2006 Colorado

health watch



of Public Health and Environment

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Summary

On the whole, Colorado does well on many of the health indicators contained in this report, but there are also many opportunities for improving the health of the population.

Nearly 40 percent of the pregnancies that resulted in live births in 2005 were unintended. Because infants born from an unintended pregnancy are at higher risk, efforts should be focused on ensuring that all pregnancies are intended. Prenatal care is important to help ensure a healthy pregnancy and delivery and all pregnant women in Colorado should be able to access prenatal care at the beginning and throughout their entire pregnancy. Rates of access are particularly low for women of color. Women of color in Colorado who give birth also experience many health disparities, especially black women, who have a much higher rate of low birth weight births, preterm births, and infant mortality.

Colorado children are not meeting the Healthy People 2010 goals for adequate physical activity and fruit and vegetable consumption. Correspondingly, children ages 2-14 are overweight at nearly three times the Healthy People 2010 goal. More than one-fourth of children between the ages of 1 and 14 experienced some difficulty with emotions, concentration, behavior, or getting along with others and less than two-thirds of them received counseling or treatment.

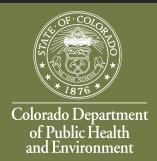
As illustrated in this report, unintentional injury is the leading cause of death for children in Colorado. By their very nature, most injuries are predictable and preventable. Parents need continual education about safety measures for children, including the importance of using properly installed car safety seats, bike helmets, and smoke detectors.

Many opportunities for health improvement exist for the adolescent population in Colorado. Very high rates of smoking, alcohol use, and marijuana use are in evidence. There is a good deal of research which points to promising strategies for reducing substance use among adolescents (see Healthy People 2010, Chapter 26, Substance Abuse and Chapter 27, Tobacco Use for a summary). These strategies include school-based programs focused on altering perceived peer-group norms about alcohol use and developing skills in resisting peer pressures to drink. Community-wide programs involving school curricula, peer leadership, parental involvement and education, and community task forces also have reduced alcohol use among adolescents. Stronger penalties for driving under the influence, raising the minimum drinking age, and raising the price of alcohol and cigarettes have also been effective in reducing use. Health education curricula at the appropriate grade level can prevent initiation among youth, provide knowledge about effective cessation methods, and increase understanding of the health effects of tobacco use.

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Adolescents in Colorado also have high rates of attempted and completed suicide. Unfortunately, suicide is very difficult to predict, but research is illuminating risk factors, when addressed, may hold promise for prevention.

The decline in teen fertility for 15-17-year-olds over the past decade is a very positive sign and supported by the increase in reported abstinence and condom use among sexually active high school students in Colorado. This trend continued into 2005.

As with younger children, the leading cause of death for adolescents, injury, carries the promise of effective intervention strategies that, if implemented, could reduce the death rate for people in this age group.

As is true for pregnant women, all adults in Colorado require access to health care in order to maximize health outcomes. Health care coverage, an important predictor of access, is extremely low for Hispanics in Colorado.

Colorado adults have fairly low rates of physical inactivity and more than half of all adults engage in regular moderate or vigorous physical activity. Colorado adults have correspondingly low rates of obesity, compared to the rest of the country, however the proportion of adults who are obese has been steadily increasing over the past 15 years.

Adults in Colorado exceed Healthy People 2010 goals for binge drinking and cigarette smoking, two factors which contribute to the leading causes of death: injuries, heart disease and cancer.

Opportunities exist for health improvement throughout the life cycle. The need for access to health care exists at every stage. Health behaviors initiated in childhood and adolescence impact behaviors in adulthood, and health behavior is directly linked to leading causes of illness and death, illustrating the need for the development of healthy behaviors early in life.

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