

White Pine County

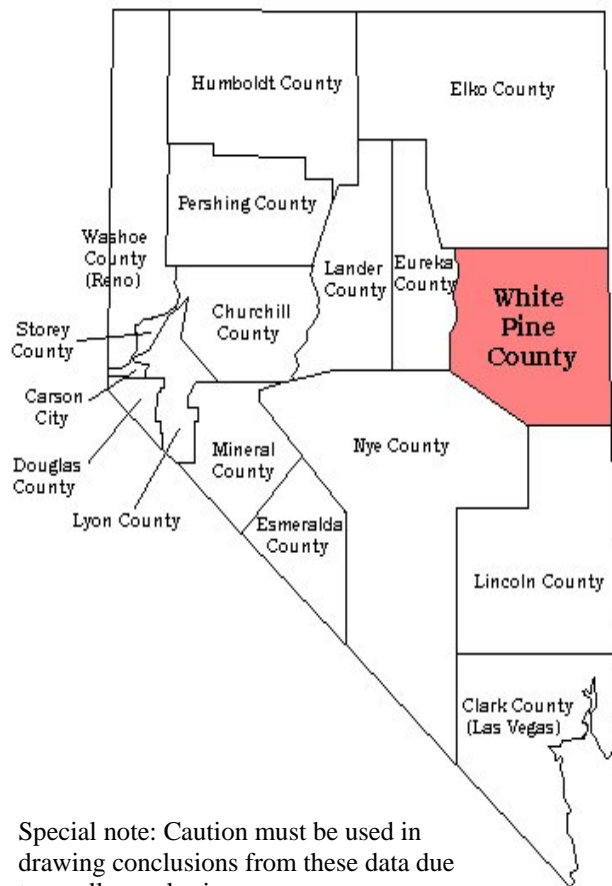


Population (2008)	9,694
Land Area (square miles)	8,876
Persons per square mile	1.1
Race/Ethnicity	
<ul style="list-style-type: none"> White Black American Indian & Alaskan Native Asian Hispanic or Latino origin 	<ul style="list-style-type: none"> 82.8% 0.7% 5.1% 1.4% 9.9%
Median Household Income	\$50,934
Persons Below Poverty	11.4%

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:

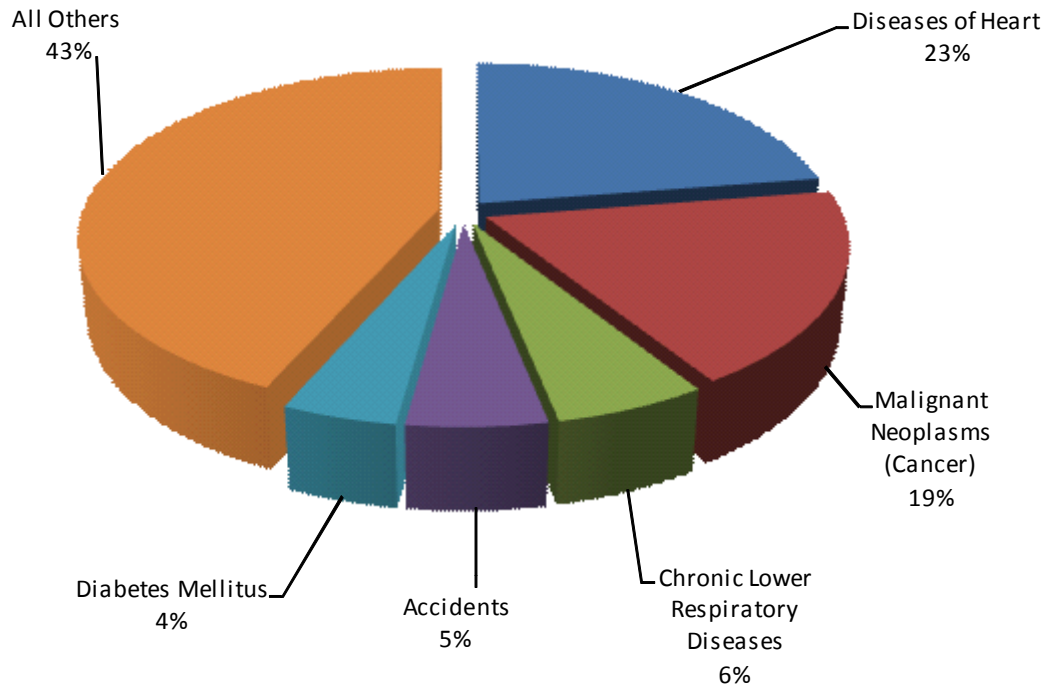
- White Pine County's rate of adults, ages 65 years and older, with congestive heart failure declined from 2000-2007, the rate then doubled in 2008.
- On average the hospitalization rate for nonfatal spinal cord injuries in White Pine County was triple the state rate from 2000-2008.
- On aggregate from 2004-2008, the rate of fire-arm related deaths in White Pine County was more than double the Nevada rate.
- On average from 2004-2008 the homicide rate for White Pine County was almost triple that of the state rate.
- White Pine County's mortality rate of young adults, ages 20 to 24, was more than twice the Nevada rate overall from 2000-2008.
- The rate of asthma hospitalizations for children, aged under 5 years, declined in Nevada and nearly doubled in White Pine County from 2000-2008.
- On aggregate from 2000-2008, the White Pine County rate of gonorrhea was less than one-fifth of the Nevada rate overall.



Special note: Caution must be used in drawing conclusions from these data due to small sample size.

Leading Causes of Death

White Pine



2000 - 2008 Pooled Data

The list of White Pine County's top five leading causes of death was led by heart disease (23%), closely followed by malignant neoplasms—cancer (18%). Chronic lower respiratory diseases (6%), accidents (5%), and diabetes mellitus (4%) rounded out the list. All other causes of death accounted for the remaining 44% of the county's mortality from 2000-2008.

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—stroke (5%).

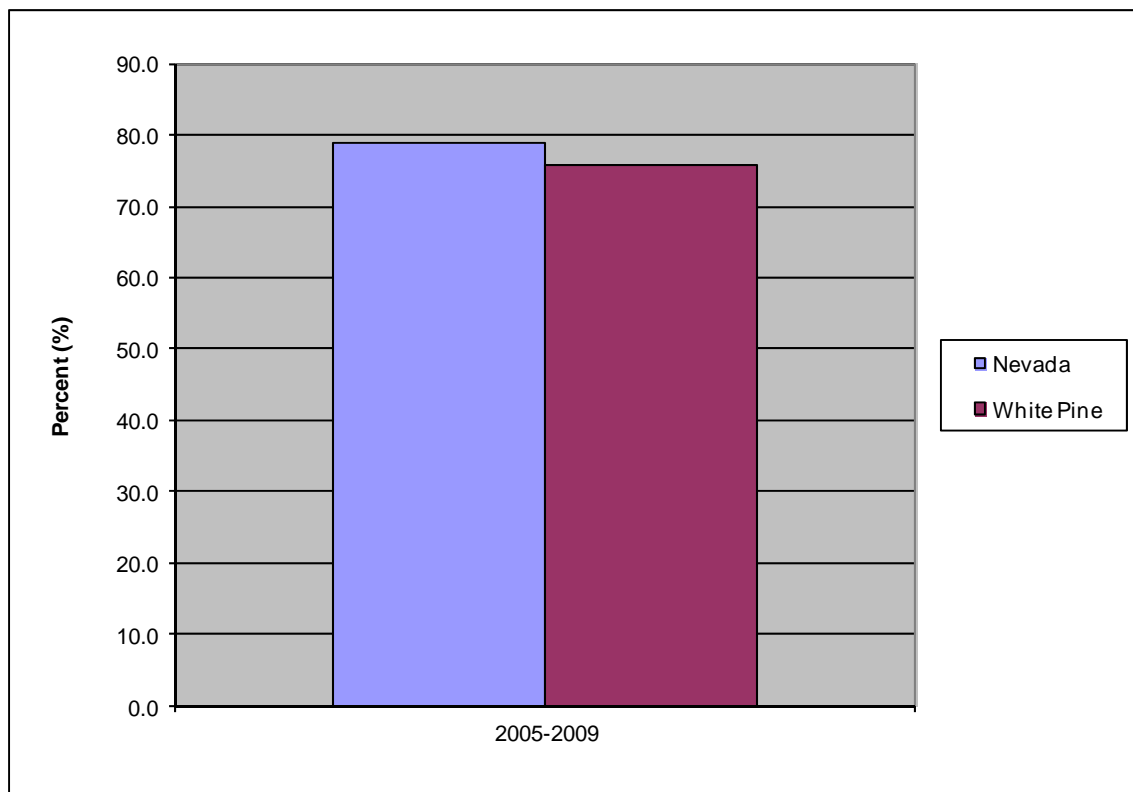
*The data are from Nevada Vital Statistics Records.
Note: 2007 and 2008 data are not final and are subject to change.

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, White Pine County and Nevada, BRFSS Data, 2005 - 2009.*



On average, according to Behavioral Risk Factor Surveillance System data, White Pine County had a lower proportion of people with health insurance than the state from 2005-2009 overall. Neither the state nor the county met the Healthy People 2010 target of 100 percent. White Pine County was nearly 25 percent short of the Healthy People goal.

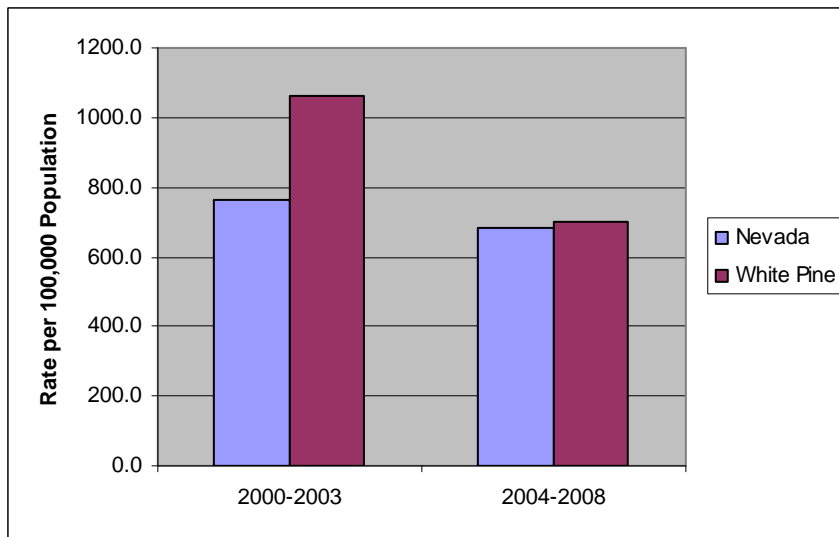
*These percentages are weighted to survey population characteristics. Not all counties were included in the survey results.

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, White Pine County and Nevada, 2000 - 2003 and 2004 - 2008.*



The hospitalization rate for hip fractures among females ages 65 years and older, decreased for both the state and White Pine County on average from 2000-2008.

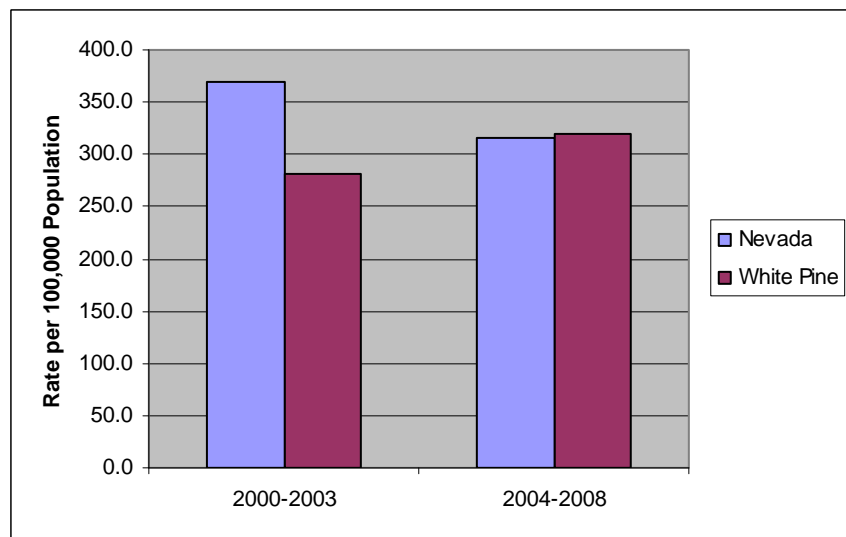
However, neither met the Healthy People 2010 target rate of 416 per 100,000 population.

The hospitalization rate for hip fractures among males ages 65 years and older, decreased in Nevada from 2000 to 2008.

This rate climbed slightly in White Pine County during the same time period.

For all years on average both White Pine County and Nevada met the Healthy People target rate of 474 per 100,000 population.

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



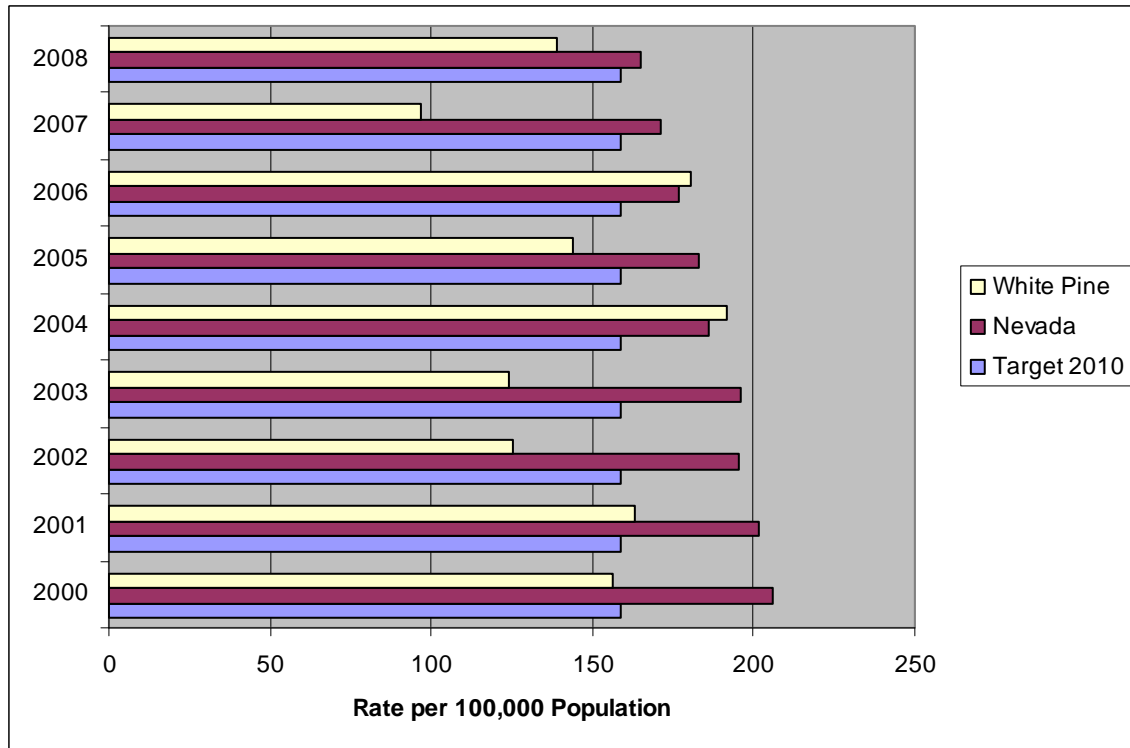
*The Nevada data are from Nevada Inpatient Hospital Discharge (NIHDD).

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, White Pine County and Nevada, 2000 - 2008.*



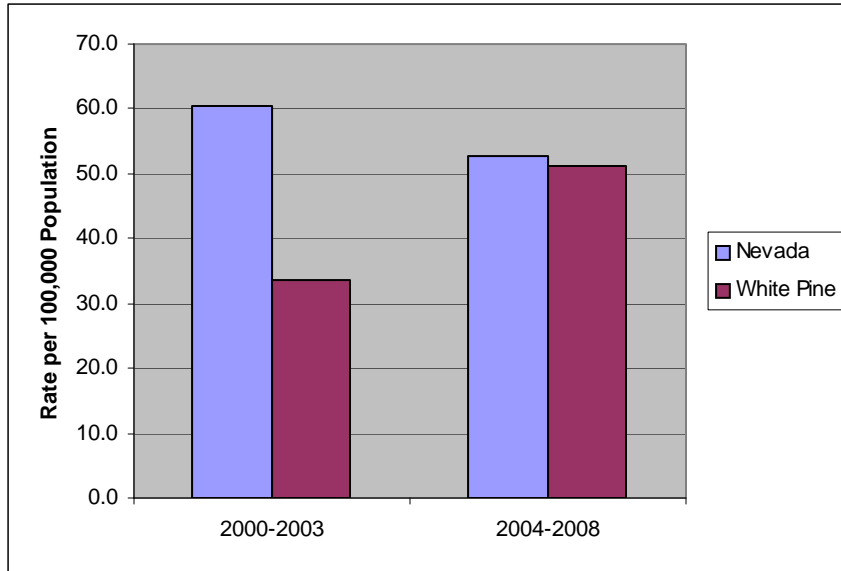
The cancer mortality rate declined for Nevada and fluctuated for White Pine County during the years 2000—2008. The county met the Healthy People 2010 target rate of 158 deaths per 100,000 population in the years 2000, 2002, 2003, 2005, 2007, and 2008.

*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 (3-2): Reduce the lung cancer death rate.

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

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



The lung cancer mortality rate decreased in Nevada and increased in White Pine County during the reported years 2000-2008.

On average for the most recent data from 2004-2008, neither White Pine County nor Nevada overall met the Healthy People 2010 target rate of 43.3 per 100,000 population.

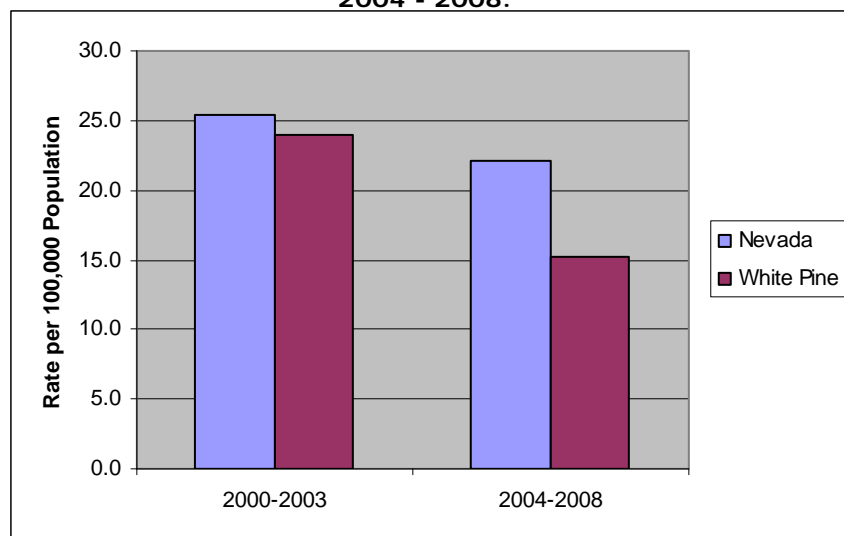
Healthy People 2010 Objective (3-3): Reduce the breast cancer death rate.

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

Aggregated Age-Adjusted Female Breast Cancer Death Rate, White Pine County and Nevada, 2000 - 2003 and 2004 - 2008.*

The female breast cancer rate decreased in both the state and White Pine County from 2000-2008.

The county rate was consistently lower than the overall state rate and met the Healthy People 2010 target rate of 21.3 deaths per 100,000 population from 2004-2008.

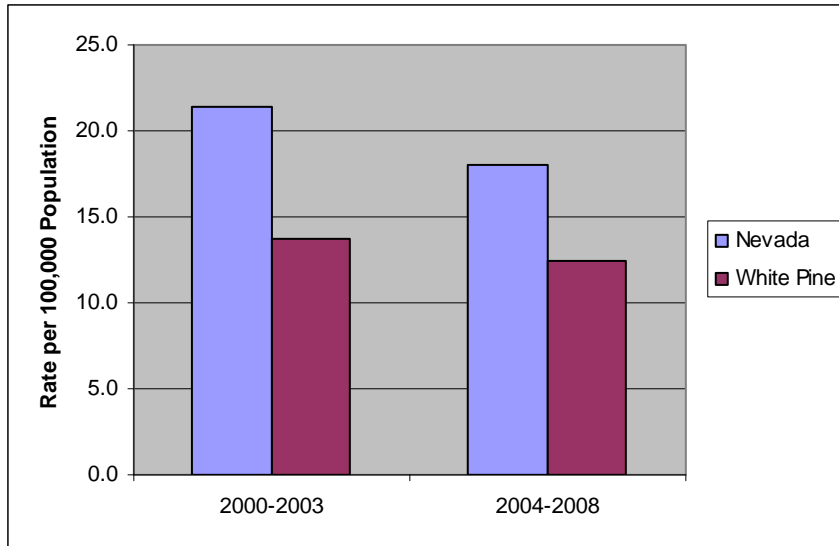


*These rates are age-adjusted to the 2000 U.S. standard population. The Nevada data are from Nevada Vital Statistics Records. Note: 2007 and 2008 data are not final and are subject to change.

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

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

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



The colorectal cancer mortality rate decreased in both the state and White Pine County.

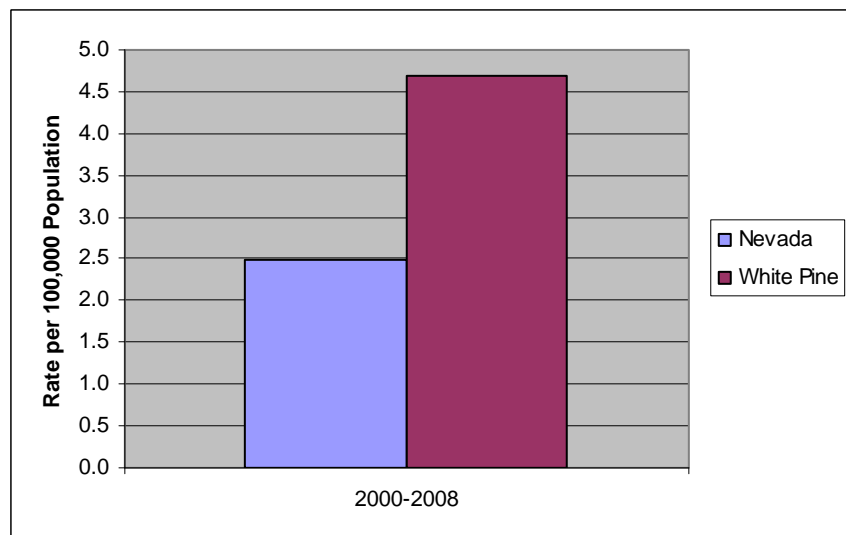
The county rate was consistently lower than the Nevada rate overall, and met the Healthy People 2010 target rate of 13.7 deaths per 100,000 population 2004-2008.

Healthy People 2010 Objective (3-6): Reduce the oropharyngeal cancer death rate.

Healthy People 2020 Objective C HP2020-6: Reduce the oropharyngeal cancer death rate.

Aggregated Age-Adjusted Oropharyngeal Cancer Death Rate, White Pine County and Nevada, 2000 - 2008.*

On average between 2000-2008, White Pine County's mortality rate for oropharyngeal cancer was twice the Healthy People 2010 target rate of 2.4 deaths per 100,000 population.

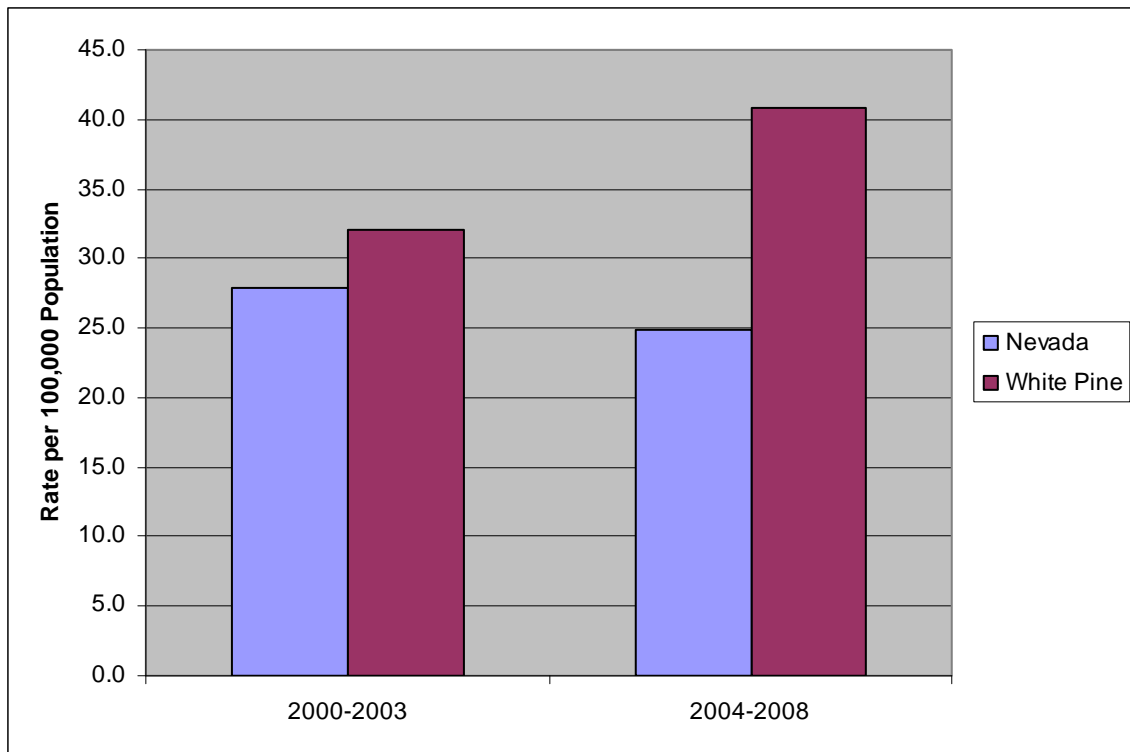


*These rates are age-adjusted to the 2000 U.S. standard population. The Nevada data are from Nevada Vital Statistics Records. Note: 2007 and 2008 data are not final and are subject to change.

Healthy People 2010 Objective (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, White Pine County and Nevada, 2000 - 2003 and 2004 - 2008.*



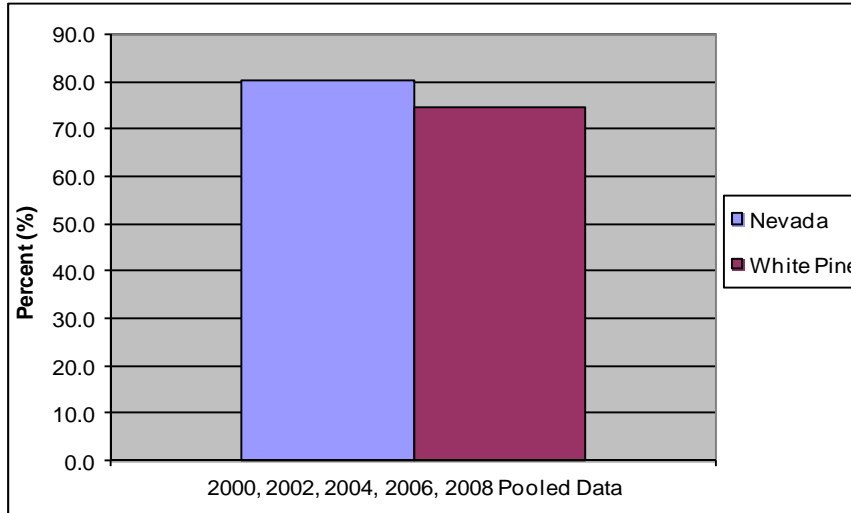
Overall Nevada met the Healthy People 2010 target rate of 28.2 deaths per 100,000 population from 2000-2008. On average White Pine County had a prostate cancer mortality rate more than 40 percent higher than the Healthy People objective.

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Healthy People 2010 Objective (3-11b.): Increase the proportion of women aged 18 years and older who have had a Pap test in the preceding three years.

Healthy People 2020 Objective C HP2020-15: Increase the proportion of women who receive a cervical cancer screening based on the most recent guidelines.

Aggregated Proportion of Women Aged 18 and Older Receiving a Pap Test within Three Years, White Pine County and Nevada, BRFSS Data, 2000, 2002, 2004, 2006, 2008.*



According to Behavioral Risk Factor Surveillance System data, the percentage of females, ages 18 years and older, receiving a Pap test within three years was reported lower in White Pine County than for Nevada on average between 2000-2008.

Neither the state nor the county met the Healthy People 2010 goal of 90 percent.

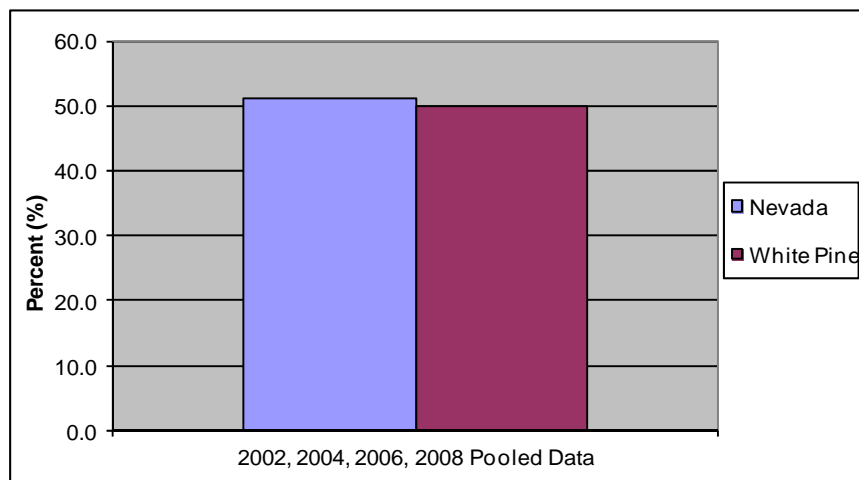
Healthy People 2010 Objective (3-12b.): Increase the proportion of adults aged 50+ who have ever had a sigmoidoscopy or colonoscopy.

Healthy People 2020 Objective C HP2020-16: Increase the proportion of adults who receive a colorectal cancer screening based on the most recent guidelines.

Aggregated Proportion of Adults Aged 50+ Who Have Ever Had a Sigmoidoscopy or Colonoscopy, White Pine County and Nevada, BRFSS Data, 2002, 2004, 2006, 2008.*

From 2000-2008 Nevada met the Healthy People 2010 objective of 50 percent for the percentage of adults, ages 50 years and older, who have ever had a sigmoidoscopy or colonoscopy.

White Pine County averaged slightly under the Healthy People target.



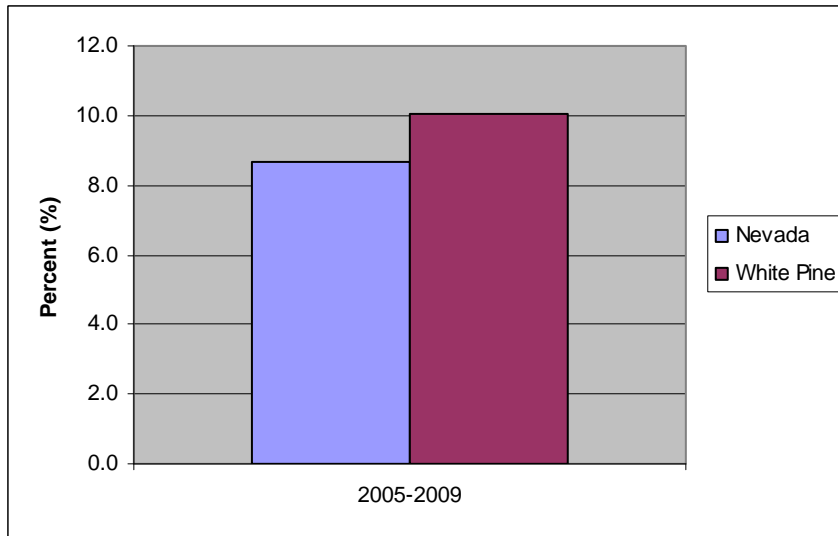
*These percentages are weighted to survey population characteristics. Not all counties were included in the survey results.

Diabetes

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

Healthy People 2020 Objective D HP2020-2: Reduce the annual number of new cases of diagnosed diabetes in the population.

Aggregated Proportion of Persons with Clinically Diagnosed Diabetes, White Pine and Nevada, BRFSS Data, 2005 - 2009.*



During the years 2005—2009, the percentage of persons with clinically diagnosed diabetes was higher for White Pine County than for Nevada on average.

The Healthy People 2010 target of 3.8 percent was not met by either the county or the state.

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

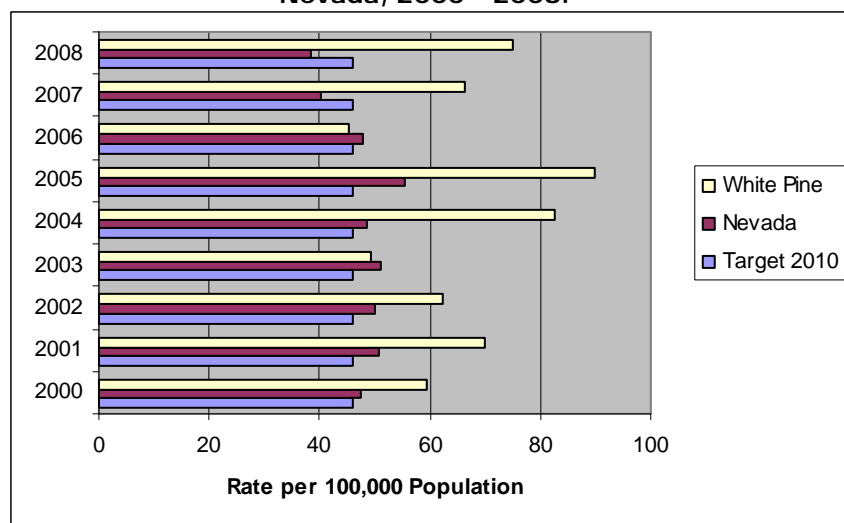
Healthy People 2010 Objective (5-5): Reduce the diabetes death rate.

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

Age-Adjusted Diabetes Death Rate, White Pine County and Nevada, 2000 - 2008.*

Since 2005, the diabetes mortality rate declined in Nevada. White Pine County's rate fluctuated from 2000-2008.

Nevada met the Healthy People 2010 target rate of 46 deaths per 100,000 population in 2007 and 2008. The county met the target in 2006.



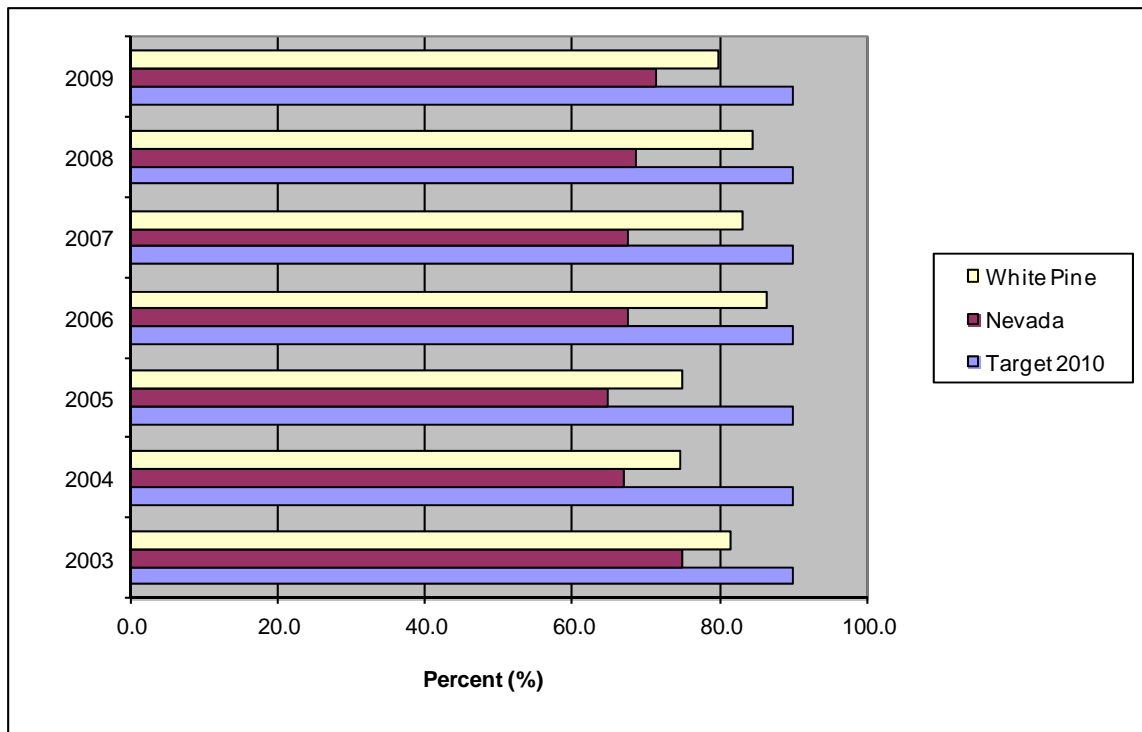
*These rates are age-adjusted to the 2000 U.S. standard population. The Nevada data are from the Nevada Vital Statistics Records. Note: 2007 and 2008 data are not final and are subject to change.

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), White Pine County and Nevada, 2003 - 2009.*



The high school completion rate for White Pine County fluctuated between the years 2003 and 2009. Neither Nevada nor White Pine County met the Healthy People 2010 goal of 90 percent for high school completion. Although the county rate was consistently higher than the state rate each year.

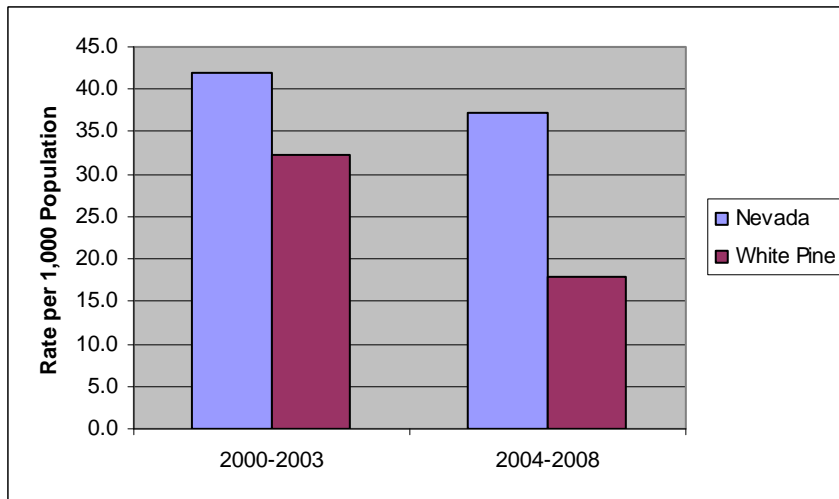
*The Nevada data are from the Nevada Annual Reports of Accountability.

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, White Pine County and Nevada, 2000 - 2003 and 2004 - 2008.*



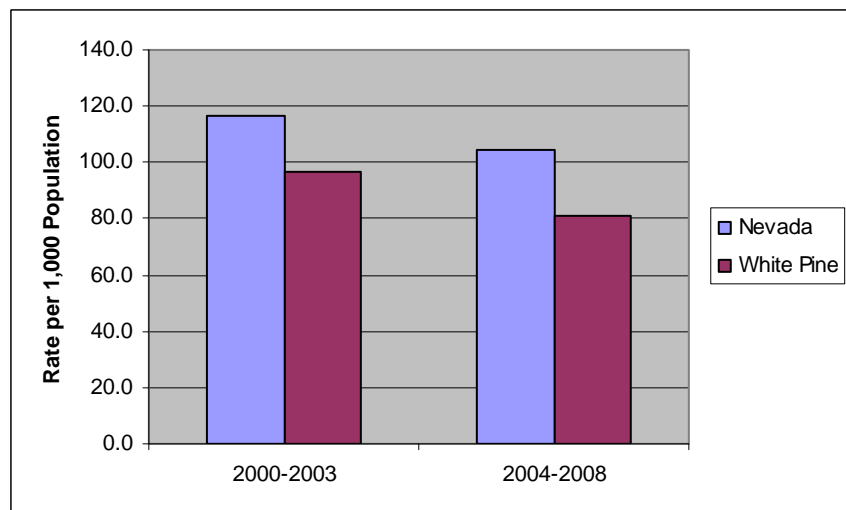
The adolescent pregnancy rate among females, ages 15 to 17 years, declined in both Nevada and White Pine County from 2000-2008.

Both the county and the state met the Healthy People 2010 target of 39 pregnancies per 1,000 population between the years 2004 to 2008.

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

The adolescent pregnancy rate among females, ages 18 to 19 years, decreased during the years 2000–2008 in the state and in White Pine County.

This is a new Healthy People 2020 indicator, so there is no 2010 target for 18-19 year old female pregnancies.

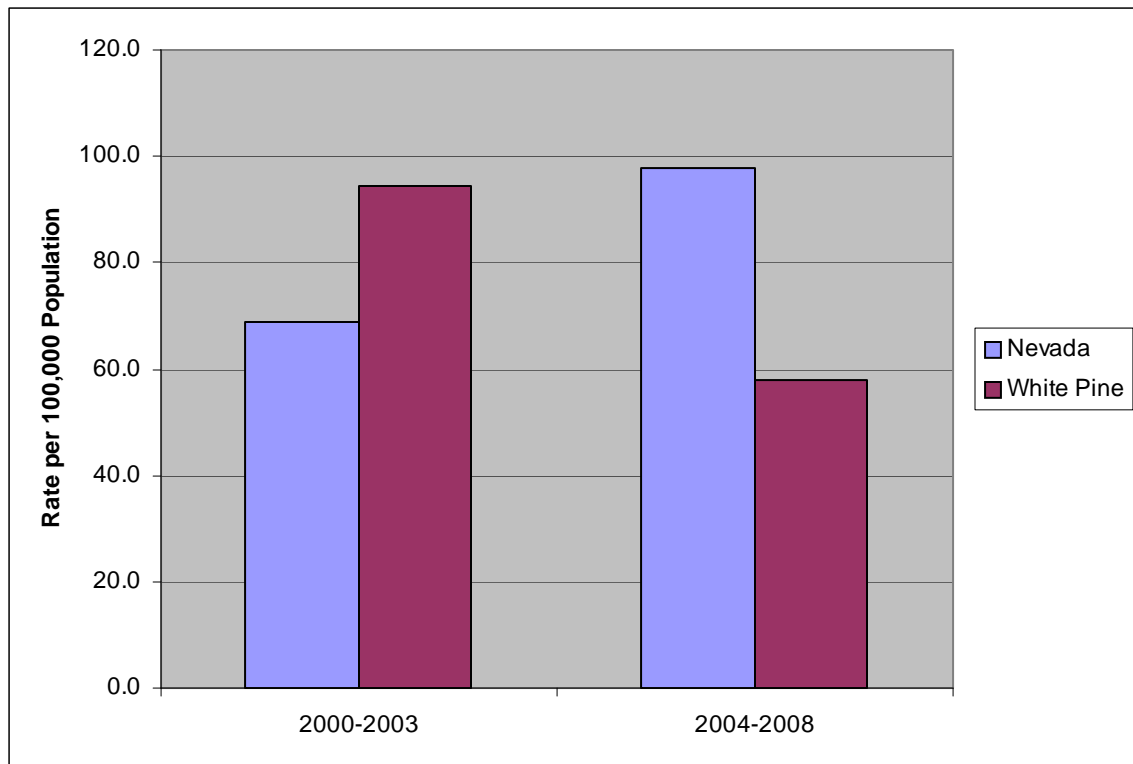


*The Nevada data are from Nevada Vital Statistics Records.
Note: 2008 data are not final and are subject to change.

Healthcare-Associated Infections

Healthy People 2020 Objective HAI HP2020-9: Reduce invasive methicillin-resistant staphylococcus aureus (MRSA) infections.

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



The rate of invasive methicillin resistant staphylococcus aureus (MRSA) infections increased in Nevada and decreased in White Pine County from 2000-2008. The county rate decreased by almost 40 percent to drop below the state rate between the years 2004-2008.

However, the county MRSA infection rate still averaged nearly 9 times higher than the new Healthy People 2020 target rate of 6.56 infections per 100,000 population during the years 2004-2008.

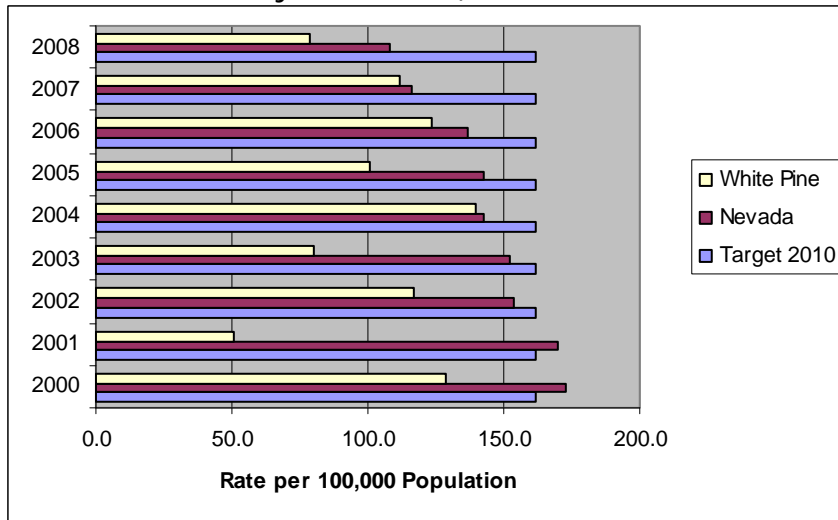
*These rates are age-adjusted to the 2000 U.S. standard population. Nevada data are from the Nevada Inpatient Hospital Discharge Database (NIHDD).

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, White Pine County and Nevada, 2000 - 2008.*



The coronary heart disease mortality rate declined in Nevada from the years 2000—2008. The rate fluctuated in White Pine County during the same time period.

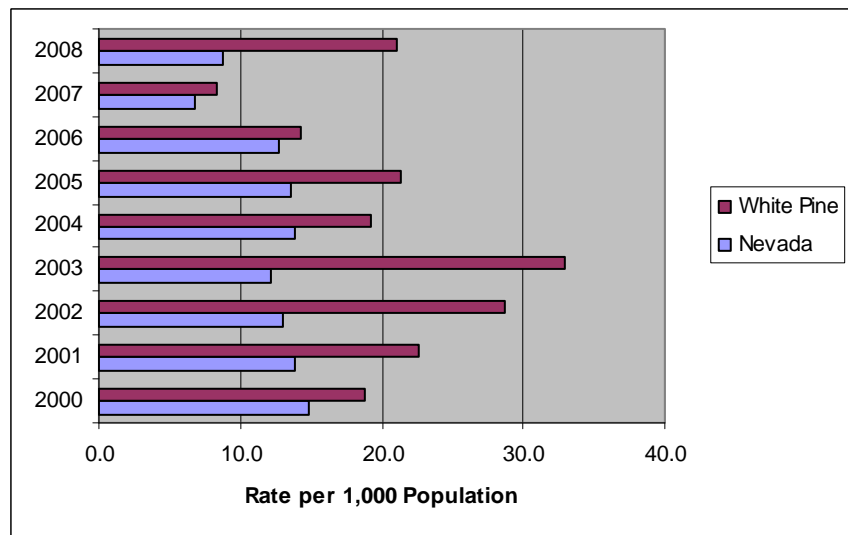
The county met the Healthy People 2010 target of 162 deaths per 100,000 population for each study year.

*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, White Pine County and Nevada, 2000 - 2008.*

From the years 2000 to 2008, the hospitalization rate of older adults, ages 65 years and older, with congestive heart failure for both White Pine County and Nevada fluctuated. The county rate had been in decline from 2003 until 2007, when the rate more than doubled in 2008.

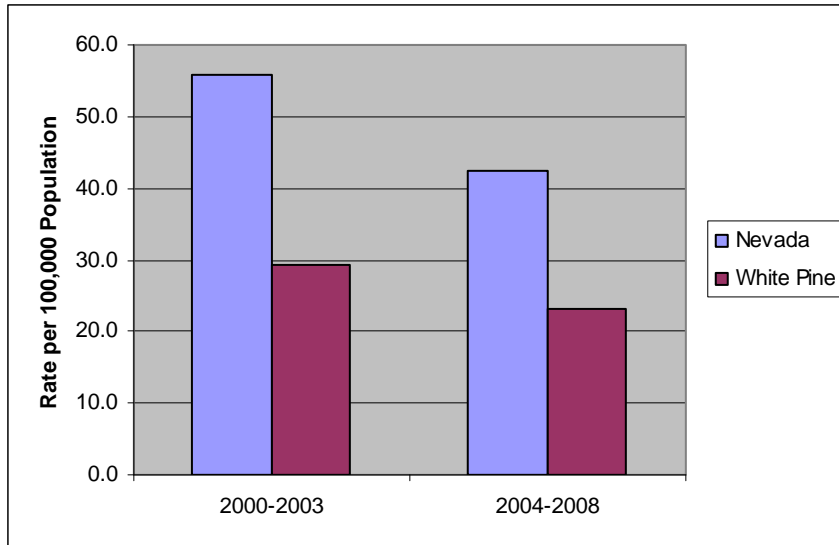


*The Nevada data are from Nevada Inpatient Hospital Discharge (NIHDD).

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

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

Age-Adjusted Stroke Death Rate, White Pine County and Nevada, 2000-2003 and 2004-2008.*



The stroke mortality rate for both White Pine County and the state decreased between the years 2000 to 2008.

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

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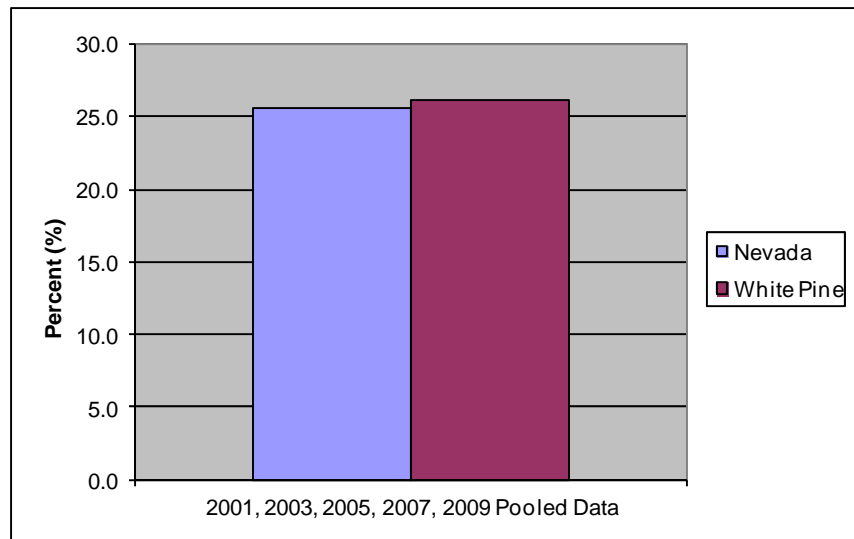
Healthy People 2010 Objective (12-9a.): Reduce the proportion of adults with high blood pressure.

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

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

The percentage of adults with high blood pressure was lower for White Pine County than Nevada on average between 2001-2009 according to Behavioral Risk Factor Surveillance System data.

Neither Nevada nor White Pine County met the Healthy People 2010 goal of 14 percent.

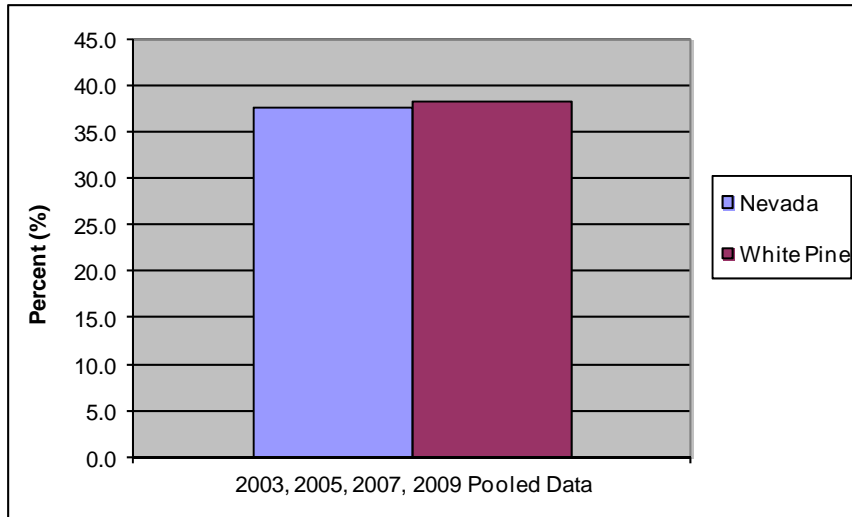


*These percentages are weighted to survey population characteristics. Not all counties were included in the survey results.

Healthy People 2010 Objective (12-14): Reduce the proportion of adults with high blood cholesterol levels.

Healthy People 2020 Objective HDS HP2020-7: Reduce the proportion of adults with high blood cholesterol levels.

Aggregated Proportion of Adults with High Blood Cholesterol Levels, White Pine County and Nevada, BRFSS Data, 2001, 2003, 2005, 2007, 2009.*



According to pooled data from the Behavioral Risk Factor Surveillance System reported years 2001-2009, the proportion of adults with high blood cholesterol levels in White Pine County was more than twice as high as the Healthy People 2010 objective of 17 percent.

Neither the county nor the state met the Healthy People target.

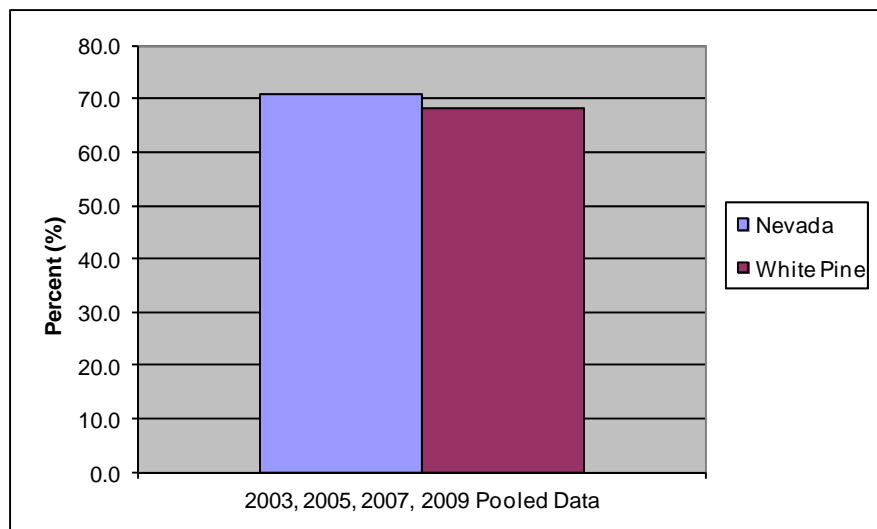
Healthy People 2010 Objective (12-15): Increase the proportion of adults having had their blood cholesterol checked within the preceding 5 years.

Healthy People 2020 Objective HDS HP2020-6: Increase the proportion of adults having had their blood cholesterol checked within the preceding 5 years.

Aggregated Proportion of Adults Having Their Blood Cholesterol Checked Within the Preceding 5 Years, White Pine County and Nevada, BRFSS Data, 2001, 2003, 2005, 2007, 2009.*

From 2001-2009, the percentage of adults having had their blood cholesterol checked within the last five years in White Pine County was less than the Healthy People 2010 target of 80 percent.

Neither Nevada nor White Pine County met the Healthy People goal.



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

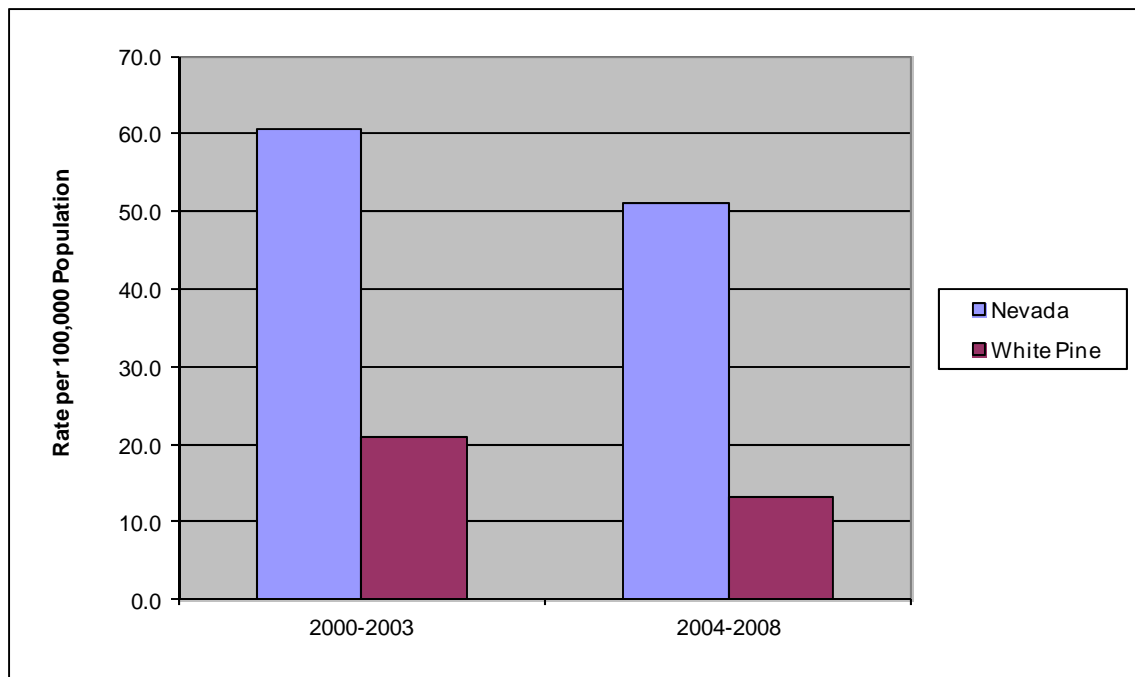
Immunization and Infectious Diseases

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, White Pine County and Nevada, 2000 - 2003 and 2004 - 2008*.



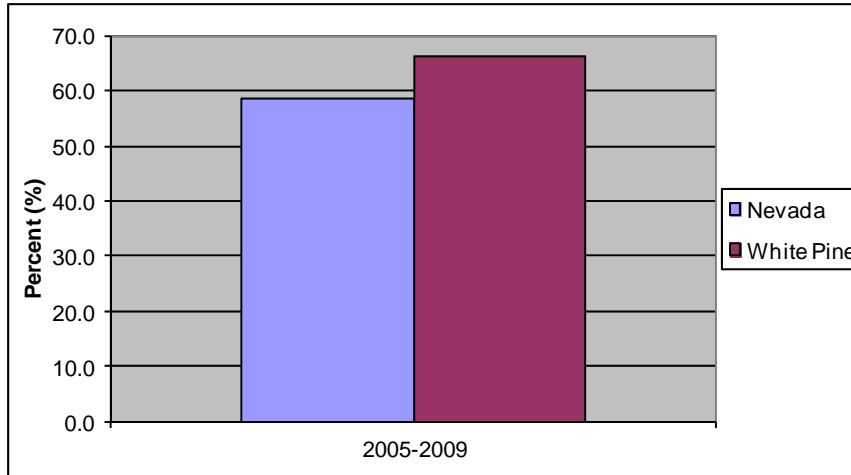
During the years 2000 to 2008, the rate of hospitalizations for peptic ulcer disease declined in both Nevada and White Pine County. White Pine County met the Healthy People 2010 target rate of 46 per 100,000 population.

*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).

Healthy People 2010 Objective (14-29a.): Increase the proportion of adults, aged 65 years and older, who are vaccinated annually against influenza.

Healthy People 2020 Objective IID HP2020-12.7: Increase the proportion of non-institutionalized adults, aged 65 years and older, who are vaccinated annually against seasonal influenza.

Aggregated Proportion of Adults Aged 65 Years and Older Who Are Vaccinated Against Influenza, White Pine County and Nevada, BRFSS Data, 2005 - 2009.*



The percentage of adults, ages 65 years and older, who are vaccinated against influenza was higher in White Pine County than in Nevada on average from 2005-2009.

Neither White Pine County nor Nevada met the Healthy People 2010 goal of 90 percent.

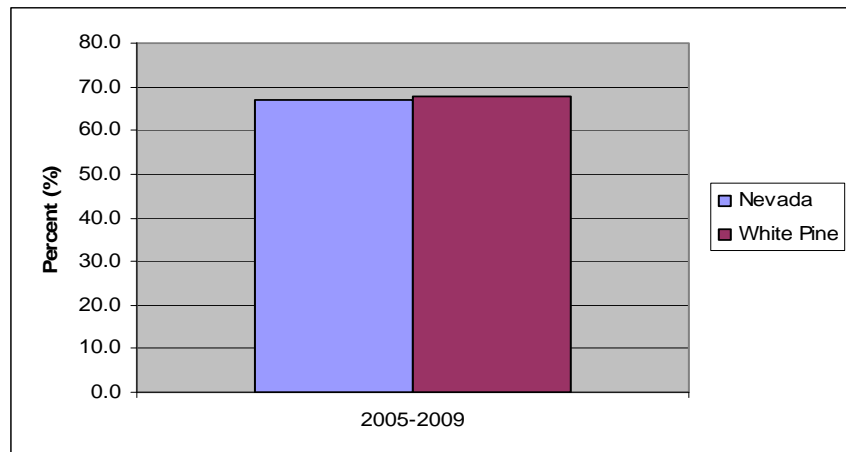
Healthy People 2010 Objective (14-29b.): Increase the proportion of adults, aged 65 years and older, who have ever received the pneumococcal vaccine.

Healthy People 2010 Objective IID HP 2020-13.1: Increase the proportion of non-institutionalized adults, aged 65 years and older, who are vaccinated against pneumococcal disease.

Aggregated Proportion of Adults Aged 65 Years and Older Who Have Ever Received the Pneumococcal Vaccine, White Pine County and Nevada, BRFSS Data, 2005 - 2009.*

The percentage of adults, ages 65 years and older, who have ever received the pneumococcal vaccine was marginally higher in White Pine County than in the state during the years 2005—2009.

Neither the county nor the state met the Healthy People 2010 objective of 90 percent.



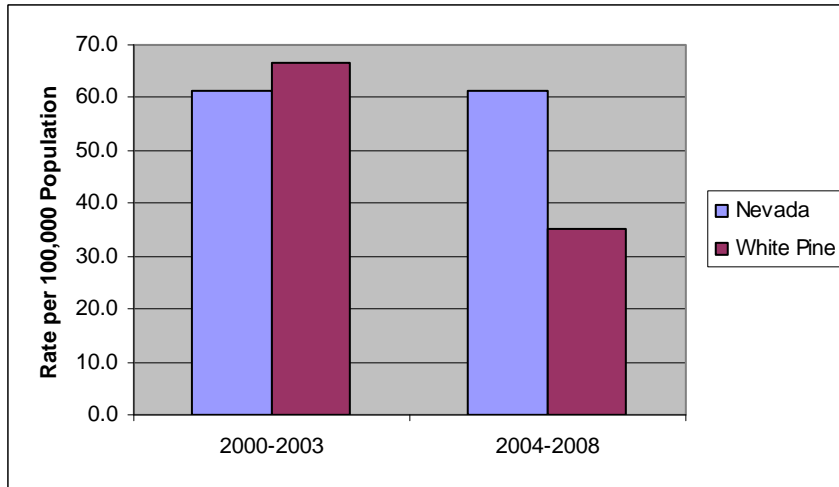
*These percentages are weighted to survey population characteristics. Not all counties were included in the survey results.

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 Nonfatal Head Injuries, White Pine County and Nevada, 2000 - 2003 and 2004 - 2008.*



The Nevada rate of hospitalizations for nonfatal head injuries remained steady, while the White Pine County rate declined over the period 2000—2008.

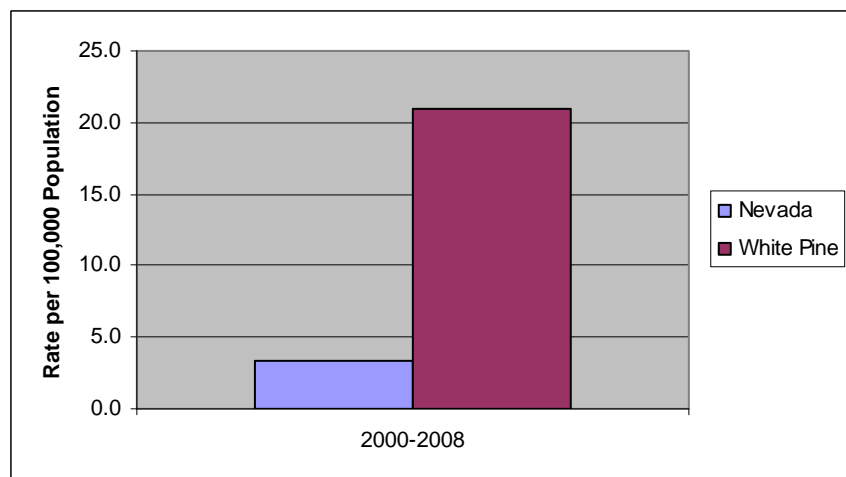
On average from 2004-2008, White Pine County met the Healthy People 2010 target rate of 41.2 deaths per 100,000 population.

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 injuries.

Aggregated Hospitalization Rate for Nonfatal Spinal Cord Injuries, White Pine County and Nevada, 2000 - 2008.*

The hospitalization rate for nonfatal spinal cord injuries in White Pine County was more than triple the state rate on average between 2000-2008, and was more than eight times the Healthy People 2010 target rate of 2.4 injuries per 100,000 population.

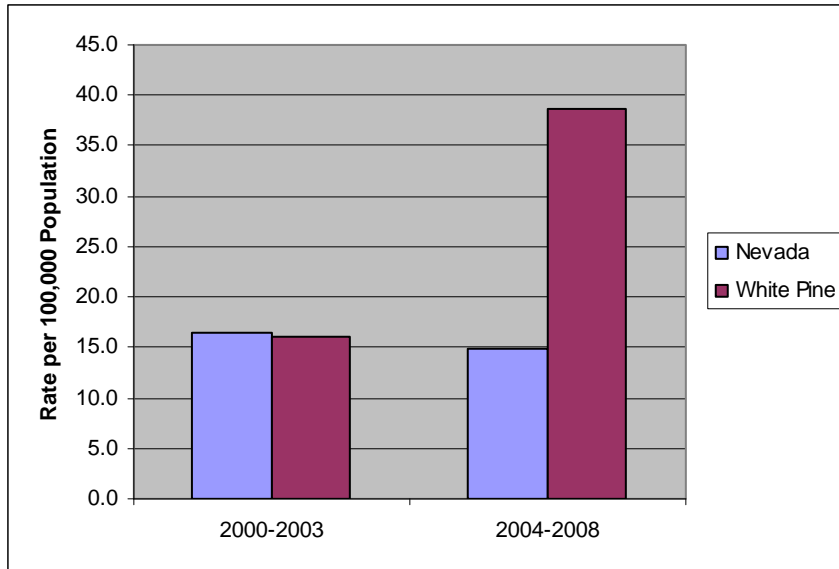


*The Nevada data are from the Nevada Inpatient Hospital Discharge Database (NIHDD).

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, White Pine County and Nevada, 2000 - 2003 and 2004 - 2008.*



The firearm related mortality rate decreased slightly in Nevada from the years 2000 to 2008.

The rate of firearm related deaths in White Pine County was more than two and a half times the Nevada rate from 2004-2008, and more than ten times the Healthy People 2010 target of 3.6 per 100,000 population.

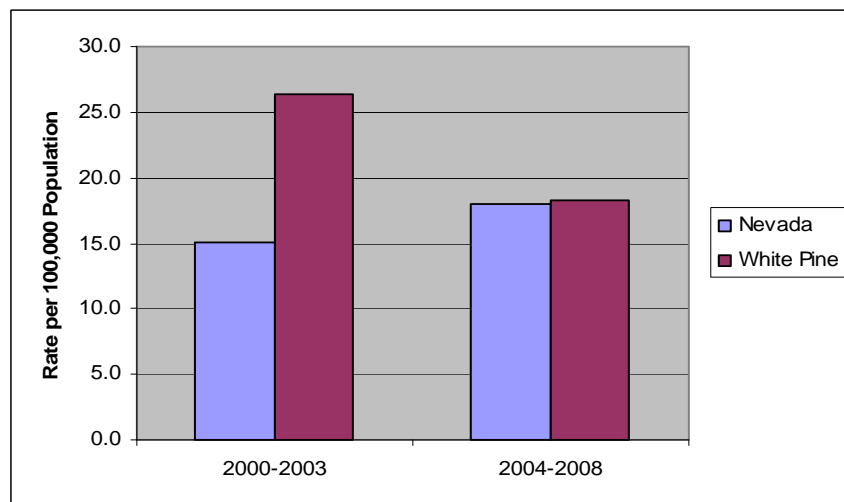
Healthy People 2010 Objective (15-8): Reduce deaths caused by poisonings.

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

Aggregated Age-Adjusted Death Rate Caused by Poisoning, White Pine County and Nevada, 2000 - 2003 and 2004 - 2008

The poisoning mortality rate for White Pine County decreased, while the state rate increased from 2000-2008.

On average from 2004-2008, both the state and the county rates were more than 11 times higher than the Healthy People 2010 target rate of 1.5 deaths per 100,000 population.

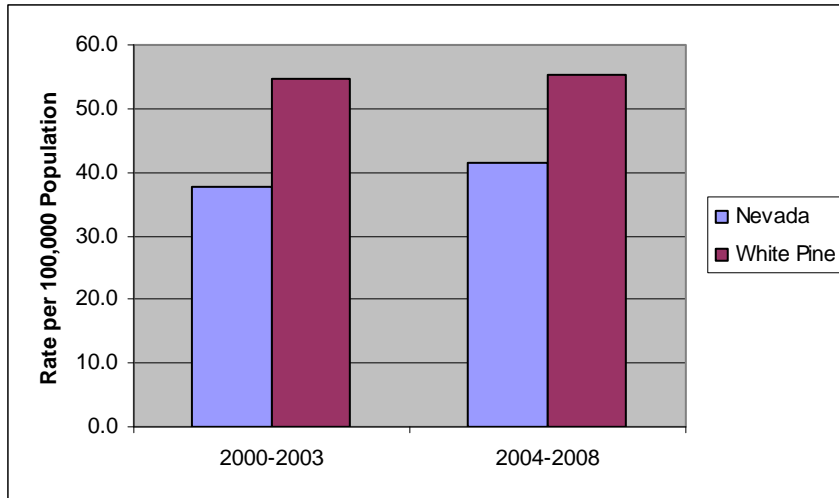


*These rates are age-adjusted to the 2000 U.S. standard population. The Nevada data are from Nevada Vital Statistics Records. Note: 2007 and 2008 data are not final and are subject to change.

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, White Pine County and Nevada, 2000 - 2003 and 2004 - 2008.*



The unintentional injury mortality rate increased slightly in both Nevada and White Pine County from 2000-2008.

On average from 2004-2008 the rate in White Pine County was more than three times the Healthy People 2010 target rate of 17.1 deaths per 100,000 population.

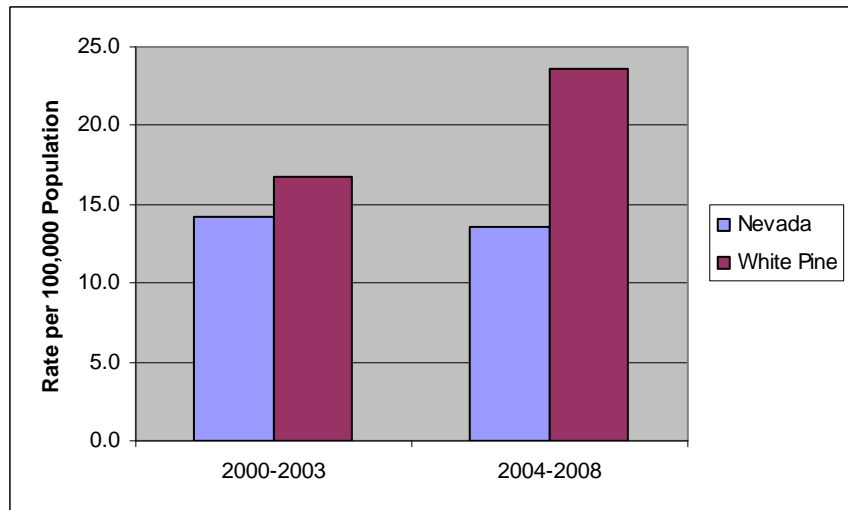
Healthy People 2010 Objective (15-15a.): Reduce deaths caused by motor vehicle crashes.

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

The motor vehicle crash mortality rate in White Pine County increased from the years 2000 to 2008. The Nevada rate for motor vehicle crash fatality declined over the same time period.

On average from 2004-2008, the rate in White Pine County was three times as high as the Healthy People 2010 target rate of 8.0 deaths per 100,000 population.

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

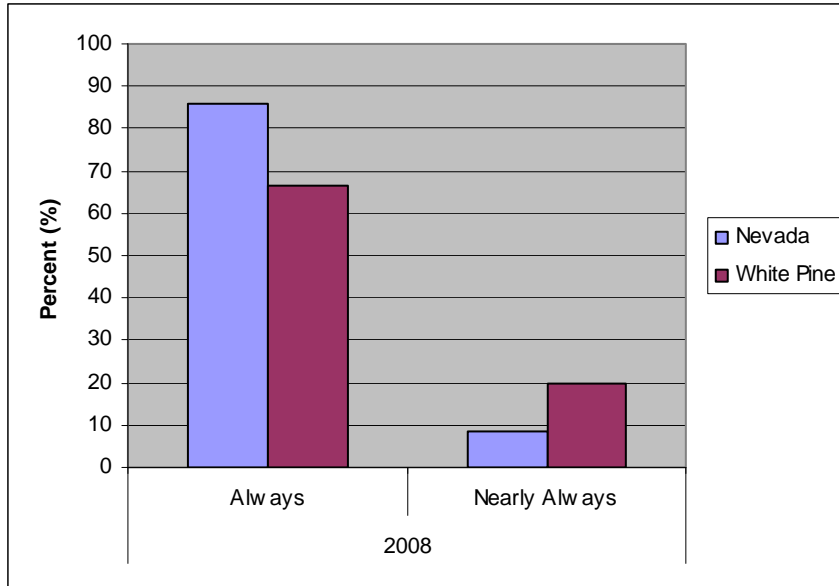


*These rates are age-adjusted to the 2000 U.S. standard population. The Nevada data are from Nevada Vital Statistics Records. Note: 2007 and 2008 are not final and are subject to change.

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

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

Proportion of People Using Safety Belts, White Pine County and Nevada, BRFSS Data, 2008.*



In 2008, the proportion of people reporting 'Always' or 'Nearly Always' using safety belts in White Pine County approached the Healthy People 2010 target of 89 percent. Nevada met the goal.

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

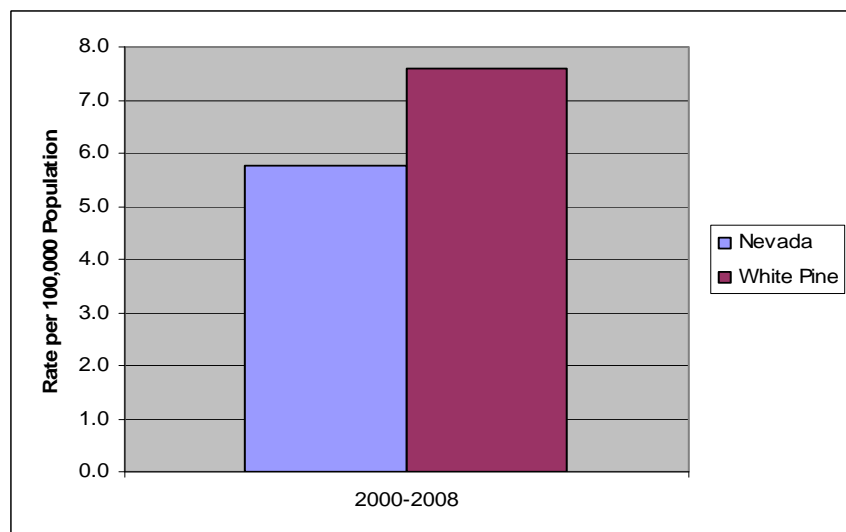
Healthy People 2010 Objective (15-27): Reduce deaths from falls.

Healthy People 2020 Objective IVP HP2020-23: Prevent an increase in the rate of fall-related deaths.

Aggregated Age-Adjusted Death Rate From Falls, White Pine County and Nevada, 2000 - 2008.*

The fall mortality rate for White Pine County was higher than the state on average from 2000-2008.

White Pine County's rate was more than twice the Healthy People 2010 target rate of 3.3 per 100,000 population.

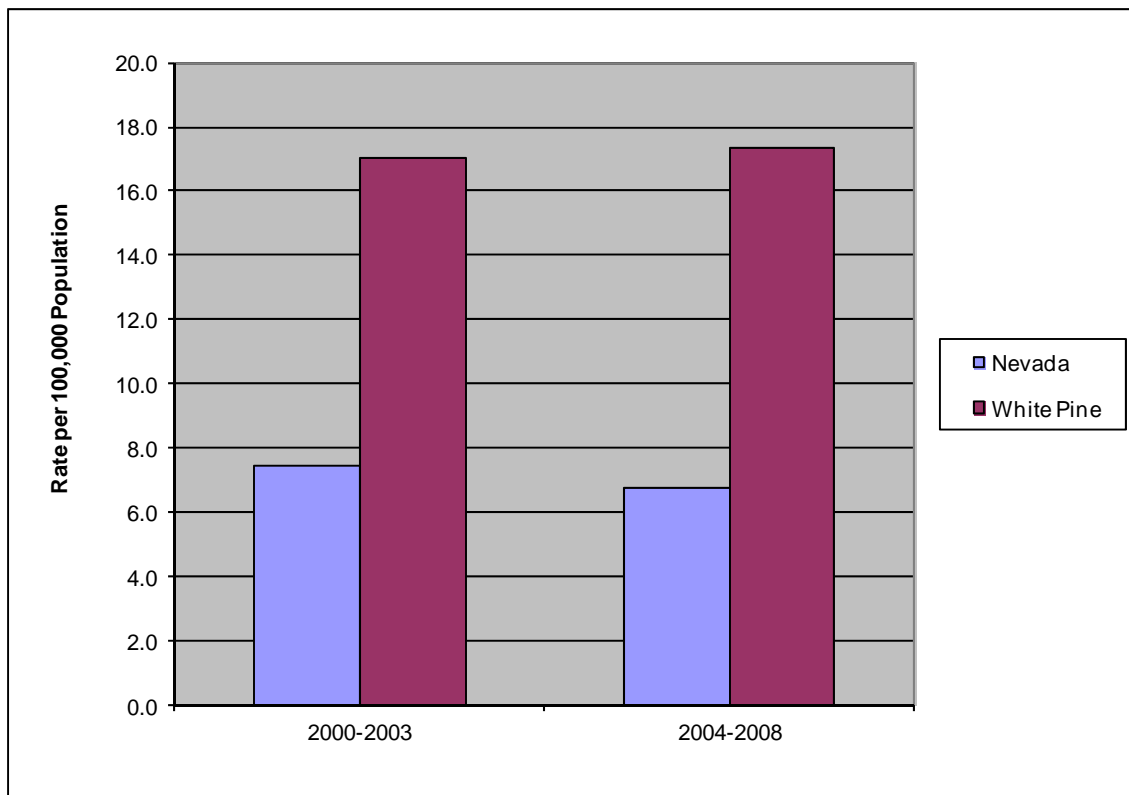


*These rates are age-adjusted to the 2000 U.S. standard population. The Nevada data are from Nevada Vital Statistics Records. Note: 2007 and 2008 data are not final and are subject to change.

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

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

Aggregated Age-Adjusted Death Rate from Homicides, White Pine County and Nevada, 2000 - 2003 and 2004 - 2008.*



The homicide mortality rate in White Pine County remained steady, while the Nevada rate decreased slightly. The county rate was almost three times that of the state in 2004-2008 and more than six times higher than the Healthy People 2010 target rate of 2.8 homicide deaths per 100,000 population.

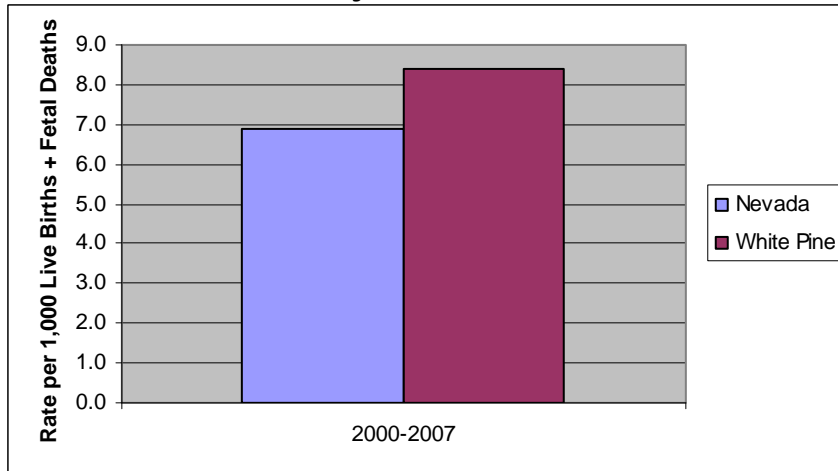
*These rates are age-adjusted to the 2000 U.S. standard population. The Nevada data are from Nevada Vital Statistics Records. Note: 2007 and 2008 data are not final and are subject to change.

Maternal, Infant, Child Health

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

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

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



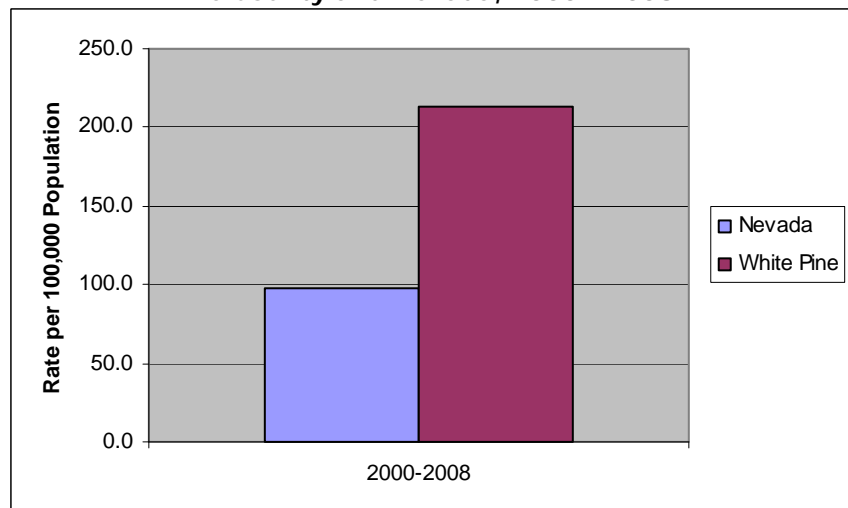
On average, the rate of fetal deaths at 20 or more weeks gestation, was higher in White Pine County than the state rate from 2000 to 2007, and twice as high as the Healthy People 2010 target of 4.1 deaths per 1,000 live births and fetal deaths.

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

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

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

The mortality rate of young adults, aged 20 to 24, in White Pine County was double the Nevada rate on average from 2000-2008, and five times higher than the Healthy People 2010 target rate of 41.5 deaths per 100,000 population.

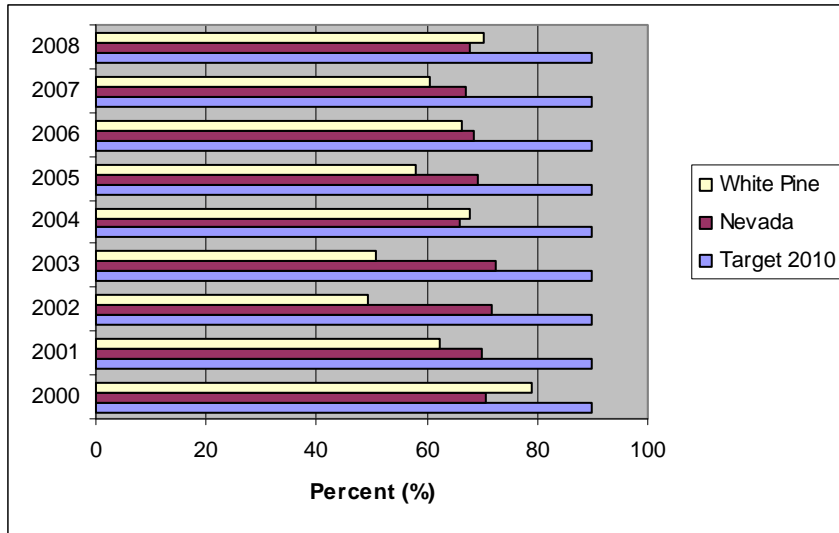


*The Nevada data are from Nevada Vital Statistics Records.
Note: 2008 data are not final and are subject to change.

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, White Pine County and Nevada, 2000 - 2008.*



The percentage of pregnant women receiving prenatal care in the first trimester fluctuated for both the state and White Pine County from 2000-2008.

Neither Nevada, nor the county reached the Healthy People 2010 goal of 90 percent.

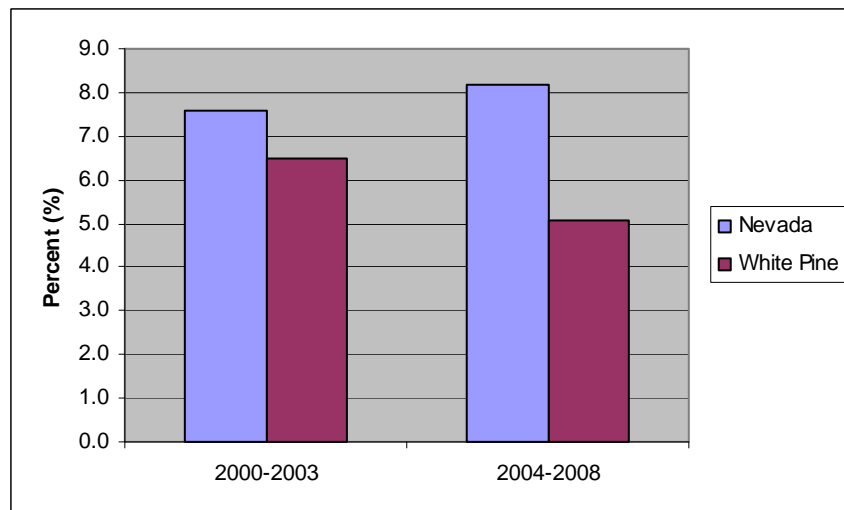
Healthy People 2010 Objective (16-10a.): Reduce the proportion of low birth weight infants.

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

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

The percentage of low birth weight infants increased in Nevada, and decreased in White Pine County from 2000 -2008.

On average from 2004-2008, White Pine County met the Healthy People 2010 target of 5 percent.

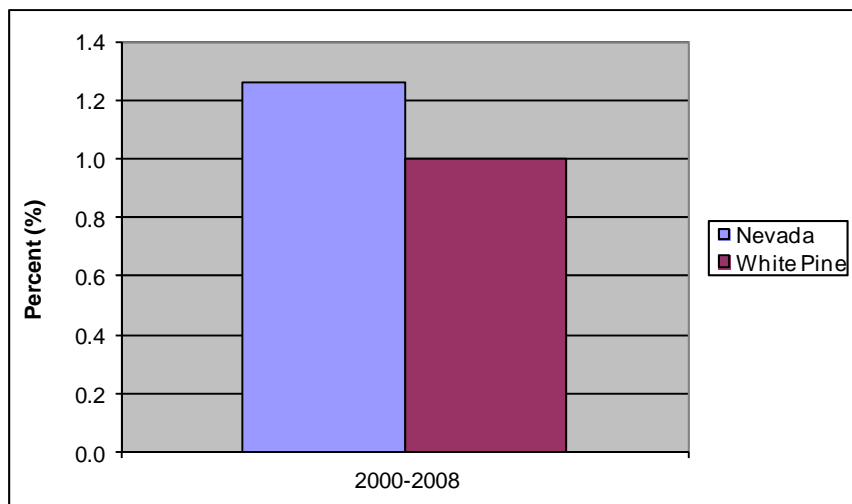


*The Nevada data are from Nevada Vital Statistics Records.
 Note: 2008 data are not final and are subject to change.

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

Healthy People 2020 Objective MICH HP2020-8.2: Reduce the proportion of very low birth weight infants.

Aggregated Proportion of Very Low Birth Weight Infants, White Pine County and Nevada, 2000 - 2008.*



The proportion of very low birth weight infants was lower in White Pine County than the state on average from 2000-2008, and just slightly higher than the Healthy People 2010 target of .9 percent.

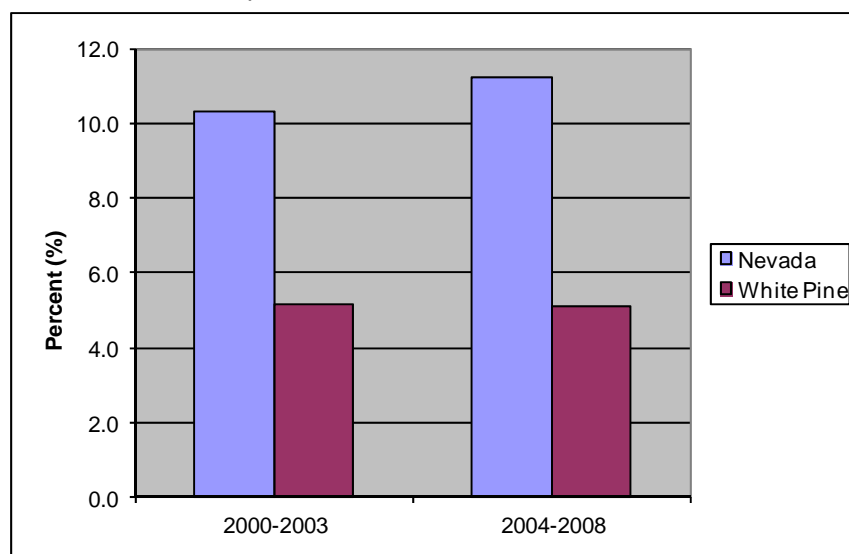
Healthy People 2010 Objective (16-11a.): Reduce preterm birth, infants born prior to 37 completed weeks of gestation.

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

Aggregated Proportion of Preterm Births, Infants Born Prior to 37 Completed Weeks of Gestation, White Pine County and Nevada, 2000 - 2003 and 2004 - 2008.*

White Pine County had a rate of preterm births, infants born prior to 37 completed weeks of gestation, less than half that of the state rate over the years 2000—2008.

The county met the Healthy People 2010 target of 7.6 percent.

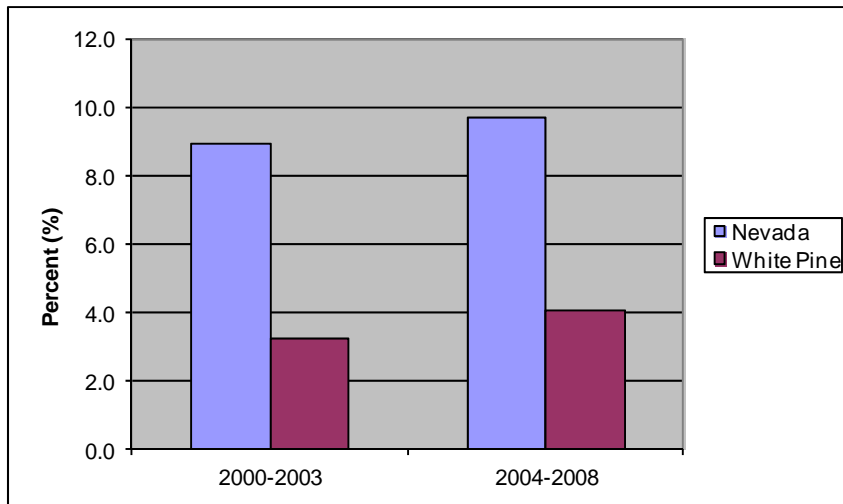


*The Nevada data are from Nevada Vital Statistics Records.
 Note: 2008 data are not final and are subject to change.

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, White Pine County and Nevada, 2000 - 2003 and 2004 - 2008.*



The percentage of live births, at 32 to 36 completed weeks of gestation, for White Pine County was less than half that of the state rate from 2000-2008.

The county met the Healthy People 2010 goal of 6.4 percent.

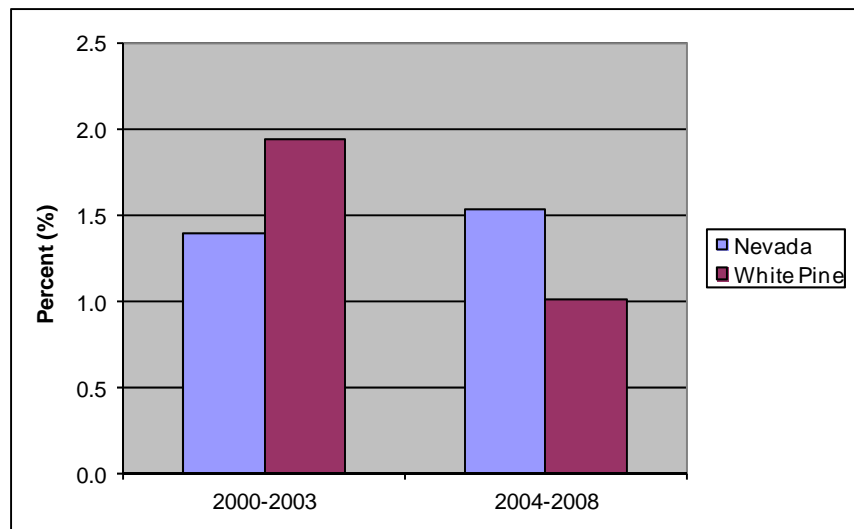
Healthy People 2010 Objective (16-11c.): Reduce the proportion of live births at less than 32 completed weeks of gestation.

Healthy People 2020 Objective MICH HP2020-9.4: Reduce the proportion of very preterm or live births at less than 32 completed weeks of gestation.

Proportion of Live Births at Less Than 32 Completed Weeks of Gestation, White Pine County and Nevada, 2000 - 2003 and 2004 - 2008.*

The state rate for the percentage of live births at less than 32 completed weeks of gestation, rose slightly, while White Pine County's rate declined from 2000-2008.

On average from 2004-2008 White Pine County met the Healthy People 2010 objective of 1.1 percent.

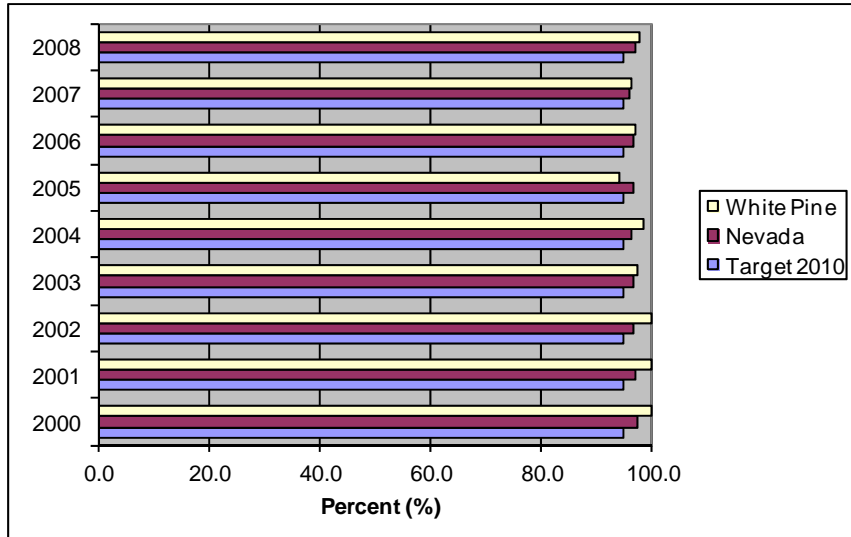


*The Nevada data are from Nevada Vital Statistics Records.
 Note: 2008 data are not final and are subject to change.

Healthy People 2010 Objective (16-17a.): 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, White Pine County and Nevada, 2000 - 2008.*



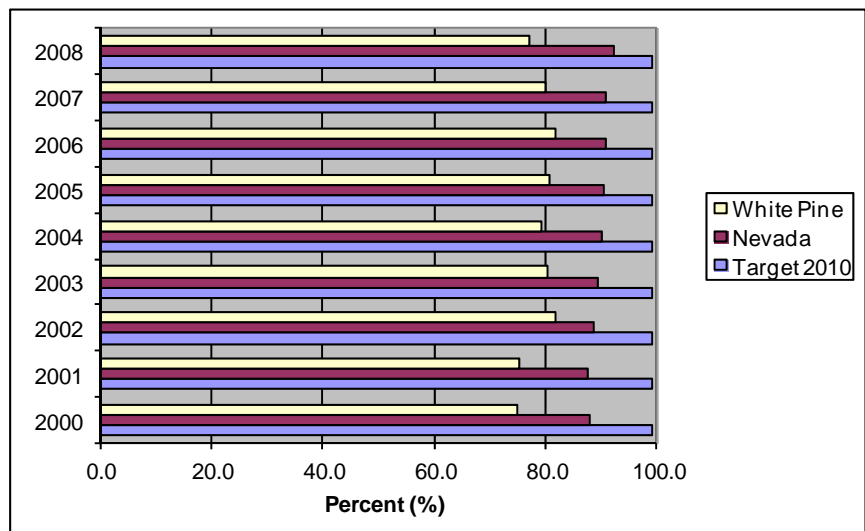
While the rates fluctuated, both White Pine County and Nevada attained the Healthy People 2010 target of 95 percent for the proportion of pregnant women abstaining from alcohol from 2000-2008.

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, White Pine County and Nevada, 2000 - 2008.*

The rate of pregnant women abstaining from tobacco increased in the state and White Pine County from 2000-2008. Neither Nevada nor the county attained the Healthy People 2010 target of 99 percent.



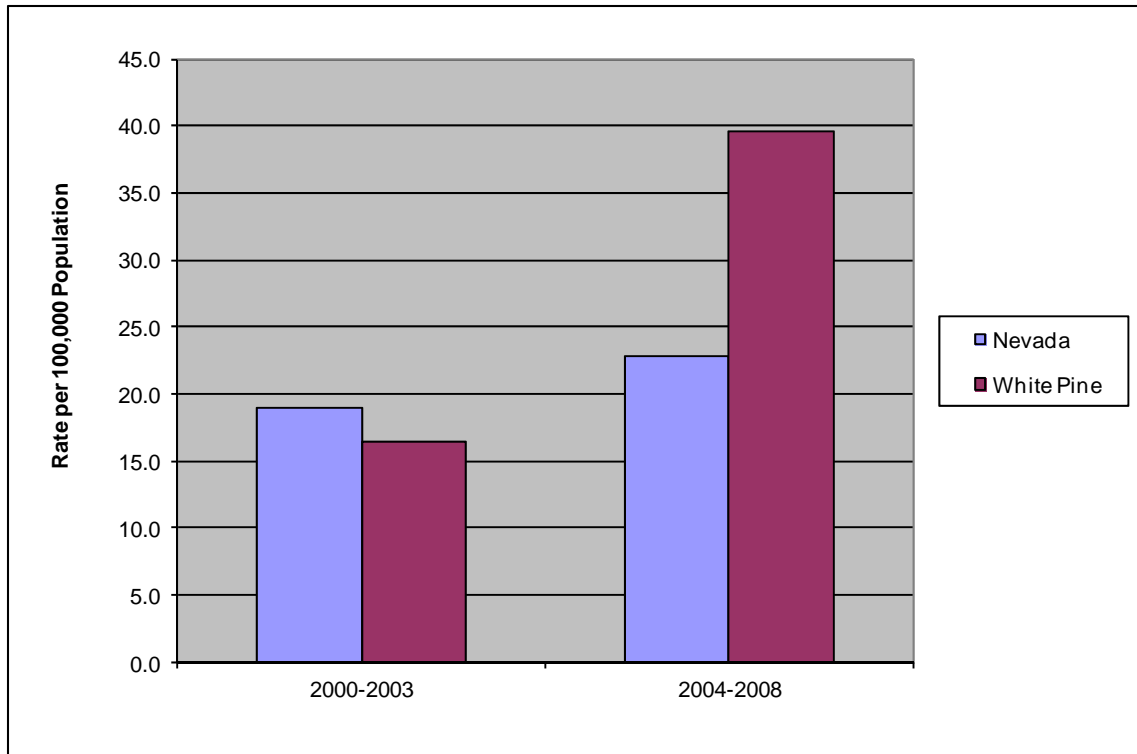
*The Nevada data are from Nevada Vital Statistics Records. Note: 2008 data are not final and are subject to change.

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, White Pine County and Nevada, 2000 - 2003 and 2004 - 2008.*



The suicide mortality rate increased for both Nevada and White Pine County from 2000-2008. The county rate more than doubled over this time period and was more than eight 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).

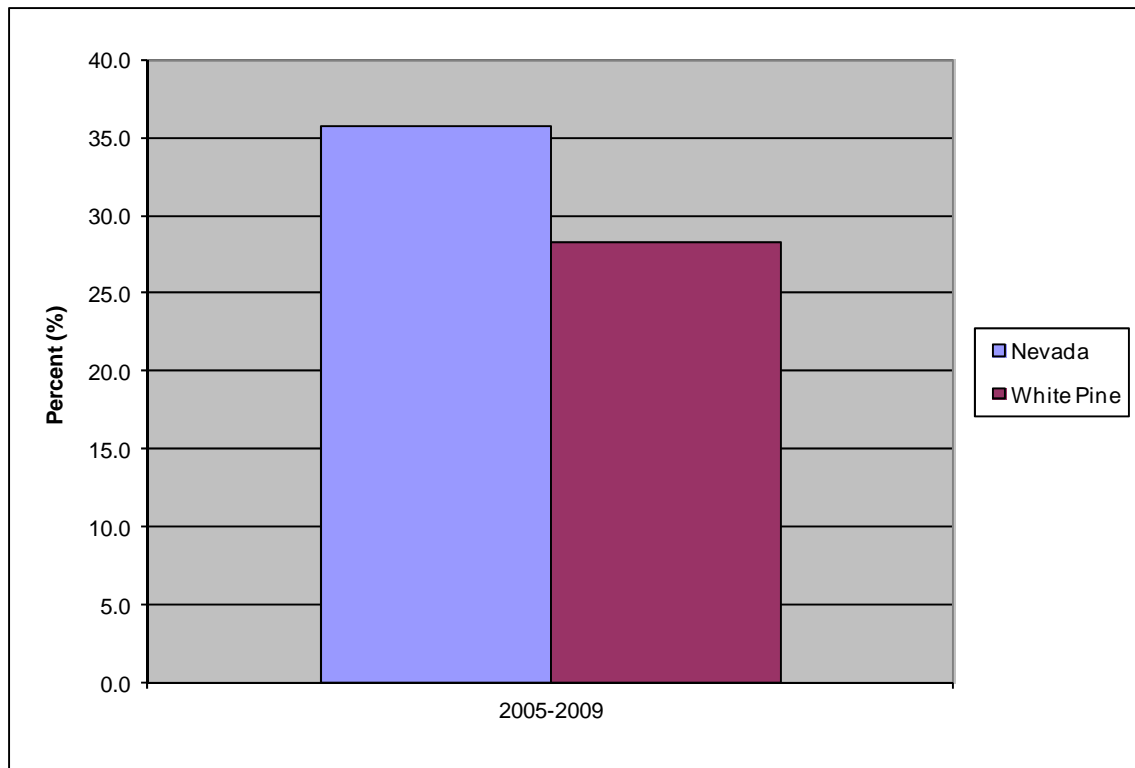
Note: 2007 and 2008 data are not final and are subject to change.

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, White Pine County and Nevada, BRFSS Data, 2005 - 2009.*



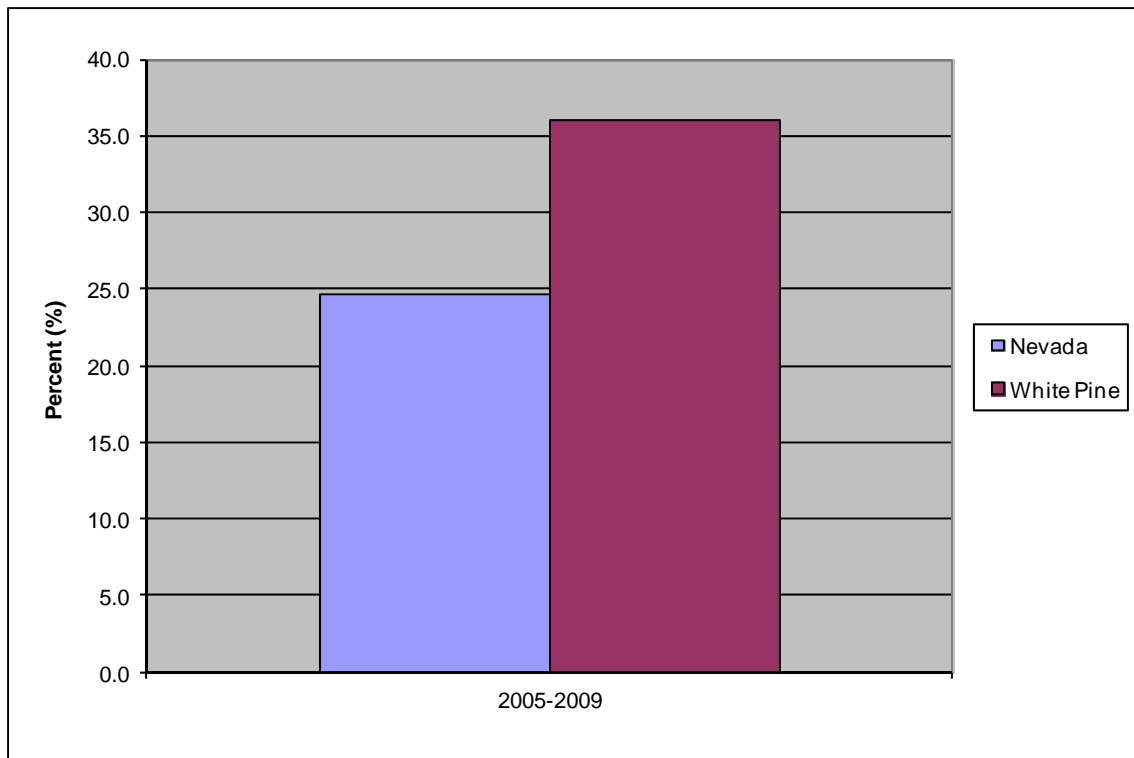
The percentage of adults who are at a healthy weight was lower in White Pine County than in Nevada on average from 2005—2009. The average rate for White Pine County was almost half of the Healthy People 2010 target of sixty percent.

*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, White Pine County and Nevada, BRFSS Data, 2005 - 2009.*



The percentage of adults who are obese was higher in White Pine County than in Nevada on average between 2005-2009. The county rate was more than twice as high as the Healthy People 2010 target of fifteen percent.

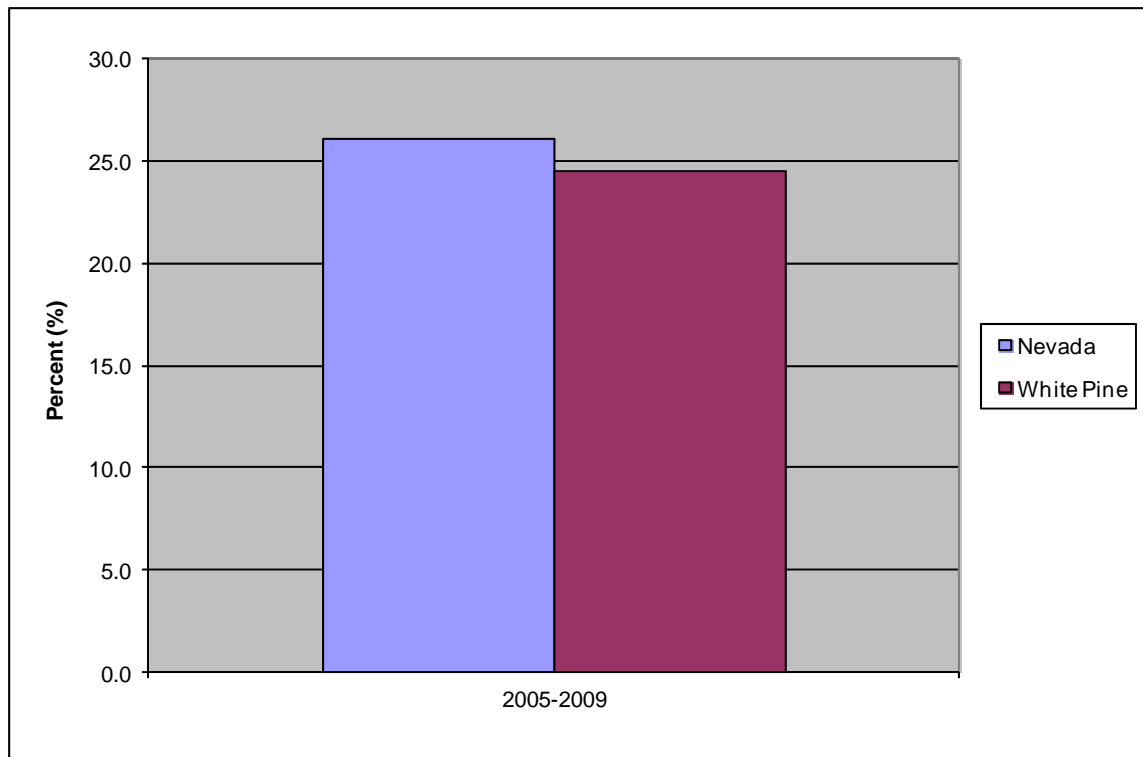
*These percentages are weighted to survey population characteristics. Not all counties were included in the survey results. Note: Body weight estimates from self-reported heights and weights tend to be lower than those from measured height and weight.

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, White Pine County and Nevada , BRFSS Data, 2005 - 2009.*



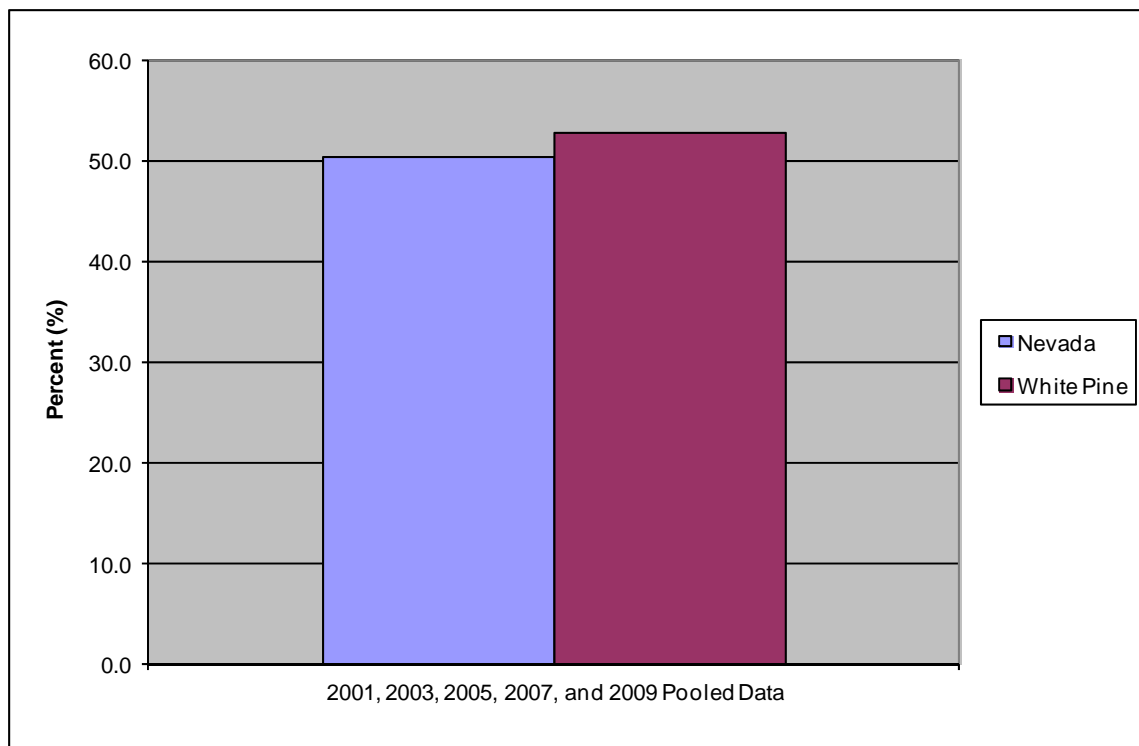
According to Behavioral Risk Factor Surveillance System data, the percentage of adults who engage in no leisure time physical activity was lower in White Pine County than in Nevada on average during 2005—2009. Neither the county nor the state met the Healthy People 2010 target of twenty percent.

*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, White Pine County and Nevada , BRFSS Data, 2001, 2003, 2005, 2007, 2009.*



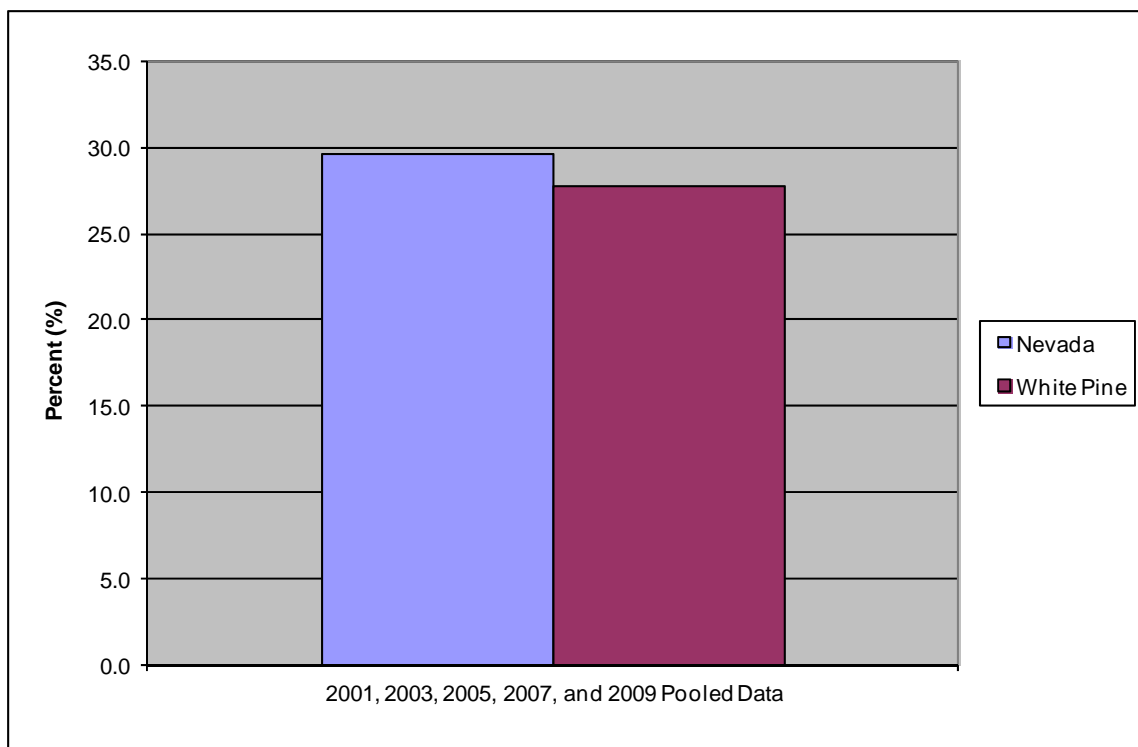
The percentage of adults who engage in aerobic physical activity of at least moderate intensity for at least 150 minutes per week or of vigorous intensity for at least 75 minutes per week or an equivalent combination, was higher in Nevada than in White Pine County on average from 2001-2009. Nevada met the Healthy People 2010 target of fifty percent, and White Pine County approached the goal.

*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, White Pine County and Nevada, BRFSS Data, 2001, 2003, 2005, 2007, 2009.*



The percentage of adults who engage 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, was higher in the state overall than the percentage reported for White Pine County during the years for which data was collected. Nevada met the Healthy People 2010 target of thirty percent.

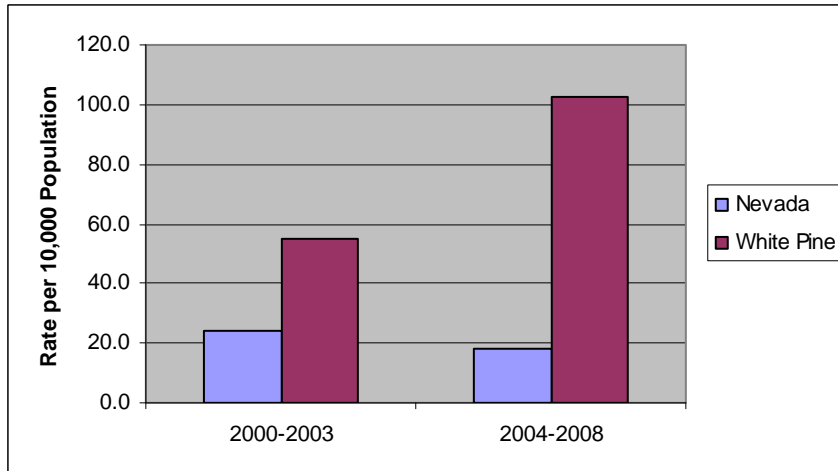
*These percentages are weighted to survey population characteristics. Not all counties were included in the survey results.

Respiratory Diseases

Healthy People 2010 Objective (24-2a.): Reduce hospitalizations for asthma in children under age 5 years.

Healthy People 2020 Objective RD HP2020-2.1: Reduce hospitalizations for asthma in children under age 5 years.

Aggregated Hospitalizations for Asthma in Children Under Age 5 Years, White Pine County and Nevada, 2000 - 2003 and 2004 - 2008.*



The rate of asthma hospitalizations for children, ages under 5 years, declined slightly in Nevada and almost doubled in White Pine County on average between 2000-2008.

For data from 2004-2008, White Pine County's rate was more than four times higher than the Healthy People 2010 target rate of 25 per 10,000 population.

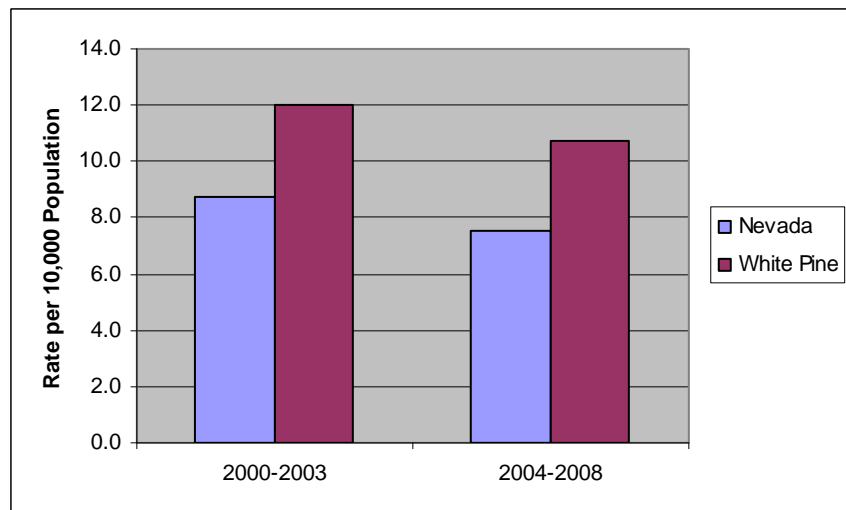
Healthy People 2010 Objective (24-2b.): Reduce hospitalizations for asthma in children and adults, aged 5 to 64 years.

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, White Pine County and Nevada, 2000 - 2003 and 2004 - 2008.*

The rate of asthma hospitalizations for children and adults, ages 5 to 64, decreased for both White Pine County and the state on average over the years 2000—2008.

From 2004-2008, the state met the Healthy People 2010 target rate of 7.7 per 10,000 population.

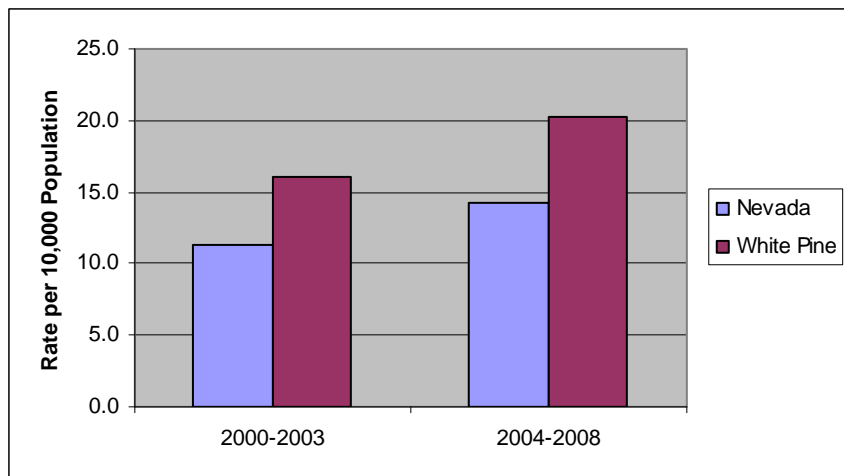


*The Nevada data are from Nevada Inpatient Hospital Discharge Database (NIHDD).

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, White Pine County and Nevada, 2000 - 2003 and 2004 - 2008.*



The rate of asthma hospitalizations for adults, ages 65 years and older, increased in both Nevada and White Pine County on average from 2000-2008.

For the most recent data from 2004-2008, neither Nevada nor White Pine County met the Healthy People 2010 target rate of 11.0 per 10,000 population.

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

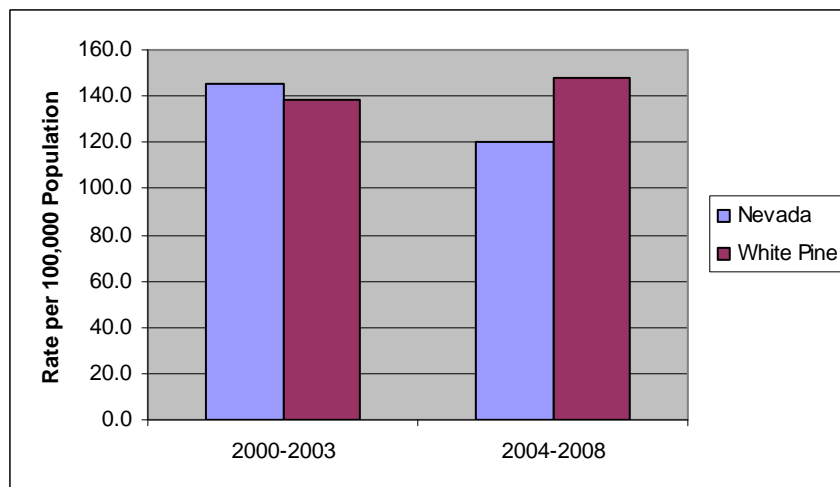
Healthy People 2010 Objective (24-10.): Reduce deaths from chronic obstructive pulmonary disease among adults.

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

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

The rate of chronic obstructive pulmonary disease (COPD) declined in the state and increased in White Pine County during the years 2000 to 2008.

Both the state and the county had rates at least twice as high as the Healthy People 2010 target rate of 62.3 per 100,000 population.



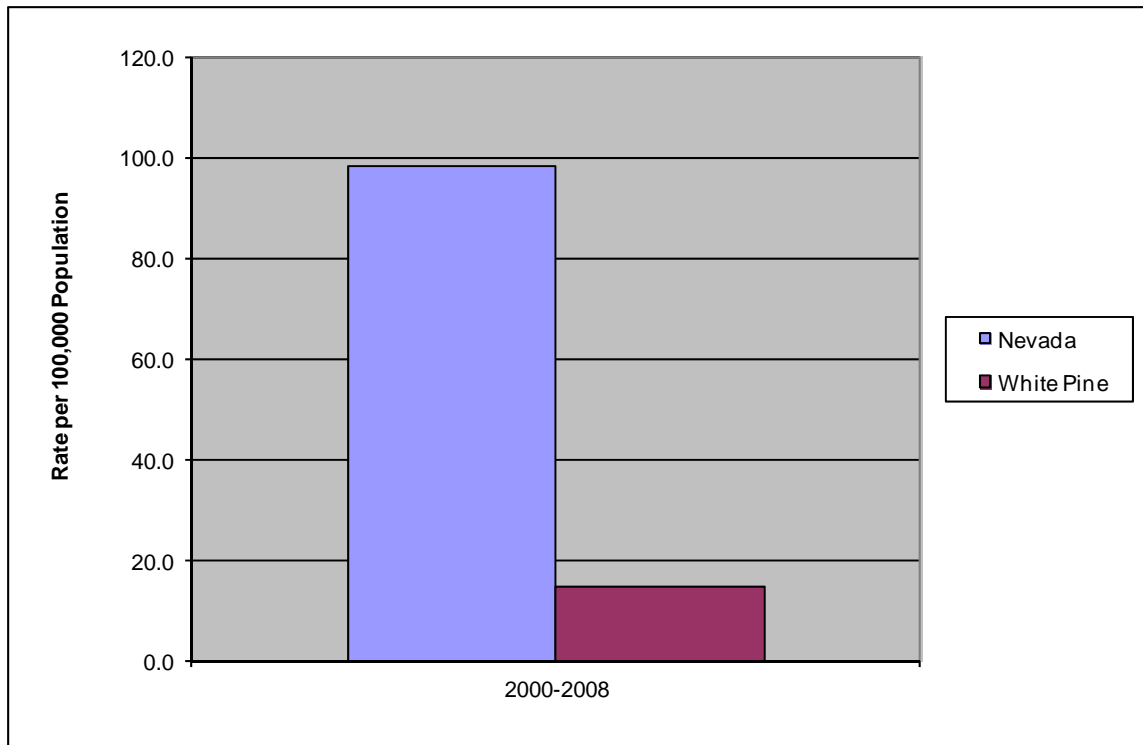
*These rates are age-adjusted to the 2000 U.S. standard population. The Nevada data are from Nevada Vital Statistics Records. Note: 2007 and 2008 data are not final and are subject to change.

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, White Pine County and Nevada, 2000 - 2008.*



On aggregate, during the years 2000 to 2008, the rate of gonorrhea in White Pine County was less than one-fifth of the state rate. White Pine County met the Healthy People 2010 target rate of 19.0 cases per 100,000 population.

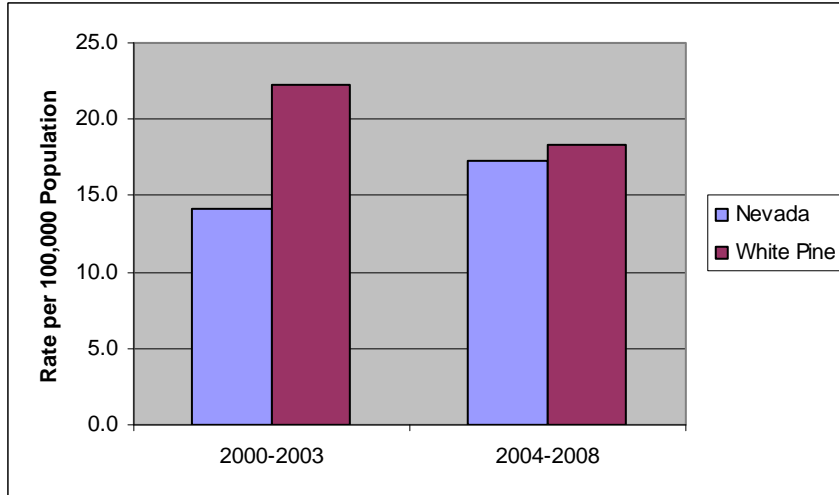
*Nevada data are provided by the STD-MIS database.

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, White Pine County and Nevada 2000—2003 and 2004 - 2008.*



The drug induced mortality rate increased in the state and declined in White Pine County during the years 2000—2008.

For the most recent data from 2004-2008, both the state and county rates were more than 13 times higher than 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.

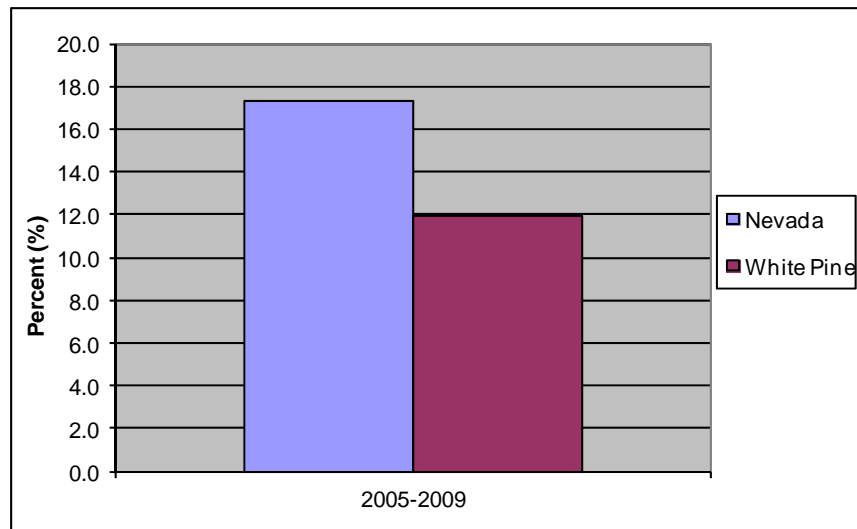
Healthy People 2010 Objective (26-11c.): Reduce the proportion of adults, aged 18 years and older, engaging in binge drinking of alcohol.

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, White Pine County and Nevada, BRFSS Data, 2005 - 2009.*

The percentage of adults, aged 18 years and older, engaging in the binge drinking of alcohol was higher in Nevada than in White Pine County on average from 2005—2009 according to Behavioral Risk Factor Surveillance System data.

White Pine County met the Healthy People 2010 target of less than 13.4 percent.



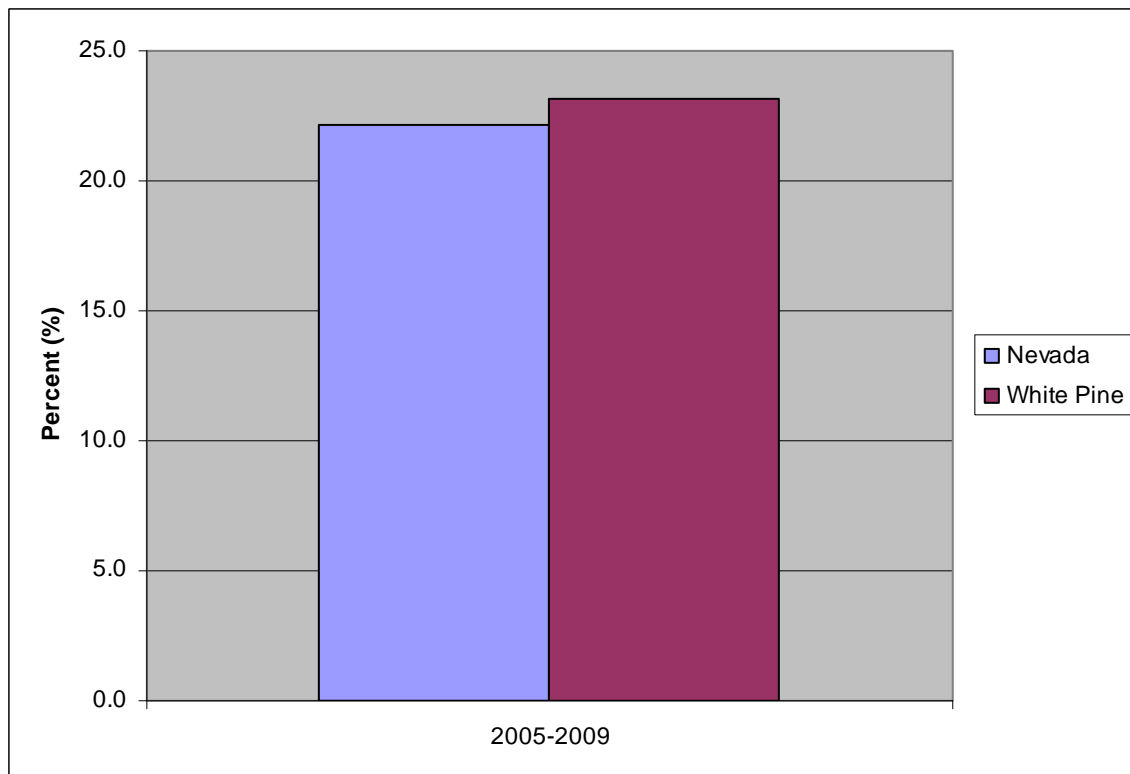
*These percentages are weighted to survey population characteristics. Not all counties were included in the survey results.

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, White Pine County and Nevada, BRFSS Data, 2005 - 2009.*



Per Behavioral Risk Factor Surveillance System data for the years 2005 to 2009, the proportion of cigarette smoking adults was slightly higher on aggregate in White Pine County than in Nevada. Neither the state nor the county met the Healthy People 2010 goal of twelve percent.

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

Healthy People 2010: White Pine County Indicator Exemptions

The following Healthy People 2010 objectives were not reported in the White Pine 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 10th grade reporting steroid use.
 - SA HP2020-9c: Proportion of adolescents in the 12th 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 White Pine County Report due to a lack of available data, counts of 0:

- Cancer (C):
 - C HP2020-4: Cervical cancer death rate.
- 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.
- Injury and Violence Prevention (IVP):
 - IVP HP2020-27: Death rate from drowning.
- Maternal, Infant, Child Health (MICH):
 - 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 White Pine 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 HP2020-8: 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 HP2020-5: Crude Rate of reported new cases of Tuberculosis.
 - IID HP2020-14: Reduce or eliminate cases of vaccine preventable diseases.
- Injury and Violence Prevention (IVP):
 - IVP HP2020-6: Pedestrian death rate on public roads.
- 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 HP2020-15e: Postneonatal death rate (between 28 days and 1 year of life).
 - MICH HP2020-15f: Reduce infant deaths related to birth defects.
 - 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.

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

- Cancer (C):
 - C HP2020-15a: Increase the proportion of adults who receive a colorectal cancer screening.
 - 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 examination.
- 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.