Health of King County 2006
Chapter 3: General Health Status

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Public Health
Seattle & King County
HEALTHY PEOPLE. HEALTHY COMMUNITIES.

General Health Status: Deaths, Hospitalizations, Life Expectancy, and Self-Reported Health

	Deaths (2003)		Hospitalizations (2003) ††		Life Expectancy (2003)	Percent with self-reported health fair/poor (2004)
	Rate †	Number	Rate †	Number		
East Region	617.5	2,230	8419.0	31,524	82.2	10.1
North County	719.0	997	9069.0	15,724	80.4	10.6
Seattle	663.5	4,232	9442.6	50,170	80.7	9.8
South County	776.5	4,023	10069.4	62,071	78.8	11.6
King County	695.7	11,591	6942.6	119,439	80.3	10.6
Washington State	728.6	45,805	7083.6	421,256	78.7	13.8**
United States	831.2*	2,443,908*	10,200***	34,700,000***	77.6*	15.1^

† Rate is age-adjusted per 100,000 population
†† Non-childbirth hospitalizations
*Preliminary data
** 2003 data
***Non-age-adjusted rate; rate and number for non-Federal short-stay hospitals
^ Median percentage, out of 52 US States and Territories

Source: Death Certificates and Hospital Discharge Data, Washington State Department of Health, Center for Health Statistics, and Behavioral Risk Factor Surveillance Survey, Centers for Disease Control and Washington State Department of Health.
Produced by: Epidemiology, Planning and Evaluation Unit, Public Health- Seattle & King County

- In general, compared to the State and national averages, King County residents are healthier with a lower mortality rate, a longer life expectancy, and a better self-reported health status.

Mortality

- From 1990 to 2003, the overall death rate declined significantly in all regions and the county as a whole, and in all racial/ethnic groups except American Indian/Alaska Natives.
- In 2001-2003 combined, the South region had higher and the East region had lower death rates than the county as a whole. In the same time period, African Americans and American Indian/Alaska Natives had higher and Asian/Pacific Islanders and Hispanic/Latinos (of any race) had lower death rates than whites.
- The leading causes of death in King County in 2003 were cancer, heart disease, and stroke. Causes varied by age and racial/ethnic groups. Conditions of the perinatal period were the 9th leading cause of death for African Americans and the 6th for Hispanic/Latinos, while unintentional injuries, diabetes and homicide were also more highly ranked for these groups, and for American Indian/Alaska Natives and Asian/Pacific Islanders, than for whites.
- Life expectancy in King County is increasing; it is almost 5 years longer in 2003 than in 1980.   This trend holds for all racial and ethnic groups except American Indian/Alaska Natives.
- Cancer, unintentional injury, heart disease, suicide and perinatal conditions were the main causes of loss of potential years of life. These causes also vary by racial and ethnic group, with higher numbers of potential years lost from perinatal conditions and unintentional injuries in people of color.

Total Death

- In 2003, 11,591 King County residents, including 4,232 residents of Seattle, died.

- Of the 11,591 deaths, persons under age 65 accounted for 25.3%; while 14.3% were age 65-74; 28.9% were age 75-84%; and 31.5% were age 85 and older.
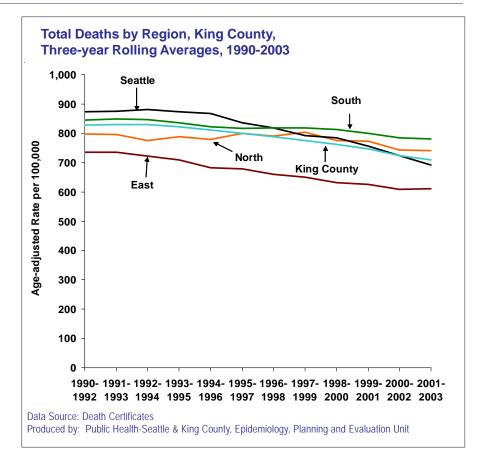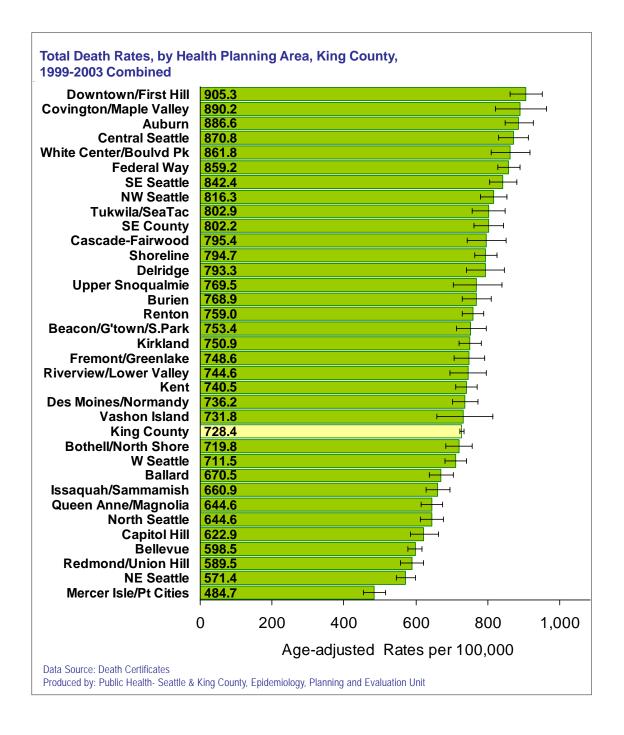
King County and Regions

- Between 1990 and 2003, the age-adjusted total death rate declined significantly in both King County and in the four Health Regions.

- Averaged over 2001-2003, the age-adjusted total death rates in the South Region were significantly higher while the rate in the East Region was significantly lower than the King County average rate. There was no significant difference between the county and the North Region or Seattle.

Total Deaths by Region, King County, Three-year Rolling Averages, 1990-2003

Data Source: Death Certificates
Produced by: Public Health-Seattle & King County, Epidemiology, Planning and Evaluation Unit

Patterns by Health Planning Area

• Age-adjusted death rate also varied between health planning areas. Averaged over 1999-2003, the rates were lower in general for Eastside communities, and higher for the South Region and Seattle than the average rate for the county.

Total Death Rates, by Health Planning Area, King County, 1999-2003 Combined

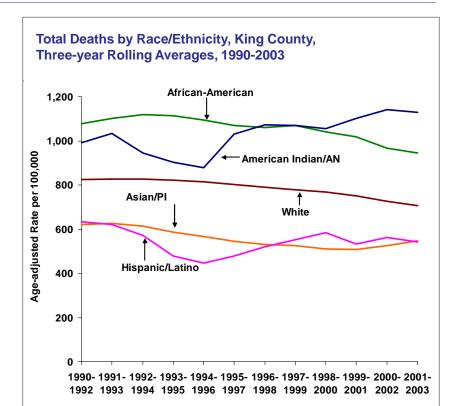| Health Planning Area	Rate
Downtown/First Hill	905.3
Covington/Maple Valley	890.2
Auburn	886.6
Central Seattle	870.8
White Center/Boulvd Pk	861.8
Federal Way	859.2
SE Seattle	842.4
NW Seattle	816.3
Tukwila/SeaTac	802.9
SE County	802.2
Cascade-Fairwood	795.4
Shoreline	794.7
Delridge	793.3
Upper Snoqualmie	769.5
Burien	768.9
Renton	759.0
Beacon/G'town/S.Park	753.4
Kirkland	750.9
Fremont/Greenlake	748.6
Riverview/Lower Valley	744.6
Kent	740.5
Des Moines/Normandy	736.2
Vashon Island	731.8
King County	728.4
Bothell/North Shore	719.8
W Seattle	711.5
Ballard	670.5
Issaquah/Sammamish	660.9
Queen Anne/Magnolia	644.6
North Seattle	644.6
Capitol Hill	622.9
Bellevue	598.5
Redmond/Union Hill	589.5
NE Seattle	571.4
Mercer Isle/Pt Cities	484.7

Age-adjusted Rates per 100,000

Data Source: Death Certificates
Produced by: Public Health- Seattle & King County, Epidemiology, Planning and Evaluation Unit

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Focus on Disparities

- Among the racial/ethnic groups, the total mortality rate between 1990 and 2003 declined significantly for all but American Indian/ Alaska Natives.

- Disparities in the age-adjusted death rate between racial/ethnic groups in King County remained. Averaged over 2001-2003, the rates for African Americans (945.9) and American Indian/Alaska Natives (1128.2) were significantly higher while the rates for Asian and Pacific Islanders (546.6) and Hispanic/ Latinos (542) were significantly lower than the white rate (707.1).

Total Deaths by Race/Ethnicity, King County, Three-year Rolling Averages, 1990-2003

Note: Hispanic/Latinos can be of any race and are included in the racial categories
Data Source: Death Certificates
Produced by: Public Health- Seattle & King County, Epidemiology, Planning and Evaluation Unit

Leading Causes of Death

- In 2003, the three leading causes of death in King County were cancer, heart disease, and stroke.

- The leading causes of death differed in different age groups. In general, unintentional injury, cancer, homicide, and suicide ranked higher among the younger age groups while heart disease, cancer, and other chronic diseases ranked higher among the older age groups. AIDS went from being the number one killer among males age 25-44 in 1996 to number four in 2003, and number five for both males and females.

The Leading Causes of Death, By Age Group, King County, 2003

Rank		age <1	age 1-14	age 15-24	age 25-44	age 45-64	age 65+	All Ages
1st	Cause	Congenital malformations	Unintentional injury	Unintentional injury	Unintentional injury	Cancer	Heart Disease	Cancer
	Number	21	15	50	116	720	2,251	2,816
2nd	Cause	Short gestation and low birth weight	Cancer	Suicide	Cancer	Heart Disease	Cancer	Heart Disease
	Number	15	8	22	31	382	1,992	2,714
3rd	Cause	Sudden Infant Death Syndrome		Homicide	Suicide	Unintentional injury	Stroke	Stroke
	Number	14		16	74	144	838	946
4th	Cause	Maternal complications of pregnancy		Heart Disease	Heart Disease	Stroke	Alzheimer's disease	Alzheimer's disease
	Number	11		7	69	86	649	655
5th	Cause	Intrauterine hypoxia/birth asphyxia		Cancer	HIV/AIDS	Chronic Liver Disease & Cirrhosis	Chronic Lower Respiratory Disease	Chronic Lower Respiratory Disease
	Number	5		5	50	85	463	520
6th	Cause	Neonatal hemorrhage			Homicide	Diabetes	Influenza and pneumonia	Unintentional injury
	Number	5			37	79	296	478
7th	Cause				Stroke	Suicide	Diabetes	Diabetes
	Number				19	79	263	356
8th	Cause				Chronic Liver Disease & Cirrhosis	Chronic Lower Respiratory Disease	Unintentional injury	Influenza and pneumonia
	Number				19	55	153	334
9th	Cause				Diabetes	HIV/AIDS	Pneumonitis from solids/ liquids	Suicide
	Number				12	34	140	213
10th	Cause				Viral Hepatitis	Viral Hepatitis	Parkinson's disease	Chronic Liver Disease and Cirrhosis
	Number				8	28	113	154
Total deaths		114	42	129	594	2,058	8,654	11,591

NOTE: A cell is left blank if the number of deaths is fewer than five.
**Rates are age-adjusted to the 2000 US population. Numbers are five years total. The leading causes of death are ranked by the number of death.
    Because of age-adjustment, the sequence may not correspond to those ranked by the rates.

Source: Linked Birth-Infant Death Certificates, and Death Certificates, Washington State Department of Health, Center for Health Statistics.
Produced by: Epidemiology, Planning and Evaluation Unit, Public Health- Seattle & King County

Focus on Disparities

- The leading causes of death also varied among the racial/ethnic groups. In general, unintentional injury, homicide, and diabetes ranked relatively higher among the minority populations. Conditions of the perinatal period were the ninth leading cause of death for African Americans and the sixth for Hispanic/Latinos.

The Leading Causes of Death †, by Race/Ethnicity, King County, 1999-2003 Combined

Rank		White	African American	American Indian or Alaska Native	Asian or Pacific Islander	Hispanic/Latino
1st	Cause	Heart Disease	Heart Disease	Heart Disease	Cancer	Cancer
	Rate*	179.1	250.1	272.2	140.5	123.3
	Average Annual #	2,506	146	23	199	34
2nd	Cause	Cancer	Cancer	Cancer	Heart Disease	Heart Disease
	Rate*	183.1	229.8	199.8	122.1	133.2
	Average Annual #	2,491	143	19	149	30
3rd	Cause	Stroke	Stroke	Unintentional injury	Stroke	Unintentional injury
	Rate*	61.3	80.0	65.5	56.2	28.1
	Average Annual #	863	44	11	68	23
4th	Cause	Chronic lower respiratory disease	Diabetes	Chronic liver disease & cirrhosis	Diabetes	Stroke
	Rate*	39.5	64.1	38.8	25.4	61.3
	Average Annual #	535	39	6	32	12
5th	Cause	Alzheimer's disease	Unintentional injury	Stroke	Unintentional injury	Homicide
	Rate*	36.4	33.8	78.9	18.1	7.1
	Average Annual #	525	34	5	31	8
6th	Cause	Unintentional injury	Chronic lower respiratory disease	Chronic lower respiratory disease	Chronic lower respiratory disease	Conditions of the perinatal period
	Rate*	28.2	36.6	64.3	18.5	3.8
	Average Annual #	409	23	5	22	6
7th	Cause	Influenza and pneumonia	Homicide	Diabetes	Influenza and pneumonia	Diabetes
	Rate*	19.8	18.3	34.1	14.3	22.6
	Average Annual #	282	21	3	16	6
8th	Cause	Diabetes	Alzheimer's disease	Influenza and pneumonia	Suicide	Chronic liver disease and cirrhosis
	Rate*	18.9	28.5	29.3	7.2	14.7
	Average Annual #	258	14	3	15	5
9th	Cause	Suicide	Conditions of the perinatal period	Homicide	Alzheimer's disease	Suicide
	Rate*	11.6	8.7	14.3	12.9	4.7
	Average Annual #	172	12	2	13	5
10th	Cause	Pneumonitis from solids/liquids	HIV/AIDS	Septicemia	Kidney disease	HIV/AIDS
	Rate*	9.1	11.1	18.5	8.6	4.0
	Average Annual #	130	12	2	11	4
Total Deaths	Rate*	729.8	986.1	1104.1	531.3	561.8
	Average Annual #	10,172	635	107	705	177

† Rate is age-adjusted per 100,000 population

*Rates are age-adjusted to the 2000 US population. Numbers are the average of five years. The leading causes of death are ranked by the number of death. Because of age-adjustment, the sequence may not correspond to those ranked by the rates.

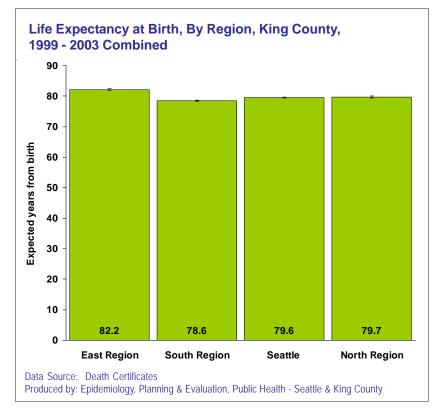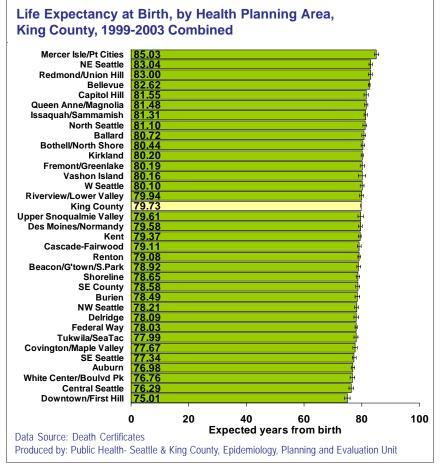NOTE: Hispanic/Latinos can be of any race and are included in the preceding racial categories

Source: Death Certificates, Washington State Department of Health, Center for Health Statistics.
Produced by: Epidemiology, Planning and Evaluation Unit, Public Health- Seattle & King County

Life Expectancy

King County and Regions

- Life expectancy at birth is the average number of years a person born in 2003 would live if the current age-specific death rates remained un-changed over that person's lifetime.

- In King County, the life expectancy at birth in 2003 was 80.3 years, 78.0 for males and 82.5 for females. This was significantly higher than the figure for counties similar to King County, King County ranked third highest among 15 major metropolitan U.S. counties. Compared to 1980, the life expect-ancy increased 4.9 years overall, 6.0 for males and 3.8 for females.

- Among the four Health Regions, for 2003, the life expectancy for residents of the East Region was significantly higher than the county average while the life expectancies for residents of the South Region were significantly lower than the county average. There were no significant differences be-tween the county and the North Region or Seattle.

Life Expectancy at Birth, By Region, King County, 1999 - 2003 Combined

Region	Expected years from birth
East Region	82.2
South Region	78.6
Seattle	79.6
North Region	79.7

Data Source: Death Certificates
Produced by: Epidemiology, Planning & Evaluation, Public Health - Seattle & King County

Life Expectancy at Birth, by Health Planning Area, King County, 1999-2003 Combined

Health Planning Area	Life Expectancy
Mercer Isle/Pt Cities	85.03
NE Seattle	83.04
Redmond/Union Hill	83.00
Bellevue	82.62
Capitol Hill	81.55
Queen Anne/Magnolia	81.48
Issaquah/Sammamish	81.31
North Seattle	81.10
Ballard	80.72
Bothell/North Shore	80.44
Kirkland	80.20
Fremont/Greenlake	80.19
Vashon Island	80.16
W Seattle	80.10
Riverview/Lower Valley	79.94
King County	79.73
Upper Snoqualmie Valley	79.61
Des Moines/Normandy	79.58
Kent	79.37
Cascade-Fairwood	79.11
Renton	79.08
Beacon/G'town/S.Park	78.92
Shoreline	78.65
SE County	78.58
Burien	78.49
NW Seattle	78.21
Delridge	78.09
Federal Way	78.03
Tukwila/SeaTac	77.99
Covington/Maple Valley	77.67
SE Seattle	77.34
Auburn	76.98
White Center/Boulvd Pk	76.76
Central Seattle	76.29
Downtown/First Hill	75.01

Expected years from birth

Data Source: Death Certificates
Produced by: Public Health- Seattle & King County, Epidemiology, Planning and Evaluation Unit
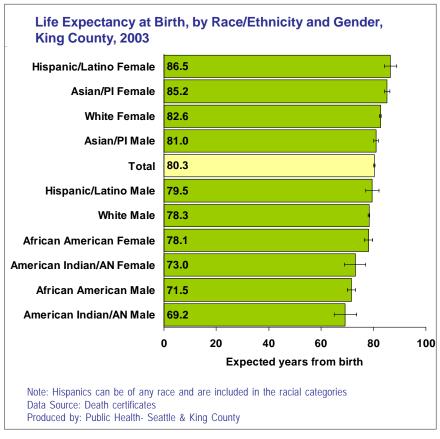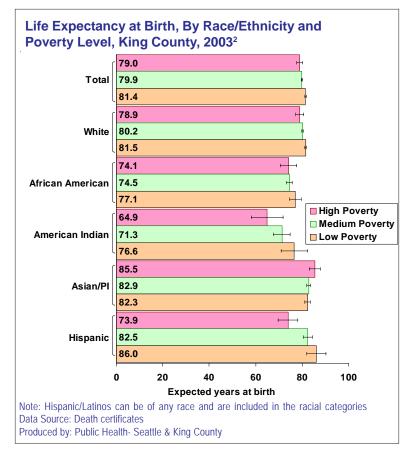
Patterns by Health Planning Area

• Among the Health Planning Areas, residents of Mercer Island had the highest life expectancy (85.0) which was 10 years more than that for residents of Downtown/ First Hill, where the life expectancy (75.0) was the lowest in the county.

Focus on Disparities

• The life expectancies for Hispanic/Latino females,[1] Asian/Pacific Islander females, and white females were significantly higher while the life expectancies for African Americans and American Indian/Alaska Natives (male and female) as well as white males, were significantly lower than the county average.

• The change in life expectancy between 1990-1992 average and 2001-2003 average was 2.4 for whites, 3.0 for African Americans, and 1.8 for Asian/Pacific Islanders and Hispanic/Latinos. For American Indian/Alaska Natives, between the 1990-1992 average and the 2001-2003 average there was a loss in life expectancy of 1.7 years, despite a gain of 7.4 years between 1980-1982 and 1994-1996.

Life Expectancy at Birth, by Race/Ethnicity and Gender, King County, 2003

Race/Ethnicity and Gender	Life Expectancy
Hispanic/Latino Female	86.5
Asian/PI Female	85.2
White Female	82.6
Asian/PI Male	81.0
Total	80.3
Hispanic/Latino Male	79.5
White Male	78.3
African American Female	78.1
American Indian/AN Female	73.0
African American Male	71.5
American Indian/AN Male	69.2

Expected years from birth

Note: Hispanics can be of any race and are included in the racial categories
Data Source: Death certificates
Produced by: Public Health- Seattle & King County

- The impact of socioeconomic status on health, especially for the minority populations, can be shown in the association between level of poverty and life expectancy. Among the racial/ethnic groups, life expectancy appeared to be associated with the level of poverty. This association was significant among whites and among Hispanic/Latinos.

Life Expectancy at Birth, By Race/Ethnicity and Poverty Level, King County, 2003[2]

Race/Ethnicity	High Poverty	Medium Poverty	Low Poverty
Total	79.0	79.9	81.4
White	78.9	80.2	81.5
African American	74.1	74.5	77.1
American Indian	64.9	71.3	76.6
Asian/PI	85.5	82.9	82.3
Hispanic	73.9	82.5	86.0

Expected years at birth

Note: Hispanic/Latinos can be of any race and are included in the racial categories
Data Source: Death certificates
Produced by: Public Health- Seattle & King County

Years of Potential Life Lost (YPLL)

Years of Potential Life Lost (YPLL) before age 65 measures the impact of a cause on premature death. For each death, this measure counts the number of years between the age of death and age 65 as the years of potential life lost. As a result, diseases that cause more deaths among younger persons have a higher weight in YPLL.

- Averaged over 2001-2003, the five leading causes of YPLL in King County were cancer, unintentional injury, heart disease, suicide, and conditions of the perinatal period.

Focus on Disparities

- Conditions of the perinatal period were the number one cause of YPLL in African Americans and the number two cause of YPLL in Hispanic/Latinos. Unintentional injury caused more YPLL than cancer in African Americans, American Indian/Alaska Natives, and Hispanic/Latinos.

- The overall rates of YPLL (per 100,000 population) for African Americans (6500.7), American Indian/Alaska Natives (9759.1), and Hispanic/Latinos (3614.4) were significantly higher than the rate for whites (3041.0). The Asian and Pacific Islander rate (2505.6) was significantly lower than the white rate.

The Five Leading Causes of Years of Potential Life Lost* (YPLL) Before Age 65, By Race/Ethnicity, King County, 2001-2003 Combined

Rank		Total	White	African American	American Indian/ Alaska Native	Asian/ Pacific Islander	Hispanic
1st	Cause	Cancer	Cancer	Conditions of the perinatal period	Unintentional injury	Cancer	Unintentional injury
	Years Lost	633.7	629.0	787.2	2161.4	562.2	749.6
2nd	Cause	Unintentional injury	Unintentional injury	Unintentional injury	Cancer	Unintentional injury	Conditions of the perinatal period
	Years Lost	571.6	565.3	769.7	894.7	345.7	408.9
3rd	Cause	Heart disease	Heart disease	Cancer	Heart disease	Conditions of the perinatal period	Homicide
	Years Lost	338.2	338.1	766.2	779.9	200.9	279.5
4th	Cause	Suicide	Suicide	Homicide	Conditions of the perinatal period	Heart disease	Cancer
	Years Lost	252.4	274.1	666.5	771.9	185.4	266.9
5th	Cause	Conditions of the perinatal period	Conditions of the perinatal period	Heart disease	Homicide	Suicide	Heart disease
	Years Lost	219.8	161.4	552.7	518.6	178.1	251.0
All causes	Years Lost	3,235.6	3,041.1	6,007.6	9,251.4	2,369.1	3,218.4

*Years of Potential Life Lost (three-year average) per 100,000 Population
NOTE: Hispanic/Latinos can be of any race and are included in the racial categories.
Data Source: Death Certificate data, Washington State Department of Health, Center for Health Statistics.
Produced by: Epidemiology, Planning and Evaluation Unit, Public Health- Seattle & King County

References

[1] According to a study by the Washington State Department of Health (Juliet VanEenwyk, Eric Ossiander and Cathy O'Connor, Hispanic Mortality: Discussion Paper, Working Draft Revised January 1998), the lower overall mortality rates and the higher life expectancy for Hispanic/Latinos could be the result of a number of factors, such as under reporting of Hispanic/Latino ethnicity on the death certificates, migration of Hispanic/Latinos to country of origin to die, and a healthier lifestyle among older Hispanic/Latinos. However, the significance of under reporting is unclear. Although older Hispanic/Latinos may have a healthier lifestyle than non-Hispanic/Latinos, it is known that younger Hispanics have a higher death rate than their non-Hispanic counterparts. Since fewer die at younger ages, their impact on the overall death rate and life expectancy is limited.

[2] Poverty level is based on the percentage of persons living below the Federal Poverty Level in a particular census tract in 1989. Those census tracts with 20 percent or more, 5 to 19 percent, and less than 5 percent of the residents living below poverty are classified as high poverty, medium poverty, and low poverty respectively.

Morbidity

- **Leading causes of hospitalizations are injuries, heart, digestive system and respiratory disease, and psychoses.**
- **Psychoses and drug-related hospitalizations increased in percentage of all hospitalizations between 1993 and 2003.**
- **In 2003, an estimated 12.8% of King County residents (aged 5 and older) reported some disability.**
- **Almost half of those aged 75 and older reported some disability. Disability types varied by age group.**
- **In the period 1991-1993, an 18-19 year old could expect 6.3 years of their life spent in only fair or poor health. By 2001-2003 this outlook had significantly worsened; this age group can now expect 8.4 years of unhealthy life.**
- **Persons of lower incomes, of color, and who are older are less likely to report excellent or very good health.**
- **King County residents report more bad physical health days a month (2.9 compared with 2.5) and mental health days (3.2 compared with 3.0) now than 10 years ago, although the differences are not statistically significant.**

Leading Causes of Hospitalization

Certain types of diseases or health conditions account for large shares of hospitalization but are not reflected in mortality data. Some examples of these diseases or conditions include mental health problems, alcohol/drug related conditions, and fractures.

- In 2003, there were a total of 119,439 non-childbirth hospitalizations among King County residents. Between 1990 and 2003 there was a significant decrease in non-childbirth hospitalizations among King County residents (data not shown).

- The leading causes of non-childbirth hospitalization include unintentional injury, heart disease, digestive system disease, respiratory disease, and psychoses.

- The top four causes of hospitalization were the same between 1993 and 2003 (with only a minor change in rank). The ranks of psychoses and drug-related hospitalizations increased while that of cancer decreased during the same time period.

The Leading Causes of Hospitalization, King County, 1993, 1998 and 2003

Cause of Hospitalization (by 2003 Rank)	2003			1998			1993		
	Number	Percent	2003 Rank	Number	Percent	1998 Rank	Number	Percent	1993 Rank
All Cases (Non-Childbirth)	119,439			114,325			118,016		
Unintentional Injury	16,933	14.2%	1	13,168	11.5%	2	14,891	12.6%	1
Heart Disease	13,831	11.6%	2	14,534	12.7%	1	13,919	11.8%	2
Digestive System Disease	13,421	11.2%	3	12,100	10.6%	3	12,995	11.0%	3
Respiratory Disease	11,094	9.3%	4	11,165	9.8%	4	10,607	9.0%	4
Psychoses	8,072	6.8%	5	7,322	6.4%	5	5,812	4.9%	8
Alcohol-Related	7,167	6.0%	6	6,864	6.0%	6	6,150	5.2%	7
Genito/Urinary Disease	6,782	5.7%	7	6,552	5.7%	7	8,078	6.8%	5
Illicit Drug-Related	6,481	5.4%	8	4,684	4.1%	10	3,334	2.8%	16
Cancer	5,933	5.0%	9	6,052	5.3%	8	6,419	5.4%	6
Fractures	4,803	4.0%	10	4,963	4.3%	9	5,303	4.5%	9

NOTE: If a person was hospitalized more than once during the time period, each hospitalization is counted.

Data Source: Hospital Discharge Data, Washington State Department of Health, Center for Health Statistics
Produced by: Epidemiology, Planning and Evaluation Unit, Public Health- Seattle & King County

Types of Disability*

In addition to death and hospitalization, a significant number of people in the population are disabled.

The American Community Survey, conducted by the US Census Bureau, asked a sample of King County residents to report their disability status.

• In 2003, 6.4% of those aged 5-15, 5.2% of those aged 16-20, 10.1% of those ages 21-64, 25.2% of those aged 65-74 and almost half (48.8%) of those aged 75 and over reported having some kind of disability.

• Physical, sensory and go-outside-home disabilities were the most commonly reported among those aged 65 and over; employment, physical and mental disabilities were more reported among those aged 21-64, and among children and youth sensory and mental disabilities were the most reported. (see Appendix D).

Self-reported Disability Status, By Age and Sex, King County, 2003

Age group:		Male:			Female:			Total:
			95% confidence interval			95% confidence interval		
		estimate	lower bound	upper bound	estimate	lower bound	upper bound	estimate
Age 5 to 15:	Total	122,165	119,360	124,970	112,785	110,117	115,453	234,950
	Number with disability	12,144	9,040	15,248	2,833	1,183	4,483	14,977
	Percent disabled	9.9%	7.6%	12.2%	2.5%	1.1%	3.9%	6.4%
Age 16 to 20:	Total	49,035	44,357	53,713	46,347	42,334	50,360	95,382
	Number with disability	2,101	995	3,207	2,892	1,157	4,627	4,993
	Percent disabled	4.3%	2.2%	6.0%	6.2%	2.7%	9.2%	5.2%
Age 21 to 64:	Total	559,269	554,735	563,803	555,494	552,005	558,983	1,114,763
	Number with disability	55,542	47,555	63,529	56,520	49,937	63,103	112,062
	Percent disabled	9.9%	8.6%	11.3%	10.2%	9.0%	11.3%	10.1%
Age 65 to 74:	Total	40,591	38,902	42,280	47,340	46,016	48,664	87,931
	Number with disability	11,968	9,049	14,887	10,173	7,736	12,610	22,141
	Percent disabled	29.5%	23.3%	35.2%	21.5%	16.8%	25.9%	25.2%
Age 75+:	Total	31,326	29,840	32,812	52,950	51,245	54,655	84,276
	Number with disability	14,841	12,943	16,739	26,276	22,970	29,582	41,117
	Percent disabled	47.4%	43.4%	51.0%	49.6%	44.8%	54.1%	48.8%

* Data represent the population in households only; persons in group quarters (such as nursing homes and dormitories) were not sampled.
** Data are from a survey and as such represent a sample of the population. The lower and upper bounds of the 90% confidence interval
   around the estimated number of persons in each category are presented.
NOTE: Persons can report more than one type of disability, and may appear more than once in the separate categories.

Data Source: U.S. Census Bureau, American Community Survey 2003, Table P059
Produced by: Epidemiology, Planning and Evaluation Unit, Public Health- Seattle & King County
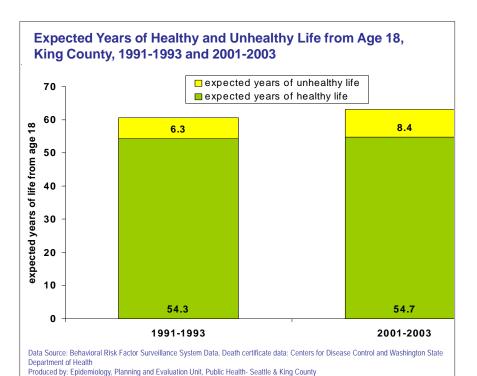

Expected Years of Healthy Life

Using people's reported health status in different age groups, it is possible to calculate their expected years of healthy and unhealthy life (similar to life expectancy)[1]. Based on the current percentages of people reporting less than very good health by age, a person who is now aged 18-19 can expect to live 84 years of life during which their own health status will be only fair or poor.

Expected Years of Unhealthy Life*, By Age, King County, 2001-2003 Combined

Age group	Expected years	95% confidence interval	
		lower bound	upper bound
Age 18 to 19	8.4	8.0	8.7
Age 20 to 24	8.2	7.9	8.6
Age 25 to 29	7.8	7.5	8.2
Age 30 to 34	7.6	7.2	7.9
Age 35 to 39	7.3	7.0	7.6
Age 40 to 44	7.1	6.8	7.4
Age 45 to 49	6.8	6.4	7.1
Age 50 to 54	6.3	6.0	6.6
Age 55 to 59	5.8	5.5	6.2
Age 60 to 64	5.3	5.0	5.7
Age 65 to 69	4.9	4.6	5.2
Age 70 to 74	4.3	4.0	4.6
Age 75 to 79	3.9	3.7	4.2
Age 80 to 84	3.3	3.0	3.6
Age 85+	3.1	2.8	3.4

* Time spent in reported health status fair/poor as opposed to good/very good/excellent

Data Source: Death certificate data, Washington State Department of Health, Center for Health Statistics, and Behavioral Risk Factor Surveillance Survey, Centers for Disease Control and Washington State Department of Health.
Produced by: Epidemiology, Planning and Evaluation Unit, Public Health- Seattle & King County

Expected Years of Healthy and Unhealthy Life from Age 18, King County, 1991-1993 and 2001-2003

Data Source: Behavioral Risk Factor Surveillance System Data, Death certificate data; Centers for Disease Control and Washington State Department of Health
Produced by: Epidemiology, Planning and Evaluation Unit, Public Health- Seattle & King County

- In 1991-1993 the comparable years of expected fair or poor health status for 18-19 year-olds was significantly lower, at only 6.3 years.

- While life expectancy increased significantly from 1991-1993 to 2001-2003, the chart shows that most of the gain represents years of unhealthy life. In the same decade, while the percentage of people aged 60 and older reporting fair or poor health did not change, the percentage of people in each age group from 18 to 59 reporting fair or poor health increased significantly.

Self-Reported Health Status

- 62% of the King County adults considered their general health as excellent or very good.

- On the average, King County adults had 2.9 "not good physical health days" and 3.2 "not good mental health days" per month.

Focus on Disparities

- The poor, the elderly and all minority groups except Asian and Pacific Islanders were less likely to report excellent or very good health.

- The elderly had more poor physical health days and fewer poor mental health days than the county average; females had more poor physical and mental health days than males; African Americans had more poor mental health days while Asian and Pacific Islanders had fewer poor physical and mental health days than whites; and by income, those with less income had more poor physical and mental health days than those with greater incomes.

Self-Reported Health Status, Adults Age 18+, King County, 2002-2004 Combined

	Sample size	Excellent/very good health		Average number of "not good" physical health days per month		Average number of "not good" mental health days per month	
		Percent	95% CI	Number	95% CI	Number	95% CI
Total	7,392	61.6	(60.1, 63.0)	2.9	(2.8, 3.1)	3.2	(3.0, 3.4)
Age:							
18-24	509	63.2	(57.6, 68.4)	2.1	(1.7, 2.6)	4.4	(3.8, 5.0)
25-44	2,926	67.5	(65.4, 69.6)	2.3	(2.1, 2.6)	3.3	(3.1, 3.6)
45-64	2,684	60.5	(58.1, 62.7)	3.4	(3.0, 3.7)	3.1	(2.8, 3.4)
65+	1,273	43.7	(40.4, 47.1)	4.6	(4.0, 5.3)	1.6	(1.3, 2.0)
Sex:							
Male	3,025	61.0	(58.8, 63.2)	2.7	(2.4, 3.0)	2.7	(2.4, 3.0)
Female	4,367	62.1	(60.3, 64.0)	3.2	(3.0, 3.4)	3.6	(3.4, 3.9)
Race/Ethnicity:							
White	6,251	64.1	(62.6, 65.7)	2.9	(2.7, 3.1)	3.2	(3.0, 3.4)
African American	276	51.6	(44.1, 59.0)	4.4	(3.0, 5.8)	4.5	(3.4, 5.6)
Asian/PI	497	56.6	(50.9, 62.1)	2.1	(1.5, 2.7)	2.4	(1.8, 3.1)
Hispanic/Latino	383	37.7	(32.0, 43.7)	2.9	(2.1, 3.7)	3.4	(2.5, 4.3)
All other races	368	38.6	(32.8, 44.8)	3.9	(2.8, 5.0)	3.7	(2.7, 4.7)
Annual Household Income:							
<$15,000	458	41.0	(34.8, 47.6)	5.1	(4.1, 6.1)	5.3	(4.4, 6.2)
$15,000-$24,999	815	44.8	(40, 49.6)	4.2	(3.5, 4.9)	5.1	(4.4, 5.9)
$25,000-$34,999	768	52.0	(47.2, 56.7)	3.9	(3.1, 4.6)	4.0	(3.4, 4.6)
$35,000-$49,999	1,034	60.6	(56.8, 64.3)	3.3	(2.7, 3.8)	3.5	(3.0, 4.1)
$50,000+	3,408	71.8	(69.8, 73.6)	2.2	(2.0, 2.4)	2.4	(2.1, 2.6)

Data Source: Behavioral Risk Factor Surveillance Survey, Centers for Disease Control and Washington State Department of Health.
Produced by: Epidemiology, Planning and Evaluation Unit, Public Health- Seattle & King County

References

[1] Methodology from: Centers for Disease Control, "Measuring Healthy Days: Population Assessment of Health-Related Quality of Life". Atlanta, Georgia: CDC, November 2000.