POWER 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

RISK FACTORS AND INTERVENTIONS

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 geneenvironment 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.

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 <u>https://www.dietaryguidelines.gov</u>

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 179 cases of invasive cancer were diagnosed among Power County residents (Table 1).

Table 1: Incidence of All Cancers, Female Breast, Prostate,

 Lung and Bronchus, and Colorectal Cancers in Power

 County and the State of Idaho. 2017–2021

Cancer Incidence 2017–2021	Power County	State of Idaho			
All Sites/Types	179	47,333			
Female Breast	23	6,943			
Prostate	27	6,766			
Lung & Bronchus	21	4,959			
Colorectal	22	3,632			

Table 3 (*Cancer Incidence 2017–2021, Comparison between Power 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 Power County. The table also shows the number of observed cases, person-

During 2018–2022, cancer was the second leading cause of death in Idaho; 15,233 Idaho residents and 62 Power 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 Power County and the State of Idaho, 2018–2022

Mortality 2018–2022	Power County	State of Idaho				
All Deaths	348	80,538				
Cancer Deaths	62	15,233				
% of All Deaths	17.8%	18.9%				
Lung & Bronchus	11	2,937				
Colorectal	7	1,332				
Pancreas	4	1,190				
Female Breast	5	1,111				
Prostate	4	997				

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 Power County was 465.2 cases per 100,000 person-years per year during 2017–2021. Comparing this crude rate with the crude rate for the remainder of Idaho (526.6) gives an estimate of the relative burden of disease in Power County.

The age- and sex-adjusted incidence rate of invasive cancer in Power County, all sites combined, was 475.7 cases per 100,000 persons per year during 2017–2021. There were fewer cases of cancer in Power County (179) than expected (198.2) based upon rates in the remainder of the state, but the difference was not statistically significant.

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

Table 4 (*Cancer Mortality 2018–2022, Comparison between Power 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 Power 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 Power County, all sites combined, was 159.8 deaths per 100,000 persons per year during 2018–2022, compared with 165.4 for the remainder of the state. There were fewer cancer deaths in Power County (62) than expected (64.2) 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 2017–2021COMPARISON BETWEEN POWER COUNTY AND THE REMAINDER OF THE STATE OF IDAHO

			Po		Remainder of Idaho					
Cancer		Observed	Person	Crude	A.A.I.	Expected		Observed	Person	Crude
Site/Type	Sex	Cases	Years	Rate (1)	Rate (1,2)	Cases (3)	P-Value (4)	Cases	Years	Rate (1)
All Sites Combined	Total	179	38,479	465.2	475.7	198.2	0.182	47,154	8,953,627	526.6
All Sites Combined	Male	96	19,513	492.0	489.7	109.8	0.199	25,174	4,492,760	560.3
All Sites Combined	Female	83	18,966	437.6	458.2	89.3	0.550	21,980	4,460,867	492.7
Bladder	Total	5	38,479	13.0	13.1	9.5	0.179	2,215	8,953,627	24.7
Bladder Bladder	Male Female	4	19,513 18,966	20.5 5.3	20.1 5.4	7.8 1.8	0.220 0.899	1,769 446	4,492,760 4,460,867	39.4 10.0
Brain - malignant	Total		38,479	2.6	2.6	2.8	0.899	440 656	8,953,627	7.3
Brain - malignant	Male	- '	19,513	-	-	1.6	0.388	382	4,492,760	8.5
Brain - malignant	Female	1	18,966	5.3	5.4	1.1	1.000	274	4,460,867	6.1
Brain and other CNS - non-malignant	Total	8	38,479	20.8	21.4	6.4	0.634	1,539	8,953,627	17.2
- 5	Male	3	19,513	15.4	15.6	2.1	0.719	497	4,492,760	11.1
Brain and other CNS - non-malignant Breast	Female Total	5 23	18,966 38,479	26.4 59.8	27.6 62.2	4.2 28.8	0.834 0.319	1,042 6,985	4,460,867 8,953,627	23.4 78.0
Breast	Male	23	30,479 19,513	59.6	02.2	20.0	1.000	0,965	4,492,760	1.4
Breast	Female	23	18,966	121.3	128.4	27.8	0.421	6,920	4,460,867	155.1
Breast - in situ	Total	5	38,479	13.0	13.6	5.6	1.000	1,364	8,953,627	15.2
Breast - in situ	Male	-	19,513	-	-	0.0	1.000	4	4,492,760	0.1
Breast - in situ	Female	5	18,966	26.4	28.1	5.4	1.000	1,360	4,460,867	30.5
Cervix	Female	1	18,966	5.3	5.8	1.1	1.000	293	4,460,867	6.6
Colorectal Colorectal	Total Male	22 15	38,479 19,513	57.2 76.9	58.6 77.1	15.1 8.5	0.115 0.055	3,610 1,962	8,953,627 4,492,760	40.3 43.7
Colorectal	Female	7	18,966	36.9	38.5	6.7	1.000	1,648	4,492,700	36.9
Corpus Uteri	Female	6	18,966	31.6	33.2	5.5	0.927	1,348	4,460,867	30.3
Esophagus	Total	2	38,479	5.2	5.2	2.2	1.000	505	8,953,627	5.6
Esophagus	Male	2	19,513	10.2	10.1	1.9	1.000	427	4,492,760	9.5
Esophagus	Female	-	18,966	-	-	0.3	1.000	78	4,460,867	1.7
Hodgkin Lymphoma	Total	1	38,479	2.6	2.7	0.9	1.000	221	8,953,627	2.5
Hodgkin Lymphoma Hodgkin Lymphoma	Male Female	1	19,513 18,966	5.1	5.3	0.5 0.4	0.828 1.000	128 93	4,492,760 4,460,867	2.8 2.1
Kidney and Renal Pelvis	Total	- 11	38.479	- 28.6	- 29.3	8.1	0.394	1,940	8,953,627	2.1
Kidney and Renal Pelvis	Male	8	19,513	41.0	41.4	5.6	0.407	1,302	4,492,760	29.0
Kidney and Renal Pelvis	Female	3	18,966	15.8	16.4	2.6	0.972	638	4,460,867	14.3
Larynx	Total	1	38,479	2.6	2.6	0.9	1.000	219	8,953,627	2.4
Larynx	Male	1	19,513	5.1	5.1	0.7	1.000	166	4,492,760	3.7
Larynx	Female	-	18,966	-	-	0.2	1.000	53	4,460,867	1.2
Leukemia Leukemia	Total Male	12 2	38,479 19,513	31.2 10.2	31.4 10.1	7.3 4.6	0.139 0.336	1,715 1,034	8,953,627 4,492,760	19.2 23.0
Leukemia	Female	10	18,966	52.7	53.9	2.8	0.001 >>	681	4,460,867	15.3
Liver and Bile Duct	Total	-	38,479	-	-	3.6	0.057	843	8,953,627	9.4
Liver and Bile Duct	Male	-	19,513	-	-	2.6	0.150	594	4,492,760	13.2
Liver and Bile Duct	Female	-	18,966	-	-	1.0	0.717	249	4,460,867	5.6
Lung and Bronchus	Total	21	38,479	54.6	55.0	21.1	1.000	4,938	8,953,627	55.2
Lung and Bronchus Lung and Bronchus	Male Female	13 8	19,513 18,966	66.6 42.2	65.6 43.3	10.9 10.2	0.611 0.630	2,482 2,456	4,492,760 4,460,867	55.2 55.1
Melanoma of the Skin	Total	4	38,479	10.4	10.8	13.0	0.007 <<	3,140	8,953,627	35.1
Melanoma of the Skin	Male	2	19,513	10.2	10.3	8.2	0.024 <<	1,893	4,492,760	42.1
Melanoma of the Skin	Female	2	18,966	10.5	11.2	5.0	0.251	1,247	4,460,867	28.0
Myeloma	Total	1	38,479	2.6	2.6	3.1	0.375	727	8,953,627	8.1
Myeloma	Male	1	19,513	5.1	5.1	2.0	0.835	446	4,492,760	9.9
Myeloma Non-Hodgkin Lymphoma	Female Total	- 4	18,966 38,479	- 10.4	- 10.6	1.1 8.4	0.633 0.160	281 1,988	4,460,867 8,953,627	6.3 22.2
Non-Hodgkin Lymphoma	Male	4	36,479 19,513	5.1	5.1	6.4 5.0	0.160	1,900	4,492,760	22.2
Non-Hodgkin Lymphoma	Female	3	18,966	15.8	16.4	3.5	1.000	843	4,460,867	18.9
Oral Cavity and Pharynx	Total	3	38,479	7.8	8.0	5.5	0.399	1,312	8,953,627	14.7
Oral Cavity and Pharynx	Male	1	19,513	5.1	5.1	4.1	0.170	939	4,492,760	20.9
Oral Cavity and Pharynx	Female	2	18,966	10.5	11.0	1.5	0.899	373	4,460,867	8.4
Ovary	Female	3	18,966 38,479	15.8	16.7	2.2	0.766	550	4,460,867	12.3
Pancreas Pancreas	Total Male	7 5	38,479 19,513	18.2 25.6	18.4 25.4	6.3 3.6	0.880 0.586	1,481 821	8,953,627 4,492,760	16.5 18.3
Pancreas	Female	2	18,966	10.5	10.9	2.7	0.975	660	4,460,867	14.8
Prostate	Male	27	19,513	138.4	137.1	29.5	0.729	6,739	4,492,760	150.0
Stomach	Total	2	38,479	5.2	5.3	2.0	1.000	472	8,953,627	5.3
Stomach	Male	1	19,513	5.1	5.1	1.3	1.000	306	4,492,760	6.8
Stomach	Female	1	18,966	5.3	5.5	0.7	0.981	166	4,460,867	3.7
Testis	Male	-	19,513	-	-	1.1	0.683	274	4,492,760	6.1
Thyroid	Total	4	38,479	10.4	11.2	4.7	0.980	1,181	8,953,627	13.2
Thyroid	Male	1	19,513	5.1	5.4	1.5	1.000	371	4,492,760	8.3
Thyroid Pediatric Age 0 to 19	Female Total	3	18,966 12,841	15.8 15.6	17.3 15.7	3.2 2.2	1.000 1.000	810 423	4,460,867 2,486,483	18.2 17.0
F EUIALITIC AYE V LV 19		2		10.0	15.7	2.2				
Pediatric Age 0 to 19	Male		6,512				0.669	214	1,267,809	16.9

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 POWER COUNTY AND THE REMAINDER OF THE STATE OF IDAHO

		Power County							Remainder of Idaho			
Cause of Death		Observed Person Crude A.A.M. Expected					Observed Person Crude					
Cancer Site/Type	Sex	Deaths	Years		Rate (1,2)	Deaths (3)	P-Value (4)	Deaths	Years	Rate (1)		
All Causes of Death	Total	348	38,960	893.2	888.4	342.4	0.778	80.187	9.172.434	874.2		
All Causes of Death	Male	178	19,748	901.4	882.9	186.4	0.567	42,608	4,607,949	924.7		
All Causes of Death	Female	170	19,212	884.9	889.2	157.4	0.334	37,579	4,564,485	823.3		
All Malignant Cancers	Total	62	38,960	159.1	159.8	64.2	0.851	15,171	9,172,434	165.4		
All Malignant Cancers	Male	33	19,748	167.1	164.1	35.8	0.720	8,202	4,607,949	178.0		
All Malignant Cancers	Female	29	19,212	150.9	154.3	28.7	1.000	6,969	4,564,485	152.7		
Bladder	Total	-	38,960	-	-	2.1	0.246	485	9,172,434	5.3		
Bladder	Male	-	19,748	-	-	1.7	0.372	375	4,607,949	8.1		
Bladder	Female	-	19,212	-	_	0.5	1.000	110	4,564,485	2.4		
Brain and Other Nervous System	Total	1	38,960	2.6	2.6	2.2	0.733	517	9,172,434	5.6		
Brain and Other Nervous System	Male	-	19,748	-	-	1.2	0.582	289	4,607,949	6.3		
Brain and Other Nervous System	Female	1	19,212	5.2	5.4	0.9	1.000	228	4,564,485	5.0		
Breast	Total	5	38,960	12.8	13.0	4.7	1.000	1,119	9,172,434	12.2		
Breast	Male	-	19,748	-	-	0.1	1.000	13	4,607,949	0.3		
Breast	Female	5	19,212	26.0	26.8	4.5	0.943	1,106	4,564,485	24.2		
Cervix	Female	1	19,212	5.2	5.6	0.3	0.578	87	4,564,485	1.9		
Colorectal	Total	7	38,960	18.0	18.2	5.6	0.648	1,325	9,172,434	14.4		
Colorectal	Male	5	19,748	25.3	25.1	3.1	0.416	727	4,607,949	15.8		
Colorectal	Female	2	19,212	10.4	10.7	2.5	1.000	598	4,564,485	13.1		
Corpus Uteri	Female	-	19,212	-	-	0.7	1.000	169	4,564,485	3.7		
Esophagus	Total	1	38,960	2.6	2.6	1.9	0.848	460	9,172,434	5.0		
Esophagus	Male	1	19,748	5.1	5.0	1.7	0.996	390	4,607,949	8.5		
Esophagus	Female	-	19,212	-	-	0.3	1.000	70	4,564,485	1.5		
Hodgkin Lymphoma	Total	-	38,960	-	-	0.1	1.000	25	9,172,434	0.3		
Hodgkin Lymphoma Hodgkin Lymphoma	Male Female	-	19,748	-	-	0.1 0.0	1.000 1.000	14	4,607,949	0.3 0.2		
Kidney	Total	-	19,212 38,960	- 2.6	- 2.6	1.6	1.000	11 385	4,564,485 9,172,434	4.2		
Kidney	Male	1	19,748	2.0 5.1	2.0 5.0	1.0	1.000	245	4,607,949	4.2 5.3		
Kidney	Female	- '	19,740	5.1	5.0	0.6	1.000	140	4,564,485	3.1		
Larynx	Total	_	38,960	-	_	0.0	1.000	76	9,172,434	0.8		
Larynx	Male	-	19,748	-	_	0.3	1.000	65	4,607,949	1.4		
Larynx	Female	-	19,212	-	-	0.0	1.000	11	4,564,485	0.2		
Leukemia	Total	5	38,960	12.8	12.8	2.8	0.310	660	9,172,434	7.2		
Leukemia	Male	1	19,748	5.1	4.9	1.7	0.961	396	4,607,949	8.6		
Leukemia	Female	4	19,212	20.8	21.0	1.1	0.051	264	4,564,485	5.8		
Liver and Bile Duct	Total	1	38,960	2.6	2.6	2.7	0.514	634	9,172,434	6.9		
Liver and Bile Duct	Male	1	19,748	5.1	5.0	1.8	0.917	422	4,607,949	9.2		
Liver and Bile Duct	Female	-	19,212	-	-	0.9	0.838	212	4,564,485	4.6		
Lung and Bronchus	Total	11	38,960	28.2	28.3	12.4	0.833	2,926	9,172,434	31.9		
Lung and Bronchus	Male	7	19,748	35.4	34.9	6.7	1.000	1,534	4,607,949	33.3		
Lung and Bronchus	Female	4	19,212	20.8	21.2	5.8	0.636	1,392	4,564,485	30.5		
Melanoma of the Skin	Total	2	38,960	5.1	5.2	1.3	0.716	299	9,172,434	3.3		
Melanoma of the Skin	Male	-	19,748	-	-	0.9	0.842	200	4,607,949	4.3		
Melanoma of the Skin	Female	2	19,212	10.4	10.7	0.4	0.126	99	4,564,485	2.2		
Myeloma	Total	1	38,960	2.6	2.6	1.4	1.000	324	9,172,434	3.5		
Myeloma	Male	1	19,748	5.1	4.9	0.8	1.000 1.000	187	4,607,949	4.1		
Myeloma Non-Hodgkin Lymphoma	Female Total	- 2	19,212 38,960	- 5.1	- 5.1	0.6 2.4	1.000	137 566	4,564,485 9,172,434	3.0 6.2		
Non-Hodgkin Lymphoma	Male		38,960 19,748	5. I	5. I	2.4 1.4	0.514	566 310	9,172,434 4,607,949	6.2 6.7		
Non-Hodgkin Lymphoma	Female	- 2	19,748	- 10.4	- 10.5	1.4	0.514	256	4,564,485	5.6		
Oral Cavity and Pharynx	Total	<u> </u>	38,960	2.6	2.6	1.1	1.000	230	9,172,434	3.0		
Oral Cavity and Pharynx	Male	1	19,748	5.1	2.0 5.0	0.8	1.000	191	4,607,949	4.1		
Oral Cavity and Pharynx	Female	- '	19,212	-	- 5.5	0.3	1.000	83	4,564,485	1.8		
Ovary	Female	5	19,212	26.0	26.9	1.5	0.033 >>	356	4,564,485	7.8		
Pancreas	Total	4	38,960	10.3	10.4	5.0	0.885	1,186	9,172,434	12.9		
Pancreas	Male	3	19,748	15.2	15.1	2.8	1.000	647	4,607,949	14.0		
Pancreas	Female	1	19,212	5.2	5.3	2.2	0.698	539	4,564,485	11.8		
Prostate	Male	4	19,748	20.3	19.4	4.4	1.000	993	4,607,949	21.5		
Stomach	Total	1	38,960	2.6	2.6	0.8	1.000	193	9,172,434	2.1		
Stomach	Male	-	19,748	-	-	0.5	1.000	119	4,607,949	2.6		
Stomach	Female	1	19,212	5.2	5.4	0.3	0.516	74	4,564,485	1.6		

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	Power County
Access to Care Have Health Insurance, Age < 65 (2021–2022) Not See Doctor Due to Cost in Past Year (2020–2022) Cancer Screening	90.0% 10.4%	89.3% 9.5%	87.8% 11.0%	86.4% 11.0%	92.6% 10.2%	87.2% 10.2%	89.1% 10.4%	92.6% 11.3%	8.7%
Mammogram Past 2 Years, Age 40–74 (2014–2022, even years) Pap Test Past 3 Years, Cervix Intact Age 21–65 (2018, 2020) Colorectal Cancer Screening, Age 45–75 (2022) <u>Tobacco Use</u>	62.9% 71.1% 63.3%	61.0% 73.7% 61.0%	70.0% 73.6% 62.5%	60.3% 70.9% 60.8%	66.1% 72.9% 67.2%	58.9% 69.4% 65.0%	61.0% 69.3% 60.4%	62.5% 65.5% 60.2%	71.4%
Current Tobacco User (2020–2022) <u>Other Cancer-Related</u>	22.1%	24.3%	20.4%	24.8%	21.3%	22.5%	22.6%	18.1%	24.3%
Healthy Weight by Body Mass Index, Age 20+ (2020–2022) Any Physical Activity Besides Job Past 30 Days (2018–2022) Meet Physical Activity Guidelines (2011, 2013, 2015, 2017, 2019) Home Ever Tested for Radon (2016, 2018, 2020)	30.0% 79.1% 22.0% 22.9%	30.0% 79.0% 22.8% 30.8%	30.1% 78.0% 19.2% 18.3%	26.5% 75.4% 20.0% 16.9%	33.7% 82.7% 25.2% 25.2%	27.5% 75.2% 19.5% 20.1%	26.7% 76.7% 20.4% 23.0%	30.2% 81.0% 20.3% 21.0%	11.7% 71.6% 16.5% 20.7%

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+.

<u>Pap Test</u> – 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.

<u>Physical Activity Guidelines</u> – 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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