

Physical Health

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

COMMUNITY INDICATORS

Conditions may support or hinder health for women

	RI (%)	Goal (%)	RI State Rank
No health insurance (2008-2009)	13.4	0	15
Poverty (2008-2009)	12.6	0*	26
High school completion (2008-2009)	84.8	90	44
Wage gap (2009)	79.4	100*	10

Opportunity

Advocate for increased access to timely, comprehensive, quality health services.

Provide uninsured women with health insurance. Regular access to the health system improves their health status and likelihood of receiving medical services.

Understand that health disparities are often linked to social and economic factors, so long-term solutions to health inequities must consider demographics.

*Goal refers to ideal situation

CARDIOVASCULAR HEALTH AND DIABETES

More women die of heart disease each year than men

Data: 2009	RI (%)	Goal (%)	State Rank
Smoking	14.9	12.0	16
Overweight or obese	54.4	NA	14
No leisure-time physical activity	28.3	20.0	33
Less than 5 fruits/veggies a day	70.4	50.0	16
Binge Drinking	11.4	6.0	36

Chronic Condition	RI (%)	Goal (%)	State Rank
High blood pressure	28.6	26.9	30
Diabetes	7.0	2.5	11

	RI	Goal	US
Age-Adjusted Death Rate per 100,000 (2005-2007)			
Heart disease	172.9	100.8	154.0
Stroke	33.1	33.8	41.3

Opportunity

Create a social and physical environment that supports healthy eating and active living.

Increase the awareness of risk for chronic illness, including the "numbers" (blood pressure, cholesterol, triglycerides, blood sugar, hemoglobin A1c).

Increase disease management and education for people with diabetes.

Encourage all women to be physically active at least 2.5 hours per week; limit alcohol; refrain from smoking; and maintain a healthy diet and a normal weight.

CANCER

Screening can identify certain cancers early but prevention is key

RI requires private insurers to cover these cancer screenings

	RI %	Goal %
Mammogram within past 2 years Aged 40+ (2010)	81.4	70.0
Pap test within past 3 years Aged 18+ (2010)	83.1	90.0
Colorectal cancer screening in lifetime Aged 50+ (2008)	67.3	50.0

Age-Adjusted Incidence Rate per 100,000 (2008)

Cancer	RI	US
Breast	136.3	121.7
Cervical	7.1	8.0
Colorectal	38.9	38.8
Lung/Bronchus	66.8	54.9

Opportunity

Ensure that all women have access to mammography and other cancer screening services.

Increase investment in tobacco control programs to reduce high frequency of smoking in RI.

Advocate for quitting or never starting smoking as the best prevention for lung cancer, since there is no easy screening for it.

NOTE: Red indicates a poor health condition compared to the Healthy People benchmark and an opportunity for the WHC to intervene. All data reflect the state of women's health in Rhode Island.

SOURCES: Current Population Survey, American Community Survey, Behavioral Risk Factor Surveillance System, National Vital Statistics System, National Program of Cancer Registries



Women's Health
Council of RI