

# Annual Prevalence Report

2023 Mississippi Behavioral Risk Factor Surveillance System (BRFSS)

June 2, 2025



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#### Introduction

Among health care professionals, there is a general consensus that certain health conditions and behavior patterns have a strong correlation with disease, injury, and death. Examples include cigarette smoking and lung disease, overweight/obesity and hypertension, and alcohol consumption and various cancers. The Behavioral Risk Factor Surveillance System (BRFSS) is a telephone surveillance system designed to estimate the prevalence of these health conditions and risk factors, along with other health risk factors, in every state and some territories in the United States (U.S.). The results provide a tool for evaluating health trends, assessing the risk of chronic diseases, and measuring the effectiveness of policies, programs, intervention strategies, and awareness campaigns.

The BRFSS is a cooperative agreement between the Centers for Disease Control and Prevention (CDC) and the Mississippi State Department of Health (MSDH). The first survey was conducted in 1984 when the data were collected at one given point in time. The survey was repeated in 1988 using the same methodology. Beginning from 1990, states have completed an annual survey with the data being collected monthly.

The BRFSS survey contains a set of core questions provided by the CDC to gather comprehensive standard information nationwide. The questions are related to health status, access to health care, health awareness, lifestyles, and preventive health. The CDC provides states with opportunities to also include questions addressing specific health-related concerns of the state.

#### Methodology

#### A. 2023 Sampling Design, Data Collection, and Weighting

The Mississippi BRFSS (MS BRFSS) is a randomly sampled telephone survey that utilizes a disproportionate stratified sample (DSS) design with random digit dialing (RDD) and a Computer Assisted Telephone Interviewing (CATI) system. Until the 2011 survey, the BRFSS relied exclusively on interviews of households with only landline phones; however, the number of households having only cell phones has increased. The CDC reports that for July - December 2023, 76.0% of adults in the U.S. lived in wireless-only households. Estimates for Mississippi household telephone status revealed that 80.1% of adult households were wireless-only in 2022. 2

In 2023, all MS BRFSS interviews were conducted according to BRFSS protocols by a public university's survey research laboratory on behalf of MSDH. To be eligible to participate in the survey, the respondent must have been a non-institutionalized adult aged 18 years or older at the time of the interview. For landline surveys, interviewers contacted the residences and randomly selected one adult to be interviewed from all adults residing in the household. For cell phone surveys, no random selection for respondents was possible. If the interviewer established that the person answering the cell phone was at least 18 years of age, the person was asked to participate in the survey.

The data collected during the 12-month survey period were edited and weighted by the CDC. Since 2011 the BRFSS has utilized a weighting method called iterative proportional fitting, also known as "raking." The procedure, while not new, has been made feasible through the development of ultra-fast computer processors. In addition to the standard age, sex, race and ethnicity variables, the use of raking allows for consideration of demographic variables such as education level, marital status, renter or owner status, and phone source. By including these additional variables into the weighting process, the survey will more accurately reflect Mississippi's adult population. For additional information about sampling, collecting, weighting, and analyzing BRFSS data, please refer to the <a href="2023 BRFSS Overview">2023 BRFSS Overview</a> and the <a href="2013 BRFSS Data">2013 BRFSS Data</a> User Guide, both of which were produced by the CDC.

#### B. Questionnaire

The BRFSS questionnaire, designed through cooperative agreements with the CDC, is divided into two main parts. The first part contains the Core Section topics related to health conditions and behaviors. The Core Section topics are chosen by the CDC, and these questions must be asked by every state and territory administering the survey. The second part contains the Optional Modules. The CDC provides a list of Optional Modules on varying topics to states and territories so that they can choose to include any that are of interest. The <a href="2023 BRFSS Questionnaire">2023 BRFSS Questionnaire</a> contained 15 Core Sections, 1 Emerging Core Section, and 32 Optional Modules from which the states could choose. States also have the option to include state-added questions, which are designed by the state rather than the CDC. In 2023, Mississippi included 12 BRFSS Optional Modules in addition to the Core Sections. Mississippi did not include any state-added questions in its 2023 survey.

#### C. Data Analysis

After CDC completed data editing, weighting procedures, and analysis, it sent each state an initial descriptive analysis report that included weights, confidence intervals, percentages, and number of responses in documents called the *Codebook Report* and the *Calculated Variable Data Report*. Weighted counts were based on the 2023 Claritas and ACS Adult Population Report for Mississippi population estimates to accurately reflect the state's demographics. According to the report, Mississippi's adult (18

years and older) population count was 2,289,469 for 2023.

The results presented in this report were produced by epidemiologists at MSDH and are weighted according to population characteristics. Tables containing the weighted prevalence estimates and associated 95% confidence intervals for each of the selected topics in this report are located at the end of each topic's section. The difference between two estimates is considered to be statistically significant (also stated as "significantly higher/lower" or "significant" in this report) if the 95% confidence intervals do not overlap.

#### D. Limitations of Data

All data collection systems are subject to error, and records may be incomplete and/or contain inaccurate information. Additionally, all data collected via the BRFSS program are self-reported. It is not always possible to measure the magnitude of these errors or their impact on the data. The user must be the final arbiter in evaluating the accuracy of the data. In addition, respondents who did not answer and/or refused to respond are not included in the counts or percentages listed in this report. For certain variables in this report, such as annual household income, the number of respondents who did not answer was considerable (see Table A for details about annual household income responses).

#### E. Sample Size

In the 2023 MS BRFSS, 4,069 adults were included in the final sample; of these, 10.0% responded to the survey using a landline, and 90.0% responded using a cell phone. The response rate was 69.2% for the landline survey, 41.3% for the cell phone survey, and 45.4% overall. The overall U.S. median response rate for the 2023 BRFSS was 44.6%.

Tables containing the demographic group characteristics, definitions, and statistics for the entire sample are included on pages 5 and 6 of this report. The reader should note that sample sizes by question and response category may vary because of non-response and skip patterns within the survey instrument.

Overall estimates generally have relatively small sampling errors; however, estimates for certain population subgroups may be based on small numbers and have relatively large sampling errors. When the number of events is small and the probability of such an event is small, considerable caution should be observed in interpreting the estimates or differences among groups. For BRFSS data, CDC recommends not interpreting percentages where the denominator is based upon fewer than 50 non-weighted respondents or the relative standard error (RSE) of the estimate is greater than 30%. In the tables of this report, results replaced with a dash (-) indicate a sample size of less than 50 or an RSE greater than 30%.

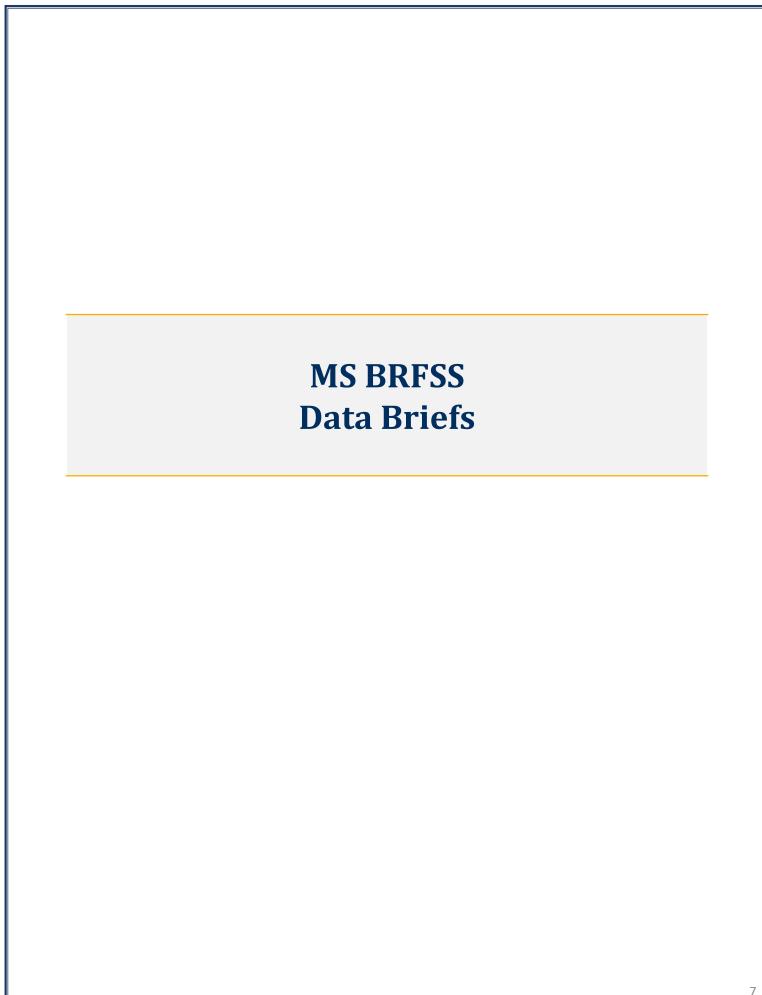
In the 2023 MS BRFSS, the numbers of responses for individual races and ethnicities contained in the "Other Races/Ethnicities" demographic group (Table B, p.6) were too low to allow for meaningful estimates. Therefore, MSDH plans to publish a supplement that will combine multiple years of BRFSS data in order to achieve sample sizes large enough to provide estimates of health indicators for racial and ethnic minority groups.

**NOTE:** Only select MS BRFSS health indicators are included in this report. If you would like to request additional data, please <u>submit a data request using MSDH's online form</u>. For other information about the MS BRFSS, contact the MS BRFSS Coordinator at <u>BRFSS@msdh.ms.gov</u>.

Table A. 2023 MS BRFSS Demographic Group Characteristics: Definitions and Statistics  TOTAL 2023 SURVEY SAMPLE							
Demographic		TOTAL 2	023 SURVEY	SAMPLE			
Group	Definition of Demographic Group	Unweighted Total	Weighted Total	Weighted Percent			
TOTAL	All respondents who provided a valid answer to the question of interest; excludes respondents who replied 'do not know' to the question, refused to answer the question, or skipped the question.	4,069	2,289,469	100.0			
Male	Respondents who reported their sex as male	1,716	1,089,467	47.6			
Female	Respondents who reported their sex as female	2,353	1,200,002	52.4			
White, Non-Hispanic (NH)	Respondents who reported their race/ethnicity as White and Non-Hispanic (NH)	2,118	1,110,703	48.5			
Black, Non-Hispanic (NH)	Respondents who reported their race/ethnicity as Black or African American and Non-Hispanic (NH)	1,195	688,963	30.1			
Other Races/Ethnicities	Respondents who reported their race/ethnicity as anything other than White or Black and Non-Hispanic or any race and Hispanic. Note: Other races and ethnicities are grouped together due to low individual sample sizes. Refer to Table B for a list of races and ethnicities included in the "Other Races and Ethnicities" demographic group.	180	163,485	7.1			
Missing Race/Ethnicity	Respondents who replied 'do not know' to the question, refused to answer the question, or skipped the question	576	326,318	14.3			
18-24 years	Respondents who reported their age as 18-24 years	424	312,135	13.6			
25-34 years	Respondents who reported their age as 25-34 years	532	350,858	15.3			
35-44 years	Respondents who reported their age as 35-44 years	632	352,540	15.4			
45-54 years	Respondents who reported their age as 45-54 years	629	328,831	14.4			
55-64 years	Respondents who reported their age as 55-64 years	652	367,272	16.0			
65+ years	Respondents who reported their age as 65 years or older	1,147	553,864	24.2			
Missing Age	Respondents who replied 'do not know' to the question, refused to answer the question, or skipped the question	53	23,969	1.0			
Less than H.S.	Respondents who reported never attending school or not completing Grade 12 in high school (H.S.) or a General Educational Development (G.E.D.) test	292	325,754	14.2			
H.S. or G.E.D.	Respondents who reported completing Grade 12 or G.E.D.	1,069	696,212	30.4			

Some Post-H.S.	Respondents who reported completing 1 to 3 years of college or technical school after high school	1,254	776,830	33.9
College Graduate	Respondents who reported completing 4 or more years of college or graduating college	1,439	482,845	21.1
Missing Education Level	Respondents who replied 'do not know' to the question, refused to answer the question, or skipped the question	15	7829	0.3
Less than \$15,000	Respondents who reported their annual household income as less than \$15,000	222	131,331	5.8
\$15,000-\$24,999	Respondents who reported their annual household income as between \$15,000-\$24,999	308	194,791	8.6
\$25,000-\$34,999	Respondents who reported their annual household income as between \$25,000-\$34,999	414	240,562	10.6
\$35,000-\$49,999	Respondents who reported their annual household income as between \$35,000-\$49,999	571	320,684	14.1
\$50,000-\$74,999	Respondents who reported their annual household income as between \$50,000-\$74,999	544	283,004	12.5
\$75,000+	Respondents who reported their annual household income as \$75,000 or more	1,212	632,932	27.9
Missing Annual Household Income	Respondents who replied 'do not know' to the question, refused to answer the question, or skipped the question	769	464,514	20.5

Table B. Races and Ethnicities Included in the "Other Races/Ethnicities" Demographic Group					
	TOTAL 2023 SURVEY SAMPLE				
Race/Ethnicity	Unweighted Total	Weighted Total	Weighted Percent		
Any race, Hispanic	76	70,034	3.57		
American Indian or Alaskan Native, Non-Hispanic	20	20,975	1.07		
Asian, Non-Hispanic	24	17,616	0.90		
Multiracial, Non-Hispanic	25	20,325	1.04		
Native Hawaiian or Pacific Islander, Non-Hispanic	8	4,869	0.25		
Other race, Non-Hispanic	27	29,666	1.50		
Total "Other Races/Ethnicities" Demographic Group	180	163,485	8.33		



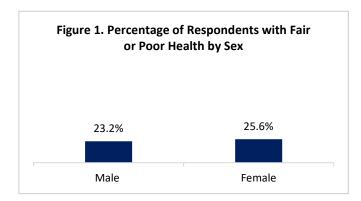
#### **Health Status**

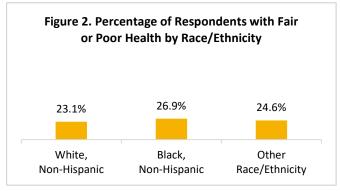
**Health Status Question:** 

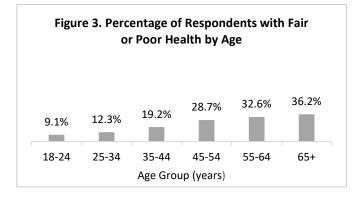
Would you say that in general your health is excellent, very good, good, fair, or poor?

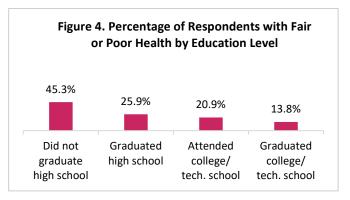
Health status is an indicator that attempts to determine how adults view their personal health and how well they function physically, psychologically, and socially while engaged in normal, daily activities. The questions related to health status are important because they may indicate dysfunction and disability not measured in standard morbidity and mortality data.

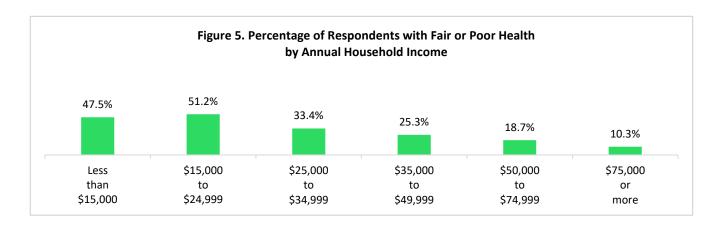
- Overall, **24.4%** of adults reported their health to be fair or poor.
- **Women** (25.6%) had a **higher** percentage of fair or poor health compared to men (23.2%); however, the difference was **not statistically significant** (Fig. 1).
- The percentage of fair or poor health was **highest** among **Black, non-Hispanic (NH) adults** (26.9%) followed by adults of other races/ethnicities (24.6%) and White, NH adults (23.1%). There were **no statistically significant differences** in percentage among race/ethnicity groups (Fig. 2).
- The percentage of fair or poor health increased with age and was **significantly lower** among adults aged **18-24 years** (9.1%) compared to adults aged 35-44 years (19.2%) and older age groups (Fig. 3).
- The percentage of fair or poor health increased as education level decreased and was **significantly higher** among adults who **did not graduate high school** (45.3%) compared to adults whose highest level of education was high school graduation (25.9%), completed some college (20.9%), and graduated college (13.8%) (Fig. 4).
- Overall, the percentage of fair or poor health increased as annual household income decreased and was **significantly higher** among adults whose annual household income was **\$15,000 to \$24,999** (51.2%) **and less than \$15,000** (47.5%) compared to adults who earned \$35,000 to \$49,999 (25.3%), \$50,000 to \$74,999 (18.7%), and \$75,000 or more (10.3%) (Fig. 5).
- The percentage of fair or poor health **increased** from 2014 (22.0%) to 2023 (24.4%). However, the difference was **not statistically significant** (Fig. 6).











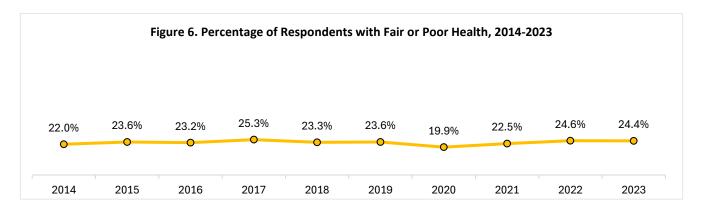


TABLE 1. Health Status						
Q: Would you say that in general your health is						
DEMOGRAPHIC	RESPO	ONDENTS		Fair or Poor Hea	lth	
GROUPS	TOTAL	WEIGHTED	N <sup>(1)</sup>	% <sup>(2)</sup>	C.I. (95%)	
TOTAL	4,064	2,286,198	943	24.4	22.5-26.4	
Male	1,714	1,088,158	361	23.2	20.3-26.0	
Female	2,350	1,198,039	582	25.6	23.0-28.1	
White, Non-Hispanic (NH)	2,116	1,109,395	451	23.1	20.4-25.8	
Black, Non-Hispanic (NH)	1,193	687,350	329	26.9	23.4-30.4	
Other Races/Ethnicities**	180	163,485	36	24.6	16.0-33.3	
18-24 years	423	310,970	39	9.1	5.4-12.7	
25-34 years	532	350,858	75	12.3	9.1-15.5	
35-44 years	632	352,540	125	19.2	15.4-23.0	
45-54 years	627	327,438	154	28.7	23.0-34.3	
55-64 years	651	366,825	187	32.6	27.0-38.2	
65+ years	1,146	553,597	352	36.2	32.1-40.4	
Less than H.S.	290	324,264	151	45.3	38.0-52.6	
H.S. or G.E.D.	1,066	694,430	286	25.9	22.4-29.5	
Some Post-H.S.	1,254	776,830	285	20.9	18.0-23.9	
College Graduate	1,439	482,845	215	13.8	11.5-16.1	
Less than \$15,000	222	131,331	111	47.5	39.3-55.7	
\$15,000-\$24,999	307	193,748	135	51.2	42.4-60.0	
\$25,000-\$34,999	413	240,296	137	33.4	26.0-40.8	
\$35,000-\$49,999	571	320,684	150	25.3	20.8-29.9	
\$50,000-\$74,999	543	281,839	92	18.7	14.2-23.1	
\$75,000+	1,212	632,932	129	10.3	8.2-12.5	

<sup>(2)</sup> Weighted percent

<sup>\*\*</sup>Refer to Table B on p. 6 for a list of races and ethnicities included in the "Other Races and Ethnicities" demographic group.

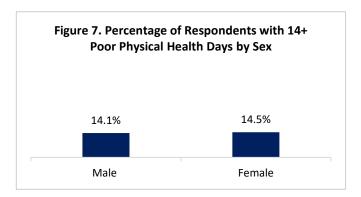
## **Physical Health Status**

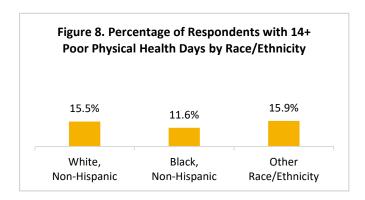
In both public and private medicine, the concept of health-related quality of life (QOL) refers to the physical and mental health perceived by a person or a group of persons. Tracking health-related QOL in different populations can

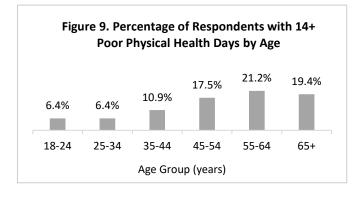
**Physical Health Status Question:** 

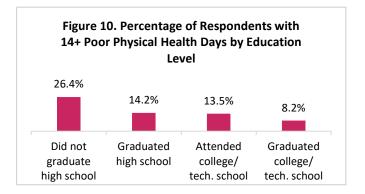
Now thinking about your physical health, which includes physical illness and injury, for how many days during the past 30 days was your physical health not good?

- aid in identifying subgroups with poor physical or mental health and can help in developing policies or interventions to improve their health.<sup>3</sup>
- Overall, **14.3%** of adults reported experiencing 14 or more days of poor physical health in the past 30 days.
- **Women** (14.5%) had a **higher** percentage of 14+ poor physical health days compared to men (14.1%); however, the difference was **not statistically significant** (Fig. 7).
- The percentage of having 14+ poor physical health days was **highest** among adults of **other races/ethnicities** (15.9%) followed by White, NH adults (15.5%) and Black, NH adults (11.6%). However, there were **no significant differences** in percentage among race/ethnicity groups (Fig. 8).
- The percentage of having 14+ poor physical health days was **significantly higher** among adults aged **45-54 years** (17.5%), **55-64 years** (21.2%), **and 65+ years** (19.4%) compared to adults aged 18-24 years (6.4%) and 25-34 years (6.4%) (Fig. 9).
- The percentage of having 14+ poor physical health days increased as education level decreased and was **significantly higher** among adults who **did not graduate high school** (26.4%) compared to adults of all higher education levels (Fig. 10).
- The percentage of having 14+ poor physical health days increased as annual household income decreased and was **significantly higher** among adults earning **less than \$15,000** (33.1%) compared to adults earning \$25,000 to \$34,999 (16.6%), \$35,000 to \$49,999 (14.4%), \$50,000 to \$74,999 (11.5%), and \$75,000 or more (7.3%) (Fig. 11).
- The percentage of having 14+ poor physical health days **increased** from 13.5% in 2014 to 14.3% in 2023. However, the difference was **not statistically significant** (Fig. 12).











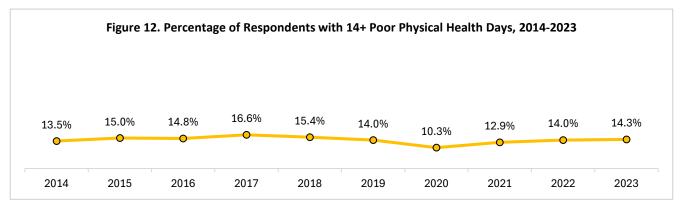


TABLE 2. Physical Health Status  Q: For how many days during the past 30 days was your physical health not good?						
DEMOGRAPHIC	• •	RESPONDENTS		14 days or more		
GROUPS	TOTAL	WEIGHTED	N <sup>(1)</sup>	% <sup>(2)</sup>	C.I. (95%	
TOTAL	3,968	2,219,966	546	14.3	12.8-15.8	
Male	1,680	1,066,527	206	14.1	11.7-16.4	
Female	2,288	1,153,439	340	14.5	12.6-16.4	
White, Non-Hispanic (NH)	2,068	1,078,407	295	15.5	13.3-17.7	
Black, Non-Hispanic (NH)	1,159	662,916	147	11.6	9.4-13.8	
Other Races/Ethnicities**	175	159,687	25	15.9	9.1-22.7	
18-24 years	414	303,732	24	6.4	3.3-9.5	
25-34 years	527	346.142	36	6.4	4.1-8.7	
35-44 years	620	345,130	62	10.9	7.6-14.2	
45-54 years	619	324,523	94	17.5	12.8-22.2	
55-64 years	634	349,055	125	21.2	16.9-25.5	
65+ years	1,105	529,510	198	19.4	16.2-22.5	
Less than H.S.	269	298,575	82	26.4	20.4-32.5	
H.S. or G.E.D.	1,038	674,102	158	14.2	11.6-16.8	
Some Post-H.S.	1,231	763,351	173	13.5	11.0-16.1	
College Graduate	1,417	477,433	132	8.2	6.3-10.0	
Less than \$15,000	215	125,697	71	33.1	25.3-40.9	
\$15,000-\$24,999	301	192,086	71	24.1	17.2-31.0	
\$25,000-\$34,999	403	226,466	67	16.6	11.6-21.6	
\$35,000-\$49,999	560	315,233	80	14.4	10.6-18.2	
\$50,000-\$74,999	536	277,685	54	11.5	7.8-15.1	
\$75,000+	1,195	624,964	91	7.3	5.5-9.1	

<sup>(1)</sup> Unweighted number

 ${\bf Note: Denominator \, excludes \, respondents \, with \, do \, not \, know/refused/missing \, responses}$ 

<sup>(2)</sup> Weighted percent

<sup>\*\*</sup>Refer to Table B on p. 6 for a list of races and ethnicities included in the "Other Races and Ethnicities" demographic group.

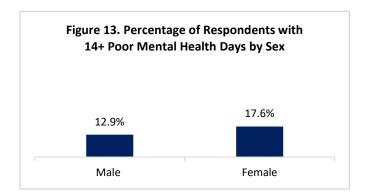
#### **Mental Health Status**

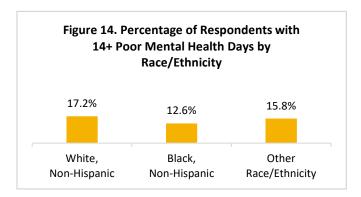
The concept of health-related quality of life (QOL) refers to the physical and mental health perceived by a person or a group of persons.<sup>3</sup> Monitoring health-related QOL in different populations can help with both identifying subgroups with poor physical or mental health and developing policies or interventions to improve their health.<sup>3</sup>

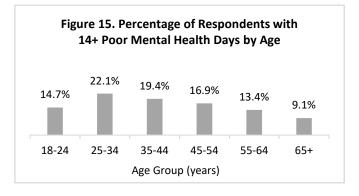
#### **Mental Health Status Question:**

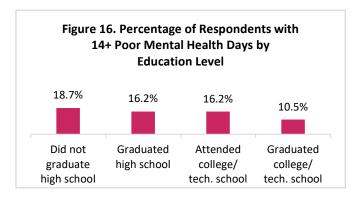
Now thinking about your mental health, which includes stress, depression, and problems with emotions, for how many days during the past 30 days was your mental health not good?

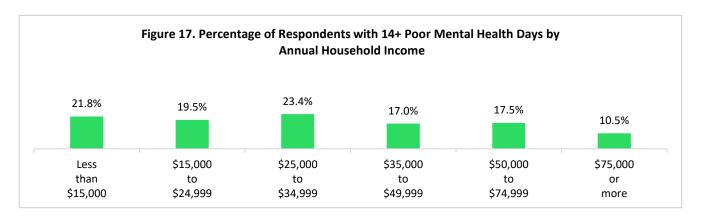
- Overall, **15.4%** of adults reported experiencing 14 or more days of poor mental health within the past 30 days.
- **Women** (17.6%) had a **significantly higher** percentage of 14+ poor mental health days compared to men (12.9%) (Fig. 13).
- The percentage of having 14+ poor mental health days was **highest** among **White, NH adults** (17.2%), followed by adults of other races/ethnicities (15.8%) and Black, NH adults (12.6%). However, there were **no statistically significant differences** in percentage among race/ethnicity groups (Fig. 14).
- The percentage of having 14+ poor mental health days was **significantly higher** among adults aged **25-34 years** (22.1%) **and 35-44 years** (19.4%) compared to adults aged 65+ years (9.1%) (Fig. 15).
- The percentage of having 14+ poor mental health days was **significantly lower** among adults who **graduated from college** (10.5%) compared to adults of all lower education level groups (Fig. 16).
- The percentage of having 14+ poor mental health days was **significantly lower** among adults who earned **\$75,000 or more** (10.5%) compared to adults of all lower annual household income groups (Fig. 17).
- The percentage of having 14+ poor mental health days **increased** from 13.7% in 2014 to 15.4% in 2023. However, the difference was **not statistically significant** (Fig. 18).











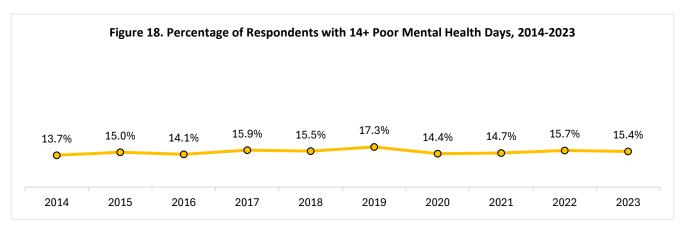


	TABLE 3. Mental Health Status					
Q: For how many days during the past 30 days was your mental health not good?						
DEMOGRAPHIC	RESPONDENTS			14 days or more		
GROUPS	TOTAL	WEIGHTED	N <sup>(1)</sup>	% <sup>(2)</sup>	C.I. (95%	
TOTAL	3,985	2,239,595	595	15.4	13.9-16.8	
Male	1,681	1,067,413	212	12.9	10.8-15.0	
Female	2,304	1,172,182	383	17.6	15.6-19.7	
White, Non-Hispanic (NH)	2,068	1,080,244	329	17.2	15.1-19.3	
Black, Non-Hispanic (NH)	1,174	677,659	157	12.6	10.0-15.1	
Other Races/Ethnicities**	176	160,065	31	15.8	9.7-21.8	
18-24 years	414	303,018	70	14.7	11.0-18.5	
25-34 years	524	346,387	109	22.1	17.3-27.0	
35-44 years	623	347,075	129	19.4	15.5-23.2	
45-54 years	616	321,723	102	16.9	12.9-20.9	
55-64 years	632	352,099	82	13.4	10.1-16.7	
65+ years	1,126	547,043	94	9.1	6.9-11.3	
Less than H.S.	277	309,486	51	18.7	12.8-24.6	
H.S. or G.E.D.	1,039	680,769	177	16.2	13.6-18.8	
Some Post-H.S.	1,230	763,042	210	16.2	13.8-18.	
College Graduate	1,425	479,261	153	10.5	8.4-12.5	
Less than \$15,000	215	126,916	56	21.8	15.7-27.9	
\$15,000-\$24,999	298	190,306	65	19.5	13.6-25.4	
\$25,000-\$34,999	406	237,021	80	23.4	17.1-29.7	
\$35,000-\$49,999	562	316,866	99	17.0	13.3-20.	
\$50,000-\$74,999	539	281,054	78	17.5	13.0-22.0	
\$75.000+	1,198	623,137	118	10.5	8.3-12.7	

<sup>(1)</sup> Unweighted number

<sup>(2)</sup> Weighted percent

<sup>\*\*</sup>Refer to Table B on p. 6 for a list of races and ethnicities included in the "Other Races and Ethnicities" demographic group.

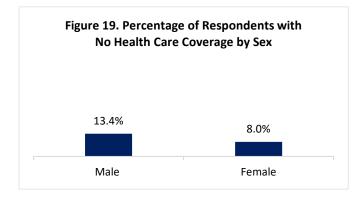
## **Health Care Coverage**

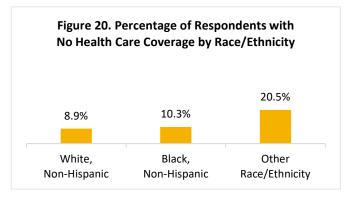
**Health Care Coverage Question:** 

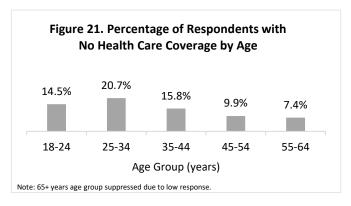
What is the primary source of your health insurance?

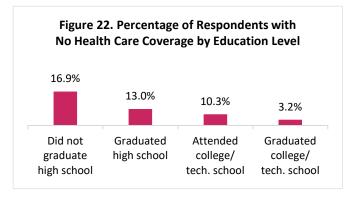
The health care coverage question is designed to estimate the number of people in the state who cannot obtain the health care they need because they are not covered by a health care plan or other health insurance. People who do not have any coverage and/or are unable to afford coverage are at higher risk of adverse health conditions.

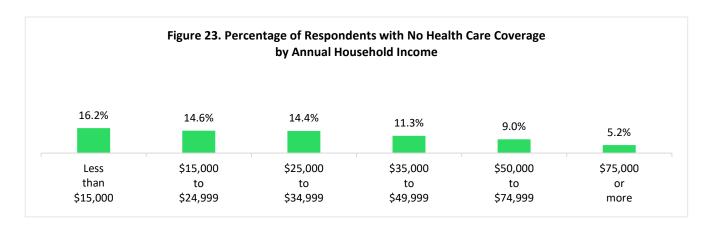
- Overall, **10.6%** of adults reported that they did not have any health care coverage.
- **Men** had a **significantly higher** percentage of non-coverage (13.4%) compared to women (8.0%) (Fig. 19).
- The percentage of non-coverage was **significantly higher** among adults of **other races/ethnicities** (20.5%) compared to White, NH adults (8.9%). The percentage among Black, NH adults (10.3%) was not significantly different from that of the White, NH or other race/ethnicity groups (Fig. 20).
- The percentage of non-coverage was **significantly higher** among adults aged **25-34 years** (20.7%) compared to adults aged 45-54 years (9.9%) and 55-64 years (7.4%). The percentage among adults aged 65+ years was suppressed due to low response (Fig. 21).
- The percentage of non-coverage increased as level of education decreased and was **significantly higher** among adults who **did not graduate high school** (16.9%), adults whose highest level of education was **high school graduation** (13.0%), **and** adults who completed **some college** (10.3%) compared to adults who graduated college (3.2%) (Fig. 22).
- The percentage of non-coverage was **significantly lower** among adults whose annual household income was **\$75,000 or more** (5.2%) compared to adults who earned less than \$15,000 (16.2%), \$15,000 to \$24,999 (14.6%), \$25,000 to \$34,999 (14.4%), and \$35,000 to \$49,999 (11.3%). (Fig. 23).
- The percentage of non-coverage **decreased significantly** from 18.8% in 2014 to 10.6% in 2023 (Fig. 24).

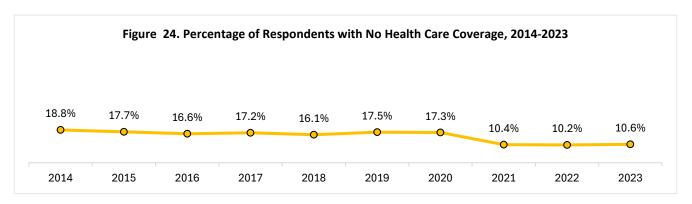












		4. Health Care Cover	· ·			
Q: What is the primary source of your health insurance?						
DEMOGRAPHIC	RESPO	ONDENTS		No Coverage		
GROUPS	TOTAL	WEIGHTED	N <sup>(1)</sup>	% <sup>(2)</sup>	C.I. (95%	
TOTAL	3,855	2,148,961	290	10.6	9.0-12.1	
Male	1,611	1,008,796	156	13.4	10.8-16.0	
Female	2,244	1,140,165	134	8.0	6.3-9.7	
White, Non-Hispanic (NH)	2,023	1,053,986	135	8.9	6.9-10.9	
Black, Non-Hispanic (NH)	1,116	633,932	81	10.3	7.4-13.1	
Other Races/Ethnicities**	169	152,657	26	20.5	12.2-28.7	
18-24 years	352	262,451	45	14.5	9.5-19.5	
25-34 years	511	336,351	74	20.7	15.4-25.9	
35-44 years	615	340,943	70	15.8	11.6-20.1	
45-54 years	612	319,856	44	9.9	5.6-14.2	
55-64 years	622	348,587	43	7.4	4.6-10.1	
65+ years	1,104	521,639	7	-	-	
Less than H.S.	275	308,893	36	16.9	11.1-22.8	
H.S. or G.E.D.	992	635,521	113	13.0	10.3-15.7	
Some Post-H.S.	1,183	730,918	92	10.3	7.6-13.0	
College Graduate	1,395	468,806	46	3.2	2.2-4.3	
Less than \$15,000	211	123,947	29	16.2	9.7-22.8	
\$15,000-\$24,999	292	182,503	30	14.6	8.0-21.2	
\$25,000-\$34,999	402	231,688	35	14.4	8.3-20.6	
\$35,000-\$49,999	544	306,802	47	11.3	7.6-15.1	
\$50,000-\$74,999	520	270,932	33	9.0	5.2-12.8	
\$75,000+	1,185	615,959	41	5.2	3.3-7.0	

<sup>(1)</sup> Unweighted number

<sup>(2)</sup> Weighted percent

<sup>\*\*</sup>Refer to Table B on p. 6 for a list of races and ethnicities included in the "Other Races and Ethnicities" demographic group.

Note: Denominator excludes respondents with do not know/refused/missing responses

Estimates with an unweighted denominator <50 or a relative standard error (RSE) > 30% are suppressed (indicated by dashes).

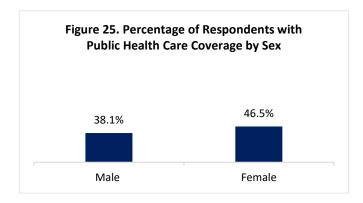
## **Source of Health Care Coverage**

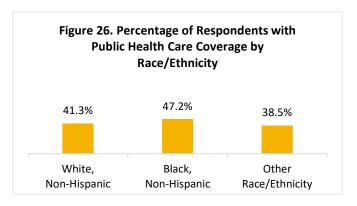
Source of Health Care Coverage Ouestion:

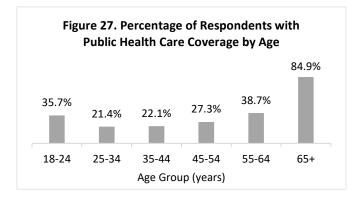
What is the primary source of your health insurance?

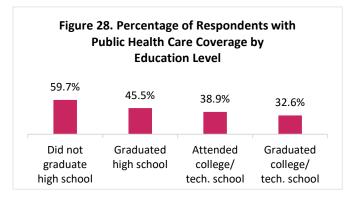
The source of health care coverage question can be used to estimate the proportion of adults in the state who have private health care coverage or public health care coverage. See Appendix A for details about how sources of health care coverage are categorized in this report.

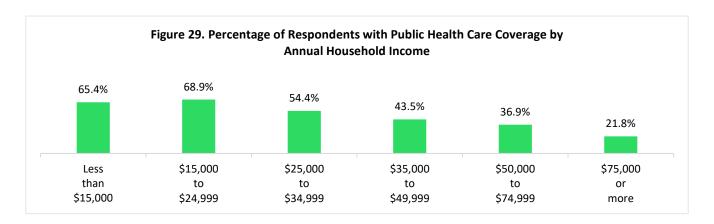
- Overall, **42.5%** of adults reported having public health care coverage.
- **Women** (46.5%) had a **significantly higher** percentage of having public health care coverage than men (38.1%) (Fig. 25).
- The percentage of having public health care coverage was **highest** among **Black**, **NH adults** (47.2%), followed by White, NH adults (41.3%), and adults of other races/ethnicities (38.5%). There were **no statistically significant differences** in percentage among race/ethnicity groups (Fig. 26).
- The percentage of having public health care coverage was **significantly higher** among adults aged **65+ years** (84.9%) compared to adults of all younger age groups (Fig. 27).
- The percentage of having public health care coverage increased as level of education decreased and was **significantly higher** among adults who **did not graduate high school** (59.7%) compared to adults whose highest level of education was high school graduation (45.5%), adults who completed some college post-high school (38.9%), and who graduated college (32.6%) (Fig. 28).
- Overall, the percentage of having public health care coverage increased as income decreased and was **significantly higher** among adults who earned **less than \$15,000** (65.4%) **and \$15,000 to \$24,999** (68.9%) compared to adults who earned \$35,000 to \$49,999 (43.5%), \$50,000 to \$74,999 (36.9%), and \$75,000 or more (21.8%) (Fig. 29).
- The percentage of having public health care coverage was **similar** between 2018 (42.9%) and 2023 (42.5%) (Fig. 30).

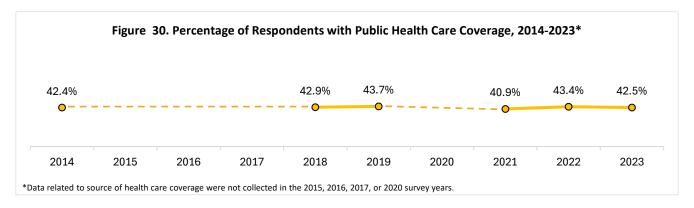












		ource of Health Care			
Q: What is the primary source of your health care coverage?					
DEMOGRAPHIC		ONDENTS		Public	_
GROUPS	TOTAL	WEIGHTED	N <sup>(1)</sup>	% <sup>(2)</sup>	C.I. (95%
TOTAL	3,855	2,148,961	1,685	42.5	40.4-44.6
Male	1,611	1,008,796	641	38.1	35.0-41.
Female	2,244	1,140,165	1,044	46.5	43.6-49.3
White, Non-Hispanic (NH)	2,023	1,053,986	866	41.3	38.4-44.1
Black, Non-Hispanic (NH)	1,116	633,932	533	47.2	43.2-51.3
Other Races/Ethnicities**	169	152,657	61	38.5	28.9-48.0
18-24 years	352	262,451	110	35.7	28.9-42.5
25-34 years	511	336,351	108	21.4	17.0-25.8
35-44 years	615	340,943	136	22.1	18.1-26.1
45-54 years	612	319,856	152	27.3	22.2-32.4
55-64 years	622	348,587	219	38.7	33.0-44.5
65+ years	1,104	521,639	944	84.9	82.1-87.7
Less than H.S.	275	308,893	175	59.7	52.3-67.
H.S. or G.E.D.	992	635,521	498	45.5	41.5-49.5
Some Post-H.S.	1,183	730,918	509	38.9	35.5-42.3
College Graduate	1,395	468,806	497	32.6	29.6-35.7
Less than \$15,000	211	123,947	152	65.4	56.7-74.
\$15,000-\$24,999	292	182,503	200	68.9	61.0-76.7
\$25,000-\$34,999	402	231,688	231	54.4	46.9-61.9
\$35,000-\$49,999	544	306,802	242	43.5	38.1-48.9
\$50,000-\$74,999	520	270,932	199	36.9	31.5-42.3
\$75,000+	1,185	615,959	284	21.8	18.9-24.7

<sup>(1)</sup> Unweighted number

<sup>(2)</sup> Weighted percent

<sup>\*\*</sup>Refer to Table B on p. 6 for a list of races and ethnicities included in the "Other Races and Ethnicities" demographic group.

#### **Health Care Access**

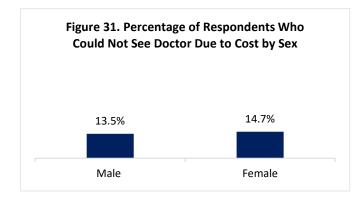
**Health Care Access Question:** 

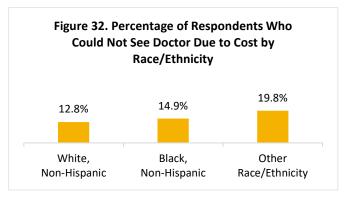
Was there a time in the past 12 months when you needed to see a doctor but could not because you could not afford it?

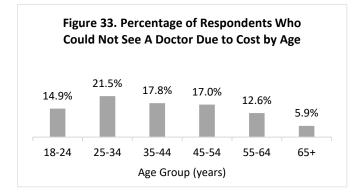
Non-affordability of health care services can have a negative impact on its utilization.<sup>4</sup> Results of the 2022 National Health Interview Survey showed

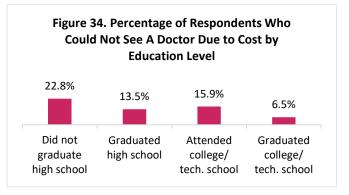
that, due to cost, in the preceding 12 months, 6.3% of adults in the United States did not get medical care they needed, 5.0% did not get mental health care they needed, and 6.8% did not take their medication as prescribed to save money.

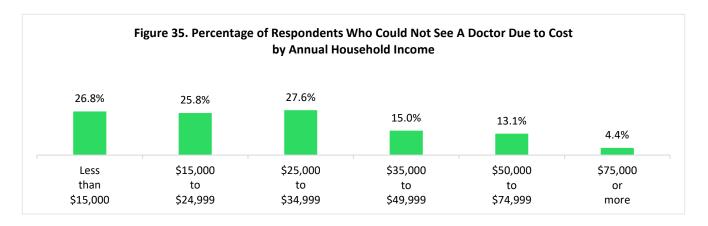
- Overall, **14.1%** of adults reported that they had forgone seeing a doctor due to costs in the last 12 months.
- **Women** (14.7%) had a **higher** rate of not seeing a doctor due to cost than men (13.5%); however, the difference was **not statistically significant** (Fig. 31).
- The percentage of not seeing a doctor due to cost was **highest** among adults of **other races/ethnicities** (19.8%), followed by Black, NH adults (14.9%) and White, NH adults (12.8%). There were **no statistically significant differences** in percentage among race/ethnicity groups (Fig. 32).
- The percentage of not seeing a doctor due to cost was **significantly lower** among those aged **65+ years** (5.9%) compared to adults of all younger age groups (Fig. 33).
- The percentage of not seeing a doctor due to cost was **significantly higher** among adults who **did not graduate high school** (22.8%) compared to adults whose highest level of education was high school graduation (13.5%) and who graduated college (6.5%) (Fig. 34).
- The percentage of not seeing a doctor due to cost was **significantly higher** among adults who earned **less than \$15,000** (26.8%) compared to adults who earned \$35,000 to \$49,999 (15.0%), \$50,000 to \$74,999 (13.1%), and \$75,000 or more (4.4%) (Fig. 35).
- The percentage of not seeing a doctor due to cost **decreased significantly** from 19.4% in 2014 to 14.1% in 2023 (Fig. 36).











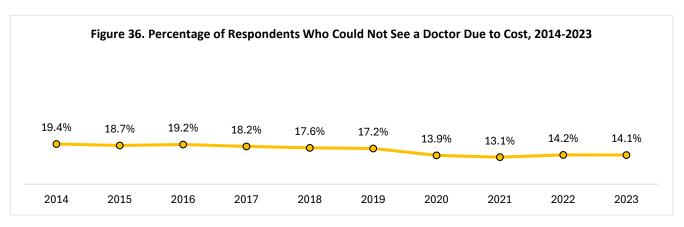


	TABLE 6. Health Care Access					
Q: Was there a time in the past 12 months when you needed to see a doctor but could not because of cost?						
DEMOGRAPHIC	RESPO	ONDENTS		Yes		
GROUPS	TOTAL	WEIGHTED	N <sup>(1)</sup>	% <sup>(2)</sup>	C.I. (95%	
TOTAL	4,053	2,280,246	517	14.1	12.6-15.	
Male	1,706	1,083,625	191	13.5	11.2-15.	
Female	2,347	1,196,621	326	14.7	12.6-16.	
White, Non-Hispanic (NH)	2.111	1,107,170	225	12.8	10.7-15.	
Black, Non-Hispanic (NH)	1,191	687,652	183	14.9	12.0-17.	
Other Races/Ethnicities**	179	162,485	32	19.8	12.3-27.	
18-24 years	422	310,676	59	14.9	9.8-20.0	
25-34 years	530	350.075	99	21.5	16.8-26.	
35-44 years	630	350,935	103	17.8	13.8-21.	
45-54 years	627	326,894	101	17.0	12.2-21.	
55-64 years	649	365,871	87	12.6	9.4-15.8	
65+ years	1,144	552,912	60	5.9	3.9-7.9	
Less than H.S.	290	324,356	58	22.8	16.2-29.	
H.S. or G.E.D.	1,064	693,743	155	13.5	11.1-15.	
Some Post-H.S.	1,250	774,413	193	15.9	13.2-18.	
College Graduate	1,436	480,990	110	6.5	4.9-8.1	
Less than \$15,000	222	131,331	61	26.8	19.5-34.	
\$15,000-\$24,999	307	194,106	70	25.8	17.6-34.	
\$25,000-\$34,999	412	239,972	103	27.6	21.4-33.	
\$35,000-\$49,999	569	319,596	80	15.0	11.2-18.	
\$50,000-\$74,999	543	282,673	65	13.1	9.0-17.2	
\$75,000+	1,210	630,915	50	4.4	3.0-5.8	

<sup>(1)</sup> Unweighted number

<sup>(2)</sup> Weighted percent

<sup>\*\*</sup>Refer to Table B on p. 6 for a list of races and ethnicities included in the "Other Races and Ethnicities" demographic group.

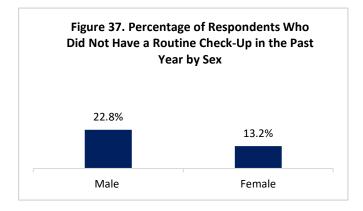
# **Routine Check-Up**

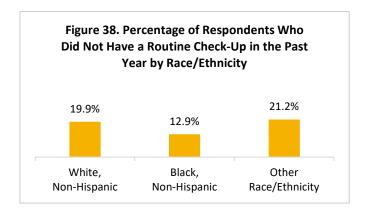
Routine Check-Up Question:

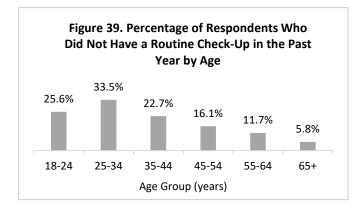
About how long has it been since you last visited a doctor for a routine check-up?

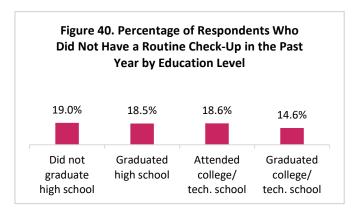
A routine check-up is a general physical exam and is not an exam for a specific injury, illness, or condition.<sup>6</sup> These visits may focus on physical exams and preventive care, such as screening tests, services like vaccinations, and education about health topics.<sup>7</sup>

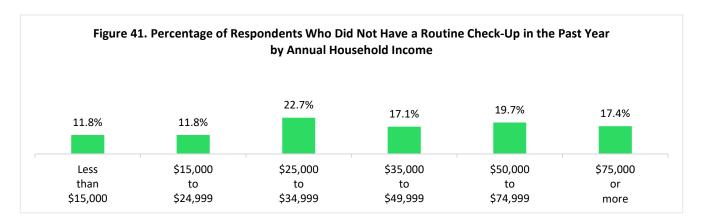
- Overall, 17.7% of adults reported that they had not had a routine check-up in the past year.
- **Men** (22.8%) had a **significantly higher** percentage of not having a routine check-up in the past year compared to women (13.2%) (Fig. 37).
- The percentage of not having a routine check-up in the past year was **significantly higher** among **White**, **NH adults** (19.9%) compared to Black, NH adults (12.9%). The percentage among adults of other races/ ethnicities (21.2%) was not significantly different from that of the White, NH or Black, NH groups (Fig. 38).
- The percentage of not having a routine check-up in the past year was **significantly higher** among adults aged **18-24 years** (25.6%), **25-34 years** (33.5%), **and 35-44 years** (22.7%) compared to adults aged 55-64 years (11.7%) and 65+ years (5.8%) (Fig. 39).
- The percentage of not having a routine check-up in the past year was **highest** among adults who **did not graduate high school** (19.0%). However, there were **no statistically significant differences** in percentage among education level groups (Fig. 40).
- The percentage of not having a routine check-up in the past year was **highest** among adults whose annual household income was \$25,000 to \$34,999 (22.7%). However, there were **no statistically significant differences** in the percentage of not having a routine check-up in the past year among annual household income groups (Fig. 41).
- The percentage of not having a routine check-up in the past year **decreased significantly** from 27.4% in 2014 to 17.7% in 2023 (Fig. 42).











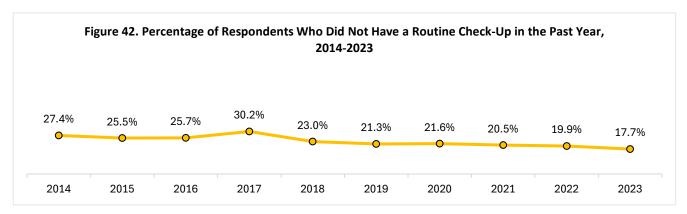


TABLE 7. Routine Check-Up  Q: About how long has it been since you last visited a doctor for a routine checkup?						
DEMOGRAPHIC		ONDENTS	Longer than one year or never			
GROUPS	TOTAL	WEIGHTED	N <sup>(1)</sup>	% <sup>(2)</sup>	C.I. (95%	
TOTAL	3,979	2,234,649	635	17.7	16.1-19.4	
Male	1,670	1,062,438	352	22.8	20.0-25.6	
Female	2,309	1,172,211	283	13.2	11.3-15.0	
White, Non-Hispanic (NH)	2,068	1,085,454	372	19.9	17.5-22.3	
Black, Non-Hispanic (NH)	1,177	674,928	131	12.9	10.0-15.7	
Other Races/Ethnicities**	172	157,281	42	21.2	13.9-28.4	
18-24 years	401	294,309	107	25.6	20.4-30.8	
25-34 years	522	344,681	153	33.5	28.1-38.9	
35-44 years	619	344,034	120	22.7	18.2-27.2	
45-54 years	617	322,533	101	16.1	11.5-20.7	
55-64 years	645	363,353	85	11.7	8.6-14.8	
65+ years	1,127	544,498	65	5.8	4.0-7.6	
Less than H.S.	280	313,882	43	19.0	13.1-24.9	
H.S. or G.E.D.	1,032	673,624	181	18.5	15.5-21.5	
Some Post-H.S.	1,231	762,093	204	18.6	15.7-21.6	
College Graduate	1,424	478,776	206	14.6	12.3-16.9	
Less than \$15,000	217	127,810	25	11.8	6.7-17.0	
\$15,000-\$24,999	299	189,826	41	11.8	6.8-16.9	
\$25,000-\$34,999	403	234,937	76	22.7	16.3-29.0	
\$35,000-\$49,999	561	312,534	85	17.1	13.0-21.2	
\$50,000-\$74,999	532	277,835	92	19.7	15.1-24.2	
\$75,000+	1,201	627,514	188	17.4	14.6-20.3	

<sup>(1)</sup> Unweighted number

<sup>(2)</sup> Weighted percent

<sup>\*\*</sup>Refer to Table B on p. 6 for a list of races and ethnicities included in the "Other Races and Ethnicities" demographic group.

# **Current Binge Drinking**

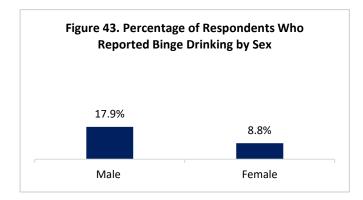
Extensive alcohol use has been linked to a substantial proportion of injuries and deaths from motor vehicle crashes, falls, fires and drownings.<sup>8</sup> Alcohol use also is a factor in homicides, suicides, and sexual assaults.<sup>8</sup> According to the

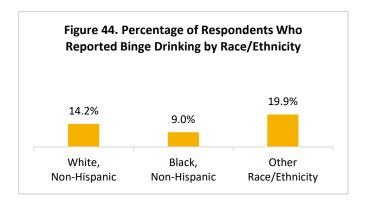
**Alcohol Consumption Question:** 

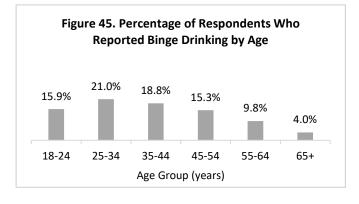
Considering all types of alcoholic beverages, how many times during the past 30 days did you have 5 or more drinks on an occasion (for men) or 4 or more drinks on occasion (for women)?

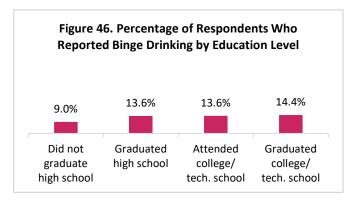
National Highway Traffic Safety Administration, alcohol-impaired driving was involved in 20% of all crash fatalities in Mississippi and 31% in the U.S. in 2021.<sup>9</sup>

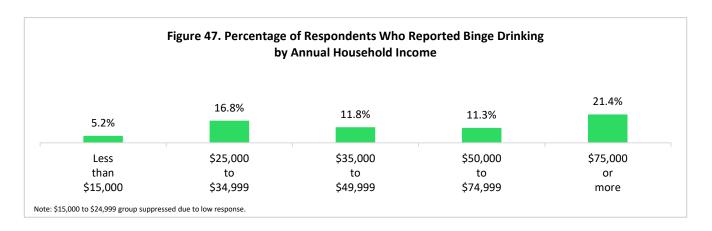
- Overall, **13.1%** of adults reported binge drinking in the past 30 days.
- **Men** (17.9%) had a **significantly higher** percentage of binge drinking compared to women (8.8%) (Fig. 43).
- The percentage of binge drinking was **significantly higher** among adults of other races/ethnicities (19.9%) and White, NH adults (14.2%) compared to Black, NH adults (9.0%) (Fig. 44).
- The percentage of binge drinking was **significantly lower** among adults aged **65+ years** (4.0%) compared to adults in all younger age groups (Fig. 45).
- The percentage of binge drinking was **highest** among adults who **graduated college** (14.4%); however, there were **no significant differences** in percentage of binge drinking among education level groups (Fig. 46).
- The percentage of binge drinking was **significantly higher** among adults whose annual household income was **\$75,000 or more** (21.4%) compared to adults who earned less than \$15,000 (5.2%), \$35,000 to \$49,999 (11.8%), and \$50,000 to \$74,999 (11.3%). The percentage among adults who earned \$15,000 to \$24,999 was suppressed due to low response (Fig. 47).
- The percentage of binge drinking **increased** from 12.8% in 2014 to 13.1% in 2023; however, the difference was **not statistically significant** (Fig. 48).

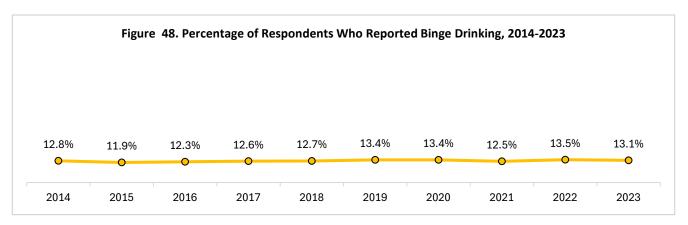












RESPO	UNIDENTS I	Binge drinking = males having 5+ drinks on one occasion, females having 4+ drinks on one occasion  DEMOGRAPHIC RESPONDENTS Yes					
			Yes	_			
TOTAL	WEIGHTED	N <sup>(1)</sup>	% <sup>(2)</sup>	C.I. (95%			
3,838	2,145,484	462	13.1	11.6-14.5			
1,607	1,007,098	287	17.9	15.5-20.3			
2,231	1,138,386	175	8.8	7.1-10.6			
2,024	1,061,472	275	14.2	12.2-16.			
1,115	630,213	83	9.0	6.5-11.5			
167	152,757	30	19.9	11.9-28.			
386	285,661	71	15.9	11.5-20.3			
488	321,229	96	21.0	16.2-25.			
598	333,740	104	18.8	14.7-22.			
606	314,225	87	15.3	11.2-19.4			
616	347,545	61	9.8	6.7-12.9			
1,101	523,963	39	4.0	2.4-5.7			
275	307,517	21	9.0	4.5-13.5			
988	641,212	109	13.6	10.7-16.			
1,175	724,358	148	13.6	11.1-16.			
1,390	467,368	183	14.4	12.0-16.			
215	126,532	14	5.2	2.3-8.1			
296	181,489	11	-	-			
391	225,935	45	16.8	10.7-22.			
545	303,671	57	11.8	7.7-15.8			
522	269,947	52	11.3	7.9-14.7			
	1,607 2,231  2,024 1,115 167  386 488 598 606 616 1,101  275 988 1,175 1,390  215 296 391 545	1,607     1,007,098       2,231     1,138,386       2,024     1,061,472       1,115     630,213       167     152,757       386     285,661       488     321,229       598     333,740       606     314,225       616     347,545       1,101     523,963       275     307,517       988     641,212       1,175     724,358       1,390     467,368       215     126,532       296     181,489       391     225,935       545     303,671       522     269,947	1,607         1,007,098         287           2,231         1,138,386         175           2,024         1,061,472         275           1,115         630,213         83           167         152,757         30           386         285,661         71           488         321,229         96           598         333,740         104           606         314,225         87           616         347,545         61           1,101         523,963         39           275         307,517         21           988         641,212         109           1,175         724,358         148           1,390         467,368         183           215         126,532         14           296         181,489         11           391         225,935         45           545         303,671         57           522         269,947         52	1,607         1,007,098         287         17.9           2,231         1,138,386         175         8.8           2,024         1,061,472         275         14.2           1,115         630,213         83         9.0           167         152,757         30         19.9           386         285,661         71         15.9           488         321,229         96         21.0           598         333,740         104         18.8           606         314,225         87         15.3           616         347,545         61         9.8           1,101         523,963         39         4.0           275         307,517         21         9.0           988         641,212         109         13.6           1,175         724,358         148         13.6           1,390         467,368         183         14.4           215         126,532         14         5.2           296         181,489         11         -           391         225,935         45         16.8           545         303,671         57         11.8			

<sup>(1)</sup> Unweighted number

Estimates with an unweighted denominator <50 or a relative standard error (RSE) > 30% are suppressed (indicated by dashes).

<sup>(2)</sup> Weighted percent

<sup>\*\*</sup>Refer to Table B on p. 6 for a list of races and ethnicities included in the "Other Races and Ethnicities" demographic group.

Note: Denominator excludes respondents with do not know/refused/missing responses

## **Current Cigarette Smoking**

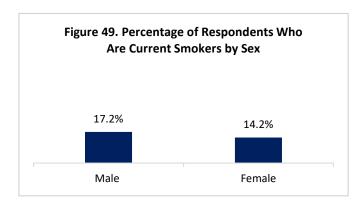
**Cigarette Smoking Questions:** 

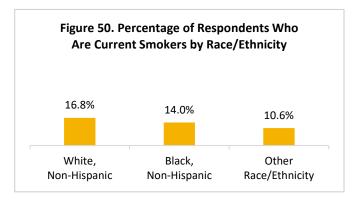
(1) Have you smoked at least 100 cigarettes in your entire life? If Yes,(2) Do you now smoke cigarettes every day, some days, or not at all?

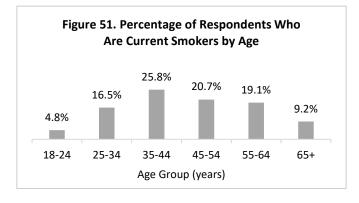
Tobacco use is the leading preventable cause of death in the U.S.<sup>10</sup> Approximately 5,400 adults in Mississippi die from smoking-related illnesses

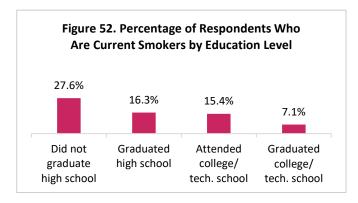
every year. Health problems related to smoking cigarettes include cancers, lung disease, and heart disease. Mississippi's rate of new cases of lung cancer is higher than the national rate (70.3 vs. 54.6 per 100,000). Over the past decade the percentage of adult smokers has decreased, although other nicotine-delivery systems (e.g., e-cigarettes) have become popular.

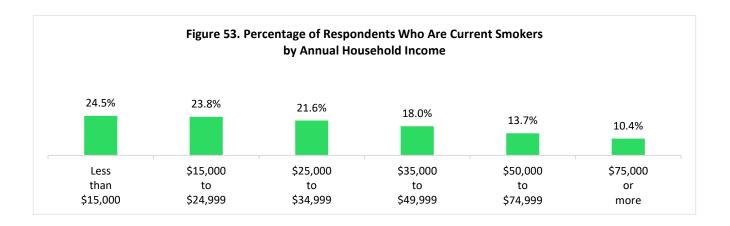
- Overall, **15.6%** of adults were current cigarette smokers.
- **Men** (17.2%) had a **higher** percentage of smoking compared to women (14.2%). However, the difference was **not statistically significant** (Fig. 49).
- The percentage of current smoking was **highest** among **White**, **NH** adults (16.8%), followed by Black, NH adults (14.0%) and adults of other races/ethnicities (10.6%). There were **no significant differences** in the percentage of current smoking among the race/ethnicity groups (Fig. 50).
- The percentage of current smoking was **significantly lower** among adults aged **18-24 years** (4.8%) compared to adults of older age groups (Fig. 51).
- The percentage of current smoking increased as education level decreased and was **significantly higher** among adults who **did not graduate high school** (27.6%) compared to adults of all higher education level groups (Fig. 52).
- The percentage of current smoking increased as annual household income decreased and was **significantly higher** among adults who earned **less than \$15,000** (24.5%) **and \$15,000 to \$24,999** (23.8%) compared to adults who earned \$75,000 or more (10.4%) (Fig. 53).
- The percentage of adults who smoked cigarettes **decreased significantly** from 23.0% in 2014 to 15.6% in 2023 (Fig. 54).











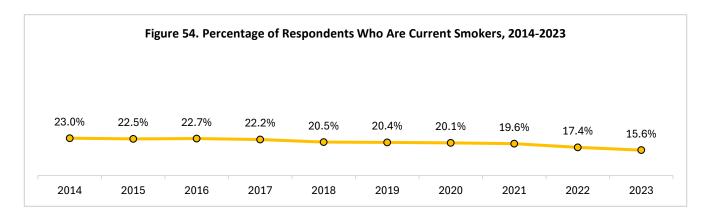


TABLE 9. Current Smoker  Has smoked at least 100 cigarettes in entire life and now smokes every day or some days						
GROUPS	TOTAL	WEIGHTED	N <sup>(1)</sup>	% <sup>(2)</sup>	C.I. (95%	
TOTAL	3,935	2,208,818	574	15.6	14.1-17.2	
Male	1.650	1,045,945	264	17.2	14.7-19.8	
Female	2,285	1,162,873	310	14.2	12.3-16.0	
White, Non-Hispanic (NH)	2.066	1,085,778	320	16.8	14.6-19.1	
Black, Non-Hispanic (NH)	1,150	660,489	154	14.0	11.2-16.8	
Other Races/Ethnicities**	171	155,173	20	10.6	5.5-15.8	
18-24 years	405	298,004	22	4.8	2.5-7.0	
25-34 years	514	337,094	77	16.5	11.9-21.2	
35-44 years	611	340,062	134	25.8	21.3-30.4	
45-54 years	618	322,295	109	20.7	15.8-25.6	
55-64 years	634	356,799	124	19.1	15.4-22.9	
65+ years	1,112	536,408	103	9.2	7.0-11.5	
Less than H.S.	282	315,464	80	27.6	21.2-33.9	
H.S. or G.E.D.	1,028	670,016	185	16.3	13.7-19.0	
Some Post-H.S.	1,214	746,571	194	15.4	12.8-18.0	
College Graduate	1,404	472,861	114	7.1	5.5-8.6	
Less than \$15,000	218	128,049	55	24.5	17.6-31.4	
\$15,000-\$24,999	299	189,036	79	23.8	17.3-30.4	
\$25,000-\$34,999	404	233,542	79	21.6	15.3-27.8	
\$35,000-\$49,999	560	315,618	92	18.0	14.0-22.0	
\$50,000-\$74,999	531	275,448	64	13.7	9.8-17.5	
\$75,000+	1,199	625,314	112	10.4	8.1-12.7	

<sup>(1)</sup> Unweighted number

<sup>(2)</sup> Weighted percent

<sup>\*\*</sup>Refer to Table B on p. 6 for a list of races and ethnicities included in the "Other Races and Ethnicities" demographic group.

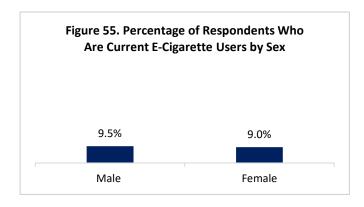
## **Current E-Cigarette Use**

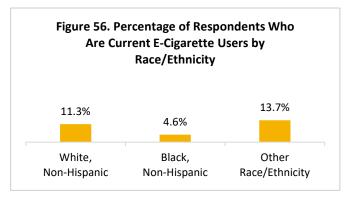
Electronic cigarettes, or e-cigarettes, and other electronic vaping products have become more popular in recent years. In 2021, 4.5% of adults in the United States currently used e-cigarettes. Although e-cigarette use is thought to be less harmful than regular cigarettes, the aerosol produced by e-cigarettes is not harmless and may contain substances such as nicotine, lead, and cancer-causing agents. 12

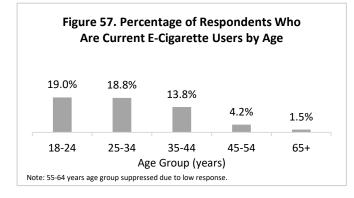
**E-Cigarette Use Question:** 

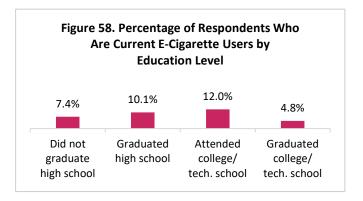
Would you say you have never used ecigarettes or other electronic vaping products in your entire life or now use them every day, use them some days, or used them in the past but do not currently use them at all?

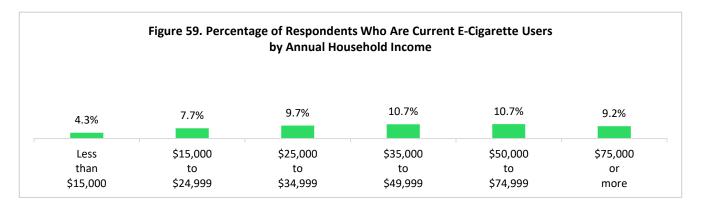
- Overall, **9.2%** of adults reported current e-cigarette use.
- **Men** (9.5%) had a **higher** percentage of current e-cigarette use compared to women (9.0%); however, the difference was **not statistically significant** (Fig. 55).
- The percentage of current e-cigarette use was **significantly higher** among **White, NH adults** (11.3%) and adults of **other races/ethnicities** (13.7%) compared to Black, NH adults (4.6%) (Fig. 56).
- The percentage of current e-cigarette use increased as age decreased and was **significantly higher** among adults aged **18-24 years** (19.0%), **25-34 years** (18.8%), **and 35-44 years** (13.8%) compared to adults aged 45-54 years (4.2%) and 65+ years (1.5%). The percentage among adults aged 55-64 years was suppressed due to low response (Fig. 57).
- The percentage of current e-cigarette use was **significantly higher** among adults whose highest level of education was **high school graduation** (10.1%) **and** adults who completed **some college** (12.0%) compared to adults who graduated from college (4.8%) (Fig. 58).
- The percentage of current e-cigarette use was **significantly higher** among adults whose annual household income was **\$35,000 to \$49,999** (10.7%), **\$50,000 to \$74,999** (10.7%), **and \$75,000 or more** (9.2%) compared to adults who earned less than \$15,000 (4.3%) (Fig. 59).
- The percentage of current e-cigarette use **increased significantly** from 4.7% in 2016 to 9.2% in 2023 (Fig. 60).











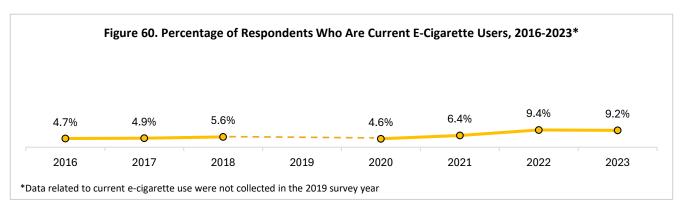


TABLE 10. Current E-Cigarette Use Use e-cigarettes or other electronic vaping products every day or some days						
GROUPS	TOTAL	WEIGHTED	N <sup>(1)</sup>	% <sup>(2)</sup>	C.I. (95%	
TOTAL	3,950	2,211,390	329	9.2	8.0-10.4	
Male	1,658	1,047,763	158	9.5	7.8-11.2	
Female	2,292	1,163,627	171	9.0	7.2-10.7	
White, Non-Hispanic (NH)	2,078	1,089,545	221	11.3	9.5-13.0	
Black, Non-Hispanic (NH)	1,151	659,588	43	4.6	2.8-6.4	
Other Races/Ethnicities**	171	153,268	20	13.7	7.0-20.4	
40.04	403	1 007.005	80	19.0	14.3-23.7	
18-24 years	403 517	297,235	98			
25-34 years		338,157		18.8	14.4-23.1	
35-44 years	614	341,191	79	13.8	10.3-17.2	
45-54 years	620	322,807	32	4.2	2.4-5.9	
55-64 years	635	357,111	23	-	-	
65+ years	1,118	536,016	17	1.5	0.7-2.4	
Less than H.S.	283	314,459	16	7.4	3.2-11.7	
H.S. or G.E.D.	1,029	670,683	100	10.1	7.9-12.4	
Some Post-H.S.	1,216	746,392	141	12.0	9.8-14.3	
College Graduate	1,412	474,826	72	4.8	3.5-6.1	
Less than \$15,000	218	128,049	14	4.3	1.9-6.7	
\$15,000-\$24,999	304	191,272	24	7.7	3.4-11.9	
\$25,000-\$34,999	405	233,404	33	9.7	5.2-14.1	
\$35,000-\$49,999	561	314,745	55	10.7	7.4-14.0	
\$50,000-\$74,999	536	277,021	50	10.7	7.4-14.1	
\$75,000+	1,198	625,134	94	9.2	7.0-11.3	

<sup>(1)</sup> Unweighted number

<sup>(2)</sup> Weighted percent

<sup>\*\*</sup>Refer to Table B on p. 6 for a list of races and ethnicities included in the "Other Races and Ethnicities" demographic group.

 $<sup>{\</sup>bf Note: Denominator\ excludes\ respondents\ with\ do\ not\ know/refused/missing\ responses}$ 

Estimates with an unweighted denominator <50 or a relative standard error (RSE) > 30% are suppressed (indicated by dashes).

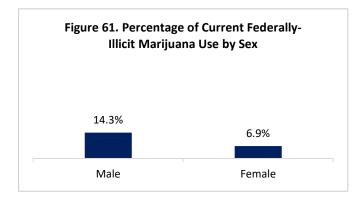
## **Current Federally-Illicit Marijuana Use**

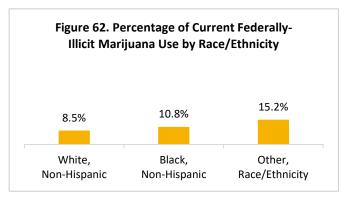
**Marijuana Use Question:** 

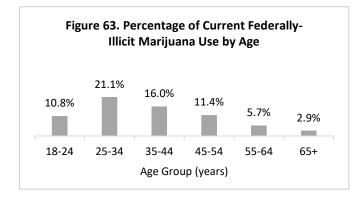
During the past 30 days, on how many days did you use marijuana or cannabis?

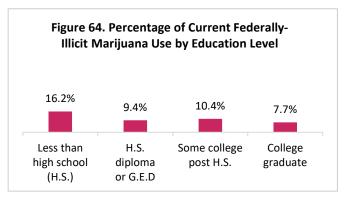
Marijuana is the most commonly used federally illicit drug in the U.S., with approximately 61.9 million people using it in 2022. Marijuana use can affect brain health, cardiovascular health, respiratory health, and mental health. Marijuana use can affect brain health, cardiovascular health, respiratory health, and mental health.

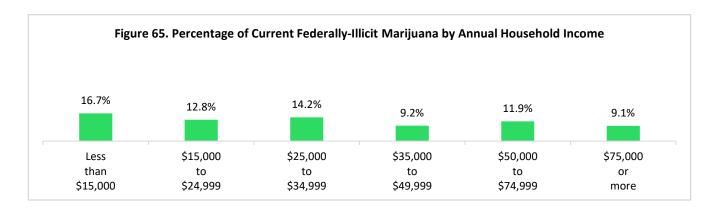
- Overall, **10.4%** of adults reported current marijuana use.
- **Men** (14.3%) had a **significantly higher** percentage of current marijuana use compared to women (6.9%) (Fig. 61)
- The percentage of current marijuana use was **highest** among adults of **other races/ethnicities** (15.2%), followed by Black, NH adults (10.8%), and White, NH adults (8.5%). However, there were **no statistically significant differences** in percentage among race/ethnicity groups (Fig. 62).
- The percentage of current marijuana use was **significantly higher** among adults aged **25-34 years** (21.1%) **and 35-44 years** (16.0%) compared to adults aged 55-64 years (5.7%) and 65+ years (2.9%) (Fig. 63).
- Overall, the percentage of current marijuana use increased as level of education decreased and was **significantly higher** among adults who **did not graduate high school** (16.2%) compared to adults who graduated college (7.7%) (Fig. 64).
- Overall, the percentage of current marijuana use increased as annual household income decreased and
  was highest among adults whose annual household income was less than \$15,000 (16.7%). However,
  there were no significant differences in percentage among annual household income groups (Fig. 65).
- The percentage of current marijuana use **increased significantly** from 5.9% in 2016 to 10.4% in 2023 (Fig. 66).

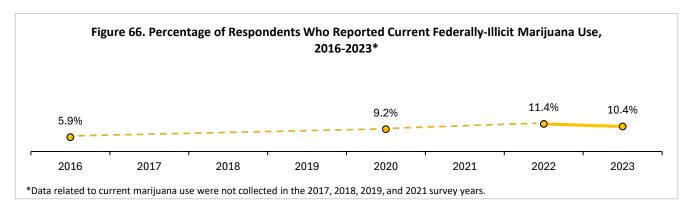












Q: During the past 30 days, on how many days did you use marijuana or cannabis?						
DEMOGRAPHIC	RESPO	ONDENTS		1 to 30 days		
GROUPS	TOTAL	WEIGHTED	N <sup>(1)</sup>	% <sup>(2)</sup>	C.I. (95%	
TOTAL	3,662	2,016,196	338	10.4	9.0-11.7	
Male	1,525	947,994	195	14.3	11.9-16.7	
Female	2,137	1,068,202	143	6.9	5.5-8.2	
White, Non-Hispanic (NH)	1,929	1,003,686	158	8.5	6.9-10.2	
Black, Non-Hispanic (NH)	1,066	599,920	100	10.8	8.2-13.4	
Other Races/Ethnicities**	142	116,844	20	15.2	7.9-22.6	
18-24 years	365	260,986	40	10.8	7.2-14.5	
25-34 years	473	297,894	84	21.1	16.0-26.3	
35-44 years	554	302,387	81	16.0	12.1-20.0	
45-54 years	587	306,886	59	11.4	7.7-15.0	
55-64 years	593	330,618	39	5.7	3.7-7.7	
65+ years	1,050	498,834	34	2.9	1.7-4.1	
Less than H.S.	259	284,892	35	16.2	10.2-22.	
H.S. or G.E.D.	946	600,588	92	9.4	7.3-11.4	
Some Post-H.S.	1,133	694,077	123	10.4	8.4-12.4	
College Graduate	1,316	432,260	87	7.7	5.7-9.8	
Less than \$15,000	198	112,480	31	16.7	10.3-23.0	
\$15,000-\$24,999	277	162,040	34	12.8	7.6-18.1	
\$25,000-\$34,999	370	214,636	37	14.2	8.1-20.3	
\$35,000-\$49,999	520	283,772	46	9.2	6.2-12.3	
\$50,000-\$74,999	505	258,256	51	11.9	7.7-16.0	

<sup>(1)</sup> Unweighted number

<sup>(2)</sup> Weighted percent

<sup>\*\*</sup>Refer to Table B on p. 6 for a list of races and ethnicities included in the "Other Races and Ethnicities" demographic group.

#### **Exercise**

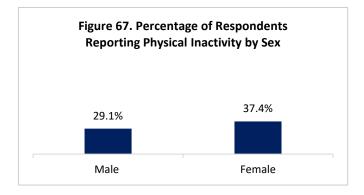
Regular physical activity helps to maintain the functional independence of older adults and enhances the quality of life for people of all ages. Adequate physical activity levels can prevent 1 in 10 premature deaths, as well as 1 in 8

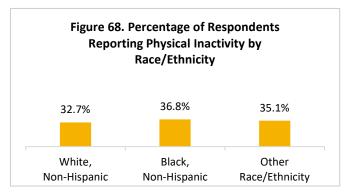
**Exercise Question:** 

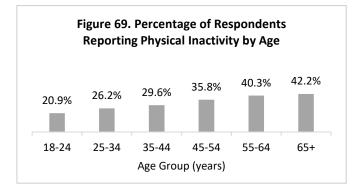
During the past month, other than your regular job, did you participate in any physical activities or exercises such as running, calisthenics, golf, gardening, or walking for exercise?

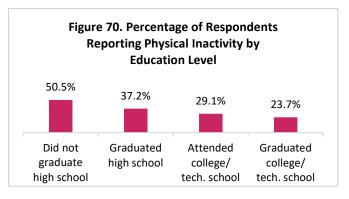
cases of breast cancer, 1 in 12 cases of diabetes, and 1 in 15 cases of heart disease. <sup>14</sup> The role of exercise in preventing coronary heart disease (CHD) is of particular importance, given that heart disease was the leading cause of death in the U.S. and Mississippi in 2022. <sup>15,16</sup>

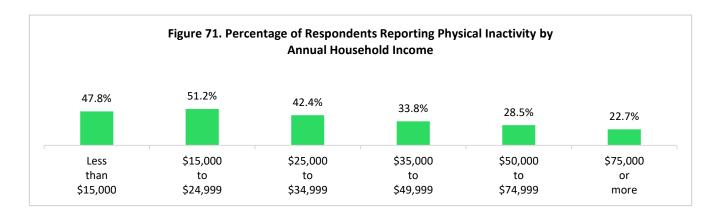
- Overall, **33.4%** of adults did not participate in any exercise outside of work in the past 30 days.
- **Women** (37.4%) reported a **significantly higher** percentage of physical inactivity compared to men (29.1%) (Fig. 67).
- The percentage of physical inactivity was **highest** among **Black**, **NH** adults (36.8%) followed by adults of other races/ethnicities (35.1%) and White, NH adults (32.7%). There were **no significant differences** in percentage among race/ethnicity groups (Fig. 68).
- The percentage of physical inactivity increased as age increased and was **significantly higher** among adults aged **55-64 years** (40.3%) **and 65+ years** (42.2%) compared to adults aged 18-24 years (20.9%), 25-34 years (26.2%), and 35-44 years (29.6%) (Fig. 69).
- The percentage of physical inactivity increased as level of education decreased and was **significantly higher** among adults who **did not graduate from high school** (50.5%) **and** those whose highest level of education was **high school graduation** (37.2%) compared to adults with higher education levels (Fig. 70).
- Overall, the percentage of physical inactivity increased as income decreased and was **significantly higher** among adults who earned **less than \$15,000** (47.8%) **and \$15,000 to \$24,999** (51.2%) compared to adults who earned \$35,000 to \$49,999 (33.8%) and adults in higher income groups (Fig. 71).
- The percentage of physical inactivity **increased** from 31.6% in 2014 to 33.4% in 2023; however, the difference was **not statistically significant** (Fig. 72).











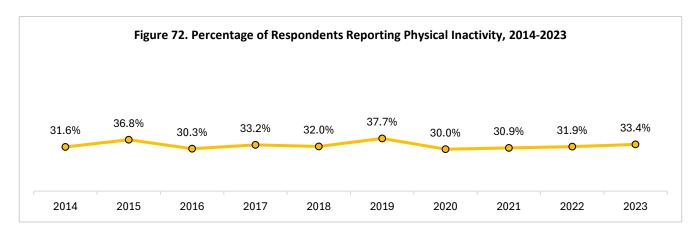


TABLE 12. Exercise (Past Month)  Q: Other than your regular job, did you participate in any physical activities or exercises?						
DEMOGRAPHIC	RESPONDENTS			No		
GROUPS	TOTAL	WEIGHTED	N <sup>(1)</sup>	% <sup>(2)</sup>	C.I. (95%	
TOTAL	4,056	2,280,821	1,321	33.4	31.5-35.	
Male	1,711	1,087,304	458	29.1	26.2-32.	
Female	2,345	1,193,516	863	37.4	34.6-40.	
White, Non-Hispanic (NH)	2,111	1,106,971	652	32.7	30.0-35.	
Black, Non-Hispanic (NH)	1,192	686,692	455	36.8	33.0-40.	
Other Races/Ethnicities**	179	162,100	56	35.1	26.0-44.3	
18-24 years	423	311,600	82	20.9	15.3-26.	
25-34 years	529	349,778	134	26.2	21.4-30.	
35-44 years	631	352,284	189	29.6	25.1-34.2	
45-54 years	628	328,444	212	35.8	30.6-40.	
55-64 years	650	366,046	241	40.3	34.8-45.	
65+ years	1,144	549,961	450	42.2	38.1-46.	
Less than H.S.	292	325,754	154	50.5	43.1-57.8	
H.S. or G.E.D.	1,065	693,622	423	37.2	33.5-40.	
Some Post-H.S.	1,251	773,174	392	29.1	26.0-32.	
College Graduate	1,435	481,704	348	23.7	20.9-26.	
Less than \$15,000	222	131,331	117	47.8	39.6-56.	
\$15,000-\$24,999	308	194,791	148	51.2	42.5-59.	
\$25,000-\$34,999	414	240,562	178	42.4	34.9-49.	
\$35,000-\$49,999	571	320,684	191	33.8	28.9-38.	
\$50,000-\$74,999	543	282,695	150	28.5	23.6-33.	
\$75,000+	1,209	631,564	267	22.7	19.7-25.	

<sup>(1)</sup> Unweighted number

<sup>(2)</sup> Weighted percent

<sup>\*\*</sup>Refer to Table B on p. 6 for a list of races and ethnicities included in the "Other Races and Ethnicities" demographic group.

# **Overweight and Obesity**

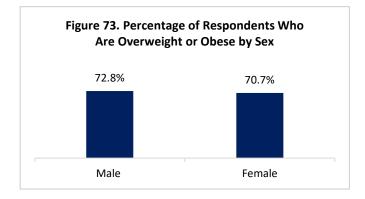
The percentage of overweight persons has increased substantially during the past twenty years.  $^{17}$  During the period of 2017 through March 2020, the obesity prevalence was 41.9% among adults in the U.S. Being overweight substantially

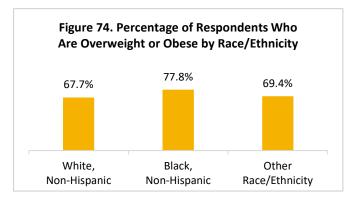
# Body Mass Index (BMI) Ouestions:

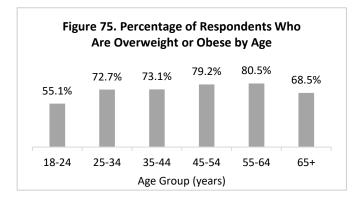
- (1) About how much do you weigh without shoes?
- (2) About how tall are you without shoes?

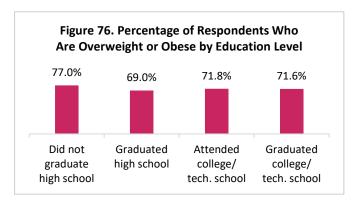
increases a person's risk of illness from several of the leading preventable causes of death, including, type 2 diabetes, heart disease, stroke, and cancer.<sup>17</sup> Weight may be controlled through dietary changes such as decreasing caloric intake and by increasing physical activity.

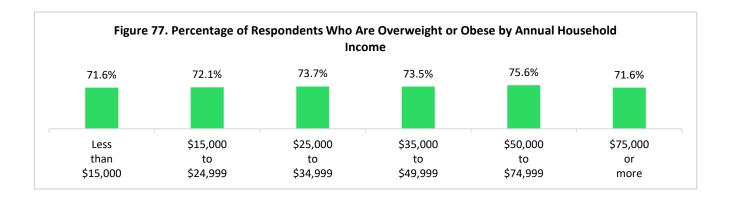
- Overall, **71.7%** of adults had a BMI in the overweight (BMI 25.0-29.9) or obese (BMI ≥ 30.0) category.
- **Men** (72.8%) had a **higher** percentage of being overweight or obese compared to women (70.7%); however, the difference was **not statistically significant** (Fig. 73).
- The percentage of overweight/obesity was **significantly higher** among **Black, NH adults** (77.8%) compared to White, NH adults (67.7%). The percentage among adults of other races/ethnicities (69.4%) was not significantly different from that of the Black, NH or White, NH groups (Fig. 74).
- The percentage of overweight/obesity was **significantly lower** among adults aged **18-24 years** (55.1%) compared to adults of all older age groups (Fig. 75).
- The percentage of overweight/obesity was **highest** among adults who **did not complete high school** (77.0%). However, there were **no significant differences** in percentage among education levels (Fig. 76).
- The percentage of overweight/obesity was **highest** among adults whose annual household income was **\$50,000 to \$74,999** (75.6%); however, there were **no significant differences** in the percentage of overweight/obesity among annual household income groups (Fig. 77).
- The percentage of adults classified as overweight or obese **increased** from 70.7% in 2014 to 71.7% in 2023; however, the difference was **not statistically significant** (Fig. 78).











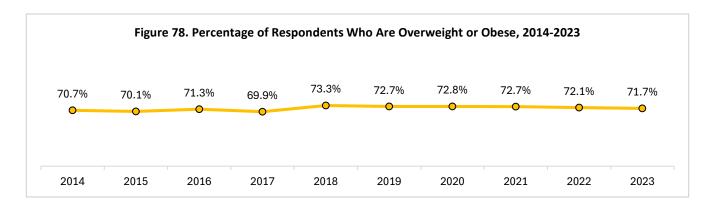


TABLE 13. Overweight and Obesity							
Overweight/Obesity status based on BMI calculated from self-reported height and weight							
DEMOGRAPHIC	RESPO	ONDENTS		Overweight or Ob	ese		
GROUPS	TOTAL	WEIGHTED	N <sup>(1)</sup>	%(2)	C.I. (95%		
TOTAL	3,837	2,162,258	2,787	71.7	69.8-73.6		
Male	1,650	1,045,839	1,223	72.8	69.9-75.6		
Female	2,187	1,116,419	1,564	70.7	68.1-73.2		
White, Non-Hispanic (NH)	2,025	1,065,897	1,386	67.7	65.0-70.5		
Black, Non-Hispanic (NH)	1,118	647,493	899	77.8	74.6-81.0		
Other Races/Ethnicities**	165	151,972	106	69.4	61.1-77.7		
18-24 years	394	284,602	212	55.1	48.9-61.3		
25-34 years	503	335,240	373	72.7	67.8-77.		
35-44 years	600	335,917	443	73.1	68.6-77.6		
45-54 years	599	316,474	478	79.2	74.4-84.		
55-64 years	623	349,715	498	80.5	76.6-84.4		
65+ years	1,089	527,503	762	68.5	64.7-72.4		
Less than H.S.	274	310,538	208	77.0	71.1-82.9		
H.S. or G.E.D.	1,013	655,874	708	69.0	65.4-72.6		
Some Post-H.S.	1,181	733,990	873	71.8	68.5-75.		
College Graduate	1,364	459,361	994	71.6	68.6-74.6		
Less than \$15,000	212	126,172	152	71.6	64.2-79.0		
\$15,000-\$24,999	297	186,672	216	72.1	64.7-79.4		
\$25,000-\$34,999	396	233,470	300	73.7	67.1-80.2		
\$35,000-\$49,999	548	304,423	417	73.5	68.7-78.3		
\$50,000-\$74,999	523	274,948	390	75.6	71.0-80.2		
\$75,000+	1,178	617,365	847	71.6	68.4-74.8		

<sup>(1)</sup> Unweighted number

<sup>(2)</sup> Weighted percent

<sup>\*\*</sup>Refer to Table B on p. 6 for a list of races and ethnicities included in the "Other Races and Ethnicities" demographic group.

Note: Denominator excludes respondents with do not know/refused/missing responses

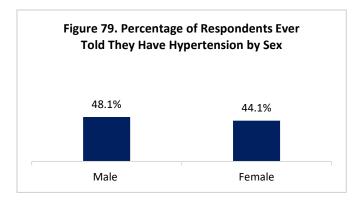
# **Hypertension**

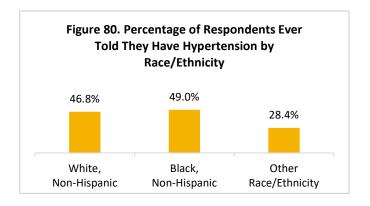
Have you ever been told by a doctor, nurse, or other health professional that you have high blood pressure?

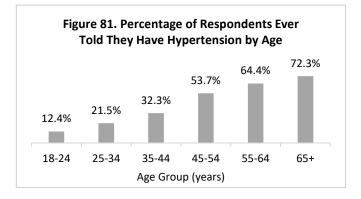
**Hypertension Question:** 

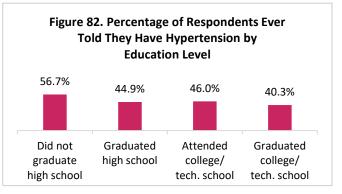
Hypertension, or high blood pressure, is a condition in which a person's blood pressure is at or above 130/80 mm Hg.<sup>18</sup> Having blood pressure that is consistently elevated can damage the heart and increase the risk of heart disease and stroke.<sup>18</sup> Nationally, approximately one-third of adults report having been diagnosed with high blood pressure,<sup>19</sup> and hypertension and hypertensive renal disease accounted for more than 42,800 deaths in 2021.<sup>20</sup> In Mississippi, more than 640 deaths were attributed to hypertension in 2022.<sup>16</sup>

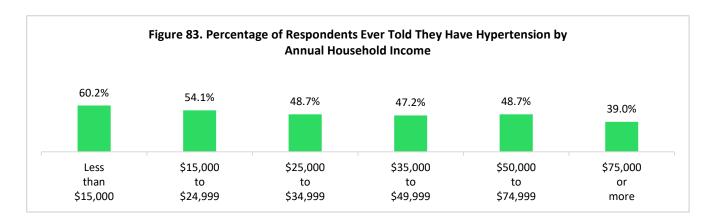
- Overall, **46.0%** of adults reported having been told by a health professional that they had hypertension.
- **Men** (48.1%) had a **higher** percentage of hypertension compared to women (44.1%); however, the difference was **not statistically significant** (Fig. 79).
- The percentage of hypertension was **significantly higher** among **Black, NH** (49.0%) **and White, NH** (46.8%) **adults** compared to adults of other races/ethnicities (28.4%) (Fig 80).
- The percentage of hypertension increased as age increased and was **significantly higher** among adults aged **55-64 years** (64.4%) **and 65+ years** (72.3%) compared to adults of all younger age groups (Fig. 81).
- The percentage of hypertension was **significantly higher** among adults who did **not graduate from high school** (56.7%) compared to adults whose highest level of education was high school graduation (44.9%) or college graduation (40.3%) (Fig. 82).
- The percentage of hypertension was **significantly higher** among adults who earned **less than \$15,000** (60.2%) **and \$15,000 to \$24,999** (54.1%) compared to adults who earned \$75,000 or more (39.0%) (Fig. 83).
- The percentage of adults with hypertension **increased** from 42.4% in 2015 to 46.0% in 2023; however, the difference was **not statistically significant** (Fig. 84).











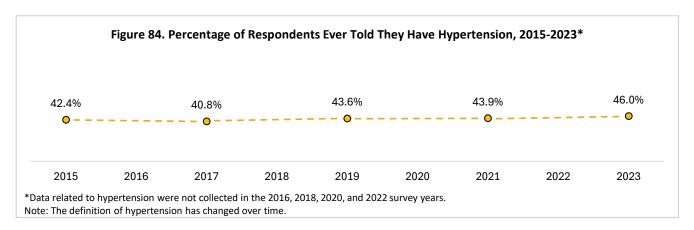


TABLE 14. Hypertension  Q: Ever told by a doctor, nurse, or other health professional that you have high blood pressure?						
GROUPS	TOTAL	WEIGHTED	N <sup>(1)</sup>	% <sup>(2)</sup>	C.I. (95%	
TOTAL	4,052	2,279,129	1,922	46.0	44.0-48.1	
Male	1,708	1,084,276	827	48.1	45.1-51.2	
Female	2,344	1,194,853	1,095	44.1	41.4-46.9	
White, Non-Hispanic (NH)	2,111	1,107,148	978	46.8	44.0-49.7	
Black, Non-Hispanic (NH)	1,192	687,501	620	49.0	45.1-52.8	
Other Races/Ethnicities**	179	162,769	53	28.4	20.3-36.6	
18-24 years	421	310,164	54	12.4	8.7-16.2	
25-34 years	530	349,639	118	21.5	17.2-25.8	
35-44 years	632	352,540	200	32.3	27.6-37.0	
45-54 years	627	327,569	307	53.7	48.3-59.2	
55-64 years	652	367,272	395	64.4	59.5-69.2	
65+ years	1,143	552,374	822	72.3	68.7-75.9	
Less than H.S.	291	324,711	186	56.7	49.3-64.2	
H.S. or G.E.D.	1,065	693,452	513	44.9	41.1-48.7	
Some Post-H.S.	1,249	773,067	594	46.0	42.6-49.5	
College Graduate	1,436	482,272	622	40.3	37.1-43.4	
Less than \$15,000	222	131,331	134	60.2	52.1-68.2	
\$15,000-\$24,999	304	190,508	171	54.1	45.1-63.0	
\$25,000-\$34,999	414	240,562	222	48.7	41.3-56.1	
\$35,000-\$49,999	569	319,684	290	47.2	42.0-52.5	
\$50,000-\$74,999	543	282,834	261	48.7	43.3-54.2	
\$75,000+	1,211	632,712	473	39.0	35.5-42.5	

<sup>(2)</sup> Weighted percent

<sup>\*\*</sup>Refer to Table B on p. 6 for a list of races and ethnicities included in the "Other Races and Ethnicities" demographic group.

Note: Denominator excludes respondents with do not know/refused/missing responses

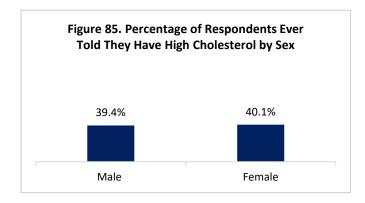
# **High Cholesterol**

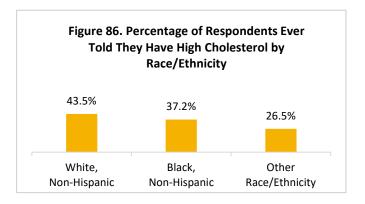
#### **Cholesterol Question:**

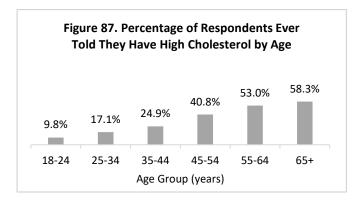
Have you ever been told by a doctor, nurse, or other health professional that your blood cholesterol is high?

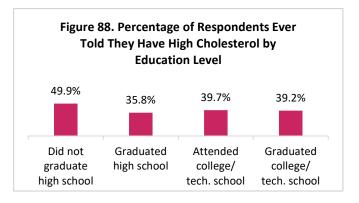
Blood cholesterol is a waxy substance that is produced in the liver.<sup>21</sup> Although the body produces the amount of blood cholesterol it needs, additional dietary cholesterol is present in various types of animal products. Cholesterol is necessary for the human body to function,<sup>21</sup> but excess LDL cholesterol ("bad" cholesterol) can accumulate in the arteries in the form of plaque and can constrict blood flow and ultimately lead to cardiovascular diseases.<sup>21,22</sup> Nationally, approximately one-third of adults report having been diagnosed with high cholesterol.<sup>19</sup>

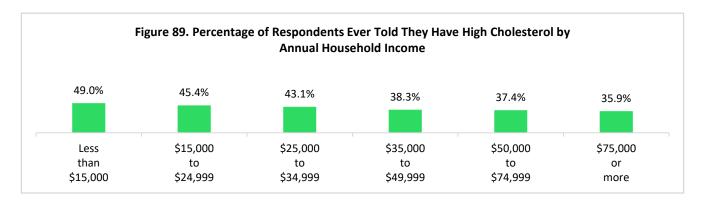
- Overall, **39.8%** of adults reported having been told by a health professional that they had high cholesterol.
- **Men** (39.4%) and women (40.1%) had **similar** percentages of high cholesterol, with **no statistically significant difference** between them (Fig. 85).
- The percentage of high cholesterol was **significantly higher** among **White, NH adults** (43.5%) compared to adults of other races/ethnicities (26.5%). The percentage among Black, NH adults (37.2%) was not significantly different from that of the White, NH or other race/ethnicity group (Fig. 86).
- The percentage of high cholesterol increased as age increased and was **significantly higher** among adults aged **55-64 years** (53.0%) **and 65+ years** (58.3%) compared to adults in all younger age groups (Fig. 87).
- The percentage of high cholesterol was significantly higher among adults who did not graduate from high school (49.9%) compared to adults whose highest level of education was high school graduation (35.8%) (Fig. 88).
- The percentage of high cholesterol increased as annual household income decreased and was **significantly higher** among adults with an annual household income of **less than \$15,000** (49.0%) compared to adults who earned \$75,000 or more (35.9%) (Fig. 89).
- The percentage of adults with high cholesterol **increased** from 38.7% in 2015 to 39.8% in 2023; however, the difference was **not statistically significant** (Fig. 90).

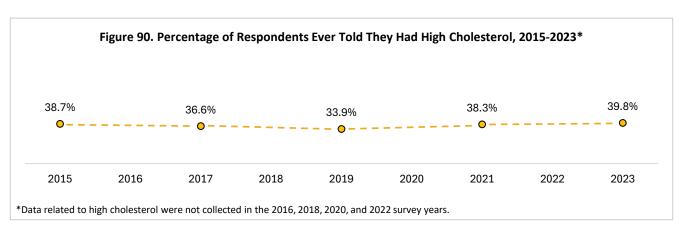












DEMOGRAPHIC	RESPONDENTS		Yes		
GROUPS	TOTAL	WEIGHTED	N <sup>(1)</sup>	% <sup>(2)</sup>	C.I. (95%
TOTAL	3,389	1,826,636	1,413	39.8	37.6-42.0
Male	1,350	820,398	552	39.4	36.0-42.7
Female	2,039	1,006,238	861	40.1	37.2-43.1
White, Non-Hispanic (NH)	1,793	908,483	783	43.5	40.4-46.6
Black, Non-Hispanic (NH)	986	539,752	392	37.2	33.2-41.2
Other Races/Ethnicities**	131	117,178	38	26.5	16.4-36.7
18-24 years	212	155,776	23	9.8	4.3-15.3
25-34 years	365	237,101	61	17.1	12.0-22.2
35-44 years	529	281,420	137	24.9	20.4-29.3
45-54 years	572	293,575	235	40.8	35.4-46.3
55-64 years	608	342,155	325	53.0	47.5-58.5
65+ years	1,063	498,747	613	58.3	54.3-62.4
Less than H.S.	226	245,510	123	49.9	41.4-58.4
H.S. or G.E.D.	830	523,426	336	35.8	31.6-39.9
Some Post-H.S.	1,016	612,059	419	39.7	36.0-43.4
College Graduate	1,307	440,360	531	39.2	35.8-42.5
Less than \$15,000	187	109,377	97	49.0	39.9-58.2
\$15,000-\$24,999	250	149,970	119	45.4	35.5-55.2
\$25,000-\$34,999	338	181,987	156	43.1	34.7-51.5
\$35,000-\$49,999	482	261,930	206	38.3	32.8-43.8
\$50,000-\$74,999	472	243,626	186	37.4	31.8-42.9
\$75.000+	1,072	544,428	410	35.9	32.3-39.5

<sup>(1)</sup> Unweighted number

Note: Denominator excludes respondents with do not know/refused/missing responses

<sup>(2)</sup> Weighted percent

<sup>\*\*</sup>Refer to Table B on p. 6 for a list of races and ethnicities included in the "Other Races and Ethnicities" demographic group.

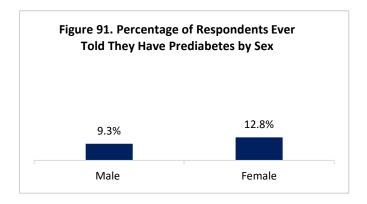
### **Prediabetes**

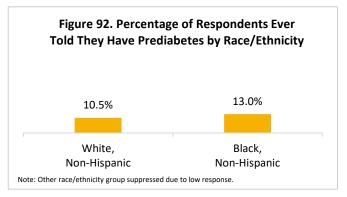
#### **Prediabetes Question:**

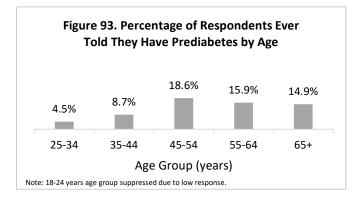
Has a doctor or other health professional ever told you that you had prediabetes or borderline diabetes?

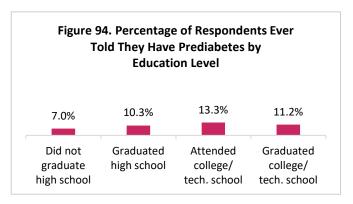
Prediabetes is a condition where blood sugar levels are higher than normal but not high enough to be diagnosed as type 2 diabetes.<sup>23</sup> Approximately 1 in 3 adults in the United States have prediabetes.<sup>23</sup> Prediabetes increases the risk of developing type 2 diabetes, heart disease, and stroke.<sup>23</sup> However, progression to type 2 diabetes can often be delayed or prevented through modest weight loss and regular physical activity.<sup>23</sup>

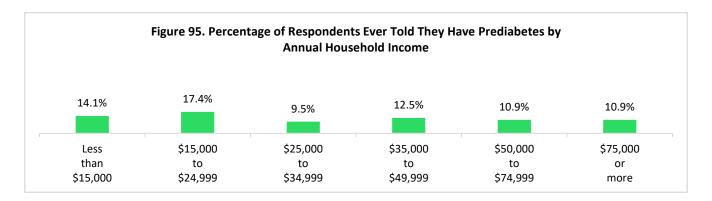
- Overall, **11.1%** of respondents who had never been diagnosed with diabetes had ever been told by a health professional that they had prediabetes or borderline diabetes.
- **Women** (12.8%) had a **higher** percentage of prediabetes compared to men (9.3%); however, the difference was not statistically significant (Fig. 91).
- The percentage of prediabetes was **higher** among **Black**, **NH** adults (13.0%) compared to White, NH adults (10.5%); however, the difference was not statistically significant. The percentage among adults of other races/ethnicities was suppressed due to low response (Fig. 92).
- The percentage of prediabetes increased as age increased and was **significantly higher** among adults aged 45-54 years (18.6%), 55-64 years (15.9%) and 65+ years (14.9%) compared to adults aged 25-34 years (4.5%) or 35-44 years (8.7%). The percentage among adults aged 18-24 years was suppressed due to low response (Fig. 93).
- The percentage of prediabetes was **significantly higher** among adults who completed **some college post-high school** (13.3%) compared to adults who did not graduate high school (7.0%) (Fig. 94).
- The percentage of prediabetes was **highest** among adults whose annual household income was **\$15,000 to \$24,999** (17.4%); however, there were **no significant differences** in percentage of prediabetes among annual household income groups (Fig. 95).
- The percentage of prediabetes increased significantly from 7.5% in 2014 to 11.1% in 2023 (Fig. 96).

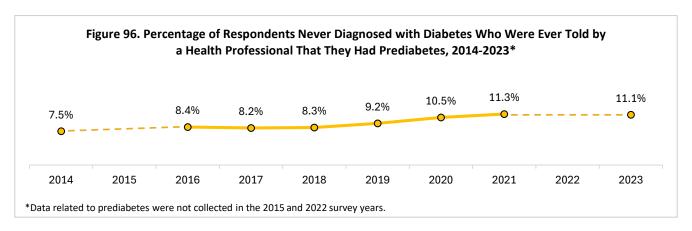












	TA	BLE 16. Prediabetes				
Q: Has a doctor or other health professional ever told you that you had prediabetes or borderline diabetes?						
DEMOGRAPHIC	RESPONDENTS		Yes			
GROUPS	TOTAL	WEIGHTED	N <sup>(1)</sup>	% <sup>(2)</sup>	C.I. (95%	
TOTAL	3,239	1,795,371	387	11.1	9.7-12.6	
Male	1,334	836,276	135	9.3	7.3-11.2	
Female	1,905	959,095	252	12.8	10.7-14.9	
White, Non-Hispanic (NH)	1,721	878,806	179	10.5	8.6-12.4	
Black, Non-Hispanic (NH)	909	536,413	139	13.0	10.3-15.7	
Other Races/Ethnicities**	131	108,514	10	-	-	
18-24 years	397	285,962	16	-	T -	
25-34 years	488	316,200	27	4.5	2.6-6.4	
35-44 years	545	298,365	48	8.7	6.0-11.4	
45-54 years	508	261,800	82	18.6	13.1-24.1	
55-64 years	461	248,266	76	15.9	11.6-20.1	
65+ years	802	368,271	131	14.9	11.8-18.0	
Less than H.S.	210	242,974	23	7.0	3.9-10.0	
H.S. or G.E.D.	817	531,613	86	10.3	7.3-13.2	
Some Post-H.S.	1,000	622,853	125	13.3	10.6-16.1	
College Graduate	1,205	394,461	150	11.2	9.1-13.4	
Less than \$15,000	158	95,752	25	14.1	7.8-20.4	
\$15,000-\$24,999	216	139,808	35	17.4	9.3-25.6	
\$25,000-\$34,999	301	178,123	37	9.5	6.0-12.9	
\$35,000-\$49,999	440	243,503	58	12.5	7.7-17.4	
\$50,000-\$74,999	452	230,209	47	10.9	7.0-14.9	
\$75,000+	1,030	528,367	115	10.9	8.4-13.4	

<sup>(1)</sup> Unweighted number

<sup>(2)</sup> Weighted percent

<sup>\*\*</sup>Refer to Table B on p. 6 for a list of races and ethnicities included in the "Other Races and Ethnicities" demographic group.

Note: Denominator excludes respondents with do not know/refused/missing responses and those ever told they had diabetes

# Flu Vaccine (65+ Years Only)

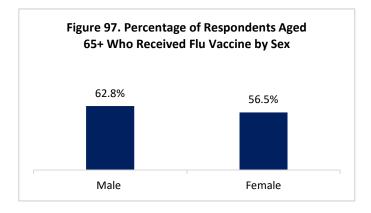
Flu Vaccine Question:
During the past 12 months, have
you had either a flu vaccine that
was sprayed in your nose or a flu

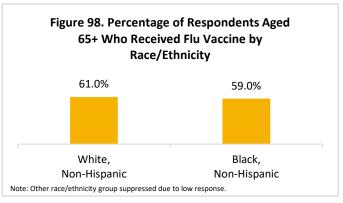
*shot injected into your arm?* 

A total of 761 people died from influenza (flu) and pneumonia in Mississippi in 2022,<sup>16</sup> but an influenza vaccine that can prevent the disease and several of its

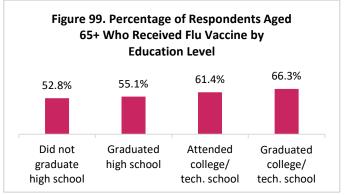
complications exists.<sup>24</sup> The vaccine may be less effective in disease prevention among the 65 years and older age group; however, it does reduce the severity and incidence of complications and death.<sup>24</sup>

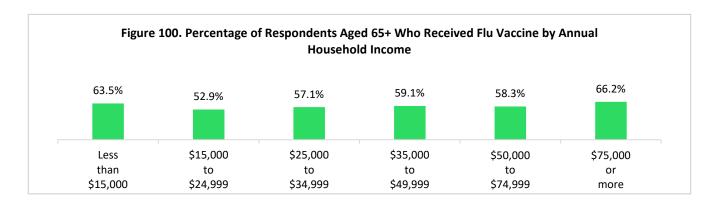
- Overall, **59.2%** of adults aged 65 years and older reported that they had received the influenza vaccine in the past 12 months.
- **Men** (62.8%) had a **higher** percentage of flu vaccination compared to women (56.5%); however, the difference was **not statistically significant** (Fig. 97).
- The percentage of flu vaccination was **higher** among **White**, **NH** adults (61.0%) compared to Black, NH adults (59.0%); however, the difference was **not statistically significant**. The percentage among adults of other races/ethnicities was suppressed due to low response (Fig. 98).
- The percentage of flu vaccination decreased as level of education increased and was **highest** among adults who had **graduated college** (66.3%). There were **no statistically significant differences** in percentage among education level groups (Fig. 99).
- The percentage of flu vaccination was **highest** among adults whose annual household income was \$75,000 or more (66.2%). There were **no statistically significant differences** in percentage among annual household income groups (Fig. 100).
- The percentage of flu vaccination **decreased significantly** from 66.7% in 2014 to 59.2% in 2023 (Fig. 101).











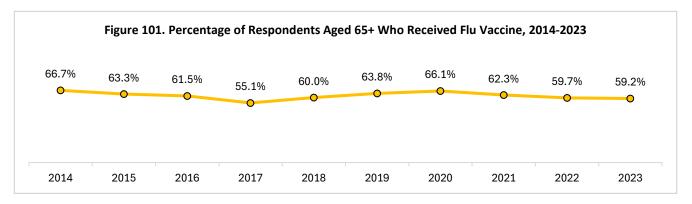


	TABLE 17. Influenza Vaccine – 65+ Years							
During the past 12 months, have you had either flu vaccine that was sprayed in your nose or a flu shot injecte into your arm?								
DEMOGRAPHIC	RESPO	ONDENTS		Yes				
GROUPS	TOTAL	WEIGHTED	N <sup>(1)</sup>	% <sup>(2)</sup>	C.I. (95%			
TOTAL	1,106	525,073	669	59.2	55.2-63.2			
Male	411	226,736	258	62.8	56.4-69.2			
Female	695	298,338	411	56.5	51.3-61.6			
White, Non-Hispanic (NH)	685	315,136	425	61.0	55.9-66.2			
Black, Non-Hispanic (NH)	265	131,663	157	59.0	50.7-67.3			
Other Races/Ethnicities**	22	17,280	9	-	-			
Less than H.S.	109	92,455	58	52.8	41.5-64.0			
H.S. or G.E.D.	290	150,292	166	55.1	47.4-62.7			
Some Post-H.S.	316	167,568	186	61.4	54.4-68.4			
College Graduate	388	113,547	256	66.3	60.2-72.3			
Less than \$15,000	53	27,858	30	63.5	47.4-79.6			
\$15,000-\$24,999	113	55,968	65	52.9	39.0-66.8			
\$25,000-\$34,999	131	56,427	70	57.1	44.5-69.6			
\$35,000-\$49,999	168	80,009	100	59.1	49.4-68.8			
\$50,000-\$74,999	148	65,620	90	58.3	47.5-69.1			
\$75,000+	227	97,950	159	66.2	58.0-74.3			

<sup>(1)</sup> Unweighted number

<sup>(2)</sup> Weighted percent

<sup>\*\*</sup>Refer to Table B on p. 6 for a list of races and ethnicities included in the "Other Races and Ethnicities" demographic group.

 $<sup>{\</sup>bf Note: Denominator\ excludes\ respondents\ with\ do\ not\ know/refused/missing\ responses}$ 

 $Estimates \ with an unweighted \ denominator < 50 \ or \ a \ relative \ standard \ error \ (RSE) > 30\% \ are \ suppressed \ (indicated \ by \ dashes).$ 

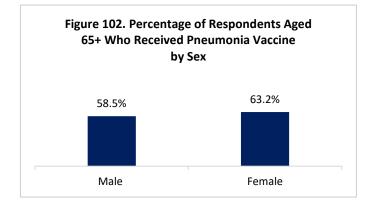
# Pneumonia Vaccine (65+ Years Only)

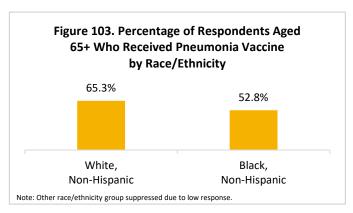
Pneumonia Vaccine Question:

Have you ever had a pneumonia shot also known as a pneumococcal vaccine?

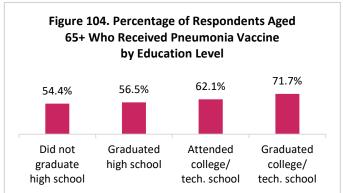
Pneumonia is an acute respiratory infection that can cause mild to severe illness.<sup>25</sup> A total of 761 people died from flu and pneumonia in Mississippi in 2022.<sup>16</sup> Fortunately, vaccines exist that can help prevent both flu and pneumonia.

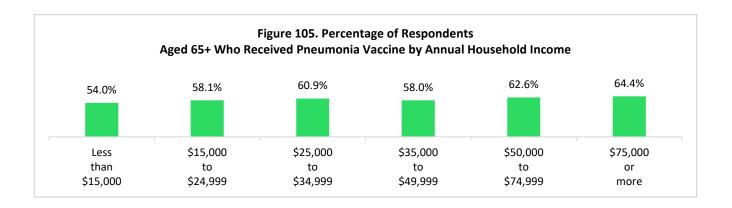
- Overall, **61.2%** of adults aged 65 years and older had ever received a pneumonia vaccination.
- **Women** (63.2%) had a **higher** percentage of pneumonia vaccination compared to men (58.5%); however, the difference was **not statistically significant** (Fig. 102).
- The percentage of pneumonia vaccination was **higher** among **White**, **NH** adults (65.3%) compared to Black, NH adults (52.8%). However, the difference in percentage was **not statistically significant**. The percentage among adults of other races/ethnicities was suppressed due to low response (Fig. 103).
- The percentage of pneumonia vaccination increased as education level increased and was **significantly higher** among adults who **graduated college** (71.7%) compared to adults who did not graduate high school (54.4%) and adults whose highest level of education was high school graduation (56.5%) (Fig. 104).
- The percentage of pneumonia vaccination was **highest** among adults who earned **\$75,000** or **more** (64.4%); however, there were **no statistically significant differences** in percentage among annual household income groups (Fig. 105).
- The percentage of pneumonia vaccination **decreased** from 67.2% in 2014 to 61.2% in 2023; however, the difference was **not statistically significant** (Fig. 106).











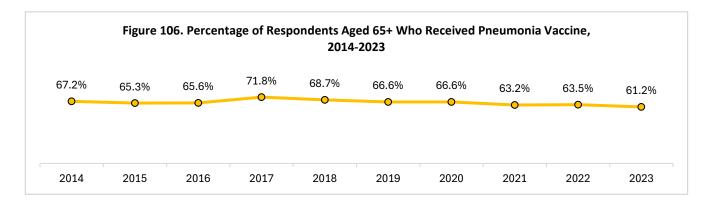


TABLE 18. Pneumonia Vaccine – 65+ Years  Q: Have you ever had a pneumonia shot also known as a pneumococcal vaccine?							
DEMOGRAPHIC	RESPONDENTS		Yes				
GROUPS	TOTAL	WEIGHTED	N <sup>(1)</sup>	% <sup>(2)</sup>	C.I. (95%		
TOTAL	1,090	515,751	690	61.2	57.1-65.3		
Male	402	221,544	244	58.5	51.8-65.2		
Female	688	294,207	446	63.2	58.2-68.3		
White, Non-Hispanic (NH)	679	312,944	458	65.3	60.2-70.4		
Black, Non-Hispanic (NH)	259	126,505	139	52.8	44.3-61.4		
Other Races/Ethnicities**	21	16,505	13	-	-		
Less than H.S.	109	93,188	57	54.4	43.3-65.6		
H.S. or G.E.D.	286	148,288	163	56.5	48.6-64.4		
Some Post-H.S.	305	160,891	198	62.1	54.7-69.5		
College Graduate	387	112,173	270	71.7	66.1-77.3		
Less than \$15,000	52	26,881	26	54.0	36.8-71.2		
\$15,000-\$24,999	110	53,491	69	58.1	44.0-72.1		
\$25,000-\$34,999	128	55,319	75	60.9	48.6-73.2		
\$35,000-\$49,999	167	78,211	101	58.0	47.9-68.1		
\$50,000-\$74,999	144	63,878	97	62.6	51.5-73.7		
\$75,000+	226	97,516	157	64.4	56.2-72.6		

<sup>(1)</sup> Unweighted number

<sup>(2)</sup> Weighted percent

<sup>\*\*</sup>Refer to Table B on p. 6 for a list of races and ethnicities included in the "Other Races and Ethnicities" demographic group.

 $Note: Denominator\ excludes\ respondents\ with\ do\ not\ know/refused/missing\ responses$ 

 $Estimates \ with an unweighted \ denominator < 50 \ or \ a \ relative \ standard \ error \ (RSE) > 30\% \ are \ suppressed \ (indicated \ by \ dashes).$ 

### **HIV Testing**

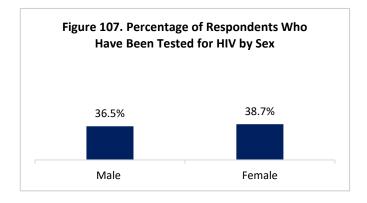
The CDC has estimated that approximately 1.2 million people aged 13 and older in the U.S. had human immunodeficiency virus (HIV) infection in  $2022.^{26}$  Of these, 13% did not know their HIV status. <sup>26</sup> In Mississippi, it is estimated that roughly 17%

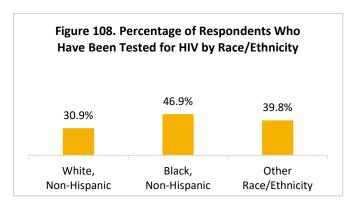
**HIV Testing Question:** 

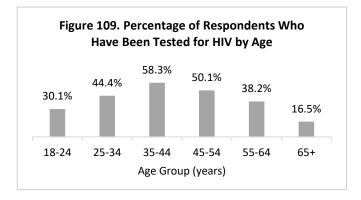
Including fluid testing from your mouth, but not including tests you may have had for blood donation, have you ever been tested for H.I.V.?

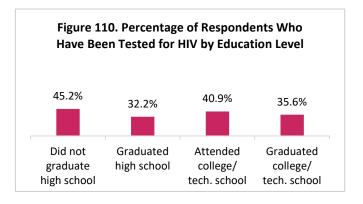
of people with HIV do not know that they have it.<sup>27</sup> It is important for a person to know their HIV status for their own health and the health of other. Knowledge of HIV status allows for early detection and treatment, prevention of transmission, and access to supportive services.

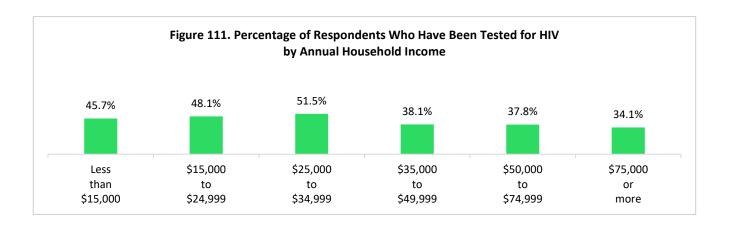
- Overall, **37.7%** of adults reported that they had been tested for HIV.
- **Women** (38.7%) had a **higher** percentage of being tested for HIV compared to men (36.5%); however, the difference was **not statistically significant** (Fig. 107).
- The percentage of HIV testing was **significantly higher** among **Black, NH adults** (46.9%) compared to White, NH adults (30.9%). The percentage among adults of other races/ethnicities (39.8%) was not significantly different from the Black, NH or White, NH groups (Fig. 108).
- The percentage of HIV testing was **significantly lower** among adults aged **65+ years** (16.5%) compared to adults in all younger age groups (Fig. 109).
- The percentage of HIV testing was **significantly higher** among adults who **did not graduate high school** (45.2%) **and** adults who **completed some college** (40.9%) compared to adults whose highest level of education was high school graduation (32.2%) (Fig. 110).
- The percentage of HIV testing was **significantly higher** among adults whose annual household income was **\$15,000 to \$24,999** (48.1%) **and \$25,000 to 34,999** (51.5%) compared to adults who earned \$75,000 or more (34.1%) (Fig. 111).
- The percentage of HIV testing was **similar** between 2014 (37.8%) and 2023 (37.7%) (Fig. 112).

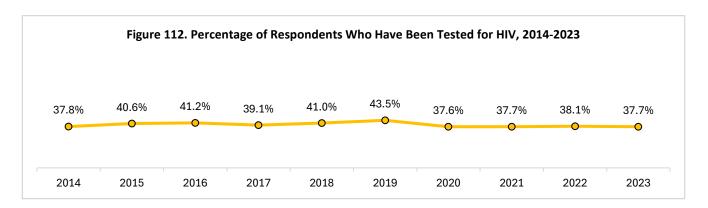












Including fluid testing from your mouth, but not including tests you may have had for blood donation, have yo ever been tested for HIV?								
DEMOGRAPHIC GROUPS	RESPO	ONDENTS		Yes				
	TOTAL	WEIGHTED	N <sup>(1)</sup>	% <sup>(2)</sup>	C.I. (95%)			
TOTAL	3,754	2,099,161	1,319	37.7	35.5-39.8			
Male	1,579	994,088	549	36.5	33.4-39.7			
Female	2,175	1,105,073	770	38.7	35.8-41.7			
White, Non-Hispanic (NH)	1,958	1,026,982	539	30.9	27.9-33.9			
Black, Non-Hispanic (NH)	1,111	629,801	503	46.9	42.9-50.9			
Other Races/Ethnicities**	165	150,134	68	39.8	30.2-49.5			
18-24 years	388	283,541	109	30.1	23.9-36.4			
25-34 years	495	323,025	216	44.4	38.8-49.9			
35-44 years	582	326,957	315	58.3	53.3-63.3			
45-54 years	597	311,961	281	50.1	44.4-55.8			
55-64 years	601	336,739	213	38.2	32.4-44.0			
65+ years	1,051	498,810	175	16.5	13.3-19.6			
Less than H.S.	265	299,611	104	45.2	37.2-53.3			
H.S. or G.E.D.	990	636,523	304	32.2	28.5-35.9			
Some Post-H.S.	1,160	713,159	448	40.9	37.3-44.5			
College Graduate	1,330	445,132	461	35.6	32.3-38.8			
Less than \$15,000	205	120,364	94	45.7	37.0-54.3			
\$15,000-\$24,999	287	177,349	114	48.1	39.2-57.1			
\$25,000-\$34,999	390	225,053	168	51.5	43.8-59.2			
\$35,000-\$49,999	533	298,226	202	38.1	32.9-43.4			
\$50,000-\$74,999	516	269,562	182	37.8	32.4-43.3			
\$75,000+	1,140	594,673	363	34.1	30.6-37.7			

<sup>(1)</sup> Unweighted number

 ${\bf Note: Denominator \, excludes \, respondents \, with \, do \, not \, know/refused/missing \, responses}$ 

<sup>(2)</sup> Weighted percent

<sup>\*\*</sup>Refer to Table B on p. 6 for a list of races and ethnicities included in the "Other Races and Ethnicities" demographic group.

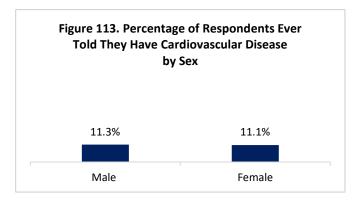
# Cardiovascular Disease (CVD)

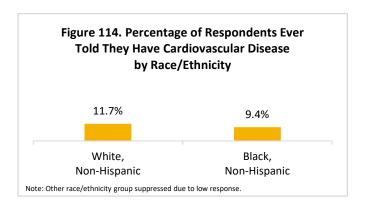
Cardiovascular disease (CVD) includes coronary heart disease, stroke, complications of hypertension, and diseases of the arterial blood vessels.<sup>28</sup> In 2022, Mississippi reported 8,862 deaths from heart disease, which was the leading cause of death in the state, and 1,943 from cerebrovascular disease (stroke).<sup>16</sup>

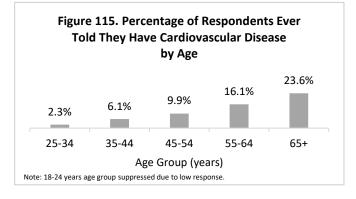
# Cardiovascular Disease Ouestions:

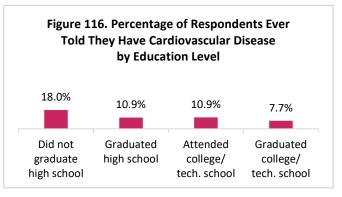
Has a doctor, nurse, or other health professional ever told you that you had any of the following: heart attack? Angina or coronary heart disease? A stroke?

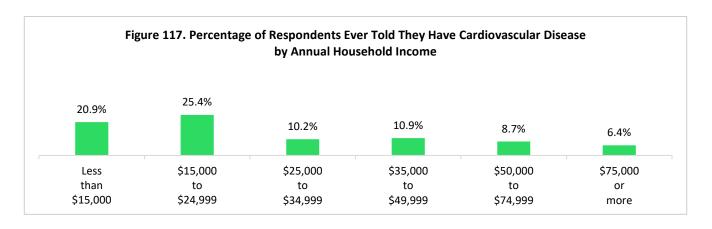
- Overall, **11.2%** of adults had ever been told by a health professional that they had a cardiovascular disease (heart attack, angina, coronary heart disease, or stroke).
- **Men** (11.3%) had a **higher** percentage of CVD compared to women (11.1%); however, the difference was **not statistically significant** (Fig. 113).
- The percentage of CVD was **higher** among **White, NH adults** (11.7%) compared to Black, NH adults (9.4%); however, there was **no significant difference** in percentage between race/ethnicity groups. The percentage among adults of other races/ethnicities was suppressed due to low response (Fig. 114).
- The percentage of CVD increased as age increased and was **significantly higher** among adults aged **65+ years** (23.6%) compared to all examined younger age groups. The percentage among adults aged 18-24 years was suppressed due to low response (Fig. 115).
- Overall, the percentage of CVD increased as education level decreased and was **significantly higher** among adults who **did not graduate high school** (18.0%) compared to adults who graduated college (7.7%) (Fig. 116).
- Overall, the percentage of CVD increased as annual household income decreased and was **significantly higher** among adults who earned **less than \$15,000** (20.9%) **and \$15,000 to \$24,999** (25.4%) compared to adults of all higher annual household income groups (Fig. 117).
- The percentage of CVD **increased** from 10.8% in 2014 to 11.2% in 2023; however, the difference was **not statistically significant** (Fig. 118).











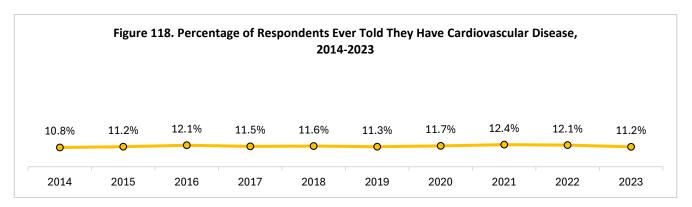


	TABLE 20. Cardiovascular Disease							
Q: Ever told you had a heart attack, angina or coronary heart disease, or stroke?								
DEMOGRAPHIC	RESPONDENTS			Yes				
GROUPS	TOTAL	WEIGHTED	N <sup>(1)</sup>	% <sup>(2)</sup>	C.I. (95%			
TOTAL	4,011	2,255,638	471	11.2	9.9-12.5			
Male	1.689	1,070,612	223	11.3	9.6-13.1			
Female	2,322	1,185,026	248	11.1	9.2-13.0			
White, Non-Hispanic (NH)	2,086	1,091,727	264	11.7	10.0-13.4			
Black, Non-Hispanic (NH)	1,179	680,406	117	9.4	7.2-11.7			
Other Races/Ethnicities**	178	162,509	17	-	-			
18-24 years	422	311,674	2	_				
25-34 years	529	349,171	16	2.3	1.1-3.6			
35-44 years	629	350,276	36	6.1	3.5-8.7			
45-54 years	620	324,312	52	9.9	6.0-13.8			
55-64 years	645	363,432	102	16.1	12.3-19.9			
65+ years	1,119	536,069	258	23.6	20.2-27.1			
Less than H.S.	280	315,339	65	18.0	13.0-23.1			
H.S. or G.E.D.	1,051	687,185	133	10.9	8.4-13.4			
Some Post-H.S.	1,237	767,420	146	10.9	8.8-13.0			
College Graduate	1,433	480,413	126	7.7	6.0-9.3			
Less than \$15,000	216	128,543	48	20.9	14.1-27.6			
\$15,000-\$24,999	299	192,161	72	25.4	17.6-33.3			
\$25,000-\$34,999	407	234,516	60	10.2	7.0-13.4			
\$35,000-\$49,999	560	312,412	65	10.9	7.9-13.9			
\$50,000-\$74,999	540	277,797	47	8.7	5.9-11.6			
\$75,000+	1,207	631,229	91	6.4	4.8-7.9			

<sup>(1)</sup> Unweighted number

Estimates with an unweighted denominator <50 or a relative standard error (RSE) > 30% are suppressed (indicated by dashes).

<sup>(2)</sup> Weighted percent

<sup>\*\*</sup>Refer to Table B on p. 6 for a list of races and ethnicities included in the "Other Races and Ethnicities" demographic group.

Note: Denominator excludes respondents with do not know/refused/missing responses

### **Arthritis**

Arthritis is the inflammation of joints, and it has the potential to be a debilitating condition. It affects one in five adults in the U.S.<sup>29</sup> and is a common cause of work disability.<sup>29</sup> Arthritis can substantially limit activities like regular work, housekeeping, and school. The impact of arthritis is expected to increase as the population ages.<sup>29</sup>

**Arthritis Question:** 

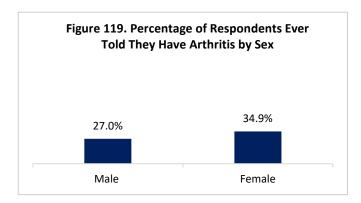
Has a doctor, nurse, or other health professional ever told you that you had some form of

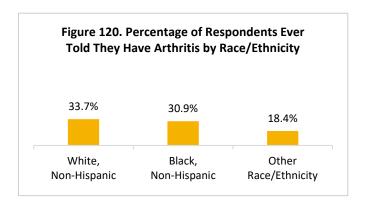
arthritis, rheumatoid arthritis,

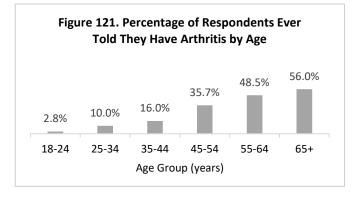
gout, lupus, or fibromyalgia?

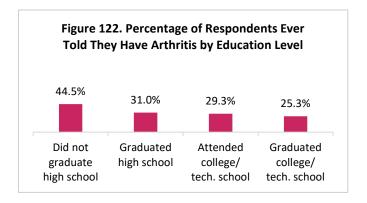
• Overall, **31.1%** of adults had been diagnosed with some form of arthritis.

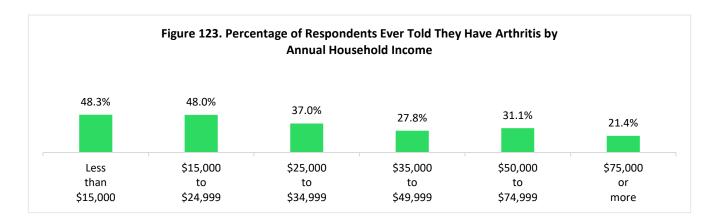
- **Women** (34.9%) had a **significantly higher** percentage of having arthritis compared to men (27.0%) (Fig. 119).
- The percentage of arthritis was significantly higher among White, NH adults (33.7%) and Black, NH adults (30.9%) compared to adults of other races/ethnicities (18.4%) (Fig. 120).
- The percentage of arthritis increased as age increased and was **significantly higher** among adults aged **65+ years** (56.0%) **and 55-64 years** (48.5%) compared to adults of all younger age groups (Fig. 121).
- The percentage of arthritis increased as education level decreased and was **significantly higher** among adults who did not graduate high school (44.5%) compared to adults of all higher education level groups (Fig. 122).
- Overall, the percentage of arthritis increased as annual household income decreased and was significantly higher among adults whose annual household income was less than \$15,000 (48.3%) and **\$15,000 to \$24,999** (48.0%) compared to adults who earned \$35,000 to \$49,999 (27.8%), \$50,000 to \$74,999 (31.1%), and \$75,000 or more (21.4%) (Fig. 123).
- The percentage of arthritis **increased** from 29.2% in 2014 to 31.1% in 2023; however, the difference was not statistically significant (Fig. 124).

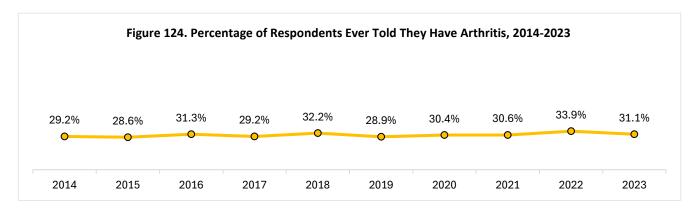












Ever told by a doctor, nurse, or other health professional that you had arthritis, rheumatoid arthritis, gout, lup or fibromyalgia?								
RESPONDENTS			Yes					
TOTAL	WEIGHTED	N <sup>(1)</sup>	% <sup>(2)</sup>	C.I. (95%				
4,037	2,272,061	1,336	31.1	29.2-33.				
1.702	1.081.420	475	27.0	24.1-29.				
2,335	1,190,641	861	34.9	32.2-37.				
2,102	1,101,569	726	33.7	30.9-36.				
1,189	686,534	399	30.9	27.3-34.				
177	161,656	34	18.4	10.7-26.				
421	310 255	17	2.8	1.4-4.2				
				6.9-13.				
				12.4-19.				
627	327,740	209	35.7	30.2-41.				
647	365,094	299	48.5	43.0-53.				
1,139	549,841	634	56.0	51.9-60.				
290	324,186	144	44.5	37.2-51.				
1,061	691,982	378	31.0	27.4-34.				
1,245	770,007	389	29.3	26.1-32.				
1,431	480,605	421	25.3	22.6-28.				
220	130,035	115	48.3	40.0-56.				
305	193,664	140	48.0	39.2-56.				
411	239,813	166	37.0	29.6-44.				
570	320,544	181	27.8	23.2-32.				
541	280,093	173	31.1	26.1-36.				
	RESPO TOTAL  4,037  1,702 2,335  2,102 1,189 177  421 528 629 627 647 1,139  290 1,061 1,245 1,431  220 305 411 570	or fibromyalgia?           RESPONDENTS         TOTAL         WEIGHTED           4,037         2,272,061           1,702         1,081,420           2,335         1,190,641           2,102         1,101,569           1,189         686,534           177         161,656           421         310,255           528         348,130           629         350,404           627         327,740           647         365,094           1,139         549,841           290         324,186           1,061         691,982           1,245         770,007           1,431         480,605           220         130,035           305         193,664           411         239,813           570         320,544           541         280,093	or fibromyalgia?           RESPONDENTS         N(1)           4,037         2,272,061         1,336           1,702         1,081,420         475           2,335         1,190,641         861           2,102         1,101,569         726           1,189         686,534         399           177         161,656         34           421         310,255         17           528         348,130         59           629         350,404         103           627         327,740         209           647         365,094         299           1,139         549,841         634           290         324,186         144           1,061         691,982         378           1,245         770,007         389           1,431         480,605         421           220         130,035         115           305         193,664         140           411         239,813         166           570         320,544         181           541         280,093         173	Or fibromyalgia?           RESPONDENTS         Yes           TOTAL         WEIGHTED         N(1)         %(2)           4,037         2,272,061         1,336         31.1           1,702         1,081,420         475         27.0           2,335         1,190,641         861         34.9           2,102         1,101,569         726         33.7           1,189         686,534         399         30.9           177         161,656         34         18.4           421         310,255         17         2.8           528         348,130         59         10.0           629         350,404         103         16.0           627         327,740         209         35.7           647         365,094         299         48.5           1,139         549,841         634         56.0           290         324,186         144         44.5           1,061         691,982         378         31.0           1,245         770,007         389         29.3           1,431         480,605         421         25.3           220         130,				

<sup>(1)</sup> Unweighted number

<sup>(2)</sup> Weighted percent

<sup>\*\*</sup>Refer to Table B on p. 6 for a list of races and ethnicities included in the "Other Races and Ethnicities" demographic group.

Note: Denominator excludes respondents with do not know/refused/missing responses

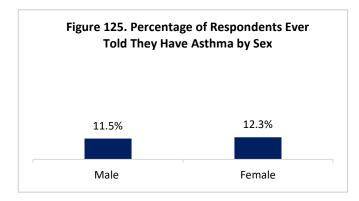
### **Asthma**

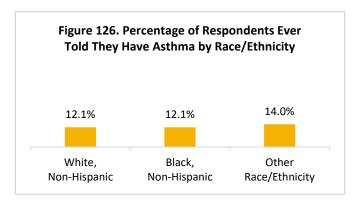
**Asthma Question:** 

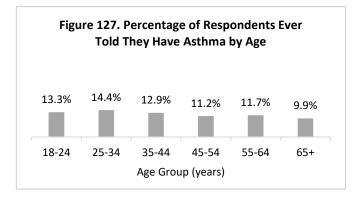
Has a doctor, nurse, or other health professional ever told you that you had asthma?

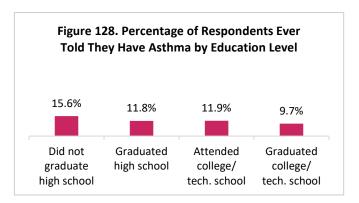
Asthma is a chronic disorder of the lungs that makes it difficult for a person to breathe.<sup>30</sup> Asthma attacks can range in severity from mild to life threatening. Symptoms of asthma include wheezing, coughing, tightness of the chest, and shortness of breath. Asthma attacks can often be prevented or controlled through the use of medication and avoidance of the trigger of the attack.<sup>30</sup> In 2022, 15.7% of adults in the U.S. reported ever having been diagnosed with asthma.<sup>30</sup>

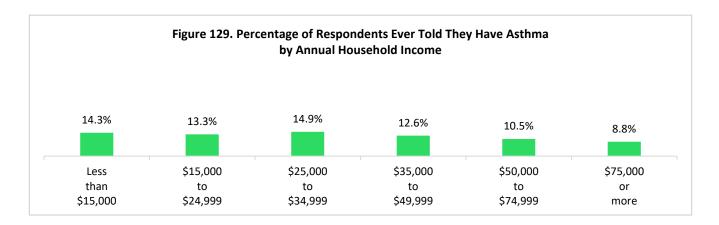
- Overall, **11.9%** of adults reported that a health professional had told them that they had asthma.
- **Women** (12.3%) had a **higher** percentage of asthma compared to men (11.5%); however, the difference in percentage was **not statistically significant** (Fig. 125).
- The percentage of asthma was **highest** among adults of **other races/ethnicities** (14.0%), followed by White, NH adults (12.1%) and Black, NH adults (12.1%); however, there were **no statistically significant differences** in percentage among race/ethnicity groups (Fig. 126).
- The percentage of asthma was **highest** among adults aged **25-34 years** (14.4%); however, there were **no significant differences** in the percentage of asthma among age groups (Fig. 127).
- The percentage of asthma was **highest** among adults who **did not graduate high school** (15.6%); however, there were **no significant differences** in the percentage of asthma among education level groups (Fig. 128).
- The percentage of asthma was **highest** among adults who earned **\$25,000** to **\$34,999** (14.9%); however, there were **no significant differences** in the percentage of asthma among annual household income level groups (Fig. 129).
- The percentage of asthma **decreased** from 12.5% in 2014 to 11.9% in 2023; however, the difference was **not statistically significant** (Fig. 130).











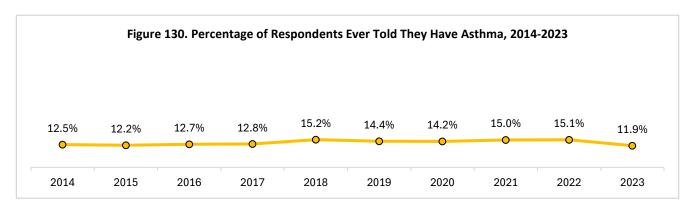


TABLE 22. Ever Had Asthma							
Q: Ever told by a doctor, nurse, or other health professional that you had asthma?							
DEMOGRAPHIC	RESPONDENTS		Yes				
GROUPS	TOTAL	WEIGHTED	N <sup>(1)</sup>	% <sup>(2)</sup>	C.I. (95%		
TOTAL	4,056	2,282,082	508	11.9	10.6-13.2		
Male	1.709	1,085,274	177	11.5	9.4-13.7		
Female	2,347	1,196,808	331	12.3	10.7-13.8		
White, Non-Hispanic (NH)	2,116	1,109,899	254	12.1	10.2-14.1		
Black, Non-Hispanic (NH)	1,191	686,418	169	12.1	9.8-14.4		
Other Races/Ethnicities**	177	161,702	25	14.0	7.8-20.2		
18-24 years	423	311,301	68	13.3	9.8-16.9		
25-34 years	530	349,630	73	14.4	10.7-18.1		
35-44 years	632	352,540	90	12.9	9.6-16.3		
45-54 years	628	328,308	77	11.2	8.1-14.3		
55-64 years	651	366,991	88	11.7	8.8-14.6		
65+ years	1,146	553,031	111	9.9	7.1-12.8		
Less than H.S.	291	324,921	50	15.6	10.7-20.5		
H.S. or G.E.D.	1,067	695,096	147	11.8	9.6-14.0		
Some Post-H.S.	1,251	774,596	162	11.9	9.6-14.3		
College Graduate	1,438	482,612	148	9.7	7.9-11.5		
Less than \$15,000	222	131,331	37	14.3	9.2-19.5		
\$15,000-\$24,999	307	194,267	50	13.3	8.5-18.1		
\$25,000-\$34,999	413	239,567	65	14.9	10.7-19.2		
\$35,000-\$49,999	571	320,684	78	12.6	9.3-15.8		
\$50,000-\$74,999	544	283,004	60	10.5	7.3-13.7		
\$75,000+	1,212	632,932	108	8.8	6.7-10.9		

<sup>(1)</sup> Unweighted number

<sup>(2)</sup> Weighted percent

<sup>\*\*</sup>Refer to Table B on p. 6 for a list of races and ethnicities included in the "Other Races and Ethnicities" demographic group.

Note: Denominator excludes respondents with do not know/refused/missing responses

# **Chronic Obstructive Pulmonary Disease**

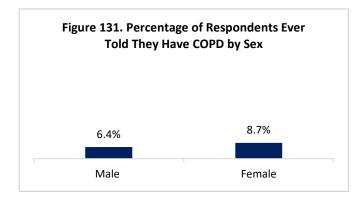
Chronic obstructive pulmonary disease, or COPD, is a designation of a group of lung diseases, such as emphysema and chronic bronchitis, that cause breathing problems.<sup>31</sup> Many factors can contribute to COPD, including exposure to tobacco

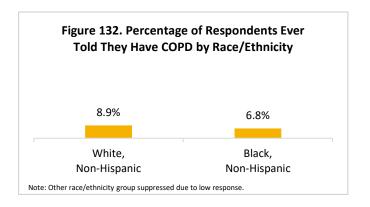
#### **COPD Question:**

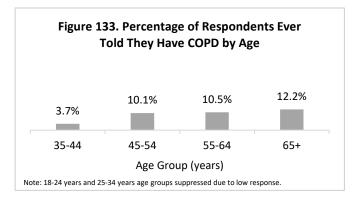
Has a doctor, nurse, or other health professional ever told you that you had COPD (chronic obstructive pulmonary disease), emphysema, or chronic bronchitis?

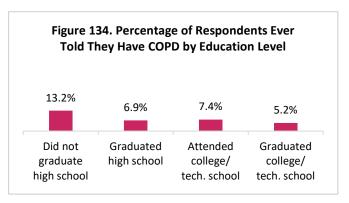
smoke and air pollution, genetics, and infections. $^{31}$  Chronic lower respiratory disease, including COPD, was the sixth leading cause of death in the U.S. in  $2022.^{15}$  Approximately 2,214 deaths were attributed to COPD/emphysema in Mississippi in  $2022.^{16}$ 

- Overall, 7.6% of adults reported that a health professional had told them they had COPD.
- **Women** (8.7%) had a **higher** percentage compared to men (6.4%); however, the difference in percentage was **not statistically significant** (Fig. 131).
- The percentage of COPD was **higher** among **White, NH adults** (8.9%) compared to Black, NH adults (6.8%); however, the difference was **not statistically significant**. The percentage among adults of other races/ethnicities was suppressed due to low response (Fig. 132).
- The percentage of COPD increased as age increased and was **significantly lower** among adults aged **35-44 years** (3.7%) compared to adults of all older age groups. The percentages among adults aged 18-24 years and 25-34 years were suppressed due to low response (Fig. 133).
- The percentage of COPD was **significantly higher** among adults who **did not graduate high school** (13.2%) compared to adults whose highest level of education was high school graduation (6.9%) and adults who graduated college (5.2%) (Fig. 134).
- The percentage of COPD was **significantly higher** among adults whose annual household income was **less than \$15,000** (14.5%) **and \$15,000** to **\$24,999** (15.3%) compared to adults who earned \$35,000 to \$49,999 (7.0%), \$50,000 to \$74,999 (6.6%), and \$75,000 or more (3.0%) (Fig. 135).
- The percentage of COPD was **similar** between 2014 (7.4%) and 2023 (7.6%) (Fig. 136).

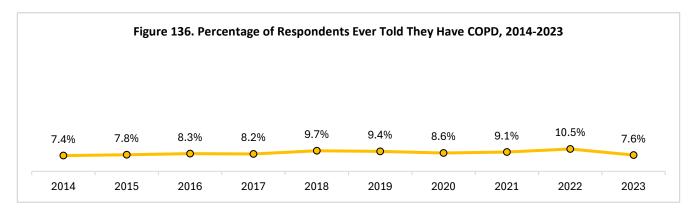












Q: Ever told by a doctor, nurse, or other health professional that you had COPD, emphysema, or chronic bronchitis?							
DEMOGRAPHIC	PESDO	RESPONDENTS		Yes			
GROUPS	TOTAL	WEIGHTED	N <sup>(1)</sup>	% <sup>(2)</sup>	C.I. (95%		
		<u>'</u>	l				
TOTAL	4,044	2,274,908	343	7.6	6.5-8.7		
Male	1,702	1,081,717	112	6.4	4.7-8.1		
Female	2,342	1,193,191	231	8.7	7.4-10.		
remale	2,342	1,193,191	231	0.7	7.4-10.		
White, Non-Hispanic (NH)	2,110	1,105,988	195	8.9	7.2-10.		
Black, Non-Hispanic (NH)	1,188	684,859	89	6.8	4.8-8.8		
Other Races/Ethnicities**	177	161,531	9	-	-		
10.01	400	1 040,000 1					
18-24 years	422	310,836	9	-	<del>-</del>		
25-34 years	529	348,785	22	<u> </u>	-		
35-44 years	631	352,003	34	3.7	2.3-5.2		
45-54 years	625	326,236	60	10.1	6.1-14.		
55-64 years	649	365,582	76	10.5	7.7-13.		
65+ years	1,142	551,186	141	12.2	9.8-14.		
Less than H.S.	287	321,188	50	13.2	8.8-17.		
H.S. or G.E.D.	1,065	693,547	101	6.9	5.4-8.4		
Some Post-H.S.	1,249	774,350	104	7.4	5.4-9.5		
College Graduate	1,434	480,966	86	5.2	3.8-6.6		
Less than \$15,000	220	129,318	41	14.5	9.6-19.		
\$15,000-\$24,999	306	193,080	55	15.3	10.2-20		
\$25,000-\$34,999	413	240,090	46	10.0	5.6-14.		
\$35,000-\$49,999	570	320,388	53	7.0	4.7-9.2		
\$50,000-\$74,999	543	282,750	36	6.6	4.0-9.2		

<sup>(1)</sup> Unweighted number

<sup>(2)</sup> Weighted percent

<sup>\*\*</sup>Refer to Table B on p. 6 for a list of races and ethnicities included in the "Other Races and Ethnicities" demographic group.

Note: Denominator excludes respondents with do not know/refused/missing responses

Estimates with an unweighted denominator <50 or a relative standard error (RSE) > 30% are suppressed (indicated by dashes).

### **Depressive Disorder**

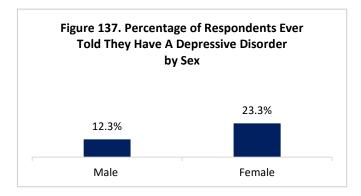
Depression involves persistent feelings of sadness that interfere with day-to-day functioning.<sup>32</sup> Symptoms can include, but are not limited to, losing interest in things one used to enjoy, problems sleeping, difficulty concentrating, feeling anxious or irritable, or contemplating suicide. It is estimated that approximately

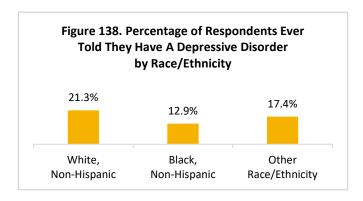
# Depressive Disorder Question:

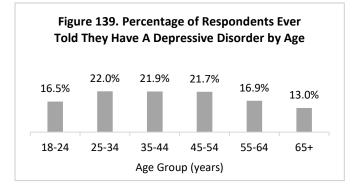
Has a doctor, nurse, or other health professional ever told you that you had a depressive disorder, including depression, major depression, dysthymia, or minor depression?

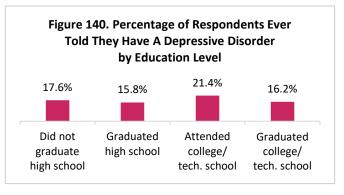
16 million adults in the U.S. experience depression each year. Therapy and prescription medication can help, and crisis centers, such as the National Suicide Prevention Lifeline (call or text 988) exist to help people thinking about suicide.<sup>32</sup>

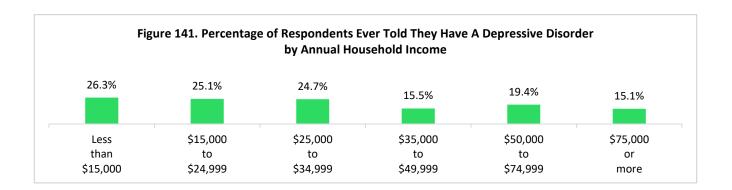
- Overall, **18.1%** of adults had been told they had a depressive disorder.
- Women (23.3%) had a **significantly higher** percentage compared to men (12.3%) (Fig. 137).
- The percentage of having a depressive disorder was **significantly higher** among **White, NH adults** (21.3%) compared to Black, NH adults (12.9%). The percentage among adults of other races/ethnicities (17.4%) was not significantly different from that of the White, NH or Black, NH groups (Fig. 138).
- The percentage of having a depressive disorder was **significantly higher** among adults aged **25-34 years** (22.0%), **35-44 years** (21.9%), **and 45-54 years** (21.7%) compared to adults aged 65+ years (13.0%) (Fig. 139).
- The percentage of having a depressive disorder was **significantly higher** among adults who **completed some college post-high school** (21.4%) compared to adults whose highest level of education was high school graduation (15.8%) or college graduation (16.2%) (Fig. 140).
- Overall, the percentage of having a depressive disorder increased as annual household income decreased and was **significantly higher** among adults whose annual household income was **less than \$15,000** (26.3%), **\$15,000 to \$24,999** (25.1%), **and \$25,000 to \$34,999** (24.7%) compared to adults who earned \$75,000 or more (15.1%) (Fig. 141).
- The percentage of having a depressive disorder **decreased** from 19.9% in 2013 to 18.1% in 2023; however, the difference was **not statistically significant** (Fig. 142).











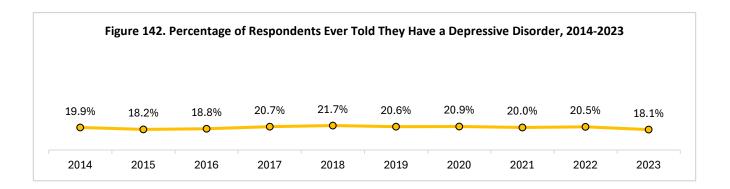


TABLE 24. Depressive Disorder								
Q: Ever told by a doctor, nurse, or other health professional that you had a depressive disorder?								
DEMOGRAPHIC GROUPS	RESPONDENTS			Yes				
	TOTAL	WEIGHTED	N <sup>(1)</sup>	% <sup>(2)</sup>	C.I. (95%			
TOTAL	4,046	2,278,399	756	18.1	16.6-19.6			
Male	1,708	1,085,133	220	12.3	10.4-14.2			
Female	2,338	1,193,266	536	23.3	21.1-25.6			
White, Non-Hispanic (NH)	2,105	1,105,374	449	21.3	19.1-23.5			
Black, Non-Hispanic (NH)	1,192	687,227	172	12.9	10.6-15.3			
Other Races/Ethnicities**	179	162,769	29	17.4	10.4-24.4			
18-24 years	423	311,094	73	16.5	12.2-20.8			
25-34 years	528	348,554	119	22.0	17.5-26.4			
35-44 years	632	352,540	148	21.9	17.9-25.8			
45-54 years	626	327,362	133	21.7	17.3-26.1			
55-64 years	649	366,159	122	16.9	13.4-20.3			
65+ years	1,142	552,251	157	13.0	10.6-15.5			
Less than H.S.	290	324,855	59	17.6	12.6-22.6			
H.S. or G.E.D.	1,065	694,005	183	15.8	13.2-18.4			
Some Post-H.S.	1,248	772,972	281	21.4	18.7-24.1			
College Graduate	1,433	481,286	230	16.2	13.7-18.6			
Less than \$15,000	220	130,604	72	26.3	19.6-33.0			
\$15,000-\$24,999	305	194,118	84	25.1	18.3-31.9			
\$25,000-\$34,999	412	238,831	99	24.7	18.7-30.8			
\$35,000-\$49,999	569	320,240	101	15.5	12.1-18.9			
\$50,000-\$74,999	542	281,853	99	19.4	15.1-23.7			
\$75,000+	1,209	631,791	184	15.1	12.6-17.6			

<sup>(1)</sup> Unweighted number

<sup>(2)</sup> Weighted percent

<sup>\*\*</sup>Refer to Table B on p. 6 for a list of races and ethnicities included in the "Other Races and Ethnicities" demographic group

 $<sup>{\</sup>bf Note: Denominator\ excludes\ respondents\ with\ do\ not\ know/refused/missing\ responses}$ 

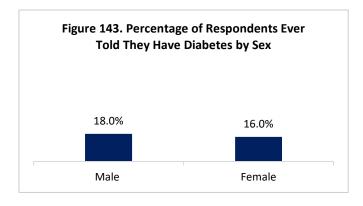
### **Diabetes**

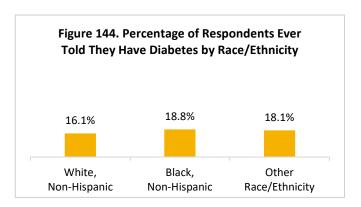
#### **Diabetes Question:**

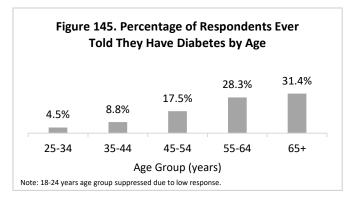
Has a doctor, nurse, or other health professional ever told you that you had diabetes?

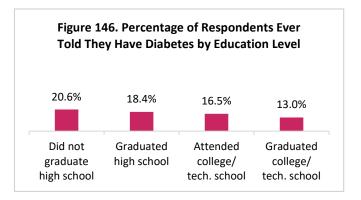
Diabetes is a chronic condition that causes the body to either not produce enough insulin or not use it effectively.<sup>33</sup> Insulin is produced in the pancreas and helps the body regulate the use of blood sugar. In diabetes, there is excess blood sugar in the blood stream, which can contribute to other health conditions like heart disease, kidney disease, and vision loss. The number of adults with diabetes has more than doubled over the last two decades, resulting in 37 million adults having diabetes. Diabetes is the eighth leading cause of death in the U.S.,<sup>33</sup> and nearly 1,300 deaths were attributed to it in Mississippi in 2022.<sup>16</sup>

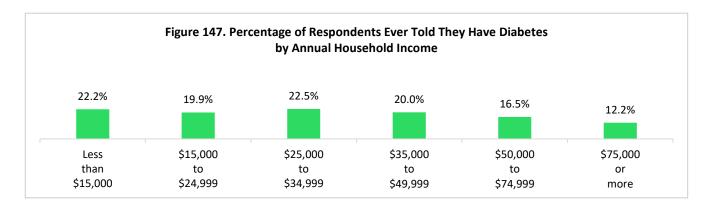
- Overall, 17.0% of adults had been told they had diabetes.
- **Men** (18.0%) had a **higher** percentage of diabetes than women (16.0%); however, the difference was **not statistically significant** (Fig. 143).
- The percentage of diabetes was **highest** among **Black**, **NH** adults (18.8%), followed by adults of other races/ethnicities (18.1%), and White, NH adults (16.1%). There were **no statistically significant differences** in percentage among race/ethnicity groups (Fig. 144).
- The percentage of diabetes increased as age increased and was **significantly higher** among adults aged **55-64 years** (28.3%) **and 65+ years** (31.4%) compared to adults of all younger examined age groups. The percentage among adults aged 18-24 years was suppressed due to low response (Fig. 145).
- The percentage of diabetes increased as education level decreased and was **significantly higher** among adults whose highest level of education was **high school graduation** (18.4%) compared to adults who graduated college (13.0%) (Fig. 146).
- The percentage of diabetes was **significantly higher** among adults whose annual household income was **less than \$15,000** (22.2%), **\$25,000 to \$34,999** (22.5%), **and \$35,000 to \$49,999** (20.0%) compared to adults who earned \$75,000 or more (12.2%) (Fig. 147).
- The percentage of diabetes **increased significantly** from 13.0% in 2014 to 17.0% in 2023 (Fig. 148).











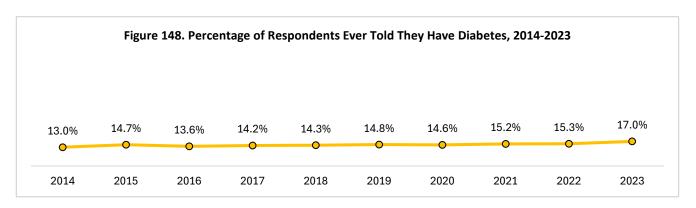


TABLE 25. Diabetes							
Q: Ever told by a doctor, nurse, or other health professional that you had diabetes?							
DEMOGRAPHIC	RESPONDENTS			Yes			
GROUPS	TOTAL	WEIGHTED	<b>N</b> <sup>(1)</sup>	% <sup>(2)</sup>	C.I. (95%		
TOTAL	4,050	2,278,999	681	17.0	15.3-18.6		
Male	1,708	1,084,340	302	18.0	15.6-20.5		
Female	2,342	1,194,659	379	16.0	13.8-18.2		
White, Non-Hispanic (NH)	2,111	1,107,163	312	16.1	13.7-18.5		
Black, Non-Hispanic (NH)	1,190	686,815	251	18.8	15.9-21.7		
Other Races/Ethnicities**	178	161,421	28	18.1	11.0-25.2		
18-24 years	422	311,066	3	-	-		
25-34 years	529	348,521	22	4.5	2.3-6.7		
35-44 years	630	351,253	56	8.8	6.0-11.7		
45-54 years	629	328,831	105	17.5	13.3-21.6		
55-64 years	651	366,942	169	28.3	23.0-33.7		
65+ years	1,143	552,104	318	31.4	27.4-35.3		
Less than H.S.	289	323,975	71	20.6	14.3-26.9		
H.S. or G.E.D.	1,065	693,929	209	18.4	15.5-21.4		
Some Post-H.S.	1,249	773,932	218	16.5	13.8-19.2		
College Graduate	1,438	482,307	180	13.0	10.6-15.3		
Less than \$15,000	221	131,001	55	22.2	15.6-28.9		
\$15,000-\$24,999	307	194,041	77	19.9	14.0-25.8		
\$25,000-\$34,999	411	239,277	95	22.5	15.5-29.5		
\$35,000-\$49,999	570	320,219	116	20.0	15.8-24.2		
\$50,000-\$74,999	543	282,417	83	16.5	12.5-20.5		
\$75.000+	1,212	632,932	138	12.2	9.6-14.7		

<sup>(1)</sup> Unweighted number

<sup>(2)</sup> Weighted percent

<sup>\*\*</sup>Refer to Table B on p. 6 for a list of races and ethnicities included in the "Other Races and Ethnicities" demographic group.

Note: Denominator excludes respondents with do not know/refused/missing responses

 $Estimates \ with an unweighted \ denominator < 50 \ or \ a \ relative \ standard \ error \ (RSE) > 30\% \ are \ suppressed \ (indicated \ by \ dashes).$ 

# Skin Cancer (Non-Melanoma)

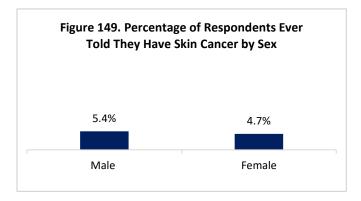
**Skin Cancer Question:** 

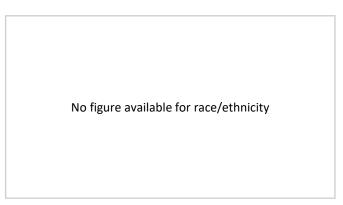
Has a doctor, nurse, or other health professional ever told you that you had skin cancer that is not melanoma?

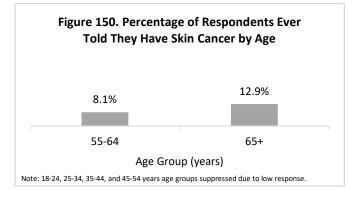
Skin cancer is the most common type of cancer in the U.S., <sup>34,35</sup> with an estimated 6.6% of people ever having been diagnosed with it. <sup>19</sup> While some forms of skin cancer can be treated relatively easily, melanomas can be deadly. <sup>35</sup> Excessive exposure to ultraviolet (IIV) light is a major risk factor for skin cancer <sup>34,36</sup> Prevention ontions include:

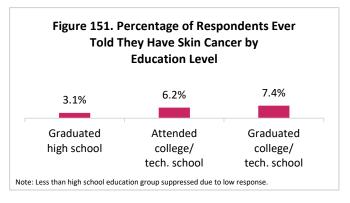
ultraviolet (UV) light is a major risk factor for skin cancer.<sup>34,36</sup> Prevention options include limiting exposure to UV light by avoiding sun exposure and tanning beds, as well as using sunscreens and other sun protection.<sup>34,36</sup>

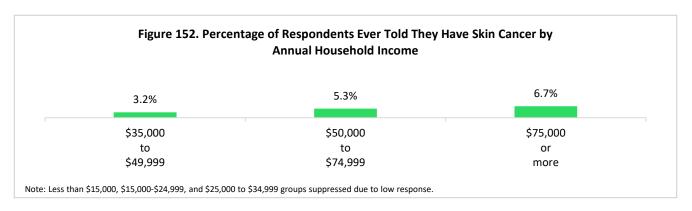
- Overall, **5.0%** of adults had ever had non-melanoma skin cancer.
- **Men** (5.4%) had a **higher** percentage of non-melanoma skin cancer than women (4.7%); however, the difference was **not statistically significant** (Fig. 149).
- The percentage of ever having non-melanoma skin cancer was 8.8% among White, NH adults. The
  percentages among Black, NH adults and adults of other races/ethnicities were suppressed due to low
  response.
- The percentage of ever having non-melanoma skin cancer was **higher** among adults aged **65 years or more** (12.9%) compared to adults aged 55-64 (8.1%); however, the difference was not statistically significant. The percentages among adults aged 18-24 years, 25-34 years, 35-44, and 45-54 years were suppressed due to low response (Fig. 150).
- The percentage of ever having non-melanoma skin cancer was **significantly higher** among adults who **graduated college** (7.4%) **and** adults who **completed some college** (6.2%) compared to adults whose highest level of education was high school graduation (3.1%). The percentage among adults who did not graduate high school was suppressed due to low response (Fig. 151).
- The percentage of ever having non-melanoma skin cancer was **significantly higher** among adults whose annual household income was **\$75,000 or more** (6.7%) compared to adults whose annual household income was \$35,000 to 49,999 (3.2%). The percentages among adults who earned less than \$15,000, \$15,000 to \$24,999, and \$25,000 to \$34,999 were suppressed due to low response (Fig. 152).
- The percentage of ever having non-melanoma skin cancer **increased** from 4.5% in 2022 to 5.0% in 2023. However, the difference was **not statistically significant** (Fig. 153).

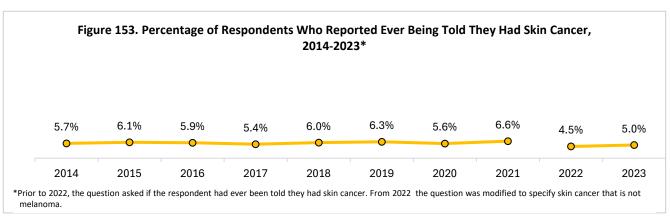












DEMOGRAPHIC	RESPONDENTS		you had skin cancer that is not melanoma Yes		
GROUPS	TOTAL	WEIGHTED	<b>N</b> <sup>(1)</sup>	% <sup>(2)</sup>	C.I. (95%
TOTAL	4,039	2,273,279	232	5.0	4.2-5.9
Male	1,705	1,081,718	110	5.4	4.0-6.8
Female	2,334	1,191,561	122	4.7	3.6-5.7
White, Non-Hispanic (NH)	2,099	1,099,454	192	8.8	7.2-10.4
Black, Non-Hispanic (NH)	1,193	688,507	4	-	-
Other Races/Ethnicities**	178	162,358	5	-	-
18-24 years	424	312,135	2	-	T -
25-34 years	530	349,575	4	-	-
35-44 years	632	352,540	8	-	-
45-54 years	625	326,517	13	-	-
55-64 years	649	365,555	55	8.1	5.6-10.6
65+ years	1,133	546,486	148	12.9	10.0-15.7
Less than H.S.	288	322,893	5	-	T -
H.S. or G.E.D.	1,061	691,624	38	3.1	2.0-4.2
Some Post-H.S.	1,245	771,373	84	6.2	4.7-7.8
College Graduate	1,435	482,109	104	7.4	5.6-9.1
Less than \$15,000	221	130,577	4	-	T -
\$15,000-\$24,999	304	192,498	13	-	-
\$25,000-\$34,999	411	238,904	13	-	-
\$35,000-\$49,999	568	319,371	21	3.2	1.6-4.8
\$50,000-\$74,999	541	280,164	34	5.3	3.2-7.4
\$75,000+	1.210	631,762	85	6.7	5.0-8.4

<sup>(1)</sup> Unweighted number

<sup>(2)</sup> Weighted percent

<sup>\*\*</sup>Refer to Table B on p. 6 for a list of races and ethnicities included in the "Other Races and Ethnicities" demographic group.

 $Note: Denominator\ excludes\ respondents\ with\ do\ not\ know/refused/missing\ responses$ 

Estimates with an unweighted denominator <50 or a relative standard error (RSE) > 30% are suppressed (indicated by dashes).

# Other Types of Cancer (Including Melanoma)

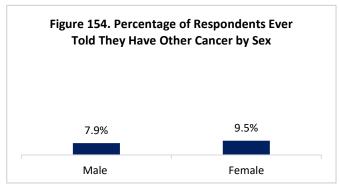
Cancer is a condition in which cells in the body begin to replicate out of control.<sup>35</sup> There are many different types of cancer that can impact different body systems. Additionally, cancer can begin in one location in the body and spread, or metastasize, to another location.<sup>37</sup> In 2021, 7.5% of adults in the U.S. reported ever being

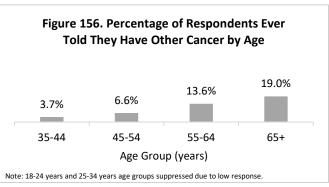
Other Types of Cancer Question:

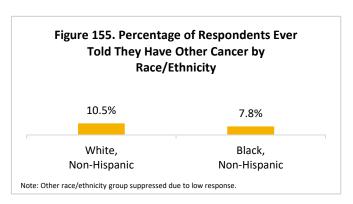
Has a doctor, nurse, or other health professional ever told you that you had melanoma or any other types of cancer (besides skin cancer)?

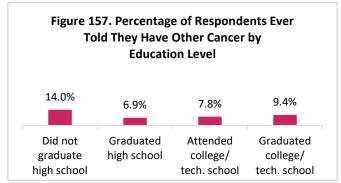
diagnosed with a cancer other than skin cancer.  $^{19}$  Although treatments exist for different types of cancer, no single cure for all cancer types has been developed.  $^{38}$  Malignant neoplasms (cancers) were responsible for more than 6,600 deaths in Mississippi in 2022.  $^{16}$ 

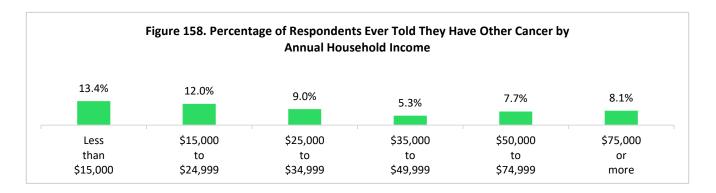
- Overall, **8.7%** of adults had been diagnosed with a type of cancer other than non-melanoma skin cancer.
- **Women** (9.5%) had a **higher** percentage of ever having cancer compared to men (7.9%); however, the difference in percentage was **not statistically significant** (Fig. 154).
- The percentage of ever having cancer was **higher** among **White**, **NH** adults (10.5%) compared to Black, NH adults (7.8%); however, the difference in percentage was **not statistically significant**. The percentage among adults of other races/ethnicities was suppressed due to low response (Fig. 155).
- The percentage of ever having cancer increased as age increased and was **significantly higher** among adults aged **55-64 years** (13.6%) **and 65+ years** (19.0%) compared to adults in all younger examined age groups. The percentages among adults aged 18-24 years and 25-34 years were suppressed due to low response (Fig. 156).
- The percentage of ever having cancer was **highest** among adults who **did not graduate high school** (14.0%); however, there were no **statistically significant differences** in percentage among education level groups (Fig. 157).
- The percentage of ever having cancer was **highest** among adults whose annual household income was **less than \$15,000** (13.4%); however, there were **no statistically significant differences** in percentage among annual household income level groups (Fig. 158).
- The percentage of ever having cancer **increased** from 7.8% in 2022 to 8.7% in 2023. However, the difference was **not statistically significant** (Fig. 159).

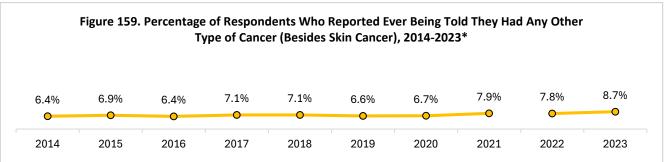












<sup>\*</sup>Prior to 2022, the question asked if the respondent had ever been told they had any other types of cancer (besides skin cancer). From 2022, the question was modified to specify melanoma or any other types of cancer (besides skin cancer).

(besides skin cancer)?					
DEMOGRAPHIC GROUPS	RESPONDENTS		Yes		
	TOTAL	WEIGHTED	N <sup>(1)</sup>	% <sup>(2)</sup>	C.I. (95%
TOTAL	4,043	2,272,419	358	8.7	7.5-10.0
Male	1,700	1,078,315	137	7.9	5.9-9.9
Female	2,343	1,194,104	221	9.5	7.8-11.1
White, Non-Hispanic (NH)	2,102	1,099,109	225	10.5	8.6-12.3
Black, Non-Hispanic (NH)	1,194	688,669	78	7.8	5.3-10.3
Other Races/Ethnicities**	177	161,582	11	-	-
18-24 years	422	310,989	5	-	<del>-</del>
25-34 years	529	349,329	7	-	<u> </u>
35-44 years	631	352,186	24	3.7	1.6-5.8
45-54 years	625	326,024	43	6.6	4.3-8.9
55-64 years	649	364,648	74	13.6	9.8-17.4
65+ years	1,140	548,538	201	19.0	15.3-22.7
Less than H.S.	286	321,035	37	14.0	8.7-19.3
H.S. or G.E.D.	1,064	692,142	79	6.9	4.6-9.2
Some Post-H.S.	1,246	771,725	106	7.8	6.0-9.6
College Graduate	1,437	482,237	135	9.4	7.5-11.2
Less than \$15,000	220	129,728	23	13.4	7.2-19.7
\$15,000-\$24,999	305	192,696	38	12.0	5.2-18.7
\$25,000-\$34,999	412	239,446	38	9.0	4.4-13.5
\$35,000-\$49,999	569	319,738	34	5.3	3.0-7.6
\$50,000-\$74,999	542	280,496	42	7.7	5.0-10.4
\$75.000+	1,208	630,478	108	8.1	6.2-10.0

<sup>(1)</sup> Unweighted number

<sup>(2)</sup> Weighted percent

<sup>\*\*</sup>Refer to Table B on p. 6 for a list of races and ethnicities included in the "Other Races and Ethnicities" demographic group.

Note: Denominator excludes respondents with do not know/refused/missing responses

Estimates with an unweighted denominator <50 or a relative standard error (RSE) > 30% are suppressed (indicated by dashes).

# **Appendix A: Explanations of Conditions and Risk Factors**

**Note:** This section contains the terminology used by interviewers when administering the 2023 MS BRFSS survey to participants.

#### **Alcohol Consumption**

Current Binge Drinking – Respondents who report that they have had at least five drinks (for men) or four drinks (for women) on one or more occasion during the past thirty days.

#### **Arthritis**

Arthritis Awareness – Respondents who report ever being told by a doctor or other health professional that they had some form of arthritis, rheumatoid arthritis, gout, lupus, or fibromyalgia.

#### **Asthma**

Asthma Awareness – Respondents who report ever being told that they had asthma by a doctor, nurse, or other health professional.

#### Cancer

Other Types of Cancer – Respondents who report ever being told that they had melanoma or any other types of cancer, besides skin cancer, by a doctor, nurse, or other health professional.

Skin Cancer – Respondents who report ever being told that they had skin cancer that is not melanoma by a doctor, nurse or other health professional.

#### **Cardiovascular Disease**

Coronary Heart Disease – Respondents who report ever being told they had angina or coronary heart disease by a doctor, nurse, or other health professional.

Heart Attack – Respondents who report ever being told they had a heart attack or myocardial infarction by a doctor, nurse, or other health professional.

Stroke – Respondents who report ever being told they had a stroke by a doctor, nurse, or other health professional.

#### **Cholesterol**

Cholesterol Awareness – Respondents who report ever being told they had high cholesterol by a doctor, nurse, or other health professional.

#### **Cigarette Smoking**

Current Cigarette Smoker – Respondents who have ever smoked 100 cigarettes in their lifetime and report currently smoking every day or some days. [Note: This does not include electronic cigarettes (e-cigarettes, njoy, bluetip, JUUL), herbal cigarettes, cigars, cigarillos, little cigars, pipes, bidis, kreteks, water pipes (hookahs), or marijuana.]

#### **Diabetes**

Diabetes – Respondents who report that they have ever been told by a doctor, nurse, or other health professional that they have diabetes. Female respondents diagnosed with diabetes only during pregnancy are not included.

Prediabetes – Respondents who report that they have ever been told by a doctor, nurse, or other health professional that they have prediabetes or borderline diabetes.

#### **E-Cigarette Use**

Current E-Cigarette User – Respondents who now use e-cigarettes or other electronic vaping products every day or some days.

#### **Exercise**

Exercise in Past Month – Respondents who report that, excluding their regular job, in the past month they participated in any physical activity or exercise such as running, walking, calisthenics, golf, or gardening.

#### **Health Insurance**

Health Care Access – Respondents who report that they needed to see a doctor within the past 12 months but were unable to because they could not afford it.

Health Care Coverage – Respondents who report they have no health care coverage, including health insurance, Health Maintenance Organizations, or Medicare.

Source of Health Care Coverage – Respondents who report their source of health insurance coverage to be private (purchased through employer/union or purchased by self/family member) or public (Medicare, Medigap, Medicaid, CHIP, military-related health care: TRICARE (CHAMPUS)/VA health care/CHAMP-VA, Indian Health Service, a state-sponsored health plan, or other government program).

#### **Health Status**

Self-Reported Health Status - Respondents who report that their general health status is fair or poor.

#### **Healthy Days**

Mental Health - Respondents who report 14 days or more during the past month when their mental health was not good.

Physical Health – Respondents who report 14 days or more during the past month when their physical health was not good.

#### **HIV/AIDS**

Ever Tested for HIV – Respondents who report that they have ever been tested for HIV, excluding tests done as part of a blood donation.

#### **Hypertension**

Hypertension Awareness – Respondents who have ever been told they have high blood pressure by a doctor, nurse, or other health professional.

#### **Immunization**

Flu Vaccine – Respondents aged 65 years and older who report receiving a flu shot or the flu spray vaccine within the last twelve months.

Pneumonia Vaccine – Respondents aged 65 years and older who report ever receiving a vaccination for pneumonia.

#### **Lung Disease**

Chronic Obstructive Pulmonary Disease (COPD) – Respondents who report ever being told by a doctor, nurse, or other health professional that they had chronic obstructive pulmonary disease (COPD), emphysema, or chronic bronchitis.

#### Marijuana Use

Current Marijuana Use – Respondents who report using marijuana or cannabis on at least 1 day during the past 30 days.

#### **Mental Health**

Depressive Disorder – Respondents who report ever being told they had a depressive disorder, including depression, major depression, dysthymia, or minor depression) by a doctor, nurse or other health professional.

#### Routine Check-Up

Check-Up in the Past Year – Respondents who report that they had last visited a doctor for a routine check-up within the past year.

#### Weight

Body Mass Index (BMI) - Self-reported weight in kilograms divided by self-reported height in meters squared (kg/m²).

Healthy Weight – Respondents with a BMI  $18.5 \le BMI \le 24.9$ .

Obese - Respondents with a BMI ≥30.0.

Overweight – Respondents with a BMI  $25.0 \le BMI \le 29.9$ .

## **Appendix B: References**

- 1. Blumberg SJ, Luke JV. Wireless substitution: Early release of estimates from the National Health Interview Survey, July-December 2023. National Center for Health Statistics. June 2024. https://www.cdc.gov/nchs/data/nhis/earlyrelease/wireless202406.pdf. Accessed September 4, 2024.
- 2. National Center for Health Statistics. National Health Interview Survey Early Release Program. https://www.cdc.gov/nchs/data/nhis/earlyrelease/Wireless state 202406.pdf. Accessed September 4, 2024.
- 3. Health-related quality of life (HRQOL). Centers for Disease Control and Prevention. <a href="https://archive.cdc.gov/#/details?url=https://www.cdc.gov/hrqol/concept.htm">https://archive.cdc.gov/#/details?url=https://www.cdc.gov/hrqol/concept.htm</a>. Updated August 4, 2022. Accessed July 16, 2024.
- 4. National Academies of Sciences, Engineering, and Medicine; Health and Medicine Division; Board on Health Care Services; Committee on Health Care Utilization and Adults with Disabilities. Factors That Affect Health-Care Utilization. *Health-Care Utilization as a Proxy in Disability Determination*. Washington (DC): National Academies Press (US); 2018. <a href="https://www.ncbi.nlm.nih.gov/books/NBK500097/">https://www.ncbi.nlm.nih.gov/books/NBK500097/</a>. Accessed July 16, 2024.
- 5. Interactive Summary Health Statistics for Adults 2019-2022. National Center for Health Statistics. Generated interactively. <a href="https://wwwn.cdc.gov/NHISDataQueryTool/SHS">https://wwwn.cdc.gov/NHISDataQueryTool/SHS</a> adult/index.html. Accessed July 16, 2024.
- 6. 2022 Behavioral Risk Factor Surveillance System Questionnaire. Centers for Disease Control and Prevention. <a href="https://www.cdc.gov/brfss/questionnaires/pdf-ques/2022-BRFSS-Questionnaire-508.pdf">https://www.cdc.gov/brfss/questionnaires/pdf-ques/2022-BRFSS-Questionnaire-508.pdf</a>. Accessed July 16, 2024.
- 7. Are you up to date on your preventive care?. Centers for Disease Control and Prevention. <a href="https://www.cdc.gov/chronic-disease/prevention/preventive-care.html/">https://www.cdc.gov/chronic-disease/prevention/preventive-care.html/</a>. Reviewed May 15, 2024. Accessed July 16, 2024.
- 8. Alcohol Use and Your Health. Centers for Disease Control and Prevention. <a href="https://www.cdc.gov/alcohol/about-alcohol-use/index.html">https://www.cdc.gov/alcohol/about-alcohol-use/index.html</a>. Reviewed May 15, 2024. Accessed July 18, 2024.
- 9. Stewart T. *Overview of motor vehicle crashes in 2021*. (Report No. DOT HS 813 435). National Highway Traffic Safety Administration. April 2023. <a href="https://crashstats.nhtsa.dot.gov/Api/Public/ViewPublication/813435">https://crashstats.nhtsa.dot.gov/Api/Public/ViewPublication/813435</a>. Accessed July 16, 2024.
- 10. Extinguishing the tobacco epidemic in Mississippi. Centers for Disease Control and Prevention. <a href="https://www.cdc.gov/tobacco/stateandcommunity/state-fact-sheets/index.htm#MO">https://www.cdc.gov/tobacco/stateandcommunity/state-fact-sheets/index.htm#MO</a> Reviewed June 5, 2024. Accessed July 16, 2024.
- 11. State of lung cancer 2023: Mississippi. American Lung Association. <a href="https://www.lung.org/research/state-of-lung-cancer/states/mississippi">https://www.lung.org/research/state-of-lung-cancer/states/mississippi</a>. Accessed July 16, 2024.
- 12. About electronic cigarettes (e-cigarettes). Centers for Disease Control and Prevention. <a href="https://www.cdc.gov/tobacco/e-cigarettes/about.html">https://www.cdc.gov/tobacco/e-cigarettes/about.html</a> . Reviewed May 15, 2024. Accessed July 17, 2024.
- 13. Cannabis health effects. Centers for Disease Control and Prevention. <a href="https://www.cdc.gov/cannabis/health-effects/">https://www.cdc.gov/cannabis/health-effects/</a>. Reviewed February 16, 2024. Accessed March 13, 2025.
- 14. Why it matters. Centers for Disease Control and Prevention. <a href="https://www.cdc.gov/physical-activity/php/about/">https://www.cdc.gov/physical-activity/php/about/</a>. Reviewed December 20, 2023. Accessed July 16, 2024.
- 15. Kochanek KD, Murphy SL, Xu JQ, Arias E. Mortality in the United States, 2022. NCHS Data Brief, no 492. Hyattsville, MD: National Center for Health Statistics. 2024. <a href="https://www.cdc.gov/nchs/data/databriefs/db492.pdf">https://www.cdc.gov/nchs/data/databriefs/db492.pdf</a>. Reviewed March 21, 2024. Accessed March 13, 2025.
- 16. Mississippi Statistically Automated Health Resource System (MSTAHRS). Mississippi State Department of Health. Generated interactively. <a href="https://mstahrs.msdh.ms.gov/">https://mstahrs.msdh.ms.gov/</a>. Accessed March 13, 2025.
- 17. Adult obesity facts. Centers for Disease Control and Prevention. <a href="https://www.cdc.gov/obesity/php/data-research/adult-obesity-facts.html">https://www.cdc.gov/obesity/php/data-research/adult-obesity-facts.html</a> Reviewed May 14, 2024. Accessed July 16, 2024.

- 18. Facts about hypertension. Centers for Disease Control and Prevention. <a href="https://www.cdc.gov/high-blood-pressure/data-research/facts-stats/">https://www.cdc.gov/high-blood-pressure/data-research/facts-stats/</a> Reviewed May 15, 2024. Accessed July 17, 2024.
- 19. BRFSS prevalence & trends data. Centers for Disease Control and Prevention. <a href="https://www.cdc.gov/brfss/brfssprevalence/">https://www.cdc.gov/brfss/brfssprevalence/</a>. Accessed July 17, 2024.
- 20. Hypertension. Centers for Disease Control and Prevention. <a href="https://www.cdc.gov/nchs/fastats/hypertension.htm">https://www.cdc.gov/nchs/fastats/hypertension.htm</a>. Reviewed November 21, 2023. Accessed July 17, 2024.
- 21. About cholesterol. Centers for Disease Control and Prevention. <a href="https://www.cdc.gov/cholesterol/about.htm">https://www.cdc.gov/cholesterol/about.htm</a>. Reviewed May 15, 2024. Accessed July 17, 2024.
- 22. What is cholesterol? American Heart Association. <a href="https://www.heart.org/en/health-topics/cholesterol/about-cholesterol">https://www.heart.org/en/health-topics/cholesterol/about-cholesterol</a>. Reviewed February 16, 2024. Accessed July 17, 2024.
- 23. Prediabetes your chance to prevent type 2 diabetes. Centers for Disease Control and Prevention. <a href="https://www.cdc.gov/diabetes/prevention-type-2/prediabetes-prevent-type-2.html">https://www.cdc.gov/diabetes/prevention-type-2/prediabetes-prevent-type-2.html</a>. Reviewed May 15, 2024. Accessed March 13, 2025.
- 24. Vaccine effectiveness: How well do the flu vaccines work? Centers for Disease Control and Prevention. <a href="https://www.cdc.gov/flu/vaccines-work/vaccineeffect.htm?web=1&wdLOR=c5E1394B5-7166-4D6E-BF63-6306788FB90F">https://www.cdc.gov/flu/vaccines-work/vaccineeffect.htm?web=1&wdLOR=c5E1394B5-7166-4D6E-BF63-6306788FB90F</a>. Reviewed February 8, 2023. Accessed July 17, 2024.
- 25. About Pneumonia. Centers for Disease Control and Prevention. <a href="https://www.cdc.gov/pneumonia/about/index.html">https://www.cdc.gov/pneumonia/about/index.html</a>. Reviewed October 17, 2023. Accessed July 18, 2024.
- 26. CDC Publishes New HIV Surveillance Data: National profile. Centers for Disease Control and Prevention. <a href="https://www.cdc.gov/nchhstp/director-letters/cdc-publishes-new-hiv-surveillance-reports.html">https://www.cdc.gov/nchhstp/director-letters/cdc-publishes-new-hiv-surveillance-reports.html</a>. Reviewed May 21, 2024. Accessed July 17, 2024.
- 27. Mississippi-Indicators Data. AHEAD: America's HIV Epidemic Analysis Dashboard. <a href="https://ahead.hiv.gov/data/geographic/indicators/mississippi/">https://ahead.hiv.gov/data/geographic/indicators/mississippi/</a>. Accessed July 17, 2024.
- 28. What is cardiovascular disease? American Heart Association. <a href="https://www.heart.org/en/health-topics/consumer-healthcare/what-is-cardiovascular-disease">https://www.heart.org/en/health-topics/consumer-healthcare/what-is-cardiovascular-disease</a>. Reviewed January 10, 2024. Accessed July 17, 2024.
- 29. Arthritis Basics. Centers for Disease Control and Prevention. <a href="https://www.cdc.gov/arthritis/basics/index.html">https://www.cdc.gov/arthritis/basics/index.html</a>. Reviewed March 26, 2024. Accessed July 18, 2024.
- 30. About Asthma. Centers for Disease Control and Prevention. <a href="https://www.cdc.gov/asthma/about/index.html">https://www.cdc.gov/asthma/about/index.html</a>. Updated January 22, 2024. Accessed July 17, 2024.
- 31. Basics about COPD. Centers for Disease Control and Prevention. <a href="https://www.cdc.gov/copd/about">https://www.cdc.gov/copd/about</a> Reviewed May 15, 2024. Accessed July 17, 2024.
- 32. Mental health conditions: Depression and anxiety. Centers for Disease Control and Prevention. <a href="https://www.cdc.gov/tobacco/campaign/tips/diseases/depression-anxiety.html">https://www.cdc.gov/tobacco/campaign/tips/diseases/depression-anxiety.html</a>. Reviewed October 13, 2023. Accessed July 17, 2024.
- 33. Diabetes Basics. Centers for Disease Control and Prevention. <a href="https://www.cdc.gov/diabetes/about/">https://www.cdc.gov/diabetes/about/</a>. Reviewed May 15, 2024. Accessed July 17, 2024.
- 34. Skin Cancer Basics. Centers for Disease Control and Prevention. <a href="https://www.cdc.gov/skin-cancer/about/">https://www.cdc.gov/skin-cancer/about/</a> index.html. Reviewed July 1, 2024. Accessed March 13, 2025.
- 35. Skin cancer (including melanoma) patient version. National Cancer Institute. <a href="https://www.cancer.gov/types/skin.">https://www.cancer.gov/types/skin.</a> Accessed July 17, 2024.
- 36. Ultraviolet (UV) radiation. American Cancer Society. <a href="https://www.cancer.org/cancer/cancer-causes/radiation-exposure/uv-radiation.html">https://www.cancer.org/cancer/cancer-causes/radiation-exposure/uv-radiation.html</a>. Revised June 26, 2024. Accessed July 17, 2024.
- 37. What is cancer? Cancer.org <a href="https://www.cancer.org/cancer/cancer-basics/what-is-cancer.html">https://www.cancer.org/cancer/cancer-basics/what-is-cancer.html</a>. Updated February 14, 2022. Accessed July 17, 2024.
- 38. Can cancer be cured? Cancer.org. <a href="https://www.cancer.org/treatment/understanding-your-diagnosis/can-cancer-be-cured.html">https://www.cancer.org/treatment/understanding-your-diagnosis/can-cancer-be-cured.html</a>. Updated May 6, 2021. Accessed July 17, 2024.