

WASHINGTON 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 416 cases of invasive cancer were diagnosed among Washington County residents (Table 1).

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

Cancer Incidence 2017–2021	Washington County	State of Idaho
All Sites/Types	416	47,333
Female Breast	59	6,943
Prostate	57	6,766
Lung & Bronchus	45	4,959
Colorectal	48	3,632

Table 3 (*Cancer Incidence 2017–2021, Comparison between Washington 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 Washington 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 Washington County was 807.8 cases per 100,000 person-years per year during 2017–2021. Comparing this crude rate with the crude rate for the remainder of Idaho (524.8) gives an estimate of the relative burden of disease in Washington County.

The age- and sex-adjusted incidence rate of invasive cancer in Washington County, all sites combined, was 581.5 cases per 100,000 persons per year during 2017–2021. There were statistically significantly more cases of cancer in Washington County (416) than expected (375.4) based upon rates in the remainder of the state ($p=.041$).

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 134 Washington 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 Washington County and the State of Idaho, 2018–2022

Mortality 2018–2022	Washington County	State of Idaho
All Deaths	749	80,538
Cancer Deaths	134	15,233
% of All Deaths	17.9%	18.9%
Lung & Bronchus	28	2,937
Colorectal	12	1,332
Pancreas	15	1,190
Female Breast	6	1,111
Prostate	5	997

Table 4 (*Cancer Mortality 2018–2022, Comparison between Washington 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 Washington 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 Washington County, all sites combined, was 171.2 deaths per 100,000 persons per year during 2018–2022, compared with 164.9 for the remainder of the state. There were more cancer deaths in Washington County (134) than expected (129.1) 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 WASHINGTON COUNTY AND THE REMAINDER OF THE STATE OF IDAHO

Cancer Site/Type	Sex	Washington 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	416	51,498	807.8	581.5	375.4	0.041 >>	46,917	8,940,608	524.8
All Sites Combined	Male	220	25,645	857.9	580.6	211.6	0.580	25,050	4,486,628	558.3
All Sites Combined	Female	196	25,853	758.1	577.7	166.6	0.028 >>	21,867	4,453,980	491.0
Bladder	Total	17	51,498	33.0	21.7	19.3	0.698	2,203	8,940,608	24.6
Bladder	Male	14	25,645	54.6	33.8	16.2	0.695	1,759	4,486,628	39.2
Bladder	Female	3	25,853	11.6	8.1	3.7	0.992	444	4,453,980	10.0
Brain - malignant	Total	2	51,498	3.9	3.1	4.7	0.297	655	8,940,608	7.3
Brain - malignant	Male	-	25,645	-	-	2.8	0.123	382	4,486,628	8.5
Brain - malignant	Female	2	25,853	7.7	6.2	2.0	1.000	273	4,453,980	6.1
Brain and other CNS - non-malignant	Total	13	51,498	25.2	19.1	11.7	0.778	1,534	8,940,608	17.2
Brain and other CNS - non-malignant	Male	5	25,645	19.5	14.5	3.8	0.662	495	4,486,628	11.0
Brain and other CNS - non-malignant	Female	8	25,853	30.9	23.9	7.8	1.000	1,039	4,453,980	23.3
Breast	Total	59	51,498	114.6	86.6	52.9	0.439	6,949	8,940,608	77.7
Breast	Male	-	25,645	-	-	0.6	1.000	65	4,486,628	1.4
Breast	Female	59	25,853	228.2	177.6	51.4	0.318	6,884	4,453,980	154.6
Breast - in situ	Total	8	51,498	15.5	12.1	10.1	0.653	1,361	8,940,608	15.2
Breast - in situ	Male	-	25,645	-	-	0.0	1.000	4	4,486,628	0.1
Breast - in situ	Female	8	25,853	30.9	24.7	9.9	0.693	1,357	4,453,980	30.5
Cervix	Female	2	25,853	7.7	7.6	1.7	1.000	292	4,453,980	6.6
Colorectal	Total	48	51,498	93.2	67.6	28.4	0.001 >>	3,584	8,940,608	40.1
Colorectal	Male	25	25,645	97.5	68.8	15.8	0.039 >>	1,952	4,486,628	43.5
Colorectal	Female	23	25,853	89.0	66.3	12.7	0.012 >>	1,632	4,453,980	36.6
Corpus Uteri	Female	8	25,853	30.9	24.1	10.0	0.655	1,346	4,453,980	30.2
Esophagus	Total	8	51,498	15.5	10.7	4.2	0.123	499	8,940,608	5.6
Esophagus	Male	6	25,645	23.4	15.5	3.6	0.325	423	4,486,628	9.4
Esophagus	Female	2	25,853	7.7	5.5	0.6	0.255	76	4,453,980	1.7
Hodgkin Lymphoma	Total	1	51,498	1.9	1.8	1.3	1.000	221	8,940,608	2.5
Hodgkin Lymphoma	Male	1	25,645	3.9	3.5	0.8	1.000	128	4,486,628	2.9
Hodgkin Lymphoma	Female	-	25,853	-	-	0.5	1.000	93	4,453,980	2.1
Kidney and Renal Pelvis	Total	16	51,498	31.1	22.7	15.3	0.917	1,935	8,940,608	21.6
Kidney and Renal Pelvis	Male	12	25,645	46.8	33.1	10.5	0.719	1,298	4,486,628	28.9
Kidney and Renal Pelvis	Female	4	25,853	15.5	11.6	4.9	0.909	637	4,453,980	14.3
Larynx	Total	4	51,498	7.8	5.4	1.8	0.211	216	8,940,608	2.4
Larynx	Male	3	25,645	11.7	7.7	1.4	0.342	164	4,486,628	3.7
Larynx	Female	1	25,853	3.9	2.9	0.4	0.661	52	4,453,980	1.2
Leukemia	Total	20	51,498	38.8	27.7	13.8	0.135	1,707	8,940,608	19.1
Leukemia	Male	10	25,645	39.0	26.7	8.6	0.711	1,026	4,486,628	22.9
Leukemia	Female	10	25,853	38.7	28.7	5.3	0.091	681	4,453,980	15.3
Liver and Bile Duct	Total	12	51,498	23.3	16.5	6.8	0.086	831	8,940,608	9.3
Liver and Bile Duct	Male	6	25,645	23.4	16.1	4.9	0.728	588	4,486,628	13.1
Liver and Bile Duct	Female	6	25,853	23.2	16.9	1.9	0.029 >>	243	4,453,980	5.5
Lung and Bronchus	Total	45	51,498	87.4	57.9	42.7	0.764	4,914	8,940,608	55.0
Lung and Bronchus	Male	19	25,645	74.1	46.6	22.5	0.542	2,476	4,486,628	55.2
Lung and Bronchus	Female	26	25,853	100.6	69.9	20.4	0.257	2,438	4,453,980	54.7
Melanoma of the Skin	Total	15	51,498	29.1	21.7	24.2	0.064	3,129	8,940,608	35.0
Melanoma of the Skin	Male	10	25,645	39.0	26.9	15.6	0.184	1,885	4,486,628	42.0
Melanoma of the Skin	Female	5	25,853	19.3	15.7	8.9	0.243	1,244	4,453,980	27.9
Myeloma	Total	8	51,498	15.5	10.6	6.1	0.533	720	8,940,608	8.1
Myeloma	Male	6	25,645	23.4	15.3	3.9	0.387	441	4,486,628	9.8
Myeloma	Female	2	25,853	7.7	5.5	2.3	1.000	279	4,453,980	6.3
Non-Hodgkin Lymphoma	Total	21	51,498	40.8	29.3	15.8	0.240	1,971	8,940,608	22.0
Non-Hodgkin Lymphoma	Male	14	25,645	54.6	38.1	9.3	0.176	1,132	4,486,628	25.2
Non-Hodgkin Lymphoma	Female	7	25,853	27.1	20.0	6.6	0.978	839	4,453,980	18.8
Oral Cavity and Pharynx	Total	6	51,498	11.7	8.5	10.3	0.224	1,309	8,940,608	14.6
Oral Cavity and Pharynx	Male	3	25,645	11.7	8.3	7.5	0.118	937	4,486,628	20.9
Oral Cavity and Pharynx	Female	3	25,853	11.6	8.7	2.9	1.000	372	4,453,980	8.4
Ovary	Female	1	25,853	3.9	3.0	4.1	0.168	552	4,453,980	12.4
Pancreas	Total	14	51,498	27.2	18.4	12.5	0.748	1,474	8,940,608	16.5
Pancreas	Male	11	25,645	42.9	27.8	7.2	0.227	815	4,486,628	18.2
Pancreas	Female	3	25,853	11.6	8.2	5.4	0.425	659	4,453,980	14.8
Prostate	Male	57	25,645	222.3	148.3	57.5	1.000	6,709	4,486,628	149.5
Stomach	Total	3	51,498	5.8	4.1	3.9	0.922	471	8,940,608	5.3
Stomach	Male	3	25,645	11.7	7.8	2.6	0.966	304	4,486,628	6.8
Stomach	Female	-	25,853	-	-	1.3	0.541	167	4,453,980	3.7
Testis	Male	2	25,645	7.8	9.4	1.3	0.738	272	4,486,628	6.1
Thyroid	Total	5	51,498	9.7	9.0	7.3	0.520	1,180	8,940,608	13.2
Thyroid	Male	2	25,645	7.8	6.4	2.6	1.000	370	4,486,628	8.2
Thyroid	Female	3	25,853	11.6	11.4	4.8	0.591	810	4,453,980	18.2
Pediatric Age 0 to 19	Total	2	12,875	15.5	15.5	2.2	1.000	423	2,486,449	17.0
Pediatric Age 0 to 19	Male	1	6,461	15.5	15.5	1.1	1.000	213	1,267,860	16.8
Pediatric Age 0 to 19	Female	1	6,414	15.6	15.5	1.1	1.000	210	1,218,589	17.2

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 WASHINGTON COUNTY AND THE REMAINDER OF THE STATE OF IDAHO

Cause of Death Cancer Site/Type	Sex	Washington 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	749	52,530	1,425.9	958.8	680.5	0.010 >>	79,786	9,158,864	871.1
All Causes of Death	Male	389	26,206	1,484.4	961.2	372.9	0.417	42,397	4,601,491	921.4
All Causes of Death	Female	360	26,324	1,367.6	948.8	311.3	0.007 >>	37,389	4,557,373	820.4
All Malignant Cancers	Total	134	52,530	255.1	171.2	129.1	0.686	15,099	9,158,864	164.9
All Malignant Cancers	Male	67	26,206	255.7	161.4	73.7	0.477	8,168	4,601,491	177.5
All Malignant Cancers	Female	67	26,324	254.5	180.2	56.6	0.191	6,931	4,557,373	152.1
Bladder	Total	4	52,530	7.6	4.8	4.4	1.000	481	9,158,864	5.3
Bladder	Male	2	26,206	7.6	4.5	3.6	0.603	373	4,601,491	8.1
Bladder	Female	2	26,324	7.6	5.1	0.9	0.479	108	4,557,373	2.4
Brain and Other Nervous System	Total	1	52,530	1.9	1.4	4.0	0.187	517	9,158,864	5.6
Brain and Other Nervous System	Male	1	26,206	3.8	2.8	2.3	0.676	288	4,601,491	6.3
Brain and Other Nervous System	Female	-	26,324	-	-	1.7	0.355	229	4,557,373	5.0
Breast	Total	6	52,530	11.4	8.0	9.2	0.378	1,118	9,158,864	12.2
Breast	Male	-	26,206	-	-	0.1	1.000	13	4,601,491	0.3
Breast	Female	6	26,324	22.8	16.6	8.8	0.455	1,105	4,557,373	24.2
Cervix	Female	-	26,324	-	-	0.6	1.000	88	4,557,373	1.9
Colorectal	Total	12	52,530	22.8	15.9	10.9	0.819	1,320	9,158,864	14.4
Colorectal	Male	5	26,206	19.1	12.9	6.1	0.847	727	4,601,491	15.8
Colorectal	Female	7	26,324	26.6	19.0	4.8	0.420	593	4,557,373	13.0
Corpus Uteri	Female	2	26,324	7.6	5.4	1.4	0.787	167	4,557,373	3.7
Esophagus	Total	4	52,530	7.6	5.2	3.9	1.000	457	9,158,864	5.0
Esophagus	Male	3	26,206	11.4	7.4	3.4	1.000	388	4,601,491	8.4
Esophagus	Female	1	26,324	3.8	2.7	0.6	0.865	69	4,557,373	1.5
Hodgkin Lymphoma	Total	-	52,530	-	-	0.2	1.000	25	9,158,864	0.3
Hodgkin Lymphoma	Male	-	26,206	-	-	0.1	1.000	14	4,601,491	0.3
Hodgkin Lymphoma	Female	-	26,324	-	-	0.1	1.000	11	4,557,373	0.2
Kidney	Total	1	52,530	1.9	1.3	3.3	0.306	385	9,158,864	4.2
Kidney	Male	1	26,206	3.8	2.4	2.2	0.710	245	4,601,491	5.3
Kidney	Female	-	26,324	-	-	1.2	0.608	140	4,557,373	3.1
Larynx	Total	2	52,530	3.8	2.6	0.6	0.265	74	9,158,864	0.8
Larynx	Male	2	26,206	7.6	4.7	0.6	0.231	63	4,601,491	1.4
Larynx	Female	-	26,324	-	-	0.1	1.000	11	4,557,373	0.2
Leukemia	Total	4	52,530	7.6	5.0	5.8	0.638	661	9,158,864	7.2
Leukemia	Male	1	26,206	3.8	2.4	3.6	0.243	396	4,601,491	8.6
Leukemia	Female	3	26,324	11.4	7.9	2.2	0.757	265	4,557,373	5.8
Liver and Bile Duct	Total	11	52,530	20.9	14.4	5.2	0.036 >>	624	9,158,864	6.8
Liver and Bile Duct	Male	6	26,206	22.9	15.1	3.6	0.311	417	4,601,491	9.1
Liver and Bile Duct	Female	5	26,324	19.0	13.5	1.7	0.057	207	4,557,373	4.5
Lung and Bronchus	Total	28	52,530	53.3	35.0	25.4	0.661	2,909	9,158,864	31.8
Lung and Bronchus	Male	12	26,206	45.8	28.5	14.0	0.720	1,529	4,601,491	33.2
Lung and Bronchus	Female	16	26,324	60.8	41.9	11.6	0.253	1,380	4,557,373	30.3
Melanoma of the Skin	Total	1	52,530	1.9	1.3	2.5	0.581	300	9,158,864	3.3
Melanoma of the Skin	Male	1	26,206	3.8	2.5	1.7	0.961	199	4,601,491	4.3
Melanoma of the Skin	Female	-	26,324	-	-	0.8	0.905	101	4,557,373	2.2
Myeloma	Total	5	52,530	9.5	6.1	2.9	0.323	320	9,158,864	3.5
Myeloma	Male	4	26,206	15.3	9.2	1.7	0.197	184	4,601,491	4.0
Myeloma	Female	1	26,324	3.8	2.6	1.2	1.000	136	4,557,373	3.0
Non-Hodgkin Lymphoma	Total	9	52,530	17.1	11.2	4.9	0.124	559	9,158,864	6.1
Non-Hodgkin Lymphoma	Male	4	26,206	15.3	9.6	2.8	0.608	306	4,601,491	6.7
Non-Hodgkin Lymphoma	Female	5	26,324	19.0	12.9	2.1	0.134	253	4,557,373	5.6
Oral Cavity and Pharynx	Total	1	52,530	1.9	1.3	2.3	0.670	274	9,158,864	3.0
Oral Cavity and Pharynx	Male	-	26,206	-	-	1.7	0.379	192	4,601,491	4.2
Oral Cavity and Pharynx	Female	1	26,324	3.8	2.7	0.7	0.964	82	4,557,373	1.8
Ovary	Female	2	26,324	7.6	5.4	2.9	0.889	359	4,557,373	7.9
Pancreas	Total	15	52,530	28.6	19.1	10.1	0.173	1,175	9,158,864	12.8
Pancreas	Male	11	26,206	42.0	26.7	5.7	0.065	639	4,601,491	13.9
Pancreas	Female	4	26,324	15.2	10.7	4.4	1.000	536	4,557,373	11.8
Prostate	Male	5	26,206	19.1	11.2	9.7	0.163	992	4,601,491	21.6
Stomach	Total	2	52,530	3.8	2.7	1.6	0.923	192	9,158,864	2.1
Stomach	Male	1	26,206	3.8	2.5	1.0	1.000	118	4,601,491	2.6
Stomach	Female	1	26,324	3.8	2.9	0.6	0.854	74	4,557,373	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	Washington 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%	.
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%	66.2%
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%	.
Colorectal Cancer Screening, Age 45–75 (2022)	63.3%	61.0%	62.5%	60.8%	67.2%	65.0%	60.4%	60.2%	.
Tobacco Use									
Current Tobacco User (2020–2022)	22.1%	24.3%	20.4%	24.8%	21.3%	22.5%	22.6%	18.1%	27.6%
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%	28.5%
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%	68.7%
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%	23.5%
Home Ever Tested for Radon (2016, 2018, 2020)	22.9%	30.8%	18.3%	16.9%	25.2%	20.1%	23.0%	21.0%	14.1%

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 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.

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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