

Data Vignettes from the RI Women's Health Report Card

GOAL The Women's Health Council of RI continues to track metrics and report card data as well as advocate for research, analysis and policy improvements for Women's Health. Check back often for more information at www.womenshealthcouncil.org.

SCREENING has been effective in the traditional areas of Women's Health

Mandated coverage for cancer screening in women
Nationally we rank high for screening:

Screening NATIONAL RANK

BREAST	5/50 for women 50 or older
CERVICAL	6/50
COLORECTAL	14/50

Mortality for these cancers in women is low compared to incidence

Cancer	Incidence NATIONAL RANK	Mortality NATIONAL RANK
BREAST	47/50	20/50
CERVICAL	18/50	N/A (very low numbers)
COLORECTAL	46/50	17/50

Opportunity

Indicates that statewide efforts on advocacy, education and resource dissemination can lead to positive health outcomes

NOTE: All data reflect the state of women's health in Rhode Island

LEGEND

Green indicates improved health outcomes
Red indicates poor health outcomes, and an opportunity for improved education and care

SOURCE

The RI Women's Health Report Card has been compiled by Council members from the following sources:

RIDOH, 2009, Top Ten Leading Causes of Burden of Disease
www.Statehealthfacts.org
www.CAHI.org
www.Statecancerprofiles.cancer.gov
<http://hrc.nwlc.org/>

LUNG CANCER AND COPD have not been a traditional focus for Women's Health; RI women are doing poorly

	Incidence NATIONAL RANK	Mortality NATIONAL RANK
LUNG CANCER	40/50	33/50

Risk Factors

Smoking is related to 5 of the top 10 Diseases for Women in RI: Heart Disease, COPD (Chronic Obstructive Pulmonary Disease), Cerebral Vascular Disease, Trachea/Bronchus/Lung Cancer, Breast Cancer

Women are attempting to stop smoking but **smoking** rates are still high

	PERCENT	NATIONAL RANK
ATTEMPT TO QUIT	66.4%	5/50
SMOKE	16.8%	28/50

No coverage for nicotine replacement therapy in RI may hurt efforts to decrease disease

Opportunity

Give women the resources to be successful in their efforts to stop smoking

Pay for nicotine replacement therapy

Publicly educate women about the available resources

Have providers disseminate information on resources to stop smoking (see complete list at www.womenshealthcouncil.org)

Implement a statewide approach to research into the effectiveness of different programs and new ways to change behavior

Implement policy changes among payors for stronger incentives for women to change behaviors

HEART DISEASE, the leading cause of death among women, has poor outcomes suggesting a need for greater attention

HEART/CV DISEASE: 24.4% of all causes of disease/injury

	Incidence NATIONAL RANK	Deaths PER 100,000
HEART DISEASE	165.4	31/50

Risk Factors

	PERCENT	NATIONAL RANK
HIGH BLOOD PRESSURE	27.5%*	30/50
SMOKING high in RI	16.8%	28/50
OVERWEIGHT/OBESITY high in RI	54%	

* EVER DIAGNOSED

Opportunity

Implement statewide intervention to address these contributory factors

Enhance research to identify ways to further modify behavior patterns

Tie postpartum visit to primary care to catch issues early and increase patient awareness



**Women's Health
Council of RI**