Characteristics of Adult Members in the Stockton Medical Center Service Population in Kaiser Permanente's Northern California Region as estimated from the 2005 Kaiser Permanente Adult Member Health Survey (including Stockton and Manteca medical offices)

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Background

The Member Health Survey is a triennial mailed questionnaire survey conducted during the Spring-Summer of a survey year with a randomly selected sample of adults who are current members of the Kaiser Permanente Medical Care Program in Northern California. The primary purpose of the survey is to provide health service planners and researchers both in the Kaiser Permanente Medical Care Program and the community detailed information about the sociodemographic and health characteristics of the adult Health Plan membership in the Northern California region overall and in different medical center service areas and local service areas. This project is funded by Kaiser Permanente's Northern California Community Benefit (CB) Program. This report presents statistics estimated from the 2005 Survey. Similar member health surveys were conducted in 1990, 1993, 1996, 1999 and 2002.

From a strategic perspective, the process of identifying high priority health problems and health practices/lifestyle factors known to increase the risk of chronic or acute illness and targeting effective interventions at those persons in the population who are most at risk should lead to improved health status and more cost-effective use of health care dollars. The identification of age-specific prevalence rates for these health problems and lifestyle risks can also be used for forecasting the resources that will be required to provide health services in the future.

Similar to state and national health surveys, the Member Health Survey captures health risk and health status data on a relatively small proportion of the adult population for which information is desired. However, the survey results will provide administrators and program planners with a profile of the membership that can be used to identify areas for new or expanded health promotion/health maintenance interventions, social support services, and more efficient medical care delivery; study patterns and costs of care for particular types of patients by linking survey data to computerized and medical record information; and compare the health-related characteristics of their service population across medical center service populations and service areas, as well as with the general population.

2005 Survey Sample

In April 2005, questionnaires were mailed to a stratified random sample of 2,140 adult Health Plan members in the Stockton medical center service population.¹ Only current members who had been continuously enrolled during the three months prior to the survey and had no indication that they required an interpreter to communicate in English were sampled. Two subsequent survey packet mailings were sent over the next several weeks to nonrespondents, with the final wave of questionnaires mailed in mid-July. Telephone interviews were completed

¹ Medical center service population assignment made based on outpatient facility where the member was most likely to receive primary care (PARFU assignment). Details about sample selection and weighting procedures are available on request.

with people who called in requiring help with the survey. Participants were also offered the opportunity to answer the survey by logging into a secure website. Non-eligibles (deceaseds, non-current members, members living outside the main service area) and members for whom Kaiser Permanente nor the U.S. Postal Service had forwarding addresses were dropped from the initial sample and replaced with other randomly selected members of the same age and sex from the same medical service area population. The overall survey response rate was among survey eligibles from this medical center service population sample was 41.3% (n=867/2100). The age-sex specific response rates were as follows:

Final Response Rates for the 2005 DOR Member Health Survey by Age-Gender Group, Members Aged 20 and Over in the Stockton Medical Center Sample

	20-44 years	45-64 years	65 years or over	<u>Total</u>
Women	159/493	142/305	197/261	498/1059
	(32.3%)	(46.6%)	(75.5%)	(47.0%)
Men	86/478	109/305	174/258	369/1041
	(18.0%)	(35.7%)	(67.4%)	(35.4%)

All respondents were assigned a post-stratification weighting factor based on the age-gender distribution of the medical center service population from which they were selected as of the fourth quarter of 2004 (when the sample was pulled). The estimates of sociodemographic and health-related characteristics in this report are based on weighted survey data. However, since the questionnaire only went out in English and very limited English-speaking members were excluded from the sample, non-English speaking members and members with very poor reading ability are under-represented in this survey. Results of a study conducted by the Division of Research in conjunction with the 1993 Member Health Survey also suggest that African-Americans and Hispanics are less likely to have responded to the survey than Whites and Asian/Pacific Islanders, but since we have no accurate information about the race/ethnic composition of the membership, we cannot adjust for this. Finally, results of other surveys suggest that among older members, the very sickest and frailest, and those in skilled nursing facilities, are unlikely to have responded.

Description of the Contents of Tables in this Report

In the tables, a double dash -- signifies that men, women, or people in this age group were either not asked those questions or that the items were not considered relevant to the age group or gender.

Table 1 presents estimates of sociodemographic characteristics of adult Health Plan members, including access to a personal computer, the internet, and e-mail.

Table 2 presents estimates of the percentages of adult members who experienced selected chronic diseases and health problems during the previous 12 months, based on self-report unverified by medical record review or physician report. Also included in this table are estimated percentages of members who consider their overall, physical, and emotional/mental health to be excellent, good, fair, or poor, and the extent to which these components of health affect their activities

Table 3 presents estimates of the percentages of adult members with selected health and lifestyle risks, including tobacco and alcohol use, exercise, diet, obesity, stress, hours of sleep, belief about the extent to which health habits/ lifestyle and stress/emotional troubles impact on health, and selected psycho-social stressors experienced during the previous year.

Table 4 presents estimates of the percentages of adult members who took various actions to try to improve their health.

Table 5 presents estimates of use of complementary and alternative therapies (CAM) by adult members during the previous 12 months.

Table 6 presents estimated use of different KP and non-KP health information sources during the previous 12 months.

Table 7 presents estimated percentages of adult members who indicated different preferences for receiving health information and learning about how to take care of their health..

Members aged 65 and over were asked to complete a supplemental page of questions to learn more about issues primarily relevant to the older age group. The following tables provide information collected only from seniors.

Table S1 estimates the prevalence of selected health problems and potential health risks among seniors (this table should be used as a supplement to Tables 2 and 3 for the overall adult population).

Table S2 estimates the percentages of seniors who receive or need help with different activities of daily living because of a disability, health problem, or frailty due to age.

Table S3 estimates use of selected health care and home support services in the previous 12 months.

Table S4 presents statistics about medication-related issues.

Additional Information and Suggested Way to Cite this Report:

We hope that this report will be of use to service planners and researchers both within and outside of the Kaiser Permanente Medical Care Program.

Information about survey methodology, copies of survey questionnaires, and copies of 2005 adult service population profile reports and special topic reports produced for dissemination to the community can be found at our external website:

http://www.dor.kaiser.org/dor/mhsnet/public/.

For additional technical information about the survey or survey results, or information collected but not presented here, contact the survey director, Nancy P. Gordon, ScD, at the Division of Research, 2000 Broadway, Oakland, CA 94612. (phone: (510) 891-3587; fax: (510) 891-3606; internal KPMCP tie-line: 8-481; KP Lotus Notes: Nancy Gordon; internet: Nancy.Gordon@kp.org.

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Table 1. Selected Sociodemographic Characteristics of Members Aged 20 and Over in the Adult Stockton/Manteca Medical Center Service Population, Spring 2005¹

	<u>Aç</u>	ges 20-44	<u>1</u>	<u>Ag</u>	<u>es 45-64</u>	<u>.</u>	<u>Ages</u>	65 and O	<u>ver</u>	<u>Ages</u>	20 and (<u>Over</u>
Sociodemographic Characteristics	Female	Male	All	Female	Male	All	Female	Male	All	Female	Male	All
	%	%	%	%	%	%	%	%	%	%	%	%
Race/ethnicity												
Everyone assigned to only one race/ethnicity by algorithm used in previous MHS reports ²												
White, non-Hispanic	49.2	52.6	50.9	69.2	64.6	67.0	77.6	84.6	80.9	60.3	61.2	60.8
African-American/Black	8.0	6.3	7.2	5.5	3.8	4.6	5.5	5.3	5.4	6.7	5.3	6.1
Latino/Hispanic	22.5	21.1	21.8	8.6	12.2	10.4	13.1	6.7	10.1	16.4	16.1	16.3
Asian, non-Hispanic ³	16.5	16.1	16.3	10.7	12.1	11.4	3.6	1.8	2.7	12.6	12.7	12.6
Hawaiian or Pacific Islander, non-Hispanic	0.6		0.3	2.8	1.6	2.2				1.2	0.5	0.9
Native American/Alaskan native, non-Hispanic	2.6	1.1	1.9	2.2	4.0	3.1				2.1	1.9	2.0
Other, non-Hispanic	0.6	2.9	1.7	0.9	1.7	1.3	0.3	1.6	0.9	0.6	2.3	1.5
Race/Ethnicity - NIH												
Hispanic/Latino ethnicity												
Yes	22.5	21.1	21.8	8.6	12.2	10.4	13.1	6.7	10.1	16.4	16.1	16.3
No	77.5	78.9	78.2	91.4	87.8	89.6	86.9	93.3	89.9	83.6	83.9	83.7
Native Amer./Alaska Native ⁴	2.6	1.1	1.9	2.2	4.6	3.4				2.1	2.1	2.1
Asian ⁴	17.2	16.1	16.7	10.7	12.1	11.4	4.2	1.8	3.1	13.0	12.7	12.8
Hawaiian/Pacific Islander ⁴	0.6	1.2	0.9	2.8	1.6	2.2				1.2	1.1	1.2
African-American/Black ⁴	8.0	6.3	7.2	5.5	3.8	4.6	5.5	5.3	5.4	6.7	5.3	6.1
White ⁴	52.5	54.0	53.2	70.2	66.3	68.3	80.0	86.2	82.9	62.7	62.8	62.7
Other race/ethnicity ⁴	19.1	21.3	20.2	8.6	11.7	10.1	10.4	6.7	8.7	14.3	16.0	15.1
Hispanic/Latino	18.5	18.4	18.5	8.6	10.0	9.3	10.1	5.9	8.2	13.9	13.8	13.9
Other	0.6	2.9	1.7		1.7	8.0	0.3	8.0	0.5	0.3	2.2	1.2

Table 1. Selected Sociodemographic Characteristics of Members Aged 20 and Over in the Adult Stockton/Manteca Medical Center Service Population, Spring 2005¹

	<u>A</u>	ges 20-44	<u>4</u>	<u>Ag</u>	<u>es 45-64</u>		<u>Ages</u>	65 and O	<u>ver</u>	<u>Ages</u>	20 and 0	<u>Over</u>
Sociodemographic Characteristics	Female	Male	All	Female	Male	All	Female	Male	All	Female	Male	All
	%	%	%	%	%	%	%	%	%	%	%	%
Race/Ethnicity - Calif. Dept. of Finance												
Hispanic/Latino	22.5	21.1	21.8	8.6	12.2	10.4	13.1	6.7	10.1	16.4	16.1	16.3
Native Amer./Alaska Native, non-Hispanic	2.6	1.1	1.9	2.2	4.0	3.1				2.1	1.9	2.0
Asian, non-Hispanic	16.5	16.1	16.3	10.7	12.1	11.4	3.6	1.8	2.7	12.6	12.7	12.6
Black, non-Hispanic	8.0	6.3	7.2	5.5	3.8	4.6	5.5	5.3	5.4	6.7	5.3	6.1
White, non-Hispanic	49.2	52.6	50.9	69.2	64.6	67.0	77.6	84.6	80.9	60.3	61.2	60.8
Other, non-Hispanic	1.2	2.9	2.0	3.7	3.3	3.5	0.3	1.6	0.9	1.9	2.8	2.3
One race/ethnicity or multiple race/ethnicity												
White, non-Hispanic only	49.2	52.6	50.9	69.2	64.6	67.0	77.6	84.6	80.9	60.3	61.2	60.8
African-American/Black only	7.4	6.3	6.9	4.1	3.8	3.9	5.5	5.3	5.4	6.0	5.3	5.7
Latino/Hispanic only	18.5	18.4	18.5	8.6	10.0	9.3	10.1	5.9	8.2	13.9	13.8	13.9
Asian only	13.8	13.9	13.9	10.7	11.3	11.0	2.6	1.8	2.2	11.0	11.3	11.1
Hawaiian or Pacific Islander only	0.6		0.3	1.4	1.6	1.5				8.0	0.5	0.6
Nat. Amer./Alaska native only		1.1	0.5		1.8	0.9					1.2	0.6
Other only	0.6	2.9	1.7		1.7	0.8	0.3	0.8	0.5	0.3	2.2	1.2
Middle Eastern only		1.4	0.7		0.9	0.5	0.3	1.6	0.9	<0.1	1.3	0.7
Two race/ethnicities	9.9	3.8	6.9	5.4	5.3	5.3	3.3	1.6	2.5	7.3	4.0	5.7
Three or more race/ethnicities		1.0	0.5	0.6		0.3	0.6		0.3	0.3	0.5	0.4

Table 1. Selected Sociodemographic Characteristics of Members Aged 20 and Over in the Adult Stockton/Manteca Medical Center Service Population, Spring 2005¹

	<u>A</u>	ges 20-44	<u>1</u>	<u>Ag</u>	es 45-64	<u>!</u>	<u>Ages</u>	65 and O	<u>ver</u>	<u>Ages</u>	20 and 0	<u>Over</u>
Sociodemographic Characteristics	Female	Male	All	Female	Male	All	Female	Male	All	Female	Male	All
	%	%	%	%	%	%	%	%	%	%	%	%
This race/ethnicity, alone or in combination with other race/ethnic categories												
White	57.0	56.2	56.6	75.2	69.4	72.3	81.3	86.2	83.6	66.8	64.9	65.9
African-American/Black	8.0	6.3	7.2	5.5	3.8	4.6	5.5	5.3	5.4	6.7	5.3	6.1
Latino/Hispanic	22.5	21.1	21.8	8.6	12.2	10.4	13.1	6.7	10.1	16.4	16.1	16.3
Asian	17.2	16.1	16.7	10.7	12.1	11.4	4.2	1.8	3.1	13.0	12.7	12.8
Hawaiian or Pacific Islander	2.0	1.2	1.6	2.8	1.6	2.2	0.3		0.1	2.0	1.1	1.6
Nat. Amer./Alaska native	2.6	2.0	2.3	2.7	4.6	3.6				2.2	2.6	2.4
Other	0.6	2.9	1.7	0.9	1.7	1.3	0.3	1.6	0.9	0.6	2.3	1.5
Middle Eastern		1.4	0.7		0.9	0.5	0.3	1.6	0.9	<0.1	1.3	0.7
Education Level												
11 years or less	5.0	4.1	4.6	5.5	3.9	4.7	25.2	16.6	21.2	8.4	5.8	7.2
12 years (H.S. graduate)	12.8	32.8	22.6	25.2	20.9	23.1	29.0	20.7	25.2	19.5	27.1	23.2
Some college/technical school	50.9	40.4	45.7	50.8	50.6	50.7	34.5	40.5	37.2	48.3	43.8	46.1
College graduate	31.3	22.8	27.1	18.5	24.6	21.4	11.3	22.2	16.3	23.9	23.3	23.6

Table 1. Selected Sociodemographic Characteristics of Members Aged 20 and Over in the Adult Stockton/Manteca Medical Center Service Population, Spring 2005¹

	<u>A</u>	ges 20-44	<u> </u>	<u>Ag</u>	es 45-64	<u> </u>	<u>Ages</u>	65 and O	<u>ver</u>	<u>Ages</u>	20 and 0	<u>Over</u>
Sociodemographic Characteristics	Female	Male	All	Female	Male	All	Female	Male	All	Female	Male	All
	%	%	%	%	%	%	%	%	%	%	%	%
Household Income in 2004												
\$15,000 or less	2.9	2.6	2.8	1.1	1.9	1.5	27.5	8.0	18.5	5.9	3.1	4.5
\$15,001-\$25,000	7.1	6.4	6.8	13.6	2.7	8.5	24.7	21.5	23.2	11.9	7.2	9.6
\$25,001-\$35,000	10.2	7.5	8.8	11.6	7.9	9.8	21.2	19.6	20.5	12.2	9.2	10.8
\$35,001-\$50,000	21.9	24.3	23.1	17.9	23.3	20.4	16.1	25.0	20.2	19.7	24.1	21.8
\$50,001-\$65,000	19.9	17.4	18.7	11.1	8.0	9.6	5.8	10.1	7.8	14.9	13.5	14.2
\$65,001-\$80,000	14.4	11.1	12.7	17.4	15.6	16.6	2.6	4.5	3.5	13.7	11.6	12.7
\$80,001-\$100,000	13.7	16.9	15.3	9.2	20.0	14.3	1.0	8.8	4.6	10.4	16.8	13.5
\$100,000-\$135,000	6.9	11.7	9.3	10.5	15.7	12.9	0.3	1.2	0.7	7.1	11.5	9.3
Over \$135,000	3.0	2.1	2.5	7.6	4.9	6.3	0.7	1.2	1.0	4.2	2.9	3.6
Marital Status												
Married/living as part of a couple	80.2	83.6	81.9	78.2	88.4	83.2	50.3	81.9	65.0	74.9	84.9	79.8
Current Employment Status												
Working for pay	75.7	88.3	81.9	64.4	77.2	70.6	7.7	15.8	11.4	61.1	74.2	67.5
Unemployed, laid off, or on strike	3.1	1.0	2.0	2.3	1.1	1.7				2.3	0.9	1.6
Full-time homemaker/parent/ caregiver	15.9		8.1	13.2		6.8	10.5		5.7	14.2		7.3
Full-time or almost full-time student	2.6	5.8	4.2							1.3	3.0	2.1
Retired ⁵ or unable to work due to health/disability	2.0	5.0	3.5	20.0	21.7	20.8	76.0	82.2	78.8	19.7	21.7	20.7
Other (incl. volunteer)	0.7		0.4				5.8	2.1	4.1	1.3	0.3	0.8

Table 1. Selected Sociodemographic Characteristics of Members Aged 20 and Over in the Adult Stockton/Manteca Medical Center Service Population, Spring 2005¹

	<u>A</u> ç	ges 20-44	<u>1</u>	<u>Ag</u>	es 45-64	<u>.</u>	<u>Ages</u>	65 and O	<u>ver</u>	<u>Ages</u>	20 and 0	<u>Over</u>
Sociodemographic Characteristics	Female	Male	All	Female	Male	All	Female	Male	All	Female	Male	All
	%	%	%	%	%	%	%	%	%	%	%	%
Computer Access												
PC at any location	94.9	95.4	95.1	82.5	79.9	81.3	45.3	66.1	54.7	82.9	86.1	84.5
PC at home	85.2	90.4	87.7	77.2	72.7	75.0	42.2	59.3	50.0	75.8	80.1	77.9
PC at other location	21.5	24.7	23.0	16.2	17.5	16.8	4.9	7.7	6.2	17.1	19.9	18.5
Has access to Internet ⁶	92.8	94.4	93.6	81.4	79.9	80.7	41.5	59.0	49.4	81.0	84.7	82.8
At home	79.1	86.4	82.7	75.8	71.2	73.6	38.5	54.4	45.6	71.7	76.9	74.2
At other location	24.9	27.8	26.3	14.9	18.5	16.6	4.3	6.7	5.4	18.4	21.8	20.0
Can receive e-mail ⁶	92.8	94.4	93.6	81.4	79.9	80.7	41.5	59.0	49.4	81.0	84.7	82.8
At home	79.1	86.4	82.7	75.8	71.2	73.6	38.4	53.8	45.3	71.6	76.8	74.1
At other location	18.6	19.2	18.9	10.8	17.1	13.8	1.9	3.8	2.7	13.4	16.3	14.8

From the 2005 Division of Research Member Health Survey, a random sample survey of Health Plan members aged 20 and over conducted in Spring 2005. Estimates are based on data from 867 respondents, weighted to the age-, gender-, and geographic distribution of the Health Plan membership in this medical center service population in final quarter of 2004.

Asian race/ethnic category includes Chinese, Japanese, Korean, Filipino, Southeast Asian, South Asian (e.g., Indian/Pakistani), or other Asian subgroup.

⁴ Includes persons who consider themselves Hispanic/Latino.

⁵ People aged <u>></u> 65 who reported working less than 10 hours per week are also included in this category.

Makes no assumptions that person has computer access.

Algorithm for assigning individuals to one race/ethnicity for purposes of estimation was as follows: White if only White/Euro-American indicated; African-American/Black if African-American or Other Black indicated alone or with any other race/ethnicity; Latino/Hispanic if that category indicated alone or in combination with any other race/ethnicity except for African-American/Black; Asian if one or more of Chinese, Japanese, Korean, Filipino, Southeast Asian, Indian/Pakistani, or Other Asian category indicated and African-American/Black and Latino/Hispanic not indicated; Hawaiian or Pacific Islander if ethnicities in this group were indicated but not African-American/Black, Latino/Hispanic, or Asian race/ethnic categories. Native American/Alaska Native if this category was the only one indicated; and Other if Middle Eastern or Other indicated, but not African-American/Black, Latino/Hispanic, or Asian race/ethnic categories. The sum across these broad categories should be approximately 100%. More detailed race/ethnicity information and estimated percentages of members of different race/ethnicities based on only one category indicated (all others put into "multi-racial/ethnic category") and based on people assigned to more than one category (sum of percentages exceeds 100%) follow. See "Latino/Hispanic alone or in combination with other race/ethnic categories" for overall percentage of members of Hispanic/Latino origin.

Table 2. Prevalence of Selected Chronic Health Problems Among Members Aged 20 and Over in the Adult Stockton/Manteca Medical Center Service Population, Spring 2005¹

Uister of Hoolth Droblems	<u>A</u> g	ges 20-44	<u>1</u>	<u>Ag</u>	es 45-64	<u> </u>	<u>Ages</u>	65 and O	ver	<u>Ages</u>	20 and (<u>Over</u>
History of Health Problems During the Past 12 Months	Female	Male	All	Female	Male	All	Female	Male	All	Female	Male	All
	%	%	%	%	%	%	%	%	%	%	%	%
Overall Rating of Health Now												
Excellent	13.6	14.0	13.8	9.0	4.8	7.0	4.9	4.2	4.6	10.7	9.5	10.1
Very Good	40.0	46.0	42.9	34.7	40.7	37.7	24.7	30.4	27.3	35.8	42.0	38.8
Good	40.2	33.2	36.7	36.3	40.5	38.3	44.1	37.9	41.3	39.5	36.3	38.0
Fair	5.6	6.8	6.2	17.4	11.6	14.6	25.6	22.6	24.3	12.7	10.7	11.7
Poor	0.7		0.3	2.6	2.4	2.5	0.7	4.8	2.6	1.3	1.5	1.4
Rating of Physical Health (including pain) Now												
Excellent	11.5	11.6	11.6	10.5	4.3	7.5	5.0	5.0	5.0	10.1	8.2	9.2
Very Good	43.8	46.5	45.1	33.9	38.3	36.1	23.4	28.6	25.8	37.2	41.2	39.1
Good	40.3	32.8	36.6	35.4	43.0	39.2	43.2	39.3	41.4	39.2	37.2	38.2
Fair	3.1	7.7	5.3	17.6	10.8	14.2	27.0	22.2	24.9	11.7	10.8	11.3
Poor	1.2	1.4	1.3	2.6	3.5	3.1	1.4	4.8	3.0	1.7	2.6	2.2
Rating of Emotional/Mental Health Now												
Excellent	20.1	22.7	21.4	20.4	16.9	18.7	20.0	18.9	19.5	20.2	20.2	20.2
Very Good	39.3	39.7	39.5	33.2	45.1	39.0	32.3	34.0	33.1	36.2	40.7	38.4
Good	30.7	29.3	30.0	28.4	28.0	28.2	35.4	33.1	34.3	30.7	29.4	30.1
Fair	9.3	8.2	8.8	16.8	6.5	11.8	12.4	14.0	13.1	12.3	8.4	10.4
Poor	0.6		0.3	1.1	3.5	2.3				0.7	1.2	0.9

Table 2. Prevalence of Selected Chronic Health Problems Among Members Aged 20 and Over in the Adult Stockton/Manteca Medical Center Service Population, Spring 2005¹

	Ages 20-44			<u>Ag</u>	<u>es 45-64</u>	<u>!</u>	<u>Ages</u>	65 and O	<u>ver</u>	<u>Ages</u>	20 and 0	<u>Over</u>
History of Health Problems During the Past 12 Months	Female	Male	All	Female	Male	All	Female	Male	All	Female	Male	All
	%	%	%	%	%	%	%	%	%	%	%	%
Health Conditions During Past 12 Months												
Diabetes ³	2.5	9.7	6.0	9.3	19.3	14.2	13.5	21.6	17.2	6.5	14.6	10.4
Heart problems, incl. angina, MI ³	2.3	3.1	2.7	6.4	7.3	6.8	11.2	26.4	18.1	5.1	7.9	6.4
Stroke		1.1	0.5	0.5	2.8	1.6	2.4	3.5	2.9	0.6	2.0	1.3
Cancer												
Any type	0.5	1.1	0.8	0.5	3.6	2.0	4.1	6.0	5.0	1.1	2.6	1.9
Non-skin cancer	0.5		0.3	0.5	1.3	0.9	3.1	4.9	3.9	1.0	1.2	1.1
High blood pressure (MD dx) ³	3.9	9.1	6.5	36.4	32.2	34.4	61.4	58.8	60.2	24.0	24.0	24.0
High cholesterol (MD dx) ³	1.1	8.6	4.8	22.8	33.4	28.0	37.2	47.7	42.0	14.1	22.6	18.2
Asthma ³	11.9	7.2	9.6	21.2	2.9	12.3	12.2	7.0	9.8	15.0	5.7	10.5
Emphysema/COPD		1.1	0.5	1.6		0.8	5.4	3.1	4.3	1.4	1.0	1.2
Chronic bronchitis	1.8	1.1	1.4	5.1	1.5	3.3	1.6	1.7	1.7	2.9	1.3	2.1
Environmental allergy	15.4	8.4	12.0	18.2	6.8	12.7	14.3	12.3	13.4	16.1	8.4	12.4
Enlarged prostate (men only)		1.1			2.1			16.9			3.7	
Urinary incontinence	4.7	1.1	2.9	17.3	8.0	9.3	25.4	11.4	19.0	12.2	2.5	7.5
Osteoporosis		1.1	0.5	2.7		1.4	9.6	2.5	6.4	2.5	0.9	1.7
Arthritis/rheumatoid arthritis	7.4	3.1	5.3	15.9	10.9	13.5	32.0	24.2	28.4	14.2	8.8	11.6
Pain (back, head, other)	36.6	31.9	34.3	41.9	35.0	38.6	35.3	29.8	32.8	38.1	32.6	35.5
Severe back pain/sciatica	8.9	14.5	11.6	19.8	17.7	18.8	20.2	18.7	19.5	14.3	16.2	15.2
Severe neck/shoulder pain	8.8	9.6	9.2	16.5	13.9	15.2	10.2	10.1	10.2	11.6	11.1	11.3
Migraine headaches	21.6	17.2	19.5	16.3	7.8	12.1	3.3	2.5	2.9	16.9	11.9	14.5
Other severe headaches	11.7	6.6	9.2	8.0	6.6	7.3	5.2	2.3	3.9	9.4	6.0	7.8
Other frequent lasting pain	8.0	9.2	8.6	16.3	8.2	12.3	16.7	10.3	13.8	12.1	9.0	10.6
Vision problem (not correctable by glasses)	2.0	3.0	2.5	7.7	4.5	6.1	9.2	8.4	8.9	5.1	4.3	4.7

Table 2. Prevalence of Selected Chronic Health Problems Among Members Aged 20 and Over in the Adult Stockton/Manteca Medical Center Service Population, Spring 2005¹

, in the second of the second	<u>A</u> g	ges 20-44	<u>1</u>	<u>Ag</u>	es 45-64	<u>!</u>	<u>Ages</u>	65 and O	<u>ver</u>	<u>Ages</u>	20 and (<u>Over</u>
History of Health Problems During the Past 12 Months	Female	Male	All	Female	Male	All	Female	Male	All	Female	Male	All
	%	%	%	%	%	%	%	%	%	%	%	%
Hearing problem/deafness ⁴	1.9	3.2	2.5	5.9	3.5	4.8	27.2	44.3	35.0	7.3	9.2	8.2
Frequent sleep problems	13.6	7.3	10.5	23.5	12.8	18.3	18.9	13.0	16.2	17.7	10.0	14.0
Depression ⁵	14.5	18.6	16.5	18.6	7.6	13.2	13.6	8.3	11.2	15.7	13.4	14.6
Anxiety/panic ⁶	9.9	9.8	9.9	12.2	4.5	8.5	5.7	3.1	4.5	10.0	7.1	8.6
Problem with alcohol or drugs	0.7	2.5	1.6	0.9	2.3	1.6		0.8	0.4	0.7	2.2	1.4
History of health conditions (within or longer than past 12 mos):												
Heart problems or M.I. ³	2.3	5.7	4.0	7.5	10.3	8.9	15.3	35.6	24.5	6.1	11.6	8.8
Stroke		1.1	0.5	3.3	4.6	3.9	5.6	9.5	7.4	2.0	3.5	2.7
Cancer (other than skin cancer)	1.1	4.2	2.6	3.0	7.9	5.4	12.9	23.4	17.6	3.6	8.2	5.9
High blood pressure ³	5.7	9.1	7.4	38.8	36.9	37.8	63.2	60.9	62.1	25.9	25.9	25.9
Diabetes ³	2.5	9.7	6.0	9.3	19.3	14.2	13.5	21.6	17.2	6.5	14.6	10.4
Chronic pain	12.5	17.8	15.1	26.2	13.2	19.9	24.6	17.7	21.5	19.0	16.3	17.7
Adult depression ⁵	20.0	22.5	21.2	26.1	11.9	19.2	15.2	11.8	13.7	21.2	17.4	19.4
Alcohol or drug problem	2.0	9.8	5.8	2.9	4.0	3.5		1.1	0.5	2.0	6.6	4.2
Had a hysterectomy	1.7			34.1			57.5			21.3		

Table 2. Prevalence of Selected Chronic Health Problems Among Members Aged 20 and Over in the Adult Stockton/Manteca Medical Center Service Population, Spring 2005¹

	<u>A</u>	ges 20-44	<u>1</u>	<u>Ag</u>	es 45-64	<u>.</u>	<u>Ages</u>	65 and O	<u>ver</u>	<u>Ages</u>	20 and (<u>Over</u>
History of Health Problems During the Past 12 Months	Female	Male	All	Female	Male	All	Female	Male	All	Female	Male	All
	%	%	%	%	%	%	%	%	%	%	%	%
How much health interferes with work or regular daily activities												
Physical health (incl. pain)												
Not at all	54.3	48.2	51.4	36.9	40.4	38.6	30.8	33.9	32.2	44.8	43.5	44.2
A little	32.3	28.0	30.2	36.9	36.9	36.9	27.6	31.2	29.3	33.0	31.4	32.2
Moderately	9.6	12.1	10.8	14.8	15.0	14.9	26.3	19.9	23.4	14.0	14.2	14.1
Quite a bit	3.7	11.7	7.6	11.5	7.6	9.6	15.2	15.1	15.2	8.1	10.9	9.5
Emotional/mental health												
Not at all	60.1	59.6	59.9	56.3	73.8	64.6	62.8	66.1	64.3	59.3	65.2	62.1
A little	30.7	25.0	27.9	26.4	14.3	20.6	24.4	23.1	23.8	28.3	21.2	24.9
Moderately	5.9	6.8	6.4	13.5	7.1	10.5	11.8	9.0	10.5	9.4	7.2	8.3
Quite a bit	3.3	8.7	5.9	3.8	4.8	4.3	0.9	1.8	1.3	3.1	6.4	4.7

From the 2005 Division of Research Member Health Survey, a random sample survey of Health Plan members aged 20 and over conducted in Spring 2005. Estimates are based on data from 867 respondents, weighted to the age-, gender-, and geographic distribution of the Health Plan membership in this medical center service population in final quarter of 2004.

² Based on self-report data not validated by medical record review or physician's report.

Estimate based on indication of the health condition or reported use of medication to control that health condition.

Estimates for members aged 65+ based on responses to a health condition checklist and a question about use of/need for a hearing aid asked only of seniors. Estimates for those aged 20-64 based only on response to health condition checklist.

Depression was estimated from indication of depression, sadness, or very low spirits lasting at least 2 weeks in a health condition checklist or indication of use of a prescription anti-depressant during the previous 12 months.

Anxiety/panic was estimated from indication of anxiety or panic for at least 2 weeks in a health condition checklist or indication of use of prescription anxiety medicine during the previous 12 months.

Table 3. Prevalence of Selected Behavioral and Psychosocial Risks Among Members Aged 20 and Over in the Adult Stockton/Manteca Medical Center Service Population, Spring 2005¹

	<u>A</u>	ges 20-4	<u>4</u>	<u>Ag</u>	es 45-64	<u>l</u>	<u>Ages</u>	65 and O	ver	<u>Ages</u>	20 and (<u>Over</u>
Behavioral/Psychosocial Risks During the Past 12 Months	Female	Male	All	Female	Male	All	Female	Male	All	Female	Male	All
	%	%	%	%	%	%	%	%	%	%	%	%
History of Tobacco Use												
Current cigarette smoker	5.3	16.3	10.6	12.5	15.3	13.9	3.8	11.4	7.3	7.4	15.2	11.2
Former cigarette smoker	9.5	6.2	7.9	25.2	29.4	27.2	28.1	44.9	35.7	17.7	19.7	18.6
Never smoked regularly	85.2	77.5	81.5	62.3	55.4	58.9	68.1	43.7	57.0	74.9	65.1	70.2
<u>Weight</u>												
Overweight (BMI ≥ 25)	58.6	72.9	66.0	65.2	81.3	73.0	63.7	67.4	65.4	61.7	74.9	68.3
Obese (BMI ≥ 30)	33.2	27.2	30.1	38.0	39.5	38.8	30.1	21.8	26.3	34.4	30.6	32.5
BMI range:												
BMI < 18.5 (underwt)	1.6	2.5	2.0	0.6		0.3	3.2	1.1	2.2	1.5	1.4	1.5
BMI 18.5 to 25 (normal)	39.8	24.7	32.0	34.3	18.7	26.7	33.1	31.5	32.4	36.8	23.7	30.2
BMI 25 to 30 (overwt)	25.5	45.7	35.9	27.1	41.7	34.2	33.6	45.5	39.1	27.4	44.3	35.8
BMI 30 to < 35 (obese)	13.9	18.3	16.1	19.9	28.5	24.1	21.9	16.9	19.5	17.3	21.5	19.4
BMI 35 to <40 (very obese)	8.6	4.8	6.7	11.6	8.6	10.1	5.6	4.2	5.0	9.2	6.0	7.6
BMI ≥ 40 (extremely obese)	10.7	4.2	7.3	6.5	2.4	4.5	2.7	8.0	1.8	7.9	3.1	5.5
Exercise Frequency												
5 or more times/week	13.0	24.5	18.6	19.9	18.4	19.2	29.7	44.8	36.6	17.9	25.4	21.5
3-4 times/week	21.5	26.4	23.9	23.3	33.4	28.3	23.4	28.4	25.7	22.4	29.0	25.6
1-2 times/week	36.0	22.6	29.5	34.1	25.5	29.9	25.1	13.0	19.6	33.6	22.2	28.1
Less than 1 time/week	29.5	26.5	28.1	22.7	22.6	22.6	21.9	13.8	18.2	26.1	23.4	24.8
Reduced Fat Diet												
Doesn't try to eat reduced fat foods most of time	74.2	75.5	74.8	66.0	63.8	64.9	45.6	48.2	46.8	66.9	67.4	67.1
Fruit/Vegetable Consumption												
Eats ≥ 3 servings per day	34.1	22.1	28.3	36.5	34.2	35.4	51.4	33.9	43.5	37.7	27.8	33.0
Eats ≥ 5 servings per day	4.9	4.6	4.8	7.6	3.2	5.5	13.6	9.7	11.9	7.2	4.9	6.1

Table 3. Prevalence of Selected Behavioral and Psychosocial Risks Among Members Aged 20 and Over in the Adult Stockton/Manteca Medical Center Service Population, Spring 2005¹

	Ages 20-44		<u>Ag</u>	<u>es 45-64</u>	<u> </u>	<u>Ages</u>	65 and O	<u>ver</u>	<u>Ages</u>	20 and 0	<u>Over</u>	
Behavioral/Psychosocial Risks During the Past 12 Months	Female	Male	All	Female	Male	All	Female	Male	All	Female	Male	All
	%	%	%	%	%	%	%	%	%	%	%	%
Alcohol Consumption												
Never drinks	26.3	20.8	23.6	26.4	21.6	24.0	52.9	34.8	44.2	30.4	23.1	26.8
Drinks less than once/week	59.5	42.3	51.0	46.4	41.1	43.8	28.0	29.0	28.5	50.4	40.0	45.3
Drinks 1-2 days/week	9.8	18.4	14.1	9.7	11.6	10.7	3.7	12.5	7.9	8.9	15.3	12.0
Drinks 3-4 days/week	3.1	9.6	6.3	8.1	12.3	10.2	3.2	3.9	3.5	4.7	9.7	7.2
Drinks <u>></u> 5 days/week	1.2	8.8	5.0	9.4	13.4	11.4	12.2	19.8	15.8	5.5	11.9	8.7
At-Risk drinker based on:												
Drinks per day ³	5.5	10.5	8.0	3.6	5.2	4.4	0.7	1.7	1.2	4.1	7.6	5.8
Drinks per week ⁴	0.6	1.0	0.8	4.7	2.8	3.8	3.1	4.6	3.8	2.3	2.1	2.2
Drinks per day or week ⁵	5.9	10.2	8.0	6.3	5.6	6.0	3.8	4.5	4.1	5.7	7.9	6.8
Total hours of sleep per 24 hour day	<u>'</u>											
< 6 hours	5.0	10.3	7.6	17.7	10.1	14.0	5.2	3.0	4.2	9.2	9.2	9.2
6-8 hours	83.0	80.3	81.7	73.1	81.4	77.2	75.9	63.9	70.4	78.6	78.2	78.4
> 8 hours	12.0	9.4	10.7	9.2	8.5	8.9	18.9	33.2	25.4	12.2	12.6	12.4
Psychosocial Risks												
Worried about personal/family safety for other reasons (neighborhood violence, robberies, gangs, etc.)	14.3	12.2	13.3	11.5	9.8	10.7	2.0	2.9	2.4	11.4	10.1	10.7
Feared for personal/family safety because of anger/threats from a current or former spouse, partner or boy/girlfriend	4.3	1.2	2.8	3.8	0.9	2.4	0.7		0.4	3.5	0.9	2.3
Worried about personal/family's financial security	45.0	36.5	40.9	32.7	27.0	29.9	16.0	12.1	14.2	36.2	29.8	33.1

Table 3. Prevalence of Selected Behavioral and Psychosocial Risks Among Members Aged 20 and Over in the Adult Stockton/Manteca Medical Center Service Population, Spring 2005¹

	<u>A</u> ç	ges 20-44	<u>4</u>	<u>Ag</u>	es 45-64	<u> </u>	<u>Ages</u>	65 and O	<u>ver</u>	Ages :	20 and 0	<u>Over</u>
Behavioral/Psychosocial Risks During the Past 12 Months	Female	Male	All	Female	Male	All	Female	Male	All	Female	Male	All
	%	%	%	%	%	%	%	%	%	%	%	%
Felt harassed/discriminated against	10.1	11.9	11.0	9.6	6.9	8.3	0.7	0.6	0.6	8.4	8.6	8.5
Felt very stressed, tense, or anxious most/all the time	29.9	16.6	23.4	19.4	13.4	16.6	5.7	2.9	4.5	22.5	13.6	18.2
General satisfaction with life												
Satisfied with life	87.1	84.5	85.9	77.9	88.7	83.1	87.4	84.8	86.3	84.1	85.9	85.0
Dissatisfied with life	12.9	15.5	14.1	22.1	11.3	16.9	12.6	15.2	13.7	15.9	14.1	15.0
Belief about extent to which lifestyle/habits can affect health												
Not at all/a little bit	6.1	3.6	4.9	6.4	4.7	5.5	10.0	13.4	11.5	6.8	5.4	6.1
Moderately	6.2	11.1	8.6	6.6	14.5	10.4	14.5	10.8	12.8	7.7	12.2	9.9
Quite a bit/extremely	87.6	85.3	86.5	87.0	80.8	84.0	75.5	75.8	75.6	85.5	82.4	84.0
Belief about extent to which stress/emotional troubles (e.g. depression or anxiety) can affect health												
Not at all/a little bit	6.6	6.9	6.7	5.7	10.6	8.1	15.6	15.8	15.7	7.8	9.4	8.6
Moderately	8.4	12.9	10.6	9.4	7.4	8.4	15.1	18.7	16.7	9.8	11.9	10.8
Quite a bit/extremely	85.0	80.3	82.7	84.9	82.0	83.5	69.3	65.5	67.6	82.4	78.7	80.6

From the 2005 Division of Research Member Health Survey, a random sample survey of Health Plan members aged 20 and over conducted in Spring 2005. Estimates are based on data from 867 respondents, weighted to the age-, gender-, and geographic distribution of the Health Plan membership in this medical center service population in final quarter of 2004.

Risk factors = heart disease, high blood pressure, diabetes, high cholesterol, current smoker, age (\geq 45 for male, \geq 55 for female)

Drank \geq 4 drinks per drinking day (women) or \geq 5 drinks per drinking day (men).

Estimated > 21 drinks per week.

Women: Drank ≥ 4 drinks per drinking day or estimated ≥ 14 drinks per week; Men: Drank ≥ 5 drinks per drinking day or estimated ≥ 21 drinks per week.

Table 4. Things Members Have Done in Past 12 Months to Try to Improve Their Health, Members Aged 20 and Over in the Adult Stockton/Manteca Medical Center Service Population, Spring 2005¹

	Ages 20-44		<u>Ag</u>	Ages 45-64			Ages 65 and Over			Ages 20 and Over		
Actions Taken	Female	Male	All	Female	Male	All	Female	Male	All	Female	Male	All
	%	%	%	%	%	%	%	%	%	%	%	%
Quit/tried to quit smoking												
(People who smoked during past 12 months only)	67.9	50.0	54.8	63.3	36.4	49.6	47.6	40.6	43.1	63.3	44.3	51.4
Tried to lose/lost weight												
All	63.7	46.3	55.2	70.3	56.3	63.5	53.6	43.0	48.8	64.2	49.1	57.0
Overweight (BMI 25-<30) ²	82.6	42.8	56.5	89.1	49.7	65.7	51.3	50.8	51.0	78.5	46.1	58.6
Obese $(BMI \ge 30)^2$	67.8	61.3	64.8	70.0	80.5	75.2	80.4	68.8	76.0	70.5	70.3	70.4
Started to eat healthier foods	54.2	52.5	53.4	53.5	55.1	54.3	42.8	39.3	41.2	52.1	51.4	51.8
Started to exercise more	54.3	46.1	50.3	53.0	42.1	47.7	36.4	34.8	35.7	51.0	43.1	47.2
Started to get more sleep	19.4	21.8	20.5	17.0	16.7	16.8	14.3	14.9	14.6	17.8	19.1	18.4
Learned to manage stress/ emotions better	31.5	21.5	26.6	26.4	22.7	24.6	15.0	5.5	10.7	27.1	19.5	23.5
Cut down/ alcohol/drug use	3.7	11.4	7.4	5.5	10.4	7.9	0.3	6.9	3.3	3.7	10.4	6.9

From the 2005 Division of Research Member Health Survey, a random sample survey of Health Plan members aged 20 and over conducted in Spring 2005. Estimates are based on data from 867 respondents, weighted to the age-, gender-, and geographic distribution of the Health Plan membership in this medical center service population in final quarter of 2004.

² Based on person's characteristic at the time of the survey.

Table 5. Use of Selected Complementary or Alternative Medicine, Modalities in Past 12 Months to Treat or Prevent Own Health Problems, Members Aged 20 and Over in the Adult Stockton/Manteca Medical Center Service Population, Spring 2005¹

	Ages 20-44		<u>Ages 45-64</u>		Ages 65 and Over			Ages 20 and Over				
Selected Complementary or Alternative Medicine	Female	Male	All	Female	Male	All	Female	Male	All	Female	Male	All
	%	%	%	%	%	%	%	%	%	%	%	%
Chiropractic	9.3	10.2	9.7	10.5	10.9	10.7	8.9	6.3	7.7	9.6	9.8	9.7
Acupuncture	1.1	2.1	1.6	4.7	1.3	3.1	1.2	1.3	1.2	2.3	1.7	2.0
Acupressure		4.2	2.1	1.1		0.6	0.6		0.3	0.5	2.2	1.3
Massage Therapy	15.4	13.8	14.6	12.6	12.6	12.6	6.6	4.6	5.7	13.1	12.0	12.6
Deep breathing, mindfulness, or other relaxation/meditation technique	13.0	8.3	10.7	9.7	4.5	7.2	8.0	4.9	6.6	11.1	6.6	8.9
Guided imagery/visualization techniques	2.5	2.3	2.4	1.1	0.5	8.0	1.2		0.7	1.8	1.4	1.6
Hypnosis or self-hypnosis	0.7	2.3	1.5		0.9	0.4	1.9		1.0	0.7	1.5	1.1
Biofeedback		1.1	0.5	0.5		0.3	0.7		0.4	0.3	0.6	0.4
Yoga	5.4	4.7	5.1	3.7	1.8	2.8	1.5	1.5	1.5	4.2	3.3	3.8
Tai Chi, Chi Gong, other movement therapy	0.6	1.1	0.8	1.4	0.8	1.1	2.1	0.3	1.3	1.1	0.9	1.0
Body work (e.g., Feldenkreis)	0.6	1.1	0.8		1.8	0.9	0.8		0.5	0.4	1.2	0.8
Herbal medicine/herbal supplement, or medicinal tea	13.7	9.2	11.5	11.8	6.9	9.4	6.0	8.4	7.1	11.8	8.3	10.1
Megavitamin/high dose vitamin therapy	2.8	1.1	2.0	1.9	0.9	1.4	1.2	1.0	1.1	2.3	1.0	1.7
Homeopathic medicine	1.2	2.1	1.6	0.5		0.3	1.3		0.7	1.0	1.1	1.0
Very low fat diet (Ornish, Pritikin, etc.)	1.8	4.7	3.2	1.4	2.5	2.0	3.5	1.8	2.7	1.9	3.6	2.7
Prayer or spiritual practice	19.9	12.6	16.3	19.5	17.7	18.6	24.4	19.6	22.2	20.5	15.3	18.0
Religious/spiritual healing by others	1.3	3.6	2.4	1.6	3.5	2.5	3.0	1.6	2.4	1.7	3.3	2.5
Energy healing	0.6	2.5	1.5	3.9	0.9	2.4	1.8	1.1	1.5	1.9	1.8	1.8
Psychological counseling	5.8	4.8	5.3	4.4	2.6	3.5	0.7	8.0	0.7	4.5	3.5	4.0
12-Step/Self-help Program	0.7	4.3	2.5	3.5	1.8	2.7	0.6	0.3	0.5	1.6	2.9	2.2

Footnotes for Table 5:

From the 2005 Division of Research Member Health Survey, a random sample survey of Health Plan members aged 20 and over conducted in Spring 2005. Estimates are based on data from 867 respondents, weighted to the age-, gender-, and geographic distribution of the Health lan membership in this medical center service population in final quarter of 2004.

Table 6. Use of Selected Health Information Sources During the Past 12 Months, Members Aged 20 and Over in the Adult Stockton/Manteca Medical Center Service Population, Spring 2005¹

	Ages 20-44		<u>Ages 45-64</u>		Ages 65 and Over			Ages 20 and Over				
Use of selected health information sources	Female	Male	All	Female	Male	All	Female	Male	All	Female	Male	All
	%	%	%	%	%	%	%	%	%	%	%	%
Participated in a KP group or individual Health Ed. program	10.4	7.8	9.1	6.3	12.5	9.3	3.5	9.1	6.0	7.9	9.5	8.7
Received one-on-one counseling from KP staff for behavior change or	3.7	10.1	6.8	2.6	5.3	3.9	3.8	7.4	5.5	3.3	8.1	5.6
chronic health problem mgt.												
Used KP health ed. materials	14.6	11.6	13.1	23.0	14.6	18.9	13.0	18.6	15.6	17.1	13.6	15.4
Read articles in KP Partners in Health newsletter	33.1	14.7	24.0	35.0	21.3	28.3	49.9	40.3	45.5	36.4	20.6	28.7
Used KP Healthwise Handbook	22.9	23.8	23.3	30.7	17.8	24.4	29.2	25.2	27.3	26.5	22.0	24.3
Used KP Health Phone	2.9	1.1	2.0	2.9	0.9	1.9	1.5	0.3	1.0	2.7	0.9	1.8
Obtained health or advice info from Internet websites (KP or non-KP)	16.3	23.2	19.7	17.7	17.3	17.5	4.9	7.2	6.0	15.0	19.0	16.9
Used KP or non-KP group, individual, or web-based smoking cessation services (Past year smokers only)	29.6	13.9	18.1	16.1	10.1	13.1		6.5	4.2	19.1	11.8	14.5
Used KP or non-KP group, individual, or web-based weight loss program (people who tried to lose weight only)	8.3	5.8	7.3	6.8	3.3	5.3	1.6	1.8	1.7	6.9	4.3	5.8
Used KP Member Website to get health info or participate in an online chatroom/Healthy Lifestyle Prog.	2.6	11.2	6.8	4.0	5.5	4.7	3.2	4.4	3.8	3.1	8.3	5.7
Used KP Member Website to make an appt., refill prescriptions, or communicate with KP medical staff	18.4	19.2	18.8	19.4	17.0	18.2	8.7	16.9	12.4	17.2	18.1	17.6

Footnotes for Table 6:

From the 2005 Division of Research Member Health Survey, a random sample survey of Health Plan members aged 20 and over conducted in Spring 2005. Estimates are based on data from 867 respondents, weighted to the age-, gender-, and geographic distribution of the Health Plan membership in this medical center service population in final quarter of 2004.

Table 7. Preferred methods for learning about health (such as how to take care of problems and how to improve your health), Members Aged 20 and Over in the Adult Stockton/Manteca Medical Center Service Population, Spring 2005¹

	Ages 20-44		Ages 45-64			Ages 65 and Over			Ages 20 and Over			
Preferred Methods for Learning about Health ^{2,3}	Female	Male	All	Female	Male	All	Female	Male	All	Female	Male	All
	%	%	%	%	%	%	%	%	%	%	%	%
Small gp. appointments with a clinician or health educator	12.0	5.4	8.8	9.9	4.8	7.4	11.7	5.1	8.7	11.3	5.1	8.3
Individual counseling from a health educator	40.3	33.4	36.9	28.6	21.7	25.2	20.3	18.8	19.6	33.2	27.4	30.4
Brief telephone counseling sessions	16.3	12.0	14.2	20.9	9.5	15.3	13.9	10.1	12.2	17.4	10.9	14.2
Patient education classes												
One day workshop	8.1	3.6	5.9	8.1	4.5	6.4	4.6	5.5	5.0	7.5	4.2	5.9
Multi-session program	16.9	8.4	12.7	10.7	11.8	11.2	3.5	2.3	3.0	12.7	8.6	10.7
In-person group	6.7	2.6	4.7	9.3	2.3	5.9	1.9	1.5	1.7	6.8	2.4	4.6
Phone-based group	1.2		0.6	1.4	0.9	1.2	1.6		0.9	1.3	0.3	8.0
E-mail/Web-based	10.2	5.7	8.0	2.8	9.5	6.0		1.5	0.7	6.1	6.4	6.2
Watch health videos at home	12.7	22.8	17.6	19.2	25.7	22.4	10.2	9.2	9.7	14.4	21.8	18.0
Watch health programs on TV	10.9	21.1	15.9	26.2	17.6	22.0	25.8	11.6	19.3	18.4	18.6	18.5
Listen to taped health phone messages	0.6	2.2	1.4	4.8	1.7	3.3	2.5	1.4	2.0	2.3	1.9	2.1
Use a computer-based program	12.6	23.4	17.9	15.2	20.3	17.7	2.8	8.9	5.6	11.9	20.3	15.9
Get information from websites	25.7	32.9	29.3	28.4	24.0	26.2	4.8	9.1	6.7	23.2	26.5	24.8
Mailed health newsletters	41.8	25.6	33.8	40.4	33.0	36.8	43.5	41.0	42.4	41.6	30.3	36.1
Brochures, short articles, handouts	52.5	34.5	43.6	48.5	38.6	43.7	41.5	33.4	37.8	49.4	35.7	42.8

From the 2005 Division of Research Member Health Survey, a random sample survey of Health Plan members aged 20 and over conducted in Spring 2005. Estimates are based on data from 867 respondents, weighted to the age-, gender-, and geographic distribution of the Health Plan membership in this medical center service population in final quarter of 2004.

² Respondents were instructed to check as many methods as they would use.

We have been told anecdotally that young and middle-aged adults who do most of their work on computer are not likely to respond to a paper and pencil survey. Therefore, these statistics probably underestimate the proportion of members wanting to access information by methods other than coming into the medical facility.

Table S1. Prevalence of Selected Health Problems and Potential Health Risks Among Members Aged 65 and Over in the Adult Stockton/Manteca Medical Center Service Population, Spring 2005¹ (See also Table 2 and 3 for full list of health conditions, functional limitations, and health risks among the adult membership)

Health Problems/ Health Risks ²	Female	Male	All
	%	%	%
Overall rating of health:			
Excellent	4.9	4.2	4.6
Very Good	24.7	30.4	27.3
Good	44.1	37.9	41.3
Fair	25.6	22.6	24.3
Poor	0.7	4.8	2.6
Falls in past 12 mos.			
1 or more	25.5	19.2	23.0
2 or more	10.0	12.2	10.9
3 or more	5.0	5.9	5.4
Problems with teeth, gums or mouth that make eating or talking difficult	10.2	10.4	10.3
Vision problem (not correctable by glasses)	9.2	8.4	8.9
Can read newspaper print with at least one eye	96.6	97.8	97.1
Hearing problem or deafness ³	26.7	43.8	34.5
Uses a hearing aid			
Yes (all)	9.5	17.9	13.4
Yes (restricted to those with hearing problem but not deafness)	40.3	43.3	42.0
Felt depressed much or sad all of past 12 months	2.9	1.9	2.4
Mobility Limitations			
Must stay in house most of time	2.1	4.4	3.2
Needs help from another person in getting around	1.2	0.7	1.0
Needs help of cane, walker, wheelchair, etc., to get around	7.8	7.5	7.7
Doesn't need help from another person/special aid, but has trouble getting around freely	15.2	12.4	14.0
Not limited in any of these ways	73.7	74.9	74.2

Footnotes for Table S1:

- From the 2005 Division of Research Member Health Survey, a random sample survey of Health Plan members aged 20 and over conducted in Spring 2005. Estimates are based on data from 371 respondents, weighted to the age-, gender-, and geographic distribution of the Health Plan membership in fourth quarter 2004.
- ² Based on self-report data not validated by medical record review or physician's report.
- Based on self-report of hearing problem/deafness in health condition checklist or regular use of a hearing aid or non-use but severe hearing problem.

Table S2. Proportion of Members Aged 65 and Over Who Receive/Need Help with Activities of Daily Living Because of A Disability, Health Problem, or Frailty Due to Age in the Adult Stockton/Manteca Medical Center Service Population, Spring 2005¹

Activity for Which Help is Needed/Received	Female	Male	All
	%	%	%
Travel beyond walking distance	11.1	10.8	11.0
Shopping for groceries, etc.	9.3	6.6	8.0
Routine household chores	12.2	7.4	10.0
Laundry	5.4	6.1	5.7
Preparing meals	6.2	4.0	5.2
Eating food/drinking liquids	0.3	1.7	0.9
Managing money	3.9	4.4	4.1
Taking medicines	4.5	5.3	4.9
Using the telephone	1.9	3.7	2.7
Bathing in a tub/shower	5.1	5.4	5.3
Dressing	2.1	2.8	2.4
Using the toilet	0.5	1.0	0.7
Cutting toe nails	18.6	16.3	17.5
Getting in and out of bed/chairs	1.7	5.7	3.5
How well can take care of self at present time			
Completely able	54.4	63.8	58.7
Very well	24.2	16.5	20.7
Fairly well	17.9	15.4	16.7
Not very well	3.0	3.3	3.1
Not at all able	0.5	1.0	0.7

From the 2005 Division of Research Member Health Survey, a random sample survey of Health Plan members aged 20 and over conducted in Spring 2005. Estimates are based on data from 371 respondents, weighted to the age-, gender-, and geographic distribution of the Health Plan membership in fourth quarter 2004.

Table S3. Reported Use of Selected Health Care and Home Support Services During the Past 12 Months by Members Aged 65 and Over in the Adult Stockton/Manteca Medical Center Service Population, Spring 2005¹

Health/Home Support Services	Female	Male	All
	%	%	%
Nursing/convalescent home	1.9	1.8	1.8
Adult day care/Adult day health care program			·
Visiting nurse	0.8	2.3	1.5
Home health aide, paid companion, or attendant	1.1		0.6
Social worker/case manager	0.7	8.0	0.7
Mental health/counseling services	3.6	1.9	2.8
Therapist (PT, speech, etc.)	6.8	7.0	6.9
Housekeeper or errand service	3.2	1.6	2.5
Home-delivered meals	2.5	0.7	1.7
Transportation service	1.4	1.1	1.2

From the 2005 Division of Research Member Health Survey, a random sample survey of Health Plan members aged 20 and over conducted in Spring 2005. Estimates are based on data from 371 respondents, weighted to the age-, gender-, and geographic distribution of the Health Plan membership in fourth quarter 2004.

Table S4. Medication-Related Issues Among Members Aged 65 and Over in the Adult Stockton/Manteca Medical Center Service Population, Spring 2005¹

Medication-Related Issues	Female	Male	All
	%	%	%
Total number of Rx medicines regularly taken ² (based on self-report)			
0	11.2	10.8	11.0
1	11.5	13.1	12.2
2	17.3	18.5	17.8
3	22.0	15.5	19.1
4	15.9	15.1	15.5
<u>></u> 5	22.2	27.1	24.4
Selected medications/ supplements used in past 12 months			
Aspirin to prevent stroke/heart attack	31.6	38.3	34.7
Rx or OTC sleep medicine	21.7	8.9	15.8
Rx or OTC pain medicine	40.4	32.8	37.0
OTC pain medicine	22.3	20.5	21.5
Anti-inflammatory medicine for joint/muscle/arthritis pain	37.6	22.5	30.8
Glucosamine (all)	20.0	16.1	18.2
People with arthritis	35.3	15.1	27.5
Calcium (incl. Tums/Rolaids)	55.9	18.5	38.9
Last complete Rx and OTC medication review with current personal MD or pharmacist			
Within the past 12 months	68.8	79.3	73.4
More than 12 months ago	15.8	11.8	14.1

From the 2005 Division of Research Member Health Survey, a random sample survey of Health Plan members aged 20 and over conducted in Spring 2005. Estimates are based on data from 371 respondents aged 65 and over, weighted to the age-, gender-, and geographic distribution of the Health Plan membership in fourth quarter 2004.

² Based on self-reported data, not validated by a medication review.