



2019 DISTRICT HEALTH PROFILES

Senate District 3

This health profile provides statistics on key health topics for the approximately 132,797 children and adults living in Senate District 3 during the year 2017.

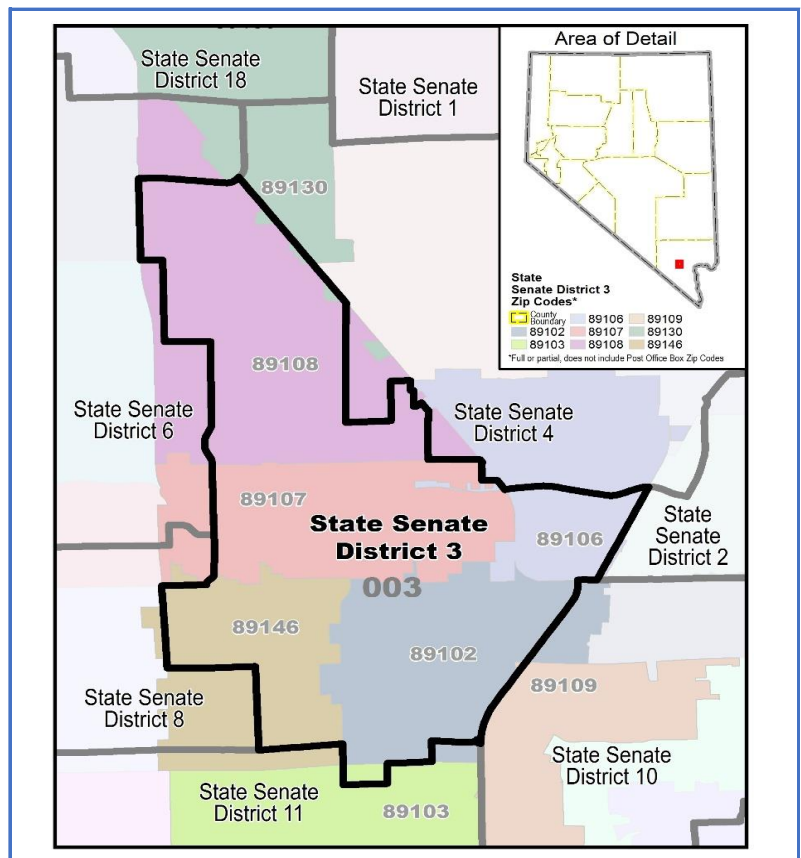
Race/Ethnicity ¹	District	Nevada	Sig.
White non-Hispanic	34.1%	51.3%	↓
Black non-Hispanic	11.8%	8.2%	↑
AI/AN ² non-Hispanic	0.4%	0.9%	↓
Asian non-Hispanic	5.7%	7.7%	↓
NH/PI ³ non-Hispanic	0.7%	0.6%	↑
Hispanic or Latino	44.8%	27.8%	↑
All Other non-Hispanic	2.6%	3.5%	↓

Age ⁴	District	Nevada	Sig.
0 - 4 years	7.0%	6.4%	↑
5 - 17 years	18.2%	17.1%	↑
18 - 39 years	30.9%	29.9%	↑
40 - 64 years	30.8%	32.6%	↓
65+ years	13.2%	14.1%	↓

Death Rates ⁵	District	Nevada	Sig.
Heart Disease	251.5 (235.9-267.0)	210.3 (207.3-213.3)	↑
Cancer	182.7 (169.5-196.0)	171.2 (168.5-173.9)	~
Chronic Lower Respiratory Disease	59.0 (51.5-66.5)	56.3 (54.7-57.8)	~
Accidents	48.5 (41.7-55.3)	45.3 (43.9-46.7)	~
Stroke	43.5 (37.0-50.0)	36.5 (35.2-37.7)	~
Alzheimer's Disease	24.0 (19.2-28.8)	26.1 (25.0-27.1)	~
Influenza & Pneumonia	24.0 (19.2-28.8)	20.3 (19.4-21.3)	~
Suicide	20.2 (15.8-24.7)	20.1 (19.2-21.1)	~
Diabetes Mellitus	19.7 (15.4-24.1)	17.8 (16.9-18.7)	~
All Other Causes	206.2 (192.2-220.3)	201.2 (198.2-204.1)	~

Chronic Disease ⁶	District	Nevada	Sig.
Heart Attack	4.3% (1.9-6.7)	4.6% (4.1-5.2)	~
Stroke	2.8% (1.1-4.4)	2.9% (2.5-3.3)	~
Asthma	12.0% (7.3-16.7)	8.8% (8.0-9.6)	~
COPD	7.4% (4.1-10.7)	6.8% (6.2-7.5)	~
Depression	16.9% (12.3-21.5)	16.5% (15.4-17.5)	~
Overweight or Obese	69.0% (62.4-75.7)	64.2% (62.8-65.7)	~
Current Smokers	24.4% (18.3-30.4)	17.2% (16.0-18.4)	~
Marijuana Use ⁷	8.4% (3.8-13.0)	8.6% (7.6-9.7)	~
Prescription Drug Use ⁷	9.0% (4.6-13.5)	10.1% (7.9-10.0)	~

Immunization ⁸	District	Nevada	Sig.
Children Up-To-Date	59.6%	62.6%	↓

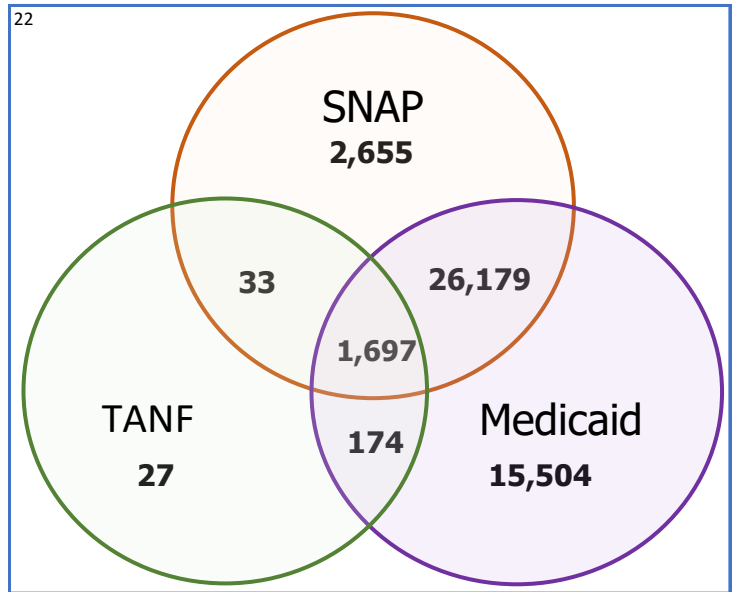




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Substance Use		District	Nevada	Sig.
Emergency Room Encounters ⁹	All Drug-Related Visits	1,510.3 (1,463.7-1,556.9)	1,314.2 (1,305.0-1,323.4)	↑
	Meth	483.8 (457.5-510.2)	394.8 (389.8-399.9)	↑
	Opioid	330.3 (308.5-352.1)	253.6 (249.5-257.6)	↑
	Alcohol	928.0 (891.5-964.5)	1,052.7 (1,044.5-1,061.0)	↓
Inpatient Admission ⁹	All Drug-Related Visits	1,375.5 (1,331.0-1,420.0)	983.3 (975.3-991.3)	↑
	Meth	419.1 (394.5-443.6)	293.4 (289.0-297.7)	↑
	Opioid	429.2 (404.3-454.0)	301.4 (297.0-305.8)	↑
	Alcohol	786.1 (752.4-819.7)	668.3 (661.7-674.9)	↑
Overdose Death Rate ⁵	All Drug-Related Overdoses	20.5 (16.1-24.9)	21.5 (20.6-22.5)	~
	Meth	10.7 (7.5-14.0)	10.4 (9.7-11.1)	~
	Opioid	17.5 (13.4-21.6)	15.5 (14.7-16.3)	~
	Alcohol	35.5 (29.7-41.3)	33.7 (32.4-34.9)	~

Eligibility ²¹	Currently Enrolled	Newly Eligible
Medicaid Enrollment	43,554	12,949
SNAP Enrollment	30,564	



Child Welfare ¹⁰	District	Nevada
<i>Percent Substantiated¹²</i>	17.9%	17.6%
Children in Foster Care as of 12/31/17 ¹⁴	226	4,273

Income ²³	District	Nevada	Sig.
Uninsured	25.1%	16.2%	

Birth Rates ¹⁵	District	Nevada	Sig.
Less Than Adequate Prenatal Care ¹⁶	246.2 (233.3-259.2)	198.9 (196.2-201.6)	↑
Low-Birthweight Births ¹⁷	95.1 (87.1-103.2)	86.9 (85.2-88.7)	~
Infant Mortality Rate ¹⁸	6.6 (4.5-8.7)	5.7 (5.2-6.1)	~
Teen Birth Rate ¹⁹	41.0 (37.3-44.7)	21.9 (21.4-22.5)	↑

Cancer ²⁴	District	Nevada	Sig.
All Types Incidence Rate	371.8 (370.4-373.2)	436.6 (433.1-440.0)	↓
1 st Leading Cancer Type	Breast	Breast	
<i>Incidence Rate</i>	11.2 (110.6-111.9)	125.6 (122.9-128.2)	
2 nd Leading Cancer Type	Prostate	Prostate	
<i>Incidence Rate</i>	63.9 (63.9-64.6)	101.9 (101.9-106.7)	
3 rd Leading Cancer Type	Lung	Lung	
<i>Incidence Rate</i>	47.1 (47.0-47.3)	62.2 (60.9-63.5)	

HIV/STD ²⁰	District	Nevada	Sig.
Persons Living with HIV/AIDS	593.8 (552.5-635.0)	400.8 (393.7-408.0)	↑
Sexually Transmitted Diseases	1,153.2 (1,095.8-1,210.7)	765.9 (756.0-775.9)	↑



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 Welfare¹⁰: 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 Reports¹¹: 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 Care¹⁶: 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 Rate¹⁸: 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.