

2019 DISTRICT HEALTH PROFILES

Assembly District 24

This health profile provides statistics on key health topics for the approximately 63,950 children and adults living in Assembly District 24 during the year 2017.

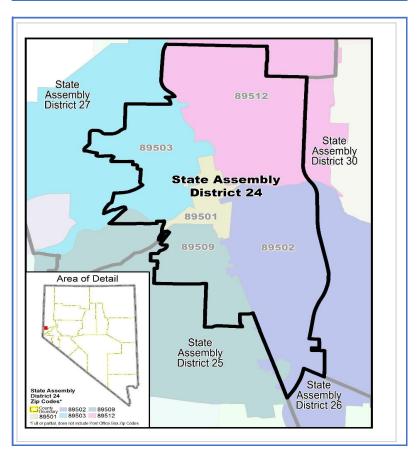
Race/Ethnicity ¹	District	Nevada	Sig.
White non-Hispanic	50.1%	51.3%	\downarrow
Black non-Hispanic	2.6%	8.2%	\downarrow
AI/AN ² non-Hispanic	2.1%	0.9%	↑
Asian non-Hispanic	6.7%	7.7%	\downarrow
NH/PI ³ non-Hispanic	0.9%	0.6%	↑
Hispanic or Latino	34.3%	27.8%	↑
All Other non-Hispanic	3.3%	3.5%	\downarrow

Age ⁴	District	Nevada	Sig.
0 - 4 years	6.0%	6.4%	\downarrow
5 - 17 years	13.5%	17.1%	↑
18 - 39 years	36.7%	29.9%	↑
40 - 64 years	30.9%	32.6%	\downarrow
65+ years	12.9%	14.1%	\downarrow

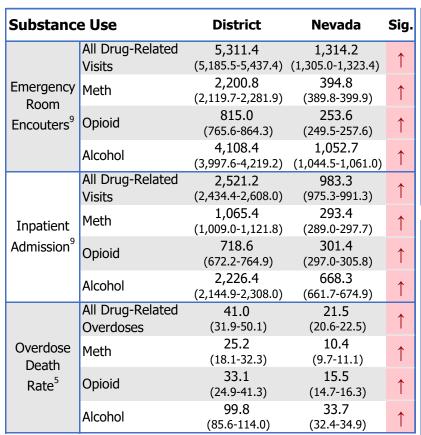
Death Rates⁵	District	Nevada	Sig.
Death Rates			J.g.
Heart Disease	258.4	210.3	^
l leart bisease	(235.6-281.2)	(207.3-213.3)	
Cancer	193.8	171.2	A
Caricei	(174.0-213.6)	(168.5-173.9)	
Chronic Lower	87.2	56.3	•
Respiratory Disease	(73.9-100.4)	(54.7-57.8)	T
·	75.1	45.3	•
Accidents	(62.8-87.4)	(43.9-46.7)	↑
a	45.7	36.5	~
Stroke	(36.1-55.3)	(35.2-37.7)	
ALL: 1.5:	14.7	26.1	
Alzheimer's Disease	(9.3-20.2)	(25.0-27.1)	\downarrow
Tfl	16.3	20.3	
Influenza & Pneumonia	(10.5-22.0)	(19.4-21.3)	~
C. i ai da	26.8	20.1	
Suicide	(19.4-34.1)	(19.2-21.1)	~
Diabataa Mallitus	24.2	17.8	
Diabetes Mellitus	(17.2-31.1)	(16.9-18.7)	~
All Other Courses	320.9	201.2	
All Other Causes	(295.4-346.3)	(198.2-204.1)	T

Chronic Disease ⁶	District	Nevada	Sig.
Heart Attack	5.5% (1.3-9.8)	4.6% (4.1-5.2)	~
Stroke	3.4% (1.3-5.5)	2.9% (2.5-3.3)	~
Asthma	9.2% (6.2-12.3)	8.8% (8.0-9.6)	~
COPD	6.7% (4.4-9.0)	6.8% (6.2-7.5)	~
Depression	14.9% (11.0-18.8)	16.5% (15.4-17.5)	~
Overweight or Obese	61.0% (54.8-67.2)	64.2% (62.8-65.7)	~
Current Smokers	17.6% (12.5-22.7)	17.2% (16.0-18.4)	~
Marijuana Use ⁷	12.2% (8.0-16.4)	8.6% (7.6-9.7)	~
Prescription Drug Use ⁷	19.2% (14.0-24.5)	10.1% (7.9-10.0)	1

Immunization ⁸	District	Nevada	Sig.
Children Up-To-Date	65.7%	62.6%	~





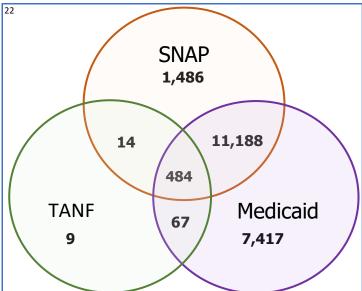


Child Welfare ¹⁰	District	Nevada
CPS Abuse/Neglect Reports ¹¹	605	15,755
Percent Substantiated 12	24.6%	17.6%
Children in Foster Care During CY2017 ¹³	533	7,031
Children in Foster Care as of 12/31/17 ¹⁴	348	4,273

Birth Rates ¹⁵	District	Nevada	Sig.
Less Than Adequate Prenatal	287.4	198.9	^
Care ¹⁶	(266.0-308.9)	(196.2-201.6)	
17 Diaglassa i alek Diagla -17	92.9	86.9	
Low-Birthweight Births ¹⁷	(80.7-105.1)	(85.2-88.7)	~
T	8.8	5.7	
Infant Mortality Rate ¹⁸	(5.0-12.5)	(5.2-6.1)	~
T Di-H- D-+-19	26.6	21.9	•
Teen Birth Rate ¹⁹	(23.1-30.1)	(21.4-22.5)	Т

HIV/STD ²⁰	District	Nevada	Sig.
Persons Living with HIV/AIDS	581.7 (522.9-640.5)	400.8 (393.7-408.0)	1
Sexually Transmitted Diseases	1,714.1 (1,613.2-1,815.0)	765.9 (756.0-775.9)	↑

Eligibility ²¹	Currently Enrolled	Newly Eligible
NV Check Up	750	-
Medicaid Enrollment	19,156	6,931
Percent of currently enrolled		36.2%
SNAP Enrollment	13,172	
TANF Enrollment	574	



Income ²³	District	Nevada	Sig.
Income Below Poverty Level	31.5%	14.9%	1
Uninsured	24.7%	16.2%	1

Cancer ²⁴	District	Nevada	Sig.
All Types Incidence Rate	400 (397.7-402.2)	436.6 (433.1-440.0)	\downarrow
1 st Leading Cancer Type	Breast	Breast	
Incidence Rate	114.9 (114.0-115.9)	125.6 (122.9-128.2)	
2 nd Leading Cancer Type	Prostate	Prostate	
Incidence Rate	77.5 (77.5-78.8)	101.9 (101.9-106.7)	
3 rd Leading Cancer Type	Lung	Lung	
Incidence Rate	62.3 (62.5-63.2)	62.2 (60.9-63.5)	





Footnotes

↓or↑:Signifies the district rate or percent is significantly lower or greater than the State of Nevada rate or percent. Red arrows signify areas for improvement, while green arrows signify measures that are doing well compared to the State.

- ~: Signifies the district rate or percent is not significantly different from the State of Nevada rate or percent.
- *: Suppressed due to low respondent counts.

Note: 2017 population estimates were calculated using a 1.08% growth rate increase from the 2016 estimates provided by the ACS 5-year estimates; Table B01001: Sex by Age

Race/Ethnicity¹: Race/ethnicity distribution for the 2017 population. Assembly, senate, and congressional district population totals were provided by the American Community Survey (ACS) 5-year estimates; Table B03002: Hispanic or Latino Origin by Race

AI/AN²: American Indian or Alaska Native

NH/PI3: Native Hawaiian or Pacific Islander

Age⁴: Age distribution for the 2017 population. Assembly, senate, and congressional district population totals were provided by the ACS 5-year estimates; Table B01001: Sex by Age

Death Rates⁵: Division of Public and Behavioral Health, Electronic Death Registry System. Data reflects causes of deaths that occurred between 2015-2017. Rates are per 100,000 population.

Chronic Disease⁶: Nevada Behavioral Risk Factor Surveillance Survey (BRFSS), core questionnaire, years 2016-2017. District was assigned based on zip code.

Marijuana & Prescription Drug Use⁷: Nevada BRFSS, State added questionnaire, years 2015-2017. Marijuana: includes those who used marijuana at least once in the last 30 days before the survey. Prescription Drug Use: includes those who have EVER taken a prescription drug without a doctor's prescription. District was assigned based on zip code.

Immunization⁸: Nevada Immunization Information System (IIS), WebIZ Replica Database. Consists of children ages 19-35 months as of July 1, 2017. Up-To-Date is considered fully vaccinated with: 4 doses of DTaP, 3 doses of Polio, 1 dose of MMR, 3 doses of HIB, 3 doses of Hepatitis B, 1 dose of Varicella, and 4 doses of Pneumococcal Vaccine. Some districts may include duplicate records.

Drug and Alcohol Related Emergency Encounters and Inpatient Hospital Admissions9: Center for Health Information Analysis for Nevada. Statewide hospital billing data. Data reflects hospital encounters that occurred between 2016-2017. Rates are per 100,000 population.

Child Welfare 10: Nevada Division of Child and Family Services (DCFS), Unified Nevada Information Technology for Youth (UNITY) case management system. Includes data from calendar year 2017.

Child Protective Service (CPS) Abuse/Neglect Reports 11: Screened in reports involving alleged incidents of child maltreatment that meet the child welfare agency guidelines for response and result in agency investigation or assessment. Screened in reports include reports dispositioned as differential response, investigation, or institutional investigation. This count reflects unique screened-in reports received in this district/county at any time in calendar year 2017.

Percent Substantiated12: Substantiated reports were investigated and concluded that the allegation of maltreatment or risk of maltreatment was supported/founded by state law or policy.

Children in Foster Care During CY 2017¹³: Foster Care is a substitute care for children placed away from their guardians for at least 24 hours for whom the child welfare agency has placement and care responsibility. This includes licensed family or relative foster homes, unlicensed fictive kin or relative homes, group homes, emergency shelters, residential facilities, childcare institutions, and pre-adoptive homes. The count reflects unique children within the district/county who were in foster care during any period of calendar year 2017.

Children in Foster Care as of 12/31/17¹⁴: This count is a point-in-time snapshot of unique children in foster care on the day 12/31/17.

Birth Rates¹⁵: Division of Public and Behavioral Health. Electronic Birth and Death Registry System. Data reflects births that occurred between 2015-2017. Less Than Adequate Prenatal Care 16: Care is deemed adequate if the ratio of observed to expected visits is 80% or greater. Data reflects the births that occurred between 2015-2017. Rates are per 1,000 live births.

Low-Birthweight Births¹⁷: Babies weighing less than 2,500 grams (about 5.5 pounds) at birth. Data are reported by mother's residence, rather than the infant's place of birth. Data reflects the births that occurred between 2015-2017. Rates are per 1,000 live births.

Infant Mortality Rate 18: Infant mortality measures the number of babies who die during the first year of life per 1,000 births. Data is reported on county of residence, not place of death. Data reflects the deaths that occurred between 2015-2017.

Teen Birth Rate¹⁹: The number of births to teenage females between the age of 15 and 19. Data reflects the births that occurred between 2015-2017. Rates are per 1,000 age 15-19 female specific population.

HIV/STD²⁰: Division of Public and Behavioral Health. Enhanced HIV/AIDS Reporting System (eHARS), Sexually Transmitted Diseases Management Information System (STD*MIS), NEDSS [National Electronic Disease Surveillance System] Base System (NBS), year 2017. If physical address was not provided, district was assigned based on zip code. Sexually Transmitted Diseases (STD) included: chlamydia, gonorrhea, primary syphilis, secondary syphilis, and early latent syphilis.

Eligibility²¹: A snapshot of the number of individuals currently enrolled in Nevada Medicaid, Supplemental Nutrition Assistance Program (SNAP), Temporary Assistance for Needy Families (TANF), and Nevada Check Up in the month of January 2018. Newley Eligible reflects the number of newly eligible adults who are eligible because of the Affordable Care Act (ACA). These individuals fall into one of two categories: newly eligible parent/caretaker or childless adult.

Venn Diagram²²: A snapshot of the number of individuals enrolled in Nevada Medicaid and SNAP, Nevada Medicaid and TANF, SNAP and TANF, and Nevada Medicaid and SNAP and TANF, in the month of January 2018.

Income²³: 2016 ACS 5-year Estimates. Percent of individuals living below the poverty level and percent of individuals who are uninsured in the year 2016.

Cancer²⁴: Division of Public and Behavioral Health. Nevada Central Cancer Registry, years 2014-2015. Lung cancer includes lung and bronchus.