BANNOCK COUNTY CANCER PROFILE

A publication from the Cancer Data Registry of Idaho, Idaho Hospital Association.

Cancer Incidence 2017–2021
Cancer Mortality 2018–2022
BRFSS 2011–2022

CANCER

Cancer is a group of over 100 different diseases, each characterized by the uncontrolled growth and spread of abnormal cells. Cancer risk increases with age and varies by gender and race. As the average age of the population increases, the incidence of cancer will increase as well.

An estimated 42% of all cancers in the United States are due to personal lifestyle factors, such as smoking and sedentary lifestyle, and are preventable (10.3322/caac.21440). Cancers are also attributable to environmental factors and gene-environment interactions. Other non-modifiable factors, such as age, sex, and family history of specific cancers, are also associated with cancer risk and can help identify people at elevated risk for developing cancer.

For some cancers, early detection can save lives. For example, colorectal cancer screening reduces mortality in adults aged 50–75 years (10.1001/jama.2017.3332). Improved primary prevention, early detection, and effective treatment can reduce the burden of cancer in Idaho.

RISK FACTORS AND INTERVENTIONS

Aging:
As the population ages, the number of new cancer cases and cancer deaths that occur each year will continue to increase. This trend could be reversed through significant improvements in primary prevention, early detection, and treatment.

Smoking:

Smoking and the use of smokeless tobacco are responsible for most cancers of the lung, trachea, bronchus, larynx, pharynx, oral cavity, and esophagus. Smoking is the leading cause of preventable death in the United States (PMID: 24455788).

Diet:
The U.S. Departments of Agriculture and Health and Human Services recommend the following dietary guidelines: eat a variety of foods; choose a diet with plenty of fruits, vegetables, and whole-grain products; limit the use of sugar, salt, and solid fats; and minimize alcoholic beverage consumption. For details, see https://www.dietaryguidelines.gov

Screening:
Early detection through screening reduces morbidity and mortality for cancers that can be diagnosed early and treated.

FOR MORE INFORMATION

Cancer Data Registry of Idaho
P.O. Box 1278
Boise, ID 83701
208-489-1380
https://www.idcancer.org

National Cancer Institute
Cancer Information Services
1-800-4CANCER
https://www.cancer.gov/contact

American Cancer Society
https://www.cancer.org

CANCER INCIDENCE 2017–2021

Nearly one in two Idahoans are estimated to develop cancer during their lifetime. During 2017–2021, 47,333 cases of invasive cancer were diagnosed among Idaho residents, and 1,964 cases of invasive cancer were diagnosed among Bannock County residents (Table 1).

Table 1: Incidence of All Cancers, Female Breast, Prostate, Lung and Bronchus, and Colorectal Cancers in Bannock County and the State of Idaho, 2017–2021

Cancer Incidence 2017–2021	Bannock County	State of Idaho
All Sites/Types	**1,964**	**47,333**
Female Breast	**295**	**6,943**
Prostate	**238**	**6,766**
Lung & Bronchus	**199**	**4,959**
Colorectal	**153**	**3,632**

Table 3 (*Cancer Incidence 2017–2021, Comparison between Bannock County and the Remainder of the State of Idaho*) shows the number of observed cases, person-years, crude rates, age- and sex-adjusted rates, expected number of cases based upon age- and sex-specific rates in the remainder of Idaho, and p-values for tests comparing the number of observed and expected cases in Bannock County. The table also shows the number of observed cases, person-years, and crude rates for the remainder of the state of Idaho. Comparisons between the county and the remainder of the state were made for all cancers combined, 23 invasive cancer types, in situ breast cancer, non-malignant brain and other central nervous system tumors, and pediatric (0–19 years) cancer. Separate comparisons for males, females, and both sexes combined are included.

As shown in Table 3, the crude incidence rate of invasive cancer in Bannock County was 449.1 cases per 100,000 person-years per year during 2017–2021. Comparing this crude rate with the crude rate for the remainder of Idaho (530.3) gives an estimate of the relative burden of disease in Bannock County.

The age- and sex-adjusted incidence rate of invasive cancer in Bannock County, all sites combined, was 492.0 cases per 100,000 persons per year during 2017–2021. There were statistically significantly fewer cases of cancer in Bannock County (1,964) than expected (2,116.8) based upon rates in the remainder of the state ($p<.001$).

There are many reasons why cancer incidence rates differ by county, such as the prevalence of smoking and other lifestyle factors, and access to healthcare.

CANCER MORTALITY 2018–2022

During 2018–2022, cancer was the second leading cause of death in Idaho; 15,233 Idaho residents and 694 Bannock County residents died from cancer during this period. Most cancer deaths are from five primary sites: lung, colon, pancreas, female breast, and prostate (Table 2).

Table 2: Overall and Cancer Mortality in Bannock County and the State of Idaho, 2018–2022

Mortality 2018–2022	Bannock County	State of Idaho
All Deaths	**4,204**	**80,538**
Cancer Deaths	**694**	**15,233**
% of All Deaths	*16.5%*	*18.9%*
Lung & Bronchus	**130**	**2,937**
Colorectal	**61**	**1,332**
Pancreas	**60**	**1,190**
Female Breast	**51**	**1,111**
Prostate	**50**	**997**

Table 4 (*Cancer Mortality 2018–2022, Comparison between Bannock County and the Remainder of the State of Idaho*) shows the number of observed deaths, person-years, crude rates, age- and sex-adjusted rates, expected number of deaths based upon age- and sex-specific rates in the remainder of Idaho, and p-values for tests comparing the number of observed and expected deaths for Bannock County. The table also shows the number of observed deaths, person-years, and crude rates for the remainder of the state of Idaho. Comparisons between the county and the remainder of the state were made for all deaths, all cancer deaths, and 21 specific cancer types. Separate comparisons for males, females, and both sexes combined are included.

The age- and sex-adjusted cancer mortality rate for Bannock County, all sites combined, was 176.5 deaths per 100,000 persons per year during 2018–2022, compared with 165.8 for the remainder of the state. There were more cancer deaths in Bannock County (694) than expected (651.7) based upon rates in the remainder of the state, but the difference was not statistically significant.

Statistical Note: Rates and percentages based upon 12 or fewer cases or deaths (numerator) should be interpreted with caution.
Data Note: Mortality data may differ slightly from published official statistics from the Bureau of Vital Records and Health Statistics.

TABLE 3: CANCER INCIDENCE 2017–2021
COMPARISON BETWEEN BANNOCK COUNTY AND THE REMAINDER OF THE STATE OF IDAHO

Cancer Site/Type	Sex	Bannock County						Remainder of Idaho		
		Observed Cases	Person Years	Crude Rate (1)	A.A.I. Rate (1,2)	Expected Cases (3)	P-Value (4)	Observed Cases	Person Years	Crude Rate (1)
All Sites Combined	Total	1,964	437,298	449.1	492.0	2,116.8	0.001 <<	45,369	8,554,808	530.3
All Sites Combined	Male	1,034	217,900	474.5	525.8	1,109.8	0.022 <<	24,236	4,294,373	564.4
All Sites Combined	Female	930	219,398	423.9	459.4	1,004.1	0.019 <<	21,133	4,260,435	496.0
Bladder	Total	85	437,298	19.4	21.7	97.6	0.216	2,135	8,554,808	25.0
Bladder	Male	71	217,900	32.6	36.9	76.2	0.597	1,702	4,294,373	39.6
Bladder	Female	14	219,398	6.4	7.1	20.2	0.196	433	4,260,435	10.2
Brain - malignant	Total	36	437,298	8.2	8.8	29.8	0.301	621	8,554,808	7.3
Brain - malignant	Male	20	217,900	9.2	9.8	17.2	0.555	362	4,294,373	8.4
Brain - malignant	Female	16	219,398	7.3	7.7	12.6	0.402	259	4,260,435	6.1
Brain and other CNS - non-malignant	Total	42	437,298	9.6	10.4	70.9	0.000 <<	1,505	8,554,808	17.6
Brain and other CNS - non-malignant	Male	10	217,900	4.6	5.0	22.8	0.004 <<	490	4,294,373	11.4
Brain and other CNS - non-malignant	Female	32	219,398	14.6	15.7	48.4	0.016 <<	1,015	4,260,435	23.8
Breast	Total	299	437,298	68.4	74.6	314.3	0.404	6,709	8,554,808	78.4
Breast	Male	4	217,900	1.8	2.1	2.8	0.600	61	4,294,373	1.4
Breast	Female	295	219,398	134.5	145.8	315.7	0.255	6,648	4,260,435	156.0
Breast - in situ	Total	63	437,298	14.4	15.7	61.2	0.855	1,306	8,554,808	15.3
Breast - in situ	Male	-	217,900	-	-	0.2	1.000	4	4,294,373	0.1
Breast - in situ	Female	63	219,398	28.7	31.2	61.8	0.909	1,302	4,260,435	30.6
Cervix	Female	23	219,398	10.5	10.7	13.6	0.025 >>	271	4,260,435	6.4
Colorectal	Total	153	437,298	35.0	38.5	161.7	0.522	3,479	8,554,808	40.7
Colorectal	Male	77	217,900	35.3	39.3	86.7	0.322	1,900	4,294,373	44.2
Colorectal	Female	76	219,398	34.6	37.7	74.7	0.913	1,579	4,260,435	37.1
Corpus Uteri	Female	55	219,398	25.1	27.2	61.6	0.439	1,299	4,260,435	30.5
Esophagus	Total	25	437,298	5.7	6.3	22.2	0.609	482	8,554,808	5.6
Esophagus	Male	22	217,900	10.1	11.3	18.4	0.465	407	4,294,373	9.5
Esophagus	Female	3	219,398	1.4	1.5	3.5	1.000	75	4,260,435	1.8
Hodgkin Lymphoma	Total	14	437,298	3.2	3.2	10.6	0.363	208	8,554,808	2.4
Hodgkin Lymphoma	Male	7	217,900	3.2	3.3	6.1	0.818	122	4,294,373	2.8
Hodgkin Lymphoma	Female	7	219,398	3.2	3.2	4.5	0.329	86	4,260,435	2.0
Kidney and Renal Pelvis	Total	91	437,298	20.8	22.8	86.7	0.674	1,860	8,554,808	21.7
Kidney and Renal Pelvis	Male	69	217,900	31.7	35.0	57.0	0.133	1,241	4,294,373	28.9
Kidney and Renal Pelvis	Female	22	219,398	10.0	10.9	29.2	0.205	619	4,260,435	14.5
Larynx	Total	13	437,298	3.0	3.3	9.6	0.341	207	8,554,808	2.4
Larynx	Male	12	217,900	5.5	6.2	7.0	0.108	155	4,294,373	3.6
Larynx	Female	1	219,398	0.5	0.5	2.5	0.595	52	4,260,435	1.2
Leukemia	Total	67	437,298	15.3	16.8	77.6	0.250	1,660	8,554,808	19.4
Leukemia	Male	38	217,900	17.4	19.3	45.8	0.276	998	4,294,373	23.2
Leukemia	Female	29	219,398	13.2	14.4	31.4	0.759	662	4,260,435	15.5
Liver and Bile Duct	Total	40	437,298	9.1	10.0	37.4	0.711	803	8,554,808	9.4
Liver and Bile Duct	Male	25	217,900	11.5	12.6	26.2	0.912	569	4,294,373	13.2
Liver and Bile Duct	Female	15	219,398	6.8	7.5	11.0	0.290	234	4,260,435	5.5
Lung and Bronchus	Total	199	437,298	45.5	50.8	218.1	0.205	4,760	8,554,808	55.6
Lung and Bronchus	Male	100	217,900	45.9	51.7	107.9	0.480	2,395	4,294,373	55.8
Lung and Bronchus	Female	99	219,398	45.1	49.9	110.0	0.315	2,365	4,260,435	55.5
Melanoma of the Skin	Total	145	437,298	33.2	36.0	141.2	0.770	2,999	8,554,808	35.1
Melanoma of the Skin	Male	86	217,900	39.5	43.7	82.9	0.760	1,809	4,294,373	42.1
Melanoma of the Skin	Female	59	219,398	26.9	28.6	57.6	0.886	1,190	4,260,435	27.9
Myeloma	Total	26	437,298	5.9	6.6	32.3	0.304	702	8,554,808	8.2
Myeloma	Male	15	217,900	6.9	7.7	19.5	0.371	432	4,294,373	10.1
Myeloma	Female	11	219,398	5.0	5.5	12.7	0.776	270	4,260,435	6.3
Non-Hodgkin Lymphoma	Total	83	437,298	19.0	20.8	89.2	0.552	1,909	8,554,808	22.3
Non-Hodgkin Lymphoma	Male	55	217,900	25.2	27.7	50.5	0.558	1,091	4,294,373	25.4
Non-Hodgkin Lymphoma	Female	28	219,398	12.8	13.9	38.7	0.092	818	4,260,435	19.2
Oral Cavity and Pharynx	Total	48	437,298	11.0	12.0	59.0	0.165	1,267	8,554,808	14.8
Oral Cavity and Pharynx	Male	29	217,900	13.3	14.7	41.9	0.046 <<	911	4,294,373	21.2
Oral Cavity and Pharynx	Female	19	219,398	8.7	9.5	16.8	0.654	356	4,260,435	8.4
Ovary	Female	18	219,398	8.2	8.9	25.5	0.154	535	4,260,435	12.6
Pancreas	Total	68	437,298	15.6	17.3	65.3	0.774	1,420	8,554,808	16.6
Pancreas	Male	36	217,900	16.5	18.6	35.7	1.000	790	4,294,373	18.4
Pancreas	Female	32	219,398	14.6	16.1	29.4	0.680	630	4,260,435	14.8
Prostate	Male	238	217,900	109.2	120.7	299.6	0.000 <<	6,528	4,294,373	152.0
Stomach	Total	25	437,298	5.7	6.3	20.8	0.408	449	8,554,808	5.2
Stomach	Male	19	217,900	8.7	9.8	13.0	0.143	288	4,294,373	6.7
Stomach	Female	6	219,398	2.7	3.0	7.6	0.717	161	4,260,435	3.8
Testis	Male	14	217,900	6.4	6.2	13.7	1.000	260	4,294,373	6.1
Thyroid	Total	48	437,298	11.0	11.3	56.4	0.288	1,137	8,554,808	13.3
Thyroid	Male	18	217,900	8.3	8.8	16.9	0.855	354	4,294,373	8.2
Thyroid	Female	30	219,398	13.7	13.9	39.8	0.132	783	4,260,435	18.4
Pediatric Age 0 to 19	Total	20	126,235	15.8	15.8	21.6	0.836	405	2,373,089	17.1
Pediatric Age 0 to 19	Male	12	64,443	18.6	18.6	10.8	0.788	202	1,209,878	16.7
Pediatric Age 0 to 19	Female	8	61,792	12.9	12.9	10.8	0.496	203	1,163,211	17.5

Notes: 1. Rates are expressed as the number of cases per 100,000 persons per year (person-years).

2. Age and sex-adjusted incidence (A.A.I.) rates for county use age and sex-specific crude rates for the remainder of the state as standard.

3. Expected cases are based upon age and sex-specific rates for the remainder of the state of Idaho (compare to observed).

4. P-values compare observed and expected cases, are two tailed, based upon the Poisson probability distribution.

"<<" denotes significantly fewer cases observed than expected, ">>" denotes significantly more cases observed than expected (p=.05).

Statistical Note: Rates based upon 12 or fewer cases (numerator) should be interpreted with caution.

TABLE 4: CANCER MORTALITY 2018–2022
COMPARISON BETWEEN BANNOCK COUNTY AND THE REMAINDER OF THE STATE OF IDAHO

Cause of Death Cancer Site/Type	Sex	Bannock County						Remainder of Idaho		
		Observed Deaths	Person Years	Crude Rate (1)	A.A.M. Rate (1,2)	Expected Deaths (3)	P-Value (4)	Observed Deaths	Person Years	Crude Rate (1)
All Causes of Death	Total	4,204	441,244	952.8	1,070.9	3,416.8	0.000 >>	76,331	8,770,150	870.3
All Causes of Death	Male	2,200	220,232	998.9	1,136.3	1,782.9	0.000 >>	40,586	4,407,465	920.8
All Causes of Death	Female	2,004	221,012	906.7	1,010.6	1,624.7	0.000 >>	35,745	4,362,685	819.3
All Malignant Cancers	Total	694	441,244	157.3	176.5	651.7	0.104	14,539	8,770,150	165.8
All Malignant Cancers	Male	366	220,232	166.2	189.6	344.6	0.262	7,869	4,407,465	178.5
All Malignant Cancers	Female	328	221,012	148.4	164.6	304.7	0.193	6,670	4,362,685	152.9
Bladder	Total	14	441,244	3.2	3.6	20.7	0.160	471	8,770,150	5.4
Bladder	Male	10	220,232	4.5	5.3	15.5	0.189	365	4,407,465	8.3
Bladder	Female	4	221,012	1.8	2.0	4.8	0.962	106	4,362,685	2.4
Brain and Other Nervous System	Total	28	441,244	6.3	6.9	22.6	0.305	490	8,770,150	5.6
Brain and Other Nervous System	Male	13	220,232	5.9	6.5	12.6	0.979	276	4,407,465	6.3
Brain and Other Nervous System	Female	15	221,012	6.8	7.4	10.0	0.166	214	4,362,685	4.9
Breast	Total	52	441,244	11.8	13.2	48.3	0.628	1,072	8,770,150	12.2
Breast	Male	1	220,232	0.5	0.5	0.5	0.832	12	4,407,465	0.3
Breast	Female	51	221,012	23.1	25.5	48.6	0.768	1,060	4,362,685	24.3
Cervix	Female	7	221,012	3.2	3.3	3.9	0.198	81	4,362,685	1.9
Colorectal	Total	61	441,244	13.8	15.5	57.2	0.649	1,271	8,770,150	14.5
Colorectal	Male	32	220,232	14.5	16.4	31.0	0.902	700	4,407,465	15.9
Colorectal	Female	29	221,012	13.1	14.6	26.1	0.618	571	4,362,685	13.1
Corpus Uteri	Female	7	221,012	3.2	3.5	7.4	1.000	162	4,362,685	3.7
Esophagus	Total	12	441,244	2.7	3.0	20.2	0.071	449	8,770,150	5.1
Esophagus	Male	11	220,232	5.0	5.6	16.8	0.183	380	4,407,465	8.6
Esophagus	Female	1	221,012	0.5	0.5	3.2	0.356	69	4,362,685	1.6
Hodgkin Lymphoma	Total	3	441,244	0.7	0.7	1.0	0.166	22	8,770,150	0.3
Hodgkin Lymphoma	Male	1	220,232	0.5	0.5	0.6	0.887	13	4,407,465	0.3
Hodgkin Lymphoma	Female	2	221,012	0.9	1.0	0.4	0.134	9	4,362,685	0.2
Kidney	Total	18	441,244	4.1	4.6	16.4	0.765	368	8,770,150	4.2
Kidney	Male	12	220,232	5.4	6.2	10.3	0.669	234	4,407,465	5.3
Kidney	Female	6	221,012	2.7	3.0	6.1	1.000	134	4,362,685	3.1
Larynx	Total	8	441,244	1.8	2.0	3.1	0.027 >>	68	8,770,150	0.8
Larynx	Male	8	220,232	3.6	4.2	2.5	0.008 >>	57	4,407,465	1.3
Larynx	Female	-	221,012	-	-	0.5	1.000	11	4,362,685	0.3
Leukemia	Total	34	441,244	7.7	8.7	28.2	0.317	631	8,770,150	7.2
Leukemia	Male	20	220,232	9.1	10.4	16.5	0.442	377	4,407,465	8.6
Leukemia	Female	14	221,012	6.3	7.1	11.5	0.543	254	4,362,685	5.8
Liver and Bile Duct	Total	34	441,244	7.7	8.6	27.2	0.232	601	8,770,150	6.9
Liver and Bile Duct	Male	22	220,232	10.0	11.1	18.0	0.397	401	4,407,465	9.1
Liver and Bile Duct	Female	12	221,012	5.4	6.0	9.1	0.419	200	4,362,685	4.6
Lung and Bronchus	Total	130	441,244	29.5	33.2	125.4	0.701	2,807	8,770,150	32.0
Lung and Bronchus	Male	69	220,232	31.3	35.7	64.6	0.613	1,472	4,407,465	33.4
Lung and Bronchus	Female	61	221,012	27.6	30.8	60.6	0.991	1,335	4,362,685	30.6
Melanoma of the Skin	Total	11	441,244	2.5	2.8	13.1	0.685	290	8,770,150	3.3
Melanoma of the Skin	Male	5	220,232	2.3	2.6	8.6	0.287	195	4,407,465	4.4
Melanoma of the Skin	Female	6	221,012	2.7	3.0	4.4	0.561	95	4,362,685	2.2
Myeloma	Total	18	441,244	4.1	4.6	13.6	0.297	307	8,770,150	3.5
Myeloma	Male	10	220,232	4.5	5.2	7.7	0.501	178	4,407,465	4.0
Myeloma	Female	8	221,012	3.6	4.0	5.8	0.471	129	4,362,685	3.0
Non-Hodgkin Lymphoma	Total	22	441,244	5.0	5.6	24.3	0.736	546	8,770,150	6.2
Non-Hodgkin Lymphoma	Male	13	220,232	5.9	6.7	13.0	1.000	297	4,407,465	6.7
Non-Hodgkin Lymphoma	Female	9	221,012	4.1	4.6	11.3	0.622	249	4,362,685	5.7
Oral Cavity and Pharynx	Total	10	441,244	2.3	2.5	12.0	0.703	265	8,770,150	3.0
Oral Cavity and Pharynx	Male	7	220,232	3.2	3.6	8.2	0.844	185	4,407,465	4.2
Oral Cavity and Pharynx	Female	3	221,012	1.4	1.5	3.7	1.000	80	4,362,685	1.8
Ovary	Female	15	221,012	6.8	7.5	15.9	0.962	346	4,362,685	7.9
Pancreas	Total	60	441,244	13.6	15.2	50.8	0.224	1,130	8,770,150	12.9
Pancreas	Male	29	220,232	13.2	14.9	27.4	0.815	621	4,407,465	14.1
Pancreas	Female	31	221,012	14.0	15.6	23.2	0.139	509	4,362,685	11.7
Prostate	Male	50	220,232	22.7	26.7	40.2	0.151	947	4,407,465	21.5
Stomach	Total	9	441,244	2.0	2.3	8.4	0.916	185	8,770,150	2.1
Stomach	Male	7	220,232	3.2	3.6	4.9	0.440	112	4,407,465	2.5
Stomach	Female	2	221,012	0.9	1.0	3.4	0.674	73	4,362,685	1.7

Notes: 1. Rates are expressed as the number of cases per 100,000 persons per year (person-years).
2. Age and sex-adjusted mortality (A.A.M.) rates for county use age and sex-specific crude rates for the remainder of the state as standard.
3. Expected cases are based upon age and sex-specific rates for the remainder of the state of Idaho (compare to observed).
4. P-values compare observed and expected cases, are two tailed, based upon the Poisson probability distribution.
"<<" denotes significantly fewer cases observed than expected, ">>" denotes significantly more cases observed than expected (p=.05).

Statistical Notes: Rates based upon 12 or fewer cases (numerator) should be interpreted with caution.
Mortality statistics presented differ from BVRHS official statistics due to differences in methodology.

Data Source: Bureau of Vital Records and Health Statistics (BVRHS), Division of Public Health, Idaho Department of Health and Welfare, 2023.

Cancer Screening and Risk Factors

The Division of Public Health (DPH), Idaho Department of Health and Welfare, under a cooperative agreement with the Centers for Disease Control and Prevention, has conducted telephone Behavioral Risk Factor Surveys since 1984. These surveys are conducted with randomly selected adult Idahoans to measure population prevalences of risk factors for major causes of death in the U.S., including cancer. DPH provided Behavioral Risk Factor Surveillance System (BRFSS) data from 2011 through 2022 to CDRI staff, who performed the analyses reported in these *County Profiles*. Analysis weights were post-stratified to 2022 population estimates by age group, sex, and county, beginning with the BRFSS raked weights. Not all questions were asked in all years. Crude prevalence estimates are presented herein; a minimum of 50 respondents was required to generate county-level statistics. Results may differ from IDHW reports due to differences in methods. Cancer screening and risk factor measures were selected to assist in monitoring *Comprehensive Cancer Alliance for Idaho* (CCAI) objectives. Wald log-linear chi-square statistics were used to test for independence of the selected measures and other variables, such as age and race, taking the complex survey design into account.

Cancer Screening and Risk Factor Prevalence Estimates, 2011–2022

Measure	State of Idaho	HD 1	HD 2	HD 3	HD 4	HD 5	HD 6	HD 7	Bannock County
Access to Care									
Have Health Insurance, Age < 65 (2021–2022)	90.0%	89.3%	87.8%	86.4%	92.6%	87.2%	89.1%	92.6%	91.6%
Not See Doctor Due to Cost in Past Year (2020–2022)	10.4%	9.5%	11.0%	11.0%	10.2%	10.2%	10.4%	11.3%	11.6%
Cancer Screening									
Mammogram Past 2 Years, Age 40–74 (2014–2022, even years)	62.9%	61.0%	70.0%	60.3%	66.1%	58.9%	61.0%	62.5%	64.3%
Pap Test Past 3 Years, Cervix Intact Age 21–65 (2018, 2020)	71.1%	73.7%	73.6%	70.9%	72.9%	69.4%	69.3%	65.5%	78.9%
Colorectal Cancer Screening, Age 45–75 (2022)	63.3%	61.0%	62.5%	60.8%	67.2%	65.0%	60.4%	60.2%	62.8%
Tobacco Use									
Current Tobacco User (2020–2022)	22.1%	24.3%	20.4%	24.8%	21.3%	22.5%	22.6%	18.1%	23.9%
Other Cancer-Related									
Healthy Weight by Body Mass Index, Age 20+ (2020–2022)	30.0%	30.0%	30.1%	26.5%	33.7%	27.5%	26.7%	30.2%	30.0%
Any Physical Activity Besides Job Past 30 Days (2018–2022)	79.1%	79.0%	78.0%	75.4%	82.7%	75.2%	76.7%	81.0%	78.5%
Meet Physical Activity Guidelines (2011, 2013, 2015, 2017, 2019)	22.0%	22.8%	19.2%	20.0%	25.2%	19.5%	20.4%	20.3%	24.1%
Home Ever Tested for Radon (2016, 2018, 2020)	22.9%	30.8%	18.3%	16.9%	25.2%	20.1%	23.0%	21.0%	24.2%

Access to Care

Have Health Insurance – 2021–2022
Statewide, 90.0% of adults aged 18–64 reported having health care coverage. Health care coverage differed significantly by race/ethnicity, with 91.4% of white non-Hispanics, compared to 81.5% of Hispanics and 90.5% of Native Americans, having health insurance. Spanish-speaking respondents were significantly less likely to be insured (46.0%) than English-speaking respondents (90.5%). Health care coverage differed significantly by age of respondent, with 87.2% of persons aged 18–29, and 93.4% of persons aged 50–64, having health insurance. Health care coverage differed significantly by county, with a range of 64.8% in Idaho County to 95.9% in Shoshone County having health insurance.

Not See Doctor Due to Cost in Past Year – 2020–2022
Statewide, 10.4% of adults aged 18+ reported they needed to see a doctor but could not because of cost sometime in the past 12 months. Inability to see a doctor due to cost differed significantly by race/ethnicity (9.2% of white non-Hispanics, 16.9% of Hispanics, and 15.7% of Native Americans). Inability to see a doctor due to cost differed significantly by annual household income (21.9% for less than $15,000, 5.8% for greater than $50,000).

Cancer Screening

Mammogram – 2014–2022, even years
Statewide, 62.9% of women aged 40–74 reported having a mammogram in the past 2 years. Insured women were about twice as likely to have had a mammogram in the past 2 years (66.3% versus 31.2%). Mammography rates differed significantly by county, with a range in screening of 41.6% in Owyhee County to 76.1% in Nez Perce County. In 2022, Idaho ranked 49th among states and the District of Columbia for mammography screening rates among women aged 40+.

Pap Test – 2018, 2020
Statewide, 71.1% of women with an intact cervix and aged 21–65 reported having a Pap test in the past 3 years. Women with health insurance were significantly more likely to have timely Pap screening than uninsured women (75.0% versus 52.8% screened in the past 3 years). Pap screening differed significantly by county, with a range of 50.6% in Bingham County to 78.9% in Bannock County. In 2020, Idaho ranked 49th among states and the District of Columbia for Pap screening rate.

Colorectal Cancer Screening – 2022
Statewide, 63.3% of adults aged 45–75 reported being current for colorectal cancer screening.** Persons with health insurance were over twice as likely to be current for colorectal cancer screening. In 2022, Idaho ranked 42nd among states and the District of Columbia in the percentage of adults aged 45–75 and older who reported being up-to-date for colorectal cancer screening.

** Current for colorectal cancer screening means a blood stool test in the past year, sigmoidoscopy in the past 5 years and blood stool test in the past 3 years, blood stool DNA test in the past 3 years, virtual colonoscopy in the past 5 years, or a colonoscopy in the past 10 years.

Cancer Screening and Risk Factors

Tobacco Use

Current Tobacco Use – 2020–2022
Current tobacco use includes at least 1 form of cigarettes; cigars, cigarillos, filtered little cigars; regular pipes, water pipes, hookah; e-cigarettes; and/or smokeless tobacco products every day or some days. Statewide, 22.1% of adults aged 18 and older were current tobacco users. Tobacco use differed significantly by age of respondent, with 28.9% of persons aged 18–29, and 10.7% of persons aged 65 and older reporting current tobacco use. Tobacco use was lower among white non-Hispanics (21.5%) than among Native Americans (38.0%). Tobacco use differed significantly by county, with a range of 6.1% in Madison County to 33.5% in Elmore County. Counties with higher rates of tobacco use had significantly higher rates of lung cancer.

Other Cancer-Related

Healthy Weight by Body Mass Index – 2020–2022
Statewide, 30.0% of adults aged 20 and older were in the healthy weight range as measured by body mass index (BMI 18.5–24.9). BMI differed significantly by race/ethnicity, with 30.5% of white non-Hispanics, compared to 25.8% of Hispanics and 21.5% of Native Americans, being in the healthy weight range. Males (24.4%) were significantly less likely to be in the healthy weight range than females (35.7%). BMI differed significantly by age of respondent, with 41.1% of persons aged 18–29, and 23.4% of persons aged 50–64, being in the healthy weight range. BMI differed significantly by county, with a range of 11.7% in Power County to 44.3% in Blaine County of adults being in the healthy weight range.

Any Physical Activity – 2018-2022
CCAI is measuring physical activity with two metrics: Any physical activity besides job in past 30 days and meeting aerobic and strength physical activity guidelines during the past month or week. Statewide, 79.1% of adults aged 18 and older reported physical activity besides their job in the past 30 days. Physical activity differed significantly by age of respondent, with 83.7% of persons aged 18–29, and 72.5% of persons aged 65+, reporting any physical activity besides their job. The percentage of adults reporting any physical activity differed significantly by county, with a range of 66.9% in Oneida County to 88.3% in Teton County. Counties with higher rates of physical activity had significantly lower rates of overall and colorectal cancer.

Physical Activity Guidelines – 2011, 2013, 2015, 2017, 2019
Statewide, 22.0% of adults aged 18 and older met aerobic and strength physical activity guidelines during the past month or week. Meeting physical activity guidelines differed significantly by age of respondent, with 26.2% of persons aged 18–29, and 19.2% of persons aged 50–64, meeting guidelines. The percentage of adults meeting physical activity guidelines differed significantly by county, with a range of 9.5% in Franklin County to 30.7% in Blaine County.

Home Radon Testing – 2016, 2018, 2020
Statewide, 22.9% of adults have ever tested their house for radon. Radon test usage varied significantly by race/ethnicity, with 25.1% of white non-Hispanics, 7.3% of Hispanics, and 25.4% of Native Americans having ever tested their house for radon. Radon test usage was higher for persons aged 50+ than for younger persons. Home radon testing differed significantly by county, with a range of 8.7% in Cassia County to 54.7% in Blaine County.

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CDRI Cancer Data Registry of Idaho

Idaho Hospital Association