000	3.0	(2.2-4.1)	
Health Insurance			
Insured	8.5	(7.7-9.4)	
Uninsured	6.4	(4.1-10.0)	
Disability Status			
No disabilities	4.4	(3.7-5.1)	
Adults with disabilities	19.1	(16.8-21.5)	

Among all adults, the proportion reporting ever being told by a doctor that they had chronic obstructive pulmonary disease (COPD), emphysema or chronic bronchitis. <sup>b</sup> Suppressed due to a denominator of < 50 and/or a relative standard error > 30%.

#### COPD by Race and Gender Michigan, 2020



\*Suppressed due to a denominator of < 50 and/or a relative standard error > 30%

## Arthritis

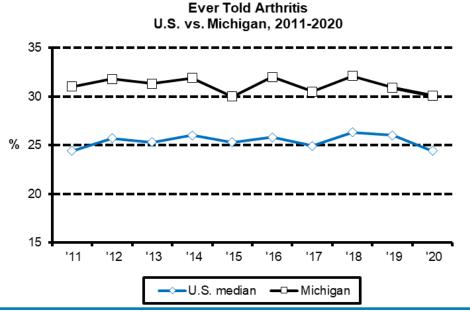
Arthritis and rheumatism are the leading causes of disability within the U.S. These conditions have been diagnosed in over 54 million U.S. adults.<sup>27</sup>

- In 2020, an estimated 30.1% of Michigan adults reported ever being told by a doctor that they had some form of arthritis, rheumatoid arthritis, gout, lupus, or fibromyalgia.
- Females (35.6%) reported a significantly higher prevalence of arthritis than males (24.1%).
- Hispanic adults (18.3%) reported a lower prevalence of arthritis than white, non-Hispanic adults (31.8%).
- The prevalence of arthritis increased with age and decreased with increasing household income level.
- Uninsured adults (15.4%) were less likely to have been diagnosed with arthritis than insured adults (31.3%), while adults with disabilities (53.1%) were more likely to have been diagnosed than adults without disabilities (21.6%).
- In 2020, the prevalence of arthritis among Michigan adults (30.1%) was significantly higher than the U.S. median prevalence (24.4%).

	Ever Told Arthritis <sup>a</sup>		
Demographic Characteristics	%	95% Confidence Interval	
Total	30.1	(28.8-31.4)	
Age			
18 - 24	3.9	(2.4-6.4)	
25 - 34	8.9	(6.9-11.5)	
35 - 44	14.7 (11.9-17.9)		
45 - 54	29.8 (26.4-33.5)		
55 - 64	45.9 (42.7-49.2		
65 - 74	54.2	(50.9-57.4)	
75 +	60.8	(56.9-64.6)	
Gender			
Male	24.1	(22.4-25.9)	
Female	35.6	(33.8-37.6)	
Race/Ethnicity			
White, non-Hispanic	31.8	(30.3-33.3)	
Black, non-Hispanic	28.1	(24.2-32.4)	
Other, non-Hispanic	23.2 (18.0-29.3		
Hispanic	18.3 (12.8-25.0		
Household Income			
< \$20,000	42.9	(38.4-47.7)	
\$20,000 - \$34,999	35.7	(32.1-39.4)	
\$35,000 - \$49,999	31.6	(27.8-35.6)	
\$50,000 - \$74,999	27.7	(24.6-31.0)	
≥ \$75,000	19.7	(17.8-21.6)	
Health Insurance			
Insured	31.3	(29.9-32.6)	
Uninsured	15.4	(11.6-20.2)	
Disability Status			
No disabilities	21.6	(20.3-23.0)	
Adults with disabilities	53.1	(50.1-56.1)	

an Talal Anthenitia<sup>a</sup>

<sup>a</sup> Among all adults, the proportion reporting ever being told by a doctor that they had some form of arthritis, rheumatoid arthritis, gout, lupus, or fibromyalgia.



# Cardiovascular Disease

Heart disease and stroke are the first leading causes of death in both Michigan and the U.S.  $^{\rm 28}$ 

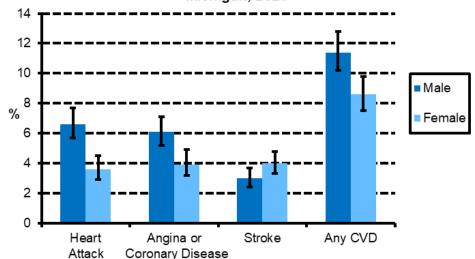
- In 2020, an estimated 5.1% of Michigan adults had ever been told by a doctor that they had a heart attack, 5.0% had ever been told they had angina or coronary heart disease, and 3.5% had ever been told they had a stroke.
- When combining all three measures into one indicator, an estimated 10.0% of Michigan adults have ever been told by a doctor that they had some form of cardiovascular disease.
- The prevalence of all three diseases increased with age and decreased with increasing household income level.
- Males reported higher prevalence than females for heart attack and coronary heart disease, but not stroke.
- The prevalences of heart attack and stroke were similar by race/ethnicity. However, white, non-Hispanic adults (6.1%) reported a significantly higher prevalence of coronary heart disease than Black, non-Hispanic adults (3.0%).
- Adults with disabilities were more likely to have been diagnosed with each of the three diseases when compared to adults without disabilities.
- In 2020, the prevalence of heart attack (5.1%), coronary heart disease (5.0%), and stroke (3.5%) among Michigan adults were all comparable to the U.S. median prevalence (heart attack: 4.3%; coronary heart disease: 4.0%; and stroke: 2.8%).

	Ever Told Angina						
	Ever Told			or Coronary Heart Disease <sup>b</sup>		Ever Told Stroke <sup>c</sup>	
	He	Heart Attack <sup>a</sup>					
	0/	95%	0/	95%	0/	95%	
Demographic Characteristics	%	Confidence Interval	%	Confidence Interval	%	Confidence Interval	
Total	5.1		5.0		2 5		
	5.1	(4.5-5.8)	5.0	(4.4-5.7)	3.5	(3.0-4.0)	
<b>Age</b> 18 - 34	d	d	d	d	d	d	
35 - 44	d	 <sup>d</sup>	d	d	d	d	
45 - 54	5.0	(3.3-7.4)	3.3	(2.1-5.1)	2.6	(1.5-4.4)	
45 - 54 55 - 64	5.0 7.7	(6.0-9.8)	5.5 6.8	· · ·	2.0 4.6	· · · ·	
65 - 74			0.0 10.6	(5.3-8.8)	4.0 6.0	(3.4-6.1)	
65 - 74 75 +	9.5	(7.7-11.7) (11.2-17.0)	10.6	(8.7-12.9) (13.0-19.4)	0.0 10.2	(4.7-7.8)	
Gender	13.9	(11.2-17.0)	15.9	(13.0-19.4)	10.2	(8.0-12.7)	
	<u> </u>	(	C 1	$( \mathbf{F} \mathbf{O} \mathbf{T} \mathbf{A} )$	2.0	(0, 4, 0, 7)	
Male	6.6	(5.7-7.7)	6.1	(5.2-7.1)	3.0	(2.4-3.7)	
Female	3.6	(2.9-4.5)	3.9	(3.2-4.9)	4.0	(3.3-4.8)	
Race/Ethnicity							
White, non-Hispanic	5.3	(4.6-6.0)	5.5	(4.8-6.3)	3.6	(3.1-4.2)	
Black, non-Hispanic	4.7	(2.9-7.4)	3.0	(1.8-4.7)	3.7	(2.5-5.6)	
Other, non-Hispanic	<sup>d</sup>	<sup>d</sup>	<sup>d</sup>	<sup>d</sup>	<sup>d</sup>	<sup>d</sup>	
Hispanic	<b></b> <sup>d</sup>	<sup>d</sup>	d	<sup>d</sup>	d	<b></b> <sup>d</sup>	
Household Income							
< \$20,000	8.2	(6.2-10.9)	7.8	(5.7-10.6)	7.9	(5.8-10.7)	
\$20,000 - \$34,999	5.9	(4.3-8.0)	5.7	(4.4-7.4)	4.1	(3.0-5.6)	
\$35,000 - \$49,999	7.6	(5.6-10.2)	5.4	(3.9-7.4)	3.7	(2.6-5.3)	
\$50,000 - \$74,999	4.2	(2.9-5.9)	5.0	(3.7-6.6)	2.4	(1.5-3.9)	
≥ \$75,000	2.5	(1.9-3.4)	2.9	(2.2-3.8)	1.5	(1.0-2.2)	
Health Insurance							
Insured	5.2	(4.6-5.9)	5.1	(4.5-5.8)	3.5	(3.1-4.1)	
Uninsured	<sup>d</sup>	<sup>d</sup>	<sup>d</sup>	<sup>d</sup>	<sup>d</sup>	d	
Disability Status							
No disabilities	3.2	(2.7-3.9)	3.2	(2.7-3.8)	1.7	(1.3-2.1)	
Adults with disabilities	9.8	(8.2-11.7)	10.0	(8.3-11.9)	8.2	(6.8-9.8)	

Among all adults, the proportion ever told by a doctor that: <sup>a</sup> they had a heart attack or myocardial infarction, <sup>b</sup> they had anging or coronary heart disease, or <sup>c</sup> they had a stroke

<sup>d</sup> Suppressed due to a denominator < 50 and/or a relative standard error > 30%.

### Cardiovascular Disease by Gender Michigan, 2020



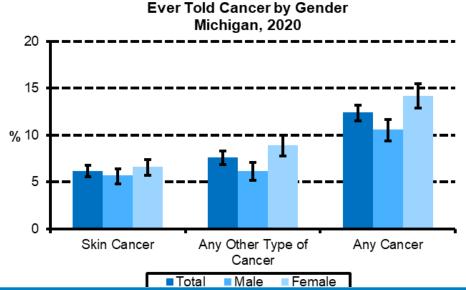
### Cancer

Cancer is the second leading cause of death in both Michigan and the U.S.<sup>28</sup> There are more than 100 different types of cancer and there are nearly 1.8 million new cases of cancer expected in 2020. By 2040, the expected number of new cases per year will rise to roughly 29.5 million.<sup>29</sup>

- In 2020, an estimated 6.2% of Michigan adults had ever been told by a doctor that they had skin cancer, and 7.6% reported ever being diagnosed with a type of cancer other than skin cancer.
- When combining these two measures into one indicator, an estimated 12.4% of Michigan adults had ever been told by a doctor that they had some form of cancer.
- Females (14.2%) were more likely than males (10.6%) to report ever being diagnosed with cancer.
- White, non-Hispanic adults (14.3%) reported a significantly higher prevalence of cancer than Black, non-Hispanic adults (7.0%).
- Adults with disabilities reported higher cancer prevalences than adults without disabilities.
- In 2020, the prevalence for skin cancer among Michigan adults (6.2%) was comparable to the U.S. median prevalence (6.3%). The prevalence for other types of cancer (7.6%) was higher than the U.S. median prevalence (6.8%).

	Ever Told Skin Cancer <sup>a</sup>		Any	Ever Told Any Other Types of Cancer <sup>b</sup>		Ever Told Cancer <sup>c</sup>	
Demographic Characteristics	%	95% Confidence Interval	%	95% Confidence Interval	%	95% Confidence Interval	
Total	6.2	(5.6-6.8)	7.6	(6.9-8.3)	12.4	(11.6-13.3)	
Age							
18 - 34	d	<sup>d</sup>	d	<sup>d</sup>	d	<sup>d</sup>	
35 - 44	d	<sup>d</sup>	4.1	(2.6-6.4)	5.1	(3.4-7.5)	
45 - 54	4.1	(2.9-5.7)	4.8	(3.5-6.5)	8.7	(6.9-10.8)	
55 - 64	6.7	(5.3-8.4)	9.3	(7.6-11.4)	15.0	(12.9-17.5)	
65 - 74	14.2	(12.1-16.5)	16.7	(14.4-19.3)	27.0	(24.2-30.0)	
75 +	23.2	(20.3-26.4)	19.4	(16.4-22.8)	36.7	(33.1-40.5)	
Gender							
Male	5.7	(5.0-6.6)	6.2	(5.3-7.2)	10.6	(9.5-11.8)	
Female	6.6	(5.8-7.5)	8.9	(7.8-10.0)	14.2	(12.9-15.5)	
Race/Ethnicity							
White, non-Hispanic	7.8	(7.1-8.5)	8.2	(7.4-9.0)	14.3	(13.3-15.4)	
Black, non-Hispanic	<b></b> d	d	6.4	(4.5-9.0)	7.0	(5.0-9.7)	
Other, non-Hispanic	<b></b> d	d	3.1	(1.8-5.1)	4.9	(3.0-7.8)	
Hispanic	<b></b> d	<sup>d</sup>	<b></b> <sup>d</sup>	d	d	<sup>d</sup>	
Household Income							
< \$20,000	5.2	(3.7-7.3)	9.3	(7.0-12.2)	13.9	(11.2-17.3)	
\$20,000 - \$34,999	5.3	(4.0-6.8)	7.0	(5.5-8.8)	11.2	(9.3-13.5)	
\$35,000 - \$49,999	6.1	(4.7-7.8)	7.5	(5.8-9.7)	12.0	(9.9-14.5)	
\$50,000 - \$74,999	6.3	(4.9-8.1)	8.6	(6.6-11.0)	13.6	(11.3-16.4)	
≥ \$75,000	5.9	(5.0-6.9)	5.5	(4.5-6.6)	10.4	(9.1-11.8)	
Health Insurance							
Insured	6.5	(6.0-7.2)	7.9	(7.1-8.7)	13.1	(12.2-14.0)	
Uninsured	d	<sup>d</sup>	d	<sup>d</sup>	4.1	(2.3-7.1)	
Disability Status							
No disabilities	5.4	(4.8-6.0)	5.4	(4.8-6.2)	9.8	(8.9-10.7)	
Adults with disabilities	8.7	(7.4-10.1)	13.2	(11.4-15.3)	19.7	(17.6-22.0)	

Among all adults, the proportion ever told by a doctor that: <sup>a</sup> they had skin cancer, <sup>b</sup> they had a form of cancer other than skin cancer, or <sup>c</sup> they had skin cancer or any other type of cancer. <sup>d</sup> Suppressed due to a denominator < 50 and/or a relative standard error > 30%.



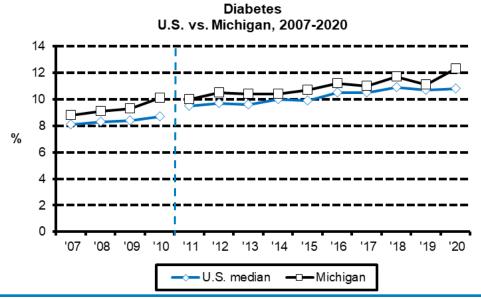
### Diabetes

In 2019, diabetes was the seventh leading cause of death in both Michigan and the U.S.<sup>28</sup> Obesity, poor diet, physical inactivity, and high blood pressure are just a few of the known risk factors that are associated with the development of diabetes.<sup>30</sup>

- In 2020, an estimated 12.3% of Michigan adults reported ever being told by a doctor that they had diabetes.
- The prevalence of diabetes increased with age and decreased with increasing household income level.
- The prevalence of diabetes was higher among Black, non-Hispanic adults (16.7%) compared to white, non-Hispanic adults (11.8%).
- Adults with disabilities (21.6%) were more likely to be have been diagnosed with diabetes than adults without disabilities (8.6%).
- The prevalence of diabetes was similar by gender and health insurance status.
- Obese (20.4% [95% CI: 18.4-22.5]) and overweight (10.2% [95% CI: 8.7-11.9]) adults reported significantly higher lifetime prevalences of diabetes than healthy weight adults (5.0% [95% CI: 4.0-6.3]).
- Prior to the BRFSS methodology changes that were implemented in 2011, the prevalence of diabetes among Michigan adults was increasing slightly over time. From 2011 to 2020, the prevalence of diabetes slightly went up.
- In 2020, the prevalence of diabetes among Michigan adults (12.3%) was higher than the U.S. median prevalence (10.8%).

	Ever Told Diabetes <sup>a</sup>		
Demographic Characteristics	%	95% Confidence Interval	
Total	12.3	(11.4-13.3)	
Age			
18 - 24	<sup>b</sup>	b	
25 - 34	2.9	(1.6-5.0)	
35 - 44	5.5	(3.8-8.0)	
45 - 54	14.8	(12.1-18.0)	
55 - 64	17.8	(15.4-20.6)	
65 - 74	23.7	(21.0-26.7)	
75 +	23.9	(20.5-27.7)	
Gender			
Male	13.2	(11.8-14.7)	
Female	11.5	(10.3-12.8)	
Race/Ethnicity			
White, non-Hispanic	11.8	(10.8-12.8)	
Black, non-Hispanic	16.7	(13.5-20.5)	
Other, non-Hispanic	11.9	(8.2-17.0)	
Hispanic	8.2	(4.9-13.6)	
Household Income			
< \$20,000	18.8	(15.5-22.7)	
\$20,000 - \$34,999	14.4	(12.0-17.2)	
\$35,000 - \$49,999	12.1	(9.8-14.9)	
\$50,000 - \$74,999	10.9	(8.8-13.3)	
≥ \$75,000	8.0	(6.7-9.6)	
Health Insurance			
Insured	12.5	(11.5-13.5)	
Uninsured	9.3	(6.3-13.6)	
Disability Status			
No disabilities	8.6	(7.7-9.6)	
Adults with disabilities	21.6	(19.3-24.1)	

<sup>a</sup> Among all adults, the proportion reporting that they were ever told by a doctor that they had diabetes. Adults told they have prediabetes and women who had diabetes only during pregnancy were classified as not having been diagnosed.
<sup>b</sup> Suppressed due to a denominator of < 50 and/or a relative standard error > 30%.



Due to methodology changes that took place in 2011, BRFSS estimates from 2011 and moving forward cannot be compared to BRFSS estimates from 2010 and earlier.

#### 28

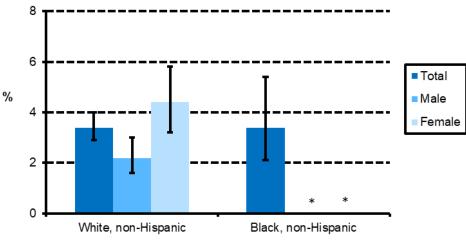
# **Kidney** Disease

Kidney disease is a condition in which the kidneys are damaged and cannot filter blood properly. Adults with diabetes or hypertension are at increased risk of kidney disease. Kidney disease is also a risk factor for the development of cardiovascular disease.

- In 2020, an estimated 3.2% of Michigan adults reported ever being told by a doctor that they had kidney disease.
- The prevalence of kidney disease significantly increased with age from 1.8% among adults aged 45-54 years to 7.8% among those aged 75+ years.
- Adults with household income ≥ \$75,000 (2.0%) reported a significant lower prevalence of kidney disease than those with household income between \$20,000 and \$34,999 (4.5%).
- The prevalence of kidney disease was similar by gender and ٠ by race/ethnicity.
- Adults with disabilities (7.7%) were more likely to have been diagnosed with kidney disease than adults without disabilities (1.5%).
- White, non-Hispanic females (4.4% [95% CI: 3.2-5.8]) reported a significantly higher prevalence of kidney disease than white, non-Hispanic males (2.2% [95% CI: 1.6-3.0]).
- Michigan adults with diabetes (12.2% [95% CI: 9.7-15.2]) were ٠ over six times more likely to have being diagnosed with kidney disease than adults without diabetes (1.9% [95% CI: 1.6-2.4]).
- In 2020, the prevalence of kidney disease among Michigan ٠ adults (3.2%) was slightly higher than the U.S. median prevalence (2.9%).

	Ever Told Kidney Disease <sup>a</sup>			
Demographic Characteristics	%	95% Confidence Interval		
Total	3.2	(2.7-3.7)		
Age				
18 - 24	<sup>b</sup>	b		
25 - 34	<b></b> b	b		
35 - 44	<sup>b</sup>	b		
45 - 54	1.8 (1.1-3.0)			
55 - 64	3.1	(2.3-4.3)		
65 - 74	8.3 (6.5-10.5)			
75 +	7.8	(5.9-10.3)		
Gender		. ,		
Male	2.5	(2.0-3.2)		
Female	3.8	(3.1-4.7)		
Race/Ethnicity				
White, non-Hispanic	3.4	(2.9-4.0)		
Black, non-Hispanic	3.4 (2.1-5.4)			
Other, non-Hispanic	bb			
Hispanic	bb			
Household Income				
< \$20,000	3.8	(2.5-5.6)		
\$20,000 - \$34,999	4.5	(3.2-6.2)		
\$35,000 - \$49,999	3.0	(2.0-4.6)		
\$50,000 - \$74,999	3.3	(2.2-4.9)		
≥ \$75,000	2.0	(1.4-2.8)		
Health Insurance				
Insured	3.4	(3.0-4.0)		
Uninsured	<sup>b</sup>	b		
Disability Status				
No disabilities	1.5	(1.2-1.9)		
Adults with disabilities	7.7	(6.3-9.4)		

<sup>a</sup> Among all adults, the proportion reporting ever being told by a doctor that they <sup>b</sup> Suppressed due to a denominator < 50 and/or a relative standard error > 30%.



#### Kidney Disease by Race and Gender Michigan, 2020

\*Suppressed due to a denominator of < 50 and/or a relative standard error > 30%

## Depression

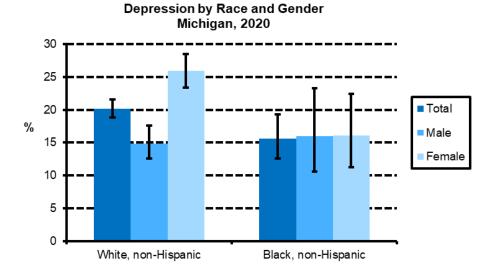
Depression is a common and treatable medical disorder that is more common among individuals with chronic conditions such as obesity, diabetes, and arthritis. $^{32}$ 

- In 2020, an estimated 19.5% of Michigan adults reported ever being told by a doctor that they had a depressive disorder including depression, major depression, dysthymia, or minor depression.
- The prevalence of depression decreased with age and increasing household income level.
- Females (25.0%) reported a significantly higher prevalence of depression than males (13.8%).
- The prevalence of depression was similar by race/ethnicity and health insurance status.
- Adults with disabilities (37.9%) were more likely to have been diagnosed with depression than adults without disabilities (12.8%).
- White, non-Hispanic females (25.9%) reported a significantly higher prevalence of depression than white, non-Hispanic males (14.9%).
- In 2020, the prevalence of depression among Michigan adults (19.5%) was comparable to the U.S. median prevalence (19.2%).

	Ever Told Depression <sup>a</sup>			
Demographic Characteristics	%	95% Confidence Interval		
Total	19.5	(18.3-20.8)		
Age				
18 - 24	21.4	(17.3-26.1)		
25 - 34	23.9	(20.4-27.7)		
35 - 44	23.1 (19.8-26.6)			
45 - 54	20.8 (17.5-24.5)			
55 - 64	16.5	(14.3-19.0)		
65 - 74	19.8 (17.3-22.7			
75 +	8.5	(6.8-10.7)		
Gender				
Male	13.8	(12.3-15.4)		
Female	25.0	(23.2-26.9)		
Race/Ethnicity				
White, non-Hispanic	20.2	(18.8-21.6)		
Black, non-Hispanic	15.6	(12.6-19.3)		
Other, non-Hispanic	16.9 (12.2-23.0)			
Hispanic	25.3 (17.7-34.8)			
Household Income				
< \$20,000	33.6	(29.2-38.2)		
\$20,000 - \$34,999	23.1	(19.8-26.6)		
\$35,000 - \$49,999	18.1	(14.6-22.2)		
\$50,000 - \$74,999	18.9	(16.2-22.1)		
≥ \$75,000	11.0	(9.5-12.7)		
Health Insurance				
Insured	20.0	(18.8-21.4)		
Uninsured	14.1	(10.6-18.5)		
Disability Status				
No disabilities	12.8	(11.6-14.0)		
Adults with disabilities	37.9	(34.9-41.0)		

Ever Told Depression<sup>a</sup>

<sup>a</sup> Among all adults, the proportion reporting ever being told by a doctor that they had a depressive disorder including depression, major depression, dysthymia, or minor depression.



# Acknowledgements

Data was collected for the 2020 Michigan Behavioral Risk Factor Survey (MiBRFS) by the Institute for Public Policy and Social Research, Office for Survey Research at Michigan State University. The authors are grateful to Linda Stork, Debra Rusz, and the many BRFSS supervisors and interviewers for conducting the survey. The photos on the front cover were courtesy of the Centers for Disease Control and Prevention Public Health Image Library (CDC/James Gathany, Lauren Bishop, Amanda Mills).

The assistance and financial support provided by the Population Health Surveillance Branch of the Centers for Disease Control and Prevention and our many MDHHS program partners are greatly appreciated.

We are especially grateful to the residents of Michigan who agreed to participate in this survey.

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