

2014

Behavioral Risk Factor Surveillance System Survey of STATE EMPLOYEES



2014 Behavioral Risk Factor Surveillance System Survey of State Employees

A Report for the Public Employees' Benefit Board

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Suggested citation: Oregon Health Promotion and Chronic Disease Prevention, 2015, BRFSS 2014 Survey of State Employees Report.

To minimize error, two analysts have reviewed and verified the data presented in this report for quality, reliability and accuracy.

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State employee health and wellness



Nearly 50,000

state employees receive health benefits through PEBB.

96% of state and university employees believe PEBB promotes employee health.

However, among state employees:

- 1 in 5 have high blood pressure.
- 1 in 5 have had depression.
- 1 in 4 have high cholesterol.
- 4 in 5 sit for most of the work day.
- 2 in 3 are overweight or obese.

Having one or more of these health risk factors can lead to developing chronic diseases such as diabetes and heart disease.

Providing comprehensive benefits and supportive work environments can help state employees take charge of their own health.

How can work sites support employee health?



Form a wellness committee dedicated to employee health.



Establish guidelines for food and beverages at meetings.



Create a policy that promotes physical activity during the day.



Provide lactation accommodations for nursing mothers.



Provide incentives for active commuting.



Reinforce tobacco-free policies and promote cessation benefits.

Introduction

Overview

This report presents results from the 2014 Behavioral Risk Factor Survey of State Employees (BSSE). The BSSE's administration is modeled on the Behavioral Risk Factor Surveillance System (BRFSS). The Centers for Disease Control and Prevention (CDC) established the BRFSS in 1984. It is the largest telephone survey in the world.



Respondents for the survey were selected from a representative sample of people who worked in state agencies or within the Oregon University System (OUS). They all received health benefits through the Public Employees' Benefit Board (PEBB).

The BSSE measures health protective factors, health risk factors, health outcomes, worksite environment and weight management behaviors among PEBB-covered employees. PEBB provides state agencies and universities with value-added health plans that provide high-quality care and services to members. About 133,000 adults and their family members receive their health benefits through PEBB.

The BSSE is a collaboration between the Health Promotion and Chronic Disease Prevention Section (HPCDP) of the Public Health Division (PHD) and PEBB, both part of the Oregon Health Authority. The BSSE was previously conducted among PEBB-covered employees in 2005, 2007, 2010 and 2012. The BSSE's results inform efforts to establish, monitor and modify benefits and programs to fit the health needs of PEBB members. For example, the BSSE asks questions about weight management, which help PEBB identify appropriate benefits and programs to support all Oregon state employees and their families. BSSE results also inform worksite wellness strategies for public health organizations and partners working with state and local systems to create healthy work environments.

Data in this report are presented by sex and employer type (state agencies and the Oregon University System).

Survey methodology

Sampling

The sample for the survey was selected from a database of members who enrolled in medical benefits for the 2013–2014 plan year. The database of members only contained primary benefit subscribers, who were current members as of the date of membership assessment. Records with incomplete or missing phone numbers or for retirees or COBRA enrollees were excluded. A random sample was drawn based on member status as of Jan. 1, 2014. The sample included 8,000 records with the goal of gathering approximately 2,000 surveys. The final number of survey respondents was 1,502.

Data collection

The survey was conducted from Feb. 17 to May 6, 2014. Those in the sample with a work email address received an advance email from the PEBB administrator informing them of the upcoming survey. The sample received additional emails during the data collection period to encourage participation.

The survey administration contractor received an electronic database containing a unique key, first name, sex, age, and primary and secondary telephone numbers for the sample. The database was sent via a secure website. The contractor attempted to reach each telephone number up to 15 times on different days of the week and at various times throughout the day.

The first attempt to reach the respondent used the primary telephone number the employee provided during open enrollment. Voice mail messages were left for respondents asking them





to return the call to a toll-free number. Interviewers also accommodated those respondents who wished to be called at a different number. Call attempts were tracked using the 2013 Behavioral Risk Factor Surveillance System Data Quality Report Handbook.

Quality control

The contractor programmed the computer-assisted telephone interviewing (CATI) system, and HPCDP research analysts tested it until all errors were eliminated. For the duration of survey administration, HPCDP research analysts reviewed digital audio recordings of randomly selected surveys. This process ensured that interviewers were reading questions verbatim, properly following up to clarify answers, and following the interview script. Problems were resolved as quickly as possible.

Outcome rates

Outcome rates for the BSSE were based on the standards for random-digit dial telephone surveys as outlined in the 2013 Behavioral Risk Factor Surveillance System Data Quality Report Handbook. Response and cooperation rates were calculated.

A response rate represents the number of complete interviews with reporting units divided by the number of eligible reporting units in the sample. The response rate was 29 percent. A cooperation rate represents the proportion of all cases interviewed of all eligible units ever contacted. The cooperation rate was 63 percent.

Data preparation

Once HPCDP research analysts received data from the contractor, staff checked all data for errors and inconsistencies. Inconsistent values were edited or set equal to missing. Further details on this process are available upon request.

Once the data were cleaned, variables were recoded as appropriate for analytic purposes, and calculated variables were added to the dataset. All data cleaning and variable manipulation was conducted in Stata 13.1.

Survey results were weighted to adjust for demographic differences between the survey respondents and the overall population from which the sample was drawn. Survey post-stratification weights were developed based on the sampling frames' distributions of age and sex. For the purposes of analyses based on the entire dataset, investigation of the sampling frame led to the development of weights based on three age ranges (18–44, 45–54 and 55



and older) and both sexes (male, female). PEBB defined groupings of survey respondents based on employer type for subpopulation analyses. These groupings consisted of “state agencies” and “Oregon University System.” Further details on how the post-stratification weights were created are available upon request.

Statistics

Point estimates were calculated in Stata 13.1. After being calculated, estimates were evaluated for reliability to determine whether they should be reported. Based on criteria for the size of the denominator and the relative standard error (RSE), estimates were either reported, reported with a warning or not reported at all. RSE is a measure of the estimate’s variability compared with the magnitude of the estimate. RSE was calculated by using the following formula: *(SE(X) is the standard error of the estimate and X is the estimate)*.

$$\text{RSE} = 100 * (\text{SE}(X)/X)$$

Estimates for the whole population were suppressed if the denominator was less than 50 or the RSE was greater than or equal to 50. Estimates for a subpopulation were suppressed if the denominator was less than 20 or the RSE was greater than or equal to 50.

Estimates for the whole population were reported with a warning if the denominator was greater than or equal to 50, but the RSE was greater than or equal to 30 and less than 50. Similarly, estimates for a subpopulation were reported with a warning if the denominator was greater than or equal to 20, but the RSE was greater than or equal to 30 and less than 50.

All reported estimates were weighted and age-adjusted unless otherwise indicated.

Limitations

The survey data described in this report are cross-sectional, which means that data were collected at one point in time. Due to attrition and hiring, the employee population is not constant across administrations of the survey. Changes in estimates among surveys may represent behavior change in established employees, and/or they may represent people entering and exiting the work force.

Demographics of survey participants

There were 1,502 PEBB-covered employees who completed the survey.

PEBB	Sex		Employee type	
	Men	Women	Oregon University System	State agencies
All	639	863	631	871
1,502	639	863	631	871



Compared to the statewide employed and insured population, the PEBB-covered employee population has a higher proportion of married people, college graduates and employees who work more hours per week on average (see Appendix, Table 2 for complete data tables and comparisons).

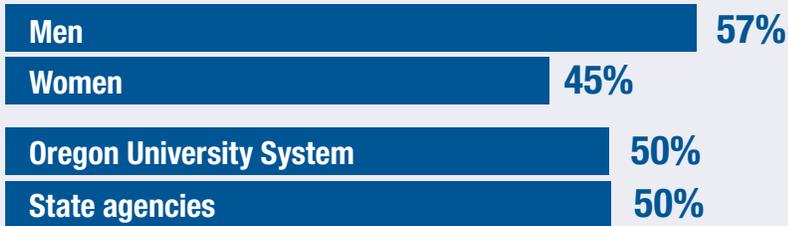
There are also demographic and socioeconomic differences within the PEBB-covered employee population, most notably between men, women and employee type. A higher percentage of men reported having a college degree and a household income of \$75,000 or more (Figure 1 and Figure 2). In addition, Oregon University System employees were more likely to report having a college degree compared to state agency

Figure 1 College graduate

Men and Oregon University System employees are more likely to have a college degree.



Figure 2 Household income of \$75,000 or more



employees, but the proportions who reported having a household income of \$75,000 or more were similar.

More women also reported having a disability (being limited in any activities due to physical, mental or emotional problems) compared to men. More state agency employees reported having a disability compared to Oregon University System employees.

Nearly 7 percent of PEBB-covered employees report speaking a language other than English at home. Women and Oregon University System employees were more likely to report speaking a language other than English at home.



Health protective factors

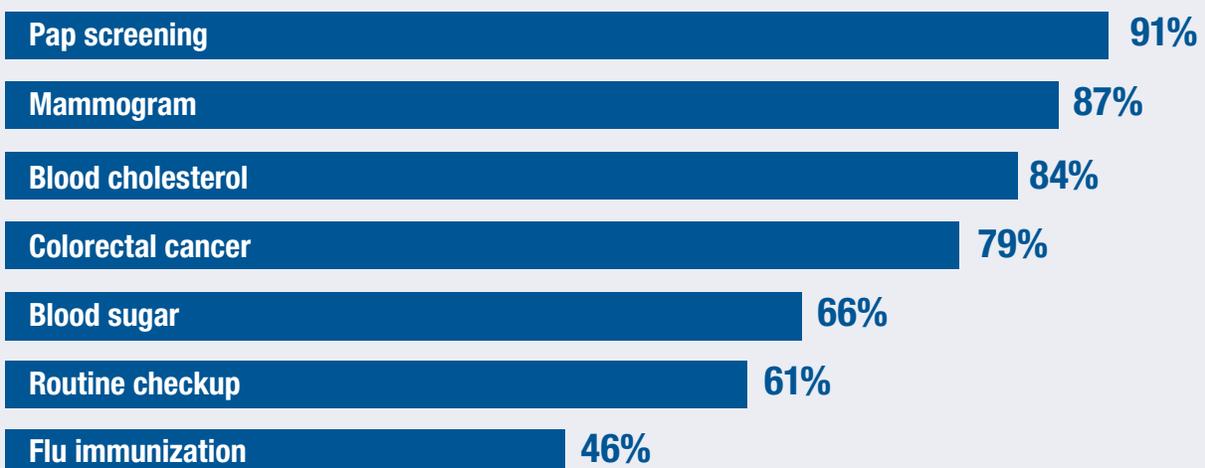
Protective health factors are characteristics, conditions or behaviors that reduce the likelihood that people will develop a chronic condition or disease, or experience complications of chronic disease. Meeting recommendations for fruit and vegetable intake and physical activity, as well as getting appropriate health screenings, are examples of protective factors. This section highlights the prevalence of protective health factors among PEBB-covered employees (see Appendix, Table 3 for complete data tables and comparisons).

Preventive health screenings and routine care

Overall, most PEBB-covered employees are receiving age-appropriate preventive health screenings. More than 90 percent of women aged 21–65 have had a pap screening within the past three years, and 87 percent of women aged 50–74 have had a mammogram screening within the past two years (Figure 3). More than 80 percent of PEBB-covered employees have had their cholesterol checked within the past five years, and a similar percent report having a personal doctor (Figure 4 and Figure 5). More than three-quarters of PEBB-covered employees aged 50 to 75 years have been appropriately screened for colorectal cancer, which is a marked improvement over past years

Figure 3 Health screenings

Most PEBB-covered employees are receiving age-appropriate screenings.



(Figure 4). Since 2010, colorectal cancer screening has increased by nearly 15 percent in the PEBB-covered employee population — from 69 percent in 2010 to 79 percent in 2014 (Figure 4). However, fewer PEBB-covered employees (aged 45 and older) have had a blood sugar test for diabetes within the past three years, a routine checkup within the past year, or a flu shot or spray within the past year. Compared to men, women were more likely to report having had a personal doctor, a routine checkup or flu shot within the past year (Figure 3).

Figure 4 Colorectal cancer screening

Colorectal cancer screening has increased nearly 15% since 2010.



Figure 5 Routine care

More women have routine health checkups compared to men.

Has a personal doctor



Routine checkup in past year



Flu shot in past year



Physical activity and nutrition

Less than one-third of PEBB-covered employees meet CDC physical activity recommendations¹ and consume at least five or more servings of fruits and vegetables on a daily basis. While more women report eating enough fruits and vegetables compared to men, and more men meet CDC physical activity recommendations compared to women, both remain low (Figure 6). Overall, approximately three in 10 PEBB-covered employees get enough exercise or eat

1 View CDC's physical activity recommendations for adults at www.cdc.gov/physical-activity/everyone/guidelines/adults.html.

Figure 6 Nutrition and physical activity

Physical activity and fruit and vegetable consumption remain low among both men and women.

Eats five or more fruits and vegetables every day



Meets CDC physical activity recommendations



Figure 7 Fruit and vegetable consumption

Fruit and vegetable consumption has slightly increased since 2007.



enough fruits and vegetables. However, fruit and vegetable consumption has slightly increased since 2007 (Figure 7).

Health risk factors

Many factors influence health and well-being. Those factors associated with health problems or disease are known as health risk factors. Many chronic diseases share the same risk factors. For example, physically inactive people are more likely to become overweight or obese, which is a risk factor for both diabetes and cardiovascular disease. Behaviors and environments can be changed to influence many risk factors. These changes may decrease the chance of developing disease or other risk factors later in life. This section highlights the current prevalence of health risk factors among PEBB-covered employees (see Appendix, Table 4 for complete data tables and comparisons).

Obesity, physical inactivity and low consumption of fruits and vegetables

More than one in five PEBB-covered employees is obese (22 percent) and more than one in three is overweight (36 percent). Nearly three in five PEBB-covered employees are overweight or obese (58 percent). State agency employees are twice as likely to be obese compared to Oregon University System employees (Figure 8). Men are slightly more likely to be obese compared to women; however, men are 50 percent more likely to report being overweight compared to women (43 percent vs. 29 percent). Obesity in the PEBB population appears to have declined from 30 percent in 2007 to 22 percent in 2014, a 36 percent decrease (Figure 9). The obesity prevalence among PEBB-covered employees is 18 percent lower than the statewide employed and insured population.

While most PEBB-covered employees report some participation in exercise or physical activity, less than one-third of PEBB-covered employees do enough physical activity to



meet Centers for Disease Control and Prevention (CDC) recommendations. Approximately 7 percent of PEBB-covered employees report no exercise or physical activity at all outside of work, and the large majority (84 percent) of PEBB-covered employees spend most of the workday sitting. Most PEBB-covered employees also do not consume an adequate amount of fruits and vegetables, and one-in-10 report daily consumption of sugar-sweetened beverages. Women are more likely to consume enough fruits and vegetables compared to men, but men are twice as likely to consume sugary beverages on a daily basis compared to women (14 percent vs. 7 percent).

Figure 8 Obesity

Overall, nearly 1 in 4 PEBB enrolled employees are obese.

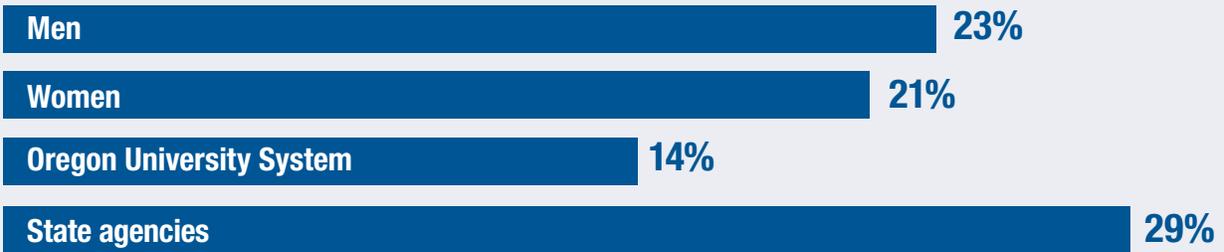
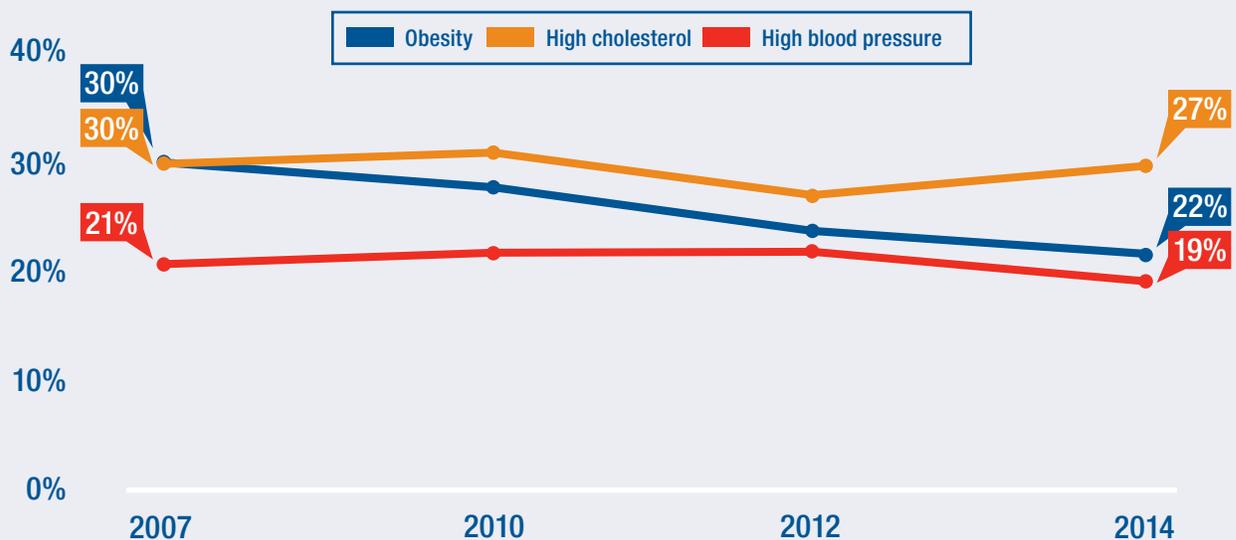


Figure 9 Obesity, high cholesterol and high blood pressure

All have decreased among PEBB enrolled employees since 2010.



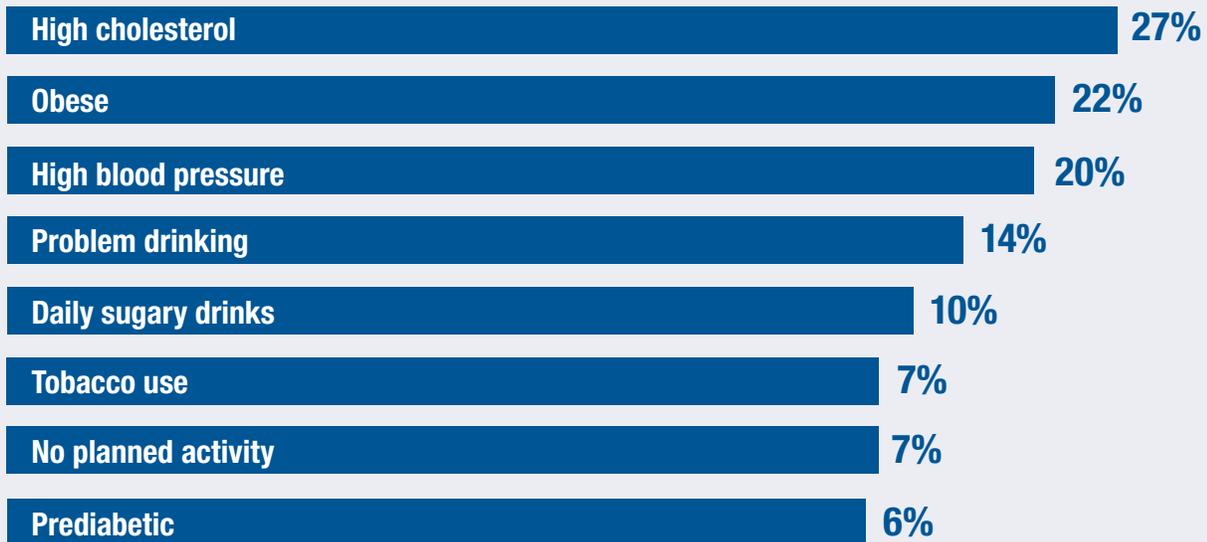
Precursors to chronic disease

Since 2007, high blood pressure and high cholesterol in the PEBB-covered employee population has slightly decreased (Figure 9). Still, approximately 27 percent of PEBB-covered employees has had high cholesterol, and 19 percent has had high blood pressure. Compared to the statewide employed and insured population, PEBB-covered employees have a lower prevalence of high blood pressure and high cholesterol. More than half of those who have had high blood pressure report they are currently taking medication for it.

Approximately 6 percent of PEBB-covered employees are aware that they have prediabetes. However, the CDC estimates that 37 percent of the adult population may have prediabetes, and a large majority of them do not know it.

Figure 10 Health risk factors

Health risk factors are prevalent among PEBB-covered employees.



Tobacco use

Approximately 7 percent of PEBB-covered employees use tobacco, including cigarettes, smokeless tobacco and cigars. Approximately 4 percent smoke cigarettes and nearly 3 percent use smokeless tobacco. More women reported smoking cigarettes compared to men (5 percent vs. 4 percent), but more men use tobacco overall compared to women (8 percent vs. 6 percent). The prevalence of tobacco use among state agency employees is higher than Oregon University System employees (Figure 11). Since 2007, cigarette smoking among PEBB-covered employees appears to have decreased by more than 50 percent (Table 1).

Figure 11 Tobacco use

Overall, nearly 7 percent of PEBB enrolled employees are tobacco users.



Alcohol use

Approximately 5 percent of PEBB-covered employees report heavy drinking (defined as an average consumption of more than two drinks per day for men and more than one drink per day for women). More than 11 percent report binge drinking (defined as five or more drinks on one occasion for men and four or more drinks for women) during the past 30 days. Fourteen percent of PEBB-covered employees report problem drinking (heavy drinking or binge drinking). Men were more likely to report problem drinking and binge drinking compared to women, but women were twice as likely to report heavy drinking (Figure 12). The prevalence of heavy drinking has remained steady since 2009; however, binge drinking appears to have decreased by 30 percent (Table 1).

Figure 12 Alcohol use

Men are more likely to report binge drinking compared to women.

Problem drinking



Binge drinking



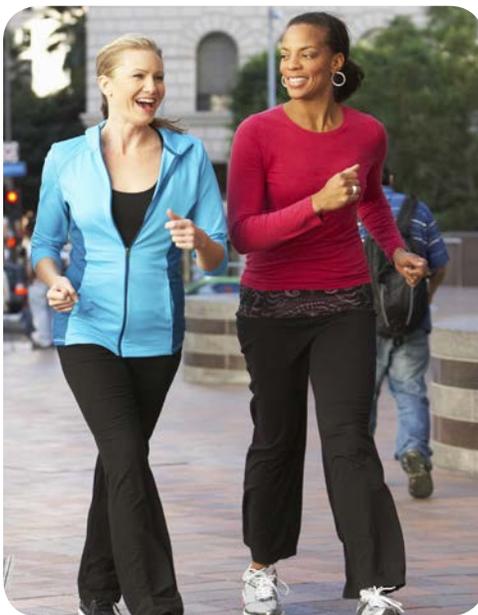
Heavy drinking



Health outcomes

Chronic diseases and conditions – such as heart disease, stroke, cancer, diabetes, obesity and arthritis – are among the most common, costly and preventable health problems. Many of these conditions require disease self-management and can lead to missed work. This section describes the prevalence of chronic disease among PEBB-covered employees (see Appendix, Table 5 for complete data tables and comparisons).

Chronic diseases



Among PEBB-covered employees, the most common chronic diseases are arthritis (17 percent), current depression (10 percent), asthma (9 percent), skin cancers (5 percent), diabetes (5 percent) and coronary heart disease among those aged 45 and older (3 percent). (Figure 13). Of those with arthritis, three in 10 reported having limitations at work due to their arthritis. Women were more likely than men to report having arthritis, asthma, other cancers and current depression. Women were also more than twice as likely as men to report having current depression, and more than a quarter of all women reported ever having depression. While the prevalence of these chronic diseases has remained

Figure 13 Health outcomes

Arthritis and depression are the most common chronic conditions among PEBB-enrolled employees.





stable among PEBB-covered employees over the past seven years, there have been notable improvements in the risk factors that contribute to these diseases (see “Health risk factors,” pages 10–13).

Missed work

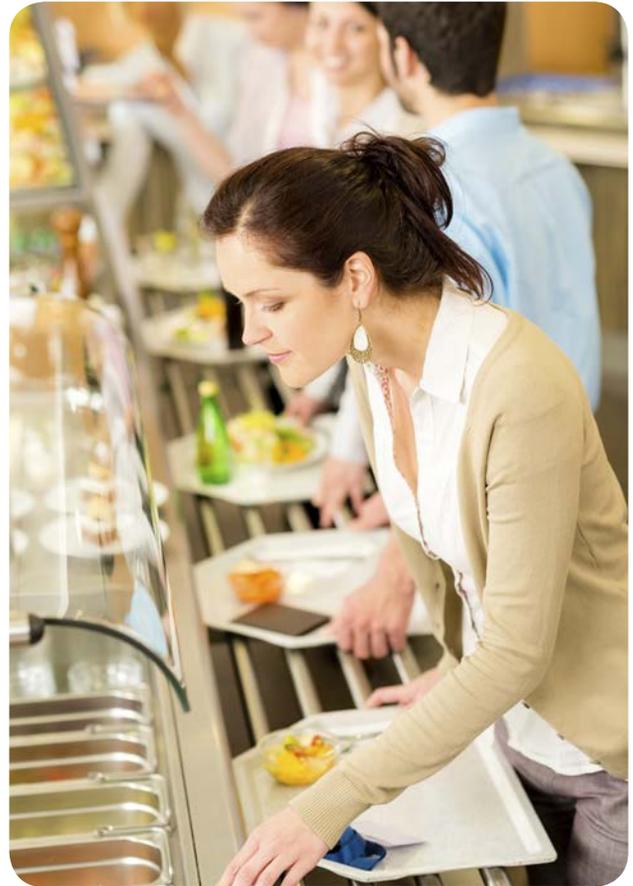
Approximately one-quarter of PEBB-covered employees reported missing one or more days of work in the past month due to poor physical or mental health. Three in 10 women reported missing work in the past 30 days compared to two in five men. The proportion of employees who missed one or more days of work due to poor physical or mental health has varied over the past seven years (Table 1).

Worksite environment

The worksite environment influences employees' health behaviors. By creating a worksite environment that supports health, employees are more likely to achieve their health goals. This section describes the environmental factors that support or hinder PEBB-covered employees in reaching health goals (see Appendix, Table 6 for complete data tables and comparisons).

Environment: nutrition and physical activity

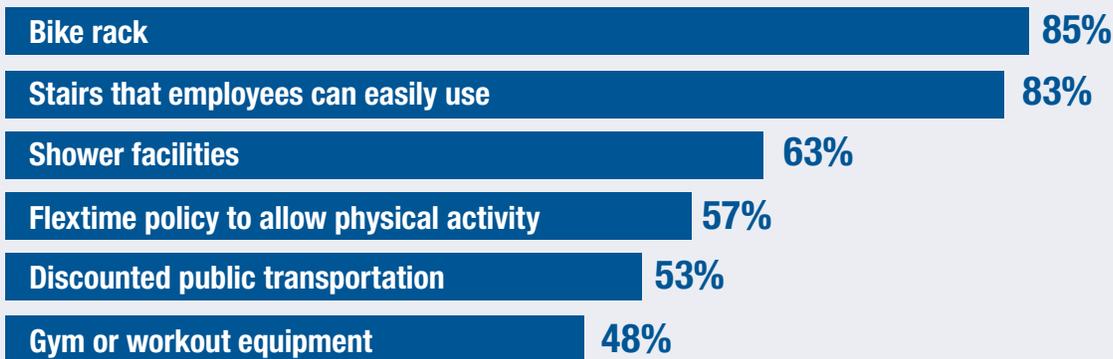
Food and beverages are widely and readily available to state employees. Currently, there are no standards that ensure state-operated vending machines or cafeterias support healthy options. Approximately 75 percent of PEBB-covered employees reported having a vending machine at their worksite. Approximately 54 percent reported that candy dishes were available in public places, and 48 percent reported having a cafeteria at their worksite. State agency employees were more likely to have access to vending machines and candy dishes in public places compared to Oregon University System employees; however, twice as many Oregon University System employees reported having a cafeteria at their worksite compared to state agency employees.



Oregon University System employees were more than three times as likely to have discounted public transportation compared to state agency employees, while state agency employees were almost five times as likely to have free parking at their worksite (Figure 14). Studies show that restricting car parking options can increase the number of employees who walk or bike to work. Oregon University System employees were also more likely to have a flextime policy to allow employees to include physical activity in their schedules (64 percent vs. 52 percent). Overall, approximately 84 percent of PEBB-covered employees reported having an employee wellness program at their worksite.

Figure 14 Worksite environment: physical activity

Only half of PEBB enrolled employees have access to discounted public transportation.



Attitudes and behaviors

Overall, more than 50 percent of PEBB-covered employees feel it is easy to get physical activity on work days, and 87 percent feel that it is easy to eat healthy on work days. Of the 57 percent of employees who have a flextime policy for physical activity, 54 percent reported using it. While 96 percent of PEBB-covered employees believe that PEBB puts emphasis on promoting employee health, only 78 percent believe that their employer (state agency or university) does so.

Tobacco rules

Nearly 88 percent of PEBB employees believe that employees are following the smoking rules at their worksite. However, 62 percent of employees have seen employees smoking on worksite grounds; 72 percent of Oregon University System employees have seen employees smoking on worksite grounds compared to 53 percent of state agency employees.

Weight management



Losing or maintaining weight is a commonly reported health goal. Obesity is a leading risk factor for heart disease, stroke, diabetes and other chronic conditions. Employers can support employees by providing weight management benefits. This section describes weight management behaviors among PEBB-covered employees (see Appendix, Table 7 for complete data tables and comparisons).

Nine in ten PEBB-covered employees report that they are currently trying to lose or maintain their weight. In addition, 39 percent report that a family member is also trying to lose or maintain their weight, and 14 percent report being advised by a doctor or other health professional to lose or maintain weight (Figure 15).

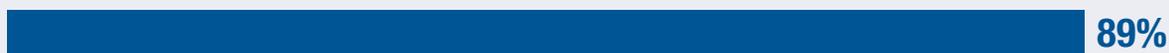
Figure 15 Weight management behaviors

Nine out of 10 employees have a weight management health goal.

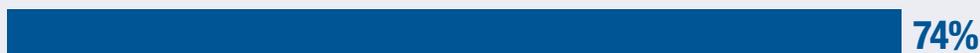
Currently trying to lose or maintain weight



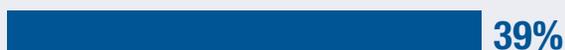
Exercising to lose or maintain weight



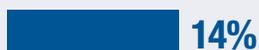
Eating fewer calories or less fat to lose or maintain weight



Family member trying to lose or maintain weight



Advised to lose or maintain weight by doctor or health professional





Overall, 93 percent of PEBB-covered employees know they can get help to lose weight through their PEBB benefits. More than one in five PEBB-covered employees has participated in Weight Watchers within the past year, with women twice as likely as men to participate (30 percent vs. 14 percent). Among employees who are obese, more than 30 percent have participated in Weight Watchers within the past year. Women who are obese were again twice as likely to participate compared to men (43 percent vs. 20 percent).

Appendix: detailed data tables

Table 1
Selected measures, 2007–2014

	PEBB (by %)			
	2007	2010	2012	2014
Eats 5+ fruits and vegetables/day	24.9	26.1	30.8	30.9
Meets CDC physical activity recommendations	NA	NA	31.7	31.6
Mammogram screening in past two years (50–74 years)†	87.8	85.4	85.8	86.7
Pap screening in past three years (21–65 years)†	92.4	92.5	94.2	90.8
Screened for colorectal cancer (50–75 years)†	NA	69.3	74.8	78.6
Blood cholesterol checked in past 5 years	80.8	84.9	84.7	83.6
Has a personal doctor	84.5	NA	86.5	86.2
Routine checkup in past year	NA	NA	60.2	61.4
Very good/excellent general health status	58.8	65.1	68.0	70.5
Heavy drinking (men: 2+ drinks/day; women: 1+ drink(s))	NA	4.9	4.0	5.4
Binge drinking (men: 5+ drinks/occasion; women: 4+ drinks)	NA	16.2	14.6	11.2
Overweight (BMI ≥ 25 & < 30)	34.7	35.2	33.2	35.8
Obese (BMI ≥ 30)	30.3	28.1	23.9	22.2
No leisure time physical activity	NA	NA	5.3	6.7
Ever had high blood cholesterol	30.2	31.4	26.9	27.3
Ever had high blood pressure	21.9	23.7	20.1	19.5
Current cigarette smoker	9.9	8.8	4.1	4.1
Current smokeless tobacco user	3.0	3.7	1.7	2.5
Current tobacco user*	12.4	11.2	5.6	6.7*

† These estimates are not age-adjusted.

* Estimate includes cigar use.

Table 1
Selected measures, 2007–2014 (continued)

	PEBB (by %)			
	2007	2010	2012	2014
Missed one or more days of work in last 30 days	27.9	28.0	18.5	25.0
Arthritis	21.1	20.1	17.4	17.3
Asthma	9.7	10.3	10.4	8.5
Ever had cancer	NA	7.7	6.7	4.7
Heart attack (45+ years)	2.2	2.0	2.1	1.8
Coronary heart disease (45+ years)	3.4	3.6	3.2	3.2
Stroke (45+ years)	1.6	1.1	0.76 [^]	0.9 [^]
Ever had depression	NA	NA	21.5	19.6
Current depression	16.0	14.2	14.0	10.3
Diabetes	6.2	6.2	5.1	5.0

[^] This number may be statistically unreliable and should be interpreted with caution.

Health outcomes

Table 2
Demographics

Oregon 2012	PEBB (by %)				
	PEBB	Sex		Employee type	
Employed, insured adults (BRFSS)	All	Men	Women	Oregon University System	State agencies
Age, sex, ethnicity, marital status					
Mean age	48.6	48.2	48.9	48.0	49.1
Women	57.5	NA	NA	56.7	58.0
Pregnant (women aged 18–44)	3.4	NA	3.4	3.4	3.4
Married	73.7	84.0	65.8	76.3	71.8
Latino/a	4.0	4.0	4.1	2.7	5.0
Speaks language other than English at home	6.7	6.4	7.0	9.2	4.9
Education					
Less than high school	0.2	0.2	0.2	0.2	0.2
High school graduate	9.1	9.4	8.9	4.6	12.4
Some college	19.1	16.1	21.3	11.0	25.1
College graduate	71.5	74.3	69.5	84.3	62.3

*Data are unweighted and are not age-adjusted.
Note: PEBB estimates for Married include domestic partnerships*

Table 2
Demographics
(continued)

	Oregon 2012	PEBB (by %)					
		PEBB	Sex		Employee type		
		All	Men	Women	Oregon University System	State agencies	
Household income and size							
Average hours worked per week by employee	39.5	42.1	43.3	41.2	43.2	41.3	
Under \$25,000	8.8	1.7	1.1	2.1	1.8	1.6	
\$25,000 to less than \$50,000	23.8	20.3	13.1	25.7	21.6	19.4	
\$50,000 to less than \$75,000	22.5	27.8	28.9	27.0	26.1	29.1	
\$75,000 or more	44.9	50.1	56.8	45.2	50.4	49.9	
Average household size	2.6	2.7	3.0	2.5	2.6	2.8	
Disability							
Limited in any activities due to physical, mental or emotional problems	17.3	15.5	11.0	18.8	14.0	16.6	
Has a health problem that requires use of special equipment	3.7	3.3	3.0	3.5	2.4	3.9	

Data are unweighted and are not age-adjusted.

Table 3
Health protective factors

Health protective factors	Oregon 2012 Employed, insured adults (BRFSS)	PEBB (by %)					
		PEBB		Sex		Employee type	
		All	Men	Women	Oregon University System	State agencies	
Eat 5+ fruits and vegetables/day	23.5**	30.9	27.0	33.9	33.5	29.7	
Meets CDC physical activity recommendations	25.4**	31.6	33.2	30.3	31.9	32.8	
Mammogram screening in past two years (50–74 years)†	79.3	86.7	NA	86.7	85.1	87.8	
Pap screening in past three years (21–65 years)†	88.3	90.8	NA	90.8	89.9	91.8	
Had hysterectomy	16.9	17.0	NA	17.0	13.0	19.3	
Screened for colorectal cancer (50–75 years)	68.2	78.6	62.4	76.6	78.6	78.8	
Blood cholesterol checked in past 5 years	75.7	83.6	81.1	85.7	81.8	85.5	
Blood sugar test in past three years (45+ years)	68.6	65.9	63.4	68.2	59.7	70.3	
Has a personal doctor	80.2	86.2	82.9	89.0	84.4	88.1	
Routine checkup in the past year	55.7	61.4	53.7	68.0	56.9	66.5	
Flu shot or spray in the past year	36.6	45.7	41.3	49.2	43.9	48.2	
Very good/excellent general health status	66.9	70.5	68.2	72.4	77.7	65.2	

† These estimates are not age-adjusted.

**2011 data

Table 4
Health risk factors

Health risk factors	Oregon 2012 Employed, insured adults (BRFSS)	PEBB (by %)				
		PEBB	Sex		Employee type	
			Men	Women	Oregon University System	State agencies
Alcohol consumption						
Heavy drinking (men: 2+ drinks/day; women: 1+ drink(s))	7.1	5.4	3.1	7.4	7.6	3.8
Binge drinking (men: 5+ drinks/occasion; women: 4+ drinks)	18.5	11.2	13.6	9.3	11.9	11.0
Problem drinking	20.1	14.0	14.8	13.5	15.4	13.4
Physical activity, nutrition and weight						
No leisure time physical activity	11.5	6.7	4.5	8.5	5.7	7.5
Mostly sitting at work	52.1	83.7	78.3	88.1	78.8	87.5
Eating out one time a week or more	77.2	82.9	84.7	81.2	84.7	81.1
Drinking sugary drinks seven times a week or more	13.2	10.0	13.8	6.9	8.3	11.3
Overweight (BMI ≥ 25 & < 30)	36.1	35.8	43.3	28.6	35.5	35.5
Obese (BMI ≥ 30)	27.2	22.2	23.4	21.3	14.0	28.6
Precursors to chronic disease						
Ever had high blood cholesterol	31.2**	27.3	32.3	22.8	24.4	29.3
Currently have high blood cholesterol	0.0	8.8	8.9	8.6	9.5	8.1
Ever had high blood pressure	24.0**	19.5	22.8	16.7	15.9	22.0
Currently have high blood pressure	0.0	2.6	2.4 [^]	2.9	2.6	2.6
Taking medication for high blood pressure	55.3	59.4	58.0	78.6	58.2	59.7
Prediabetes	6.3	5.6	4.6	6.6	3.4	7.4

Note: Problem drinking – men: > 14 drinks/week or > 4 drinks/occasion; women: > 7 drinks/week or > 3 drinks/occasion.

** 2011 data

[^] This number may be statistically unreliable and should be interpreted with caution.

Table 4
Health risk factors
(continued)

Health risk factors	Oregon 2012 Employed, insured adults (BRFSS)	PEBB (by %)					
		PEBB	Sex		Employee type		
		All	Men	Women	Oregon University System	State agencies	
Tobacco use and quit attempts							
Current cigarette smoker	14.4	4.1	3.8	4.5	3.3	5.0	
Current smokeless tobacco user	3.6	2.5	4.4	1.0	2.2 [^]	2.8	
Current tobacco user	17.3	6.7	8.3	5.5	5.7	7.6	
Current e-cigarette user	N/A	1.5	1.6 [^]	1.5 [^]	1.2 [^]	1.8 [^]	
Occasional smoker	1.2	1.5	2.4 [^]	0.8 [^]	2.1 [^]	1.0 [^]	
Smoking quit attempt in past 12 months	56.6	61.2	62.2	56.2	68.9	55.8	
Wants to quit smoking	25.0	42.8	61.2	23.8	---	35.5	
Knowledge of help to quit tobacco through PEBB benefits (among all members)	N/A	91.7	90.9	92.5	89.0	93.8	
Knowledge of help to quit tobacco through PEBB benefits (among tobacco users)	N/A	99.0	100.0	98.3	100.0	98.6	

[^] This number may be statistically unreliable and should be interpreted with caution.

--- This number is suppressed because it is statistically unreliable.

**2011 data

Table 5
Health outcomes

	Oregon 2012 Employed, insured adults (BRFSS)	PEBB (by %)				
		PEBB	Sex		Employee type	
		All	Men	Women	Oregon University System	State agencies
Missed one or more days of work in last 30 days	19.5	25.0	19.8	29.5	21.8	27.4
Arthritis	18.9	17.3	15.1	19.2	16.5	18.1
Limitation in usual activities due to arthritis	47.5**	40.9	16.7	49.5	22.9	52.2
Limitation at work due to arthritis	25.3**	29.3	7.9	36.0	7.8	43.3
Asthma	8.2	8.5	4.9	11.5	8.7	8.5
Ever had skin cancer	5.0	5.3	6.2	4.5	6.6	4.4
Ever had other cancer	5.0	4.7	3.6	5.6	4.4	4.9
Heart attack (45+ years)	2.4	1.8	2.6^	1.0^	1.9^	1.6^
Coronary heart disease (45+ years)	2.9	3.2	4.3	2.0	3.0^	3.0
Stroke (45+ years)	1.2	0.9^	1.5^	---	1.6^	---
Ever depressed	21.0	19.6	12.4	25.9	18.1	21.0
Currently depressed	N/A	10.3	5.6	14.4	9.1	11.2
Diabetes	6.9	5.0	6.2	4.0	3.6	6.1
Taking insulin for diabetes	30.9	25.1	25.9	24.4^	24.9	24.0
Taking other medication for diabetes	N/A	68.4	70.2	64.1	70.4	68.8
Age 20 or older at diabetes diagnosis	95.1	98.0	100.0	95.2	96.2	98.8

^ This number may be statistically unreliable and should be interpreted with caution.

--- This number is suppressed because it is statistically unreliable.

**2011 data

Health outcomes

Table 6
Worksite environment, amenities, attitudes and behaviors

	PEBB (by %)		
	PEBB	Oregon University System	State agencies
Environment and amenities			
Vending machines	75.5	71.3	78.9
Vending machines offer healthy foods	31.4	30.8	30.9
Cafeteria	47.8	65.6	34.4
Food labeled to identify calorie, fat or sodium content	54.4	62.1	48.9
Candy dishes in public places	54.3	49.6	57.1
Free parking	38.4	11.1	59.9
Stairs that employees can easily use	83.4	94.1	74.5
Bike rack	85.1	95.3	76.0
Gym or workout equipment	47.9	69.9	30.6
Shower facilities	63.1	74.1	54.8
Discounted public transportation	52.6	84.7	24.4
Flextime policy to allow physical activity	57.4	64.2	51.6
Employee wellness program	84.2	85.0	83.4
Clean, private place other than bathroom for nursing mothers to pump breast milk			
Yes	51.5	44.3	57.3
No	25.9	27.2	24.3
Don't know	22.6	28.5	18.4
Paid or unpaid work time for breastfeeding mothers to pump breast milk			
Yes	45.0	41.0	43.0
No	7.3	2.8	3.0
Don't know	47.6	56.1	54.1

Worksite environment

Table 6
Worksite environment, amenities, attitudes and behaviors *(continued)*

	PEBB (by %)	
	PEBB	Employee type
	All	Oregon University System State agencies
Attitudes and behaviors		
Believe that PEBB puts emphasis on promoting employee health	96.2	95.5 97.1
Believe that employer puts emphasis on promoting employee health	78.4	79.5 77.8
Easy to get physical activity on work days	53.6	56.3 51.3
Easy to eat healthy foods on work days	86.9	90.3 84.2
Choose a healthy option when eating at cafeteria	70.6	74.8 63.5
Use flextime policy to include physical activity into schedule	53.9	55.9 51.5
Mostly sitting at work	83.7	78.8 87.5
Perceive secondhand smoke as harmful to one's health	71.3	69.2 73.2
Tobacco rules		
Employees following smoking rules	87.5	85.0 89.7
Has seen employees smoking on grounds of worksite	61.6	72.2 52.7

Worksite environment

Table 7
Weight management, perceptions
and knowledge

	PEBB (by %)		
	PEBB — all	Men	Women
Weight management			
Trying to lose or maintain weight in overall population	90.1	86.3	93.1
Trying to maintain weight among those who are healthy weight	81.2	73.5	87.6
Trying to lose weight among those who are overweight	81.6	78.8	92.3
Trying to lose weight among those who are obese	76.7	75.1	77.6
Eating fewer calories or less fat to lose or maintain weight	73.6	71.5	75.1
Exercising to lose or maintain weight	88.5	90.1	87.2
Family members trying to lose or maintain weight	39.4	47.4	31.8
Average weight loss (lbs) in past year among people who are overweight	-2.8	-2.8	-2.9
Average weight loss (lbs) in past year among people who are obese	-4.1	-4.2	-4.1
Advised to lose or maintain weight by doctor or health professional	13.7	13.2	14.1
Weight management perceptions			
People who are overweight who perceive themselves as overweight	67.5	54.5	85.6
People who are obese who perceive themselves as overweight	96.2	93.4	98.9
Easy to get physical activity on work days	53.6	61.7	46.6
Easy to eat healthy foods on work days	86.9	86.9	86.7
Perceive obesity as harmful to one's health	98.6	98.5	98.7
Perceive physical inactivity as harmful to one's health	83.7	80.1	86.6
Perceive inadequate fruit and vegetable consumption as harmful to one's health	76.6	70.6	81.7
Weight management benefit knowledge and participation			
Knowledge of help to lose weight through PEBB benefits	93.4	92.3	94.5
Participation in Weight Watchers in overall population	22.8	14.1	30.0
Participation in Weight Watchers among those who are obese	31.1	20.1	42.9

Weight management

Table 8
Health care access
and satisfaction

	PEBB (by %)	
	PEBB	Employee type
	All	Oregon University System State agencies
After hours access		
Attempted to access health care provider during non-business hours	13.3	12.6 14.4
Difficulty in reaching health care provider(s) during non-business hours		
Extremely difficult, difficult or somewhat difficult	27.8	25.6 28.7
Not at all difficult	72.2	74.4 71.3
Health care satisfaction		
Health care providers explaining treatment choices		
Good, very good or excellent	95.5	96.3 94.9
Fair or poor	4.5	3.7 5.1
Health care providers including patient in treatment decisions		
Good, very good or excellent	96.7	97.5 95.7
Fair or poor	3.3	2.5 4.3
Health care provider knowledgeable about care received from referred specialists		
Never	2.5	3.3 1.9
Some of the time	22.8	21.5 23.6
Always	59.5	59.3 59.9

Health care access and satisfaction



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