



## Premature Death

### Objective:

Increase the number of healthy years that residents live

### Strategy:

Initiate, implement, and coordinate programs that prevent the leading causes of poor health and premature death, including injuries and violence

### Why is this strategy important?

Smoking, obesity, unintentional injuries and violence are important causes of premature and potentially preventable deaths. Age-appropriate flu and pneumonia immunizations also help prevent disabling illness and premature death.

King County can increase the number of healthy years that residents live by investing in and promoting programs that prevent the leading causes of poor health and premature death, including injuries and violence, and targeting efforts to those who are most at risk.

### How is our performance?

King County tracks several indicators that gauge how well we are doing to increase the number of healthy years that King County residents live. Smoking is a major cause of preventable death and disability. Eleven percent of adults in King County smoke. However, the rates are elevated for Blacks/African Americans, American Indian/Alaska Natives, and people of multiple race and the lowest incomes. Overall, one in 10 students report smoking cigarettes in the last 30 days. Fifteen percent of twelfth-graders smoked, according to the most recent King County data.

About 56 percent of King County adults and 21 percent of middle and high school students are overweight or obese, putting them at increased risk of disability and premature death. For both youths and adults, Black/African American, American Indian/Alaska Native and Native Hawaiian/Pacific Islander have higher overweight/obesity rates than the population average. Among adults there is little difference in overweight and obesity by income.

More than half of adults in King County did not receive influenza vaccines in the last year and more than a quarter of those aged 65 and older had never been vaccinated against pneumonia in 2007-2011. Pneumococcal disease is the leading cause of death from vaccine-preventable bacterial disease in the US. Flu immunization rates are generally lower than rates for age-appropriate pneumonia vaccination. Racial disparities persist in vaccination rates, especially for pneumonia.

Unintentional injuries are the fifth leading cause of death in King County, and the most common cause of death among children and adults ages 1 to 44. Unintentional injury death rates are

highest among Blacks/African Americans and American Indian/Alaska Natives and those who live in high-poverty neighborhoods.

Injuries from violence (suicide and homicide) account for about 30 percent of injury deaths. There were about 200 suicide deaths and 60 homicide deaths on average per year between 2006 and 2010. Whites have the highest suicide rate, followed by Blacks/African Americans, and rates are higher in high- and medium-poverty neighborhoods. Homicide disproportionately affects Blacks/African Americans and those who live in high poverty neighborhoods.

## **What can you do?**

If you are an individual:

- Take care of your health by not starting or quitting smoking, exercising 30 minutes per day, eating healthy foods (check out calorie counts on restaurant menus), avoiding sugary drinks, practicing safe sex, and making sure your vaccinations are up to date.
- Drive safely, without distraction such as texting or use of hand-held mobile device or after drinking alcohol.
- Seek early treatment and support for depression and other mental or behavioral health issues and know the signs of depression and suicide risk of friends, relatives and neighbors, and how to get them help.

If you are a health care provider:

- Talk to your patients about the importance of quitting smoking or not starting, and provide information about cessation services.
- Ask your patients at every visit whether they are getting 30 minutes of exercise and eating healthy foods and avoiding sugary drinks. Talk about their overweight or obesity status as a significant health concern. Identify childhood overweight and obesity status early and support children and parents to address this concern.
- Know the signs of depression and refer patients to appropriate care.

Ensure that adults are getting their necessary immunizations.

If you are a community organization or a business:

- Help make the healthy choice the easy choice by supporting smoke-free workplace policies and strategies in your workplace or office, and healthy vending or food options for your employees, members and clients, and participating in immunization campaigns to get employees immunized.
- Know that it is against the law to sell tobacco to youth.
- Participate in regular community-wide efforts to get people physically active, such as bike and walk to work days.

## **Moving forward**

Public Health - Seattle & King County's Violence and Injury Prevention Unit plans, implements, and evaluates selected approaches to reduce death and injury in King County. Other Public Health programs address adult vaccination and smoking cessation and provide health promotion programs for diverse communities.

Increased health insurance coverage and access to primary care may impact vaccination rates, smoking cessation, mental and behavioral health treatment, and other causes of death and injury in King County.

## **Related Links**

### **Public Health-Seattle & King County**

### **Health of King County**

### **Learn about Healthy Eating: What is a Healthy Diet? (New USDA Guidelines)**

### **Communities Putting Prevention to Work Grant**

### **Public Health-Seattle & King County Personal Health Programming**

### **King County Tobacco Cessation Program**

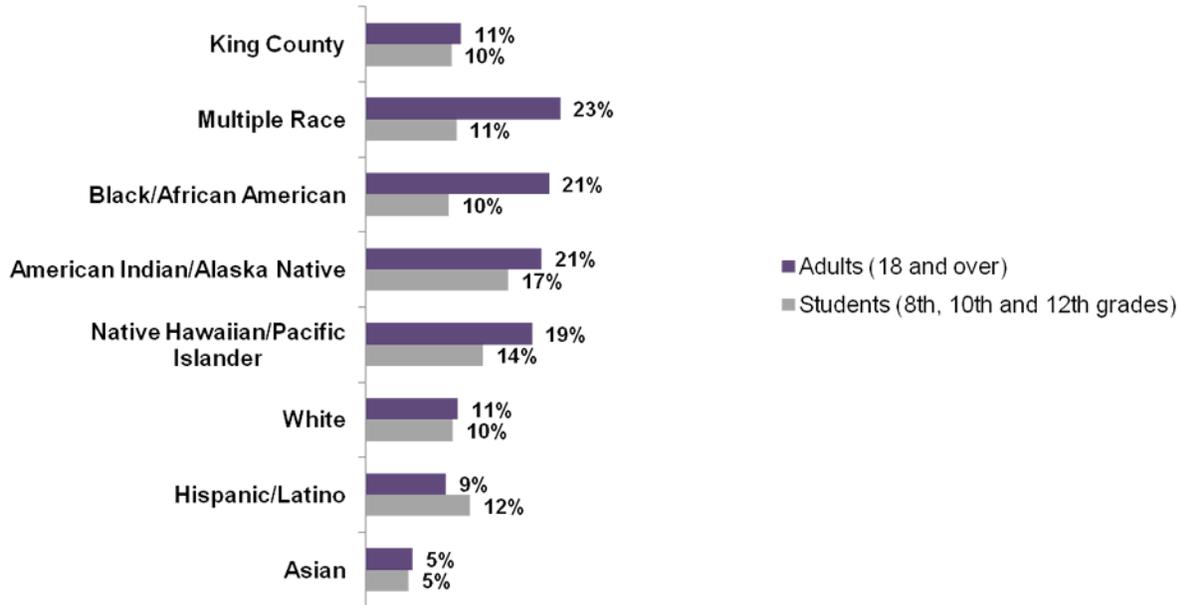
## **Technical Notes**

1. Overweight/Obesity and smoking among adults ages 18 or older from the Behavioral Risk Factor Surveillance Survey, 2007-2011 combined, prepared by: Public Health- Seattle & King County, Assessment, Policy Development & Evaluation Unit, 08/2012. Unhealthy weight categories are based on the Centers for Disease Control and Prevention (CDC) gender-specific body Mass Index (BMI) reference (CDC, 2001). Overweight or obese is defined as BMI  $\geq$  25. "Current Smokers" are those who smoked cigarettes every day or some days during the past 30 days.
2. Overweight/obesity and smoking rates among students from the Washington State Healthy Youth Survey, 2010; Prepared by: Public Health- Seattle & King County, Assessment, Policy Development & Evaluation Unit, 08/2012. The Washington State Healthy Youth Survey is a self-administered school-based survey conducted every two years to measure adolescent health risk behaviors. Washington public schools, except institutional/correctional schools, serving grades 8, 10 or 12 are eligible to participate. Unhealthy weight categories are based on the Centers for Disease Control and Prevention (CDC) gender-specific Body Mass Index (BMI) for age reference (CDC, 2001). Overweight or obese is defined as BMI-for-age  $>$  85th percentile for children 2 to 20 years of age. "Current Smokers" are those who smoked cigarettes every day or some days during the past 30 days.
3. Unintentional Injury death rates, suicide and homicide rate data from Death certificate and hospital discharge data are from the Washington State Department of Health, Center for Health Statistics; Prepared by: Assessment, Policy Development and Evaluation, Public Health- Seattle & King County, 04/2010. Death certificate data do not include information on income. Deaths are geocoded

to their Census tract of residence, and 2005-2009 American Community Survey data on poverty rates in those tracts are used to estimate the percentage of households in poverty. High-poverty tracts have poverty rates of 20% or more; medium-poverty tracts have 5% to 15% poverty rates, and low-poverty tracts have poverty rates of less than 5%.

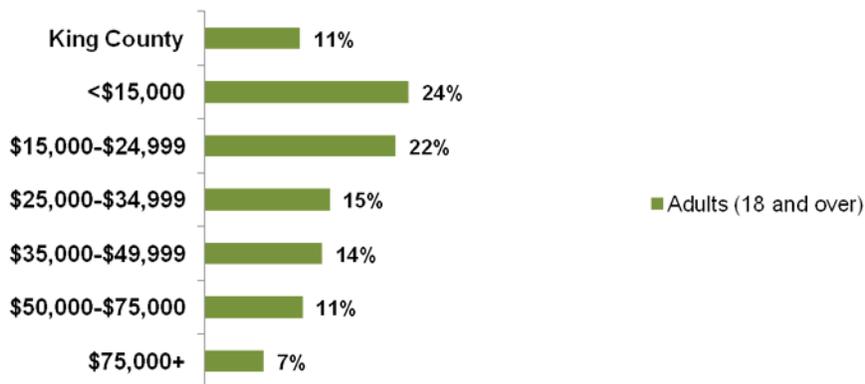
## Charts and Maps

**Percent of Adults and Students Who are Current Smokers  
(by race/ethnicity, 2007-2011 averages)**



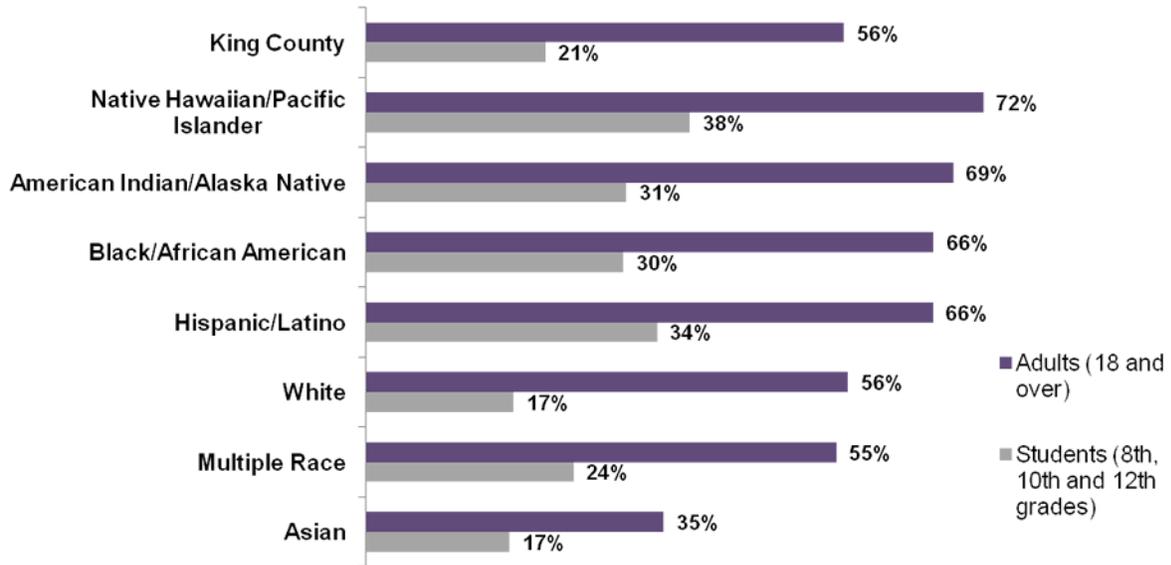
Data Source: Washington State Department of Health, Center for Health Statistics, Behavioral Risk Factor Surveillance System supported in part by Centers for Disease Control and Prevention Cooperative Agreementm, Washington State Healthy Youth Survey, Public Health-Seattle & King County Assessment, Policy Development & Evaluation Unit

**Percent of Adults Who are Current Smokers  
(by household income, 2007-2011 averages)**



Data Source: Washington State Department of Health, Center for Health Statistics, Behavioral Risk Factor Surveillance System supported in part by Centers for Disease Control and Prevention Cooperative Agreementm, Washington State Healthy Youth Survey, Public Health-Seattle & King County Assessment, Policy Development & Evaluation Unit

**Percent of Adults and Students Who are Overweight or Obese  
(by race/ethnicity, 2007-2011 averages)**



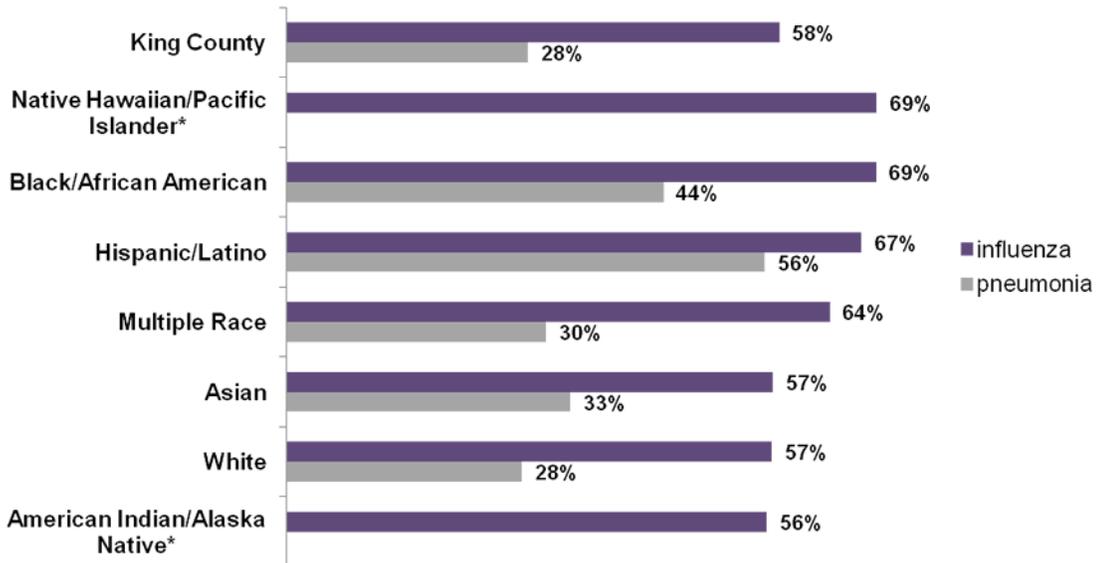
Data Source: Washington State Department of Health, Center for Health Statistics, Behavioral Risk Factor Surveillance System supported in part by Centers for Disease Control and Prevention Cooperative Agreementm, Washington State Healthy Youth Survey, Public Health-Seattle & King County Assessment, Policy Development & Evaluation Unit

**Percent of Adults Who are Overweight or Obese  
(by household income, 2007-2011 averages)**



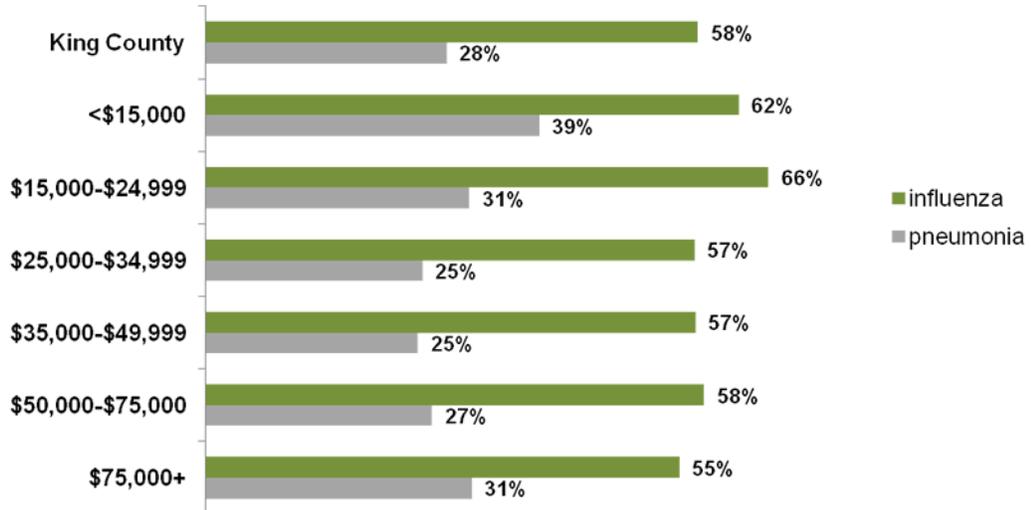
Data Source: Washington State Department of Health, Center for Health Statistics, Behavioral Risk Factor Surveillance System supported in part by Centers for Disease Control and Prevention Cooperative Agreementm, Washington State Healthy Youth Survey, Public Health-Seattle & King County Assessment, Policy Development & Evaluation Unit

**Percent of Adults Who Did Not Receive Immunizations  
(age 18 and older, by race/ethnicity, 2007-2011 averages)**



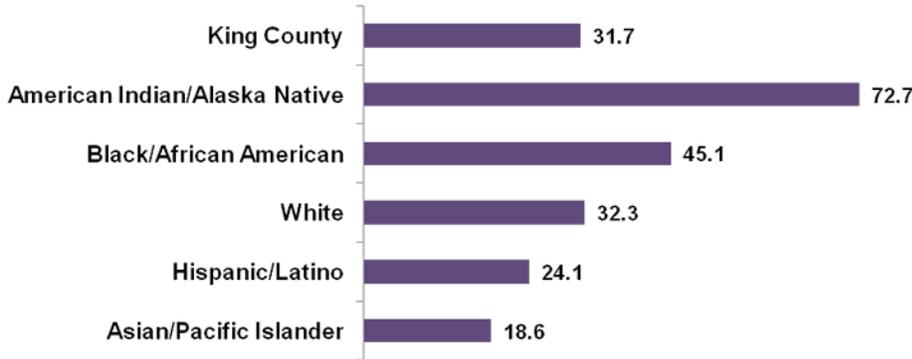
Data Sources: Washington State Department of Health, Center for Health Statistics, Death Certificates, Public Health-Seattle & King County Assessment, Policy Development & Evaluation Unit

**Percent of Adults Who Did Not Receive Immunizations  
(age 18 and older, by household income, 2007-2011 averages)**



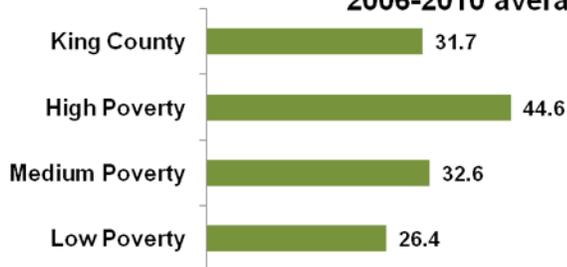
Data Sources: Washington State Department of Health, Center for Health Statistics, Death Certificates, Public Health-Seattle & King County Assessment, Policy Development & Evaluation Unit

**Average Annual Rate of Unintentional Injury Death  
(per 100,000 population, by race/ethnicity, 2006-2010 average)**



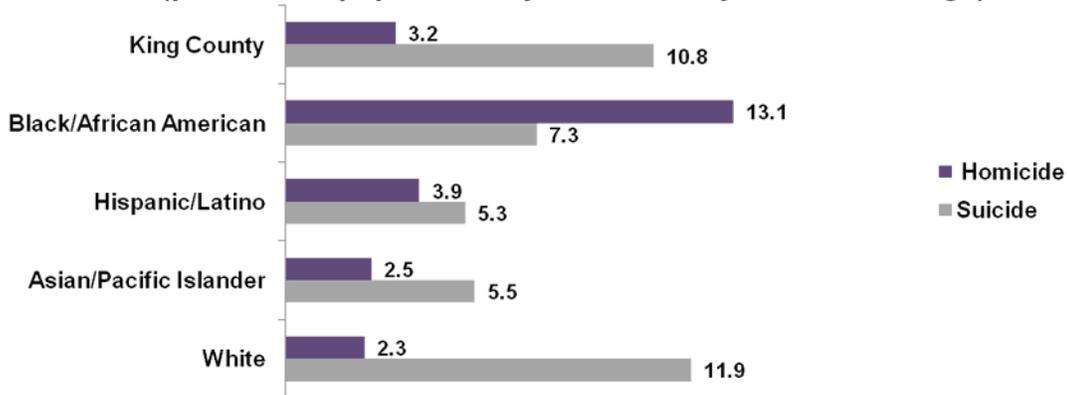
Data Source: Washington State Department of Health, Center for Health Statistics, Death Certificates, Public Health-Seattle & King County Assessment, Policy Development & Evaluation Unit

**Average Annual Rate of Unintentional Injury Death  
(per 100,000 population, by neighborhood poverty level,  
2006-2010 average)**



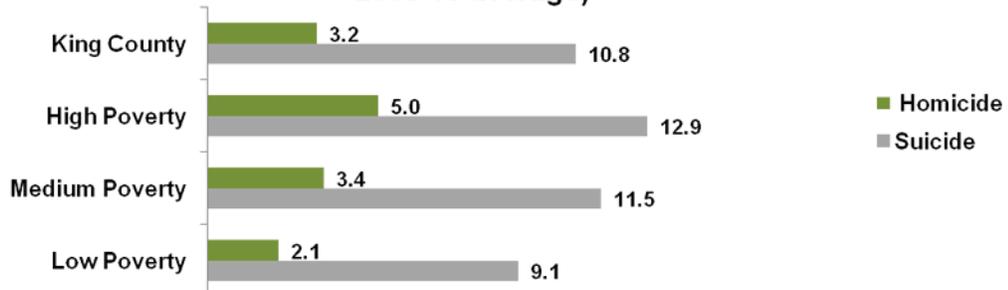
Data Source: Washington State Department of Health, Center for Health Statistics, Death Certificates, Public Health-Seattle & King County Assessment, Policy Development & Evaluation Unit

**Average Annual Rate of Homicide and Suicide  
(per 100,000 population, by race/ethnicity, 2006-10 average)**

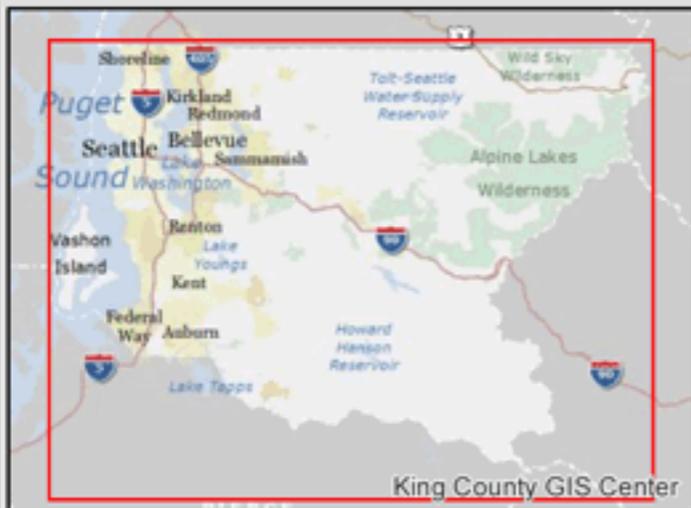
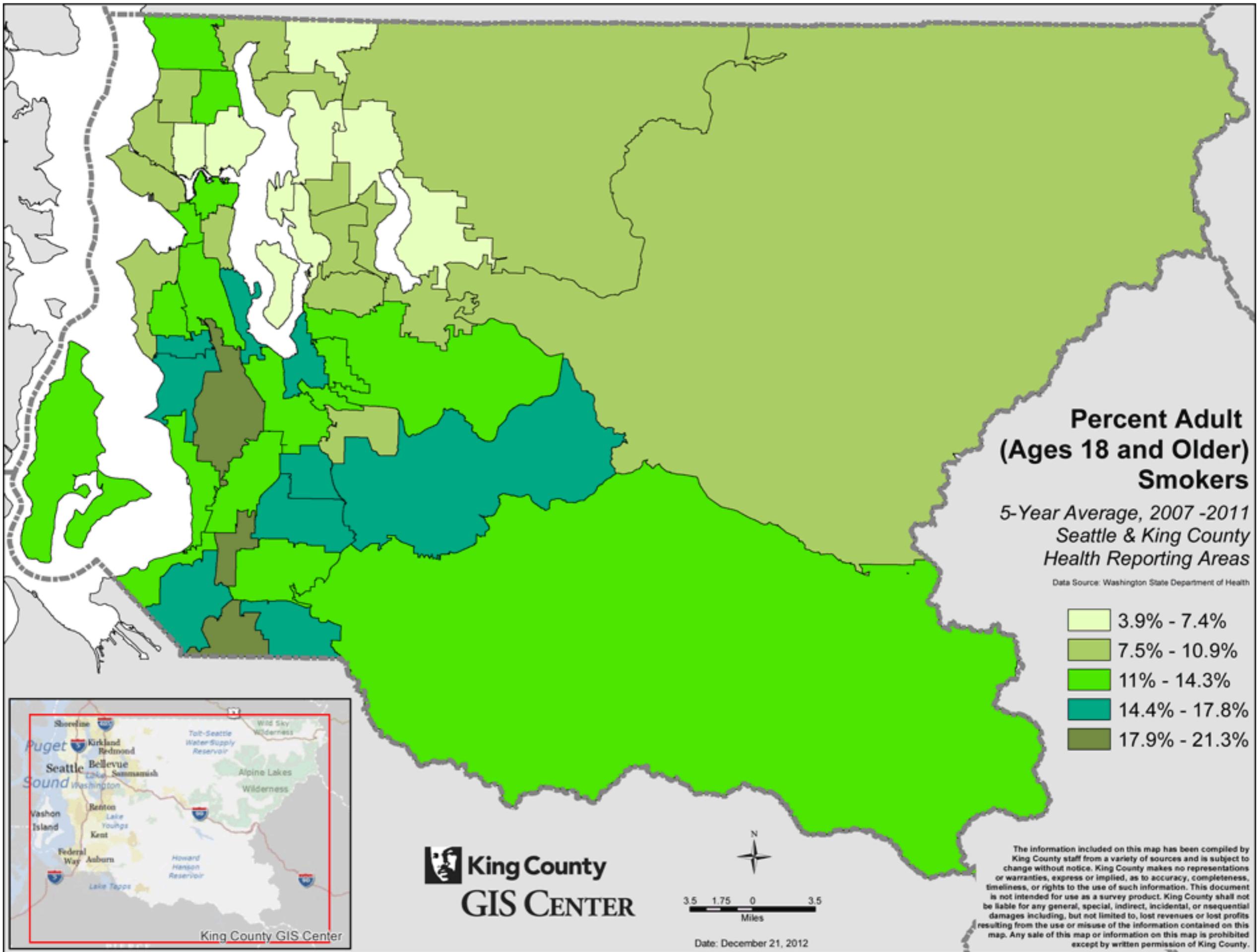


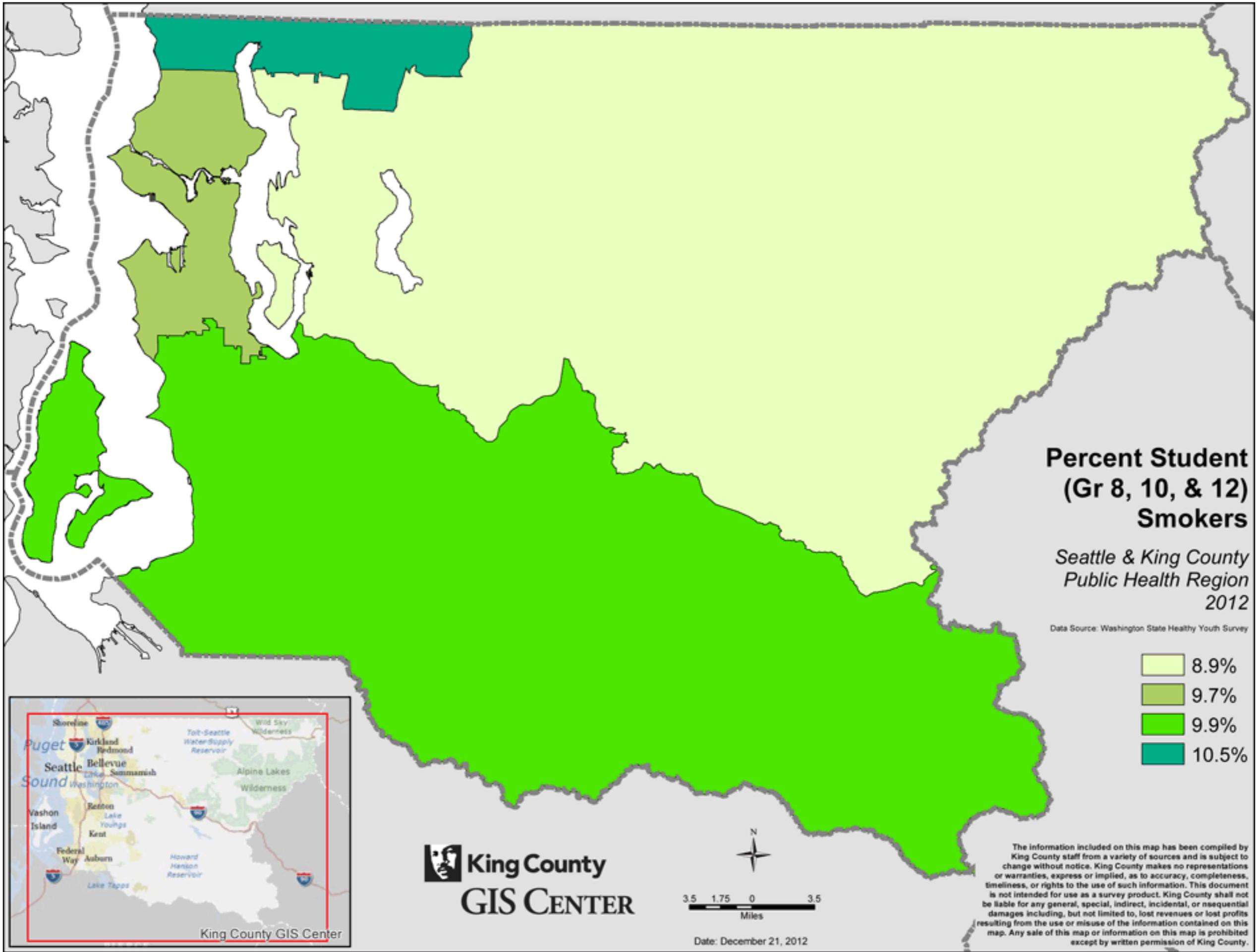
Data Source: Washington State Department of Health, Center for Health Statistics, Death Certificates, Public Health-Seattle & King County Assessment, Policy Development & Evaluation Unit

**Average Annual Rate of Homicide and Suicide  
(per 100,000 population, by neighborhood poverty level,  
2006-10 average)**



Data Source: Washington State Department of Health, Center for Health Statistics, Death Certificates, Public Health-Seattle & King County Assessment, Policy Development & Evaluation Unit



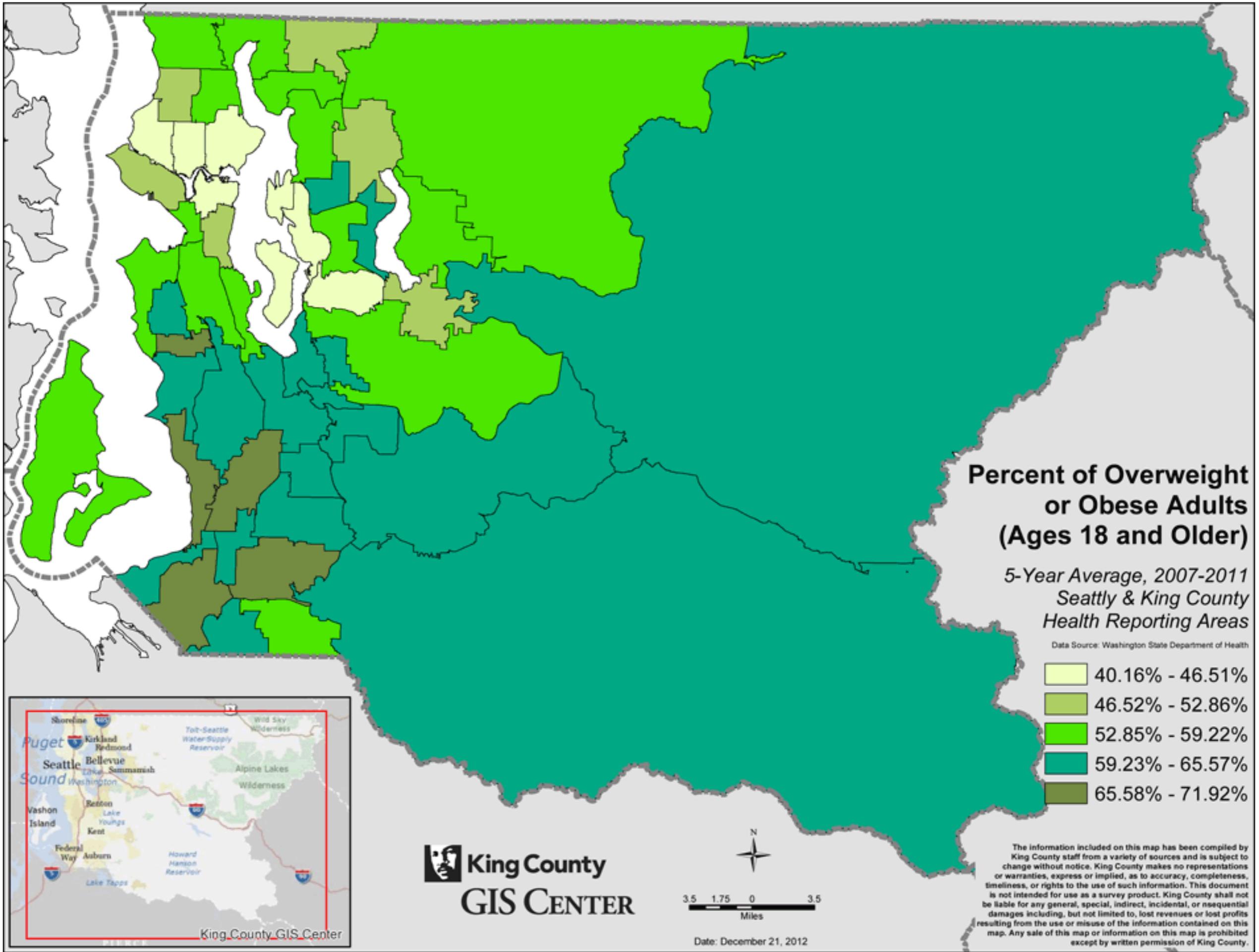


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Date: December 21, 2012

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## Percent of Overweight or Obese Adults (Ages 18 and Older)

5-Year Average, 2007-2011  
Seattle & King County Health Reporting Areas

Data Source: Washington State Department of Health

- 40.16% - 46.51%
- 46.52% - 52.86%
- 52.85% - 59.22%
- 59.23% - 65.57%
- 65.58% - 71.92%

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