



Health Status

Measurements of health status include self-perceived health status, body weight, and prevalence of chronic diseases such as asthma, diabetes, and hypertension.

Perceptions of Health Status

Self-assessed health is a broad indicator of health and well being which incorporates a variety of physical, emotional, and personal components of health. Several studies have shown that self-assessed health is a valid and reliable indicator of a person's overall health status¹ and a powerful predictor of mortality² and changes in physical functioning.³ It may also determine the perceived need and demand for health care and other health-related services.

WHAT DID THE SURVEY MEASURE?

Health Status

Respondents (18 and older) rated their physical health as excellent, very good, good, fair, or poor.

FINDINGS ABOUT SELF-PERCEIVED HEALTH STATUS

- Percentages of Los Angeles County residents who assess their health as “poor” or “fair” are highest among:
 - Those with lower incomes, defined by the percent of federal poverty level.
 - Latinos (30%) and Asians (27%), followed by African-Americans (18%), and whites (12%).
- A higher proportion of females (24%) perceive their health as “poor” or “fair” than do males (17%).
- Of those uninsured, 29% perceive their health as “poor” or “fair.”
- Twenty-seven percent of adults with no regular source of care perceive their health as “poor” or “fair.”

Note: For more detailed data on self-perceived health status at the county, service planning area, and health district levels, please refer to Appendices B-4, C-1 through C-8.

1. Tissue T. Another look at self-rated health among the elderly. *J Gerontol*, 1972;27:91-94.
 2. Idler El, Benyamini Y. Self-rated health and mortality: A review of twenty-seven community studies. *Journal of Health and Social Behavior*, 1997;38:21-37.
 3. Idler El, Kasal SV. Self-ratings of health: do they also predict change in functional ability? *J Gerontol B Psychol Sci Soc Sci.*, 1995;50B(6):S344-53.

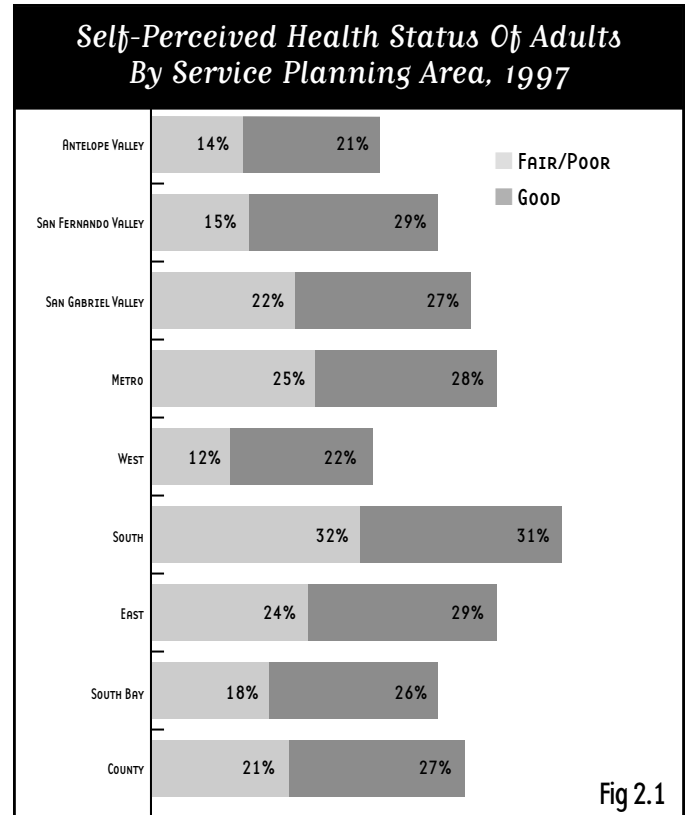


Fig 2.1

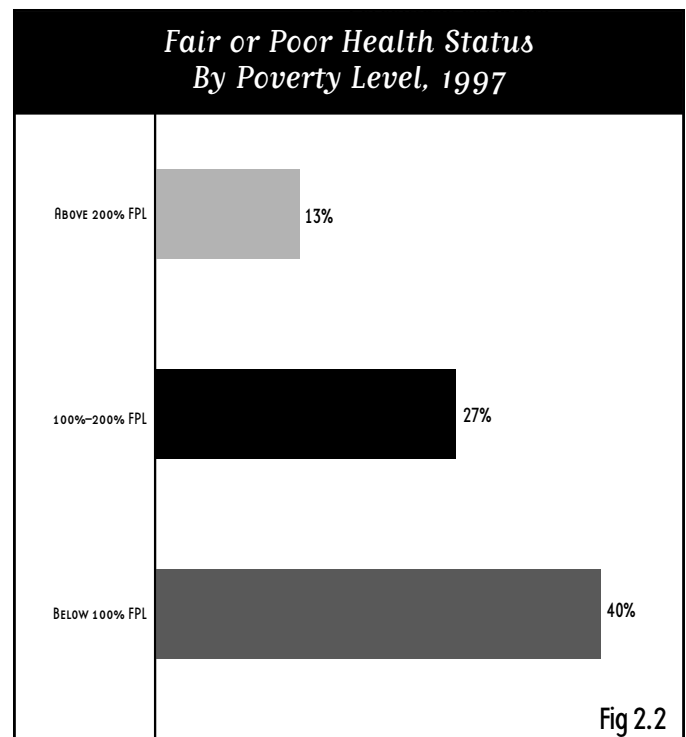


Fig 2.2

• For a family of four, the 1997 federal poverty level is \$16,050 a year and 200% of poverty is \$32,100.

Overweight

Persons who are overweight are at increased risk for a variety of medical conditions including heart disease, stroke, diabetes mellitus, arthritis, gallbladder disease, and certain types of cancer.⁴ Being overweight is associated with an increased risk of death among middle-aged and older adults.⁵

- Those who perceive their health as “poor” to “fair” have a higher prevalence of severe overweight (22%) compared to those who perceive their health as “very good” to “excellent” (10%).
- This prevalence is also higher in persons with less than a high school education (22%) than in those who have completed college (10%).

Note: For more detailed data on self-perceived health status at the county, services planning area, and health district levels, please refer to Appendices B-4, C-1 through C-8.

WHAT DID THE SURVEY MEASURE?

Body Mass Index

Calculated from self-reported height (feet and inches) x weight (pounds) according to the following formula: $703 \times \text{weight (lbs.)} / \text{height (in.)}^2$.

Overweight

Mildly to moderately overweight corresponds to a BMI equal to or greater than 25 but less than 30. Severely overweight corresponds to a BMI equal to or greater than 30.

Perceptions of Weight

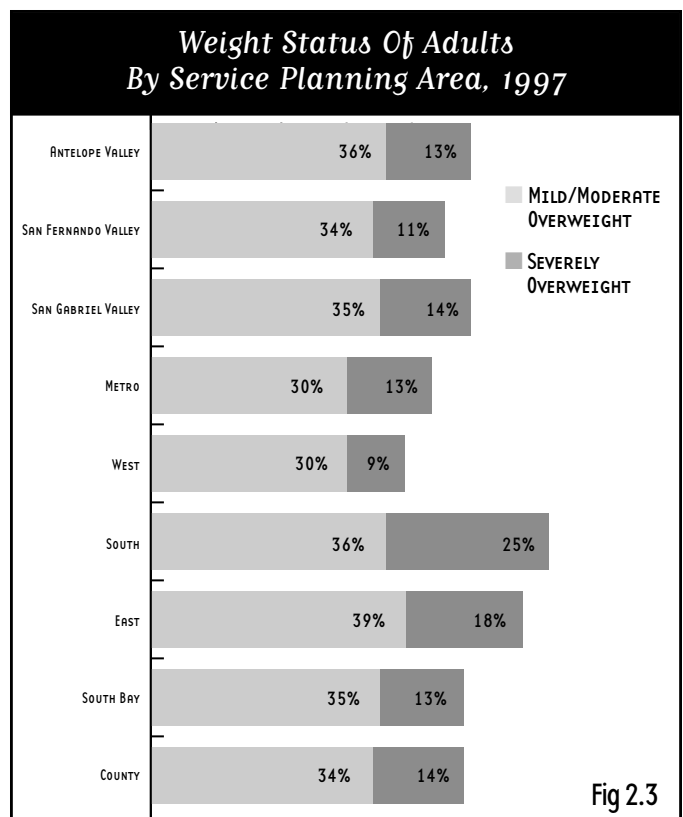
Respondents (18 and older) are asked whether they consider themselves to be overweight, underweight, or about average for their height.

FINDINGS ABOUT WEIGHT STATUS

- Overall, 14% of adults in Los Angeles County are severely overweight.
- The prevalence of severe overweight varies slightly by gender.
- African-Americans (22%) and Latinos (17%) have the highest proportion of severely overweight adults, followed by whites (12%) and Asians (4%).
- The prevalence of severe overweight increases with advancing age, from 9% in 18–29 year olds to 18% in adults 50 years and older.

4. Pi-Sunyer FX. Medical hazards of obesity. *Ann Intern Med*, 1993;119:655-660.

5. Stevens J, Jianwen C, Pamuk ER, et al. The effect of age on the association between body-mass index and mortality. *New England Journal of Medicine*, 1998;338:1-7.



Chronic Conditions

WHAT DID THE SURVEY MEASURE?

Chronic Conditions

Self-reported conditions: diabetes, high blood pressure or hypertension, and arthritis.

Asthma (in children, 0–17 only)

Reported by the parent or legal guardian of child in the household.

Current Receipt of Medical Treatment for Chronic Conditions

Respondents answered whether they are currently being treated by a physician for each of the above conditions.

DIABETES

Diabetes mellitus is a condition characterized by high levels of blood glucose resulting from defects in insulin secretion, insulin action, or both. In 1997, diabetes was the eighth leading cause of death in Los Angeles County and accounted for nearly 13 deaths per 100,000 population.⁶

FINDINGS ABOUT DIABETES

- Diabetes prevalence is highest among African-Americans (9%) followed by Latinos (6%), whites and Asians (5%).
- Diabetes is more prevalent in adults 50 years and older (13%).
- Those with less than a high school education have a higher prevalence of diabetes (8%) compared to college graduates (4%).

Note: For more detailed data on diabetes at the county, service planning area, and health district levels, please refer to Appendices B-4, C-1 through C-8.

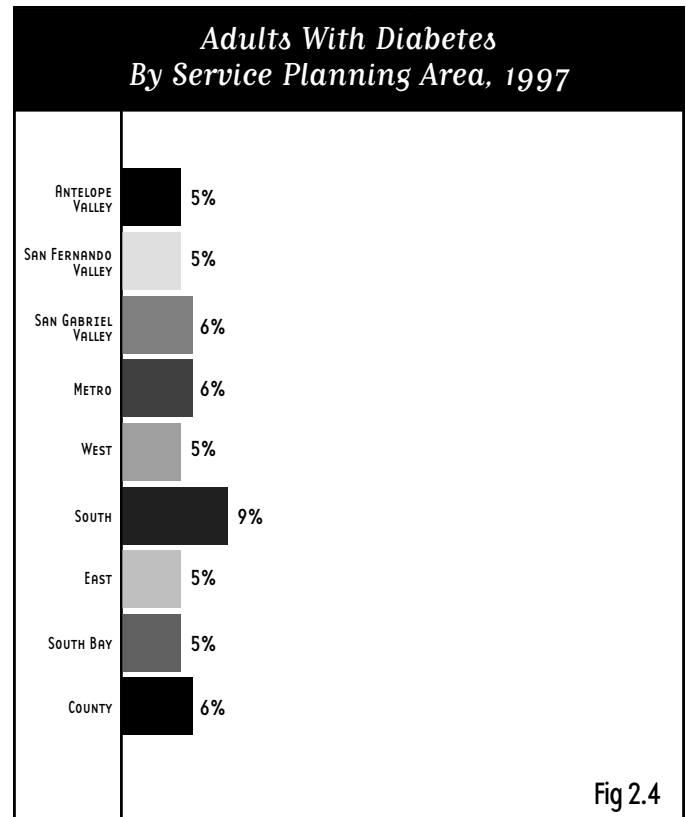


Fig 2.4

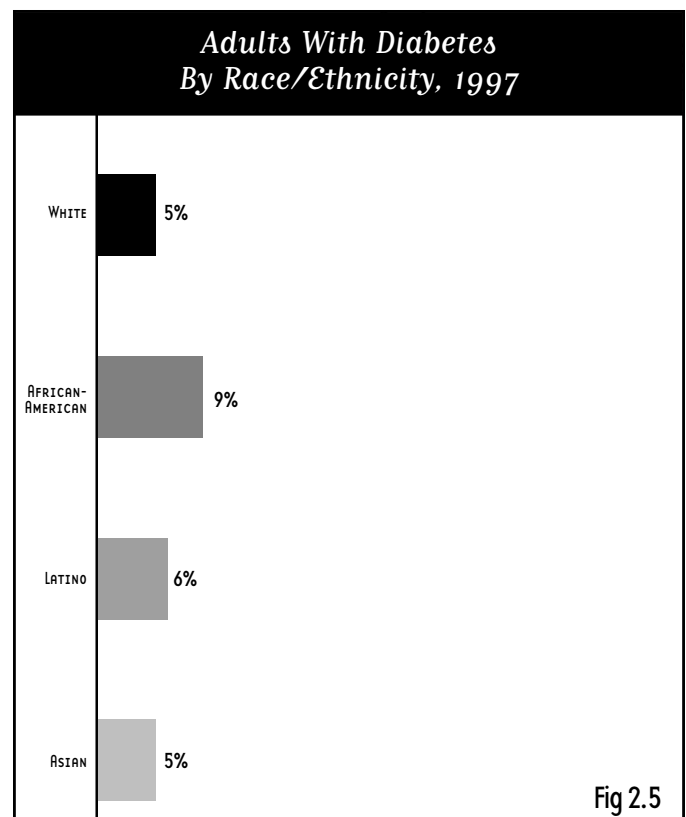


Fig 2.5

⁶ Department of Health Services, Los Angeles County, Data Collection and Analysis Unit.

HYPERTENSION

Hypertension, or high-blood pressure, is a risk factor for heart disease and stroke, the first and third leading causes of death in Los Angeles County in 1997.⁶ The risk of stroke and heart disease can be reduced with the effective management of hypertension, which can be accomplished through medicine, diet, and physical activity.

FINDINGS ABOUT HYPERTENSION

- Females (18%) have a higher prevalence of hypertension than males (14%).
- Prevalence of hypertension is highest among African-Americans (28%) and whites (17%) followed by Asians (14%) and Latinos (12%).
- Hypertension prevalence varies little by family income.
- Hypertension prevalence increases with advancing age, from 4% in 18–29 years old to 35% in adults aged 50 and older.

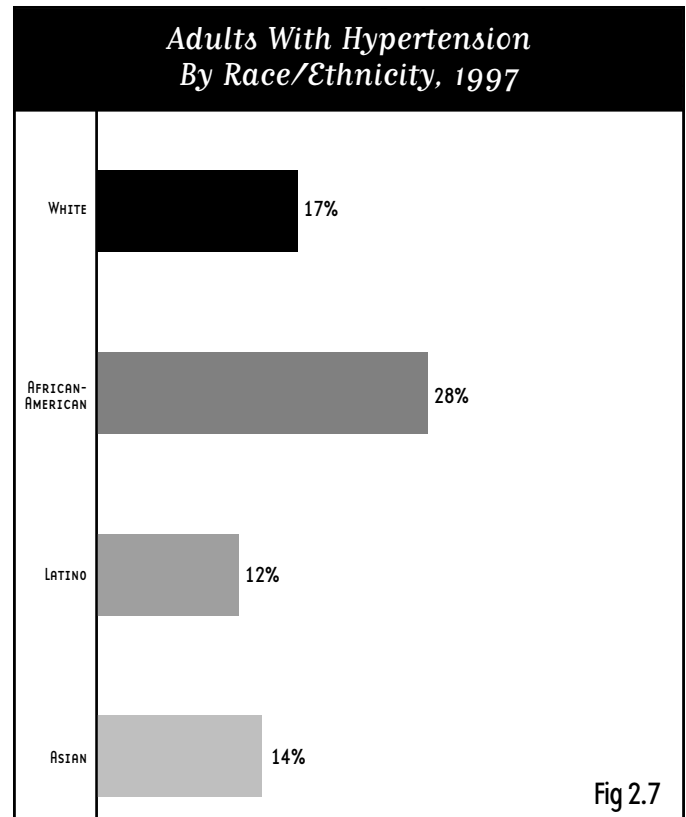


Fig 2.7

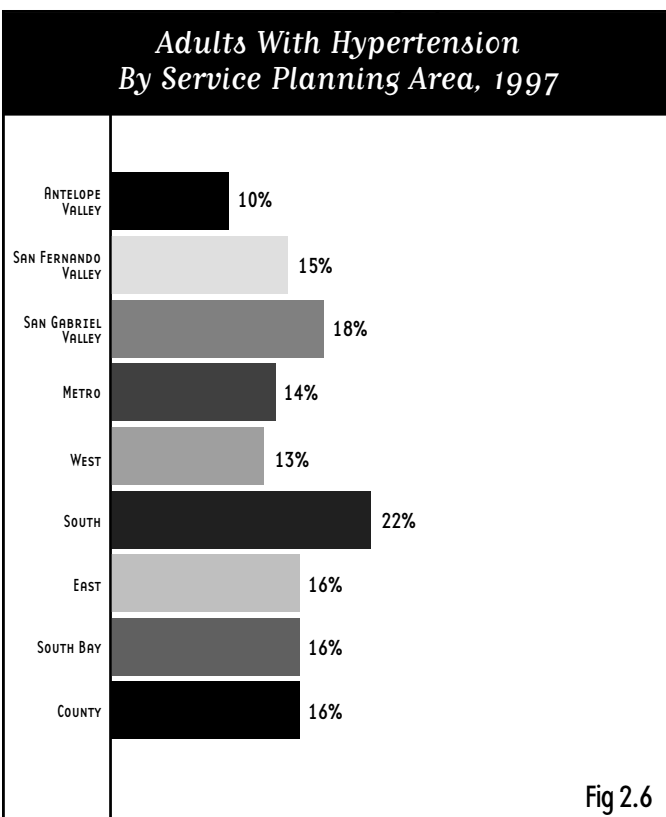


Fig 2.6

- Those with less than a high school education have a higher prevalence of hypertension (19%) than college graduates (13%).

Note: For more detailed data on diabetes at the county, service planning area, and health district levels, please refer to Appendices B-4, C-1 through C-8.

ARTHRITIS

The word arthritis means joint inflammation and is associated with more than 100 diseases that can cause pain, stiffness, and swelling in the joints. These diseases may affect not only the joints but also other parts of the body, including important supporting structures such as muscles, bones, tendons, and ligaments, as well as some internal organs. More than 40 million Americans suffer from some form of arthritis, and many have chronic pain that limits daily activity and may negatively impact quality of life.⁷

7. Humphrey N. CDC calls arthritis the epidemic of the future. VUMC Reporter, Vanderbilt University Medical Center, 1994;4(25):1,3.

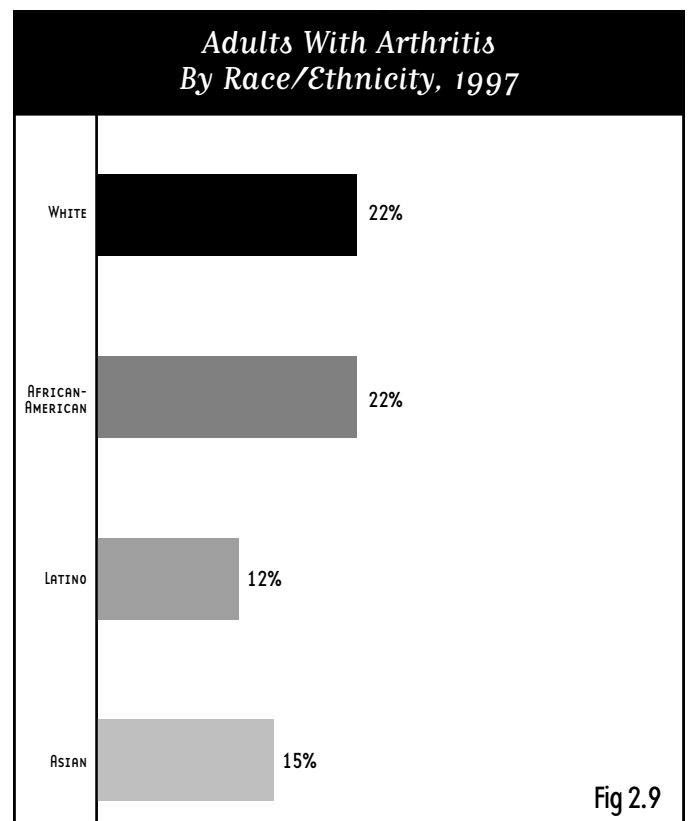
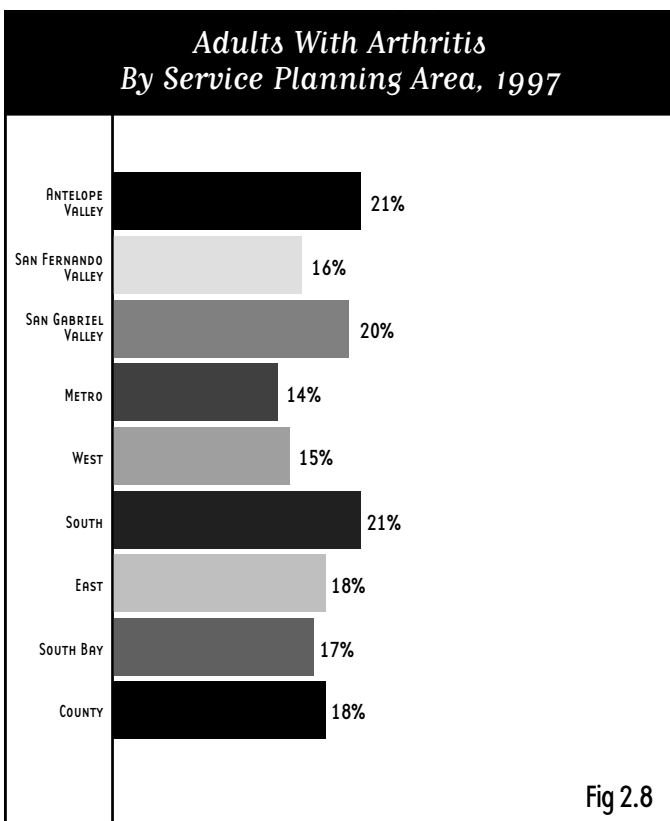
Chronic Conditions continued

FINDINGS ABOUT ARTHRITIS

- Arthritis varies significantly by gender. Twenty-two percent of females have arthritis compared to 13% of males.
- Whites (22%) and African-Americans (22%) have the highest prevalence of arthritis compared to Asians (15%) and Latinos (12%).

- Forty percent of adults aged 50 years and older have arthritis compared to 3% of 18–29 year olds, 7% of 30–39 year olds and 17% of 40–49 year olds.
- Adults with less than a high school education have a higher prevalence of arthritis (21%) than college graduates (14%).

Note: For more detailed data on diabetes at the county, service planning area, and health district levels, please refer to Appendices B-4, C-1 through C-8.



ASTHMA IN CHILDREN

Asthma is the most common chronic disease in childhood.⁸ Nearly 5 million children under age 18 in the United States have asthma.⁹ Many more probably have undiagnosed asthma. Because asthma restricts breathing, it is dangerous when left untreated. With treatment, however, most children with asthma enjoy a full range of activity, including exercise and sports.

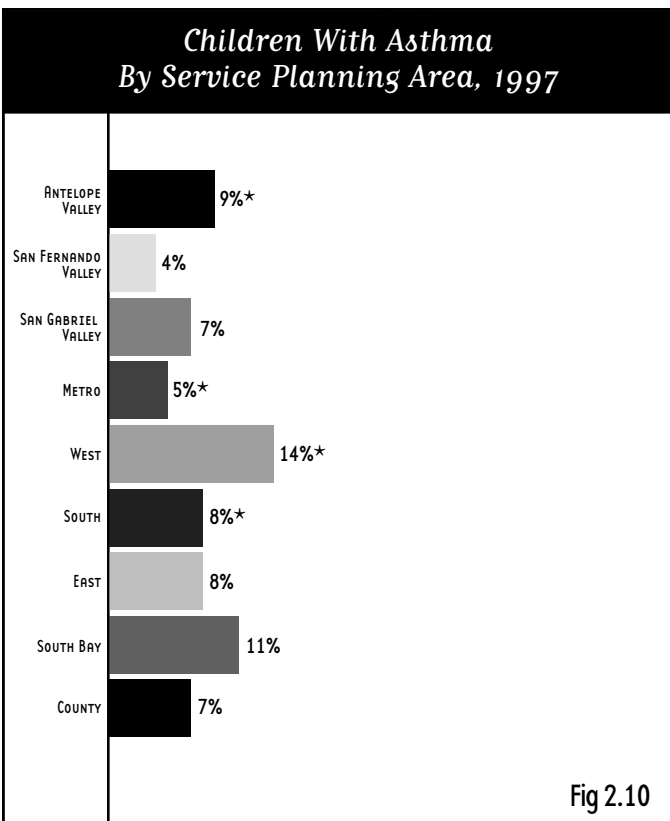
8. Weinberger M, "Treatment of acute asthma in children," *Pediatric Allergy and Pulmonary Division, University of Iowa College Medicine, 1997.*

9. Clark NM, et al. *Childhood Asthma. Environ Health Perspect 1999;107(3):421-429.*

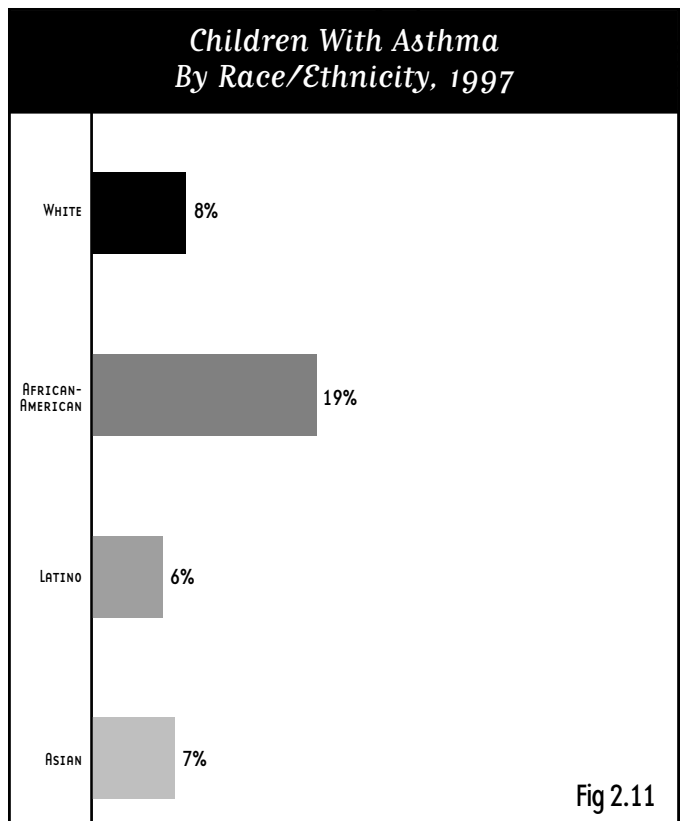
FINDINGS ABOUT ASTHMA (CHILDREN 0-17)

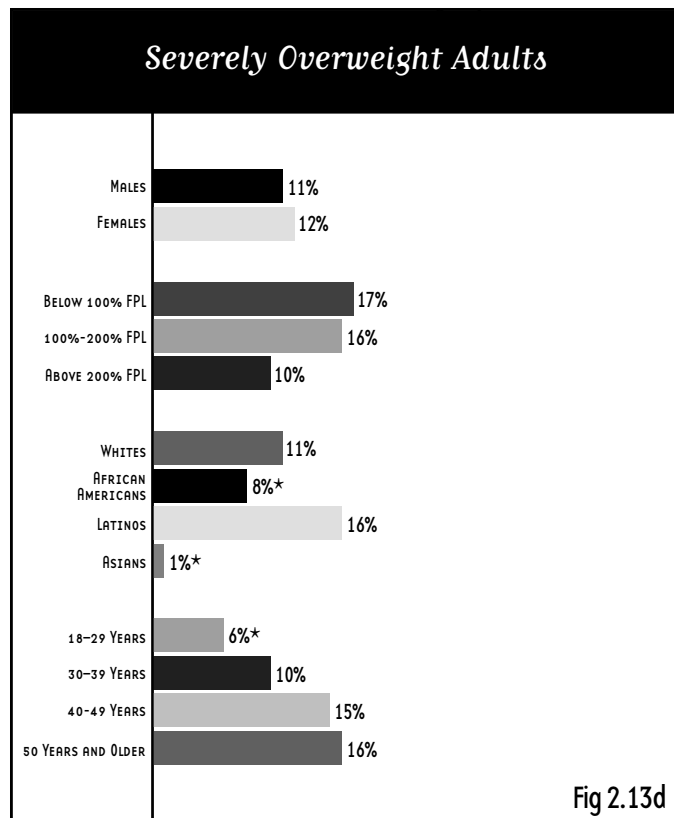
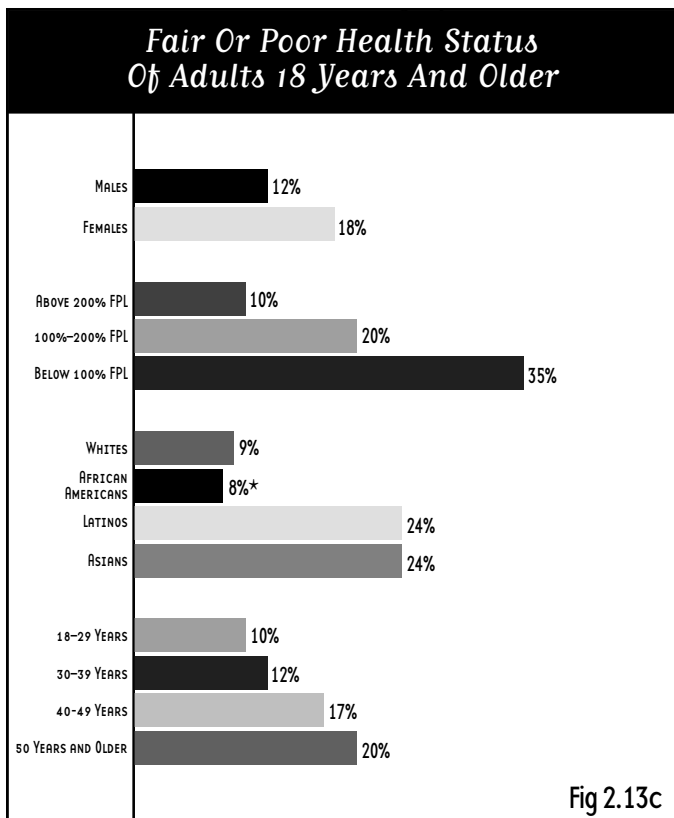
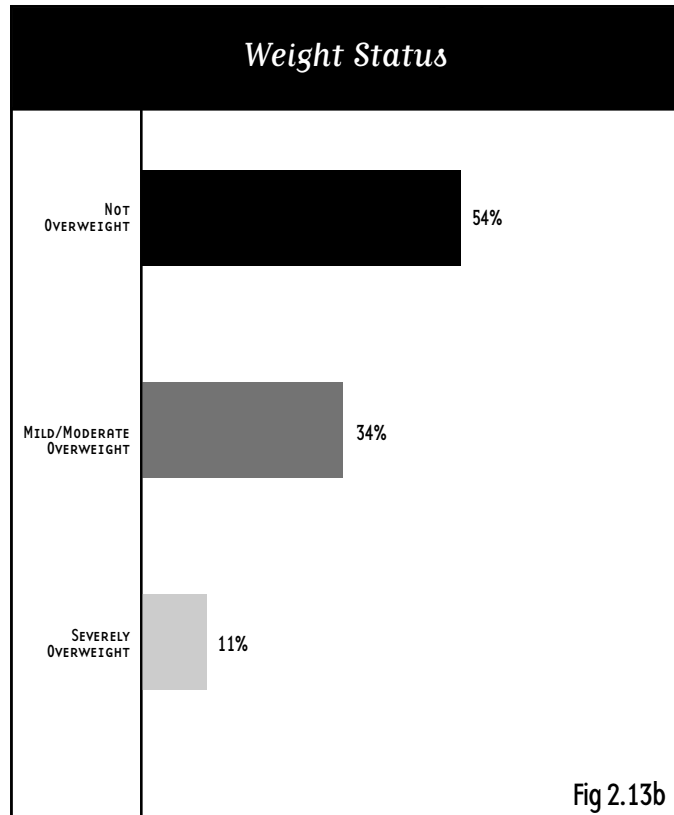
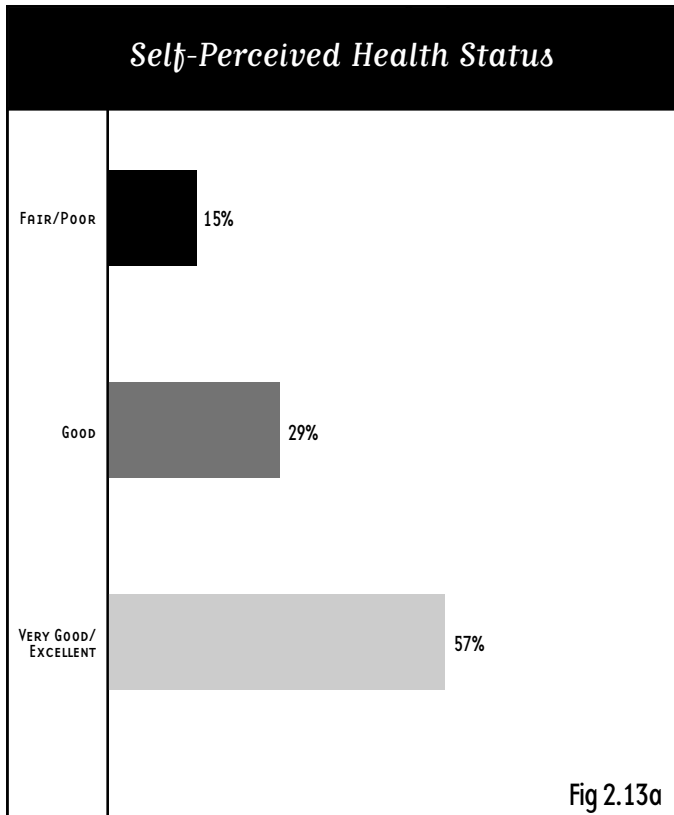
- Prevalence of asthma varies slightly by gender and family income.
- Asthma prevalence is highest in African-Americans (19%) followed by whites (8%), Asians (7%) and Latinos (6%).
- Children ages 5–12 years old and 13–17 years old both have a higher prevalence of asthma (9%) compared to those less than 4 years old.

Note: For more detailed data on asthma in children at the county, services planning area, and health district levels, please refer to Appendices B-3, C-1 through C-8.



* Prevalence for noted subgroup is based on small numbers (fewer than 30 respondents in the subgroup).

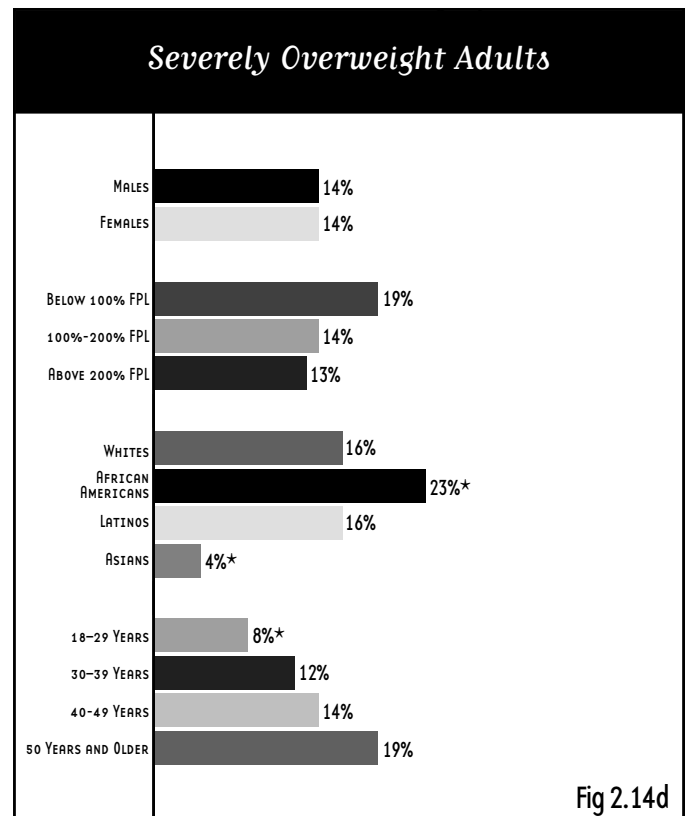
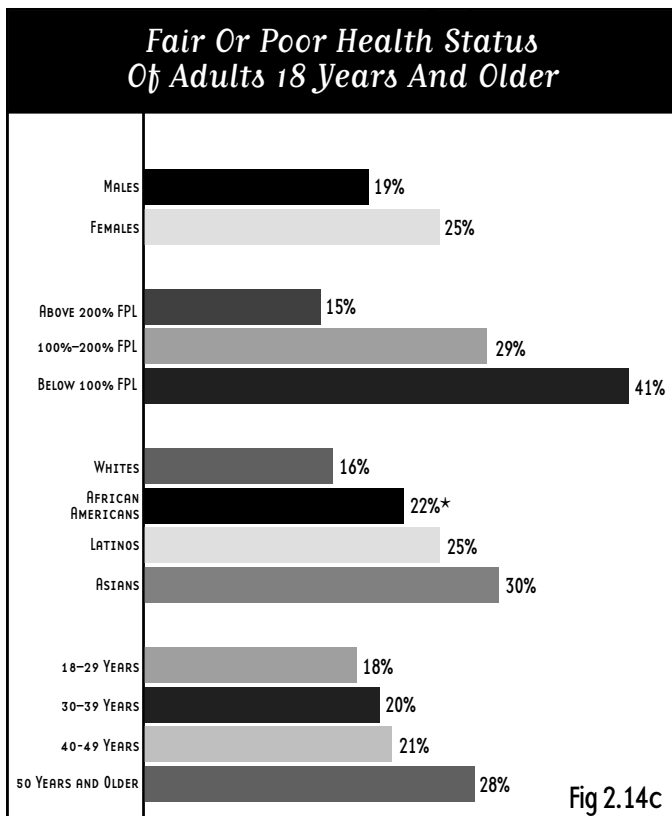
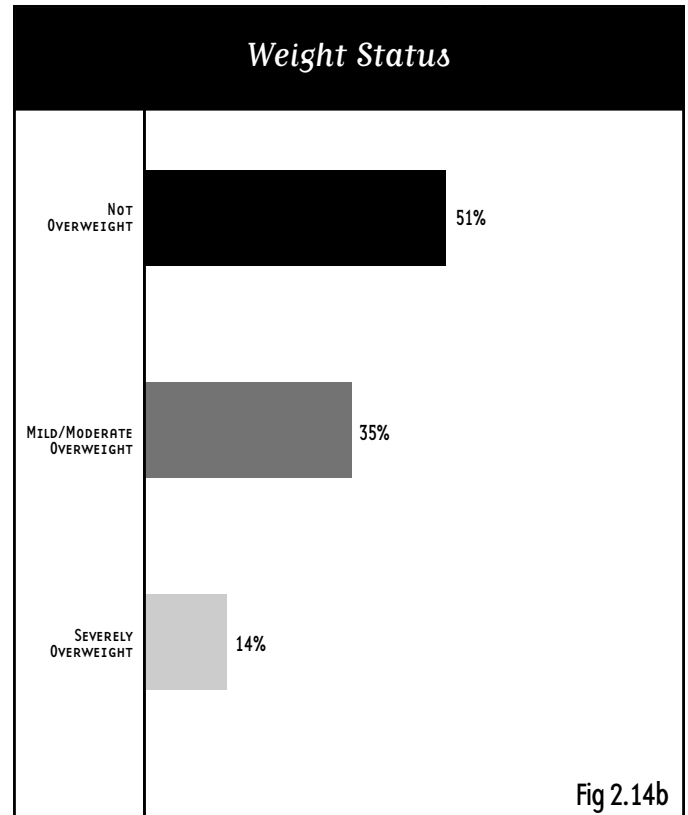
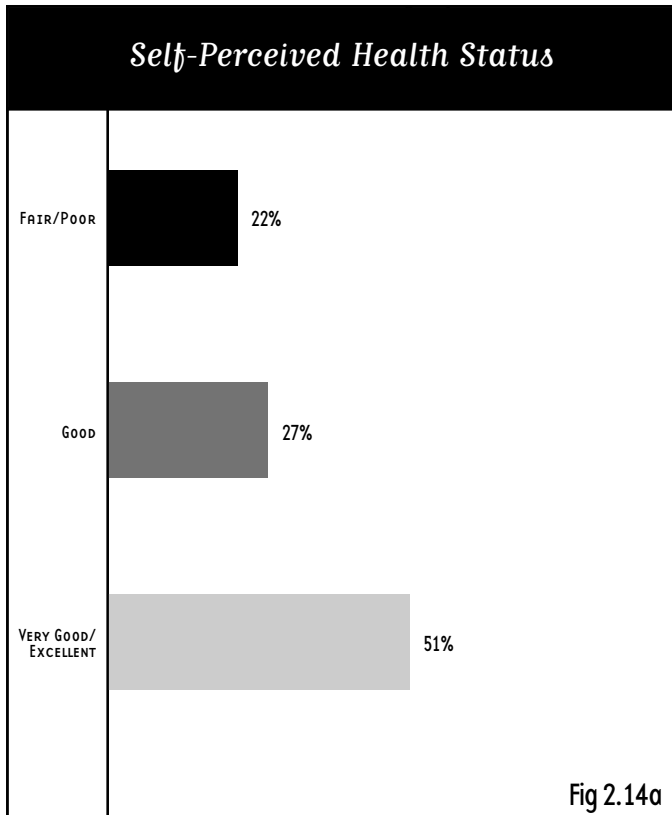




* For a family of four, the 1997 federal poverty level is \$16,050 a year and 200% of poverty is \$32,100.

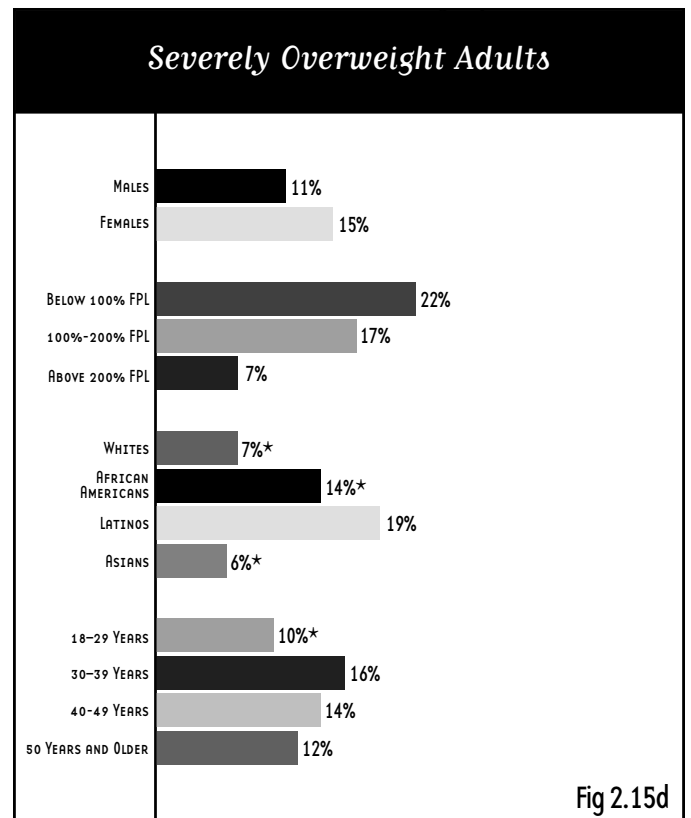
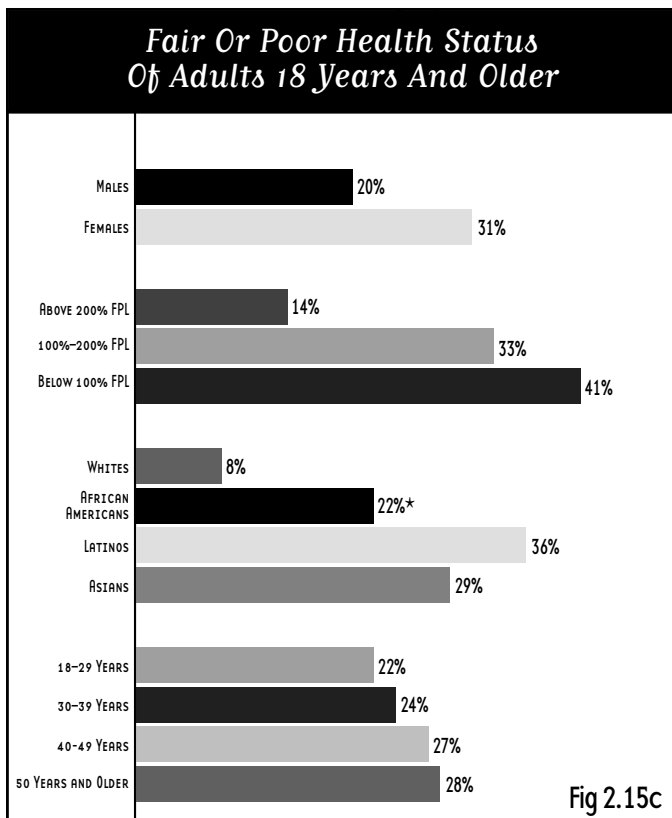
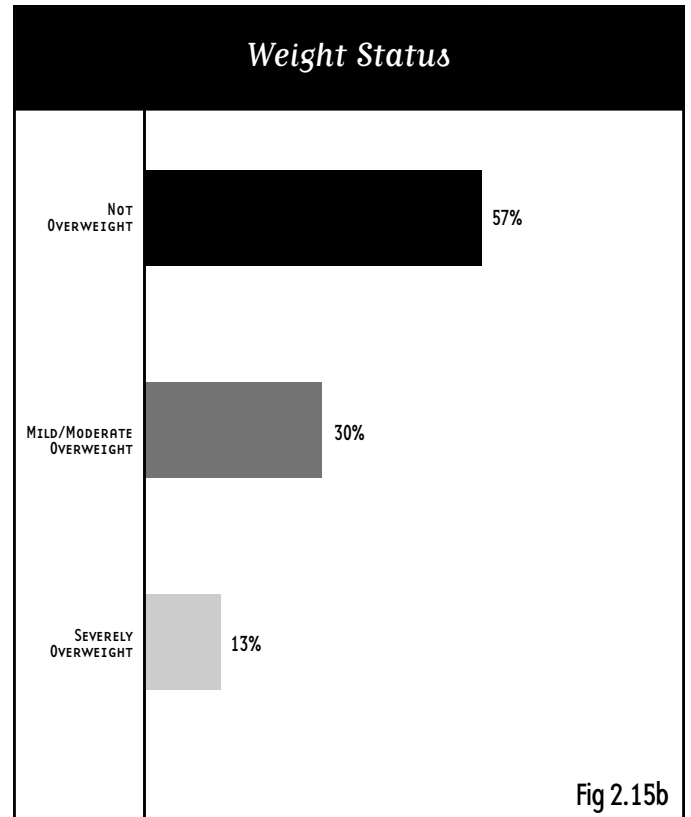
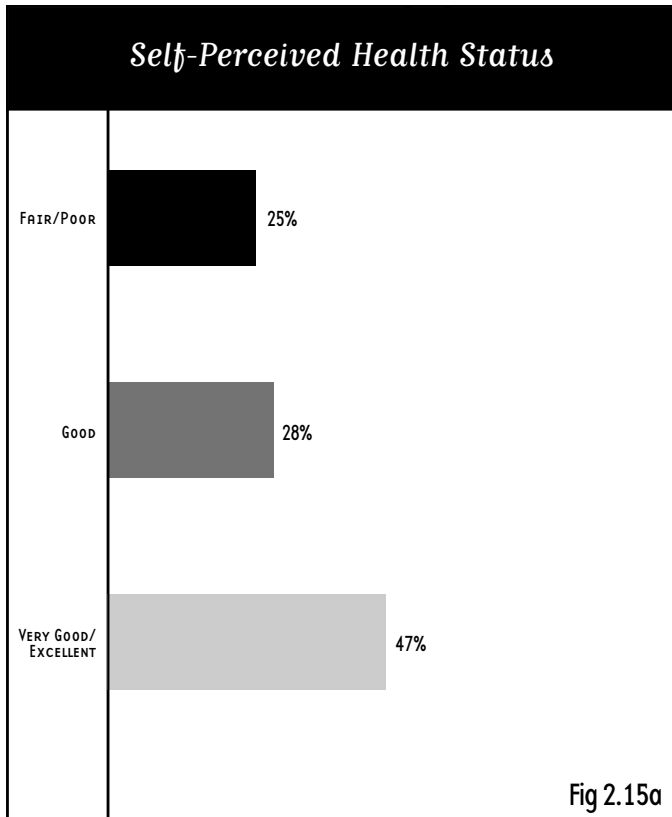
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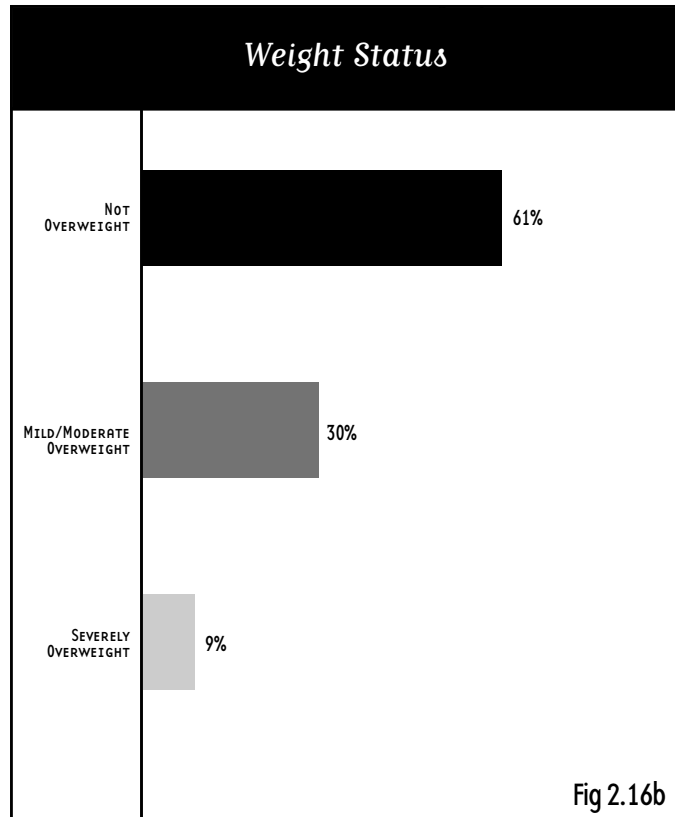
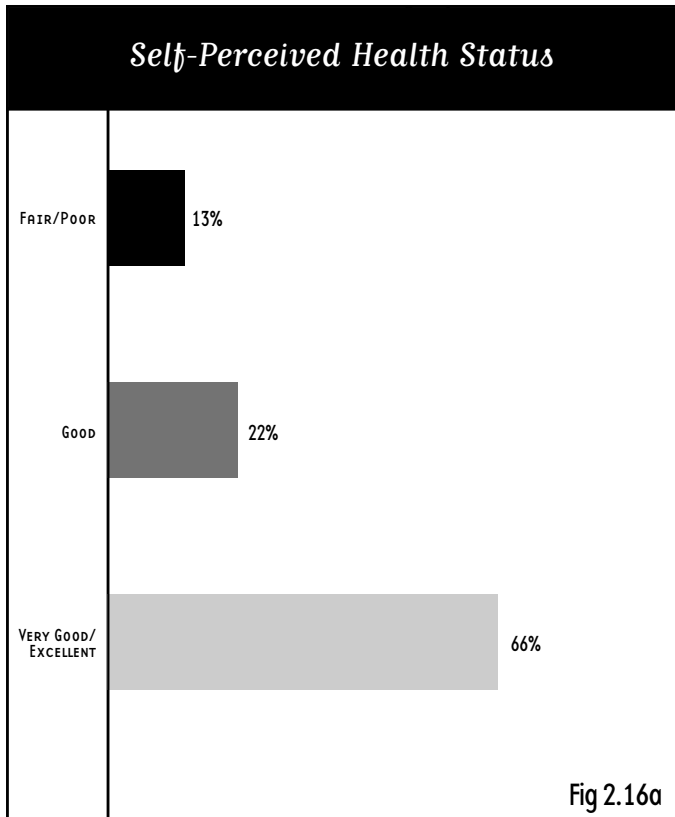
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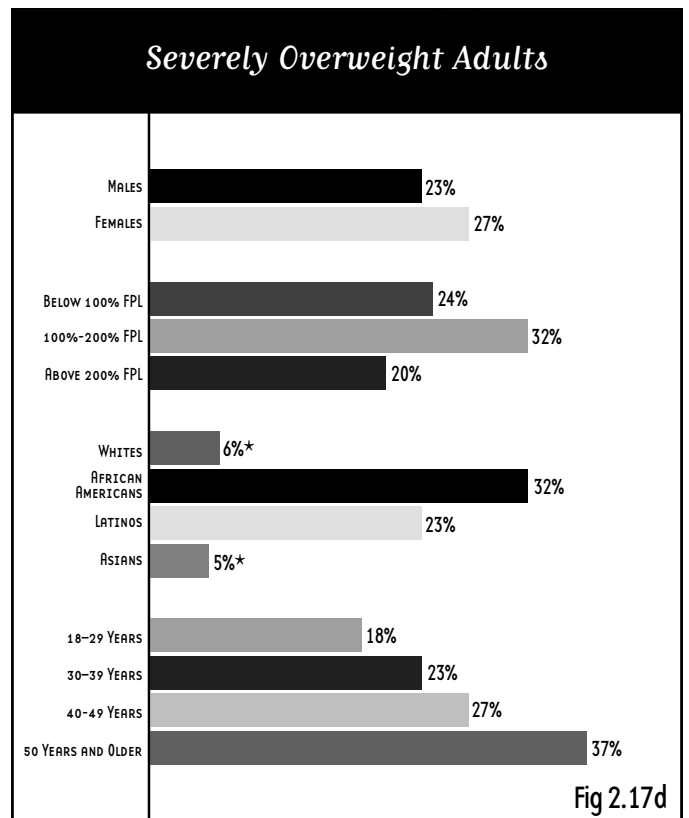
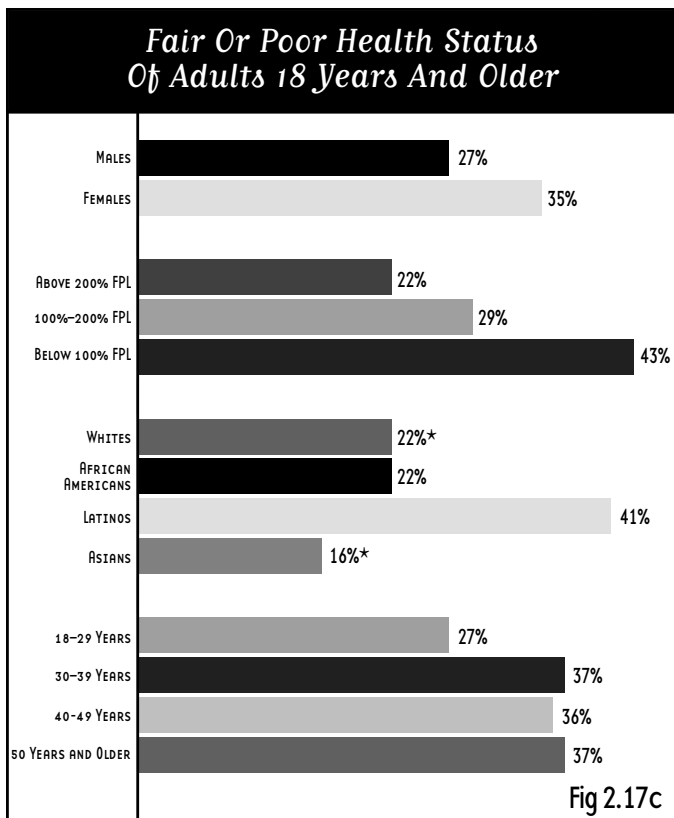
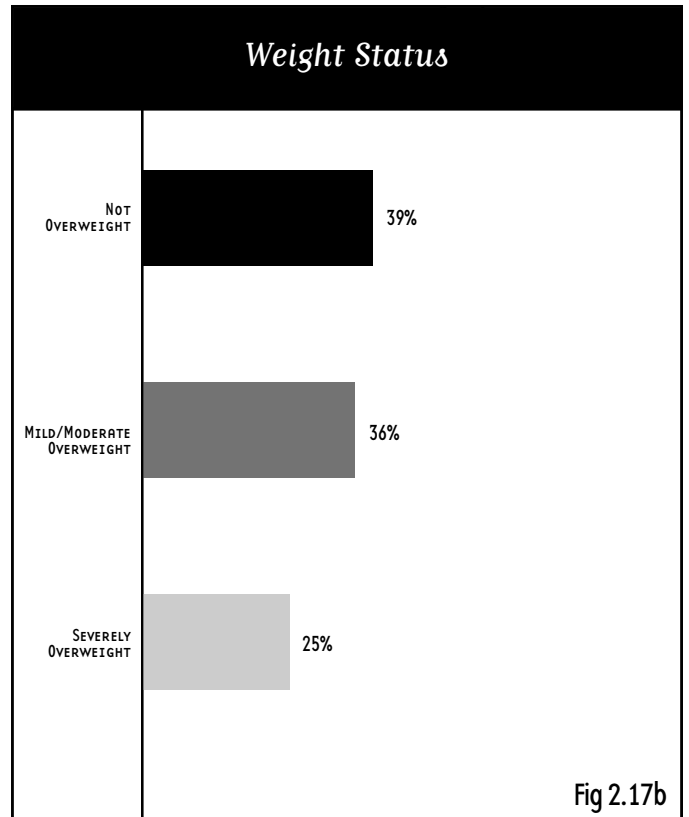
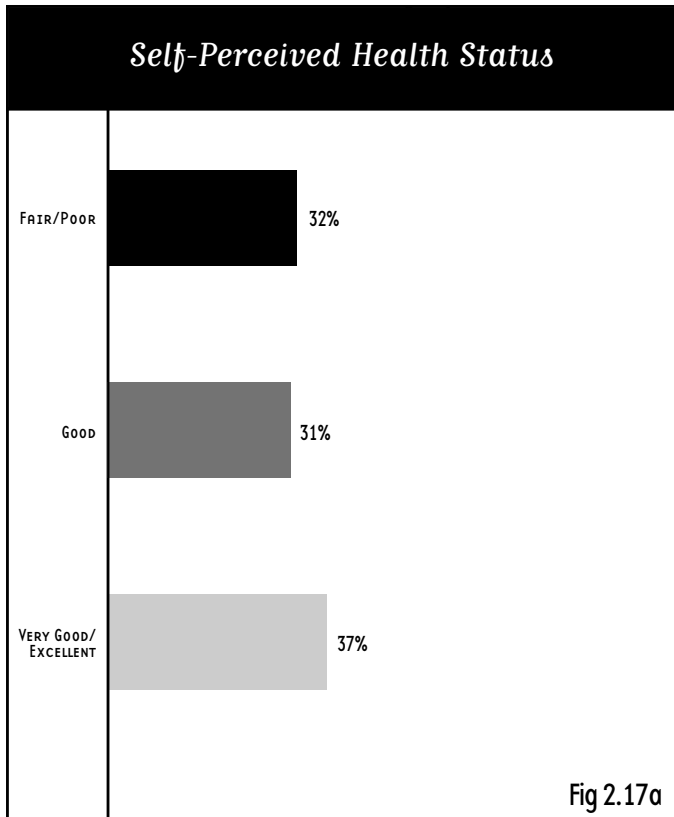
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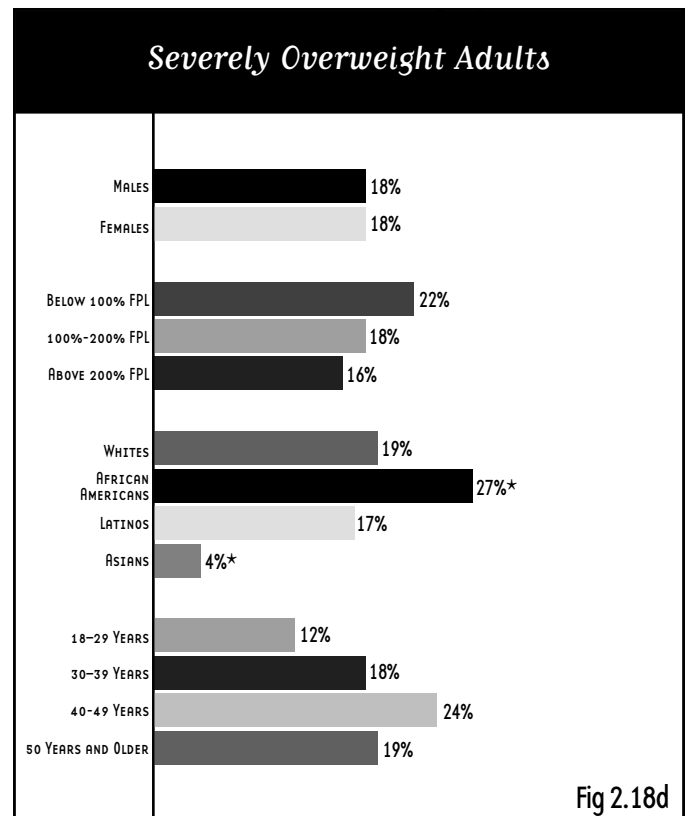
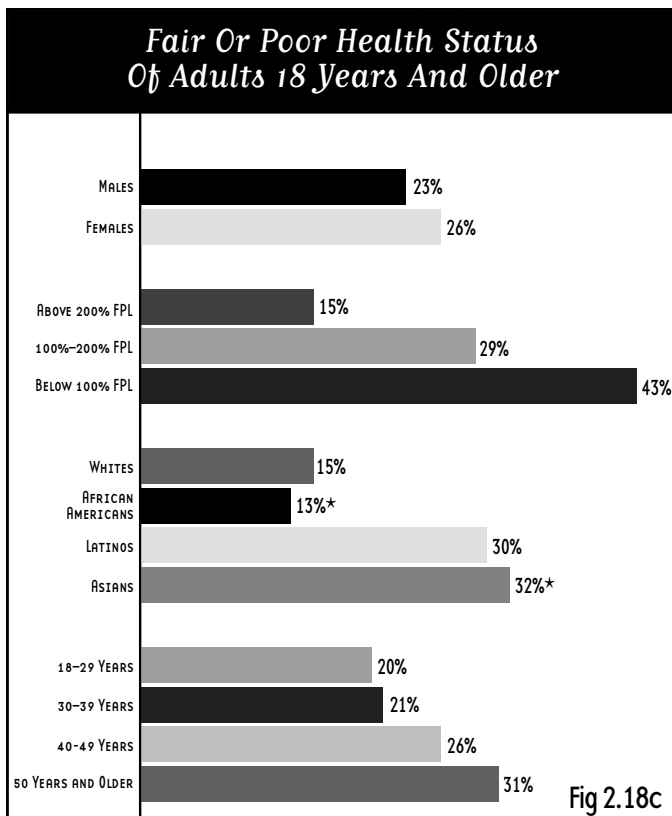
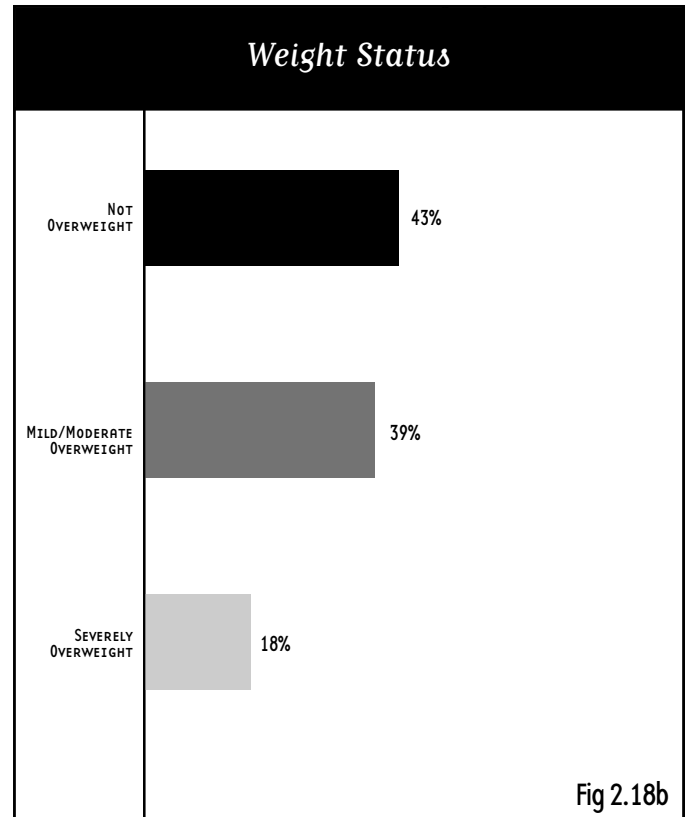
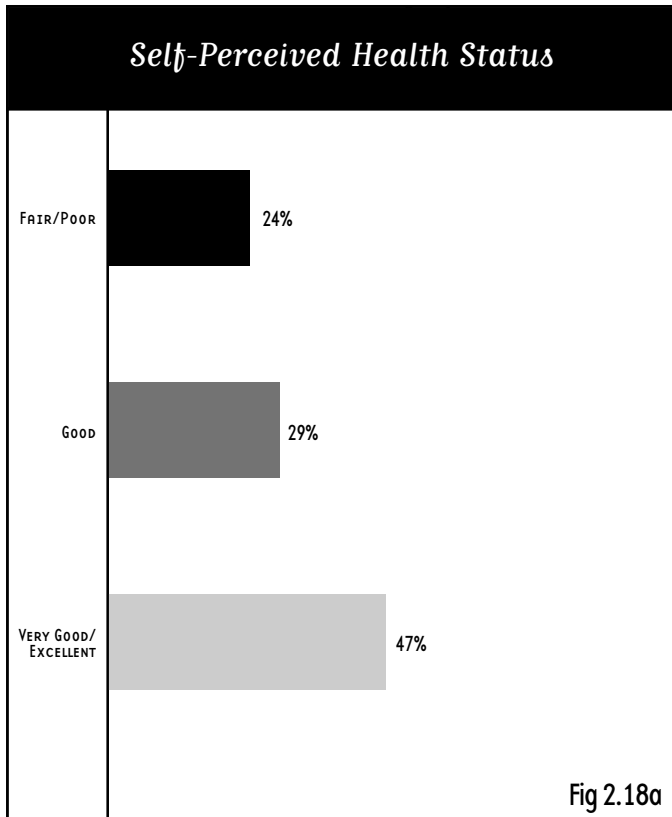




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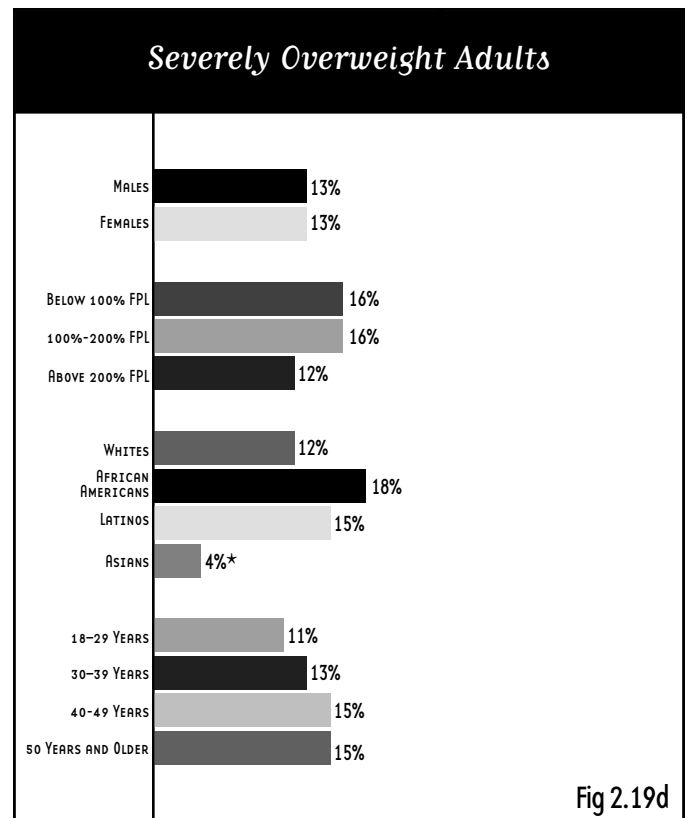
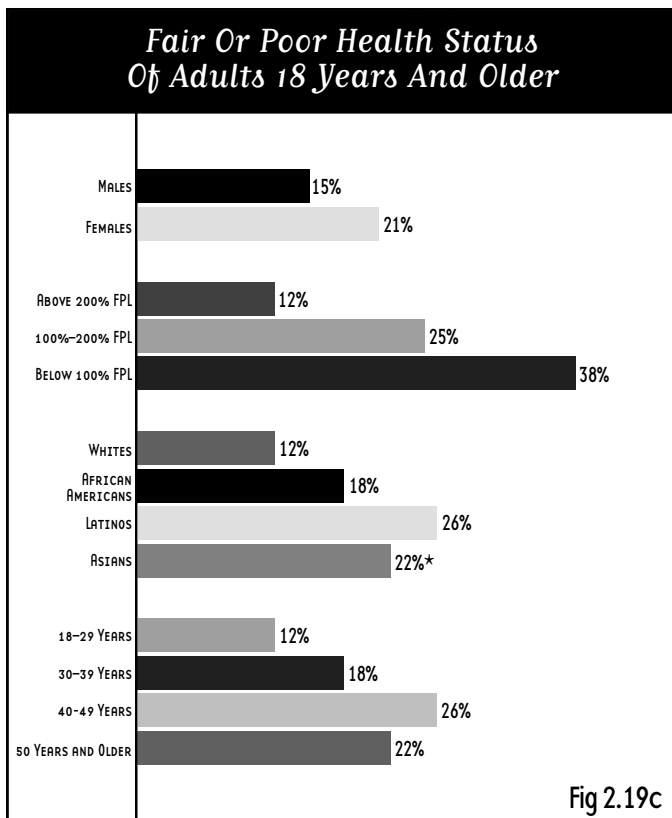
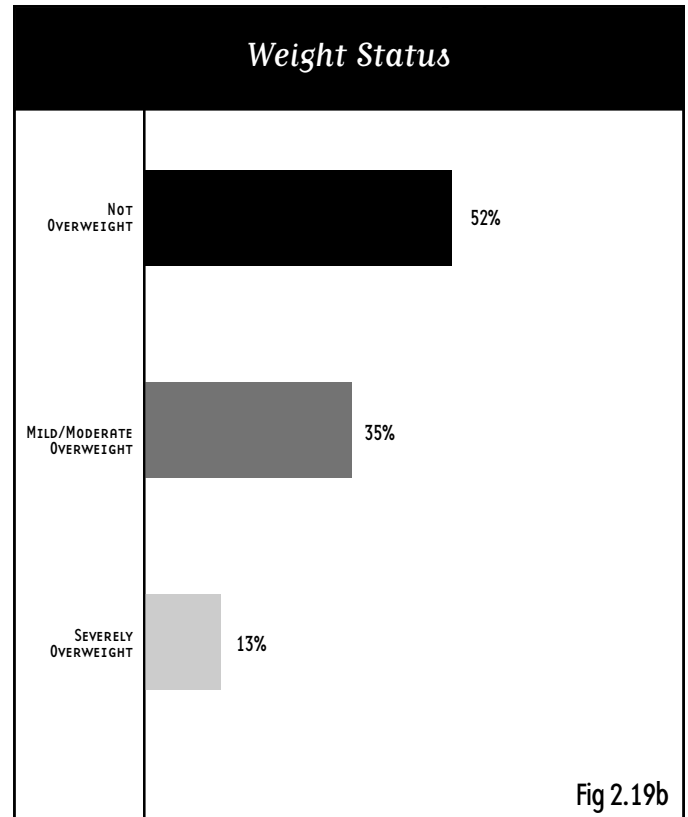
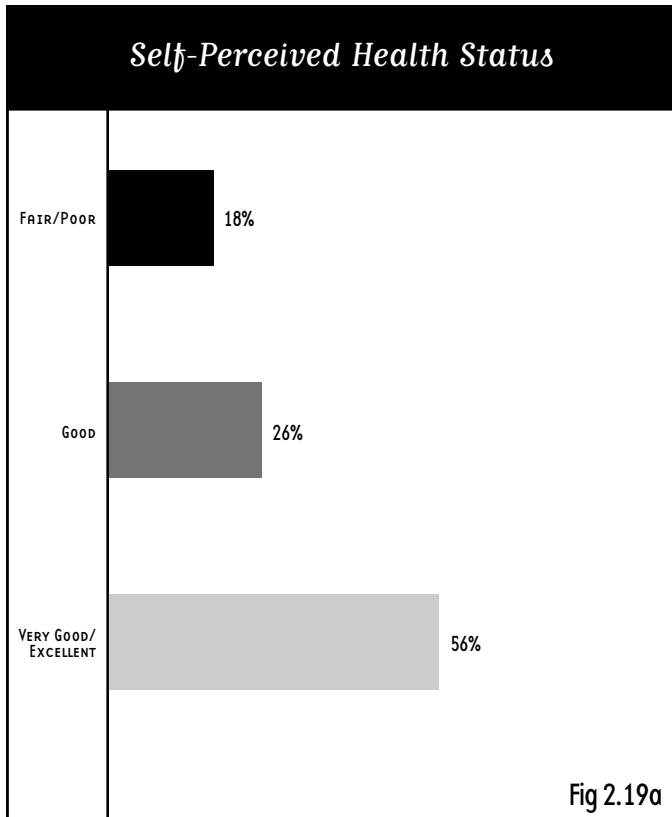
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