

# Mineral County



Population (2008) 4,401

Land Area (square miles) 3,756

Persons per square mile 1.2

## Race/Ethnicity

- White 68.5%
- Black 5.2%
- American Indian & Alaskan Native 15.9%
- Asian 1.6%
- Hispanic or Latino origin 8.8%

Median Household Income \$37,390

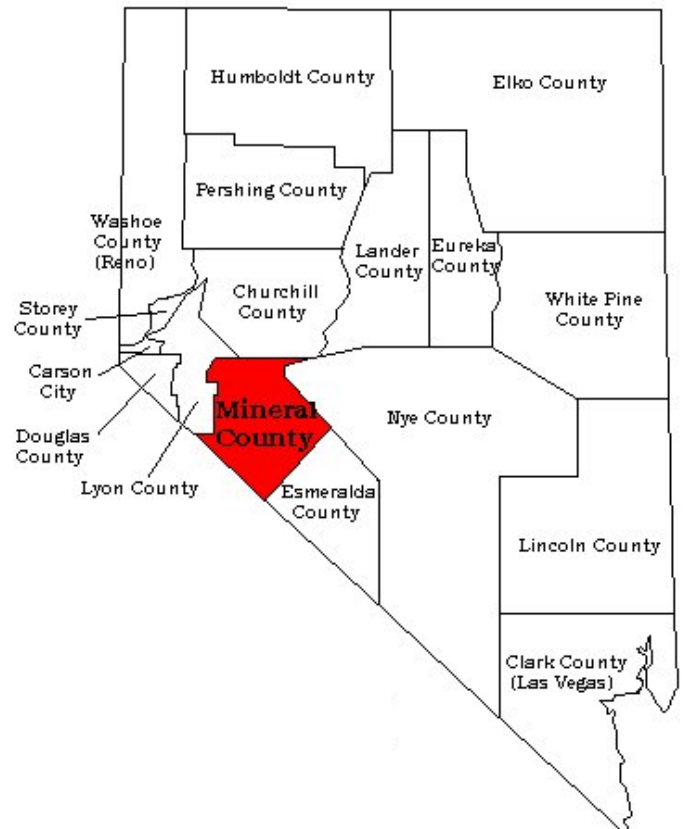
Persons Below Poverty 16.9%

Population and race/ethnicity data are from the Nevada State Demographer; Income and poverty data are from the U.S. Census Bureau

## Healthy People Highlights:

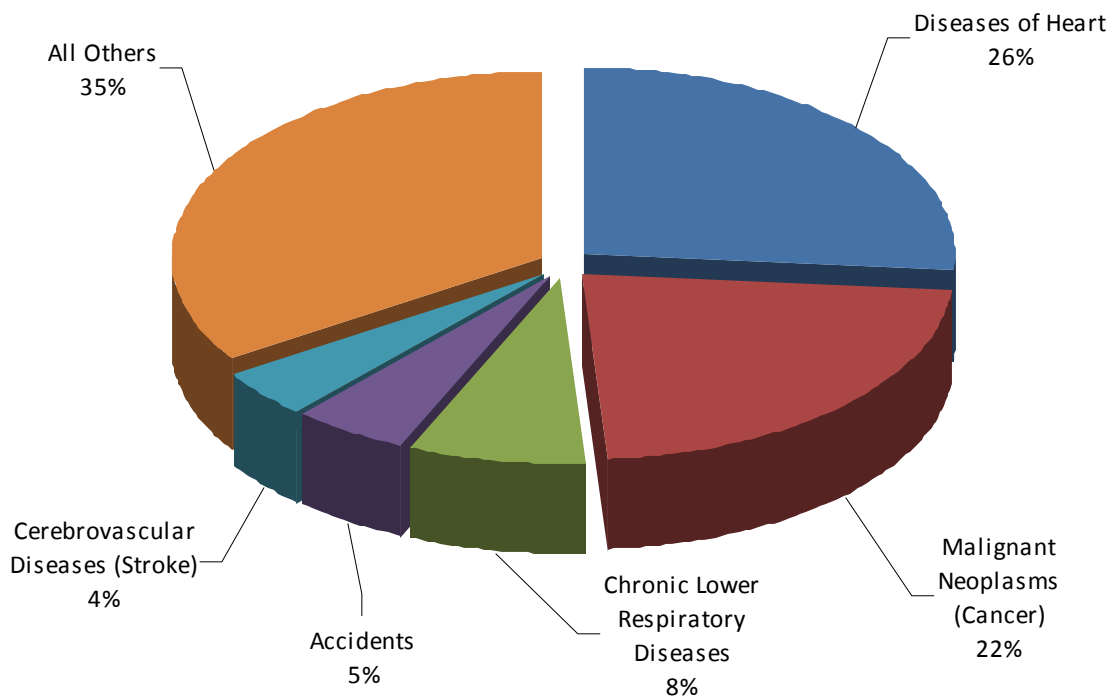
- Mineral County had a higher rate of adolescent pregnancy among females, ages 15 to 19, than Nevada overall.
- Mineral County's hospitalization rate of older adults, ages 65 years and older, with congestive heart failure fluctuated from 2000-2008. In 2008, the county rate jumped to four times the reported state rate.
- The hospitalization rate for non-fatal spinal cord injuries from 2000-2008 averaged fifteen times higher for Mineral County than the Healthy People 2010 target and seven times higher than Nevada overall.
- The motor vehicle crash mortality rate slightly declined for Nevada, and steeply climbed to almost six times the state rate for Mineral County, during the years 2000—2008.
- From 2000-2008, the homicide mortality rate for Mineral County averaged triple that of the Nevada rate.
- The mortality rate for young adults, ages 20 to 24, for Mineral County averaged twice the state rate from 2000-2008.

Note: Small population size may impact the reliability of rates.



# Leading Causes of Death

## Mineral



### 2000 - 2008 Pooled Data

The list of Mineral County's top five leading causes of death was led by heart disease (26%), closely followed by malignant neoplasms—cancer (22%). Chronic lower respiratory diseases (8%), accidents (5%), and cerebrovascular diseases—stroke (4%) rounded out the list. All other causes of death accounted for the remaining 35% of the county's mortality.

Similarly, the leading cause of death for Nevada was heart disease (26%), followed by malignant neoplasms—cancer (23%), chronic lower respiratory diseases (6%), accidents (5%), and cerebrovascular diseases (5%).

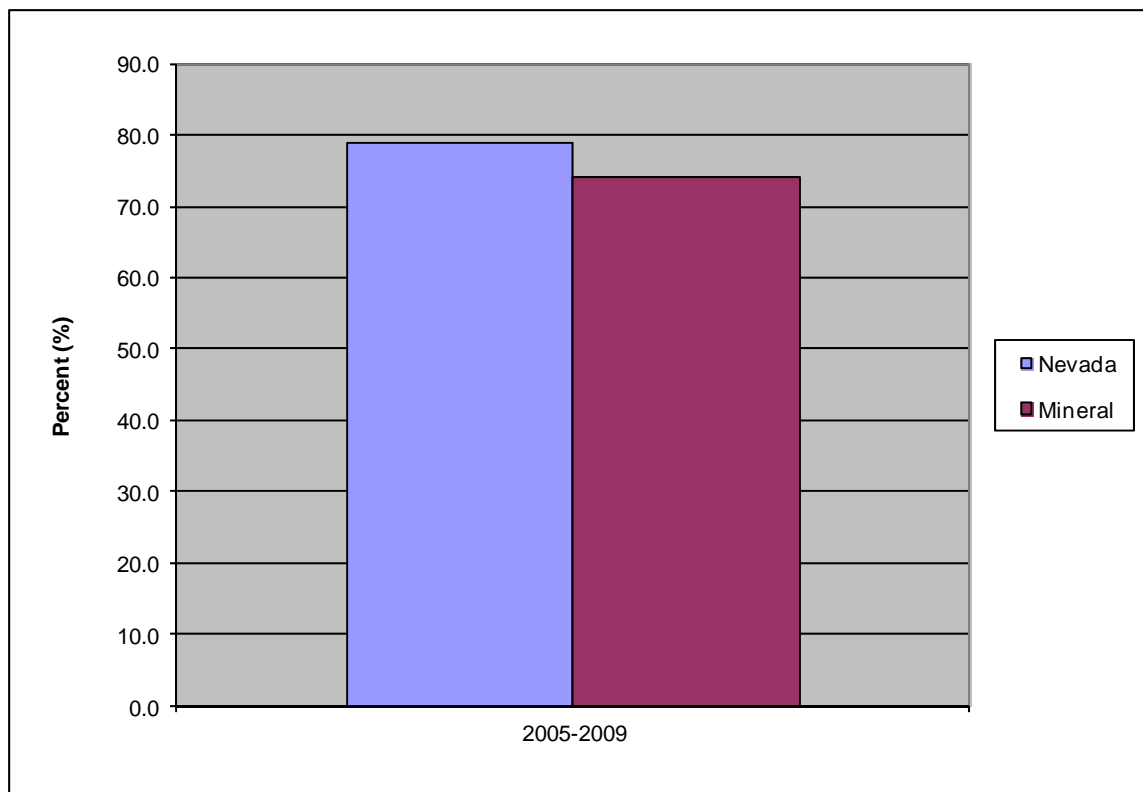
\*The data are from Nevada Vital Statistics Records.  
Note: 2007 and 2008 data are not final and are subject to change.

# Access to Quality Health Services

**Healthy People 2010 Objective (1-1):** Increase the proportion of persons with health insurance.

**Healthy People 2020 Objective AHS HP2020-1:** Increase the proportion of persons with health insurance.

**Aggregated Proportion of Persons with Health Insurance, Mineral County and Nevada, BRFSS Data, 2005 - 2009.\***



According to Behavioral Risk Factor Surveillance System data, from 2005—2009, the percentage of persons with health insurance was lower in Mineral County than in Nevada. Neither the county nor the state met the Healthy People 2010 goal of 100 percent.

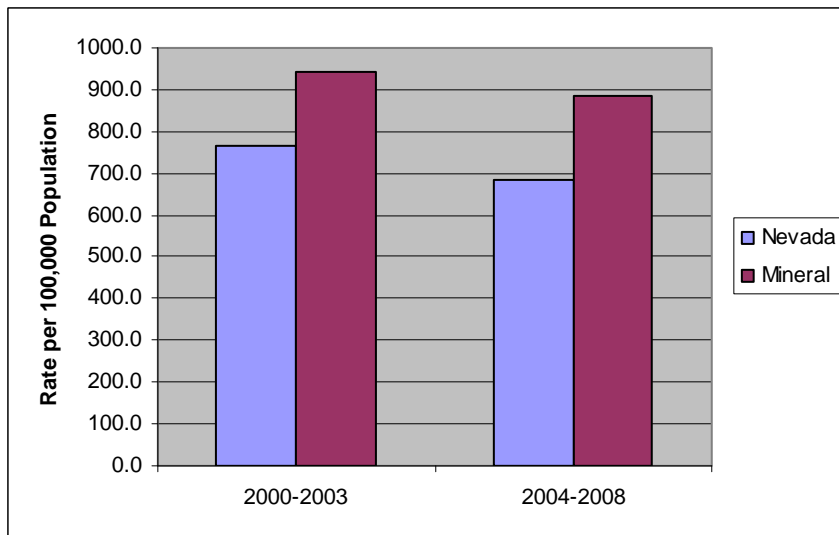
\*These percentages are weighted to survey population characteristics. Not all counties were included in the survey results.

# Arthritis, Osteoporosis, and Chronic Back Conditions

**Healthy People 2010 Objective (15-28):** Reduce hip fractures among females and males aged 65 and older.

**Healthy People 2020 Objective AOCBC HP2020-11:** Reduce hip fractures among older adults.

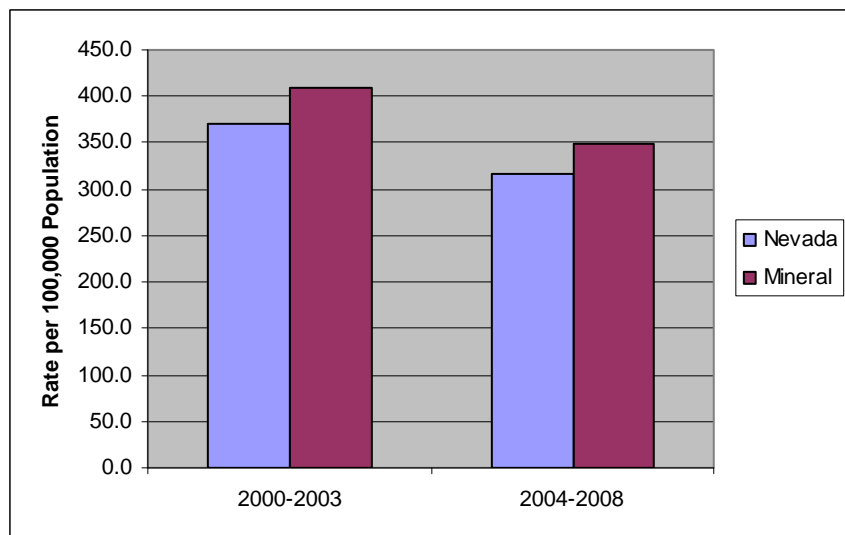
**Aggregated Hospitalization Rate for Hip Fractures Among Females Aged 65 Years and Older, Mineral County and Nevada, 2000 - 2003 and 2004 - 2008.\***



There was a higher rate of hospitalization for hip fractures among females, aged 65 years and older, in Mineral County than the state overall from 2000-2008.

On average Mineral County's rate was more than twice the Healthy People 2010 target rate of 416 per 100,000 population.

**Aggregated Hospitalization Rate for Hip Fractures Among Males Aged 65 Years and Older, Mineral County and Nevada, 2000 - 2003 and 2004 - 2008.\***



The hospitalization rate among males, aged 65 years and older, is also higher in Mineral County than the Nevada rate from 2000 to 2008.

The county and the state met the Healthy People 2010 target rate of 459.4 per 100,000 population.

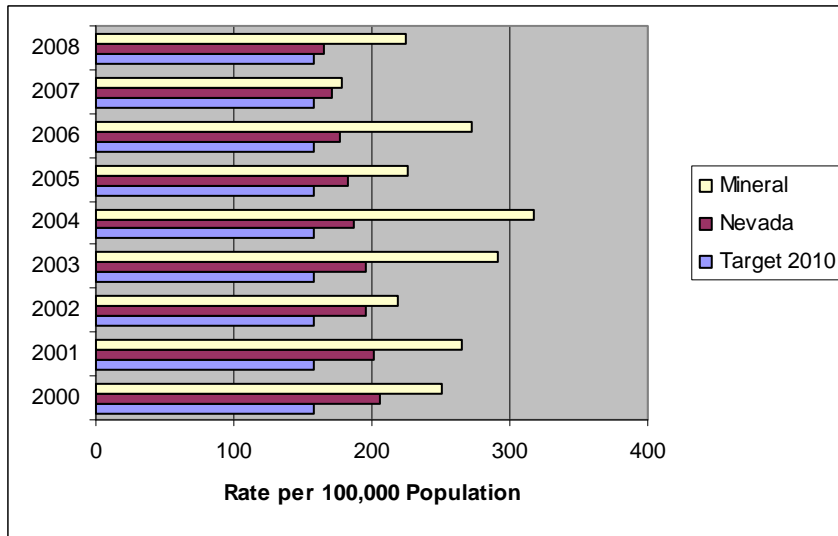
\*The Nevada data are from Nevada Inpatient Hospital Discharge (NIHDD).

# Cancer

**Healthy People 2010 Objective (3-1):** Reduce the overall cancer death rate.

**Healthy People 2020 Objective C HP2020-1:** Reduce the overall cancer death rate.

**Age-Adjusted Overall Cancer Death Rate, Mineral County and Nevada, 2000 - 2008.\***



The overall cancer mortality rate declined from 2000-2008 for Nevada, while the Mineral County rate strongly fluctuated above the state rate.

The Healthy People 2010 target rate of 158 per 100,000 population was not met during 2000—2008. However, the state may reach the goal before the end of 2010 if the trend continues.

**Healthy People 2010 Objective (3-2):** Reduce the lung cancer death rate.

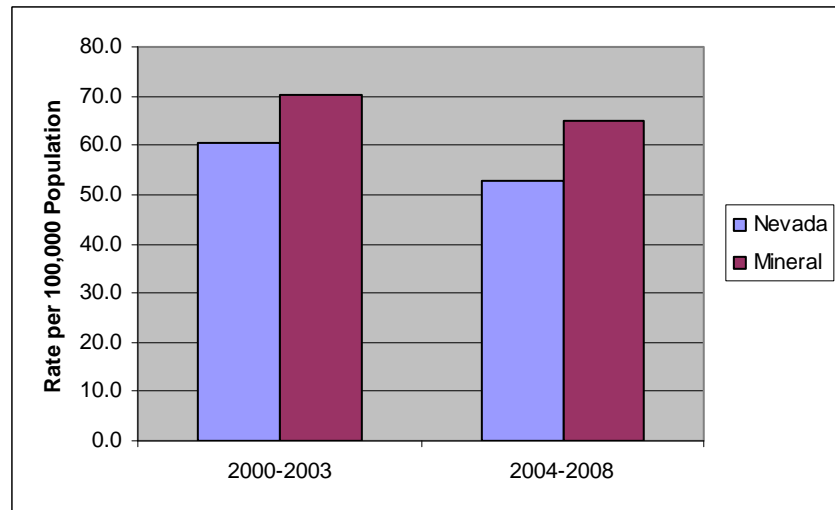
**Healthy People 2020 Objective C HP2020-2:** Reduce the lung cancer death rate.

On average in 2004-2008, Mineral County and Nevada rates of lung cancer mortality declined from their 2000—2003 levels.

The county rate was consistently higher than the state rate.

Neither the state nor the county met the Healthy People 2010 target rate of 43.3 lung cancer deaths per 100,000 population.

**Aggregated Age-Adjusted Lung Cancer Death Rate, Mineral County and Nevada, 2000 - 2003 and 2004 - 2008.\***

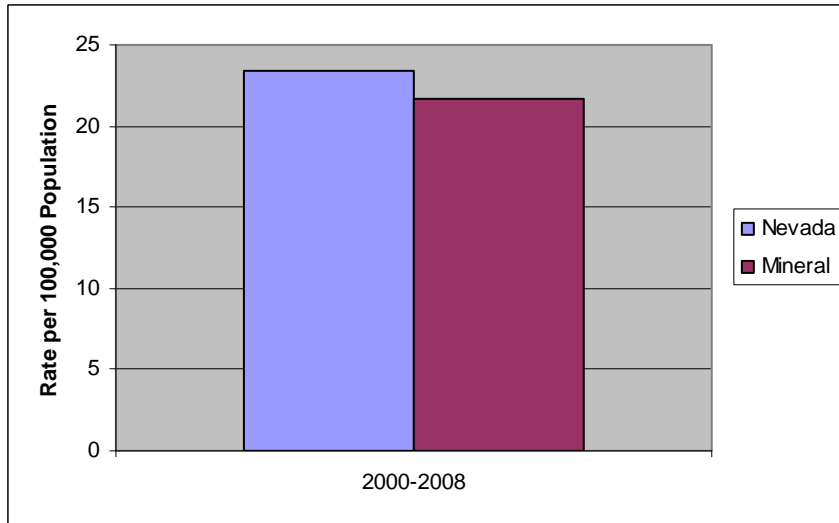


\*These rates are age-adjusted to the 2000 U.S. standard population. The Nevada data are from Nevada Vital Statistics Records. Note: 2007 and 2008 data are not final and are subject to change.

**Healthy People 2010 Objective (3-3):** Reduce the breast cancer death rate.

**Healthy People 2020 Objective C HP2020-3:** Reduce female the breast cancer death rate.

**Aggregated Age-Adjusted Female Breast Cancer Death Rate, Mineral County and Nevada, 2000 - 2008.\***



The state reported a higher female breast cancer mortality rate than Mineral County during the years 2000—2008.

On average from 2000-2008, Mineral County met the Healthy People 2010 target rate of 21.3 female breast cancer deaths per 100,000 population.

**Healthy People 2010 Objective (3-5):** Reduce the colorectal cancer death rate.

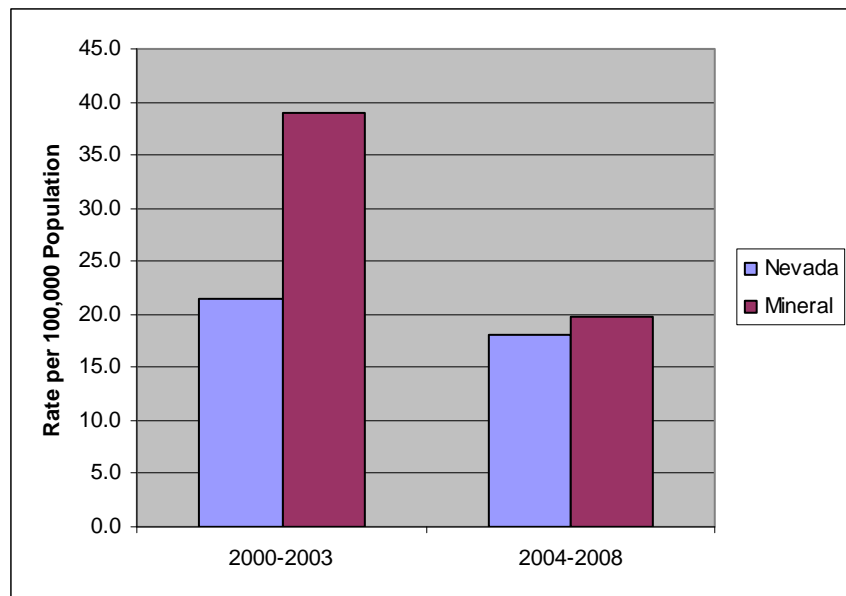
**Healthy People 2020 Objective C HP2020-5:** Reduce the colorectal cancer death rate.

In 2000—2003, the Mineral County colorectal cancer mortality rate was almost twice as high as the Nevada rate.

In 2004—2008, both rates declined by nearly half. The county rate falling to parity with the state rate.

The state and the county were still higher than the Healthy People 2010 target rate of 13.7 deaths per 100,000 population.

**Aggregated Age-Adjusted Colorectal Cancer Death Rate, Mineral County and Nevada, 2000 - 2003 and 2004 - 2008.\***

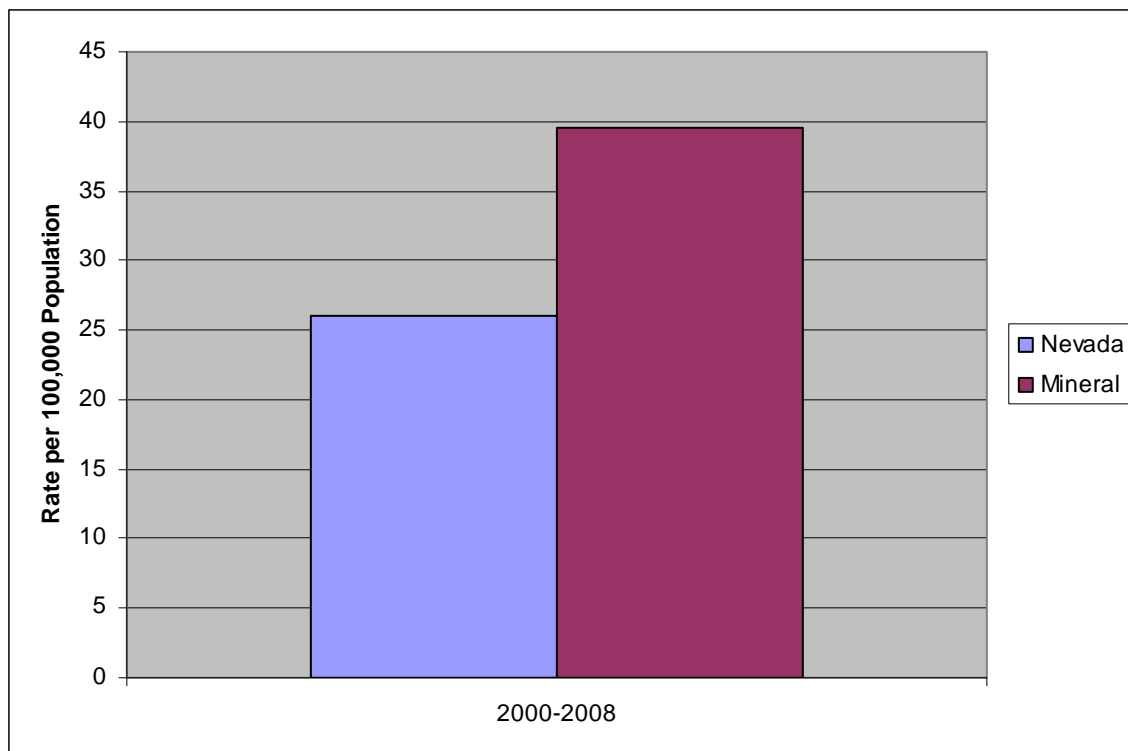


\*These rates are age-adjusted to the 2000 U.S. standard population. The Nevada data are from Nevada Vital Statistics Records. Note: 2007 and 2008 data are not final and are subject to change.

**Healthy People 2010 Objective (3-7):** Reduce the prostate cancer death rate.

**Healthy People 2020 Objective C HP2020-7:** Reduce the prostate cancer death rate.

**Aggregated Age-Adjusted Prostate Cancer Death Rate, Mineral County and Nevada, 2000 - 2008.\***



Mineral County reported a notably higher prostate cancer mortality rate than was reported for Nevada during 2000—2008.

On average from 2000-2008, Nevada met the Healthy People 2010 target rate of 28.2 prostate cancer deaths per 100,000 population. Mineral County was almost 40 percent higher than the Healthy People 2010 objective.

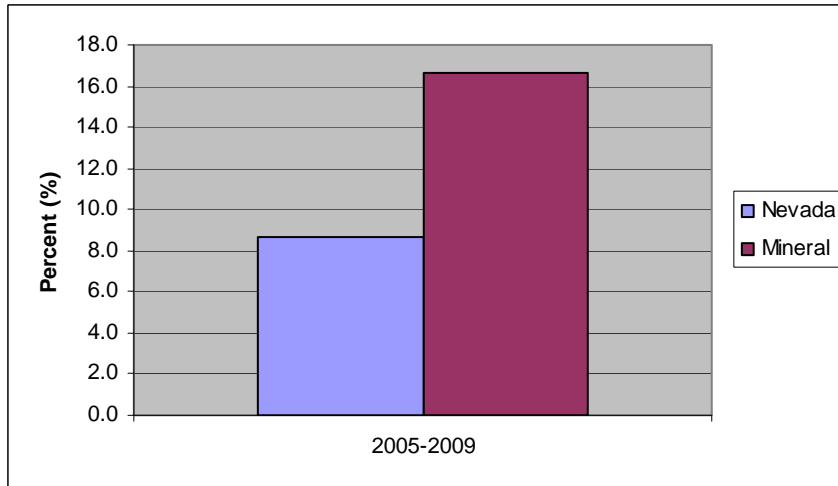
\*These rates are age-adjusted to the 2000 U.S. standard population. The Nevada data are from Nevada Vital Statistics Records. Note: 2007 and 2008 data are not final and are subject to change.

# Diabetes

**Healthy People 2010 Objective (5-3):** Reduce the overall percentage of diabetes that is clinically diagnosed.

**Healthy People 2020 Objective D HP2020-1:** Reduce the annual number of new cases of diagnosed diabetes in the population.

**Aggregated Proportion of Persons with Clinically Diagnosed Diabetes, Mineral County and Nevada, BRFSS Data, 2005 - 2009.\***



According to the Behavioral Risk Factor Surveillance System data, the percentage of persons with clinically diagnosed diabetes for Mineral County was almost twice the state rate from 2005-2009.

Neither Nevada nor Mineral County met the Healthy People 2010 target rate of 3.8 percent over the study years 2005-2009.

\*These percentages are weighted to survey population characteristics. Not all counties were included in the survey results.

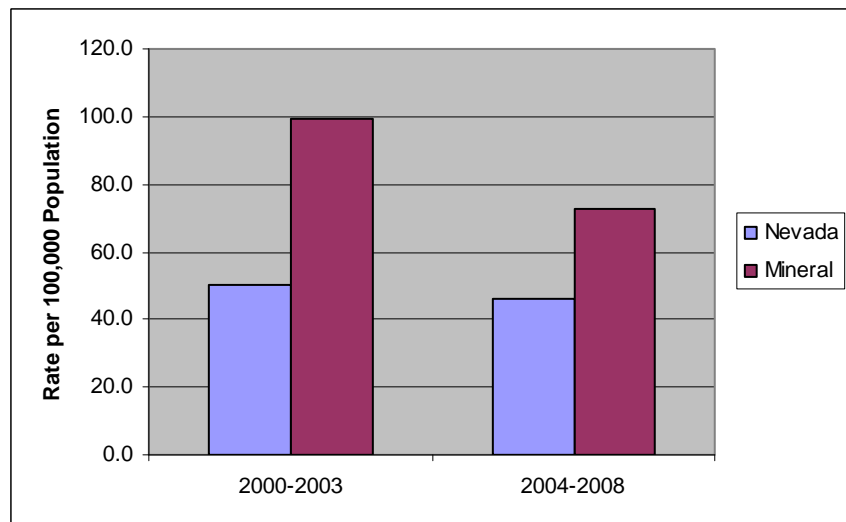
**Healthy People 2010 Objective (5-5):** Reduce the diabetes death rate.

**Healthy People 2020 Objective D HP2020-3:** Reduce the diabetes death rate.

**Aggregated Age-Adjusted Diabetes Death Rate, Mineral County and Nevada, 2000 - 2003 and 2004 - 2008.\***

On average from 2000-2008, the diabetes mortality rate was at least 60 percent higher in Mineral County than Nevada overall and the Healthy People 2010 target rate of 46 diabetes deaths per 100,000 population.

The trends for both the county and the state declined from 2000-2008.



\*These rates are age-adjusted to the 2000 U.S. standard population. The Nevada data are from Nevada Vital Statistics Records. Note: 2007 and 2008 data are not final and are subject to change.

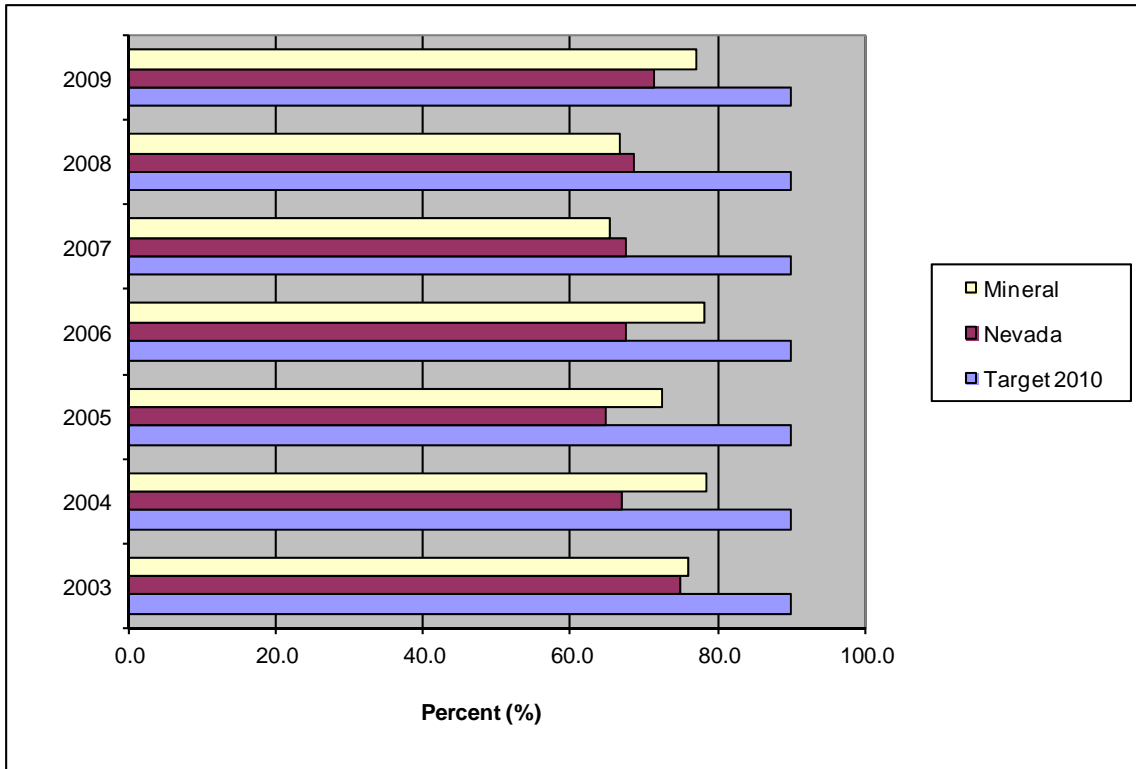


# Education and Community-Based Programs

Healthy People 2010 Objective ECBP HP2010-1: Increase high school completion.

Healthy People 2020 Objective ECBP HP2020-6: Increase the proportion of the population that completes high school education.

High School Completion Rate (Percent), Mineral County and Nevada, 2003 - 2009.\*



The high school completion rate for Mineral County and Nevada fluctuated during the years 2003 to 2009. The Healthy People 2010 goal of 90 percent was not met.

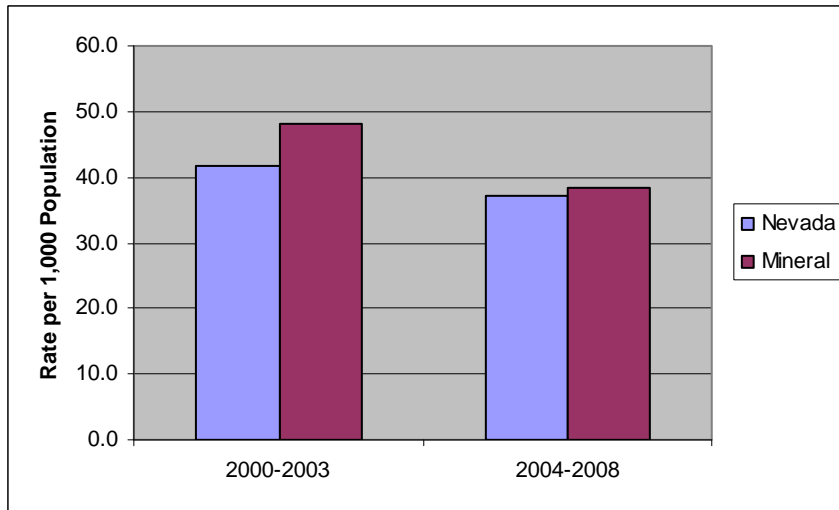
\*The Nevada data are from the Nevada Annual Reports of Accountability.

# Family Planning

**Healthy People 2010 Objective (9-7):** Reduce pregnancies among adolescent females.

**Healthy People 2020 Objective FP HP2020–8:** Reduce pregnancies among adolescent females, aged 15-17 and aged 18-19.

**Aggregated Adolescent Pregnancy Rate Among Females Aged 15 to 17 Years, Mineral County and Nevada, 2000 - 2003 and 2004 - 2008.\***



Mineral County had a higher rate of adolescent pregnancy among females, ages 15 to 17, than Nevada overall during the years 2000–2008.

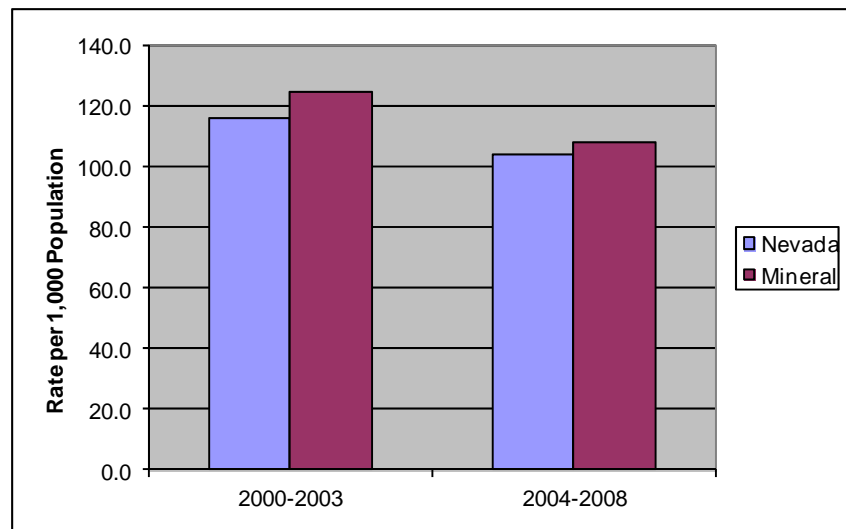
On average from 2004-2008, both Nevada and Mineral County met the Healthy People 2010 target rate of 39 per 1,000 population.

Mineral County had a higher rate of adolescent pregnancy among females, ages 18 to 19, than the state rate from 2000-2008.

Both rates did trend downward from 2000-2008.

This is a new objective for Healthy People 2020, so no Healthy People 2010 target exists.

**Aggregated Adolescent Pregnancy Rate Among Females Aged 18 to 19 Years, Mineral County and Nevada, 2000 - 2003 and 2004 - 2008.\***

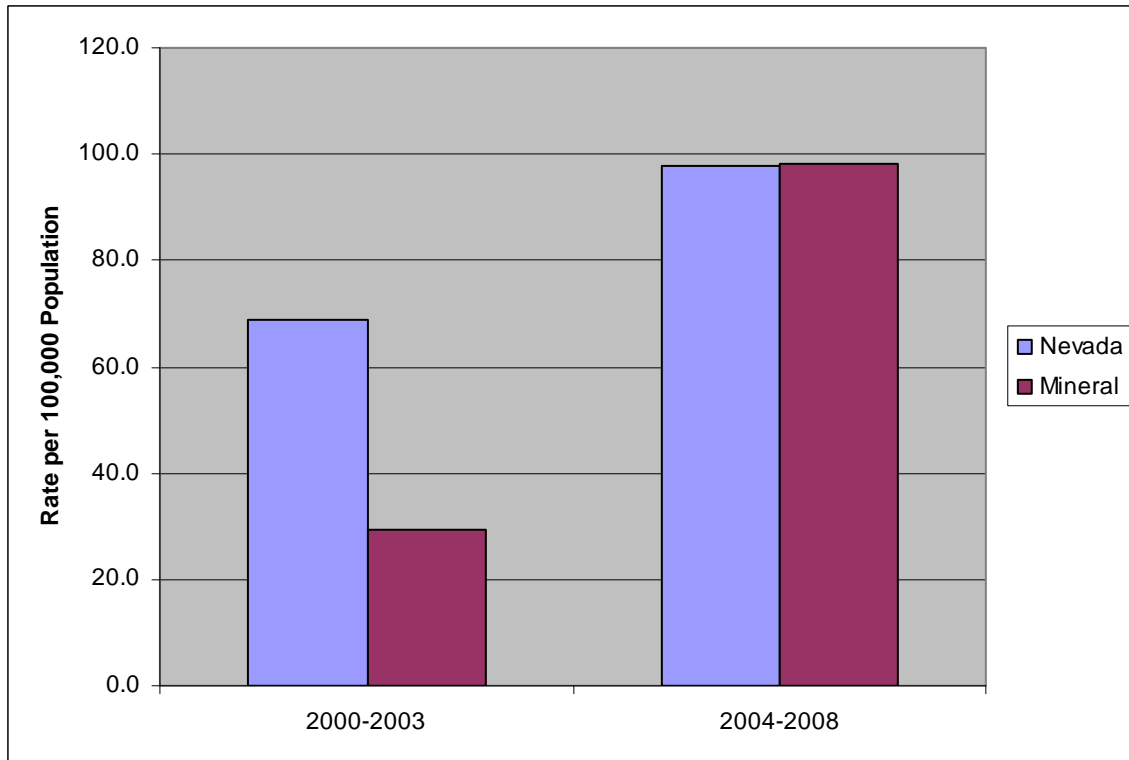


\*The Nevada data are from Nevada Vital Statistics Records.  
Note: 2008 data are not final and are subject to change.

# Healthcare-Associated Infections

**Healthy People 2020 Objective HAI HP2020-2:** Reduce invasive methicillin-resistant staphylococcus aureus (MRSA) infections.

**Aggregated Rate of Invasive Methicillin-Resistant Staphylococcus Aureus (MRSA) Infections, Mineral County and Nevada, 2000 - 2003 and 2004 - 2008.\***



The rate of invasive methicillin-resistant staphylococcus aureus (MRSA) infections increased from 2000-2008 for both Nevada and Mineral County. The average total rates for the years 2004—2008 for the state and county approached 100 MRSA infections per 100,000 population.

This is a new Healthy People 2020 indicator. Both Mineral County and Nevada averaged a MRSA infection rate of more than 14 times the new Healthy People 2020 target of 6.56 per 100,000 population during the years 2004-2008.

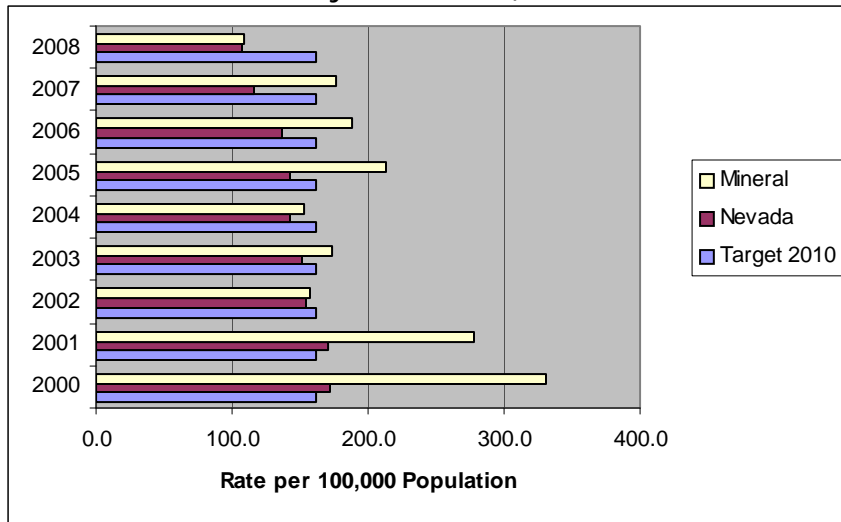
\*These rates are age-adjusted to the 2000 U.S. standard population. Nevada data are from the Nevada Inpatient Hospital Discharge Database (NIHDD).

# Heart Disease and Stroke

**Healthy People 2010 Objective (12-1):** Reduce coronary heart disease deaths.

**Healthy People 2020 Objective HDS HP2020-2:** Reduce coronary heart disease deaths.

**Age-Adjusted Coronary Heart Disease Death Rate, Mineral County and Nevada, 2000 - 2008.\***



Both the Nevada and Mineral County rates for coronary heart disease mortality declined from 2000-2008. In 2008, both met the Healthy People 2010 target rate of 162 deaths per 100,000 population.

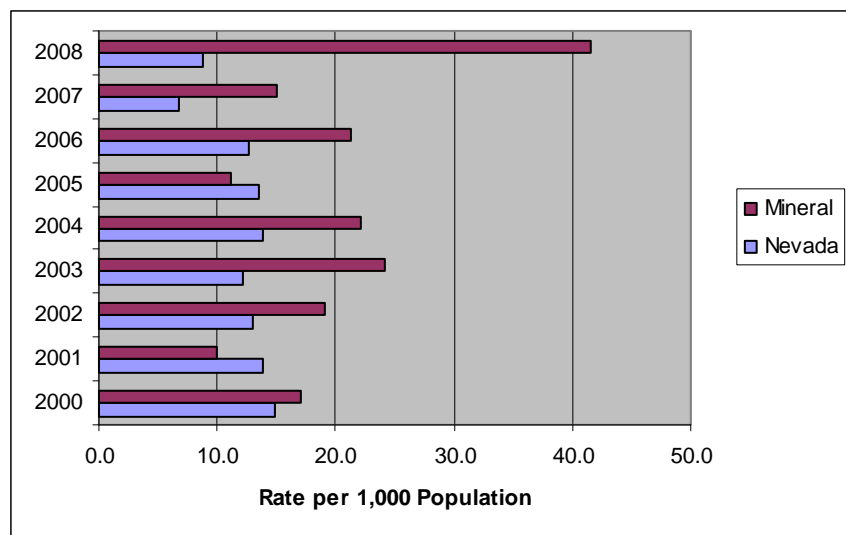
\*These rates are age-adjusted to the 2000 U.S. standard population. The Nevada data are from Nevada Vital Statistics Records. Note: 2007 and 2008 data are not final and are subject to change.

**Healthy People 2010 Objective (12-6.):** Reduce the rate of hospitalizations of older adults aged 65 years and older with congestive heart failure.

**Hospitalization Rate of Older Adults Aged 65 Years and Older With Congestive Heart Failure, Mineral County and Nevada, 2000 - 2008.\***

Hospitalization rates of older adults, aged 65 years and older, with congestive heart failure fluctuated from 2000-2008 for both Mineral County and Nevada.

Mineral County's rate in 2008 jumped to four times the state rate.

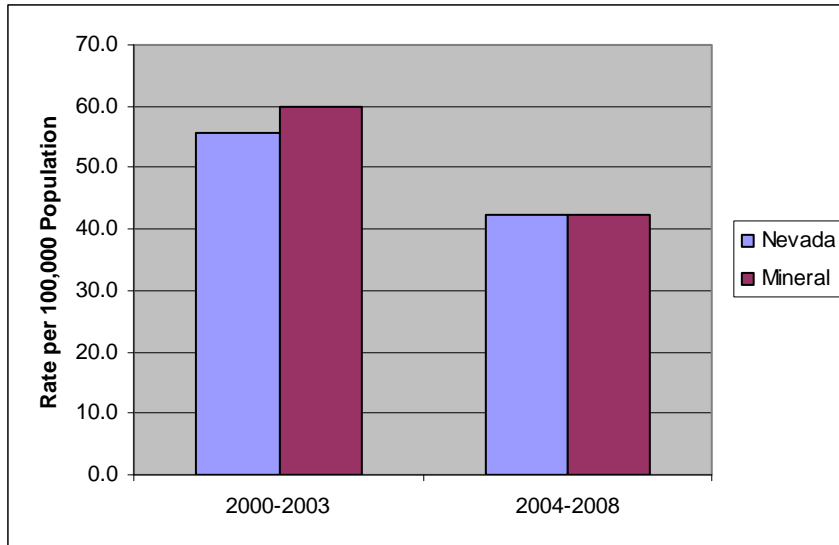


\*The Nevada data are from Nevada Inpatient Hospital Discharge (NIHDD).

**Healthy People 2010 Objective (12-7):** Reduce stroke deaths.

**Healthy People 2020 Objective HDS HP2020-3:** Reduce stroke deaths.

**Aggregated Age-Adjusted Stroke Death Rate, Mineral County and Nevada, 2000 - 2003 and 2004 - 2008.\***



On average, the stroke mortality rates for both Mineral County and Nevada declined over the reported years 2000 to 2008.

Both the county and the state met the Healthy People 2010 target rate of 50 deaths per 100,000 population on average between 2004-2008.

\*These rates are age-adjusted to the 2000 U.S. standard population. The Nevada data are from Nevada Vital Statistics Records. Note: 2007 and 2008 data are not final and are subject to change.

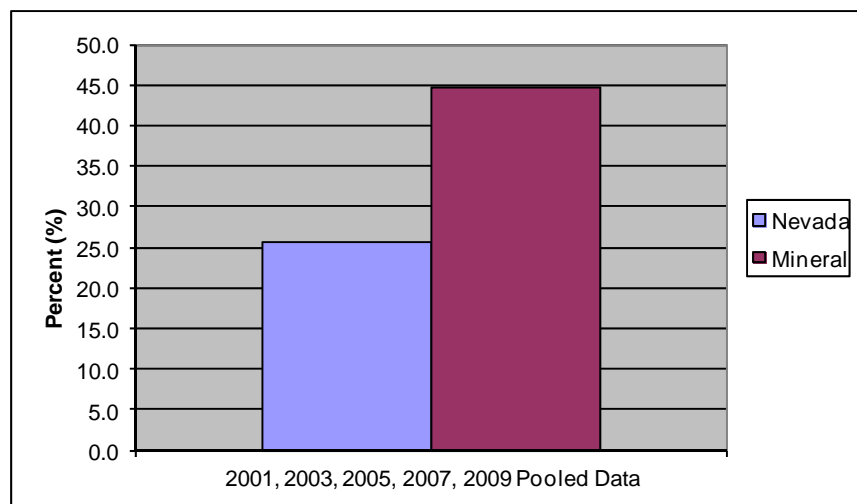
**Healthy People 2010 Objective (12-9a.):** Reduce the proportion of adults with high blood pressure.

**Healthy People 2020 Objective HDS HP2020-5.1:** Reduce the proportion of adults with hypertension.

Per the Behavioral Risk Factor Surveillance System (BRFSS) data, the percentage of adults with high blood pressure is notably higher for Mineral County than for Nevada overall.

Mineral County's rate was three times higher than the Healthy People 2010 goal of 14 percent.

**Aggregated Proportion of Adults with High Blood Pressure, Mineral County and Nevada, BRFSS Data, 2001, 2003, 2005, 2007, 2009.\***



\*These percentages are weighted to survey population characteristics. Not all counties were included in the survey results.

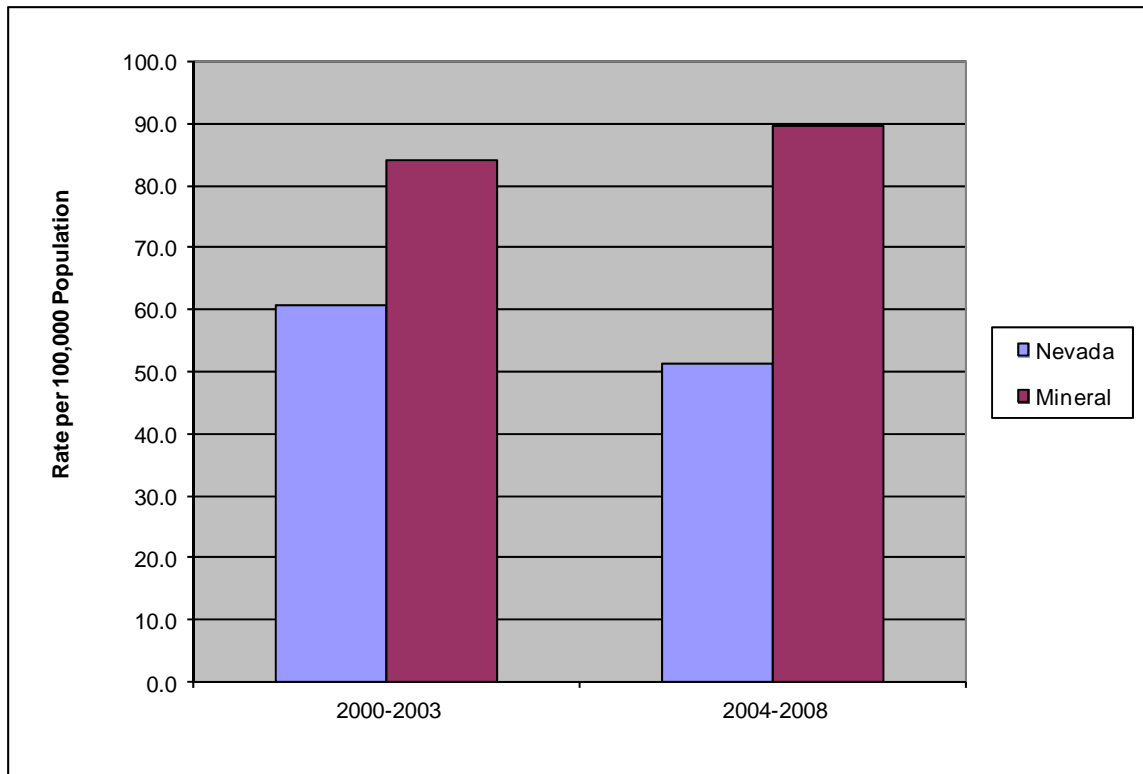
# Immunization and Infectious Diseases

**Healthy People 2010 Objective (14-17):** Reduce hospitalization caused by peptic ulcer disease in the United States.

**Healthy People 2020 Objective IID HP2020-10:** Reduce hospitalization caused by peptic ulcer disease in the United States.

NOTE: This objective was removed from the final HP 2020 release.

**Aggregated Age-Adjusted Rate of Hospitalizations for Peptic Ulcer Disease, Mineral County and Nevada, 2000 - 2003 and 2004 - 2008\*.**



The rate of hospitalizations for peptic ulcer disease decreased in Nevada overall and increased in Mineral County on average from 2000-2008. The county rate consistently averaged higher than the state rate and was almost twice as high as the Healthy People 2010 target rate of 46 per 100,000 population from 2004-2008. Neither the state nor the county met the Healthy People 2010 objective.

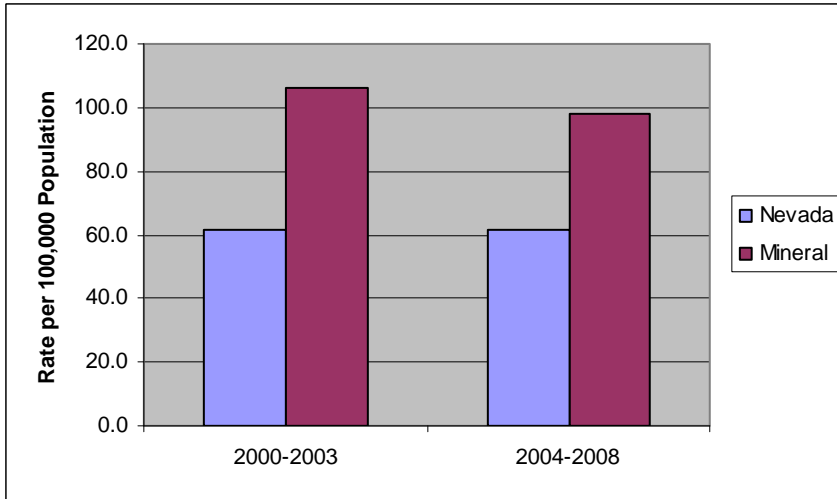
\*These rates are age-adjusted to the 2000 U.S. standard population. The Nevada data are from the National Electronic Telecommunications System for Surveillance (NEDSS).

# Injury and Violence Prevention

**Healthy People 2010 Objective (15-1):** Reduce hospitalizations for nonfatal head injuries.

**Healthy People 2020 Objective IVP HP2020-2.2:** Reduce hospitalizations for nonfatal traumatic brain injuries.

**Aggregated Hospitalization Rate for Non-Fatal Head Injuries, Mineral County and Nevada, 2000 - 2003 and 2004 - 2008.\***



The non-fatal head injury hospitalization rate for Mineral County decreased from 2000-2008, while the state rate remained steady.

The county rate was more than 60 percent higher than the Nevada rate.

Neither met the Healthy People 2010 target rate of 41.2 per 100,000 population.

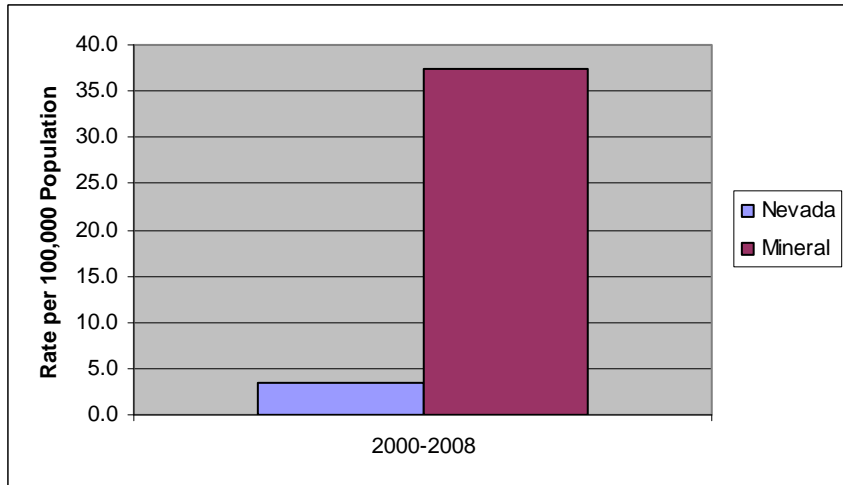
**Healthy People 2010 Objective (15-2):** Reduce hospitalizations for nonfatal spinal cord injuries.

**Healthy People 2020 Objective IVP HP2020-3:** Reduce fatal and nonfatal traumatic spinal cord injury.

**Aggregated Hospitalization Rate for Non-Fatal Spinal Cord Injuries, Mineral County and Nevada, 2000 - 2008.\***

The hospitalization rate for non-fatal spinal cord injuries during this decade has averaged seven times higher for Mineral County than for Nevada from 2000-2008.

This rate was also 15 times higher than the Healthy People 2010 target rate of 2.4 per 100,000 population.

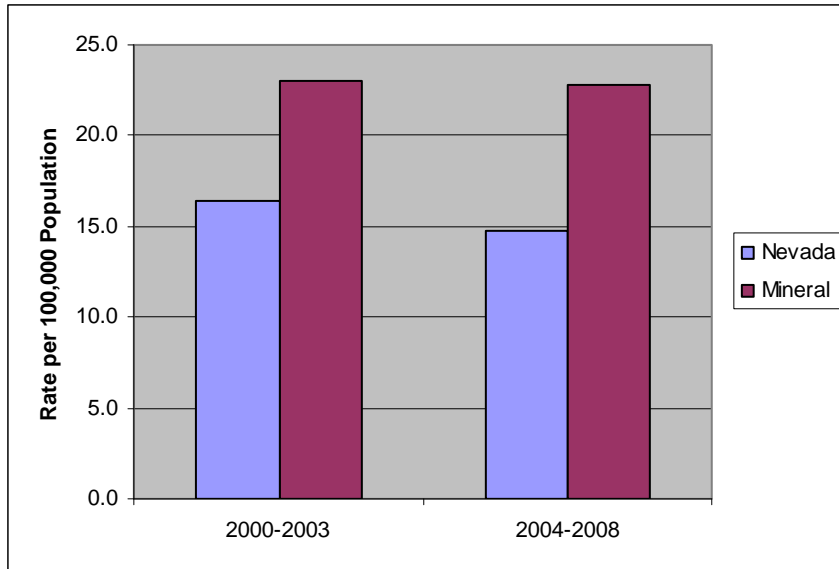


\*The Nevada data are from the Nevada Inpatient Hospital Discharge Database (NIHDD).

**Healthy People 2010 Objective (15-3):** Reduce firearm-related deaths.

**Healthy People 2020 Objective IVP HP2020-30:** Reduce firearm-related deaths.

**Aggregated Age-Adjusted Firearm Related Death Rate, Mineral County and Nevada, 2000 - 2003 and 2004 - 2008.\***



The firearm mortality rate declined slightly for Nevada and remained steady for Mineral County from the years 2000—2008.

The Mineral County rate was more than six times higher than the Healthy People 2010 target of 3.6 per 100,000 population.

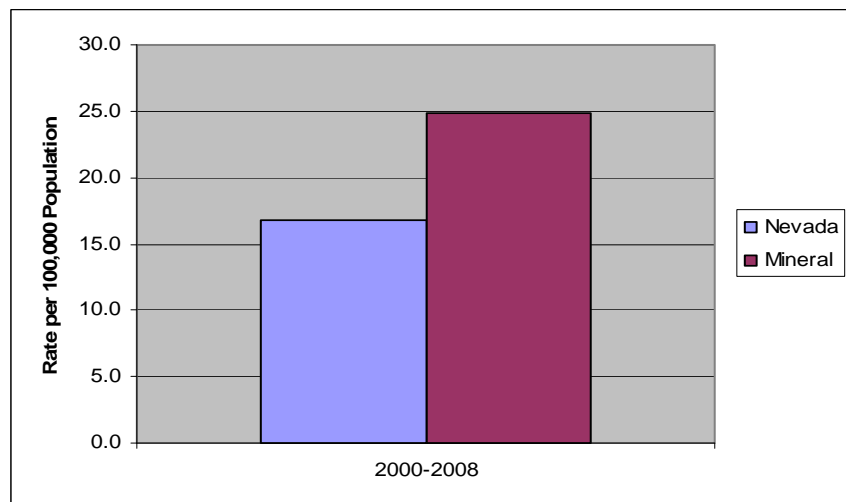
**Healthy People 2010 Objective (15-8):** Reduce deaths caused by poisonings.

**Healthy People 2020 Objective IVP HP2020-9:** Prevent an increase in the rate of poisoning deaths.

**Aggregated Age-Adjusted Death Rate Caused by Poisoning, Mineral County and Nevada, 2000 - 2008.\***

During the period 2000—2008, the poisoning mortality rate averaged higher for Mineral County than the state.

The Mineral County rate was more than sixteen times higher than the Healthy People 2010 target rate of 1.5 deaths per 100,000 population.



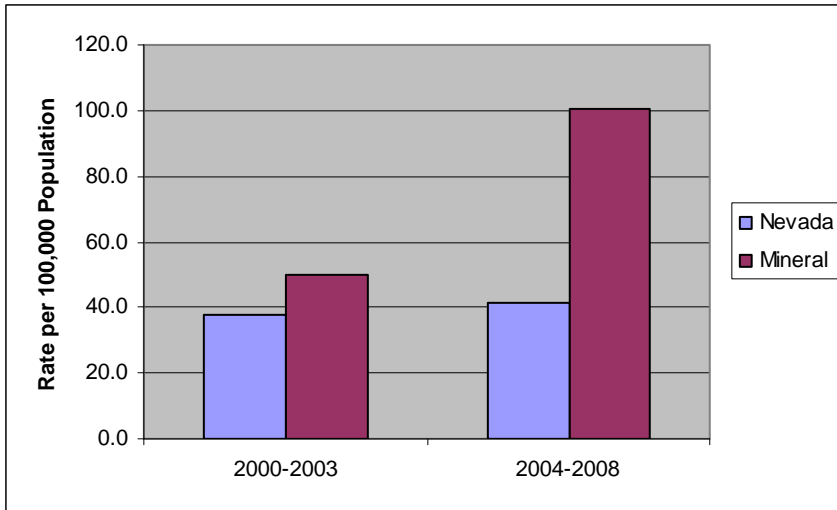
\*These rates are age-adjusted to the 2000 U.S. standard population. The Nevada data are from Nevada Vital Statistics Records. Note: 2007 and 2008 data are not final and are subject to change.



**Healthy People 2010 Objective (15-13):** Reduce deaths caused by unintentional injuries.

**Healthy People 2020 Objective IVP HP2020-11:** Reduce unintentional injury deaths.

**Aggregated Age-Adjusted Death Rate Caused by Unintentional Injuries, Mineral County and Nevada, 2000 - 2003 and 2004 - 2008.\***



The rate of unintentional injury mortality more than doubled in Mineral County, while only rising slightly in Nevada from 2000-2008.

The average rate for Mineral County from 2004-2008 was more than five times the Healthy People 2010 target rate of 17.1 deaths per 100,000

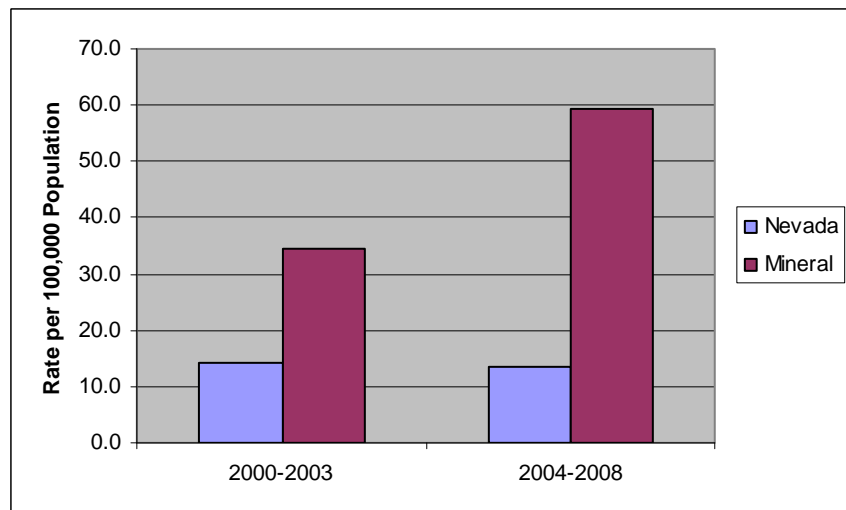
**Healthy People 2010 Objective (15-15a.):** Reduce deaths caused by motor vehicle crashes.

**Healthy People 2020 Objective IVP HP2020-13:** Reduce motor vehicle crash-related deaths.

**Aggregated Age-Adjusted Death Rate Caused by Motor Vehicle Crashes, Mineral County and Nevada, 2000 - 2003 and 2004 - 2008.\***

The motor vehicle crash mortality rate declined slightly for Nevada, and increased to almost four times the state rate for Mineral County, during the years 2000—2008.

The average rate for Mineral County from 2004-2008, was more than seven times the Healthy People 2010 target rate of 8.0 deaths per 100,000 population.

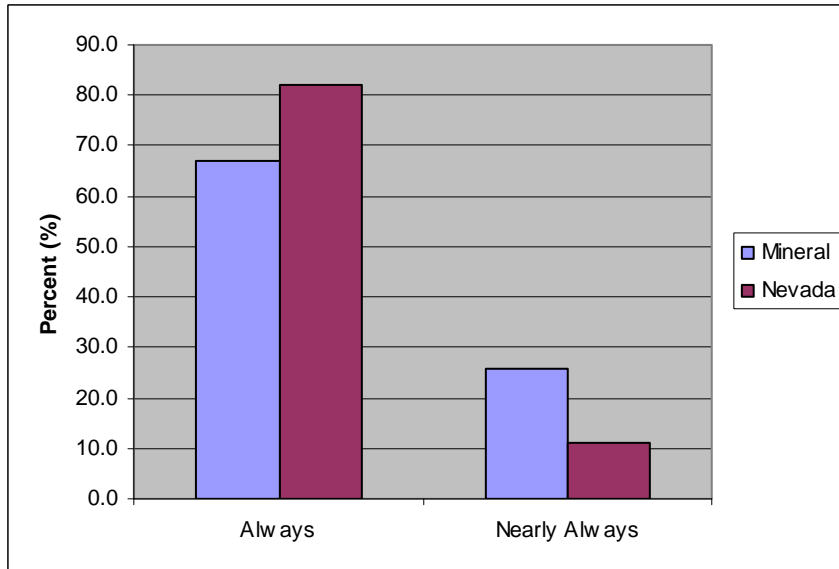


\*These rates are age-adjusted to the 2000 U.S. standard population. The Nevada data are from Nevada Vital Statistics Records. Note: 2007 and 2008 data are not final and are subject to change.

**Healthy People 2010 Objective (15-19):** Increase the use of safety belts.

**Healthy People 2020 Objective IVP HP2020-15:** Increase use of safety belts.

**Aggregated Percentage of People Who Report Always or Nearly Always Using Safety Belts, Mineral County and Nevada, 2002, 2006, 2008.\***



For the reported years of 2002, 2006, and 2008, the percentage of people who reported always using a safety belt was higher for Nevada than for Mineral County.

The county reported a higher proportion of people nearly always using a safety belt.

Neither the state nor the county met the Healthy People 2010 goal of 89 percent.

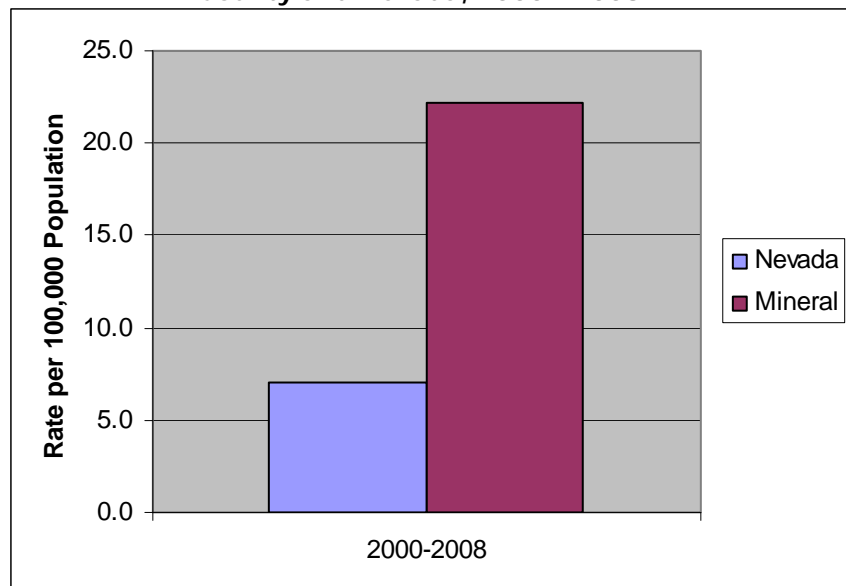
Note: Percentages are weighted to survey population characteristics. Not all counties were included in the survey results.

**Healthy People 2010 Objective (15-32):** Reduce homicides.

**Healthy People 2020 Objective IVP HP2020-29:** Reduce homicides.

**Aggregated Age-Adjusted Death Rate from Homicides, Mineral County and Nevada, 2000 - 2008.\***

From 2000-2008, the homicide mortality rate for Mineral County averaged more than three times that of the Nevada rate, and more than seven times the Healthy People 2010 target rate of 2.8 deaths per 100,000 population.



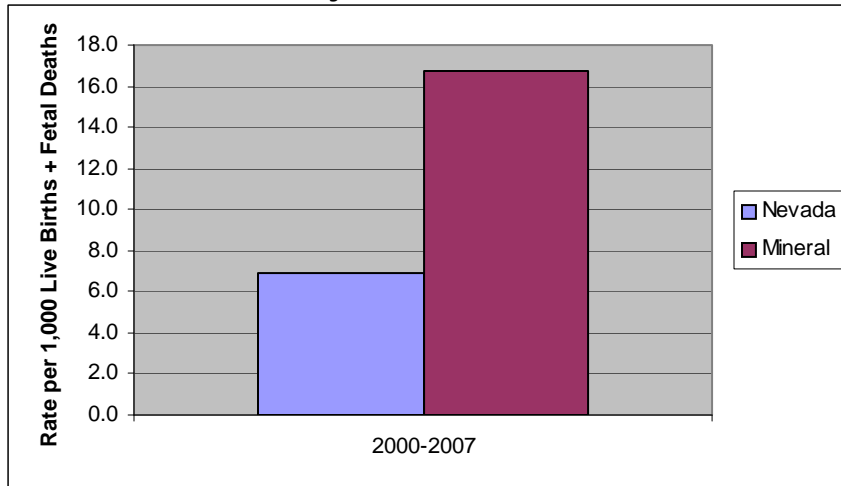
\*These rates are age-adjusted to the 2000 U.S. standard population. The Nevada data are from Nevada Vital Statistics Records. Note: 2007 and 2008 data are not final and are subject to change.

# Maternal, Infant, Child Health

**Healthy People 2010 Objective (16-1a.):** Reduce fetal deaths at 20 or more weeks of gestation.

**Healthy People 2020 Objective MICH HP2020-1.1:** Reduce fetal deaths at 20 or more weeks of gestation.

**Aggregated Fetal Deaths at 20 or More Weeks of Gestation, Mineral County and Nevada, 2000 - 2007.\***



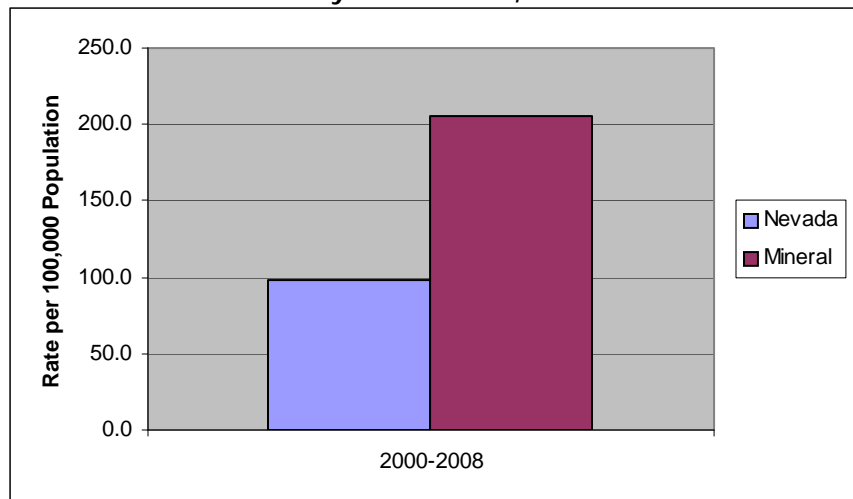
The rate of fetal mortality at 20 or more weeks of gestation, averaged more than twice as high in Mineral County than in Nevada from 2000-2007, and more than four times as high as the Healthy People 2010 target rate of 4.1 deaths per 1,000 live births.

**Healthy People 2010 Objective (16-3c.):** Reduce the rate of young adult deaths, aged 20 to 24 years.

**Healthy People 2020 Objective MICH HP2020-4.3:** Reduce the rate of young adult deaths, aged 20 to 24 years.

**Aggregated Death Rate of Young Adults Aged 20 to 24, Mineral County and Nevada, 2000 - 2008.\***

During the years 2000 to 2008, the mortality rate for young adults, aged 20 to 24, in Mineral County averaged twice the state rate, and more than four times the Healthy People 2010 target rate of 41.5 deaths per 100,000 population.

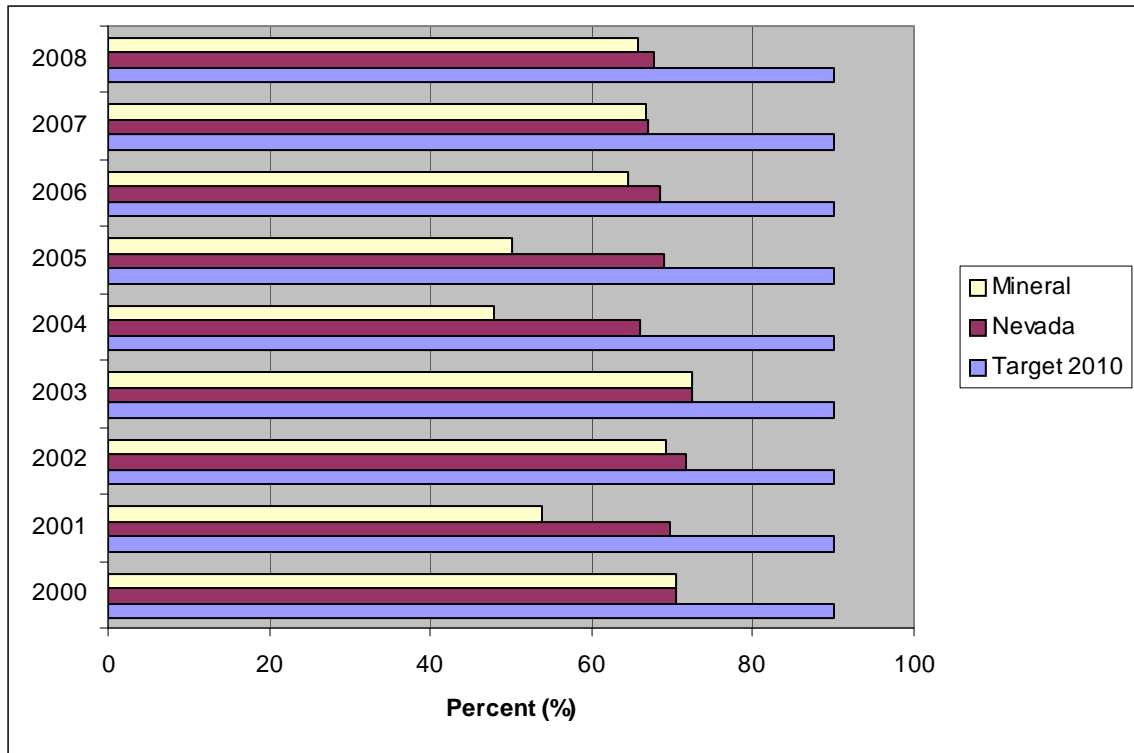


\*The Nevada data are from Nevada Vital Statistics Records.  
Note: 2008 data are not final and are subject to change.

**Healthy People 2010 Objective (16-6b.):** Increase the proportion of pregnant women receiving early and adequate prenatal care.

**Healthy People 2020 Objective MICH HP2020-10:** Increase the proportion of women receiving early and adequate prenatal care.

**Proportion of Pregnant Women Receiving Early and Adequate Prenatal Care, Mineral County and Nevada, 2000 - 2008.\***



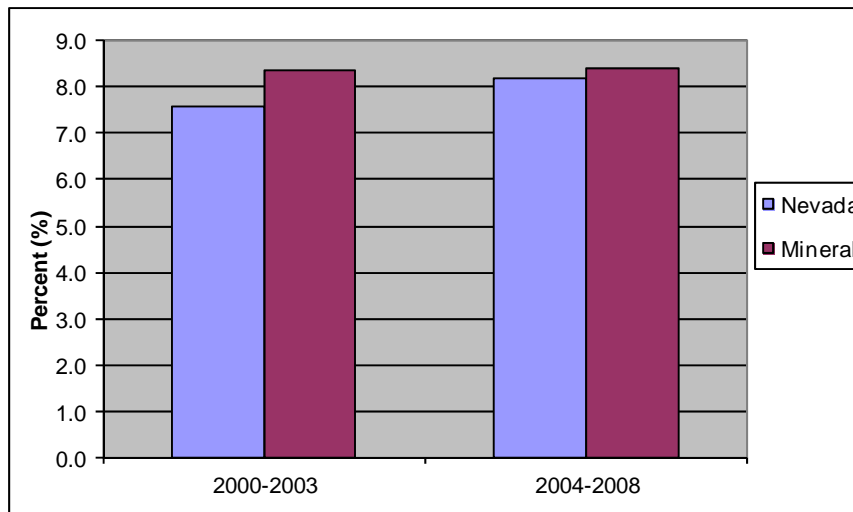
The percentage of pregnant women receiving prenatal care in the first trimester of pregnancy fluctuated for Mineral County and the state from 2000-2008. The Healthy People 2010 objective of 90 percent was not met by either the county or the state.

\*The Nevada data are from Nevada Vital Statistics Records.  
Note: 2008 data are not final and are subject to change.

**Healthy People 2010 Objective (16-10a.):** Reduce the proportion of low birth weight infants.

**Healthy People 2020 Objective MICH HP2020-8.1:** Reduce the proportion of low birth weight infants.

**Aggregated Proportion of Low Birth Weight Infants, Mineral County and Nevada, 2000 - 2003 and 2004 - 2008.\***



On average, the proportion of low birth weight infants increased for both Mineral County and Nevada overall during the years 2000-2008.

From 2004-2008 the county rate was 68 percent higher than the Healthy People 2010 goal of 5 percent.

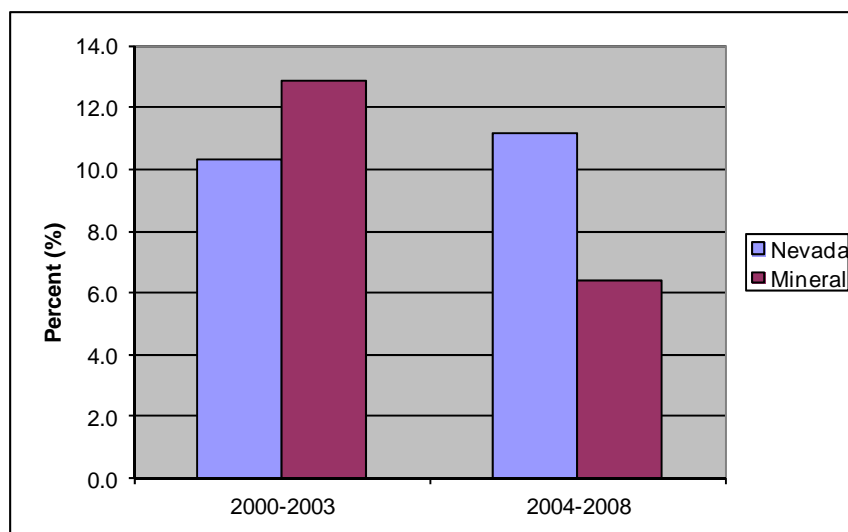
**Healthy People 2010 Objective (16-11a.):** Reduce preterm birth, infants born prior to 37 completed weeks of gestation.

**Healthy People 2020 Objective MICH HP2020-9.1:** Reduce total preterm births.

**Aggregated Proportion of Pre-Term Births, Infants Born Prior to 37 Completed Weeks of Gestation, Mineral County and Nevada, 2000 - 2003 and 2004 - 2008.\***

During the period 2000 to 2008, the average percentage of pre-term births, infants born prior to 37 completed weeks of gestation, increased for Nevada and decreased for Mineral County.

On average for the years 2004-2008 Mineral County met the Healthy People 2010 goal of 7.6 percent.

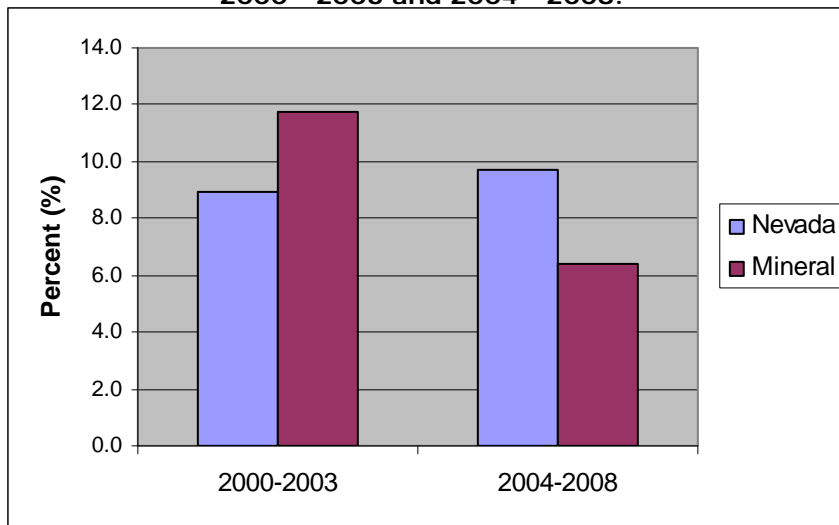


\* The Nevada data are from Nevada Vital Statistics Records.  
Note: 2008 data are not final and are subject to change.

**Healthy People 2010 Objective (16-11b.):** Reduce the proportion of live births at 32 to 36 completed weeks of gestation.

**Healthy People 2020 Objective MICH HP2020-9.2:** Reduce the proportion of live births at 34 to 36 completed weeks of gestation.

**Aggregated Proportion of Live Births at 32 to 36 Completed Weeks of Gestation, Mineral County and Nevada, 2000 - 2003 and 2004 - 2008.\***



The percentage of live births at 32 to 36 completed weeks of gestation, increased in Nevada, and declined for Mineral County from 2000-2008 on average.

The Healthy People 2010 objective of 6.4 percent was met by Mineral County from 2004-2008.

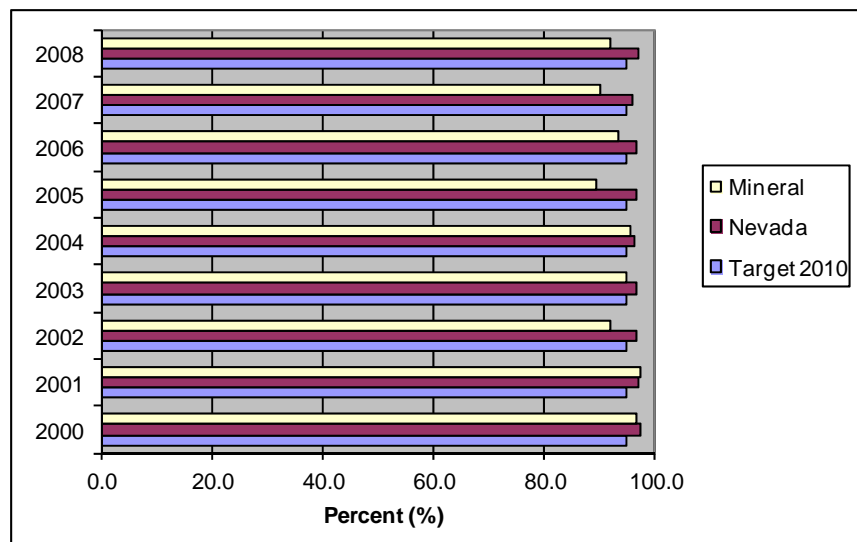
**Healthy People 2010 Objective (16-17a.):** Increase the proportion of pregnant women abstaining from alcohol.

**Healthy People 2020 Objective MICH HP2020-11.1:** Increase abstinence from alcohol among pregnant women.

**Proportion of Pregnant Women, Aged 15 to 44, Abstaining from Alcohol, Mineral County and Nevada, 2000 - 2008.\***

The percentage of pregnant women abstaining from alcohol fluctuated over the years 2000—2008 for both Nevada and Mineral County.

Nevada consistently met the Healthy People 2010 target of 95 percent, while Mineral County met the goal in the years 2000, 2001, 2003, and 2004.

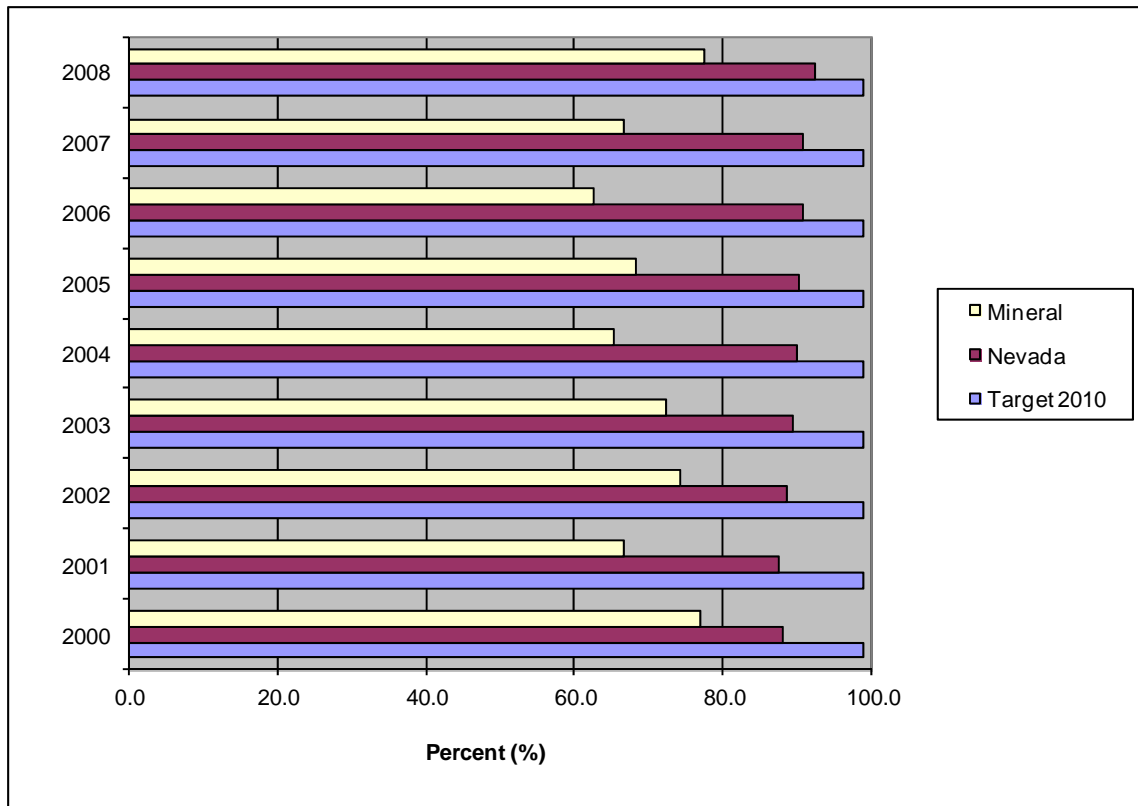


\*The Nevada data are from Nevada Vital Statistics Records.  
Note: 2008 data are not final and are subject to change.

**Healthy People 2010 Objective (16-17c.):** Increase the proportion of pregnant women, aged 15-44 years, abstaining from cigarette smoking.

**Healthy People 2020 Objective MICH HP2020-11.3:** Increase abstinence from cigarettes among pregnant women.

**Proportion of Pregnant Women Abstaining from Tobacco, Mineral County and Nevada, 2000 - 2008.\***



The percentage of pregnant women abstaining from tobacco fluctuated for Mineral County from 2000-2008. The Healthy People 2010 target of 99 percent was not met by either Mineral County nor Nevada overall.

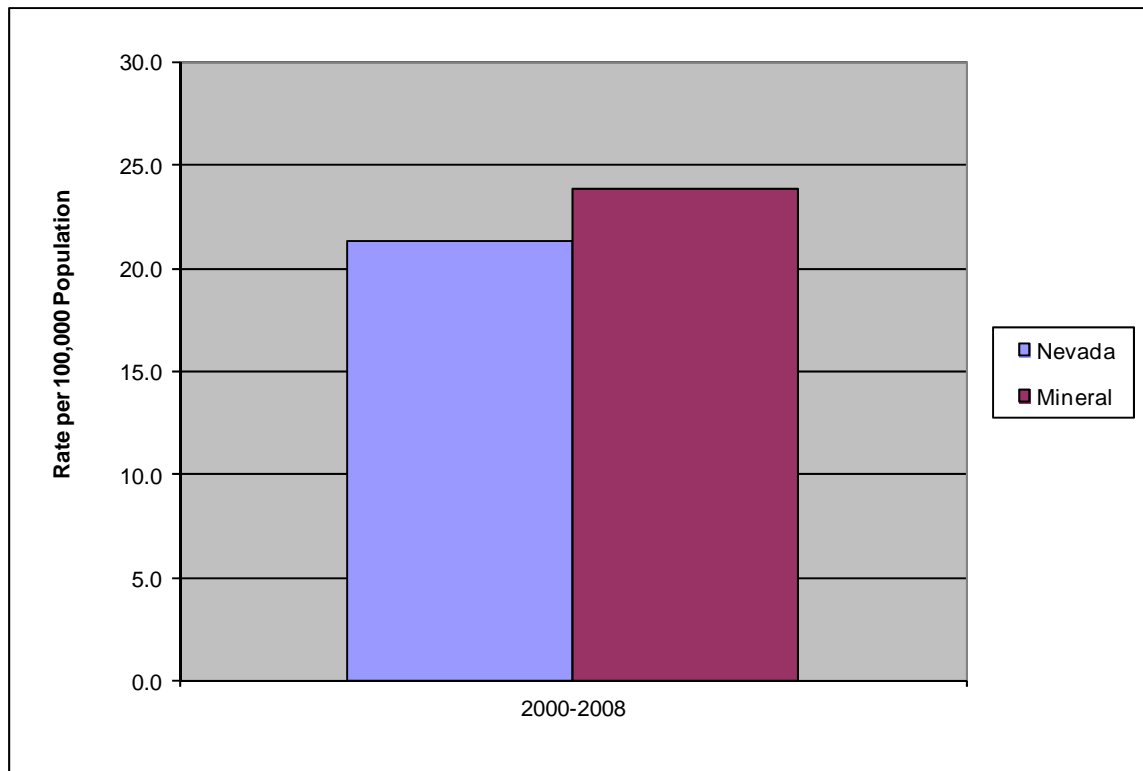
\*The Nevada data are from Nevada Vital Statistics Records.  
Note: 2008 data are not final and are subject to change.

# Mental Health and Mental Disorders

Healthy People 2010 Objective (18-1.): Reduce the suicide rate.

Healthy People 2020 Objective MHMD HP2020-1: Reduce the suicide rate.

Aggregated Age-Adjusted Suicide Death Rate, Mineral County and Nevada, 2000 - 2008.\*



During the years 2000—2008, the suicide mortality rate averaged higher in Mineral County than in Nevada overall. This rate was nearly five times higher than the Healthy People 2010 target rate of 4.8 suicide deaths per 100,000 population.

\*These rates are age-adjusted to the 2000 U.S. standard population. The Nevada data are from Nevada Vital Statistics Records (NVSR).

Note: 2007 and 2008 data are not final and are subject to change.

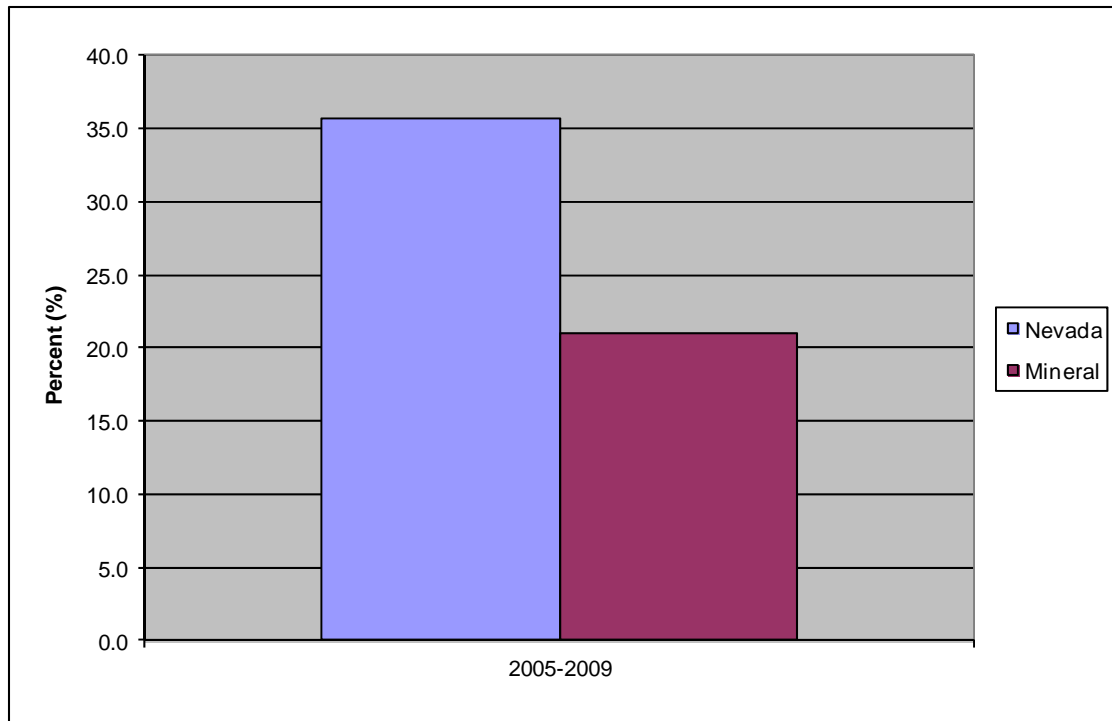


# Nutrition and Weight Status

**Healthy People 2010 Objective (19-1):** Increase the proportion of adults who are at a healthy weight.

**Healthy People 2010 Objective NWS HP2020-8:** Increase the proportion of adults who are at a healthy weight.

**Aggregated Proportion of Adults Who Are At a Healthy Weight, Mineral County and Nevada, BRFSS Data, 2005 - 2009.\***



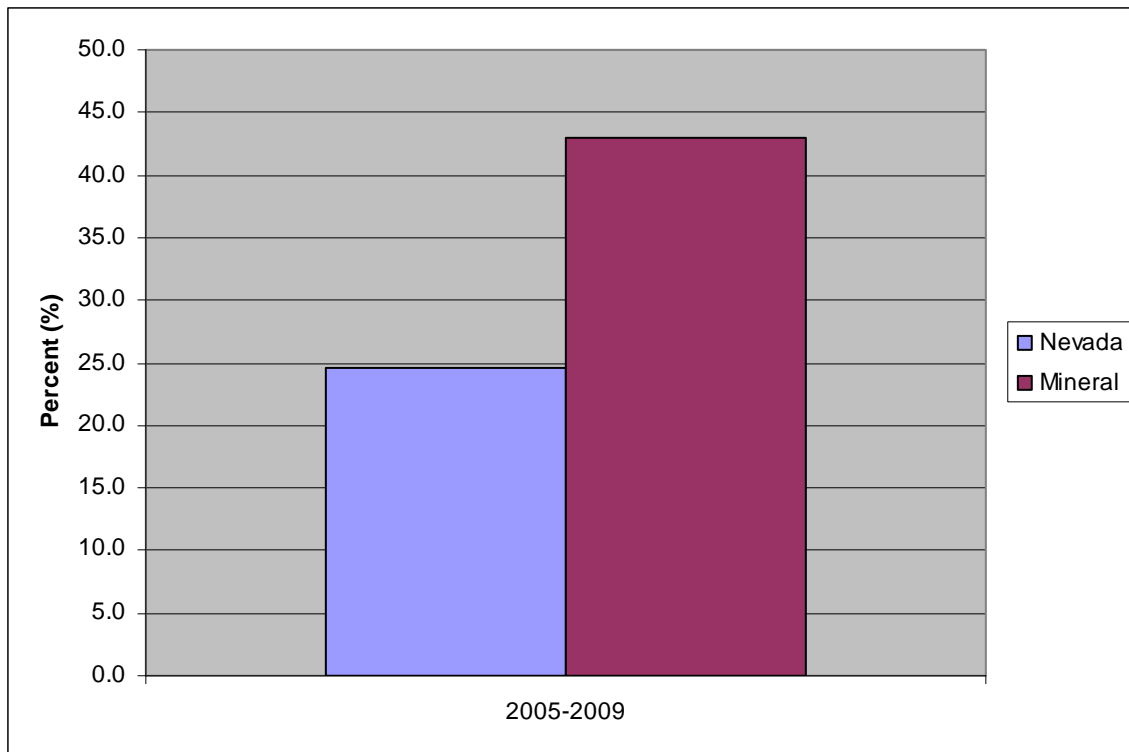
On average from 2005-2009, the Behavioral Risk Factor Surveillance System reported the percentage of adults in Mineral County who are at a healthy weight was less than one-half of the Healthy People 2010 target of 60 percent.

\*These percentages are weighted to survey population characteristics. Not all counties were included in the survey results. Note: Body weight estimates from self-reported heights and weights tend to be lower than those from measured height and weight.

**Healthy People 2010 Objective (19-2):** Reduce the proportion of adults who are obese.

**Healthy People 2020 Objective NWS HP2020-9:** Reduce the proportion of adults who are obese.

**Aggregated Proportion of Adults Who Are Obese, Mineral County and Nevada, BRFSS Data, 2005 - 2009.\***



On average from 2005—2009, the rate for the proportion of obese adults in Mineral County was more than twice the Healthy People 2010 target of 15 percent. Neither the state nor the county met the target.

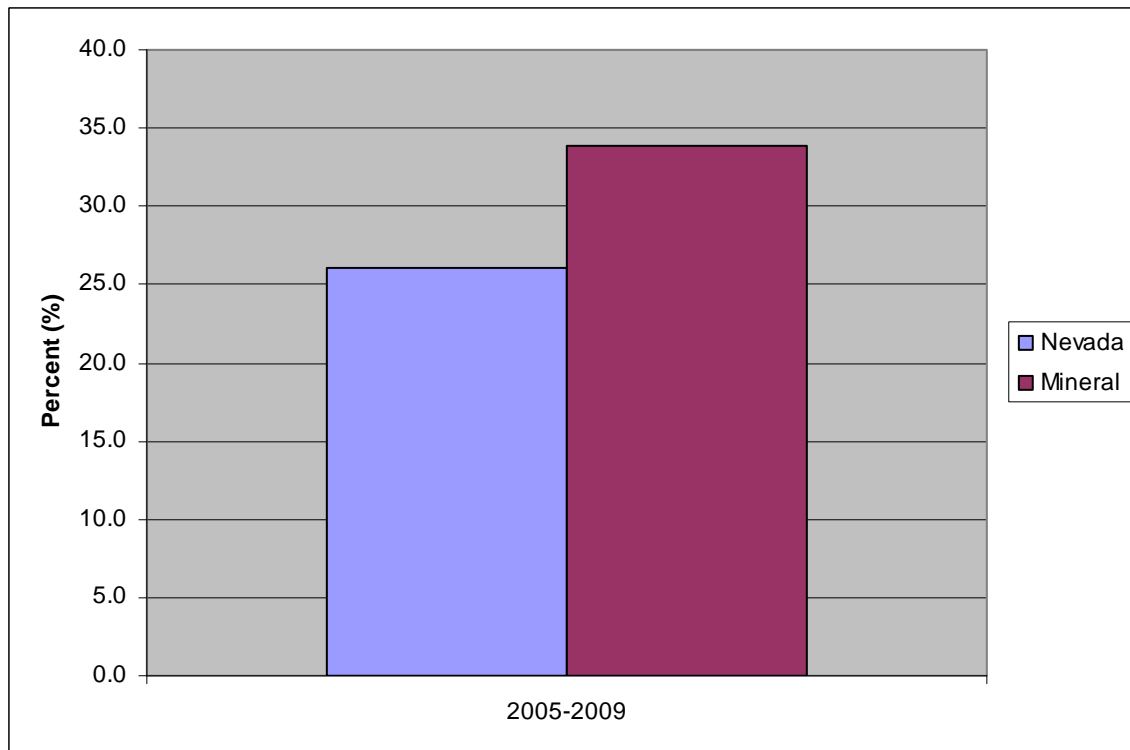
\*These percentages are weighted to survey population characteristics. Not all counties were included in the survey results. Note: Body weight estimates from self-reported heights and weights tend to be lower than those from measured height and weight.

# Physical Activity and Fitness

**Healthy People 2010 Objective (22-1.):** Reduce the proportion of adults who engage in no leisure-time physical activity.

**Healthy People 2020 Objective PA HP2020-1:** Reduce the proportion of adults who engage in no leisure-time physical activity.

**Aggregated Proportion of Adults Who Engage in No Leisure Time Physical Activity, Mineral County and Nevada , BRFSS Data, 2005 - 2009.\***



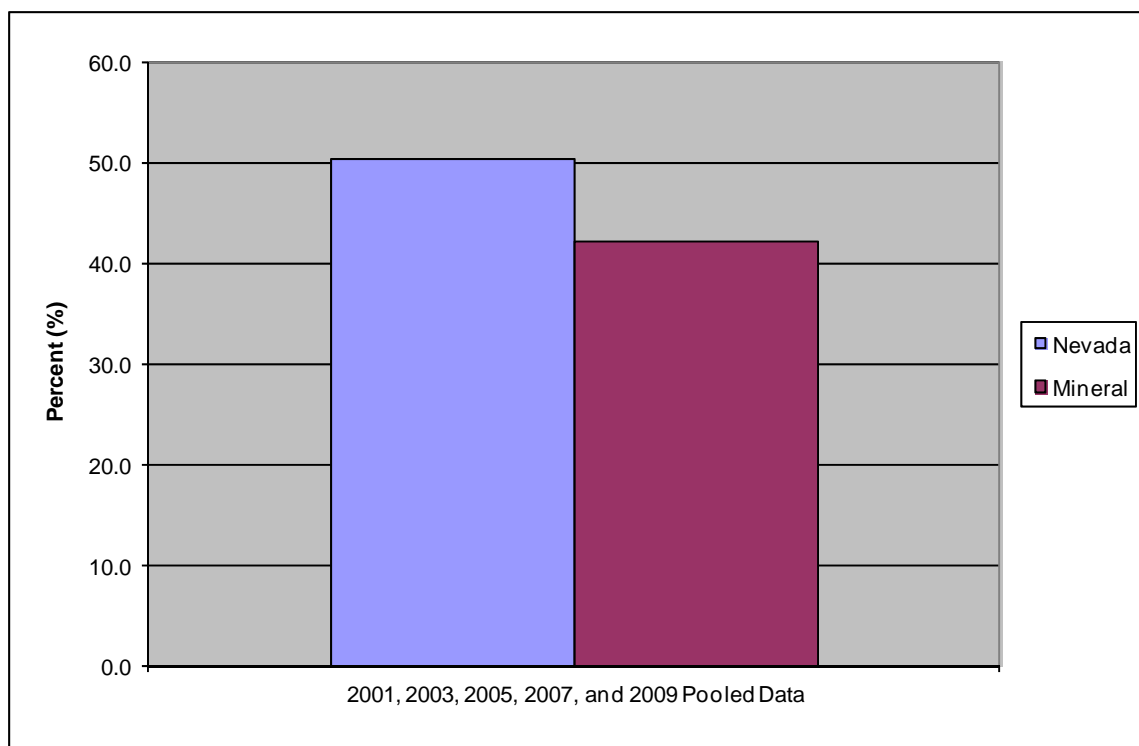
According to Behavioral Risk Factor Surveillance System data from 2005-2009, the percentage of adults who engaged in no leisure time physical activity was 70 percent higher for Mineral County than the Healthy People 2010 target of 20 percent. Neither the state nor the county met the goal.

\*These percentages are weighted to survey population characteristics. Not all counties were included in the survey results.

**Healthy People 2010 Objective (22-2.):** Increase the proportion of adults who engage regularly, preferably daily, in moderate physical activity for at least 30 minutes per day.

**Healthy People 2020 Objective PA HP2020-2.1:** Increase the proportion of adults who engage in aerobic physical activity of at least moderate intensity for at least 150 minutes/week or 75 minutes/week of vigorous intensity or an equivalent combination.

**Aggregated Proportion of Adults Who Engage in Aerobic Physical Activity of At Least Moderate Intensity for At Least 150 Minutes per Week or of Vigorous Intensity for At Least 75 Minutes per Week or an Equivalent Combination, Mineral County and Nevada , BRFSS Data, 2001, 2003, 2005, 2007, 2009.\***



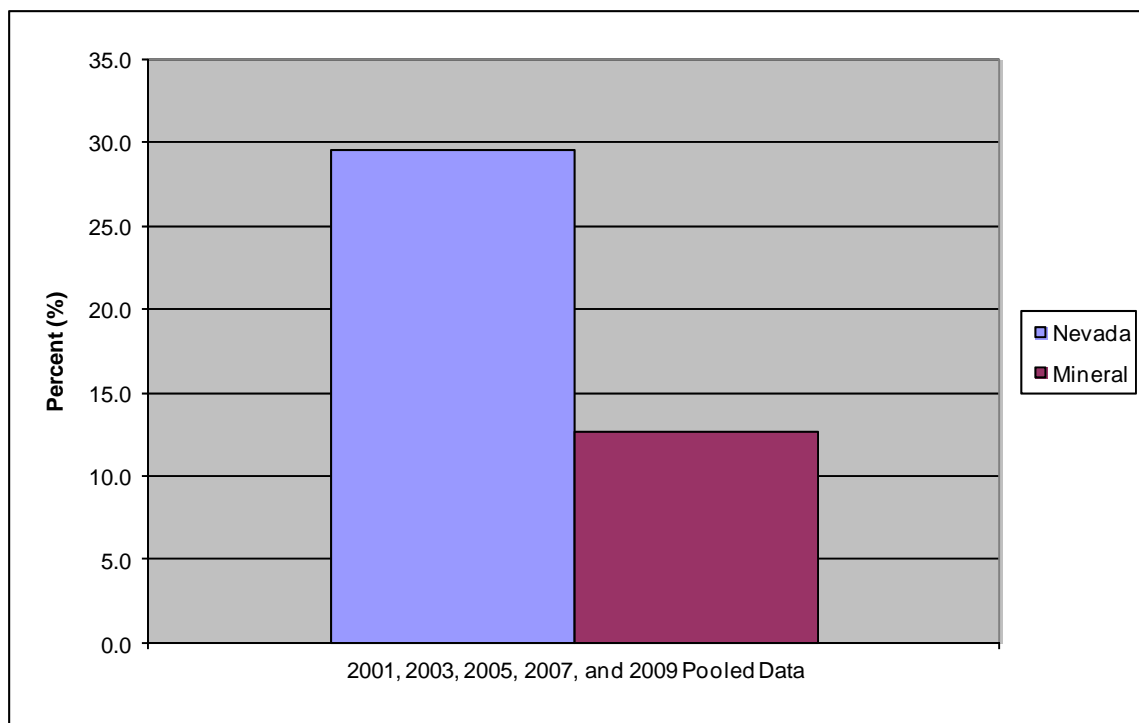
On average, the Healthy People 2010 target of 50 percent for the percentage of adults who engage in aerobic physical activity of at least moderate intensity for at least 150 minutes per week or of vigorous intensity for at least 75 minutes per week or an equivalent combination, was not met by Mineral County for the study years.

\*These percentages are weighted to survey population characteristics. Not all counties were included in the survey results.

**Healthy People 2010 Objective (22-3.):** Increase the proportion of adults who engage in vigorous physical activity promoting the development and maintenance of cardio-respiratory fitness for 20 or more minutes per day 3 or more days per week.

**Healthy People 2020 Objective PA HP2020-2.2:** Increase the proportion of adults who engage in aerobic physical activity of at least moderate intensity for more than 300 minutes/week or more than 150 minutes/week of vigorous intensity or an equivalent combination.

**Aggregated Proportion of Adults Who Engage in Aerobic Physical Activity of At Least Moderate Intensity for More Than 300 Minutes per Week or More Than 150 Minutes per Week of Vigorous Intensity or An Equivalent Combination, Mineral County and Nevada, BRFSS Data, 2001, 2003, 2005, 2007, 2009.\***



The percentage of adults who engaged in aerobic physical activity of at least moderate intensity for more than 300 minutes per week or of vigorous intensity for more than 150 minutes per week or an equivalent combination, in Mineral County was less than one-half of the proportion in the state overall according to the Behavioral Risk Factor Surveillance System data for the study years. The Healthy People 2010 target of 30 percent was not met by Mineral County.

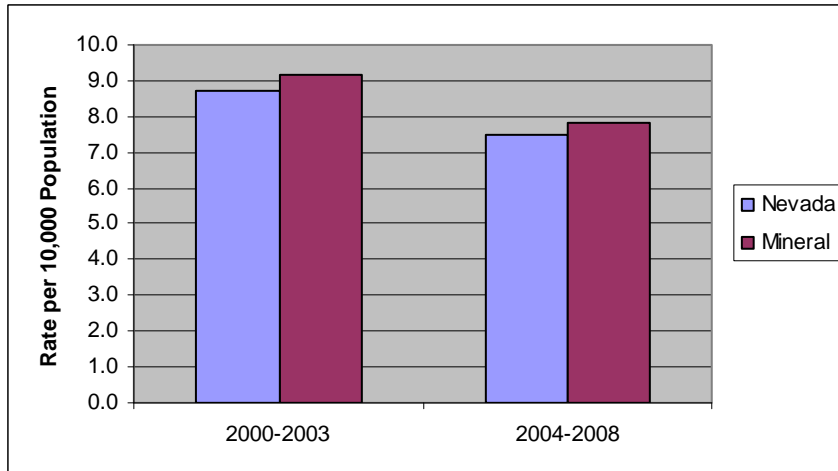
\*These percentages are weighted to survey population characteristics. Not all counties were included in the survey results.

# Respiratory Diseases

**Healthy People 2010 Objective (24-2b.):** Reduce hospitalizations for asthma in children and adults, aged 5 to 64 years.

**Healthy People 2020 Objective RD HP2020-2.2:** Reduce hospitalizations for asthma in children and adults, aged 5 to 64 years.

**Aggregated Hospitalizations for Asthma in Children and Adults Aged 5 to 64 Years, Mineral County and Nevada, 2000 - 2003 and 2004 - 2008.\***



Asthma hospitalizations for children and adults, ages 5 to 64 years, decreased for both the state and Mineral County during the period 2000—2008.

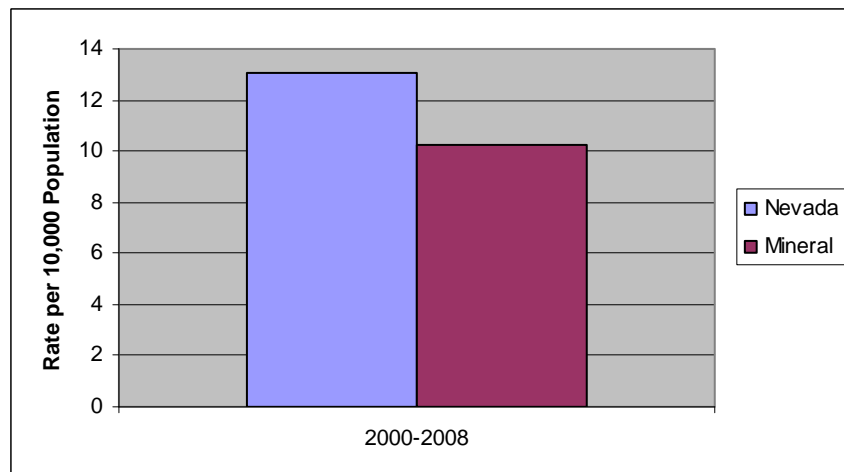
On average from 2004-2008, both the state and county were at the Healthy People 2010 target rate of 7.7 per 10,000 population.

**Healthy People 2010 Objective (24-2c.):** Reduce hospitalizations for asthma in adults, aged 65 years and older.

**Healthy People 2020 Objective RD HP2020-2.3:** Reduce hospitalizations for asthma in adults, aged 65 years and older.

**Aggregated Hospitalizations for Asthma in Adults Aged 65 Years and Older, Mineral County and Nevada, 2000 - 2008.\***

During the years 2000-2008, the asthma hospitalization rate for adults, ages 65 years and older, averaged lower in Mineral County than in Nevada overall and met the Healthy People 2010 target rate of 11 per 10,000 population.

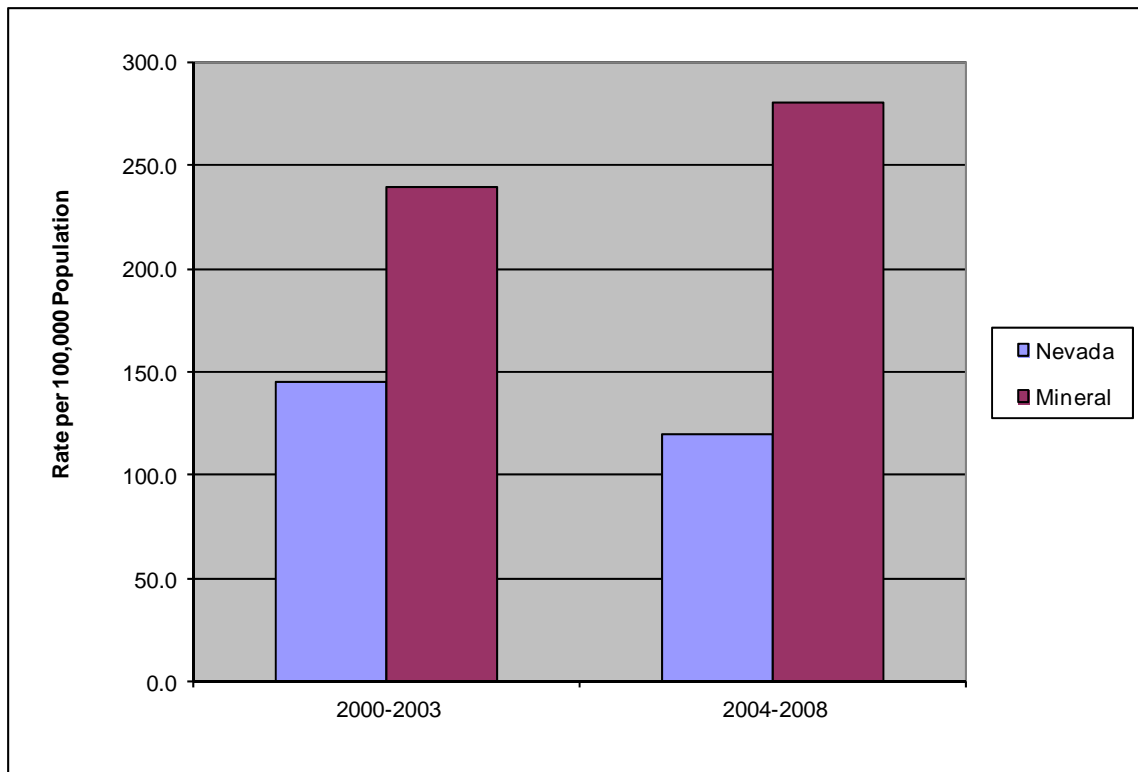


\*The Nevada data are from Nevada Inpatient Hospital Discharge Database (NIHDD).

**Healthy People 2010 Objective (24-10.):** Reduce deaths from chronic obstructive pulmonary disease among adults.

**Healthy People 2020 Objective RD HP2020-10:** Reduce deaths from chronic obstructive pulmonary disease among adults.

**Aggregated Age-Adjusted Chronic Obstructive Pulmonary Disease Deaths, Mineral County and Nevada, 2000 - 2003 and 2004 - 2008.\***



From 2000-2008, the mortality rate for chronic obstructive pulmonary disease (COPD) declined in Nevada and increased in Mineral County. The county rate averaged over twice the state rate, and was more than four times the Healthy People 2010 target rate of 62.3 per 100,000 population. Neither Nevada nor Mineral County met the Healthy People 2010 target.

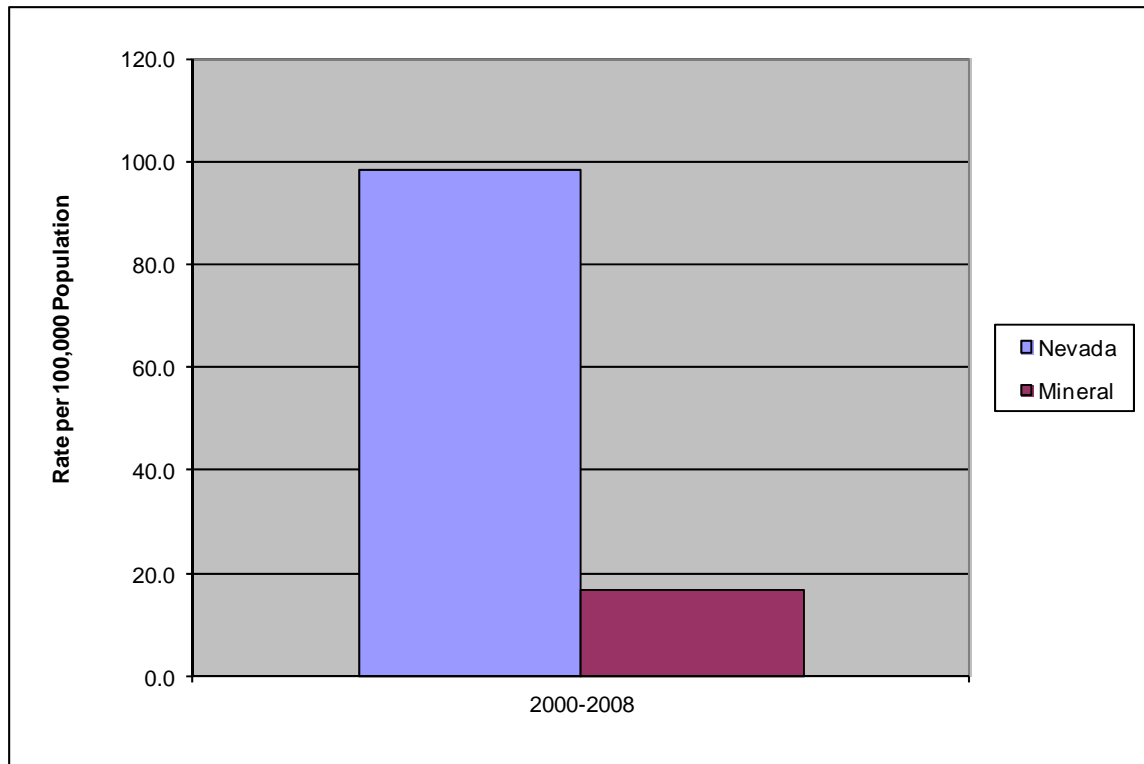
\*These rates are age-adjusted to the 2000 U.S. standard population. The Nevada data are from Nevada Vital Statistics Records. Note: 2007 and 2008 data are not final and are subject to change.

# Sexually Transmitted Diseases

Healthy People 2010 Objective (25-2a.): Reduce gonorrhea rates.

Healthy People 2020 Objective STD HP2020-6: Reduce gonorrhea rates.

Aggregated Rate of Gonorrhea, Mineral County and Nevada, 2000 - 2008. \*



The average rate of gonorrhea for Mineral County was approximately one-fifth of the Nevada rate during the years 2000 to 2008, and met the Healthy People 2010 target rate of 19 per 100,000 population.

\*Nevada data are provided by the STD-MIS database.

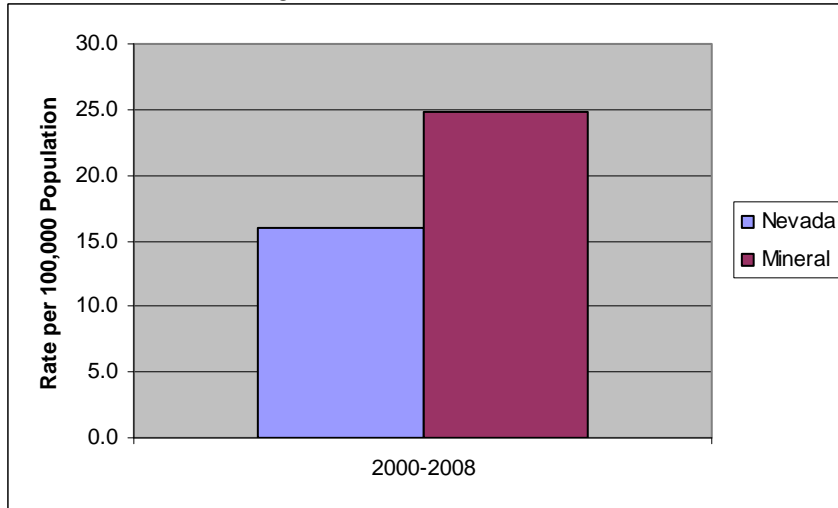


# Substance Abuse

**Healthy People 2010 Objective (26-3):** Reduce drug-induced deaths.

**Healthy People 2020 Objective SA HP2020-12:** Reduce drug-induced deaths.

**Aggregated Age-Adjusted Drug-Induced Death Rate, Mineral County and Nevada 2000 - 2008.\***



On average from 2000 to 2008, Mineral County's drug induced mortality rate was more than twenty times the Healthy People 2010 target rate of 1.2 deaths per 100,000 population.

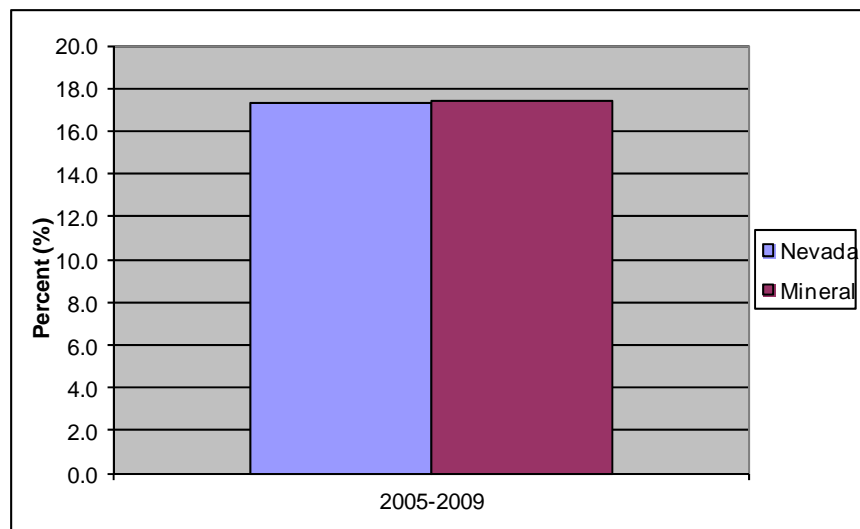
\*These rates are age-adjusted to the 2000 U.S. standard population. The Nevada data are from Nevada Vital Statistics Records. Note: 2007 and 2008 data are not final and are subject to change.

**Healthy People 2010 Objective (26-11c.):** Reduce the proportion of adults, aged 18 years and older, engaging in binge drinking of alcohol.

**Healthy People 2020 Objective SA HP2020-14.3:** Reduce the proportion of adults, aged 18 years and older, engaging in binge drinking of alcohol.

**Aggregated Proportion of Adults Aged 18 Years and Older Engaging in Binge Drinking Alcohol, Mineral County and Nevada, BRFSS Data, 2005 - 2009.\***

According to Behavior Risk Factor Surveillance System data, the percentage of adults, ages 18 years and older, engaged in binge drinking of alcohol was above the Healthy People 2010 goal of 14.3 percent for both the state and Mineral County for the combined years 2005—2009.



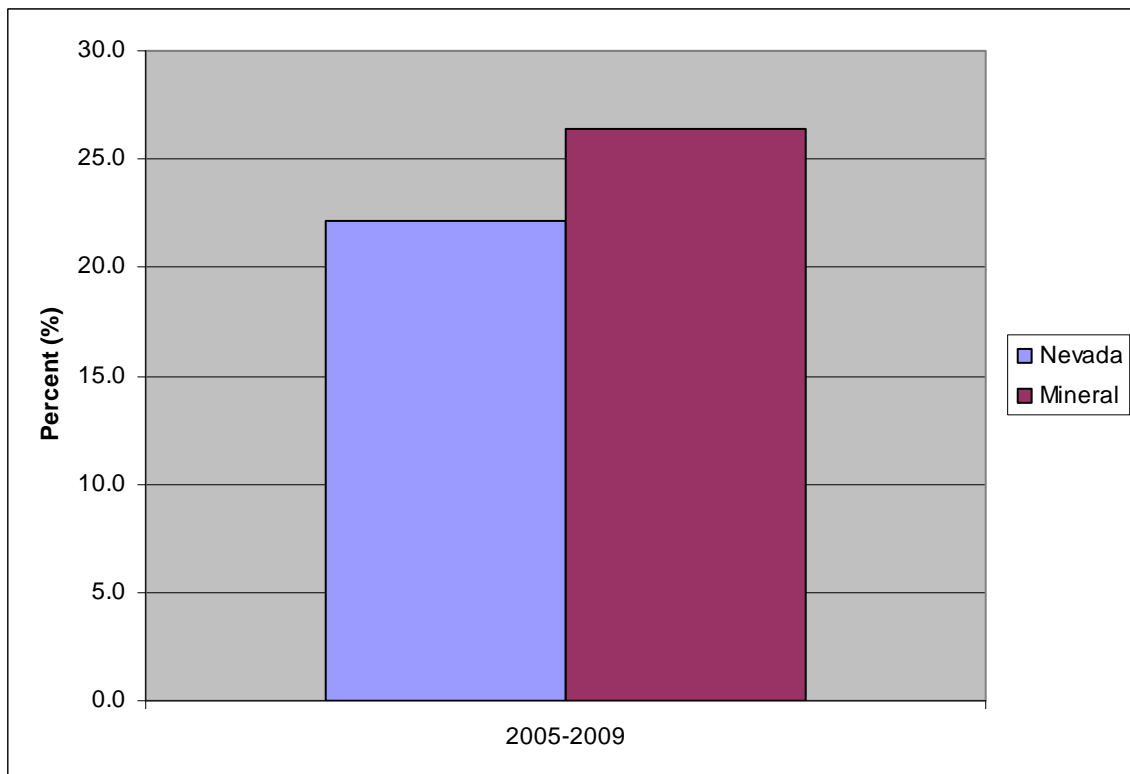
\*These percentages are weighted to survey population characteristics. Not all counties were included in the survey results.

# Tobacco Use

**Healthy People 2010 Objective (27-1a.):** Reduce cigarette smoking by adults.

**Healthy People 2020 Objective TU HP2020-1.1:** Reduce tobacco use by adults – cigarette smoking.

**Aggregated Proportion of Cigarette Smoking Adults, Mineral County and Nevada, BRFSS Data, 2005 - 2009.\***



During the years 2005—2009, the percentage of cigarette smoking adults was higher in Mineral County than for the state, and more than twice as high as the Healthy People 2010 target of 12 percent.

\*These percentages are weighted to survey population characteristics. Not all counties were included in the survey results.

## Healthy People 2010: Mineral County Indicator Exemptions

The following Healthy People 2010 objectives were not reported in the Mineral County Report due to a lack of available data:

- Adolescent Health (AH):
  - AH HP2020-1c: Increase the percentage of students whose reading skills are at or above the proficient achievement level for their grade.
  - AH HP2020-1d: Increase the percentage of students whose mathematical skills are at or above the proficient achievement level for their grade.
- Early and Middle Childhood (EMC):
  - EMC HP2020-3: Increase the proportion of elementary, middle, and senior high schools that require school health education.
- Family Planning (FP):
  - FP HP2020-9c: Increase the proportion of female adolescents aged 15 years who have never had sexual intercourse.
  - FP HP2020-9d: Increase the proportion of male adolescents aged 15 who have never had sexual intercourse.
  - FP HP2020-10e: The proportion of sexually active females aged 15 to 19 who used a condom at last intercourse.
  - FP HP2020-10f: The proportion of sexually active males aged 15 to 19 who used a condom at last intercourse.
- Immunizations and Infectious Diseases (IID):
  - IID HP2020-18: Percentage of children aged 19 to 35 months who receive recommended vaccines.
  - IID HP2020-20: Increase the percentage of children aged 19 to 35 months who receive the recommended vaccines.
- Injury and Violence Prevention (IVP):
  - IVP HP2020-13: Reduce physical fighting among adolescents.
  - IVP HP2020-14: Reduce weapon carrying by adolescents on school property.
- Mental Health and Mental Disorders (MHMD):
  - MHMD HP2020-2: Proportion of adolescents, grades 9 through 12, reporting suicide attempts in the past 12 months.
- Nutrition and Weight Status (NWS):
  - NWS HP2020-5c: Reduce the proportion of adolescents, aged 12 to 19 years, who are overweight or obese.
- Occupational Safety and Health (OSH):
  - OSH HP2020-7a: Work-related injury death rate, aged 16 years and older.
- Oral Health (OH):
  - OH HP2020-6a: Proportion of children aged 3 to 5 years with dental caries in primary and permanent teeth.

- OH HP2020-7a: Proportion of children aged 3 to 5 years with untreated dental decay.
  - OH HP2020-10b: Increase the proportion of children aged 8 years and older who have received dental sealants in their molar teeth.
- Physical Activity and Fitness (PAF):
  - PAF HP2020-7: Increase the proportion of adolescents that meet the current physical activity guidelines for aerobic physical activity and for muscle-strengthening activity.
- Sexually Transmitted Diseases (STD):
  - STD HP2020-3a: Reduce the proportion of females, aged 15 to 24 years with Chlamydia trachomatis infections attending family planning clinics.
- Substance Abuse (SA):
  - SA HP2020-4: Percentage of adolescents who report they rode during the previous 30 days with a driver who had been drinking alcohol, grades 9 through 12.
  - SA HP2020-7d: Proportion of adolescents engaging in binge drinking of alcohol.
  - SA HP2020-9b: Proportion of adolescents in the 10<sup>th</sup> grade reporting steroid use.
  - SA HP2020-9c: Proportion of adolescents in the 12<sup>th</sup> grade reporting steroid use.
  - SA HP1010-10: Reduce the proportion of adolescents who use inhalants.
- Tobacco Use (TU):
  - TU HP2020-6b: Proportion of adolescents reporting cigarette use in the past month.
  - TU HP2020-6c: Proportion of adolescents reporting spit tobacco use in the past month.

The following Healthy People 2010 objectives were not reported in the Mineral County Report due to a lack of available data, counts of 0:

- Food Safety (FS):
  - FS HP2020-3c: Rate of reported cases of Listeriosis.
- Immunizations and Infectious Diseases (IID):
  - IID HP2020-3: Crude rate of reported new cases of Hepatitis A.
  - IID HP2020-4: Crude rate of reported cases of Meningococcal disease.
  - IID HP2020-5: Crude Rate of reported new cases of Tuberculosis.
- Injury and Violence Prevention (IVP):
  - IVP HP2020-6: Pedestrian death rate on public roads.
  - IVP HP2020-27: Death rate from drowning.
- Maternal, Infant, Child Health (MICH):
  - MICH HP2020-15e: Postneonatal death rate (between 28 days and 1 year of life).
  - MICH HP2020-15f: Reduce infant deaths related to birth defects.

- MICH HP2020-15g: Reduce infant deaths related to birth defects (congenital heart defects).
- MICH HP2020-1a: Death rate of children aged 1 to 4 years.
- Sexually Transmitted Diseases (STD):
  - STD HP2020-5: Reduce the rate of primary and secondary syphilis.

The following Healthy People 2010 objectives were not reported in the Mineral County Report due to a lack of available data, counts below 5 but greater than 0:

- Blood Disorders and Blood Safety (BDBS):
  - BDBS HP2020-2: Reduce hospitalizations for sickle cell disease among children aged 9 years and younger.
- Cancer (C):
  - C HP2020-4: Cervical cancer death rate.
  - C HO2020-6: Oropharyngeal cancer death rate.
  - C HP2020-8: Melanoma cancer death rate.
- Food Safety (FS):
  - FS HP2020-3b: Rate of reported cases of Escherichia Coli O157:H7.
- Human Immunodeficiency Virus (HIV):
  - HIV HP2020-1: Reduce acquired immunodeficiency syndrome.
  - HIV HP2020-4: Reduce the new cases of human immunodeficiency virus/acquired immunodeficiency syndrome (HIV/AIDS) diagnosed among adults and adolescents.
  - HIV HP2020-7: HIV infection death rate.
- Immunizations and Infectious Diseases (IID):
  - IID HP2020-14: Reduce or eliminate cases of vaccine preventable diseases.
- Injury and Violence Prevention (IVP):
  - IVP HP2020-26a: Reduce fall related deaths in all persons.
- Maternal, Infant, Child Health (MICH):
  - MICH HP2020-15c: Infant death rate (within 1 year of life).
  - MICH HP2020-15d: Neonatal death rate (within the first 28 days of life).
  - MICH HP2020-1b: Death rate of children aged 5 to 9 years.
  - MICH HP2020-2a: Death rate of adolescents aged 10 to 14 years.
  - MICH HP2020-2b: Death rate of adolescents aged 15 to 19 years.
  - MICH HP2020-7b: Proportion of very low-birth weight infants.
  - MICH HP2020-8c: Proportion of live births at less than 32 completed weeks of gestation.
- Respiratory Diseases (RD):
  - RD HP2020-1a: Reduce hospitalizations for asthma in children under age 5 years.

The following Healthy People 2010 objectives were not reported in the Mineral County Report due to a lack of available data, less than 50 BRFSS respondents:

- Cancer (C):
  - C HP2020-14: Increase the proportion of women aged 18 years and older who have received a cervical cancer screening based on the most current guidelines.
  - C HP2020-15a: Increase the proportion of adults who receive a colorectal cancer screening.
  - C HP2020-15b: Increase the proportion of adults aged 50+ who have ever had a sigmoidoscopy or a colonoscopy.
  - C HP2020-16: Increase the proportion of women aged 40 years and older who have ever received a breast cancer screening based on the most recent guidelines.
- Diabetes (D):
  - D HP2020-1: Proportion of persons with diabetes who receive formal diabetes education.
  - D HP2020-6: Increase the proportion of adults with diabetes who have a glycosylated hemoglobin measurement at least twice a year.
  - D HP2020-8: Proportion of adults with diabetes who have had at least an annual foot exam.
- Heart Disease and Stroke (HDS):
  - HDS HP2020-7: Proportion of adults with high blood cholesterol levels.
  - HDS HP2020-8: Proportion of adults having had their blood cholesterol checked within the preceding 5 years.
- Immunizations and Infectious Diseases (IID):
  - IID HP2020-24a: Proportion of adults aged 65 years and older who are vaccinated against influenza.
  - IID HP2020-24b: Proportion of adults aged 65 and older who have ever received a pneumococcal vaccination.
- Oral Health (OH):
  - OH HP2020-8a: Proportion of older adults aged 65 years and older reporting having all their natural teeth extracted.
- Tobacco Use (TU):
  - TU HP2020-8a: Proportion of adults reporting smoking cessation attempts in the past year.