



2000-2002 STATE HEALTH PLAN ANNUAL REPORT

APPENDIX B

Healthy People 2000/2010 Update

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Category	Healthy People 2010 Objectives	Healthy People 2000 Objectives
Mortality		
Heart Disease		
	12.1. Reduce heart disease mortality to no more than 200 deaths per 100,000 population.	15.1. Reduce deaths due to diseases of the heart to no more than 300 per 100,000 population.
Cancer		
	3.2. Reduce breast cancer deaths to no more than 21 per 100,000 West Virginia females.	16.1. Increase to at least 80% the proportion of women age 40 and older who have ever received a clinical breast examination and a mammogram, and to at least 60% those aged 50 and older who have received them within the preceding one or two years.
	3.6. Increase to at least 95% the proportion of women aged 18 and older who have ever received a Pap test and to at least 85% those who received a Pap test within the preceding three years.	16.2. Increase to at least 95% the proportion of women aged 18 and older who have ever received a Pap test, and to at least 85% those who received a Pap test within the preceding two years.
Cerebrovascular Disease		
	12.2. Reduce stroke deaths to no more than 45 per 100,000 population.	15.2. Reduce deaths due to cerebrovascular disease to no more than 20 per 100,000 population.
	12.3. Increase by 100% from baseline the proportion of adults who are aware they have increased blood pressure.	15.3. Reduce the current rate of hypertension among adults in West Virginia to 15%.
Chronic Obstructive Pulmonary Disease (COPD)		
	24.5. Reduce the chronic obstructive pulmonary disease (COPD) death rate to no more than 50 per 100,000 population.	

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Unintentional Injuries, All Forms		
	<p>15.5. Reduce overall motor vehicle crash deaths to no more than 17.7 per 100,000 population.</p> <p>15.5a. Ages 0-14 4.8</p> <p>15.5b. Ages 15-24 27.7</p> <p>15.5c. Ages 25-44 20.0</p> <p>15.5d. Ages 45+ 18.0</p>	<p>9.1. Reduction of motor vehicle crash deaths among children aged 14 and under to 6.0 deaths per 100,000 population.</p>
	<p>15.10. Reduce the number of deaths resulting from falls among the elderly (aged 65+) to no more than 34.6 per 100,000 population.</p>	<p>9.2. Reduction in the number of falls and fall-related injuries among persons aged 85+ to 105.0 per 100,000 population.</p>
Behavioral Risk Factors		
Tobacco Use		
	<p>27.1. Reduce the prevalence of cigarette smoking among youth and adults.</p> <p>27.1a. Reduce the prevalence of cigarette smoking among adults aged 18+ to 20% or lower.</p> <p>27.1b. Reduce the prevalence of cigarette smoking among adults aged 18+ in the lower socioeconomic level (12 years or less of education and a household income of less than \$25,000) to 25% or lower.</p> <p>27.1c. Reduce the prevalence of cigarette smoking among women aged 18-24 (i.e., childbearing ages) to 25% or lower.</p>	<p>3.1. Reduce cigarette smoking to a prevalence of no more than 15% among West Virginians age 18 and older.</p>
	<p>27.1d. Reduce the proportion of youth in grades 6-12 who report smoking in the previous month to 20% or lower.</p>	<p>3.4. Reduce the initiation of tobacco product use by children and youth so that no more than 15% have become regular users by age 20.</p>
	<p>27.8. Reduce smokeless tobacco use among adult men aged 18+ to 13% or lower.</p>	<p>3.3. Reduce the use of smokeless tobacco to a prevalence of no more than 10% among males 18 and older.</p>

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Obesity and Overweight		
	<p>19.1. Reduce the proportion of people aged 18 and older who are obese.</p> <p>19.1a. Reduce to 37% the proportion of people who are obese as defined by the Metropolitan Life Insurance tables as being at least 20% over ideal body weight.</p> <p>19.2b. Reduce to 20% the proportion of people who are obese as defined by having a body mass index (BMI) of 30 or greater.</p>	<p>1.2. Reduce the state's overall prevalence of obesity to 26%.</p>
	<p>19.2. Increase to 35% the proportion of people aged 18 and older who consume at least five servings of vegetables and fruits per day.</p>	<p>2.2. Decrease frequency of high-fat foods consumed by West Virginia youth and adults.</p>
	<p>19.4. Increase to 75% the proportion of people aged 18 and older who consume less than 10% of total calories from saturated fat.</p>	<p>2.3. Increase identification of major sources of fat in diets of people aged 18 and older.</p>
Sedentary Lifestyle and Physical Inactivity		
	<p>22.1. Reduce to 37% the proportion of people aged 18 and older who engage in no leisure time physical activity.</p>	<p>1.1. Reduce the rate of sedentary lifestyle among resident adults to 60%.</p>
	<p>22.7. Increase to 60% the proportion of respondents who reported receiving advice and/or counseling from their primary and/or allied health care providers regarding their physical activity practices.</p>	

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Alcohol Misuse	<p>26.2. Increase the number of high school aged youth who have never tried alcohol to 35%.</p> <p>26.3. Increase the number of high school aged youth who have never tried cocaine to 94%.</p> <p>26.4. Increase the number of high school aged youth who have never tried marijuana to 60.1%.</p> <p>27.1d. Reduce the proportion of youth in grades 6-12 who report smoking in the previous month to 20% or lower.</p>	<p>4.1. Reduce the harm to youth and adolescents caused by early use of alcohol, tobacco, marijuana, and other drugs. (Increase by at least one year the average age of first use of alcohol, tobacco, and other drugs by adolescents.)</p>
	<p>26.6. Reduce deaths due to cirrhosis of the liver to less than 7.5 per 100,000 population.</p>	
Infectious Diseases		
HIV/AIDS		
	<p>13.1. Confine annual incidence of diagnosed HIV infection in adolescents and adults to no more than 2.9 per 100,000 population.</p> <p>13.1a. Decrease the number of high school students who are sexually active to less than 45%.</p> <p>13.1b. Of high school students who are sexually active, increase the percentage reporting condom usage to 50%.</p>	<p>18.2. Confine the prevalence of HIV infection to no more than 8 per 100,000 population.</p>
	<p>13.4. Maintain the level of at least one youth peer education group in each of the eight public health districts that provides peer education programs designed to reduce risk among high school students.</p>	<p>18.3. Increase to at least 95% the proportion of middle and secondary schools that have included HIV instruction in their curricula as part of comprehensive school health education.</p>
	<p>13.5. Increase the interval between first positive HIV test and AIDS diagnosis to 48 months.</p>	<p>18.1. Confine the annual incidence of diagnosed AIDS cases to no more than 115 cases.</p>

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	13.7. Decrease the percentage of patients diagnosed with AIDS at first HIV diagnosis to less than 20%.	18.1. Confine the annual incidence of diagnosed AIDS cases to no more than 115 cases.
Gonorrhea	25.2. Reduce the incidence of gonorrhea infections in West Virginia to 15 cases per 100,000 population.	19.3. Contain gonorrhea to an incidence of no more than 75.8 cases per 100,000 population.
Environmental Health		
Water	8.2. Reduce water-related adverse health effects by increasing to at least 95% the proportion of people served by community water systems who receive a supply of drinking water that meets the Safe Drinking Water Act regulations.	11.1. Increase to at least 80% the proportion of residents who receive a supply of drinking water that meets safe drinking water standards established by the U.S. Environmental Protection Agency.
Radon	8.4. Increase to at least 40% the proportion of homes in which homeowners/occupants have tested for radon concentrations and that have been found to pose minimal risk or have been modified to reduce risk to health, as a means to reduce the incidence of lung cancer.	11.2. Increase to 40% the proportion of homes in which homeowners/occupants have tested for radon concentrations and which have either been found to pose minimal risk or have been modified to reduce risk to health.

