

# NEZ PERCE COUNTY CANCER PROFILE

*A fact sheet from the Cancer Data Registry of Idaho, Idaho Hospital Association.*

## **Cancer Incidence 2013–2017 Cancer Mortality 2014–2018 BRFSS 2011–2018**

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### CANCER

Cancer is a group of over 100 different diseases, each characterized by the uncontrolled growth and spread of abnormal cells. Cancer risk increases with age and varies by gender and race. As the average age of the population increases, the incidence of cancer will increase as well.

An estimated 42% of all cancers are due to personal lifestyle factors, such as smoking and sedentary lifestyle, and are preventable. Additional cancers are attributable to environmental factors and gene-environment interactions. Other non-modifiable factors, such as age, sex, and family history of specific cancers, are also associated with cancer risk and can help identify people at elevated risk for developing cancer.

For some cancers, early detection can save lives. For example, colorectal cancer screening reduces mortality in adults aged 50–75 years. Improved primary prevention, early detection, and effective treatment can reduce the burden of cancer in Idaho.

### RISK FACTORS AND INTERVENTIONS

#### **Aging:**

As the population ages, the number of new cancer cases and cancer deaths that occur each year will continue to increase. This trend could be reversed through significant improvements in primary prevention, early detection, and treatment.

#### **Smoking:**

Smoking and the use of smokeless tobacco are responsible for most cancers of the lung, trachea, bronchus, larynx, pharynx, oral cavity, and esophagus. Smoking is the leading cause of preventable death in the United States.

#### **Diet:**

The U.S. Departments of Agriculture and Health and Human Services recommend the following dietary guidelines: eat a variety of foods; choose a diet with plenty of fruits, vegetables, and whole-grain products; limit the use of sugar, salt, and solid fats; and minimize alcoholic beverage consumption. For details, see <https://health.gov/dietaryguidelines/2015>.

#### **Screening:**

Early detection through screening reduces morbidity and mortality for cancers that can be diagnosed early and treated.

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### FOR MORE INFORMATION

Cancer Data Registry of Idaho  
615 N. 7<sup>th</sup> Street  
P.O. Box 1278  
Boise, ID 83701  
208-489-1380  
<https://www.idcancer.org>

National Cancer Institute  
Cancer Information Services  
1-800-4CANCER  
<https://www.cancer.gov/contact/contact-center>

American Cancer Society  
2676 S. Vista Avenue  
Boise, ID 83705  
208-343-4609  
<https://www.cancer.org>

## CANCER INCIDENCE 2013–2017

Nearly one in two Idahoans are estimated to develop cancer during their lifetime. During 2013–2017, 40,996 cases of invasive cancer were diagnosed among Idaho residents, and 1,249 cases of invasive cancer were diagnosed among Nez Perce County residents (Table 1).

**Table 1:** Incidence of All Cancers, Female Breast, Prostate, Lung and Bronchus, and Colorectal Cancers in Nez Perce County and the State of Idaho, 2013–2017

Cancer Incidence 2013–2017	Nez Perce County	State of Idaho
All Sites/Types	1,249	40,996
Female Breast	208	5,956
Prostate	150	5,027
Lung & Bronchus	185	4,657
Colorectal	100	3,235

Table 3 (*Cancer Incidence 2013–2017, Comparison between Nez Perce County and the Remainder of the State of Idaho*) shows the number of observed cases, person-years, crude rates, age- and sex-adjusted rates, expected number of cases based upon age- and sex-specific rates in the remainder of Idaho, and p-values for tests comparing the number of observed and expected cases in Nez Perce County. The table also shows the number of observed cases, person-years, and

crude rates for the remainder of the state of Idaho. Comparisons between the county and the remainder of the state were made for all cancers combined, 23 invasive cancer types, in situ breast cancer, non-malignant brain and other central nervous system tumors, and pediatric (0–19 years) cancer. Separate comparisons for males, females, and both sexes combined are included.

As shown in Table 3, the crude rate of invasive cancer incidence in Nez Perce County was 624.0 cases per 100,000 person-years per year during 2013–2017. Comparing this crude rate with the crude rate for the remainder of Idaho (490.9) gives an estimate of the relative burden of disease in Nez Perce County.

The age- and sex-adjusted incidence rate of invasive cancer in Nez Perce County, all sites combined, was 507.0 cases per 100,000 persons per year during 2013–2017. There were more cases of cancer in Nez Perce County (1,249) than expected (1,209.4) based upon rates in the remainder of the state, but the difference was not statistically significant.

There are many reasons why cancer incidence rates differ by county, such as the prevalence of smoking and other lifestyle factors, and access to healthcare.

## CANCER MORTALITY 2014–2018

During 2014–2018, cancer was the second leading cause of death in Idaho; 14,585 Idaho residents and 537 Nez Perce County residents died from cancer during this period. Most cancer deaths are from five primary sites: lung, colon, pancreas, female breast, and prostate (Table 2).

**Table 2:** Overall and Cancer Mortality in Nez Perce County and the State of Idaho, 2014–2018

Mortality 2014–2018	Nez Perce County	State of Idaho
All Deaths	2,541	67,280
Cancer Deaths <i>% of All Deaths</i>	537 21.1%	14,585 21.7%
Lung & Bronchus	137	3,125
Colorectal	45	1,226
Pancreas	45	1,079
Female Breast	36	1,077
Prostate	35	935

Table 4 (*Cancer Mortality 2014–2018, Comparison between Nez Perce County and the Remainder of the State of Idaho*) shows the number of observed deaths, person-years, crude rates, age- and sex-adjusted rates, expected number of deaths based upon age- and sex-specific rates in the remainder of Idaho, and p-values for tests comparing the number of observed and expected deaths for Nez Perce County. The table also shows the number of observed deaths, person-years, and crude rates for the remainder of the state of Idaho. Comparisons between the county and the remainder of the state were made for all deaths, all cancer deaths, and 21 specific cancer types. Separate comparisons for males, females, and both sexes combined are included.

The age- and sex-adjusted cancer mortality rate for Nez Perce County, all sites combined, was 201.9 deaths per 100,000 persons per year during 2014–2018, compared with 170.5 for the remainder of the state. There were statistically significantly more cancer deaths in Nez Perce County (537) than expected (453.4) based upon rates in the remainder of the state ( $p < .001$ ).

**TABLE 3: CANCER INCIDENCE 2013–2017**  
**COMPARISON BETWEEN NEZ PERCE COUNTY AND THE REMAINDER OF THE STATE OF IDAHO**

Cancer Site/Type	Sex	Nez Perce County						Remainder of Idaho		
		Observed Cases	Person Years	Crude Rate (1)	A.A.I. Rate (1,2)	Expected Cases (3)	P-Value (4)	Observed Cases	Person Years	Crude Rate (1)
All Sites Combined	Total	1,249	200,158	624.0	507.0	1,209.4	0.261	39,747	8,096,208	490.9
	Male	640	99,106	645.8	522.6	620.5	0.445	20,557	4,056,889	506.7
	Female	609	101,052	602.7	493.4	586.4	0.361	19,190	4,039,319	475.1
Bladder	Total	49	200,158	24.5	18.5	64.2	0.059	1,966	8,096,208	24.3
	Male	39	99,106	39.4	30.0	49.0	0.167	1,531	4,056,889	37.7
	Female	10	101,052	9.9	7.5	14.5	0.295	435	4,039,319	10.8
Brain - malignant	Total	21	200,158	10.5	9.2	16.6	0.331	589	8,096,208	7.3
	Male	13	99,106	13.1	11.4	10.1	0.429	358	4,056,889	8.8
	Female	8	101,052	7.9	7.1	6.4	0.635	231	4,039,319	5.7
Brain and other CNS - non-malignant	Total	30	200,158	15.0	12.6	30.7	0.992	1,042	8,096,208	12.9
	Male	11	99,106	11.1	9.4	9.9	0.799	343	4,056,889	8.5
	Female	19	101,052	18.8	15.7	21.0	0.774	699	4,039,319	17.3
Breast	Total	210	200,158	104.9	88.3	170.1	0.003 >>	5,791	8,096,208	71.5
	Male	2	99,106	2.0	1.5	1.4	0.801	43	4,056,889	1.1
	Female	208	101,052	205.8	173.3	170.8	0.006 >>	5,748	4,039,319	142.3
Breast - in situ	Total	39	200,158	19.5	17.1	28.9	0.084	1,025	8,096,208	12.7
	Male	-	99,106	-	-	0.1	1.000	3	4,056,889	0.1
	Female	39	101,052	38.6	33.8	29.2	0.094	1,022	4,039,319	25.3
Cervix	Female	5	101,052	4.9	4.8	6.6	0.714	254	4,039,319	6.3
Colorectal	Total	100	200,158	50.0	39.9	97.1	0.794	3,135	8,096,208	38.7
	Male	54	99,106	54.5	44.1	50.7	0.678	1,681	4,056,889	41.4
	Female	46	101,052	45.5	35.8	46.3	1.000	1,454	4,039,319	36.0
Corpus Uteri	Female	26	101,052	25.7	22.0	34.5	0.162	1,183	4,039,319	29.3
Esophagus	Total	12	200,158	6.0	4.8	14.1	0.702	457	8,096,208	5.6
	Male	10	99,106	10.1	8.2	11.4	0.836	378	4,056,889	9.3
	Female	2	101,052	2.0	1.5	2.6	1.000	79	4,039,319	2.0
Hodgkin Lymphoma	Total	5	200,158	2.5	2.4	5.0	1.000	194	8,096,208	2.4
	Male	3	99,106	3.0	3.0	2.6	0.964	105	4,056,889	2.6
	Female	2	101,052	2.0	1.9	2.4	1.000	89	4,039,319	2.2
Kidney and Renal Pelvis	Total	45	200,158	22.5	18.4	45.5	1.000	1,509	8,096,208	18.6
	Male	30	99,106	30.3	25.0	28.5	0.827	965	4,056,889	23.8
	Female	15	101,052	14.8	12.0	16.8	0.786	544	4,039,319	13.5
Larynx	Total	7	200,158	3.5	2.8	6.2	0.845	202	8,096,208	2.5
	Male	6	99,106	6.1	4.9	4.9	0.736	162	4,056,889	4.0
	Female	1	101,052	1.0	0.8	1.2	1.000	40	4,039,319	1.0
Leukemia	Total	35	200,158	17.5	13.9	45.0	0.147	1,451	8,096,208	17.9
	Male	21	99,106	21.2	17.2	25.9	0.392	860	4,056,889	21.2
	Female	14	101,052	13.9	10.8	19.0	0.300	591	4,039,319	14.6
Liver and Bile Duct	Total	19	200,158	9.5	7.8	21.5	0.689	714	8,096,208	8.8
	Male	17	99,106	17.2	14.2	15.2	0.703	515	4,056,889	12.7
	Female	2	101,052	2.0	1.6	6.3	0.103	199	4,039,319	4.9
Lung and Bronchus	Total	185	200,158	92.4	71.5	143.0	0.001 >>	4,472	8,096,208	55.2
	Male	98	99,106	98.9	76.9	72.3	0.005 >>	2,304	4,056,889	56.8
	Female	87	101,052	86.1	66.3	70.4	0.062	2,168	4,039,319	53.7
Melanoma of the Skin	Total	59	200,158	29.5	24.6	73.0	0.107	2,467	8,096,208	30.5
	Male	29	99,106	29.3	23.9	43.1	0.030 <<	1,440	4,056,889	35.5
	Female	30	101,052	29.7	25.7	29.7	1.000	1,027	4,039,319	25.4
Myeloma	Total	18	200,158	9.0	6.9	19.0	0.944	590	8,096,208	7.3
	Male	13	99,106	13.1	10.3	10.7	0.551	344	4,056,889	8.5
	Female	5	101,052	4.9	3.7	8.2	0.346	246	4,039,319	6.1
Non-Hodgkin Lymphoma	Total	54	200,158	27.0	21.6	53.1	0.938	1,719	8,096,208	21.2
	Male	33	99,106	33.3	27.0	29.3	0.545	974	4,056,889	24.0
	Female	21	101,052	20.8	16.4	23.6	0.682	745	4,039,319	18.4
Oral Cavity and Pharynx	Total	35	200,158	17.5	14.5	33.7	0.875	1,133	8,096,208	14.0
	Male	22	99,106	22.2	18.5	23.6	0.853	804	4,056,889	19.8
	Female	13	101,052	12.9	10.6	10.0	0.419	329	4,039,319	8.1
Ovary	Female	8	101,052	7.9	6.5	15.5	0.057	511	4,039,319	12.7
Pancreas	Total	51	200,158	25.5	19.7	40.0	0.107	1,253	8,096,208	15.5
	Male	22	99,106	22.2	17.5	21.0	0.889	680	4,056,889	16.8
	Female	29	101,052	28.7	21.7	18.9	0.038 >>	573	4,039,319	14.2
Prostate	Male	150	99,106	151.4	124.2	145.2	0.710	4,877	4,056,889	120.2
Stomach	Total	19	200,158	9.5	7.4	14.8	0.339	469	8,096,208	5.8
	Male	13	99,106	13.1	10.4	9.4	0.311	305	4,056,889	7.5
	Female	6	101,052	5.9	4.5	5.4	0.899	164	4,039,319	4.1
Testis	Male	3	99,106	3.0	3.1	6.3	0.248	264	4,056,889	6.5
Thyroid	Total	24	200,158	12.0	11.2	32.5	0.150	1,232	8,096,208	15.2
	Male	6	99,106	6.1	5.5	8.7	0.462	326	4,056,889	8.0
	Female	18	101,052	17.8	16.9	23.9	0.261	906	4,039,319	22.4
Pediatric Age 0 to 19	Total	9	47,917	18.8	18.6	8.8	1.000	426	2,352,605	18.1
	Male	3	24,790	12.1	12.0	4.8	0.584	231	1,201,112	19.2
	Female	6	23,127	25.9	25.7	3.9	0.413	195	1,151,493	16.9

Notes: 1. Rates are expressed as the number of cases per 100,000 persons per year (person-years).

2. Age and sex-adjusted incidence (A.A.I.) rates for county use age and sex-specific crude rates for the remainder of the state as standard.

3. Expected cases are based upon age and sex-specific rates for the remainder of the state of Idaho (compare to observed).

4. P-values compare observed and expected cases, are two tailed, based upon the Poisson probability distribution.

"<<" denotes significantly fewer cases observed than expected, ">>" denotes significantly more cases observed than expected (p=.05).

Statistical Note: Rates based upon 12 or fewer cases (numerator) should be interpreted with caution.

**TABLE 4: CANCER MORTALITY 2014–2018**  
**COMPARISON BETWEEN NEZ PERCE COUNTY AND THE REMAINDER OF THE STATE OF IDAHO**

Cause of Death Cancer Site/Type	Sex	Nez Perce County						Remainder of Idaho		
		Observed Deaths	Person Years	Crude Rate (1)	A.A.M. Rate (1,2)	Expected Deaths (3)	P-Value (4)	Observed Deaths	Person Years	Crude Rate (1)
All Causes of Death	Total	2,541	200,773	1,265.6	901.0	2,216.1	0.000 >>	64,739	8,238,271	785.8
	Male	1,295	99,354	1,303.4	967.8	1,098.4	0.000 >>	33,891	4,128,526	820.9
	Female	1,246	101,419	1,228.6	839.6	1,113.9	0.000 >>	30,848	4,109,745	750.6
All Malignant Cancers	Total	537	200,773	267.5	201.9	453.4	0.000 >>	14,048	8,238,271	170.5
	Male	297	99,354	298.9	227.2	240.8	0.001 >>	7,604	4,128,526	184.2
	Female	240	101,419	236.6	178.0	211.4	0.057	6,444	4,109,745	156.8
Bladder	Total	12	200,773	6.0	4.1	14.8	0.577	414	8,238,271	5.0
	Male	8	99,354	8.1	5.6	10.8	0.496	311	4,128,526	7.5
	Female	4	101,419	3.9	2.7	3.8	1.000	103	4,109,745	2.5
Brain and Other Nervous System	Total	12	200,773	6.0	5.0	14.1	0.694	485	8,238,271	5.9
	Male	10	99,354	10.1	8.5	8.7	0.757	305	4,128,526	7.4
	Female	2	101,419	2.0	1.7	5.3	0.202	180	4,109,745	4.4
Breast	Total	36	200,773	17.9	13.9	33.1	0.660	1,051	8,238,271	12.8
	Male	-	99,354	-	-	0.3	1.000	10	4,128,526	0.2
	Female	36	101,419	35.5	27.5	33.2	0.673	1,041	4,109,745	25.3
Cervix	Female	3	101,419	3.0	2.6	2.1	0.721	77	4,109,745	1.9
Colorectal	Total	45	200,773	22.4	17.0	38.0	0.296	1,181	8,238,271	14.3
	Male	25	99,354	25.2	19.6	19.7	0.283	637	4,128,526	15.4
	Female	20	101,419	19.7	14.5	18.3	0.748	544	4,109,745	13.2
Corpus Uteri	Female	5	101,419	4.9	3.8	4.7	1.000	148	4,109,745	3.6
Esophagus	Total	15	200,773	7.5	5.8	14.4	0.936	456	8,238,271	5.5
	Male	10	99,354	10.1	7.9	11.3	0.839	370	4,128,526	9.0
	Female	5	101,419	4.9	3.7	2.9	0.321	86	4,109,745	2.1
Hodgkin Lymphoma	Total	-	200,773	-	-	0.6	1.000	21	8,238,271	0.3
	Male	-	99,354	-	-	0.2	1.000	8	4,128,526	0.2
	Female	-	101,419	-	-	0.4	1.000	13	4,109,745	0.3
Kidney	Total	16	200,773	8.0	6.0	11.4	0.229	354	8,238,271	4.3
	Male	13	99,354	13.1	10.2	7.1	0.060	229	4,128,526	5.5
	Female	3	101,419	3.0	2.2	4.2	0.786	125	4,109,745	3.0
Larynx	Total	2	200,773	1.0	0.7	2.0	1.000	61	8,238,271	0.7
	Male	2	99,354	2.0	1.5	1.6	0.978	51	4,128,526	1.2
	Female	-	101,419	-	-	0.3	1.000	10	4,109,745	0.2
Leukemia	Total	16	200,773	8.0	5.9	19.9	0.462	600	8,238,271	7.3
	Male	11	99,354	11.1	8.3	11.1	1.000	347	4,128,526	8.4
	Female	5	101,419	4.9	3.6	8.7	0.277	253	4,109,745	6.2
Liver and Bile Duct	Total	17	200,773	8.5	6.8	17.7	0.995	581	8,238,271	7.1
	Male	13	99,354	13.1	10.6	11.8	0.809	399	4,128,526	9.7
	Female	4	101,419	3.9	3.1	5.8	0.627	182	4,109,745	4.4
Lung and Bronchus	Total	137	200,773	68.2	52.0	95.6	0.000 >>	2,988	8,238,271	36.3
	Male	74	99,354	74.5	57.4	49.8	0.002 >>	1,593	4,128,526	38.6
	Female	63	101,419	62.1	46.9	45.6	0.017 >>	1,395	4,109,745	33.9
Melanoma of the Skin	Total	9	200,773	4.5	3.5	8.4	0.920	271	8,238,271	3.3
	Male	2	99,354	2.0	1.6	5.6	0.162	185	4,128,526	4.5
	Female	7	101,419	6.9	5.4	2.7	0.042 >>	86	4,109,745	2.1
Myeloma	Total	12	200,773	6.0	4.3	10.7	0.770	317	8,238,271	3.8
	Male	10	99,354	10.1	7.3	6.1	0.184	185	4,128,526	4.5
	Female	2	101,419	2.0	1.4	4.6	0.336	132	4,109,745	3.2
Non-Hodgkin Lymphoma	Total	20	200,773	10.0	7.2	18.6	0.808	550	8,238,271	6.7
	Male	11	99,354	11.1	8.3	9.9	0.805	308	4,128,526	7.5
	Female	9	101,419	8.9	6.1	8.7	0.995	242	4,109,745	5.9
Oral Cavity and Pharynx	Total	12	200,773	6.0	4.6	6.6	0.076	211	8,238,271	2.6
	Male	5	99,354	5.0	4.0	4.4	0.916	147	4,128,526	3.6
	Female	7	101,419	6.9	5.1	2.1	0.013 >>	64	4,109,745	1.6
Ovary	Female	9	101,419	8.9	6.9	11.2	0.637	354	4,109,745	8.6
Pancreas	Total	45	200,773	22.4	17.3	32.7	0.047 >>	1,034	8,238,271	12.6
	Male	20	99,354	20.1	16.0	17.3	0.581	572	4,128,526	13.9
	Female	25	101,419	24.7	18.4	15.3	0.028 >>	462	4,109,745	11.2
Prostate	Male	35	99,354	35.2	24.1	31.6	0.596	900	4,128,526	21.8
Stomach	Total	10	200,773	5.0	3.8	6.4	0.229	200	8,238,271	2.4
	Male	7	99,354	7.0	5.5	3.6	0.139	115	4,128,526	2.8
	Female	3	101,419	3.0	2.2	2.8	1.000	85	4,109,745	2.1

- Notes: 1. Rates are expressed as the number of cases per 100,000 persons per year (person-years).  
2. Age and sex-adjusted mortality (A.A.M.) rates for county use age and sex-specific crude rates for the remainder of the state as standard.  
3. Expected cases are based upon age and sex-specific rates for the remainder of the state of Idaho (compare to observed).  
4. P-values compare observed and expected cases, are two tailed, based upon the Poisson probability distribution.  
"<" denotes significantly fewer cases observed than expected, ">" denotes significantly more cases observed than expected (p=.05).

Statistical Notes: Rates based upon 12 or fewer cases (numerator) should be interpreted with caution.

Mortality statistics presented differ from BVRHS official statistics due to differences in methodology.

Data Source: Bureau of Vital Records and Health Statistics (BVRHS), Division of Public Health, Idaho Department of Health and Welfare, 2019.

## Cancer Screening and Risk Factors

The Bureau of Vital Records and Health Statistics (BVRHS), Division of Public Health, Idaho Department of Health and Welfare, under a cooperative agreement with the Centers for Disease Control and Prevention, has conducted telephone Behavioral Risk Factor Surveys (BRFS) with randomly selected adult Idahoans to measure population prevalences of risk factors for the major causes of death, including cancer, since 1984. BVRHS provided data sets containing Behavioral Risk Factor Surveillance System (BRFSS) data from 2011 through 2018 to CDRI staff, who performed the analyses reported in these *County Profiles*. Analysis weights were poststratified to 2018 population estimates by age group, sex, and county, beginning with the BRFSS raked weights. Not all questions were asked in all years. A minimum of 50 respondents was required to generate county-level statistics. Results may differ from IDHW reports due to differences in methods. Cancer screening and risk factor measures were selected to assist in monitoring *Comprehensive Cancer Alliance for Idaho* objectives. Wald log-linear chi-square statistics were used to test for independence of the selected measures and other variables, such as age and race, taking the complex survey design into account.

### Cancer Screening and Risk Factor Prevalence Estimates, 2011–2018

Measure	State of Idaho	HD							Nez Perce County
		HD 1	HD 2	HD 3	HD 4	HD 5	HD 6	HD 7	
<b>Access to Care</b>									
Have Health Insurance, Age <65 (2014–2018)	81.2%	80.6%	84.5%	74.6%	84.7%	75.5%	83.3%	83.8%	85.1%
Not See Doctor Due to Cost in Past Year (2014–2018)	14.3%	13.9%	12.2%	18.1%	13.6%	14.3%	12.5%	13.9%	12.6%
<b>Cancer Screening</b>									
Mammogram Past 2 Years, Age 50–74 (2014, 2016, 2018)	67.5%	66.8%	72.1%	63.2%	72.9%	61.0%	64.6%	66.8%	77.5%
Pap Test Past 3 Years, Cervix Intact Age 21–65 (2016, 2018)	72.5%	74.8%	74.3%	72.1%	73.0%	71.7%	72.7%	68.6%	74.3%
Colorectal Cancer Screening, Age 50–75 (2016, 2018)	65.4%	64.9%	71.3%	62.6%	68.9%	60.3%	62.1%	65.3%	74.3%
<b>Tobacco Use</b>									
Current Smoker (2014–2018)	14.6%	17.1%	15.1%	16.8%	13.1%	16.2%	14.4%	10.4%	16.4%
Current Smokeless Tobacco User, Males (2014–2018)	9.5%	10.6%	14.0%	11.1%	8.4%	8.9%	8.4%	7.3%	14.8%
<b>Other Cancer-Related</b>									
Sunburn in Previous 12 Months (2018)	47.7%	42.3%	49.0%	41.6%	50.8%	42.8%	49.9%	56.6%	45.2%
Artificial Tanning Appliance Use (2011, 2014, 2016)	4.4%	5.5%	3.3%	3.3%	3.4%	4.2%	5.7%	6.8%	5.1%
Healthy Weight by Body Mass Index, Age 20+ (2014–2018)	32.6%	34.2%	32.9%	27.0%	36.3%	31.1%	29.4%	32.4%	31.1%
Meet Physical Activity Guidelines (2011, 2013, 2015, 2017)	22.1%	22.1%	19.9%	20.6%	26.1%	18.8%	20.0%	20.1%	17.3%
Home Ever Tested for Radon (2016, 2018)	22.7%	29.7%	19.5%	16.3%	24.1%	20.2%	23.3%	22.7%	18.4%

#### Access to Care

##### Have Health Insurance – 2014–2018

Statewide, 81.2% of adults aged 18–64 reported having health care coverage. Health care coverage differed significantly by race/ethnicity, with 84.5% of white non-Hispanics, compared to 59.8% of Hispanics and 79.9% of Native Americans, having health insurance. Spanish-speaking respondents were significantly less likely to be insured (33.1%) than English-speaking respondents (83.1%). Health care coverage differed significantly by age of respondent, with 76.4% of persons aged 30–39, and 86.5% of persons aged 50–64, having health insurance. Health care coverage differed significantly by county, with a range of 57.4% in Adams County to 91.7% in Oneida County having health insurance.

##### Not See Doctor Due to Cost in Past Year – 2014–2018

Statewide, 14.3% of adults aged 18+ reported they needed to see a doctor but could not because of cost sometime in the past 12 months. Inability to see a doctor due to cost differed significantly by race/ethnicity (13.2% of white non-Hispanics, 21.4% of Hispanics, and 23.1% of Native Americans). Inability to see a doctor due to cost differed significantly by annual household income (27.4% for less than \$15,000, 6.7% for greater than \$50,000). Inability to see a doctor due to cost differed significantly by county, with a range of 7.0% in Caribou County to 20.2% in Jerome County.

\*\* Current for colorectal cancer screening means a blood stool test in the past year, sigmoidoscopy in the past 5 years and blood stool test in the past 3 years, or a colonoscopy in the past 10 years.

#### Cancer Screening

##### Mammogram – 2014, 2016, 2018

Statewide, 67.5% of women aged 50–74 reported having a mammogram in the past 2 years. Insured women were about twice as likely to have had a mammogram in the past 2 years (70.7% versus 34.0%). Mammography rates differed significantly by county, with a range in screening of 47.3% in Gooding County to 77.5% in Nez Perce County. In 2018, Idaho ranked 49<sup>th</sup> among states and the District of Columbia for mammography screening rates among women aged 50–74 and 50<sup>th</sup> among ages 40+.

##### Pap Test – 2016, 2018

Statewide, 72.5% of women with an intact cervix and aged 21–65 reported having a Pap test in the past 3 years. Women with health insurance were significantly more likely to have timely Pap screening than uninsured women (77.3% versus 54.2% screened in the past 3 years). Pap screening differed significantly by county, with a range of 60.5% in Idaho County to 79.2% in Latah County. In 2018, Idaho ranked 51<sup>st</sup> among states and the District of Columbia for Pap screening rate.

##### Colorectal Cancer Screening – 2016, 2018

Statewide, 65.4% of adults aged 50–75 reported receiving colorectal cancer screening based on the most recent guidelines.\*\* Persons with health insurance were over twice as likely to be current for colorectal cancer screening. In 2018, Idaho ranked 41<sup>st</sup> among states and the District of Columbia in the percentage of adults aged 50–75 and older who reported being up-to-date for colorectal cancer screening.

## Cancer Screening and Risk Factors

### Tobacco Use

#### Current Smoking – 2014–2018

Statewide, 14.6% of adults aged 18 and older were current smokers. Smoking prevalence differed significantly by age of respondent, with 19.2% of persons aged 30–39, and 8.4% of persons aged 65 and older reporting current smoking. Smoking prevalence was lower among white non-Hispanics (14.7%) than among Native Americans (32.4%). Smoking prevalence differed significantly by county, with a range of 4.3% in Madison County to 32.7% in Adams County. Counties with higher rates of current smoking had higher rates of lung cancer.

#### Smokeless Tobacco Use, Males – 2014–2018

Statewide, 9.5% of males aged 18 and older were current users of smokeless tobacco. Smokeless tobacco use differed significantly by age group, ranging from 12.8% of males aged 30–39 to 4.0% of males aged 65 and older. Smokeless tobacco use differed significantly by county, with a range of 3.4% in Franklin County to 21.1% in Custer County. Counties with higher rates of smokeless tobacco use had higher rates of oral cavity & pharynx cancer.

### Other Cancer-Related

#### Sun Exposure – 2018

Statewide, 47.7% of adults aged 18 and older reported having sunburn in the past 12 months. Sunburn rates were higher for white non-Hispanics (49.6%) and Native Americans (48.7%) than for Hispanics (35.2%). Sunburn rates differed significantly by age group, with 67.2% of persons aged 30–39 and 17.9% of persons aged 65 and older having sunburn in the past 12 months. Sunburn rates differed significantly by county, with a range of 36.7% in Idaho County to 72.9% in Madison County having sunburn in the past 12 months.

#### Artificial Tanning Appliance Use – 2011, 2014, 2016

Statewide, 4.4% of adults aged 18 and older reported using an artificial tanning appliance, such as a tanning bed, in the past 12 months. Females (6.8%) were significantly more likely than males (2.1%) to have used an artificial tanning appliance in the

past 12 months. Tanning appliance use differed significantly by age group, with 8.7% of persons aged 18–29 and 0.9% of persons aged 65 and older, using an appliance in the past 12 months. Tanning appliance use differed by county, with a range of less than 1% in Oneida, Power, and Valley Counties to over 9% in Bear Lake and Fremont Counties using an artificial tanning appliance in the past 12 months.

#### Healthy Weight by Body Mass Index – 2014–2018

Statewide, 32.6% of adults aged 20 and older were in the healthy weight range as measured by body mass index (BMI 18.5–24.9). BMI differed significantly by race/ethnicity, with 33.3% of white non-Hispanics, compared to 26.0% of Hispanics and 26.8% of Native Americans, being in the healthy weight range. Males (25.7%) were significantly less likely to be in the healthy weight range than females (39.4%). BMI differed significantly by age of respondent, with 45.0% of persons aged 18–29, and 27.1% of persons aged 50–64, being in the healthy weight range. BMI differed significantly by county, with a range of 19.5% in Minidoka County to 52.8% in Blaine County of adults being in the healthy weight range.

#### Physical Activity – 2011, 2013, 2015, 2017

Statewide, 22.1% of adults aged 18 and older met aerobic and strength physical activity guidelines during the past month or week. Physical activity differed significantly by age of respondent, with 26.3% of persons aged 18–29, and 19.3% of persons aged 50–64, meeting guidelines. The percentage of adults meeting physical activity guidelines differed significantly by county, with a range of 7.6% in Oneida County to 31.1% in Blaine County.

#### Home Radon Testing – 2016, 2018

Statewide, 22.7% of adults have ever tested their house for radon. Radon test usage varied significantly by race/ethnicity, with 24.7% of white non-Hispanics, 5.3% of Hispanics, and 27.9% of Native Americans having ever tested their house for radon. Radon test usage was higher for persons aged 50+ than for younger persons. Home radon testing differed significantly by county, with a range of 8.0% in Cassia County to 58.0% in Blaine County.

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