

# LATAH 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 855 cases of invasive cancer were diagnosed among Latah County residents (Table 1).

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

Cancer Incidence 2017–2021	Latah County	State of Idaho
All Sites/Types	855	47,333
Female Breast	133	6,943
Prostate	153	6,766
Lung & Bronchus	93	4,959
Colorectal	48	3,632

Table 3 (*Cancer Incidence 2017–2021, Comparison between Latah 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 Latah 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 Latah County was 424.3 cases per 100,000 person-years per year during 2017–2021. Comparing this crude rate with the crude rate for the remainder of Idaho (528.7) gives an estimate of the relative burden of disease in Latah County.

The age- and sex-adjusted incidence rate of invasive cancer in Latah County, all sites combined, was 491.6 cases per 100,000 persons per year during 2017–2021. There were statistically significantly fewer cases of cancer in Latah County (855) than expected (919.5) based upon rates in the remainder of the state ( $p=.033$ ).

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 285 Latah 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 Latah County and the State of Idaho, 2018–2022

Mortality 2018–2022	Latah County	State of Idaho
All Deaths	1,273	80,538
Cancer Deaths	285	15,233
% of All Deaths	22.4%	18.9%
Lung & Bronchus	47	2,937
Colorectal	18	1,332
Pancreas	26	1,190
Female Breast	22	1,111
Prostate	20	997

Table 4 (*Cancer Mortality 2018–2022, Comparison between Latah 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 Latah 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 Latah County, all sites combined, was 161.0 deaths per 100,000 persons per year during 2018–2022, compared with 165.9 for the remainder of the state. There were fewer cancer deaths in Latah County (285) than expected (293.7) 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 LATAH COUNTY AND THE REMAINDER OF THE STATE OF IDAHO**

Cancer Site/Type	Sex	Latah 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	855	201,498	424.3	491.6	919.5	0.033 <<	46,478	8,790,608	528.7
All Sites Combined	Male	462	102,780	449.5	524.2	495.9	0.131	24,808	4,409,493	562.6
All Sites Combined	Female	393	98,718	398.1	457.3	425.1	0.123	21,670	4,381,115	494.6
Bladder	Total	36	201,498	17.9	20.8	43.0	0.323	2,184	8,790,608	24.8
Bladder	Male	28	102,780	27.2	31.9	34.7	0.289	1,745	4,409,493	39.6
Bladder	Female	8	98,718	8.1	9.3	8.6	1.000	439	4,381,115	10.0
Brain - malignant	Total	17	201,498	8.4	9.4	13.2	0.352	640	8,790,608	7.3
Brain - malignant	Male	11	102,780	10.7	12.0	7.7	0.312	371	4,409,493	8.4
Brain - malignant	Female	6	98,718	6.1	6.7	5.5	0.942	269	4,381,115	6.1
Brain and other CNS - non-malignant	Total	33	201,498	16.4	18.8	30.2	0.659	1,514	8,790,608	17.2
Brain and other CNS - non-malignant	Male	9	102,780	8.8	10.1	9.9	0.931	491	4,409,493	11.1
Brain and other CNS - non-malignant	Female	24	98,718	24.3	27.8	20.2	0.446	1,023	4,381,115	23.4
Breast	Total	133	201,498	66.0	77.9	133.5	1.000	6,875	8,790,608	78.2
Breast	Male	-	102,780	-	-	1.3	0.553	65	4,409,493	1.5
Breast	Female	133	98,718	134.7	158.0	130.8	0.871	6,810	4,381,115	155.4
Breast - in situ	Total	37	201,498	18.4	21.9	25.6	0.040 >>	1,332	8,790,608	15.2
Breast - in situ	Male	1	102,780	1.0	1.2	0.1	0.112	3	4,409,493	0.1
Breast - in situ	Female	36	98,718	36.5	43.2	25.3	0.051	1,329	4,381,115	30.3
Cervix	Female	5	98,718	5.1	5.8	5.7	0.991	289	4,381,115	6.6
Colorectal	Total	48	201,498	23.8	27.7	70.6	0.006 <<	3,584	8,790,608	40.8
Colorectal	Male	28	102,780	27.2	32.1	38.5	0.097	1,949	4,409,493	44.2
Colorectal	Female	20	98,718	20.3	23.2	32.1	0.030 <<	1,635	4,381,115	37.3
Corpus Uteri	Female	25	98,718	25.3	29.6	25.6	1.000	1,329	4,381,115	30.3
Esophagus	Total	14	201,498	6.9	8.1	9.6	0.221	493	8,790,608	5.6
Esophagus	Male	12	102,780	11.7	13.8	8.2	0.260	417	4,409,493	9.5
Esophagus	Female	2	98,718	2.0	2.3	1.5	0.869	76	4,381,115	1.7
Hodgkin Lymphoma	Total	2	201,498	1.0	0.9	5.8	0.138	220	8,790,608	2.5
Hodgkin Lymphoma	Male	1	102,780	1.0	0.9	3.3	0.324	128	4,409,493	2.9
Hodgkin Lymphoma	Female	1	98,718	1.0	0.8	2.6	0.542	92	4,381,115	2.1
Kidney and Renal Pelvis	Total	30	201,498	14.9	17.5	37.4	0.255	1,921	8,790,608	21.9
Kidney and Renal Pelvis	Male	22	102,780	21.4	25.4	25.3	0.590	1,288	4,409,493	29.2
Kidney and Renal Pelvis	Female	8	98,718	8.1	9.5	12.2	0.281	633	4,381,115	14.4
Larynx	Total	2	201,498	1.0	1.2	4.3	0.398	218	8,790,608	2.5
Larynx	Male	1	102,780	1.0	1.2	3.3	0.324	166	4,409,493	3.8
Larynx	Female	1	98,718	1.0	1.1	1.0	1.000	52	4,381,115	1.2
Leukemia	Total	25	201,498	12.4	14.3	33.8	0.144	1,702	8,790,608	19.4
Leukemia	Male	11	102,780	10.7	12.5	20.5	0.034 <<	1,025	4,409,493	23.2
Leukemia	Female	14	98,718	14.2	16.1	13.4	0.941	677	4,381,115	15.5
Liver and Bile Duct	Total	12	201,498	6.0	7.0	16.3	0.351	831	8,790,608	9.5
Liver and Bile Duct	Male	11	102,780	10.7	12.6	11.5	1.000	583	4,409,493	13.2
Liver and Bile Duct	Female	1	98,718	1.0	1.2	4.8	0.092	248	4,381,115	5.7
Lung and Bronchus	Total	93	201,498	46.2	54.0	95.3	0.870	4,866	8,790,608	55.4
Lung and Bronchus	Male	43	102,780	41.8	49.1	48.7	0.464	2,452	4,409,493	55.6
Lung and Bronchus	Female	50	98,718	50.6	59.1	46.6	0.661	2,414	4,381,115	55.1
Melanoma of the Skin	Total	46	201,498	22.8	26.3	61.7	0.045 <<	3,098	8,790,608	35.2
Melanoma of the Skin	Male	25	102,780	24.3	28.4	37.4	0.042 <<	1,870	4,409,493	42.4
Melanoma of the Skin	Female	21	98,718	21.3	24.1	24.5	0.565	1,228	4,381,115	28.0
Myeloma	Total	13	201,498	6.5	7.6	14.0	0.937	715	8,790,608	8.1
Myeloma	Male	10	102,780	9.7	11.5	8.6	0.723	437	4,409,493	9.9
Myeloma	Female	3	98,718	3.0	3.5	5.4	0.435	278	4,381,115	6.3
Non-Hodgkin Lymphoma	Total	40	201,498	19.9	22.7	39.1	0.931	1,952	8,790,608	22.2
Non-Hodgkin Lymphoma	Male	25	102,780	24.3	28.0	22.7	0.685	1,121	4,409,493	25.4
Non-Hodgkin Lymphoma	Female	15	98,718	15.2	17.2	16.5	0.832	831	4,381,115	19.0
Oral Cavity and Pharynx	Total	29	201,498	14.4	16.9	25.1	0.487	1,286	8,790,608	14.6
Oral Cavity and Pharynx	Male	24	102,780	23.4	27.7	18.0	0.201	916	4,409,493	20.8
Oral Cavity and Pharynx	Female	5	98,718	5.1	5.9	7.2	0.549	370	4,381,115	8.4
Ovary	Female	7	98,718	7.1	8.1	10.8	0.310	546	4,381,115	12.5
Pancreas	Total	29	201,498	14.4	16.8	28.7	1.000	1,459	8,790,608	16.6
Pancreas	Male	13	102,780	12.6	14.8	16.1	0.526	813	4,409,493	18.4
Pancreas	Female	16	98,718	16.2	18.7	12.6	0.409	646	4,381,115	14.7
Prostate	Male	153	102,780	148.9	175.3	130.9	0.063	6,613	4,409,493	150.0
Stomach	Total	7	201,498	3.5	4.0	9.2	0.601	467	8,790,608	5.3
Stomach	Male	6	102,780	5.8	6.9	5.9	1.000	301	4,409,493	6.8
Stomach	Female	1	98,718	1.0	1.2	3.3	0.321	166	4,381,115	3.8
Testis	Male	4	102,780	3.9	3.4	7.2	0.306	270	4,409,493	6.1
Thyroid	Total	19	201,498	9.4	9.9	25.5	0.230	1,166	8,790,608	13.3
Thyroid	Male	4	102,780	3.9	4.4	7.5	0.258	368	4,409,493	8.3
Thyroid	Female	15	98,718	15.2	15.4	17.7	0.618	798	4,381,115	18.2
Pediatric Age 0 to 19	Total	5	49,735	10.1	9.6	8.9	0.240	420	2,449,589	17.1
Pediatric Age 0 to 19	Male	4	25,061	16.0	15.8	4.3	1.000	210	1,249,260	16.8
Pediatric Age 0 to 19	Female	1	24,674	4.1	3.8	4.7	0.107	210	1,200,329	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 LATAH COUNTY AND THE REMAINDER OF THE STATE OF IDAHO**

Cause of Death Cancer Site/Type	Sex	Latah 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	1,273	202,573	628.4	693.2	1,615.8	0.000 <<	79,262	9,008,821	879.8
All Causes of Death	Male	667	103,314	645.6	721.0	861.3	0.000 <<	42,119	4,524,383	930.9
All Causes of Death	Female	606	99,259	610.5	662.4	757.8	0.000 <<	37,143	4,484,438	828.3
All Malignant Cancers	Total	285	202,573	140.7	161.0	293.7	0.636	14,948	9,008,821	165.9
All Malignant Cancers	Male	153	103,314	148.1	170.7	160.1	0.607	8,082	4,524,383	178.6
All Malignant Cancers	Female	132	99,259	133.0	150.9	133.9	0.915	6,866	4,484,438	153.1
Bladder	Total	9	202,573	4.4	5.0	9.6	1.000	476	9,008,821	5.3
Bladder	Male	8	103,314	7.7	8.8	7.4	0.920	367	4,524,383	8.1
Bladder	Female	1	99,259	1.0	1.1	2.2	0.717	109	4,484,438	2.4
Brain and Other Nervous System	Total	13	202,573	6.4	7.3	10.0	0.413	505	9,008,821	5.6
Brain and Other Nervous System	Male	6	103,314	5.8	6.5	5.7	1.000	283	4,524,383	6.3
Brain and Other Nervous System	Female	7	99,259	7.1	8.1	4.3	0.285	222	4,484,438	5.0
Breast	Total	22	202,573	10.9	12.4	21.6	0.996	1,102	9,008,821	12.2
Breast	Male	-	103,314	-	-	0.3	1.000	13	4,524,383	0.3
Breast	Female	22	99,259	22.2	25.1	21.3	0.931	1,089	4,484,438	24.3
Cervix	Female	-	99,259	-	-	1.7	0.357	88	4,484,438	2.0
Colorectal	Total	18	202,573	8.9	10.2	25.7	0.145	1,314	9,008,821	14.6
Colorectal	Male	8	103,314	7.7	9.1	14.1	0.116	724	4,524,383	16.0
Colorectal	Female	10	99,259	10.1	11.4	11.6	0.783	590	4,484,438	13.2
Corpus Uteri	Female	6	99,259	6.0	6.9	3.1	0.197	163	4,484,438	3.6
Esophagus	Total	14	202,573	6.9	8.0	8.6	0.115	447	9,008,821	5.0
Esophagus	Male	12	103,314	11.6	13.6	7.4	0.149	379	4,524,383	8.4
Esophagus	Female	2	99,259	2.0	2.3	1.3	0.753	68	4,484,438	1.5
Hodgkin Lymphoma	Total	-	202,573	-	-	0.5	1.000	25	9,008,821	0.3
Hodgkin Lymphoma	Male	-	103,314	-	-	0.3	1.000	14	4,524,383	0.3
Hodgkin Lymphoma	Female	-	99,259	-	-	0.2	1.000	11	4,484,438	0.2
Kidney	Total	5	202,573	2.5	2.8	7.5	0.483	381	9,008,821	4.2
Kidney	Male	4	103,314	3.9	4.5	4.8	0.960	242	4,524,383	5.3
Kidney	Female	1	99,259	1.0	1.1	2.7	0.483	139	4,484,438	3.1
Larynx	Total	-	202,573	-	-	1.5	0.460	76	9,008,821	0.8
Larynx	Male	-	103,314	-	-	1.3	0.557	65	4,524,383	1.4
Larynx	Female	-	99,259	-	-	0.2	1.000	11	4,484,438	0.2
Leukemia	Total	16	202,573	7.9	9.0	12.8	0.442	649	9,008,821	7.2
Leukemia	Male	8	103,314	7.7	8.9	7.8	1.000	389	4,524,383	8.6
Leukemia	Female	8	99,259	8.1	9.1	5.1	0.290	260	4,484,438	5.8
Liver and Bile Duct	Total	16	202,573	7.9	9.2	12.0	0.313	619	9,008,821	6.9
Liver and Bile Duct	Male	12	103,314	11.6	13.5	8.1	0.235	411	4,524,383	9.1
Liver and Bile Duct	Female	4	99,259	4.0	4.7	4.0	1.000	208	4,484,438	4.6
Lung and Bronchus	Total	47	202,573	23.2	26.8	56.3	0.235	2,890	9,008,821	32.1
Lung and Bronchus	Male	23	103,314	22.3	25.8	29.9	0.236	1,518	4,524,383	33.6
Lung and Bronchus	Female	24	99,259	24.2	27.7	26.5	0.720	1,372	4,484,438	30.6
Melanoma of the Skin	Total	9	202,573	4.4	5.1	5.7	0.252	292	9,008,821	3.2
Melanoma of the Skin	Male	4	103,314	3.9	4.5	3.8	1.000	196	4,524,383	4.3
Melanoma of the Skin	Female	5	99,259	5.0	5.6	1.9	0.089	96	4,484,438	2.1
Myeloma	Total	4	202,573	2.0	2.3	6.3	0.495	321	9,008,821	3.6
Myeloma	Male	1	103,314	1.0	1.1	3.7	0.230	187	4,524,383	4.1
Myeloma	Female	3	99,259	3.0	3.5	2.6	0.956	134	4,484,438	3.0
Non-Hodgkin Lymphoma	Total	12	202,573	5.9	6.8	11.0	0.834	556	9,008,821	6.2
Non-Hodgkin Lymphoma	Male	7	103,314	6.8	7.8	6.0	0.796	303	4,524,383	6.7
Non-Hodgkin Lymphoma	Female	5	99,259	5.0	5.7	5.0	1.000	253	4,484,438	5.6
Oral Cavity and Pharynx	Total	4	202,573	2.0	2.3	5.3	0.789	271	9,008,821	3.0
Oral Cavity and Pharynx	Male	4	103,314	3.9	4.5	3.7	1.000	188	4,524,383	4.2
Oral Cavity and Pharynx	Female	-	99,259	-	-	1.6	0.404	83	4,484,438	1.9
Ovary	Female	5	99,259	5.0	5.8	6.8	0.641	356	4,484,438	7.9
Pancreas	Total	26	202,573	12.8	14.8	22.6	0.534	1,164	9,008,821	12.9
Pancreas	Male	13	103,314	12.6	14.6	12.5	0.963	637	4,524,383	14.1
Pancreas	Female	13	99,259	13.1	15.0	10.2	0.456	527	4,484,438	11.8
Prostate	Male	20	103,314	19.4	22.0	19.6	0.996	977	4,524,383	21.6
Stomach	Total	4	202,573	2.0	2.3	3.7	1.000	190	9,008,821	2.1
Stomach	Male	3	103,314	2.9	3.4	2.3	0.794	116	4,524,383	2.6
Stomach	Female	1	99,259	1.0	1.2	1.4	1.000	74	4,484,438	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	Latah County
<u>Access to Care</u>									
Have Health Insurance, Age < 65 (2021–2022)	90.0%	89.3%	87.8%	86.4%	92.6%	87.2%	89.1%	92.6%	91.9%
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%	9.8%
<u>Cancer Screening</u>									
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%	70.8%
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%	76.2%
Colorectal Cancer Screening, Age 45–75 (2022)	63.3%	61.0%	62.5%	60.8%	67.2%	65.0%	60.4%	60.2%	59.5%
<u>Tobacco Use</u>									
Current Tobacco User (2020–2022)	22.1%	24.3%	20.4%	24.8%	21.3%	22.5%	22.6%	18.1%	21.1%
<u>Other Cancer-Related</u>									
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%	35.1%
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%	85.2%
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%	23.3%
Home Ever Tested for Radon (2016, 2018, 2020)	22.9%	30.8%	18.3%	16.9%	25.2%	20.1%	23.0%	21.0%	21.0%

#### 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).

\*\* 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

##### 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 49<sup>th</sup> 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 49<sup>th</sup> 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 42<sup>nd</sup> 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.

## 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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