

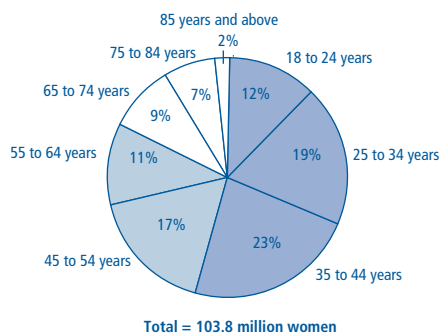
## A Profile of Women's Health in the United States

To provide a clear and comprehensive roadmap to the increasingly large and complex range of women's health data available today, the Jacobs Institute of Women's Health and The Kaiser Family Foundation have prepared *The Women's Health Data Book*, third edition, a resource on women's health across the lifespan in the United States. Highlights from the *Data Book* include:

- More than 103 million adult women live in the United States today (Figure 1). Just over half are of reproductive age, nearly one-third are between 45 and 64 and nearly one in five are 65 or older.

Figure 1

### U.S. women by age, 1998



Source: Henry J. Kaiser Family Foundation estimates based on Urban Institute analyses of the March 1999 Current Population Survey, U.S. Bureau of the Census.

- Despite women's advances in education and increased labor force participation, women still earn less than men—making only 76% of men's median earnings in 1998.<sup>1</sup> This gap contributes to increased poverty among women, which has been associated with poorer health and barriers to care.

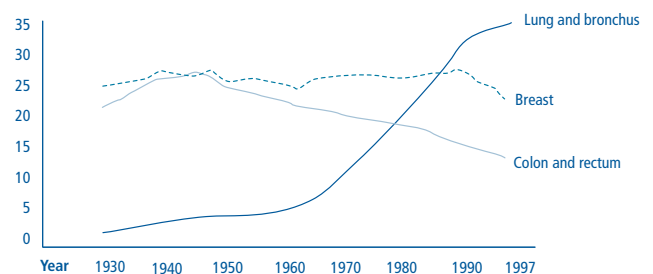
## Chronic Conditions

- Cardiovascular disease (CVD) is the number one cause of death and disability among American women.<sup>2</sup> African American women are at particular risk for CVD, in part due to their higher prevalence of risk factors such as obesity and hypertension.<sup>3</sup>
- Lung cancer is the most common cancer-related cause of death among women<sup>4</sup> and is rising (Figure 2). Death rates for many other cancers have dropped or are unchanged.
- Arthritis and osteoporosis, common among the elderly, are more prevalent in women than in men.<sup>5</sup> An estimated one in two women over the age of 50 will have an osteoporosis-related fracture, compared to one in eight men of the same age.<sup>6</sup>

Figure 2

### Age-adjusted cancer death rates\*, females by site, United States, 1930–1997

Rate per 100,000 female population



Note: \*Per 100,000, age-adjusted to the 1970 U.S. standard population.

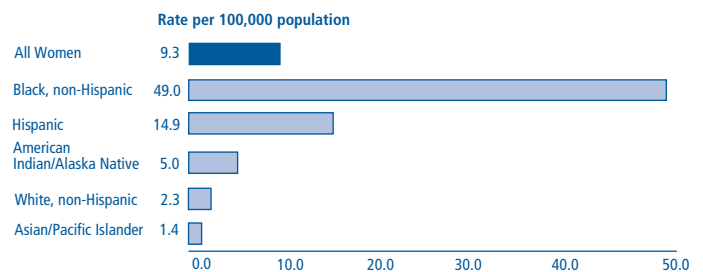
Source: NCHS, U.S. mortality public use data tapes, 1960–1997, U.S. mortality volumes, 1930–1959. Hyattsville (MD): U.S. DHHS; 2000. In: American Cancer Society. Cancer facts and figures 2001.

## Infections

- Women now account for 23% of all new cases of AIDS, up from 7% in 1986.<sup>7</sup> African American and Hispanic women are at highest risk (Figure 3).

Figure 3

### Women's AIDS case rates by race/ethnicity, United States, 1999



Note: Includes reported cases among women 13 years of age and older.

Source: Division of HIV/AIDS Prevention. HIV/AIDS surveillance report; 1999 year end report. Atlanta: Centers for Disease Control and Prevention; 1999; 11 (2).

- Women are more than four times as likely to be infected with chlamydia, a common sexually transmitted disease, than men (404.5/100,000 women vs. 94.7/100,000 men).<sup>8</sup> Younger women ages 15 to 24 years of age are at greatest risk.

## Reproductive Health

- Contraceptive usage is increasing among women 15 to 44 years old. In 1995, 64.2% used a method of contraception, compared with just 55.7% in 1982.<sup>9</sup>
- Since 1990, birth rates among teens ages 15 to 19 have fallen from 59.9 births/1,000 teens in 1990 to 51.1 births/1,000 teens in 1998.<sup>10</sup> In contrast, birth rates among women in their thirties have increased over the past two decades.<sup>11</sup>
- Birth rates among unmarried women have increased, rising from 29.4/1,000 unmarried women in 1980 to 44.3/1,000 in 1998.<sup>12</sup>

## Mental Health

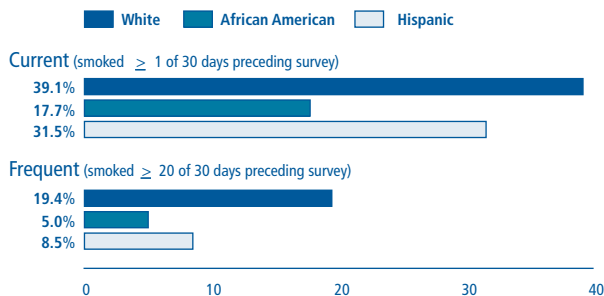
- About one in five women will experience a major depressive episode in her lifetime, over 1.5 times the rate seen in men.<sup>13</sup>
- Women have a lower lifetime prevalence of drug and alcohol abuse than men (6.4% vs. 12.5% for drug abuse; 3.5% vs. 5.4% for alcohol abuse).<sup>14</sup>

## Health Behaviors

- Just over one in five adult women currently smoke (22.1% in 1997)<sup>15</sup> and women are beginning to smoke at younger ages.<sup>16</sup> White adolescent girls are more likely to smoke than Hispanic and African American girls (Figure 4).

Figure 4

### Cigarette smoking among adolescent female students in grades 9–12 by race/ethnicity, 1999



Source: Kann L, Kinchen S, Williams B, Ross J, Lowry R, Grunbaum JA, et al. Youth risk behavior surveillance—United States, 1999. *MMWR Morb Mortal Wkly Rep* 2000;49(SS05):1-96.

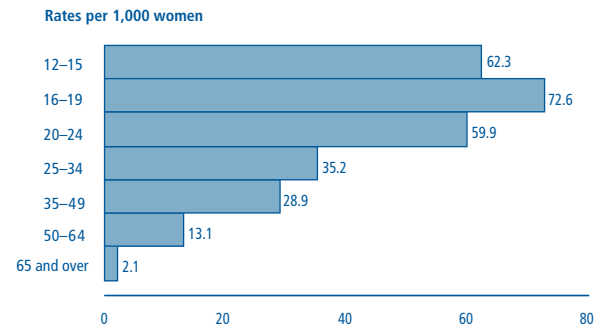
- Obesity, a major risk factor for diabetes and heart disease, has increased among women of all races and ages over the past four decades. Women ages 55 to 64 have the highest rates of obesity, with one-third (33.7%) considered obese.<sup>17</sup>
- Four in ten women report exercising frequently (39%). Higher income among women is associated with greater likelihood of frequent exercise.<sup>18</sup>

## Violence Against Women

- Among women, those in their teens and early twenties are the most at risk for being victims of violent crime (Figure 5).

Figure 5

### Violence victimization rates of women by age, 1998



Note: These rates include verbal threats of rape and sexual assault, and do not include homicide.

Source: U.S. Department of Justice, Bureau of Justice Statistics. Criminal victimization in the United States, 1998 statistical tables. 2000 May 25.

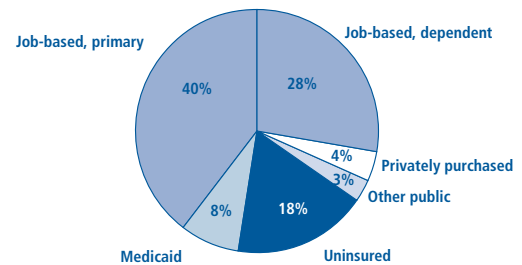
- An estimated 4.4 million women are physically assaulted by intimate partners, and 1.7 million of these women suffer severe abuse each year.<sup>19</sup>

## Access, Use, and Quality of Health Care

- Two-thirds of women get their health insurance from their own or their spouses' employers. (Figure 5). Almost one in five women is uninsured.

Figure 6

### Health insurance coverage of women aged 18 to 64 years, United States, 1999



Note: Other public includes Medicare and other forms of coverage. Total may not equal 100% due to rounding.

Source: UCLA Center for Health Policy Research analysis of the March 2000 Current Population Survey, U.S. Bureau of the Census.

- Uninsured women are less likely to get needed care than those with insurance. About one-third of uninsured women do not see specialists when needed (31%) or fill prescriptions due to cost (31%), compared with 7% and 10% of insured women.<sup>20</sup>
- Women comprise 56% of the over-65 Medicare population. Older women are more likely to be low-income, have a chronic illness,<sup>21</sup> and spend more of their income on out-of-pocket medical expenses than men (22% vs. 17%).<sup>22</sup>

# Sources

- 1 Bureau of Labor Statistics. Highlights of Women's Earnings in 1998. Washington: U.S. Department of Labor, 1999.
- 2 Murphy SL. Deaths: final data for 1998. *Natl Vital Stat Rep* 2000; 48:1–105.
- 3 Rosenberg L, Palmer JR, Rao RS, Adams-Campbell LL. Risk factors for coronary heart disease in African American women. *Am J Epidemiol* 1999; 150:904–909.
- 4 National Center for Health Statistics. U.S. mortality public use data tapes, 1960–1997, U.S. mortality volumes, 1930–1959. Hyattsville (MD): U.S. Department of Health and Human Services; 2000. In: American Cancer Society facts and figures 2001. Atlanta: The society.
- 5 Centers for Disease Control and Prevention. Targeting arthritis: the nation's leading cause of disability. Atlanta: U.S. Department of Health and Human Services; 1999. National Center for Health Statistics. Healthy people 2000 review, 1998–99. Hyattsville (MD): U.S. Department of Health and Human Services; 1999. Watts N. Postmenopausal osteoporosis. *Obstet Gynecol Surv* 1999; 54: 532–537. Kramerow E, Lentzner H, Rooks R, Weeks J, Saydah S. Health United States, 1999. With health and aging chartbook. (PHS)99–1232. Hyattsville (MD): National Center for Health Statistics, 1999.
- 6 National Institutes of Health. Osteoporosis overview. Washington: National Institutes of Health, National Osteoporosis Foundation; 1999: 1–9.
- 7 Division of HIV/AIDS Prevention. HIV/AIDS surveillance report: 1999 year-end report. Atlanta: Centers for Disease Control and Prevention; 1999.
- 8 Division of STD Prevention. Sexually transmitted disease surveillance, 1999. Atlanta: Centers for Disease Control and Prevention; 2000.
- 9 National Survey of Family Growth, 1982 and 1988. From Mosher WD. Contraceptive practice in the United States, 1982–1988. *Fam Plann Perspect* 1990; 22:199. Abma JC, Chandra A, Mosher WD, Peterson LS, Piccinino LJ. Fertility, family planning, and women's health: new data from the 1995 National Survey of Family Growth. *Vital Health Stat* 1997; 23(19): 1–114.
- 10 Ventura SJ, Curtin SC, Mathews TJ. Variations in teenage birth rates, 1991–98: National and state trends. *Natl Vital Stat Rep* 2000; 48(6).
- 11 Ventura SJ, Martin JA, Curtin SC, Mathews, TJ, Park MM. Births: Final data for 1998. Figure 2. *Natl Vital Stat Rep* 2000; 48(3): 1–100.
- 12 Ibid.
- 13 Kessler RC. Sex differences in DSM-III-R psychiatric disorders in the United States; results from the National Comorbidity Survey. *J Am Med Womens Assoc* 1998; 53:148–157.
- 14 Ibid.
- 15 Centers for Disease Control and Prevention. Cigarette smoking among adults, United States, 1997. *MMWR Morb Mortal Wkly Rep* 1999; 48: 993–996.
- 16 U.S. Public Health Service. Preventing tobacco use among young people: a report of the Surgeon General. Atlanta: U.S. Department of Health and Human Services, Centers for Disease Control and Prevention, National Center for Chronic Disease Prevention and Health Promotion, Office of Smoking and Health; 1994.
- 17 National Health and Nutrition Examination Survey. Table 68. In: Kramerow E, Lentzner H, Rooks R, Weeks J, Saydah S. Health United States, 1999. With health and aging chartbook. (PHS)99–1232. Hyattsville (MD): National Center for Health Statistics, 1999.
- 18 Collins K, Schoen C, Joseph S, Duchon L, Simantov E, Yellowitz M. Health concerns across a woman's lifespan: The Commonwealth Fund 1998 Survey of Women's Health. New York: The Commonwealth Fund, 1999.
- 19 Plichta S. Violence and abuse: implications for women's health. In: Falik M, Collins K, editors. Women's health: the Commonwealth fund survey. Baltimore: The Johns Hopkins University Press; 1996. p.237–270.
- 20 Collins K, Schoen C, Joseph S, Duchon L, Simantov E, Yellowitz M. Health concerns across a woman's lifespan: The Commonwealth Fund 1998 Survey of Women's Health. New York: The Commonwealth Fund, 1999.
- 21 Henry J. Kaiser Family Foundation. Medicare and women. Fact sheet. Menlo Park (CA): The Foundation; 1998.
- 22 Foley L, Gibson M. Older women's access to health care: potential impact of Medicare reform. Washington: AARP Public Policy Institute, 2000.