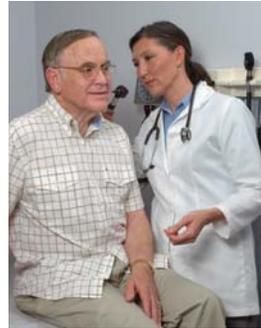


# Live Like Your Life Depends On It

*Chronic Disease Prevention Campaign*



## Baseline and Follow-Up Surveys

**Missouri Department of Health and Senior Services**

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## *Executive Summary*

Missourians can prevent or manage chronic disease and live longer, healthier lives by taking some key recommended actions. This is the underlying message of *Live Like Your Life Depends On It*, a public health education campaign from the Live Well Message Alliance. The Alliance is a community, regional, and statewide partnership of 18 groups including the Missouri Department of Health and Senior Services (DHSS), Missouri State Medical Association, Health Care Foundation of Greater Kansas City, Missouri Hospital Association, Missouri Primary Care Association and others interested in delivering consistent health messages to influence health behaviors and practices. The primary messages of the campaign are to eat smart, be physically active, avoid tobacco products, maintain a healthy weight, obtain recommended health screenings, and disease management for persons with an existing chronic condition. The campaign launched in the fall of 2007 with enhanced roll-out in the Kansas City area.

Baseline information was collected using random-digit dialed telephone interviews within two targeted areas of the state, the Kansas City Metropolitan Region (KCMR) consisting of seven counties (i.e., Cass, Clay, Clinton, Jackson, Lafayette, Platte and Ray) and the “Rest of Missouri”. Adults 45 years of age and older were sampled using a simple random sample of residential telephone numbers from each of the two targeted areas. The follow-up consisted of: (1) a new cross-sectional simple random sample of residential telephone numbers from each of the two targeted areas; and (2) a longitudinal sample of adults participating in the baseline survey who agreed to be re-contacted in each of the targeted areas. Baseline interviews were completed November 12, 2007 to January 2, 2008 with the follow-up interviews completed August 6, 2008 to November 15, 2008. Results are presented for each of the two target areas: KCMR and the Rest of Missouri by new and re-contacted samples.

### *Kansas City Metropolitan Region – Baseline and New Sample*

The baseline and new KCMR survey samples were similar based on age, gender, education, race/ethnicity, rural and urban residence location and household income with age fairly evenly distributed across the three age groups (45-54, 55-64, and 65 and older) and slightly more females than males in both samples. About one in five respondents of each sample perceived their general health status as fair or poor, but less than 10 percent of each sample expressed a lack of satisfaction with life. Greater than 90 percent of each sample (baseline and follow-up) had some type of health coverage. Private or employer insurance (approximately 60% from each sample) followed by Medicare (slightly more than one-fourth from each sample) were used to pay for most medical care. Less than 10 percent of each sample had household incomes less than \$15,000.

#### Key Findings:

- More than 60 percent of respondents in each sample were overweight or obese, and almost half in the baseline and slightly more in the new follow-up sample reported having high blood pressure (47.6% v. 52.1%) or high cholesterol (50% v. 57.3%).
- The leading existing chronic diseases among the baseline and new follow-up samples included: arthritis, diabetes, a previous diagnosis of cancer, followed by a previous heart attack and current asthma.

- Greater than 80 percent of the respondents from each sample had a routine checkup in the past 2 years.
- More than one-fourth of the baseline sample (27.1%) and slightly less of the follow-up sample (21.4%) reported ever seeing or hearing the *Live Like Your Life Depends On It* campaign.
- The most frequent reported source at baseline and in the follow-up for seeing or hearing the campaign was television (29.9% v. 40.8%), followed by newspaper (6.7% v. 12.2%).
- At baseline almost six of every ten respondents (59.7%) liked what they saw or heard in the *Live Like Your Life Depends on It* campaign versus four of every ten respondents (42.9%) from the follow-up, but this difference was not statistically significant.
- At baseline, one-fourth (25.4%) of the individuals who reported seeing or hearing the campaign reported making some type of change with slightly more reporting making a change at follow-up (28.6%). The individuals who made changes since hearing the campaign in both samples tended to be in the younger age group (45-54), female, have lower education attainment and household incomes less than \$35,000.

### *Rest of Missouri – Baseline and New Sample*

The two survey samples were similar based on age, gender, race/ethnicity and educational attainment. Age was relatively evenly distributed across the three age groups with slightly more females than males in each sample. The majority of respondents were white (approximately 90.0%) with African-Americans slightly more than six percent and Hispanics representing about two percent of each sample. However, the samples differed in that there was a significantly higher proportion of individuals with household incomes less than \$15,000 in the Rest of Missouri baseline sample (20.9%) compared to the follow-up sample (12.7%), but a higher proportion of respondents with household incomes greater than \$50,000 in the follow-up sample. Nevertheless, About one-fourth of each sample (27.9% baseline v. 24.8% follow-up) perceived their general health status as fair or poor, only a small proportion (8% or less) of each sample expressed a lack of satisfaction with life. Approximately 92 percent of respondents from each sample had some type of health coverage. Private or employer insurance (slightly more than one-half of each sample) followed by Medicare (approximately one-third of each sample) were used to pay for most medical care.

#### Key Findings:

- More than 60 percent of respondents in each sample were overweight or obese, and approximately one-half in the baseline and new follow-up samples reported having high blood pressure (48.5% v. 50.2%) or high cholesterol (44.7% v. 52.9%).
- The leading existing chronic diseases among the baseline and new follow-up samples, included: arthritis, diabetes, a previous diagnosis of cancer, followed by previous heart attack and current asthma.
- A large proportion of the respondents from each sample reported a routine checkup in the past 2 years (86.3% baseline v. 89.4% follow-up).
- Slightly more follow-up respondents (28.8%) compared to the baseline sample (23.7%) reported ever seeing or hearing the *Live Like Your Life Depends On It* campaign.

- The most frequent reported source for seeing or hearing the campaign was television. A greater proportion of the sample at baseline liked what they saw or heard in the *Live Like Your Life Depends On It* campaign (73.1%) versus respondents from the follow-up (55.7%), but this difference was not statistically significant.

### ***Kansas City Metropolitan Region – Baseline and Re-contacted Sample***

The KCMR re-contacted sample consisted of more females than males, tended to be older, white, and resided in an urban area. Hispanics represented about 1.6 percent of the sample. The sample included a significantly higher proportion of individuals with some college or higher education and with household incomes of \$50,000 or more. There was little change in general health status in the KC re-contacted sample from baseline to the first follow-up survey with about one in five respondents (21.4% v 21.7%, respectively) perceived their general health status as fair or poor and less than 10 percent expressed a lack of satisfaction with life. Greater than 90 percent of respondents continued to have some type of health care coverage.

#### Key Findings:

- The proportion of respondents reporting several of the chronic diseases including asthma, diabetes, and previous heart attack was similar between baseline and follow-up. There was a slight increase, although not significant, in reporting of high blood pressure, high cholesterol, arthritis, previous diagnosis of cancer, previous angina, and previous stroke.
- A similar proportion of respondents at baseline (29.3%) and follow-up (30.6%) reported ever seeing or hearing the *Live Like Your Life Depends On It* campaign when re-contacted.
- The most frequent reported source at baseline and follow-up for seeing or hearing the campaign was television; however, a substantial proportion of each sample did not know or wasn't sure where they had seen or heard the campaign.
- A greater proportion of the sample at follow-up liked what they saw or heard in the *Live Like Your Life Depends On It* campaign (71.4%) versus at baseline (67.1%), but this difference was not statistically significant.
- Slightly more respondents at follow-up (34.3%, n = 24) reported making any changes since seeing or hearing the messages compared to baseline (22.9%, n = 16).

### ***Rest of Missouri – Baseline and Re-contacted Sample***

The Rest of Missouri re-contacted sample consisted of more females than males, tended to be older, and white. The proportion of respondents residing in urban, town and rural areas were similar. Hispanics represented about 1.2 percent of the sample. The sample included a significantly higher proportion of individuals with high school or higher education compared to individuals with less than a high school education and with household incomes of \$50,000 or more compared to individuals with household incomes less than \$50,000. There was little change in general health status in the Rest of Missouri re-contacted sample from baseline to the first follow-up survey with about one-fourth of respondents (27.1% v 23.6%, respectively) perceiving their general health status as fair or poor and less than 7 percent expressed a lack of

satisfaction with life. Greater than 90 percent of respondents continued to have some type of health care coverage.

Key Findings:

- The proportion of respondents reporting several of the chronic diseases including asthma, diabetes, and previous heart attack was similar between baseline and follow-up. There was a slight increase, although not significant, in reporting of high blood pressure, high cholesterol, arthritis, previous diagnosis of cancer, previous angina, and previous stroke.
- There was a significant increase in the proportion of respondents who reported ever seeing or hearing the *Live Like Your Life Depends On It* campaign between baseline (24.9%, n = 63) and follow-up (36.6%, n = 89).
- The most frequent reported source at baseline and follow-up for seeing or hearing the campaign was television; however, a substantial proportion of each sample did not know or wasn't sure where they had seen or heard the campaign.
- A greater proportion of the sample liked what they saw or heard in the *Live Like Your Life Depends On It* campaign at follow-up (71.4%) versus at baseline (67.1%), but this difference was not statistically significant.
- A large proportion of respondents didn't know or wasn't sure of the campaign message, but of the messages reported the most frequent was to be more physically active.
- Slightly more respondents at follow-up (36.4%; n = 31) reported making any changes since seeing or hearing the messages compared to baseline (30.6%; n = 19)

In summary, this campaign is only one component of comprehensive efforts designed to maintain and improve health and cannot be easily isolated from other efforts. In addition, there are varying levels and uses of the campaign materials depending on the number of organizations and communities promoting the campaign messages. Nevertheless, promoting healthy behaviors among the population aged 45 and older may not only increase knowledge and change health attitudes, but may impact behaviors to reduce the risk of developing a chronic condition or related complications.

## **Introduction**

*Live Like Your Life Depends On It*, is a public health education campaign by the Live Well Message Alliance that promotes positive health action among Missourians 45 years of age and older. The Live Well Message Alliance is comprised of community, regional, and statewide partners that have united public education efforts by communicating consistent compelling health messages, addressing complacency barriers, and increasing the confidence and self-efficacy of Missourians to make healthy choices. The primary messages of the campaign are to eat smart, be physically active, avoid tobacco products, maintain a healthy weight, obtain recommended health screenings, and disease management for persons with an existing chronic condition. The campaign launched in the fall of 2007 with enhanced roll-out in the Kansas City area. This report summarizes the findings of the baseline and follow-up campaign evaluation surveys.

## **Methodology**

The baseline and follow-up questionnaire was comprised of selected standard chronic disease and risk factor modules from the Behavioral Risk Factor Surveillance System (BRFSS), a national health telephone survey, and campaign-specific evaluation questions. The campaign evaluation was reviewed by the Institutional Review Board at the Missouri Department of Health and Senior Services and determined to be exempt. Baseline interviews were completed November 12, 2007 to January 2, 2008 with the follow-up interviews completed August 6, 2008 to November 15, 2008.

Baseline information was collected using random-digit dialed telephone interviews within two targeted areas of the state, the Kansas City Metropolitan Region (KCMR) consisting of seven counties (i.e., Cass, Clay, Clinton, Jackson, Lafayette, Platte and Ray) and the rest of Missouri. Adults 45 years of age and older were sampled using a simple random sample of residential telephone numbers from each of the two targeted areas. The random digit sampling approach reduces response bias and provides representation of both listed and unlisted numbers (including not-yet-listed).

The follow-up consisted of: (1) a new cross-sectional simple random sample of residential telephone numbers from each of the two targeted areas; and (2) a longitudinal sample of adults participating in the baseline survey who agreed to be re-contacted in each of the targeted areas.

At least 15 attempts were made to complete an interview at every sampled residential telephone number. Data were analyzed utilizing SPSS 16.0 (Statistical Package for the Social Sciences, Chicago, IL) and SAS 9.0 (originally Statistical Analysis System, Cary, NC) software. Descriptive statistics were calculated, including response choice frequencies and associated percentages of responses. Prevalence estimates and 95 percent confidence intervals (CIs) for the evaluation indicators were calculated. Baseline and follow-up indicators were compared utilizing the confidence intervals.

## Results

At baseline, a total of 1,042 interviews were completed (n = 494 KCMR, n = 542 Rest of Missouri with the county variable for classification missing for six records). In the follow-up, there were a total of 1,023 respondents of which 506 were the new sample (n = 240 KCMR and n = 255 Rest of Missouri with the county variable for classification missing from 11 records) and 517 were in the re-contacted sample (n = 245 KCMR and n = 259 Rest of Missouri with the county variable for classification missing from 13 records). Descriptions of the samples by basic demographics are presented along with the findings of the survey by topic areas. Results are presented for each of the two target areas: KCMR and the Rest of Missouri by new and re-contacted samples.

### **Kansas City Metropolitan Region** *Baseline and New Sample*

#### Demographics

As shown in Table 1, the baseline and new KCMR survey samples were similar based on age, gender, education, race/ethnicity, rural and urban residence location and household income. Age was relatively evenly distributed across the three age groups (45-54, 55-64, and 65 and older) with slightly more females than males in both samples. The majority of respondents were white and African-American, with Hispanics representing about two percent of each sample. The majority of each sample had a high school or higher education and resided in the urban area. Less than 10 percent of each sample had household incomes less than \$15,000.

#### General Health Status

About one in five respondents of each sample (23.5% baseline v 20.9% follow-up) perceived their general health status as fair or poor, but less than 10 percent of each sample expressed a lack of satisfaction with life (Table 2). Greater than 90 percent of respondents from each sample had some type of health coverage. Private or employer insurance (approximately 60% from each sample) followed by Medicare (slightly more than one-fourth from each sample) was used to pay for most medical care (Figure 1).

#### Behavioral Risk Factors and Preventive Practices

*Lose Weight and Physical Activity:* Slightly more than 40 percent in each sample reported trying to lose weight (Table 2). Although an increased proportion of respondents reported physical inactivity in the follow-up sample (26.7%) compared to baseline (19.4%), this increase was not significant. However, the majority of respondents in each sample reported engaging in moderate physical activity.

*Smoking and Smoking Cessation:* Although not significant, there was a slightly higher prevalence of current cigarette smokers in the follow-up sample (19.6%) compared to baseline (18.0%). However, more of the respondents in the baseline sample (53.9%) had quit smoking for at least one day in the past 12 months compared to the follow-up sample (48.9%); but this difference was not significant.

**Table 1. Characteristics of the survey population, Kansas City Metropolitan Region, baseline and follow-up**  
*Kansas City Metropolitan Region*

<i>Demographics</i>	<i>Baseline (n = 494)</i>		<i>Follow-up (n = 240)</i>	
	<i>Percentage</i>	<i>95% CI</i>	<i>Percentage</i>	<i>95% CI</i>
<b>Age</b>				
45 - 54	34.0	29.8 - 38.2	32.9	26.9 - 38.9
55 - 64	27.7	23.8 - 31.7	30.8	24.9 - 36.7
> 65	38.3	34.0 - 42.6	36.3	30.2 - 42.5
<b>Gender</b>				
Male	45.3	40.9 - 49.7	45.4	39.2 - 51.7
Female	54.7	50.3 - 59.1	54.6	48.3 - 60.9
<b>Education</b>				
Less than high school	5.9	3.8 - 7.9	4.6	1.9 - 7.2
High school or GED	31.8	28.6 - 35.9	32.5	26.6 - 38.4
Attended college or technical school (1 - 3 years)	29.5	25.5 - 33.6	29.2	23.4 - 34.9
College graduate ( $\geq 4$ years)	32.8	28.6 - 37.0	33.8	27.8 - 39.7
<b>Race/Ethnicity</b>				
White, non-Hispanic	85.9	82.8 - 89.0	85.7	81.1 - 90.2
Black / African American, non- Hispanic	8.4	5.9 - 10.8	12.6	8.3 - 16.9
Other (Asian, Native Hawaiian, American Indian or Alaska Native), non -Hispanic	3.5	1.8 - 5.1	1.7	0.05 - 3.4
Hispanic	2.2	0.9 - 3.6	2.1	0.3 - 3.9
<b>Residence Location</b>				
Farm or rural area	13.1	10.0 - 16.1	11.7	7.6 - 15.8
Small or medium town (10,000 < 40,000 pop)	23.6	19.7 - 27.4	26.0	20.3 - 31.6
Suburb or urban area ( $\geq 40,000$ pop)	63.4	59.0 - 67.7	62.3	56.1 - 68.6
<b>Household Income</b>				
Less than 15,000	9.1	6.3 - 11.8	8.3	4.5 - 12.0
15,000 < 25,000	18.6	14.9 - 22.3	11.7	7.3 - 16.0
25,000 < 35,000	12.6	9.4 - 15.7	16.0	11.0 - 21.0
35,000 < 50,000	17.2	13.6 - 20.8	18.4	13.2 - 23.8
$\geq 50,000$	42.6	37.9 - 47.3	45.6	38.8 - 52.4

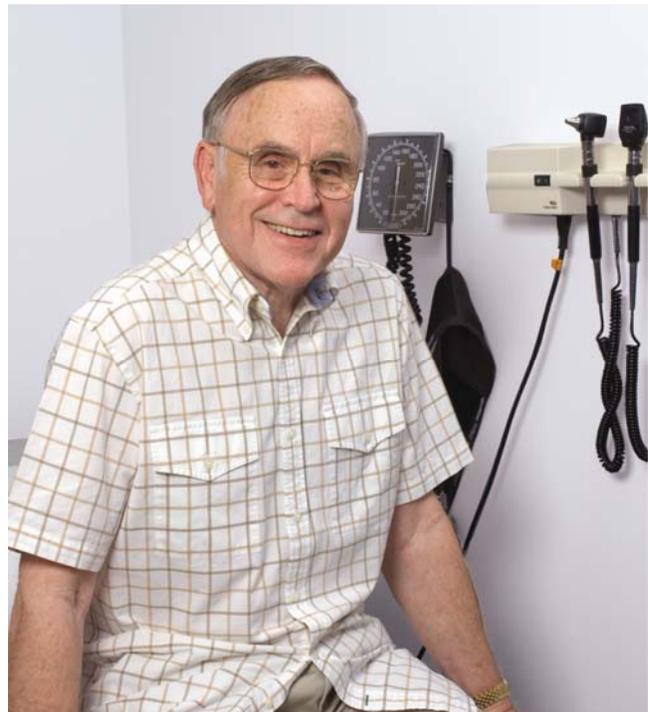
Call 9-1-1: Although not reaching statistical significance, a greater proportion of respondent's in the follow-up sample (87.0%) compared to the baseline (81.2%) said they would call 9-1-1 first if they thought someone was having a heart attack or stroke. This represented eight of every 10 respondents in each sample.

### Disease and Conditions

More than 60 percent of respondents in each sample were overweight or obese, and almost half in the baseline and new follow-up samples reported having high blood pressure (47.6 % v. 52.1%) or high cholesterol (50.0% v. 57.3%). The leading existing chronic diseases among the baseline and new follow-up samples, respectively, included: arthritis (46.6% v. 48.1%), diabetes (19.6% v. 13.8%), and a previous diagnosis of cancer (14.2% v. 11.7%) followed by previous heart attack (9.5% v. 5.4%) and current asthma (8.9% v 10.0%). Slightly more respondents reported a previous stroke in the baseline sample (6.7%) than in the follow-up sample (5.4%), but this was not a significant difference.

### Screening and Management Practices

A large proportion of the respondents from each sample had a routine checkup in the past 2 years (85.6% baseline v. 85.8% follow-up). Three out of every four women in each sample (78.5% v. 75.6%) had their mammography in the past 2 years. To a less extent, respondents aged 50 and older had completed sigmoidoscopy or colonoscopy in the past 10 years (61.6% v. 59.2%), respectively. Although not statistically significant, of the respondents reporting physician diagnosed diabetes, a greater proportion at baseline compared to the new follow-up sample (55.6% v. 39.4%) reported A1C blood glucose testing three or more times during the past 12 months (Table 2).



**Table 2. Prevalence of general health status, chronic disease, behavioral risk factors and preventive practices among adults 45 and older, Kansas City Metropolitan Region, baseline and follow-up**

<i>Kansas City Metropolitan Region</i>				
	<i>Baseline (n = 494)</i>		<i>Follow-up (n =240)</i>	
	<i>2007</i>		<i>2008</i>	
	<i>Percentage</i>	<i>95% CI</i>	<i>Percentage</i>	<i>95% CI</i>
<b>General Health Status</b>				
Health status (fair or poor)	23.5	19.7 - 27.2	20.9	15.7 - 26.0
Life satisfaction (dissatisfied or very dissatisfied)	9.3	6.7 - 11.9	9.6	5.9 - 13.4
No health coverage	7.9	5.5 - 10.3	6.2	3.2 - 9.3
<b>Behavioral Risk Factor</b>				
Physical inactivity	19.4	15.9 - 22.9	26.7	21.1 - 32.3
Current smoker	18.0	14.6 - 21.4	19.6	14.6 - 24.6
<b>Disease and Condition</b>				
Overweight (BMI 25 - 29.9)	36.6	32.2 - 41.0	33.5	27.2 - 39.8
Obese (BMI $\geq$ 30)	30.4	26.2 - 34.6	33.5	27.2 - 39.8
High blood pressure	47.6	43.2 - 52.0	52.1	45.8 - 58.4
High cholesterol	50.0	45.6 - 54.4	57.3	50.7 - 63.8
Arthritis	46.6	42.1 - 51.0	48.1	41.8 - 54.5
Current Asthma	8.9	6.4 - 11.4	10.0	6.2 - 13.8
Diabetes	19.6	16.1 - 23.2	13.8	9.4 - 18.1
Previous diagnosis cancer	14.2	11.1 - 17.3	11.7	7.6 - 15.8
Previous heart attack	9.5	6.9 - 12.1	5.4	2.6 - 8.3
Previous angina or coronary heart disease	8.7	6.2 - 11.2	4.6	2.0 - 7.3
Previous stroke†	6.7	4.5 - 8.9	5.4	2.6 - 8.3
<b>Preventive Measure</b>				
Trying to lose weight	42.1	37.7 - 46.5	40.1	33.8 - 46.3
Engaging in moderate physical activity	80.6	77.1 - 84.1	82.4	77.6 - 87.3
Smoking cessation (1 day or longer within past 12 months)† †	53.9	43.4 - 64.5	48.9	34.7 - 63.2
Would call 9-1-1 first if thought someone was having a heart attack or stroke	81.2	77.7 - 84.6	87.0	82.8 - 91.3
<b>Screening and Management Practice</b>				
Routine checkup (past 2 years)	85.6	82.5 - 88.7	86.2	81.8 - 90.6
Mammogram within past 2 years†††	78.5	73.6 - 83.4	78.0	70.7 - 85.2
Flexible sigmoidoscopy or colonoscopy in the past 10 years††††	61.6	56.9 - 66.4	59.2	52.3 - 66.1
Individuals with diabetes having A1C three or more times in past 12 months	55.6	45.6 - 65.7	39.4	22.7 - 56.1

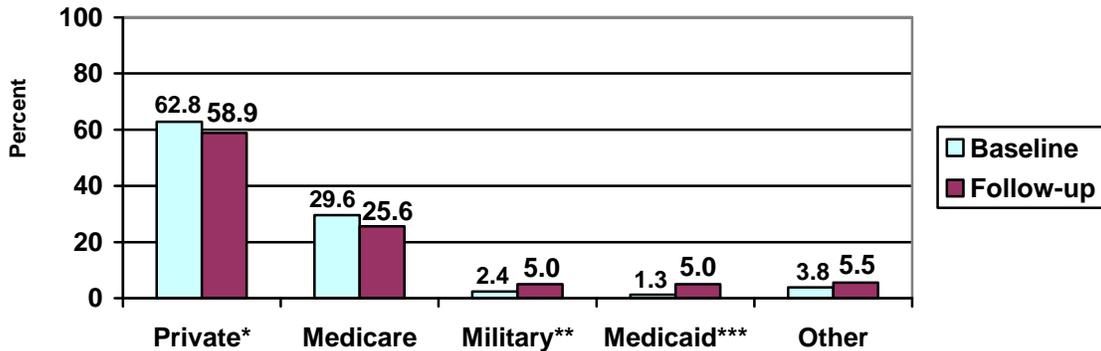
†The prevalence of stroke as well as other chronic conditions are likely underestimated because nursing home residents and others too ill to respond to a telephone interview are excluded.

††Respondents current smokers.

†††Female respondents, 45 years of age and older.

††††Male and female respondents 50 years of age and older.

**Figure 1. Health care coverage used to pay for most medical care, Kansas City Metropolitan Region, baseline 2007 and follow-up 2008**



\*Private or employer offered health insurance  
 \*\*Military, CHAMPUS, TriCare or Veteran’s Administration  
 \*\*\*Medicaid, medical assistance, or MC+

Campaign Evaluation

Campaign Awareness: Slightly less follow-up respondents (21.4%) compared to the baseline sample (27.1%) reported ever seeing or hearing the *Live Like Your Life Depends On It* campaign in KCMR (Table 3); however, this difference was not significant. The campaign was seen or heard slightly more by individuals aged 55-64 years, with a high school education or less, household incomes less than \$35,000 and women; but these differences were not significantly higher than the other groups (Table 4). As shown in Table 3, the most frequent reported source for seeing or hearing the campaign was television, followed by newspaper. A greater proportion of the sample at baseline liked what they saw or heard in the *Live Like Your Life Depends On It* campaign (59.7%) versus respondents from the follow-up (42.9%), but this difference was not statistically significant.

Campaign Impact: As shown in Table 3, the main campaign messages reported were eat healthy and be more physically active. The prevalence of respondents making any changes such as smoking cessation, food selection, physical activity, or disease prevention since seeing or hearing the campaign was similar at baseline and follow-up (25.4% [n = 34] v. 28.6% [n = 14]). As shown in Table 5, individuals who made changes since hearing the campaign in both samples tended to be in the younger age group (45-54), female, have lower education attainment and household incomes less than \$35,000.

**Table 3. Live Like Your Life Depends On It campaign awareness and impact, Kansas City Metropolitan Region, baseline and follow-up**

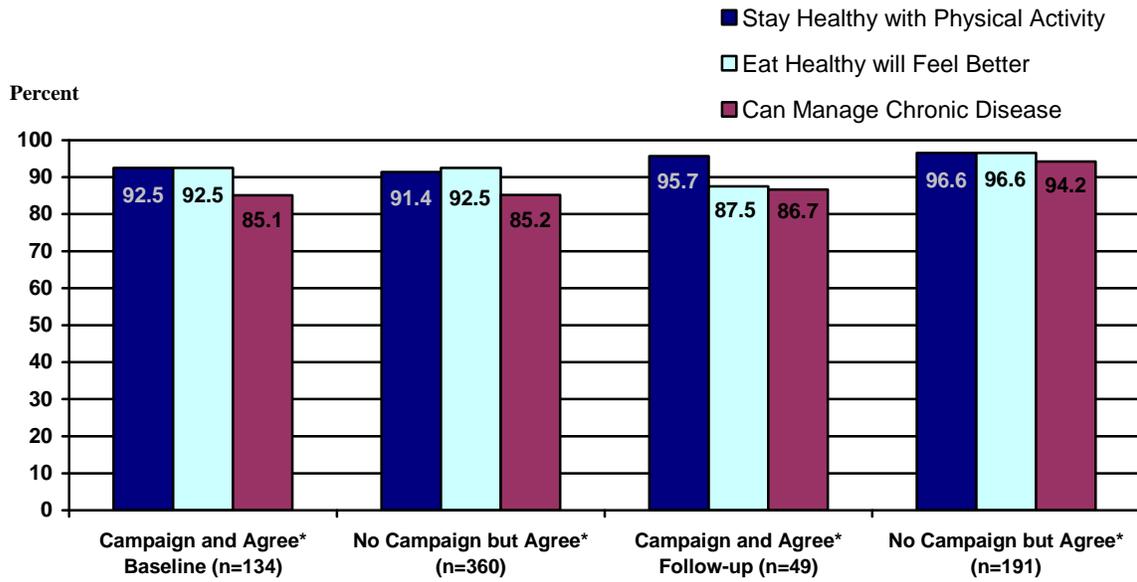
<i>Kansas City Metropolitan Region</i>				
	<i>Baseline (N = 494)</i>		<i>Follow-up (N = 240)</i>	
	<i>2007</i>		<i>2008</i>	
	<i>Percentage</i>	<i>95% CI</i>	<i>Percentage</i>	<i>95% CI</i>
<b>Campaign Awareness and Impact</b>				
Ever seen or heard campaign	27.1	23.1 - 31.1	21.4	16.1 - 26.7
Made changes since hearing message‡	25.4	17.9 - 32.8	28.6	15.9 - 41.2
Liked what saw or heard in campaign‡	59.7	51.3 - 68.1	42.9	29.0 - 56.7
<b>Where Campaign Seen or Heard‡</b>				
• Television	29.9	22.0 - 37.7	40.8	27.1 - 54.6
• Newspaper	6.7	2.4 - 11.0	12.2	3.1 - 21.4
• Radio	6.0	1.9 - 10.0	2.0	0.0 - 6.0
• Website	1.5	0.0 - 3.6	2.0	0.0 - 6.0
• Health care setting	2.2	0.0 - 4.8	6.1	0.0 - 12.8
• Workplace	0.7	0.0 - 2.2	0.0	0.0 - 0.0
• Sporting event	0.0	0.0 - 0.0	0.0	0.0 - 0.0
• Printed materials	5.2	1.4 - 9.0	4.1	0.0 - 9.6
• Other	7.5	3.0 - 11.9	6.1	0.0 - 12.8
<b>Main Messages Received‡</b>				
• Eat smart / healthy eating	17.2	10.7 - 23.6	16.3	6.0 - 26.7
• Move more / more physical activity / exercise	17.9	11.3 - 24.5	8.2	0.5 - 15.8
• Be tobacco free / don't smoke	6.0	1.9 - 10.0	2.0	0.0 - 6.0
• Get screenings / checkups	1.5	0.0 - 3.6	4.1	0.0 - 9.6
• Manage existing chronic disease	3.0	0.1 - 5.9	0.0	0.0 - 0.0
• Other	17.9	11.3 - 24.5	16.3	6.0 - 26.7
<b>Health Beliefs</b>				
Will stay healthy with regular physical activity	91.7	89.3 - 94.1	95.0	92.2 - 97.8
Will feel better if eating healthy	92.5	90.2 - 94.8	94.2	91.2 - 97.1
Chronic disease can be well managed with medication and following doctor's advice	85.2	82.1 - 88.4	87.1	82.8 - 91.3

‡ Respondents who saw or heard the campaign, Baseline n = 134 and Follow-up n = 49.

### Health Beliefs

As shown in Table 3, over 90 percent of the respondents from each sample agreed or strongly agreed that they would stay healthy with regular physical activity and feel better if eating healthy. Slightly less, but still a large proportion (over 85.0% of both samples) agreed or strongly agreed that chronic disease can be well managed with medication and following a doctor's advice. As shown in Figure 2, there were no significant differences in these three health beliefs between respondents seeing or hearing the campaign and those who did not.

**Figure 2. Comparison of health beliefs among adults seeing or hearing campaign and adults who did not, Kansas City Metropolitan Region, Baseline 2007 and Follow-up 2008**



\*Responses include agree and strongly agree.



**Table 4. Ever Seen or Heard Campaign by demographics, Kansas City Metropolitan Region, baseline 2007 and Follow-up 2008**

<i>Kansas City Metropolitan Region</i>				
	<i>Baseline (N = 494)</i>		<i>Follow-up (N = 240)</i>	
	<i>2007</i>		<i>2008</i>	
	<i>Percentage</i>	<i>95% CI</i>	<i>Percentage</i>	<i>95% CI</i>
<b>Ever Seen or Heard Campaign</b>				
<b>Overall</b>	27.1	23.1 - 31.1	21.4	16.1 - 26.7
<b>Age</b>				
45 - 54	21.4	15.1 - 27.7	16.9	8.5 - 25.3
55 - 64	30.7	22.8 - 38.5	27.8	17.4 - 39.1
≥ 65	29.6	23.1 - 36.2	17.6	9.6 - 25.8
<b>Gender</b>				
Female	30.0	24.5 - 35.5	22.9	15.7 - 30.1
Male	23.7	18.1 - 29.3	17.4	10.3 - 24.6
<b>Education</b>				
High school, GED or less education	32.0	25.2- 38.9	27.0	17.8 - 36.2
Attended college or technical school (1 to 3 years)	30.1	22.6 - 37.6	20.0	10.6 - 29.4
College Graduate (≥ 4 years)	20.8	14.5 - 27.1	13.6	6.1 - 21.0
<b>Race/Ethnicity</b>				
White	27.1	22.9 - 31.4	21.1	16.1 - 27.9
Black / African American	26.8	12.7 - 41.0	13.8	1.4 - 28.2
Other (Asian, Native Hawaiian, American Indian or Alaska Native)	-	-	-	-
<b>Residence Location</b>				
Farm or rural area	32.3	20.3 - 44.2	11.1	0.0 - 23.0
Small or medium town (10,000 < 40,000 pop)	25.9	17.7 - 34.1	20.0	9.9 - 30.1
Suburb or urban area (≥ 40,000 pop)	26.2	21.2 - 31.2	21.5	14.8 - 28.2
<b>Household Income</b>				
Less than \$35,000	29.0	22.2 - 35.8	27.0	16.9 - 37.2
Greater or equal to \$35,000	27.3	21.8 - 32.8	15.2*	9.0 - 21.3

- Sample size too small to produce stable rate.

\*Significantly different than baseline.

**Table 5. Percent of adults who made changes since hearing campaign messages by demographics, Kansas City Metropolitan Region, baseline and follow-up**

<b>Kansas City Metropolitan Region</b>				
	<i>Baseline (n = 494) 2007</i>		<i>Follow-up (n = 240) 2008</i>	
	<i>Percentage</i>	<i>95% CI</i>	<i>Percentage</i>	<i>95% CI</i>
<b>Made Changes Since Hearing Messages</b>				
<b>Overall</b>	6.9	4.7 - 9.1	5.8	2.9 - 8.8
<b>Age</b>				
45 - 54	7.7	3.7 - 11.8	6.5	1.0 - 12.0
55 - 64	6.5	2.4 - 10.8	5.6	0.3 - 10.9
≥ 65	6.3	2.8 - 9.9	5.9	0.9 - 10.9
<b>Gender</b>				
Female	7.4	4.3 - 10.6	6.9	2.5 - 11.2
Male	6.3	3.1 - 9.4	4.6	0.7 - 8.5
<b>Education</b>				
High school, GED, or less education	9.7	5.5 - 14.0	10.1	3.9 - 16.4
Attended college or technical school (1 ≥ 3 years)	8.3	3.8 - 12.8	5.7	0.3 - 11.2
College graduate (≥ 4 years)	1.9	0.0 - 4.0	1.2	0.0 - 3.6
<b>Race/Ethnicity</b>				
White	6.0	3.7 - 8.2	5.5	2.4 - 8.7
Black / African American	12.2	1.7 - 22.7	3.4	0.0 - 10.1
Other (Asian, Native Hawaiian, American Indian or Alaska Native)	-	-	-	-
Hispanic	-	-	-	-
<b>Residence Location</b>				
Farm or rural area	6.5	0.2 - 12.7	0.0*	0.0 - 0.0
Small or medium town (< 40,000 pop)	5.4	1.1 - 9.6	5.0	0.0 - 10.5
Suburb or urban area (≥ 40,000 pop)	7.3	4.4 - 10.3	6.9	2.8 - 11.1
<b>Household Income</b>				
Less than \$35,000	11.0	6.3 - 15.6	10.8	3.7 - 17.1
≥ \$35,000	5.1	2.4 - 7.7	3.0	0.1 - 6.0

- Sample size too small to produce stable rate.

\*Significantly different than baseline.

**Rest of Missouri**  
*Baseline and New Sample*

**Demographics**

As shown in Table 6, the two survey samples were similar based on age, gender, race/ethnicity and educational attainment. Age was relatively evenly distributed across the three age groups with slightly more females than males in each sample. The majority of respondents were white (approximately 90.0%) with African-Americans slightly more than six percent and Hispanics representing about two percent of each sample. However, the samples differed in that there was a significantly higher proportion of individuals with household incomes less than \$15,000 in the Rest of Missouri baseline sample (20.9%) compared to the follow-up sample (12.7%), but a higher proportion of respondents with household incomes greater than \$50,000 in the follow-up.

**Table 6. Characteristics of the survey population, Rest of Missouri, baseline and follow-up**

<i>Demographics</i>	<i>Rest of Missouri</i>			
	<i>Baseline (n = 542)</i>		<i>Follow-up (n = 255)</i>	
	<i>2007</i>	<i>2008</i>	<i>2007</i>	<i>2008</i>
	<i>Percentage</i>	<i>95% CI</i>	<i>Percentage</i>	<i>95% CI</i>
<b>Age</b>				
45 - 54	31.6	27.7 - 35.5	31.9	26.2 - 37.6
55 - 64	31.8	27.8 - 35.7	29.5	23.9 - 35.1
≥ 65	36.7	32.6 - 40.7	38.6	32.6 - 44.6
<b>Gender</b>				
Male	45.6	41.4 - 49.8	47.8	41.7 - 54.0
Female	54.4	50.2 - 58.6	52.2	46.0 - 58.3
<b>Education</b>				
Less than high school	11.4	8.7 - 14.1	13.8	9.6 - 18.1
High school or GED	31.9	27.9 - 35.8	33.2	27.4 - 39.0
Attended college or technical school (1 - 3 years)	24.9	21.2 - 28.5	24.5	19.2 - 29.8
College graduate (≥ 4 years)	31.9	27.9 - 35.8	28.5	22.9 - 34.0
<b>Race/Ethnicity</b>				
White, non-Hispanic	89.9	87.3 - 92.4	91.4	87.9 - 94.9
Black / African American, non- Hispanic	6.1	4.0 - 8.1	6.5	3.4 - 9.6
Other (Asian, Native Hawaiian, American Indian or Alaska Native), non- Hispanic	2.0	0.8 - 3.2	2.0	0.3 - 3.8
Hispanic	2.0	0.8 - 3.2	1.6	0.04 - 3.1
<b>Residence Location</b>				
Farm or rural area	27.9	24.1 - 31.8	32.0	26.2 - 37.8
Small or medium town (10,000 < 40,000 pop)	38.3	34.1 - 42.5	32.8	26.9 - 38.6
Suburb or urban area (≥ 40,000 pop)	33.8	29.7 - 37.8	35.2	29.3 - 41.2
<b>Household Income</b>				
Less than 15,000	20.9	17.2 - 24.6	12.7*	8.3 - 17.1
15,000 < 25,000	14.9	11.6 - 18.1	22.6	17.1 - 28.1
25,000 < 35,000	15.7	12.4 - 19.1	10.9	6.8 - 15.0
35,000 < 50,000	37.1	32.7 - 41.5	18.6*	13.4 - 23.7
≥ 50,000	11.4	8.5 - 14.3	35.3*	29.0 - 41.6

\*Significantly different than baseline.

## General Health Status

About one-fourth of each sample (27.9% baseline v. 24.8% follow-up) perceived their general health status as fair or poor, but eight percent or less of each sample expressed a lack of satisfaction with life (Table 7). Approximately 92 percent of respondents from each sample had some type of health coverage. Private or employer insurance (slightly more than one-half of each sample) followed by Medicare (approximately one-third of each sample) was used to pay for most medical care (Figure 3).

## Behavioral Risk Factors and Preventive Practices

*Lose Weight and Physical Activity:* More than 40 percent in each sample reported trying to lose weight (Table 7). Although an increased proportion of respondents reported physical inactivity in the follow-up sample (25.1%) compared to baseline respondents (22.1%), this increase was not significant. Three of every four respondents in each sample reported engaging in moderate physical activity.

*Smoking and Smoking Cessation:* Although not significant, as shown in Table 7, there was a slightly higher prevalence of current cigarette smokers in the baseline sample (22.4%) compared to the follow-up sample (20.4%). More than one-third of the current smokers in each sample (38.2% baseline v. 38.5% follow-up) reported they had quit smoking for at least one day in the past 12 months.

*Call 9-1-1:* Although not reaching statistical significance, a slightly greater proportion of respondent's in the follow-up sample (81.4%) compared to the baseline sample (77.6%) said they would call 9-1-1 first if they thought someone was having a heart attack or stroke (Table 7). This represented 8 of every 10 respondents in each sample.

## Disease and Conditions

As shown in Table 7, more than 60 percent of respondents in each sample were overweight or obese, and almost one-half in the baseline and new follow-up samples reported having high blood pressure (48.5% v. 50.2%) or high cholesterol (44.7% v. 52.9%). The leading existing chronic diseases among the baseline and new follow-up samples, respectively, included: arthritis (46.0 v. 54.7), diabetes (17.3% each sample), and a previous diagnosis of cancer (11.9% v. 14.9%) followed by previous heart attack (9.9% v. 13.3%) and current asthma (9.5% v. 9.4%). Slightly more respondents reported a previous stroke in the baseline sample (7.1%) than in the follow-up sample (5.5%), but this was not a significant difference.

## Screening and Management Practices

A large proportion of the respondents from each sample reported a routine checkup in the past 2 years (86.3% baseline v. 89.4% follow-up) (Table 7). Three out of every four women in each sample (75.2% v. 76.5%) had their mammography in the past 2 years. To a less extent, respondents aged 50 and older had completed sigmoidoscopy or colonoscopy in the past 10 years (56.5% v. 64.9%), respectively. Although not statistically significant, of the respondents reporting physician diagnosed diabetes, a greater proportion at baseline compared to the new

follow-up sample (55.8% v. 47.7%) reported A1C blood glucose testing three or more times during the past 12 months (Table 7).

**Table 7. Prevalence of general health status, chronic disease, behavioral risk factors and preventive practices among adults 45 and older, Remainder of Missouri, baseline and follow-up**

	<i>Remainder of Missouri</i>			
	<i>Baseline (n = 542)</i>		<i>Follow-up (n = 255)</i>	
	<i>2007</i>	<i>2008</i>	<i>2007</i>	<i>2008</i>
	<i>Percentage</i>	<i>95% CI</i>	<i>Percentage</i>	<i>95% CI</i>
<b>General Health Status</b>				
Health status (fair or poor)	27.9	24.2 - 31.7	24.8	19.5 - 30.1
Life satisfaction (dissatisfied or very dissatisfied)	6.9	4.8 - 9.1	8.0	4.6 - 11.3
No health coverage	8.3	6.1 - 10.7	7.8	4.5 - 11.1
<b>Behavioral Risk Factor</b>				
Physical inactivity	22.1	18.6 - 25.6	25.1	19.8 - 30.4
Current smoker	22.4	18.9 - 25.9	20.4	15.4 - 25.3
<b>Disease and Condition</b>				
Overweight (BMI 25 – 29.9)	41.2	37.0 - 45.4	40.5	34.3 - 46.8
Obese (BMI $\geq$ 30)	28.2	24.3 - 32.0	30.0	24.1 - 35.8
High blood pressure	48.5	44.3 - 52.7	50.2	44.1 - 56.3
High cholesterol	44.7	40.5 - 48.9	52.9	46.6 - 59.2
Arthritis	46.0	41.8 - 50.2	54.7	48.6 - 60.8
Current Asthma	9.5	7.0 - 12.0	9.4	5.8 - 13.0
Diabetes	17.3	14.2 - 20.5	17.3	12.6 - 21.9
Previous diagnosis cancer	11.9	9.1 - 14.6	14.9	10.5 - 19.3
Previous heart attack	9.9	7.4 - 12.4	13.3	9.2 - 17.5
Previous angina or coronary heart disease	9.5	7.0 - 12.0	12.0	7.9 - 16.0
Previous stroke <sup>†</sup>	7.1	5.0 - 9.3	5.5	2.7 - 8.3
<b>Preventive Measure</b>				
Trying to lose weight	41.6	37.5 - 45.7	48.2	42.1 - 54.4
Engaging in moderate physical activity	78.0	74.4 - 81.4	84.2	79.7 - 88.7
Smoking cessation (1 day or longer within past 12 months) <sup>† †</sup>	38.2	29.5 - 46.9	38.5	25.2 - 51.7
Would call 9-1-1 first if thought someone was having a heart attack or stroke	77.6	74.1 - 81.1	81.4	76.6 - 86.2
<b>Screening and Management Practice</b>				
Routine checkup (past 2 years)	86.3	83.4 - 89.2	89.4	85.6 - 93.2
Mammogram within past 2 years <sup>†††</sup>	75.2	72.2 - 80.1	76.5	69.3 - 83.8
Flexible sigmoidoscopy or colonoscopy in the past 10 years <sup>††††</sup>	56.5	52.0 - 61.0	64.9	58.4 - 71.4
Individuals with diabetes having A1C three or more times in past 12 months	55.8	45.6 - 66.0	47.7	33.0 - 62.5

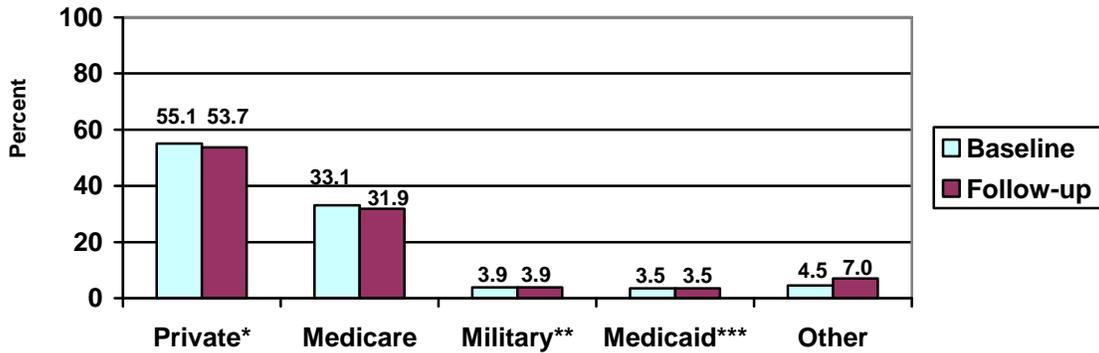
<sup>†</sup>The prevalence of stroke as well as other chronic conditions are likely underestimated because nursing home residents and others too ill to respond to a telephone interview are excluded.

<sup>††</sup>Respondents current smokers.

<sup>†††</sup>Female respondents, 45 years of age and older.

<sup>††††</sup>Male and female respondents 50 years of age and older.

**Figure 3. Health care coverage used to pay for most medical care, Remainder of Missouri, baseline 2007 and follow-up 2008**



\*Private or employer offered health insurance

\*\*Military, CHAMPUS, TriCare or Veteran's Administration

\*\*\*Medicaid, medical assistance, or MC+

### Campaign Evaluation

***Campaign Awareness:*** Slightly more follow-up respondents (28.8%) compared to the baseline sample (23.7%) reported ever seeing or hearing the *Live Like Your Life Depends On It* campaign in the Remainder of Missouri, but this was not a significant difference (Table 8). The campaign was seen or heard slightly more by individuals with a high school education or some college or technical school; women; and residents of farm, rural, or small to medium towns; but these differences were not significant (Table 9). The most frequent reported source for seeing or hearing the campaign was television (Table 8). A greater proportion of the sample at baseline liked what they saw or heard in the *Live Like Your Life Depends On It* campaign (73.1%) versus respondents from the follow-up (55.7%), but this difference was not statistically significant (Table 8).

***Campaign Impact:*** The main campaign messages reported were eat healthy and be more physically active (Table 8). Although not statistically significant, a larger proportion of respondents reported making a change after seeing or hearing the campaign at baseline (33.8%, n = 44) than at follow-up (18.2%, n = 12) (Table 8). Individuals who made changes since hearing the campaign in both samples tended to be in the younger age group (45-54), female, and have some college or less education (Table 10).

**Table 8. Live Like Your Life Depends On It campaign awareness and impact, Rest of Missouri, baseline and follow-up**

<i>Rest of Missouri</i>				
	<i>Baseline (n = 542)</i>		<i>Follow-up (n = 255)</i>	
	<i>2007</i>		<i>2008</i>	
	<i>Percentage</i>	<i>95% CI</i>	<i>Percentage</i>	<i>95% CI</i>
<b>Campaign Awareness and Impact</b>				
Ever seen or heard campaign	23.7	20.1 - 27.3	28.8	23.1 - 34.5
Made changes since hearing message‡	33.8	25.6 - 42.1	18.2	8.9 - 27.5
Liked what saw or heard in campaign‡	73.1	65.4 - 80.8	55.7	44.1 - 67.4
<b>Where Campaign Seen or Heard‡</b>				
• Television	36.9	28.5 - 45.3	32.9	21.9 - 43.9
• Newspaper	6.2	2.0 - 10.3	1.4	0.0 - 4.2
• Radio	6.9	2.5 - 11.3	4.3	0.0 - 9.0
• Website	1.5	0.0 - 3.6	1.4	0.0 - 4.2
• Health care setting	1.5	0.0 - 3.6	5.7	0.3 - 11.2
• Workplace	2.3	0.0 - 4.9	2.9	0.0 - 6.8
• Sporting event	0.8	0.0 - 2.3	0.0	0.0 - 0.0
• Printed materials	6.2	2.0 - 10.3	2.9	0.0 - 6.8
• Other	0.0	0.0 - 0.0	7.1*	1.1 - 13.2
<b>Main Messages Received‡</b>				
• Eat smart / healthy eating	21.5	14.4 - 28.7	21.4	11.8 - 31.0
• Move more / more physical activity / exercise	25.4	17.8 - 33.0	20.0	10.6 - 29.4
• Be tobacco free / don't smoke	2.3	0.0 - 4.9	2.9	0.0 - 6.8
• Get screenings / checkups	3.1	0.1 - 6.1	0.0*	0.0 - 0.0
• Manage existing chronic disease	3.1	0.1 - 6.1	0.0*	0.0 - 0.0
• Other	16.9	10.4 - 23.5	15.7	7.2 - 24.2
<b>Health Beliefs</b>				
Will stay healthy with regular physical activity	90.7	88.3 - 93.1	94.1	91.2 - 97.0
Will feel better if eating healthy	94.0	92.0 - 96.0	90.6	87.0 - 94.2
Chronic disease can be well managed with medication and following doctor's advice	87.0	84.2 - 89.9	87.8	83.8 - 91.9

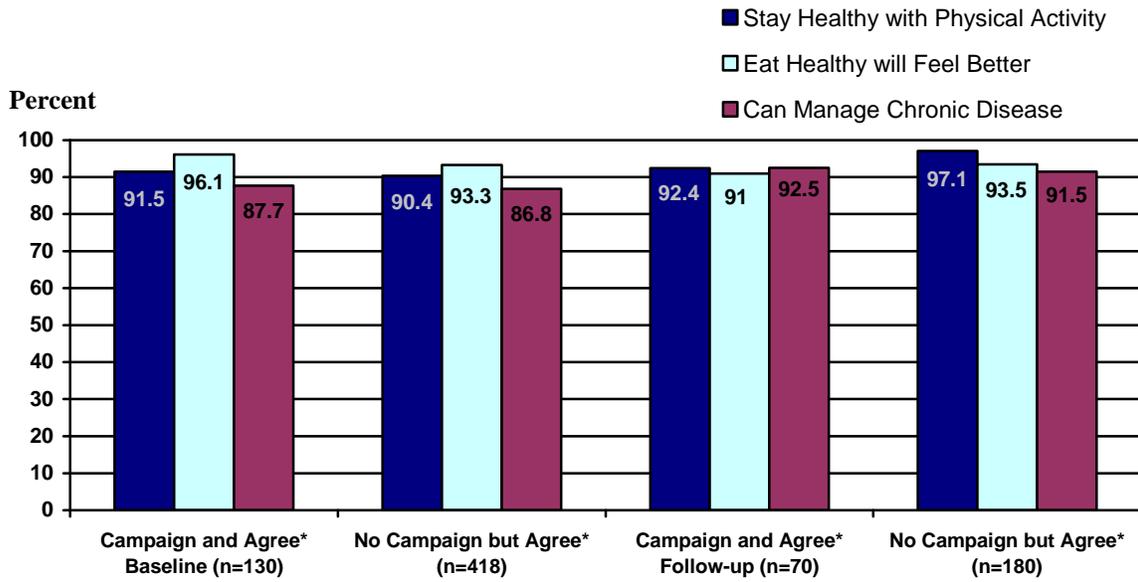
‡Respondents who saw or heard the campaign, Baseline n = 130 and Follow-up n = 70.

\*Significantly different than baseline.

Health Beliefs

As shown in Table 8, more than 90 percent of the respondents from each sample agreed or strongly agreed that they would stay healthy with regular physical activity and feel better if eating healthy. Slightly less, but still a large proportion (87.0% of each sample) agreed or strongly agreed that a chronic disease can be well managed with medication and following a doctor’s advice. As shown in Figure 4, there was a great similarity in the proportion of respondents agreeing or strongly agreeing in the three health beliefs between adults seeing or hearing the campaign and those who did not.

**Figure 4. Comparison of health beliefs among adults seeing or hearing the campaign and adults who did not, Rest of Missouri, baseline 2007 and follow-up 2008**



\*Includes agree and strongly agree responses.



**Table 9. Ever seen or heard campaign by demographics, Rest of Missouri, baseline and follow-up**

<i>Rest of Missouri</i>				
	<i>Baseline (n = 542)</i>		<i>Follow-up (n =255)</i>	
	<i>2007</i>		<i>2008</i>	
	<i>Percentage</i>	<i>95% CI</i>	<i>Percentage</i>	<i>95% CI</i>
<b>Ever Seen or Heard Campaign</b>				
<b>Overall</b>	23.7	20.1 - 27.3	28.8	23.1 - 34.5
<b>Age</b>				
45 - 54	23.1	16.8 - 29.5	27.2	17.5 - 36.9
55 - 64	25.9	19.3 - 32.4	26.7	16.7 - 36.7
≥ 65	22.4	16.6 - 28.2	27.6	18.7 - 36.4
<b>Gender</b>				
Female	24.2	19.3 - 29.0	31.6	23.7 - 39.5
Male	23.2	17.9 - 28.5	23.0	15.5 - 30.4
<b>Education</b>				
Less than high school	37.9	19.1 - 56.7	20.0	6.8 - 33.3
High school or GED	29.5	22.3 - 36.7	34.5	24.4 - 44.7
Attended college or technical school (1 - 3 years)	29.7	22.1 - 37.2	33.9	22.1 - 45.7
College graduate (≥ 4 years)	20.5	14.2 - 26.8	16.7	8.1 - 25.3
<b>Race/Ethnicity</b>				
White	24.4	20.6 - 28.2	28.1	22.2 - 33.9
Black / African American	18.2	4.3 - 32.1	25.0	3.8 - 46.2
Other (Asian, Native Hawaiian, American Indian or Alaska Native)	-	-	-	-
Hispanic	-	-	-	-
<b>Residence Location</b>				
Farm or rural area	27.7	20.4 - 35.0	31.6	21.4 - 41.9
Small or medium town (< 40,000 pop)	23.2	17.3 - 29.0	32.1	21.9 - 42.3
Suburb or urban area (≥ 40,000 pop)	21.2	15.2 - 27.3	20.7	12.2 - 29.2
<b>Household Income</b>				
Less than 15,000	28.3	15.8 - 40.8	32.1	14.8 - 49.4
15,000 < 25,000	32.0	22.5 - 41.4	34.0	20.8 - 47.1
25,000 < 35,000	18.8	9.4 - 28.3	33.3	14.5 - 52.2
35,000 < 50,000	27.4	16.9 - 37.9	29.3	15.3 - 43.2
≥ 50,000	22.1	15.8 - 28.4	19.2	10.5 - 28.0

- Sample size too small to produce stable rate.

**Table 10. Percent of adults who made changes since hearing campaign messages by demographics, Rest of Missouri, baseline and follow-up**

	<i>Rest of Missouri</i>			
	<i>Baseline (n = 542) 2007</i>		<i>Follow-up (n = 255) 2008</i>	
	<i>Percentage</i>	<i>95% CI</i>	<i>Percentage</i>	<i>95% CI</i>
<b>Made Changes Since Hearing Messages</b>				
<b>Overall</b>	8.1	5.8 - 10.4	4.7	2.1 - 7.3
<b>Age</b>				
45 - 54	11.0	6.3 - 15.7	6.2	0.9 - 11.4
55 - 64	8.6	4.4 - 12.8	5.3	0.3 - 10.4
≥ 65	5.0	1.9 - 8.0	3.1	0.0 - 6.5
<b>Gender</b>				
Female	8.7	5.5 - 11.9	6.0	2.0 - 10.1
Male	7.2	4.0 - 10.4	3.3	0.1 - 6.4
<b>Education</b>				
High school, GED, or less education	8.5	4.9 - 12.1	5.0	1.1 - 9.0
Attended college or technical school (1 ≥ 3 years)	8.1	3.5 - 12.8	8.1	1.3 - 14.8
College graduate (≥ 4 years)	6.9	3.2 - 10.7	1.4	0.0 - 4.1
<b>Race/Ethnicity</b>				
White	7.6	5.2 - 9.9	4.8	2.0 - 7.6
Black / African American	12.1	0.4 - 23.9	6.2	0.0 - 18.1
Other (Asian, Native Hawaiian, American Indian or Alaska Native)	-	-	-	-
Hispanic	-	-	-	-
<b>Residence Location</b>				
Farm or rural area	8.1	3.7 - 12.6	2.5	0.0 - 6.0
Small or medium town (< 40,000 pop)	7.0	3.4 - 10.4	7.4	1.7 - 13.1
Suburb or urban area (≥ 40,000 pop)	8.9	4.7 - 13.2	4.6	0.2 - 9.0
<b>Household Income</b>				
Less than \$35,000	9.1	5.3 - 12.9	4.9	0.7 - 9.1
≥ \$35,000	8.2	4.7 - 11.6	5.9	1.7 - 10.1

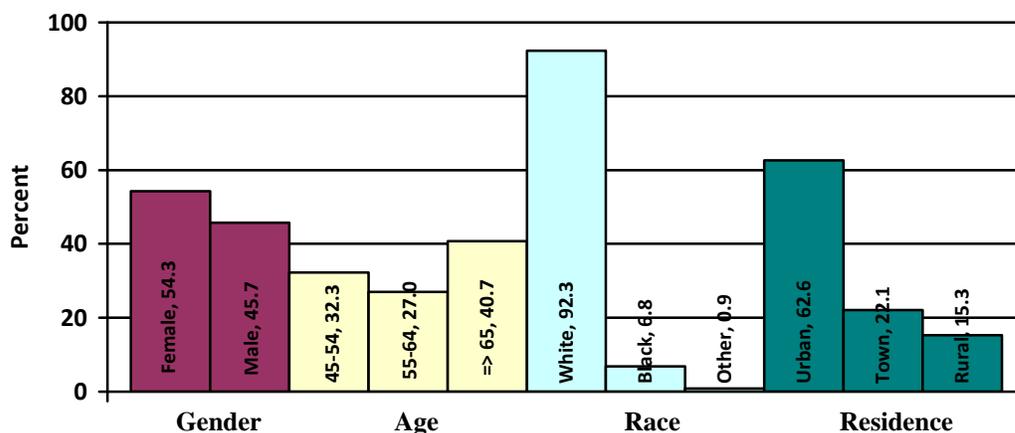
- Sample size too small to produce stable rate.

## Kansas City Metropolitan Region Baseline and Re-contacted Sample

### Demographics

As shown in Figure 5, the KCMR re-contacted sample consisted of more females than males, tended to be older, white, and resided in an urban area. Hispanics represented about 1.6 percent of the sample. The sample included a significantly higher proportion of individuals with some college or higher education and with household incomes of \$50,000 or more.

**Figure 5. Re-contacted sample by gender, age, race, and area of residence, KCMR, baseline 2007 and follow-up 2008 (N = 245)**



\*Town population ≤ 40,000 and not classified as rural or farm.

### General Health Status

There was little change in general health status in the KC re-contacted sample from baseline to the first follow-up survey with about one in five respondents (21.4% v 21.7%, respectively) perceived their general health status as fair or poor and only a small proportion (less than 10%) expressed a lack of satisfaction with life (Table 11). Greater than 90 percent of respondents continued to have some type of health coverage, primarily private or employer insurance (67.1% baseline v 63.7% follow-up) followed by Medicare (28.2% baseline and 31.8% follow-up) was used to pay for most medical care.

**Table 11. Prevalence of general health status, chronic disease, behavioral risk factors and preventive practices among re-contacted sample, Kansas City Metropolitan Region, baseline and follow-up**

<i>Kansas City Metro Region</i>				
	<i>Baseline (n = 245) 2007</i>		<i>Follow-up (n =245) 2008</i>	
	<i>Percentage</i>	<i>95% CI</i>	<i>Percentage</i>	<i>95% CI</i>
<b>General Health Status</b>				
Health status (fair or poor)	21.4	16.2 - 26.6	21.7	16.5 - 26.9
Life satisfaction (dissatisfied or very dissatisfied)	9.3	5.7 - 13.1	9.1	5.4 - 12.7
No health coverage	8.5	5.0 - 12.1	7.3	4.1 - 10.6
<b>Behavioral Risk Factor</b>				
Physical inactivity	29.4	23.6 - 35.1	24.5	19.1 - 29.9
Current smoker	18.4	13.5 - 23.3	21.3	16.1 - 26.5
<b>Disease and Condition</b>				
Overweight (BMI 25 - 29.9)	35.8	29.6 - 42.0	37.0	30.9 - 43.2
Obese (BMI $\geq$ 30)	31.0	25.0 - 37.0	30.6	24.8 - 36.5
High blood pressure	47.5	41.2 - 53.9	49.8	43.5 - 56.1
High cholesterol	56.2	49.8 - 62.6	60.8	54.4 - 67.1
Arthritis	48.6	42.3 - 54.9	50.6	44.3 - 56.9
Current Asthma	9.0	5.4 - 12.6	9.0	5.4 - 12.6
Diabetes	19.6	14.6 - 24.6	19.6	14.6 - 24.6
Previous diagnosis cancer	13.9	9.5 - 18.2	15.1	10.6 - 19.6
Previous heart attack	9.4	5.7 - 13.1	9.4	5.7 - 13.1
Previous angina or coronary heart disease	9.5	5.8 - 13.2	10.3	6.5 - 14.2
Previous stroke†	4.9	2.2 - 7.6	5.7	2.8 - 8.7
<b>Preventive Measure</b>				
Engaging in moderate physical activity	81.2	76.3 - 86.1	84.1	79.4 - 88.7
Smoking cessation (1 day or longer within past 12 months)† †	55.6	40.5 - 70.7	65.4	52.0 - 78.8
Would call 9-1-1 first if thought someone was having a heart attack or stroke	80.8	75.9 - 85.8	85.2	80.7 - 89.7
<b>Screening and Management Practice</b>				
Routine checkup (past 2 years)	87.2	83.0 - 91.4	88.3	84.2 - 92.4
Mammogram within past 2 years†††	80.5	73.7 - 87.2	83.6	77.2 - 90.0
Flexible sigmoidoscopy or colonoscopy in the past 10 years††††	64.0	57.3 - 70.7	61.6	54.9 - 68.4
Individuals with diabetes having A1C three or more times in past 12 months	54.6	39.8 - 69.3	61.4	47.0 - 75.8

†The prevalence of stroke as well as other chronic conditions are likely underestimated because nursing home residents and others too ill to respond to a telephone interview are excluded.

††Respondents current smokers.

†††Female respondents, 45 years of age and older.

††††Male and female respondents 50 years of age and older.

## Behavioral Risk Factors and Preventive Practices

Physical Activity: Fewer respondents reported physical inactivity at follow-up (24.5%) compared to baseline (29.4%); however, this decrease was not significant (Table 11). Three of every four respondents at baseline and follow-up reported engaging in moderate physical activity.

Smoking and Smoking Cessation: As shown in Table 11, there was a slightly higher reported prevalence of current cigarette smoking in the follow-up (21.3%) compared to baseline (18.4%). A higher proportion of current smokers reported that they had quit smoking for at least one day in the past 12 months at follow-up (65.4%) compared to baseline (55.6%).

Call 9-1-1: Although not reaching statistical significance, a slightly greater proportion of respondent's at follow-up (85.2%) compared to baseline (80.8%) said they would call 9-1-1 first if they thought someone was having a heart attack or stroke (Table 11).

## Disease and Conditions

As shown in Table 11, the proportion of respondents reporting several of the chronic diseases including asthma, diabetes, and previous heart attack was similar between baseline and follow-up. There was a slight increase, although not significant, in reporting of high blood pressure, high cholesterol, arthritis, previous diagnosis of cancer, previous angina, and previous stroke.

## Screening and Management Practices

A slightly large proportion of the respondents at follow-up (88.3%) than baseline (87.2%) reported a routine checkup in the past 2 years (Table 11). Approximately 8 out of every 10 women had their mammography in the past 2 years (80.5% baseline and 83.6% follow-up). However, only 6 of every 10 individuals age 50 and older reported completing a sigmoidoscopy or colonoscopy in the past 10 years (64.0% baseline v 61.6% follow-up), respectively.

## Campaign Evaluation

Campaign Awareness: A similar proportion of respondents at baseline (29.3%) and follow-up (30.6%) reported ever seeing or hearing the *Live Like Your Life Depends On It* campaign when re-contacted (Table 12). The most frequent reported source at baseline and follow-up for seeing or hearing the campaign was television; however, a substantial proportion of each sample did not know or wasn't sure where they had seen or heard the campaign (Table 12). A greater proportion of the sample at follow-up liked what they saw or heard in the *Live Like Your Life Depends On It* campaign (71.4%) versus at baseline (67.1%), but this difference was not statistically significant (Table 12).

Campaign Impact: The campaign message reported most was to be more physically active (Table 12). Slightly more respondents at follow-up (34.3%, n = 24) reported making any changes such as smoking cessation, food selection, physical activity, or disease prevention since seeing or hearing the messages compared to baseline (22.9%, n = 16) (Table 12).

**Table 12. Live Like Your Life Depends On It Campaign awareness and impact among re-contacted sample, Kansas City Metropolitan Region, baseline and follow-up**

	<i>Kansas City Metro Region</i>			
	<i>Baseline (N = 245)</i>		<i>Follow-up (N = 245)</i>	
	<i>2007</i>		<i>2008</i>	
	<i>Percentage</i>	<i>95% CI</i>	<i>Percentage</i>	<i>95% CI</i>
<b>Campaign Awareness and Impact</b>				
Ever seen or heard campaign	29.3	23.5 - 35.1	30.6	24.6 - 36.6
Made changes since hearing message‡	22.9	13.0 - 32.7	34.3	22.9 - 45.7
Liked what saw or heard in campaign‡	67.1	56.1 - 78.1	71.4	60.9 - 82.0
<b>Where Campaign Seen or Heard‡</b>				
• Television	20.0	10.4 - 29.6	38.6	27.2 - 50.0
• Newspaper	8.6	1.8 - 15.3	2.9	0.0 - 6.8
• Radio	4.2	0.0 - 9.1	7.1	1.1 - 13.2
• Website	0.0	0.0 - 0.0	2.9	0.0 - 6.8
• Health care setting	4.2	0.0 - 9.1	0.0	0.0 - 0.0
• Workplace	0.0	0.0 - 0.0	5.7*	0.3 - 11.2
• Sporting event	0.0	0.0 - 0.0	0.0	0.0 - 0.0
• Printed materials	7.1	1.0 - 13.3	2.9	0.0 - 6.8
• From previous interview	-	-	0.0	0.0 - 0.0
• Other	4.3	0.0 - 9.1	5.7	0.3 - 11.2
• Don't know / not sure	51.4	39.4 - 63.41	40.0	28.5 - 51.5
<b>Main Messages Received‡</b>				
• Eat smart / healthy eating	1.5	0.0 - 4.4	4.3	0.0 - 9.1
• Move more / more physical activity / exercise	16.2	7.2 - 25.2	31.4	20.3 - 42.6
• Be tobacco free / don't smoke	4.4	0.0 - 9.4	5.7	0.1 - 11.3
• Get screenings / checkups	1.5	0.0 - 4.4	0.0	0.0 - 0.0
• Manage existing chronic disease	4.4	0.0 - 9.4	0.0	0.0 - 0.0
• Other	18.6	8.4 - 26.9	15.7	7.0 - 24.5
• Don't know / not sure	54.4	42.3 - 66.6	42.9	31.0 - 54.7
<b>Health Beliefs</b>				
Will stay healthy with regular physical activity	94.2	91.2 - 97.1	96.3	93.9 - 98.7
Will feel better if eating healthy	95.0	92.3 - 97.8	97.9	96.1 - 99.7
Chronic disease can be well managed with medication and following doctor's advice	91.6	87.9 - 95.2	92.3	88.9 - 95.7

‡ Respondents who saw or heard the campaign, Baseline n = 70 and Follow-up n = 70.

### Health Beliefs

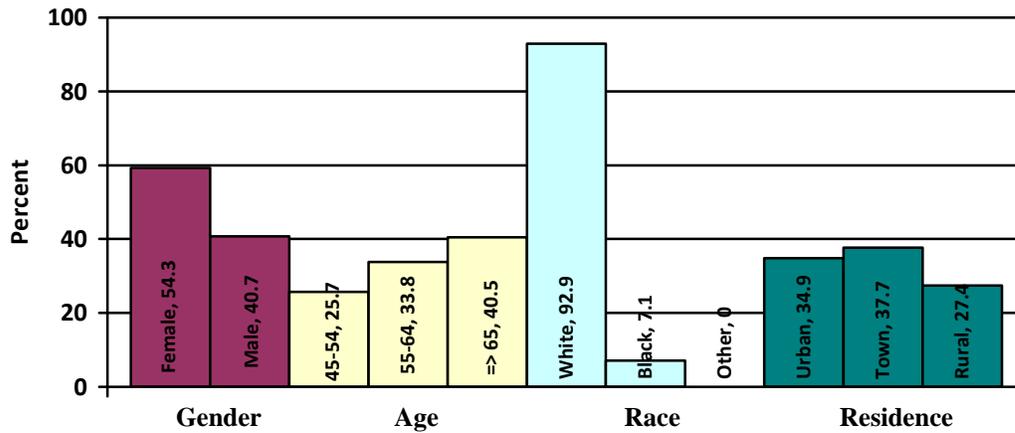
As shown in Table 12, more than 90 percent of the respondents at baseline and follow-up agreed or strongly agreed that they would stay healthy with regular physical activity, feel better if eating healthy and a chronic disease can be well managed with medication and following a doctor's advice.

## Rest of Missouri *Baseline and Re-contacted Sample*

### *Demographics*

As shown in Figure 6, the Rest of Missouri re-contacted sample consisted of more females than males, tended to be older, and white. The proportion of respondents residing in urban, town and rural areas were similar. Hispanics represented about 1.2 percent of the sample. The sample included a significantly higher proportion of individuals with high school or higher education compared to individuals with less than a high school education and with household incomes of \$50,000 or more compared to individuals with household incomes less than \$50,000.

**Figure 6. Re-contacted sample by gender, age, race, and area of residence, Rest of Missouri, Baseline 2007 and follow-up 2008 (N = 259)**



\*Town population  $\leq$  40,000 and not classified as rural or farm.

### General Health Status

There was little change in general health status in the Rest of Missouri re-contacted sample from baseline to the first follow-up survey with about one-fourth of respondents (27.1% v 23.6%, respectively) perceiving their general health status as fair or poor and only a small proportion (less than 7%) expressed a lack of satisfaction with life (Table 13). Greater than 90 percent of respondents continued to have some type of health coverage, primarily private or employer insurance (55.3% baseline v 55.3% follow-up) followed by Medicare (38.2% baseline and 39.4% follow-up) was used to pay for most medical care.

**Table 13. Prevalence of general health status, chronic disease, behavioral risk factors and preventive practices among re-contacted sample, Rest of Missouri, baseline and follow-up**

<i>Rest of Missouri</i>				
	<i>Baseline (n = 259)</i> 2007		<i>Follow-up (n =259)</i> 2008	
	<i>Percentage</i>	<i>95% CI</i>	<i>Percentage</i>	<i>95% CI</i>
<b>General Health Status</b>				
Health status (fair or poor)	27.1	21.7 - 32.6	23.6	18.4 - 28.9
Life satisfaction (dissatisfied or very dissatisfied)	5.5	2.7 - 8.3	6.6	3.5 - 9.6
No health coverage	6.2	3.3 - 9.2	8.1	4.8 - 11.5
<b>Behavioral Risk Factor</b>				
Physical inactivity	31.8	26.1 - 37.5	23.2	18.0 - 28.3
Current smoker	23.7	18.5 - 29.0	21.7	16.6 - 26.8
<b>Disease and Condition</b>				
Overweight (BMI 25 - 29.9)	41.4	35.2 - 47.5	40.6	34.5 - 46.6
Obese (BMI $\geq$ 30)	28.1	22.5 - 33.7	31.1	25.4 - 36.8
High blood pressure	43.8	37.7 - 49.9	48.1	41.9 - 54.2
High cholesterol	50.6	44.2 - 57.1	55.5	49.1 - 61.8
Arthritis	48.2	42.1 - 54.4	47.9	41.8 - 54.0
Current Asthma	8.5	5.1 - 11.9	8.5	5.1 - 11.9
Diabetes	16.3	11.8 - 20.9	16.2	11.7 - 20.7
Previous diagnosis cancer	13.2	9.0 - 17.3	15.1	10.7 - 19.5
Previous heart attack	9.3	5.7 - 13.1	9.4	5.7 - 13.1
Previous angina or coronary heart disease	9.5	5.8 - 12.9	11.6	7.7 - 15.5
Previous stroke†	5.1	2.4 - 7.8	4.3	1.8 - 6.7
<b>Preventive Measure</b>				
Engaging in moderate physical activity	81.3	76.4 - 86.0	85.3	80.9 - 89.6
Smoking cessation (1 day or longer within past 12 months)† †	44.3	31.4 - 57.1	45.5	31.9 - 59.0
Would call 9-1-1 first if thought someone was having a heart attack or stroke	77.0	71.9 - 82.2	76.1	70.8 - 81.3
<b>Screening and Management Practice</b>				
Routine checkup (past 2 years)	89.0	85.2 - 92.9	87.4	83.3 - 91.5
Mammogram within past 2 years†††	79.7	73.4 - 86.1	72.6	65.5 - 79.6
Flexible sigmoidoscopy or colonoscopy in the past 10 years††††	61.0	54.6 - 67.4	59.6	53.2 - 66.1
Individuals with diabetes having A1C three or more times in past 12 months	48.6	32.0 - 65.1	50.0	34.1 - 65.9

†The prevalence of stroke as well as other chronic conditions are likely underestimated because nursing home residents and others too ill to respond to a telephone interview are excluded.

††Respondents current smokers.

†††Female respondents, 45 years of age and older.

††††Male and female respondents 50 years of age and older.

## Behavioral Risk Factors and Preventive Practices

*Physical Activity:* Fewer respondents reported physical inactivity at follow-up (23.2%) compared to baseline (31.8%); however, this decrease was not significant (Table 13). Three of every four respondents at baseline and follow-up reported engaging in moderate physical activity.

*Smoking and Smoking Cessation:* As shown in Table 13, the prevalence of current cigarette smoking between baseline and the follow-up was similar (23.7% v 21.7%). A slightly higher proportion of current smokers reported that they had quit smoking for at least one day in the past 12 months at follow-up (45.5%) compared to baseline (44.3%).

*Call 9-1-1:* Approximately three of every four respondent's at baseline (77.0%) and follow-up (76.1%) would call 9-1-1 first if they thought someone was having a heart attack or stroke (Table 13).

## Disease and Conditions

As shown in Table 13, the proportion of respondents reporting several of the chronic diseases including arthritis, asthma, diabetes, and previous heart attack was similar between baseline and follow-up. There was a slight increase from baseline to follow-up, although not significant, in the proportion reporting high blood pressure, high cholesterol, previous diagnosis of cancer, and previous angina. Slightly fewer reported previous stroke at follow-up than at baseline.

## Screening and Management Practices

A large proportion of the respondents at baseline and follow-up reported a routine checkup in the past 2 years (89.0% baseline v 87.4% follow-up) (Table 13). Greater than 7 out of every 10 women had their mammography in the past 2 years (79.7% baseline and 72.6% follow-up). However, only 6 of every 10 individuals age 50 and older reported completing a sigmoidoscopy or colonoscopy in the past 10 years (61.0% baseline v 59.6% follow-up), respectively.

## Campaign Evaluation

*Campaign Awareness:* In the Rest of Missouri, there was a significant increase in the proportion of respondents who reported ever seeing or hearing the *Live Like Your Life Depends On It* campaign between baseline (24.9%, n = 63) and follow-up (36.6%, n = 89) (Table 14). The most frequent reported source at baseline and follow-up for seeing or hearing the campaign was television; however, a substantial proportion of each sample did not know or wasn't sure where they had seen or heard the campaign (Table 14). A greater proportion of the sample liked what they saw or heard in the *Like Your Life Depends On It* campaign at follow-up (71.4%) versus at baseline (67.1%), but this difference was not statistically significant (Table 14).

*Campaign Impact:* A large proportion of respondents didn't know or wasn't sure of the campaign message, but of the messages reported the most frequent was to be more physically active (Table 14). Slightly more respondents at follow-up (36.4%; n = 31) reported making any

changes such as smoking cessation, food selection, physical activity, or disease prevention since seeing or hearing the messages compared to baseline (30.6%; n = 19) (Table 14).

**Table 14. Live Like Your Life Depends On It campaign awareness and impact among re-contacted sample, Rest of Missouri, baseline and follow-up**

	<i>Rest of Missouri</i>			
	<i>Baseline (N = 259) 2007</i>		<i>Follow-up (N = 259) 2008</i>	
	<i>Percentage</i>	<i>95% CI</i>	<i>Percentage</i>	<i>95% CI</i>
<b>Campaign Awareness and Impact</b>				
Ever seen or heard campaign	24.9	19.5 - 30.3	36.6*	30.5 - 42.7
Made changes since hearing message‡	30.6	18.8 - 42.4	36.4	26.0 - 46.9
Liked what saw or heard in campaign‡	76.2	65.7 - 86.7	73.0	63.8 - 82.3
<b>Where Campaign Seen or Heard‡</b>				
• Television	34.9	22.8 - 47.0	27.0	17.8 - 36.2
• Newspaper	6.3	0.2 - 12.5	6.7	1.5 - 12.0
• Radio	6.3	0.2 - 12.5	7.9	2.3 - 13.5
• Website	1.6	0.0 - 4.8	3.4	0.0 - 7.1
• Health care setting	3.2	0.0 - 7.6	3.4	0.0 - 7.1
• Workplace	1.6	0.0 - 4.8	0.0	0.0 - 0.0
• Sporting event	1.6	0.0 - 4.8	0.0	0.0 - 0.0
• Printed materials	6.3	0.2 - 12.5	5.6	0.8 - 10.4
• From previous interview	-	-	0.0	0.0 - 0.0
• Other	6.3	0.2 - 12.5	13.5	6.4 - 20.6
• Don't know / not sure	31.7	19.9 - 43.6	40.4	30.3 - 50.7
<b>Main Messages Received‡</b>				
• Eat smart / healthy eating	1.6	0.0 - 4.8	6.7	1.4 - 12.1
• Move more / more physical activity / exercise	25.4	14.3 - 36.4	16.9	8.9 - 24.8
• Be tobacco free / don't smoke	1.6	0.0 - 4.8	2.2	0.0 - 5.4
• Get screenings / checkups	4.8	0.0 - 10.1	0.0	0.0 - 0.0
• Manage existing chronic disease	4.8	0.0 - 10.1	2.2	0.0 - 5.4
• Other	12.7	4.2 - 21.2	9.0	2.9 - 15.0
• Don't know / not sure	49.2	36.5 - 61.9	62.9	52.7 - 73.2
<b>Health Beliefs</b>				
Will stay healthy with regular physical activity	94.6	91.8 - 97.3	93.8	90.8 - 96.7
Will feel better if eating healthy	96.5	94.2 - 98.7	97.3	95.3 - 99.3
Chronic disease can be well managed with medication and following doctor's advice	92.7	89.5 - 96.0	90.4	86.8 - 94.1

‡ Respondents who saw or heard the campaign, Baseline n = 63 and Follow-up n = 89.

- Not asked at baseline.

\*Significantly different than baseline.

### Health Beliefs

As shown in Table 14, more than 90 percent of the respondents at baseline and follow-up agreed or strongly agreed that they would stay healthy with regular physical activity, feel better if eating healthy and a chronic disease can be well managed with medication and following a doctor's advice.

### **Discussion**

Chronic diseases are a major health issue in Missouri with five conditions (diseases of the heart, all cancers combined, stroke, chronic lower respiratory diseases, and diabetes mellitus) accounting for almost seven of every ten deaths annually. Mass media health campaigns, particularly when combined with other activities have been shown to play a role in promoting healthy lifestyles. However, success varies across behaviors and is affected by other factors such as number of exposures and quality and reach of campaign. This project is unique in that it is a public health media campaign aimed at multiple chronic diseases and associated risk behaviors, screening, and disease management.

According to these data, approximately one-fourth of each sample ever saw or heard the campaign. Although some respondents were able to recall the source of seeing or hearing the campaign and cited television or a specific newspaper (e.g., Kansas City Star, St. Louis Post-Dispatch, and Platte County paper), many respondents could not recall the source of seeing or hearing about the campaign. The two main health messages received from the campaign were increase physical activity and eat for health. Other messages such as "take care of yourself," "heart and diabetes" and "lose weight" were reported. Nevertheless, some individuals did report making lifestyle changes since hearing the campaign.

Many respondents reported at least one chronic disease. However, when asked "If you thought someone was having a heart attack or a stroke, what is the first thing that you would do?" of the respondents who said they would do "something else," the majority (70.5%) stated that they would give aspirin first. This finding may indicate that other health messages may also be being seen or heard and adopted. In addition, the majority of respondents, whether or not they saw or heard the *Live Like Your Life Depends On It* campaign, believed that they would stay healthy with regular physical activity, feel better if eating healthy and a chronic disease can be well managed with medication and following a doctor's advice.

This campaign is only one component of comprehensive efforts designed to maintain and improve health and cannot be easily isolated from other efforts. In addition, there are varying levels and uses of the campaign materials depending on the number of organizations and communities promoting the campaign messages. Nevertheless, promoting healthy behaviors among the population aged 45 and older may not only increase knowledge and change health attitudes, but may impact behaviors to reduce the risk of developing a chronic condition or related complications.

###