

Health Care Issues

Oregon Healthy Teens 2005, 8th Grade State Summary
9. When was the last time you saw a doctor or nurse practitioner for a check up or physical exam when you were not sick or injured?

	Total	Female	Male
Total	100.0	100.0	100.0
During the past 12 months	52.1	49.9	54.3
Between 12 and 24 months ago	15.5	16.1	14.9
More than 24 months ago	5.2	5.8	4.7
Never	3.1	3.5	2.6
Not sure	24.1	24.7	23.5

Weighted percentages exclude missing and/or refused answers.

Oregon Healthy Teens 2005, 8th Grade State Summary
9. When was the last time you saw a doctor or nurse practitioner for a check up or physical exam when you were not sick or injured?

	Total	Female	Male
Total	8,533	4,278	4,255
During the past 12 months	4,444	2,149	2,295
Between 12 and 24 months ago	1,304	684	620
More than 24 months ago	435	231	204
Never	272	146	126
Not sure	2,078	1,068	1,010

Unweighted counts exclude missing and/or refused answers.

Oregon Healthy Teens 2005, 8th Grade State Summary
10. During the past 12 months, did you have any of the following health care needs? (Mark all that apply)

	Total	Female	Male
Total	100.0	100.0	100.0
Check-up or sports physical	37.6	37.2	38.1
Injury or accident	22.2	20.0	24.5
Illness	32.5	36.9	28.1
Immunization/Vaccination	22.0	25.3	18.7
Alcohol or other drug problem counseling	1.3	1.4	1.2
Personal or emotional problem counseling	5.1	8.0	2.1
Toothache	10.4	12.1	8.7
Other need not listed here	15.8	19.1	12.5
I had no health care needs	15.4	13.0	17.8

Weighted percentages exclude missing and/or refused answers.

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10. During the past 12 months, did you have any of the following health care needs? (Mark all that apply)

	Total	Female	Male
Total	8,218	4,128	4,090
Check-up or sports physical	3,189	1,593	1,596
Injury or accident	1,849	830	1,019
Illness	2,681	1,517	1,164
Immunization/Vaccination	1,788	1,012	776
Alcohol or other drug problem counseling	104	53	51
Personal or emotional problem counseling	406	313	93
Toothache	820	471	349
Other need not listed here	1,275	771	504
I had no health care needs	1,249	544	705

Unweighted counts exclude missing and/or refused answers.

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11. During the past 12 months, did you have any of the following health care needs that were NOT met? (Mark all that apply)

	Total	Female	Male
Total	100.0	100.0	100.0
Check-up or sports physical	6.6	6.5	6.8
Injury or accident	9.8	8.7	10.9
Illness	13.2	14.7	11.7
Immunization/Vaccination	1.6	1.2	2.0
Alcohol or other drug problem counseling	1.5	1.6	1.4
Personal or emotional problem counseling	3.8	6.0	1.5
Toothache	14.4	15.1	13.6
Other need not listed here	7.8	8.9	6.6
I had no health care needs	53.7	51.5	56.0

Weighted percentages exclude missing and/or refused answers.

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11. During the past 12 months, did you have any of the following health care needs that were NOT met? (Mark all that apply)

	Total	Female	Male
Total	7,261	3,668	3,593
Check-up or sports physical	472	227	245
Injury or accident	698	319	379
Illness	964	545	419
Immunization/Vaccination	122	54	68
Alcohol or other drug problem counseling	110	54	56
Personal or emotional problem counseling	271	211	60
Toothache	985	522	463
Other need not listed here	565	329	236
I had no health care needs	3,976	1,936	2,040

Unweighted counts exclude missing and/or refused answers.

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12. When was the last time you saw a dentist or dental hygienist for a check up, exam, teeth cleaning, or other dental work?

	Total	Female	Male
Total	100.0	100.0	100.0
During the past 12 months	69.9	71.0	68.8
Between 12 and 24 months ago	9.5	9.5	9.5
More than 24 months ago	6.2	6.1	6.3
Never	1.7	2.0	1.4
Not sure	12.7	11.4	14.0

Weighted percentages exclude missing and/or refused answers.

Oregon Healthy Teens 2005, 8th Grade State Summary

12. When was the last time you saw a dentist or dental hygienist for a check up, exam, teeth cleaning, or other dental work?

	Total	Female	Male
Total	8,497	4,259	4,238
During the past 12 months	5,889	3,008	2,881
Between 12 and 24 months ago	794	391	403
More than 24 months ago	515	261	254
Never	150	83	67
Not sure	1,149	516	633

Unweighted counts exclude missing and/or refused answers.

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13. Have you ever had a cavity that you know of?

	Total	Female	Male
Total	100.0	100.0	100.0
Yes	72.3	73.1	71.5
No	27.7	26.9	28.5

Weighted percentages exclude missing and/or refused answers.

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13. Have you ever had a cavity that you know of?

	Total	Female	Male
Total	8,479	4,253	4,226
Yes	6,185	3,140	3,045
No	2,294	1,113	1,181

Unweighted counts exclude missing and/or refused answers.

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14. Did you brush your teeth in the past 24 hours?

	Total	Female	Male
Total	100.0	100.0	100.0
Yes	95.9	97.3	94.5
No	4.1	2.7	5.5

Weighted percentages exclude missing and/or refused answers.

Oregon Healthy Teens 2005, 8th Grade State Summary

14. Did you brush your teeth in the past 24 hours?

	Total	Female	Male
Total	8,507	4,268	4,239
Yes	8,158	4,151	4,007
No	349	117	232

Unweighted counts exclude missing and/or refused answers.