Cumberland District Community Health Status Assessment by Healthy Maine Partnership Region

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Introduction

Organization

This report is composed of health indicators separated into nine themes—Behavioral Risk Factors; Death, Illness, and Injury; Demographics, Environmental Health; Health Resource Availability; Infectious Disease; Maternal and Child Health; Quality of Life; Social and Mental Health; and Socioeconomic Indicators. A final section includes notes on selected health indicators, and an appendix lists additional community health status indicators from the federal Health and Human Services Department.

Confidence Intervals

Not all indicators are exact figures, but rather estimates that approximate a true, unknown value. Therefore, when possible, 95% confidence intervals are displayed to prevent spurious conclusions from being drawn. As a rule of thumb, the larger the sample size, the narrower the confidence interval, because drawing from a larger sample makes the result more representative of the total population. When two confidence intervals do not overlap, it is common to conclude that the difference between the two values is statistically significant. In this report, those places with levels significantly different from the state are shaded and/or italicized.

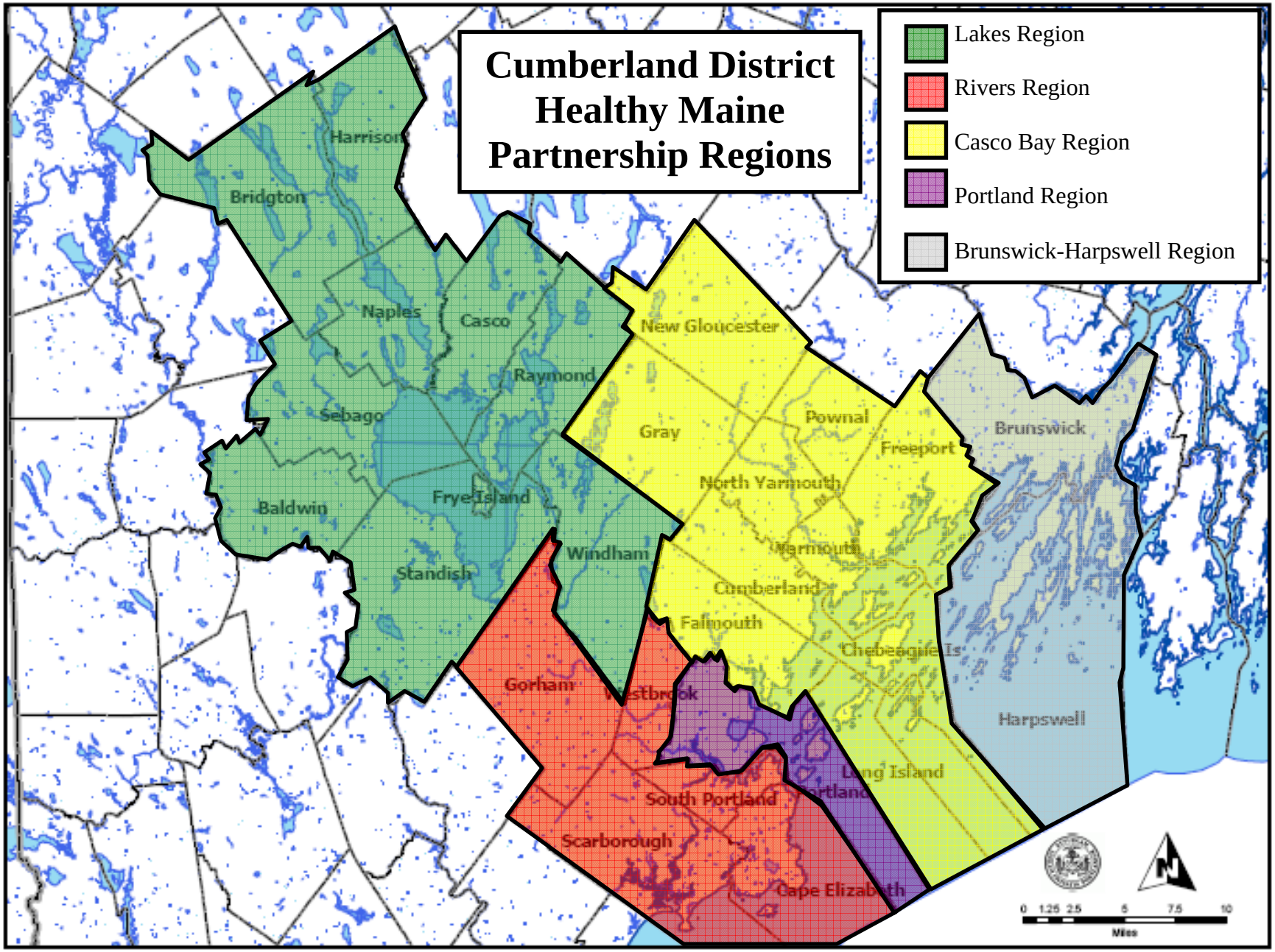
Confounders

Some health indicators in this report are not actual disease data (e.g., race, poverty), but are included because they are easier to obtain and associated with particular health outcomes. Often these variables are confounders associated with the true causes of the outcome. For instance, there is a high correlation between those who die of lung cancer and those who carry lighters. However, it is obvious that carrying a lighter does not cause lung cancer. Instead, we know there is a similarly high correlation between smoking and carrying a lighter. Therefore carrying a lighter is a confounding variable obscuring the true causal relationship between smoking and lung cancer. However, public health programs targeting the unique needs of certain groups are a valid starting point for creating healthier communities. Moreover, because many groups already have established organizations (e.g., senior centers, veterans' groups), partnering with them can facilitate the introduction and acceptance of public health services.

Limitations

Some indicators are collapsed across years so they can be published without violating the State's privacy policy on small cell size, which states that town-level data generated by the State must have at least six cases to be released. State and federal policies prevent some data from being released at geographic levels below the state or county, and some data are up to nine years old, so their quality may not be as high as more recently collected data. Private claims data at the county level do not necessarily reflect the sum of HMP-level data because people may move between HMPs and be counted twice (once in each HMP) but only once in the county total. Despite these limitations, this report covers a sizable breadth of health indicators.

Figure 1. Map of Cumberland County



1. Behavioral Risk Factors

Table 1.1. Retail Tobacco and Alcohol Licensees (December 2007)

HMP	Tobacco Licensees (#)	Licensees per 1,000 minors	95% Confidence Interval	Alcohol Licensees (#)	Licensees per 1,000	95% CI
Portland	91	7.5	6.0 – 9.1	*297*	*4.7*	*4.2 – 5.3*
Lakes	65	5.9	4.4 – 7.3	126	2.6	2.1 – 3.0
Brunswick-Harpswell	27	4.6	2.9 – 6.3	82	3.0	2.4 – 3.7
Rivers	86	4.4	3.5 – 5.4	211	2.5	2.2 – 2.9
Casco Bay	52	3.9	2.8 – 4.9	113	2.1	1.7 – 2.5
COUNTY	**321**	**5.2**	**4.6 – 5.7**	**829**	**3.0**	**2.8 – 3.2**
STATE	**1,772**	**5.9**	**5.6 – 6.2**	**4,012**	**3.0**	**3.0 – 3.1**

Shading and italics indicate that the rate is significantly higher than the state.
Shading and no italics indicate that the rate is significantly lower than the state.
Sources: Partnership for a Tobacco-Free Maine, Liquor Licensing and Compliance Division, Maine State Police.

Both the Rivers and Casco Bay HMPs have significantly lower rates of alcohol and tobacco licensees than the state. However, Portland has a 55% higher rate of retail alcohol licensees than the state. Cumberland County as a whole does not differ from the state at a significant level.

Table 1.2. Narcotic Prescriptions (2007 to 2008)

HMP	2008			2007			Any Significant Change Between Time Periods?
	Rxs	Rxs per 100	95% Confidence Interval	Rxs	Rxs per 100	95% CI	
Lakes	*46,225*	*93.9*	*93.0 – 94.7*	44,247	89.9	89.0 – 90.7	Yes (+4%)
Portland	57,978	92.3	91.5 – 93.0	*56,822*	*90.4*	*89.7 – 91.2*	Yes (+2%)
Brunswick-Harpswell	21,716	80.4	79.3 – 81.4	19,473	72.1	71.1 – 73.1	Yes (+12%)
Rivers	65,782	78.9	78.3 – 79.5	62,332	74.8	74.2 – 75.4	Yes (+6%)
Casco Bay	32,922	62.2	61.5 – 62.8	32,510	61.4	60.7 – 62.1	No
COUNTY	**224,623**	**81.6**	**81.2 – 81.9**	**215,384**	**78.2**	**77.9 – 78.5**	**Yes (+4%)**
STATE	**1,214,786**	**92.2**	**92.1 – 92.4**	**1,174,200**	**89.1**	**89.0 – 89.3**	**Yes (+3%**

Shading and italics indicate that the rate is significantly higher than the state.
Shading and no italics indicate that the rate is significantly lower than the state.
Source: Prescription Monitoring Program, Maine Office of Substance Abuse.

Table 1.3. Tranquilizer Prescriptions (2007 to 2008)

HMP	2008			2007			Any Significant Change Between Time Periods?
	Rxs	Rxs per 100	95% Confidence Interval	Rxs	Rxs per 100	95% CI	
Portland	*51,892*	*82.6*	*81.9 – 83.3*	*48,969*	*77.9*	*77.3 – 78.6*	Yes (+6%)
Rivers	*57,253*	*68.7*	*68.1 – 69.3*	*53,008*	*63.6*	*63.1 – 64.1*	Yes (+8%)
Lakes	30,984	62.9	62.2 – 63.6	28,283	57.4	56.8 – 58.1	Yes (+10%)
Brunswick-Harpswell	16,877	62.5	61.5 – 63.4	15,663	58.0	57.1 – 58.9	Yes (+8%)
Casco Bay	30,726	58.0	57.4 – 58.7	28,154	53.2	52.5 – 53.8	Yes (+9%)
COUNTY	***187,732***	***68.2***	***67.9 – 68.5***	***174,077***	***63.2***	***62.9 – 63.5***	**Yes (+8%)**
STATE	**837,310**	**63.6**	**63.4 – 63.7**	**781,304**	**59.3**	**59.2 – 59.4**	**Yes (+7%)**

Shading and italics indicate that the rate is significantly higher than the state.
Shading and no italics indicate that the rate is significantly lower than the state.
Source: Prescription Monitoring Program, Maine Office of Substance Abuse.

Table 1.4. Stimulant Prescriptions (2007 to 2008)

HMP	2008			2007			Any Significant Change Between Time Periods?
	Rxs	Rxs per 100	95% Confidence Interval	Rxs	Rxs per 100	95% CI	
Rivers	*19,653*	*23.6*	*23.3 – 23.9*	*16,695*	*20.0*	*19.7 – 20.3*	Yes (+18%)
Lakes	*11,203*	*22.8*	*22.3 – 23.2*	*9,811*	*19.9*	*19.5 – 20.3*	Yes (+14%)
Portland	*13,952*	*22.2*	*21.8 – 22.6*	*12,730*	*20.3*	*19.9 – 20.6*	Yes (+10%)
Brunswick-Harpswell	5,569	20.6	20.1 – 21.2	4,951	18.3	17.8 – 18.8	Yes (+12%)
Casco Bay	10,586	20.0	19.6 – 20.4	*10,015*	*18.9*	*18.5 – 19.3*	Yes (+6%)
COUNTY	***60,963***	***22.1***	***22.0 – 22.3***	***54,202***	***19.7***	***19.5 – 19.8***	**Yes (+12%)**
STATE	**266,779**	**20.3**	**20.2 – 20.3**	**240,213**	**18.2**	**18.2 – 18.3**	**Yes (+11%)**

Shading and italics indicate that the rate is significantly higher than the state.
Source: Prescription Monitoring Program, Maine Office of Substance Abuse.

Interestingly, each of the three controlled substance classes has a different HMP region with the highest rate. Narcotic use is highest in the Lakes Region, Portland has the highest rate of tranquilizer use, and stimulants are used at a higher rate in the Rivers Region. Also, the Casco Bay HMP consistently has the lowest rate for all three substance classes. As a whole, Cumberland County has significantly higher rates of tranquilizer and stimulant prescriptions than the state.

Table 1.5. Other Behavioral Risk Factor Indicators

Indicator	Time Period	Data Source	Cumberland	MAINE
Sigmoidoscopy or Colonoscopy Screening Ever Had by Adults Age 50 and Older (percent)	2006	BRFSS	*74.3 (69.2-79.4)*	64.6 (62.2-67.0)
Adolescent Smoking Prevalence (percent of 6-12 graders)	2006	MYDAUS	11.9 (11.6-12.2)	13.8 (13.6-14.0)
Adult Smoking Prevalence (percent who are current smokers)	2007	BRFSS	15.8 (13.0-18.5)	20.2 (18.8-21.6)
Adults Overweight or Obese (percent)	2007	BRFSS	56.4 (49.8-62.8)	62.9 (59.9-65.9)
Adults With a Routine Dental Visit in Past Year (percent)	2006	BRFSS	75.4 (70.3-80.5)	70.2 (68.4-72.0)
Influenza Vaccine Past Year for Adults over 65 years (percent)	2007	BRFSS	82.5 (77.6-87.4)	77.2 (75.0-79.4)
Pneumococcal Vaccine Ever Among Adults 65 Years of Age or Older (percent)	2007	BRFSS	75.4 (68.9-81.8)	71.1 (68.6-73.6)
Previous 30-Day Alcohol Use Among 9^{th}-12^{th} Graders (percent)	2006	MYDAUS	41.6	40.3
Adults Who Have Participated in Binge Drinking (percent)	2007	BRFSS	18.9 (15.7-22.0)	15.9 (14.5-17.3)
Binge Drinking Within the Last 2 Weeks Among 9^{th}-12^{th} Graders (percent)	2006	MYDAUS	22	21.6
Previous 30-Day Prescription Drug Misuse Among 9^{th}-12^{th} Graders (percent)	2006	MYDAUS	7.6	8.2
Substance Abuse Admissions (number among all ages)	2006	TDS	2,426	10,018
Mammogram in Past Two Years Among Women 40 and Older (percent)	2006	BRFSS	85.1 (80.8-89.4)	82 (80-84)
Pap Smear in Past 3 Years Among Women 18 and Older (percent)	2006	BRFSS	91.6 (88.3-94.9)	89.1 (87.5-90.7)

Shading and italics indicate that the rate is significantly higher than the state.
Shading and no italics indicate that the rate is significantly lower than the state.

Cumberland County has a higher rate of sigmoidoscopy or colonoscopy screenings than the state. Also positive are the significantly lower prevalence's of smoking among both 6^{th} to 12^{th} graders and adults. All other Behavioral Risk Factor Indicators examined are not significant.

2. Death, Illness, and Injury

Table 2.1. 1st to 5th Leading Causes of Death in Cumberland County (2001 to 2005)

HMP	1. Cancer		2. Heart Disease		3. Chronic Lower Respiratory Diseases		4. Cerebrovascular Diseases		5. Alzheimer's Disease	
	Annual Rate per 100,000	95% Confidence Interval	Annual Rate per 100,000	95% CI	Annual Rate per 100,000	95% CI	Annual Rate per 100,000	95% CI	Annual Rate per 100,000	95% CI
Brunswick-Harpswell	235.1	209.2 – 261.1	207.5	183.1 – 231.9	59.0	46.0 – 72.0	61.2	48.0 – 74.5	24.6	16.2 – 33.0
Casco Bay	204.6	187.1 – 222.0	161.9	146.4 – 177.5	45.3	37.1 – 53.5	52.3	43.5 – 61.1	*60.4*	*51.0 – 69.9*
Lakes	201.2	183.1 – 219.3	152.3	136.6 – 168.0	43.9	35.4 – 52.3	35.9	28.2 – 43.5	18.1	12.7 – 23.6
Portland	255.9	238.4 – 273.5	238.7	221.8 – 255.7	52.9	44.9 – 60.8	52.9	44.9 – 60.8	*61.0*	*52.4 – 69.6*
Rivers	231.0	216.2 – 245.7	188.9	175.6 – 202.2	53.3	46.3 – 60.4	51.1	44.2 – 58.1	*56.0*	*48.8 – 63.3*
COUNTY	**227.0**	**219.0 – 235.0**	**190.9**	**183.6 – 198.3**	**50.6**	**46.8 – 54.4**	**50.1**	**46.3 – 53.9**	***48.3***	***44.6 – 52.0***
STATE	**241.6**	**237.8 – 245.4**	**237.4**	**233.6 – 241.1**	**61.0**	**59.1 – 62.9**	**60.6**	**58.7 – 62.5**	**37.5**	**36.0 – 39.0**

Table 2.2. 6th to 10th Leading Causes of Death in Cumberland County (2001 to 2005)

HMP	6. Unintentional Injuries		7. Influenza and Pneumonia		8. Diabetes Mellitus		9. Nephritis, Nephrotic Syndrome, and Nephrosis		10. Septicemia	
	Annual Rate per 100,000	95% Confidence Interval	Annual Rate per 100,000	95% CI	Annual Rate per 100,000	95% CI	Annual Rate per 100,000	95% CI	Annual Rate per 100,000	95% CI
Brunswick-Harpswell	22.4	14.4 – 30.4	21.6	13.8 – 29.5	17.9	10.7 – 25.1	19.4	11.9 – 26.9	3.7	0.5 – 7.0
Casco Bay	27.5	21.1 – 33.9	25.2	19.1 – 31.3	15.1	10.4 – 19.9	18.6	13.3 – 23.9	9.3	5.6 – 13.0
Lakes	43.0	34.7 – 51.4	16.9	11.6 – 22.1	29.5	22.6 – 36.4	13.5	8.8 – 18.2	8.4	4.7 – 12.1
Portland	*49.4*	*41.7 – 57.1*	*33.8*	*27.4 – 40.2*	28.5	22.6 – 34.3	*27.5*	*21.8 – 33.3*	*18.1*	*13.5 – 22.8*
Rivers	30.6	25.2 – 35.9	26.9	21.9 – 31.9	23.5	18.8 – 28.2	19.6	15.3 – 23.9	10.8	7.6 – 13.9
COUNTY	**35.8**	**32.6 – 39.0**	**25.9**	**23.2 – 28.6**	**23.6**	**21.0 – 26.2**	**20.2**	**17.8 – 22.6**	**11.1**	**9.3 – 12.9**
STATE	**39.6**	**38.1 – 41.1**	**24.2**	**23.0 – 25.4**	**30.2**	**28.9 – 31.6**	**18.7**	**17.7 – 19.8**	**10.1**	**9.3 – 10.9**

Shading and italics indicate that the percentage is significantly higher than the state.
Shading and no italics indicate that the percentage is significantly lower than the state.
Source: Office of Data, Research, and Vital Statistics, Maine Center for Disease Control and Prevention.

The county's mortality rates from the four leading causes of death in the county, as well as diabetes, are all significantly lower than the state. But the mortality rate from Alzheimer's is significantly higher, with three of five HMPs also reporting elevated rates.

Table 2.3. Coronary Heart Disease Prevalence among the Privately Insured (2006 to 2007)

HMP	2007			2006			Any Significant Change Between Time Periods?
	Cases	Prevalence per 1,000 Members	95% Confidence Interval	Cases	Prevalence per 1,000 Members	95% Confidence Interval	
Brunswick-Harpswell	157	14.9	12.5 – 17.2	119	11.5	9.5 – 13.6	No
Lakes	388	14.6	13.1 – 16.0	433	16.5	15.0 – 18.1	No
Rivers	630	12.8	11.8 – 13.8	667	13.9	12.8 – 15.0	No
Casco Bay	398	11.8	10.7 – 13.0	398	12.2	11.0 – 13.4	No
Portland	319	10.3	9.2 – 11.4	345	11.5	10.2 – 12.7	No
COUNTY	**1,871**	**11.9**	**11.4 – 12.5**	**1,950**	**12.8**	**12.2 – 13.3**	**No**
STATE	**8,658**	**14.4**	**14.1 – 14.7**	**8,961**	**15.2**	**14.9 – 15.5**	**Yes (-6%)**

Shading and no italics indicate that the rate is significantly lower than the state.
Source: Maine Health Information Center.

Table 2.4. Smoking-related Diagnoses Prevalence among the Privately Insured (2006 to 2007)

HMP	2007			2006			Any Significant Change Between Time Periods?
	Cases	Prevalence per 1,000 Members	95% Confidence Interval	Cases	Prevalence per 1,000 Members	95% Confidence Interval	
Brunswick-Harpswell	98	9.3	7.4 – 11.1	103	10.0	8.1 – 11.9	No
Lakes	197	7.4	6.4 – 8.4	187	7.1	6.1 – 8.2	No
Rivers	319	6.5	5.8 – 7.2	308	6.4	5.7 – 7.1	No
Portland	183	5.9	5.1 – 6.8	192	6.4	5.5 – 7.3	No
Casco Bay	163	4.8	4.1 – 5.6	177	5.4	4.6 – 6.2	No
COUNTY	**956**	**6.1**	**5.7 – 6.5**	**966**	**6.3**	**5.9 – 6.7**	**No**
STATE	**5,213**	**8.6**	**8.4 – 8.9**	**5,430**	**9.2**	**9.0 – 9.5**	**Yes (-6%)**

Shading and no italics indicate that the rate is significantly lower than the state.
Source: Maine Health Information Center.

For both coronary heart disease and smoking related diagnoses, Cumberland County, along with three of the five HMPs, are doing much better than the state. However, no significant change in the rate has occurred since the prior year. The state as a whole has experienced 6% reductions each in coronary heart disease and smoking-related diagnoses among the privately insured between 2006 and 2007.

Table 2.5. Hospital Visits among the Privately Insured (2006 to 2007)

HMP	2007			2006			Any Significant Change Between Time Periods?
	Visits	Rate per 1,000 Members	95% Confidence Interval	Visits	Rate per 1,000 Members	95% CI	
Lakes	*3,722*	*139.7*	*135.3 – 144.2*	*3,777*	*144.3*	*139.7 – 148.9*	No
Casco Bay	4,138	123.0	119.2 – 126.7	3,868	118.6	114.8 – 122.3	No
Rivers	5,906	119.7	116.7 – 122.8	5,995	124.9	121.8 – 128.1	No
Portland	3,690	119.1	115.3 – 123.0	*4,404*	*146.2*	*141.9 – 150.5*	Yes (-19%)
Brunswick-Harpswell	1,183	112.0	105.6 – 118.4	*1,508*	*146.1*	*138.7 – 153.5*	Yes (-23%)
COUNTY	**18,630**	**118.6**	**116.9 – 120.3**	**19,543**	**128.0**	**126.2 – 129.8**	**Yes (-7%)**
STATE	**76,060**	**126.1**	**125.2 – 127.0**	**78,794**	**133.8**	**132.8 – 134.7**	**Yes (-6%)**

Shading and italics indicate that the rate is significantly higher than the state.
Shading and no italics indicate that the rate is significantly lower than the state.
Source: Maine Health Information Center.

Table 2.6. Emergency Department Visits among the Privately Insured (2006 to 2007)

HMP	2007			2006			Any Significant Change Between Time Periods?
	Visits	Rate per 1,000 Members	95% Confidence Interval	Visits	Rate per 1,000 Members	95% CI	
Brunswick-Harpswell	1,950	184.6	176.4 – 192.8	1,842	178.5	170.3 – 186.6	No
Lakes	3,828	143.7	139.2 – 148.3	3,881	148.3	143.6 – 153.0	No
Portland	4,071	131.4	127.4 – 135.5	3,995	132.6	128.5 – 136.8	No
Rivers	5,895	119.5	116.5 – 122.6	5,513	114.9	111.9 – 117.9	No
Casco Bay	3,887	115.5	111.9 – 119.1	3,562	109.2	105.6 – 112.8	No
COUNTY	**19,610**	**124.9**	**123.1 – 126.6**	**18,775**	**123.0**	**121.2 – 124.7**	**No**
STATE	**115,349**	**191.2**	**190.1 – 192.4**	**112,236**	**190.5**	**189.4 – 191.6**	**No**

Shading and no italics indicate that the rate is significantly lower than the state.
Source: Maine Health Information Center.

Hospital visits among the privately insured vary by HMP. The Lakes Region reports a higher rate of visits than the state, while the Rivers, Portland, and Brunswick-Harpswell HMPs are lower. Portland and Brunswick-Harpswell are also notable for seeing significant reductions between 2006 and 2007. Conversely, rates of emergency department visits are all significantly lower than the state, with the exception of the Brunswick-Harpswell Region. No areas saw a significant change from the prior year.

Table 2.7. Home and Nurse Visits among the Privately Insured (2006 to 2007)

HMP	2007			2006			Any Significant Change Between Time Periods?
	Visits	Rate per 1,000 Members	95% Confidence Interval	Visits	Rate per 1,000 Members	95% CI	
Lakes	*1,210*	*45.4*	*42.9 – 48.0*	*924*	*35.3*	*33.0 – 37.6*	Yes (+29%)
Rivers	*1,859*	*37.7*	*36.0 – 39.4*	*1,658*	*34.6*	*32.9 – 36.2*	No
Casco Bay	*1,224*	*36.4*	*34.3 – 38.4*	*1,019*	*31.2*	*29.3 – 33.2*	Yes (+16%)
Portland	*913*	*29.5*	*27.6 – 31.4*	*1,092*	*36.3*	*34.1 – 38.4*	Yes (-19%)
Brunswick-Harpswell	109	10.3	8.4 – 12.3	85	8.2	6.5 – 10.0	No
COUNTY	***5,313***	***33.8***	***32.9 – 34.7***	***4,776***	***31.3***	***30.4 – 32.2***	**Yes (+8%)**
STATE	**15,642**	**25.9**	**25.5 – 26.3**	**15,853**	**26.9**	**26.5 – 27.3**	**Yes (-4%)**

Shading and italics indicate that the rate is significantly higher than the state.
Source: Maine Health Information Center.

Table 2.8. Back Pain Prevalence among the Privately Insured (2006 to 2007)

HMP	2007			2006			Any Significant Change Between Time Periods?
	Cases	Prevalence per 1,000 Members	95% Confidence Interval	Cases	Prevalence per 1,000 Members	95% CI	
Lakes	3,038	114.1	110.0 – 118.1	2,926	111.8	107.8 – 115.9	No
Rivers	5,593	113.4	110.4 – 116.4	5,424	113.0	110.0 – 116.0	No
Casco Bay	3,675	109.2	105.7 – 112.7	3,636	111.5	107.8 – 115.1	No
Brunswick-Harpswell	1,145	108.4	102.1 – 114.7	1,135	110.0	103.6 – 116.4	No
Portland	3,327	107.4	103.8 – 111.1	3,318	110.2	106.4 – 113.9	No
COUNTY	**16,630**	**105.9**	**104.3 – 107.5**	**16,311**	**106.8**	**105.2 – 108.5**	**No**
STATE	**66,277**	**109.9**	**109.0 – 110.7**	**65,254**	**110.8**	**109.9 – 111.6**	**No**

Shading and no italics indicate that the rate is significantly lower than the state.
Source: Maine Health Information Center.

Other than Brunswick-Harpswell, the rest of Cumberland County has higher rates of home and nurse visits than the state. Additionally, while the state rate has decreased by 4% since the prior year, the rates in the Lakes, Casco Bay, and the county have increased significantly. In 2007, no significant differences in back pain prevalence were found between the HMPs and the state, although the county as a whole was lower. No significant differences were found between 2006 and 2007.

Table 2.9. Other Death, Illness, and Injury Indicators

Indicator	Time Period	Data Source	Cumberland	MAINE
Overall Cancer Incidence (age-adjusted rate per 100,000)	2000-2004	ME CDC	500.4 (488.8-512.0)	517.7 (512.5-522.9)
Overall Cancer Mortality (age-adjusted rate per 100,000)	2000-2004	Vital Stats	208.5 (201.1-215.9)	207.6 (204.3-210.9)
Lung Cancer Incidence (age-adjusted rate per 100,000)	2000-2004	ME CDC	77.3 (72.7-81.9)	80.6 (78.5-82.7)
Lung Cancer Mortality (age-adjusted rate per 100,000)	2000-2004	Vital Stats	59.8 (55.7-63.9)	61.5 (59.7-63.3)
Colorectal Cancer Incidence (age-adjusted rate per 100,000)	2000-2004	ME CDC	54.0 (50.2-57.8)	58.4 (56.6-60.2)
Colorectal Cancer Mortality (age-adjusted rate per 100,000)	2000-2004	Vital Stats	22.2 (19.7-24.7)	20.5 (19.4-21.6)
Female Breast Cancer Incidence (age-adjusted rate per 100,000)	2000-2004	ME CDC	134.8 (126.6-143.0)	132.5 (128.9-136.1)
Female Breast Cancer Mortality (age-adjusted rate per 100,000)	2000-2004	Vital Stats	25.1 (21.6-28.6)	23.7 (22.2-25.2)
Prostate Cancer Incidence (age-adjusted rate per 100,000)	2000-2004	ME CDC	161.1 (150.9-171.3)	174.5 (169.9-179.1)
Prostate Cancer Mortality (age-adjusted rate per 100,000)	2000-2004	Vital Stats	29.8 (25.0-34.6)	28.5 (26.4-30.6)
Major CVD Deaths (rate per 100,000) ICD-10 codes 100-I78	2005	Vital Stats	204.6 (189.1-220.1)	242.0 (234.4-249.6)
High Blood Pressure Among Adults (percent)	2007	BRFSS	24.5 (21.5-27.4)	28.7 (27.3-30.1)
High Cholesterol Among Adults (percent)	2007	BRFSS	37.3 (33.5-41.0)	40.2 (38.6-41.8)
Diabetes Prevalence Among Adults (non-gestational; percent)	2007	BRFSS	5.9 (4.3-7.4)	7.8 (7.0-8.6)
Adults with Diabetes Who Have Received a Hemoglobin A1c Test at Least Once Yearly (percent)	2004-2006	BRFSS	93.1 (88.8-97.4)	91.9 (89.9-93.9)
Adults with Asthma (percent)	2007	BRFSS	9.1 (7.1-11.0)	10.3 (9.3-11.3)
Motor Vehicle Traffic Crash Deaths (age-adjusted rate per 100,000)	2001-2005	Vital Stats	9.7 (8.1-11.3)	13.8 (12.9-14.7)
Average number of Motor Vehicle Crash Deaths per Year	2001-2005	Vital Stats	27	185
Hip Fracture Hospitalizations Among 65+ Year Olds (rate per 100,000)	2001-2005	Hospital Discharge	*827.7 (785.8-869.6)*	751.3 (733.8-768.8)
5-year Count of Hip Fracture Hospitalizations Among 65+ Year Olds	2001-2005	Hospital Discharge	1,497	7,066
Reported Rapes (rate per 10,000)	2002-2006	Dept. of Public Safety	*3.0 (2.7-3.3)*	2.6 (2.5-2.8)
Average Number of Reported Rapes per year	2002-2006	Dept. of Public Safety	82	343
Domestic Assaults Reported to the Police (rate per 10,000)	2005	Dept. of Public Safety	40.6 (38.2-43.0)	41.3 (40.2-42.4)
Count of Domestic Assaults Reported to the Police	2005	Dept. of Public Safety	1,115	5,549
Suicide Deaths (age 10 and older, rate per 100,000)	2001-2005	Vital Stats	12.0 (10.0-14.0)	13.9 (12.9-14.9)

Shading and italics indicate that the percentage is significantly higher than the state.
Shading and no italics indicate that the percentage is significantly lower than the state.

Among other indicators related to death, illness, and injury, Cumberland County has a higher rate of hip fracture hospitalizations among senior citizens, and rates of reported rape. Conversely, the county has significantly lower rates of cancer incidence, major cardiovascular disease deaths, and motor vehicle crash deaths.

3. Demographics

Table 3.1. Population

HMP	2007	Change Since 2006 (%)	Change Since 2002 (%)	Change Since 1997 (%)	Population Density per Square Mile (2007)	Percent of State Population (%)
Rivers	83,340	0.2	2.7	8.1	587	6.3
Portland	62,825	-0.3	-1.9	1.5	2,962	4.8
Casco Bay	52,950	0.7	3.3	15.8	221	4.0
Lakes	49,240	0.9	5.1	17.9	137	3.7
Brunswick-Harpswell	27,018	0.2	1.8	5.3	381	2.1
COUNTY	**275,374**	**0.3**	**2.1**	**9.2**	**330**	**20.9**
STATE	**1,317,207**	**0.2**	**1.8**	**5.8**	**43**	**100.0**

Source: US Census Bureau.

Table 3.2. Age Distribution (2000)

HMP	Under 5 (#)	Under 5 (%)	95% Confidence Interval (%)	65 and Over (#)	65 and Over (%)	95% CI (%)
Casco Bay	*3,147*	*6.3*	*6.1 – 6.5*	6,140	12.2	12.0 – 12.5
Rivers	*4,780*	*6.0*	*5.8 – 6.2*	10,977	13.8	13.5 – 14.0
Lakes	*2,675*	*5.9*	*5.7 – 6.1*	5,041	11.2	10.9 – 11.5
Brunswick-Harpswell	1,536	5.8	5.5 – 6.1	*4,257*	*16.1*	*15.7 – 16.6*
Portland	3,305	5.1	5.0 – 5.3	8,909	13.9	13.6 – 14.1
COUNTY	***15,443***	***5.8***	***5.7 – 5.9***	**35,324**	**13.3**	**13.2 – 13.4**
STATE	**70,726**	**5.5**	**5.5 – 5.6**	**183,402**	**14.4**	**14.3 – 14.4**

Shading and italics indicate that the percentage is significantly higher than the state.
Shading and no italics indicate that the percentage is significantly lower than the state.
Source: US Census Bureau.

More than one-fifth of Mainers reside in Cumberland County, making it the most populous county in the state. It is also growing at a faster rate than the state, thanks mostly to gains in the Casco Bay and Lakes Regions. Additionally, the Casco Bay, Lakes, and Rivers regions have a significantly higher percentage of children under 5 than the state. Conversely, these same regions, along with Portland, have a significantly lower proportion of senior citizens compared to the state.

Table 3.3. Foreign Language Ability* (2000)

HMP	Speak a Language Other than English (#)	Speak a Language Other than English (%)	95% Confidence Interval (%)
Portland	*6,030*	*9.9*	*9.6 – 10.1*
Brunswick-Harpswell	1,985	8.0	7.6 – 8.3
Rivers	3,585	4.8	4.6 – 4.9
Lakes	1,564	3.7	3.5 – 3.9
Casco Bay	1,724	3.7	3.5 – 3.8
COUNTY	**14,888**	**5.9**	**5.9 – 6.0**
STATE	**93,966**	**7.8**	**7.8 – 7.9**

*Among those 5 years and over.
Shading and italics indicate that the percentage is significantly higher than the state.
Shading and no italics indicate that the percentage is significantly lower than the state.
Source: US Census Bureau.

Table 3.4. Disabilities* (2000)

HMP	Physical (#)	Physical (%)	95% Confidence Interval (%)	Mental (#)	Mental (%)	95% CI (%)	Sensory (#)	Sensory (%)	95% CI (%)	Self-care (#)	Self-care (%)	95% CI (%)
Portland	5,712	9.5	9.3 – 9.7	*3,930*	*6.5*	*6.3 – 6.7*	2,502	4.2	4.0 – 4.3	1,599	2.7	2.5 – 2.8
Brunswick-Harpswell	2,196	9.2	8.8 – 9.6	1,307	5.5	5.2 – 5.8	774	3.2	3.0 – 3.5	624	2.6	2.4 – 2.8
Lakes	3,477	8.3	8.1 – 8.6	2,194	5.3	5.0 – 5.5	1,475	3.5	3.4 – 3.7	1,001	2.4	2.3 – 2.5
Rivers	5,344	7.2	7.0 – 7.4	3,508	4.7	4.6 – 4.9	2,550	3.4	3.3 – 3.6	1,519	2.1	2.0 – 2.2
Casco Bay	2,415	5.2	5.0 – 5.4	1,553	3.3	3.2 – 3.5	1,266	2.7	2.6 – 2.9	593	1.3	1.2 – 1.4
COUNTY	**19,144**	**7.8**	**7.7 – 7.9**	**12,492**	**5.1**	**5.0 – 5.2**	**8,567**	**3.5**	**3.4 – 3.6**	**5,336**	**2.2**	**2.1 – 2.2**
STATE	**112,661**	**9.5**	**9.4 – 9.5**	**68,736**	**5.8**	**5.7 – 5.8**	**52,286**	**4.4**	**4.4 – 4.4**	**30,085**	**2.5**	**2.5 – 2.6**

*Among those 5 years and over.
Shading and italics indicate that the rate is significantly higher than the state.
Shading and no italics indicate that the rate is significantly lower than the state.
Source: US Census Bureau.

Only the Portland HMP has a significantly higher proportion of people who can speak a language other than English. Three of the remaining four HMPs, as well as the county as a whole, are lower than the state. Among the four types of disabilities, only mental disabilities are elevated, and only in Portland. The county as a whole is significantly lower than the state in each disability.

Table 3.5. Military Population* (2000)

HMP	Any Military Service Ever (#)	Any Military Service Ever (%)	95% Confidence Interval (%)
Brunswick-Harpswell	*4,257*	*20.7*	*20.2 – 21.3*
Lakes	5,341	15.7	15.3 – 16.1
Casco Bay	5,490	14.9	14.6 – 15.3
Rivers	8,887	14.8	14.5 – 15.0
Portland	6,211	11.9	11.6 – 12.2
COUNTY	**30,186**	**14.8**	**14.7 – 15.0**
MAINE	**158,755**	**16.3**	**16.2 – 16.4**

*Among those 18 years and over.
Shading and no italics indicate that the percentage is significantly lower than the state.
Source: US Census Bureau.

Table 3.6. Average Household Size (2000)

HMP	Average Household Size	95% Confidence Interval
Lakes	*2.59*	*2.57 – 2.62*
Casco Bay	*2.59*	*2.56 – 2.61*
Rivers	*2.44*	*2.42 – 2.46*
Brunswick-Harpswell	2.32	2.29 – 2.35
Portland	2.08	2.06 – 2.10
COUNTY	**2.38**	**2.37 – 2.39**
STATE	**2.39**	**2.39 – 2.40**

Shading and italics indicate that the percentage is significantly higher than the state.
Shading and no italics indicate that the percentage is significantly lower than the state.
Source: US Census Bureau.

While the Brunswick-Harpswell region has a larger proportion of people with any military service than the state, these data are from 2000, and since then the Brunswick Naval Air Station has been slated to close in 2011. This closure will likely decrease this figure.

Regarding average household size, three of the HMPs are greater than the state (Lakes, Casco Bay, and Rivers), while the other two are significantly smaller. The net effect is that the county's average household size is not significantly different than the state.

Table 3.7. Other Demographic Indicators

Indicator	Time Period	Data Source	Cumberland	MAINE
White (one race alone or in combination), percent	2008	US Census	95.6 (95.5-95.7)	97.4 (97.4-97.4)
White (one race alone or in combination), count	2008	US Census	263,911	1,282,333
Black (one race alone or in combination), percent	2008	US Census	*2.5 (2.5-2.6)*	*1.4 (1.3-1.4)*
Black (one race alone or in combination), count	2008	US Census	6,960	17,777
American Indian and Alaskan Native (one race alone or in combination), percent	2008	US Census	0.8 (0.8-0.9)	1.1 (1.1-1.1)
American Indian and Alaskan Native (one race alone or in combination), count	2008	US Census	2,323	14,410
Asian (one race alone or in combination), percent	2008	US Census	*2.2 (2.1-2.2)*	*1.2 (1.2-1.2)*
Asian (one race alone or in combination), count	2008	US Census	5,958	15,421
Native Hawaiian and Other Pacific Islander (one race alone or in combination), percent	2008	US Census	*0.1 (0.1-0.2)*	*0.1 (0.1-0.1)*
Native Hawaiian and Other Pacific Islander (one race alone or in combination), count	2008	US Census	398	950
Hispanic (of any race), percent	2008	US Census	*1.8 (1.8-1.9)*	*1.3 (1.3-1.3)*
Hispanic (of any race), count	2008	US Census	5,028	16,814
Non-Hispanic (total), percent	2008	US Census	98.2 (98.1-98.2)	98.7 (98.7-98.7)
Non-Hispanic (total), count	2008	US Census	271,019	1,299,642
Franco-American, percent	2000	US Census	17.8 (17.6-17.9)	23.9 (23.9-24.0)
Franco-American, count	2000	US Census	47,185	305,259

Shading and italics indicate that the percentage is significantly higher than the state.
Shading and no italics indicate that the percentage is significantly lower than the state.

The racial and ethnic make-up of Cumberland County differs from Maine in all categories. The county has a significantly higher proportion of Blacks, Asians, Native Hawaiians or other Pacific Islanders, and Hispanics. The county has a significantly lower percentage of Whites, American Indians and Alaskan Natives, Non-Hispanics, and Franco-Americans.

4. Environmental Health

Table 4.1. Housing Built Before 1950 (2000)

HMP	Built Before 1950 (#)	Built Before 1950 (%)	95% Confidence Interval (%)
Portland	*17,146*	*57.7*	*57.1 – 58.3*
Rivers	11,261	35.5	35.0 – 36.0
Brunswick-Harpswell	3,206	30.6	29.7 – 31.4
Casco Bay	4,599	24.0	23.4 – 24.6
Lakes	3,428	20.3	19.7 – 20.9
COUNTY	***39,640***	***36.7***	***36.4 – 37.0***
STATE	**185,346**	**35.8**	**35.6 – 35.9**

Shading and italics indicate that the percentage is significantly higher than the state.
Shading and no italics indicate that the rate is significantly lower than the state.
Source: US Census Bureau.

Table 4.2. Other Environmental Health Indicators

Indicator	Time Period	Data Source	Cumberland	MAINE
Elevated Blood Lead Levels Among Screened 1-Year Old Children (percent)	2005-2006	ME CDC	1.1 (0.7-1.5)	1.4 (1.2-1.6)
District Community Water Systems Meeting all Health Based Standards (percent)	2007	ME CDC	87	80
Carbon Monoxide Detectors in the Home (percent)	2004	BRFSS	35.6 (31.5-39.7)	35.5(33.8-37.2)

Because lead paint was still used routinely in house paint as late as 1978, assessing the proportion of houses built before 1950 serves as a proxy for the number of people who could still be exposed to lead. Portland is the only HMP to report a majority of their houses built before 1950 (57.7%), and this is well over the 35.8% of houses in the state. Three of the other HMPs have a smaller percentage than the state of homes built before 1950. No other environmental health indicators were significantly different from the state.

5. Health Resource Availability

Table 5.1. Health Resource Availability Indicators

Indicator	Time Period	Data Source	Cumberland	MAINE
Access to Primary Care Physician (population to physician ratio)	2003	HRSA	759 to 1	978 to 1
Health Professional Shortage Area		HRSA	1	69

Cumberland County does not have a shortage of access to primary care physicians (although this may exist at the individual town level).

6. Infectious Disease

Table 6.1. Chlamydia (2002 to 2007)

HMP	2003 to 2007			2002 to 2006			Any Significant Change Between Time Periods?
	Average Annual Cases	Annual Cases per 100,000	95% Confidence Interval	Average Annual Cases	Annual Cases per 100,000	95% CI	
Portland	*216.0*	*340.3*	*320.0 – 360.6*	*198.2*	*311.0*	*291.7 – 330.4*	No
Brunswick-Harpswell	*60.0*	*222.2*	*197.1 – 247.4*	*55.4*	*205.9*	*181.7 – 230.2*	No
Lakes	89.0	183.9	166.9 – 201.0	81.8	170.7	154.2 – 187.3	No
Rivers	130.2	157.4	145.3 – 169.5	115.8	140.7	129.3 – 152.2	No
Casco Bay	51.8	99.0	86.9 – 111.0	45.4	87.3	76.0 – 98.7	No
COUNTY	***590.8***	***215.7***	***207.9 – 223.5***	***546.4***	***200.3***	***192.8 – 207.8***	**Yes (+8%)**
STATE	**2,252.0**	**171.7**	**168.6 – 174.9**	**2,103.6**	**161.0**	**157.9 – 164.1**	**Yes (+7%)**

Shading and italics indicate that the rate is significantly higher than the state.
Shading and no italics indicate that the rate is significantly lower than the state.
Source: HIV, STD, and Viral Hepatitis Program; Maine CDC.

The Portland and Brunswick-Harpswell regions consistently have the highest rates of chlamydia, with Portland in particular having almost twice the rate of the state. Also, while no HMP has seen a significant change in rates between the two time periods, the county as a whole, as well as the state, has seen significant increases.

Table 6.2. Lyme Disease (2002 to 2007)

HMP	2003 to 2007			2002 to 2006			Any Significant Change Between Time Periods?
	Average Annual Cases	Annual Cases per 100,000	95% Confidence Interval	Average Annual Cases	Annual Cases per 100,000	95% CI	
Casco Bay	*28.2*	*53.9*	*45.0 – 62.8*	*19.0*	*36.5*	*29.2 – 43.9*	Yes (+47%)
Brunswick-Harpswell	*9.8*	*36.3*	*26.1 – 46.5*	7.4	27.5	18.6 – 36.4	No
Rivers	*26.4*	*31.9*	*26.5 – 37.4*	18.2	22.1	17.6 – 26.7	No
Lakes	11.8	24.4	18.2 – 30.6	7.6	15.9	10.8 – 20.9	No
Portland	7.4	11.7	7.9 – 15.4	7.2	11.3	7.6 – 15.0	No
COUNTY	***83.6***	***30.5***	***27.6 – 33.4***	**59.4**	**21.8**	**19.3 – 24.2**	**Yes (+40%)**
STATE	**302.2**	**23.0**	**21.9 – 24.2**	**239.4**	**18.3**	**17.3 – 19.4**	**Yes (+26%)**

Shading and italics indicate that the rate is significantly higher than the state.
Shading and no italics indicate that the rate is significantly lower than the state.
Source: NEDSS, Maine CDC.

Table 6.3. Salmonellosis (2002 to 2007)

HMP	2003 to 2007			2002 to 2006			Any Significant Change Between Time Periods?
	Average Annual Cases	Annual Cases per 100,000	95% Confidence Interval	Average Annual Cases	Annual Cases per 100,000	95% CI	
Brunswick-Harpswell	*5.4*	*20.0*	*12.5 – 27.5*	4.8	17.8	10.7 – 25.0	No
Portland	8.8	13.9	9.8 – 18.0	8.6	13.5	9.5 – 17.5	No
Rivers	9.4	11.4	8.1 – 14.6	10.4	12.6	9.2 – 16.1	No
Casco Bay	4.6	8.8	5.2 – 12.4	5.4	10.4	6.5 – 14.3	No
Lakes	3.6	7.4	4.0 – 10.9	5.2	10.9	6.7 – 15.0	No
COUNTY	**31.8**	**11.6**	**9.8 – 13.4**	**34.4**	**12.6**	**10.7 – 14.5**	**No**
STATE	**142.2**	**10.8**	**10.0 – 11.6**	**144.0**	**11.0**	**10.2 – 11.8**	**No**

Shading and italics indicate that the rate is significantly higher than the state.
Source: NEDSS, Maine CDC.

With Lyme disease, the most prominent finding is that between time periods, the Casco Bay region has seen a 47% increase in their incidence rate. Also notable are both Brunswick-Harpswell and the Rivers regions now having significantly higher rates than the state. Salmonellosis rates are only elevated in the Brunswick-Harpswell region. There are also no significant differences found between time periods.

Table 6.4. Gonorrhea (2002 to 2007)

HMP	2003 to 2007			2002 to 2006			Any Significant Change Between Time Periods?
	Average Annual Cases	Annual Cases per 100,000	95% Confidence Interval	Average Annual Cases	Annual Cases per 100,000	95% CI	
Portland	*35.2*	*55.5*	*47.3 – 63.6*	*35.2*	*55.2*	*47.1 – 63.4*	No
Rivers	13.0	15.7	11.9 – 19.5	12.0	14.6	10.9 – 18.3	No
Brunswick-Harpswell	3.4	12.6	6.6 – 18.6	3.8	14.1	7.8 – 20.5	No
Casco Bay	3.6	6.9	3.7 – 10.1	3.4	6.5	3.4 – 9.6	No
Lakes	3.2	6.6	3.4 – 9.9	3.4	7.1	3.7 – 10.5	No
COUNTY	***58.8***	***21.5***	***19.0 – 23.9***	***58.2***	***21.3***	***18.9 – 23.8***	**No**
STATE	**168.4**	**12.8**	**12.0 – 13.7**	**173.2**	**13.3**	**12.4 – 14.1**	**No**

Shading and italics indicate that the rate is significantly higher than the state.
Shading and no italics indicate that the rate is significantly lower than the state.
Source: HIV, STD, and Viral Hepatitis Program; Maine CDC.

Table 6.5. Meningitis and Septicemia (2002 to 2007)

HMP	2003 to 2007			2002 to 2006			Any Significant Change Between Time Periods?
	Average Annual Cases	Annual Cases per 100,000	95% Confidence Interval	Average Annual Cases	Annual Cases per 100,000	95% CI	
Portland	*7.8*	*12.3*	*8.4 – 16.1*	*7.4*	*11.6*	*7.9 – 15.4*	No
Rivers	*9.6*	*11.6*	*8.3 – 14.9*	*8.0*	*9.7*	*6.7 – 12.7*	No
Lakes	3.8	7.9	4.3 – 11.4	3.8	7.9	4.4 – 11.5	No
Casco Bay	3.2	6.1	3.1 – 9.1	2.6	5.0	2.3 – 7.7	No
Brunswick-Harpswell	0.8	3.0	0.1 – 5.9	0.4	1.5	0.0 – 3.5	No
COUNTY	***25.2***	***9.2***	***7.6 – 10.8***	***22.2***	***8.1***	***6.6 – 9.7***	**No**
STATE	**77.4**	**5.9**	**5.3 – 6.5**	**71.2**	**5.4**	**4.9 – 6.0**	**No**

Shading and italics indicate that the rate is significantly higher than the state.
Shading and no italics indicate that the rate is significantly lower than the state.
Source: NEDSS, Maine CDC.

Portland also has an elevated rate of gonorrhea, and the Casco Bay and Lakes HMPs have lower rates than the state. Portland, the Rivers region, and Cumberland County as a whole all have higher rates of meningitis and septicemia than the state.

Table 6.6. Other Infectious Disease Indicator

Indicator	Time Period	Data Source	Cumberland	MAINE
Late Diagnosis of HIV (number, AIDS diagnosis within 12 months of first HIV diagnosis)	2001-2005	ME CDC	31	96

7. Maternal and Child Health

Table 7.1. Birth Rate (2001 to 2006)

HMP	2002 to 2006			2001 to 2005			Any Significant Change Between Time Periods?
	Average Annual Births	Average Annual Births per 1,000 Females 15-44	95% Confidence Interval	Average Annual Births	Average Annual Births per 1,000 Females 15-44	95% CI	
Lakes	535	54.1	52.0 – 56.1	528	53.3	51.3 – 55.4	No
Casco Bay	536	53.8	51.7 – 55.8	*542*	*54.4*	*52.3 – 56.4*	No
Rivers	900	52.4	50.8 – 53.9	900	52.4	50.8 – 53.9	No
Portland	786	49.0	47.5 – 50.6	777	48.5	46.9 – 50.0	No
Brunswick-Harpswell	273	48.7	46.1 – 51.2	265	47.2	44.7 – 49.7	No
COUNTY	**3,030**	**51.6**	**50.8 – 52.5**	**3,012**	**51.3**	**50.5 – 52.1**	**No**
STATE	**13,919**	**52.0**	**51.6 – 52.4**	**13,839**	**51.7**	**51.3 – 52.1**	**No**

Shading and italics indicate that the rate is significantly higher than the state.
Shading and no italics indicate that the rate is significantly lower than the state.
Source: Office of Health Data and Program Management, Maine CDC.

Table 7.2. Women, Infants, and Children (WIC) Usage* (July 2006 to June 2007)

HMP	Women on WIC (#)	Females 15 to 44 on WIC (%)	95% Confidence Interval (%)	Children Under 5 on WIC (#)	Children Under 5 on WIC (%)	95% CI
Portland	581	3.6	3.3 – 3.9	*1,423*	*43.1*	*41.4 – 44.7*
Brunswick-Harpswell	162	2.9	2.4 – 3.3	459	29.9	27.6 – 32.2
Lakes	281	2.8	2.5 – 3.2	710	26.5	24.9 – 28.2
Rivers	405	2.4	2.1 – 2.6	943	19.7	18.6 – 20.9
Casco Bay	124	1.2	1.0 – 1.5	332	10.5	9.5 – 11.6
COUNTY	**1,553**	**2.6**	**2.5 – 2.8**	**3,867**	**25.0**	**24.4 – 25.7**
STATE	**9,895**	**3.7**	**3.6 – 3.8**	**25,198**	**35.6**	**35.3 – 36.0**

*Defined as being a client at any point.
Shading and italics indicate that the rate is significantly higher than the state.
Shading and no italics indicate that the rate is significantly lower than the state.
Source: WIC Program, People's Regional Opportunity Program.

Both Portland and the Brunswick-Harpswell region have significantly lower birth rates than the state. As for WIC services, all but Portland have lower rates of WIC participation than the state. Portland has a significantly higher WIC usage rate among children under five years old.

Table 7.3. Other Maternal and Child Health Indicators

Indicator	Time Period	Data Source	Cumberland	Maine
Infant Mortality (rate per 1,000 live births)	2001-2005	Vital Stats	5.2 (4.0-6.4)	5.5 (5.0-6.0)
Live Births with Low Birth Weight <2500 grams (percent of live births)	2006	Vital Stats	6.8 (6.0-7.6)	6.8 (6.4-7.2)
Infants Born to Women Receiving First Trimester Prenatal Care (percent)	2006	PRAMS	*89.7 (88.6-90.8)*	87.4 (86.8-88.0)
Teen Births Ages 15-17 (rate per 1,000 female population)	2003-2005	Vital Stats	8.7 (7.2-10.2)	11.2 (10.5-11.9)
Mothers who ever breastfed	2005	PRAMS	84.6 (78.5-90.7)	80.3 (77.4-83.2)

Shading and italics indicate that the rate is significantly higher than the state.
Shading and no italics indicate that the rate is significantly lower than the state.

Cumberland County scores well on two other maternal and child health indicators, reporting a higher proportion of prenatal care in the first three months, and a lower teen birth rate than the state.

8. Quality of Life

Table 8.1. Quality of Life Indicator

Indicator	Time Period	Data Source	Cumberland	MAINE
Adults Reporting Fair or Poor Health Status in last 30 days (percent)	2007	BRFSS	9.5 (7.5-11.4)	13.5 (12.5-14.5)

Shading and no italics indicate that the rate is significantly lower than the state.

Cumberland County adults report 30% fewer days in which they feel their health is “fair” or “poor,” compared to state levels. This indicator is based solely on self-report, not clinical measures.

9. Social and Mental Health

Table 9.1. Social and Mental Health Indicators

Indicator	Time Period	Data Source	Cumberland	MAINE
Adults With 14 or More Days of Frequent Mental Distress in the Past Month (percent)	2006	BRFSS	11.3 (8.1-14.5)	10.0 (8.8-11.2)
Adults With Current Symptoms of Moderate or Severe Depression (percent)	2004-2006	BRFSS	6.5 (3.8-9.2)	7.6 (6.6-8.6)

The above indicators are also self-reported by respondents, and not necessarily based on an actual diagnosis of depression or other mental health issue. Neither indicator is significantly different between Cumberland County and Maine.

10. Socioeconomic Indicators

Table 10.1. Poverty (1999)

HMP	Total Individuals in Poverty (#)	Total Individuals in Poverty (%)	95% Confidence Interval (%)
Portland	*8,844*	*14.1*	*13.8 – 14.3*
Brunswick-Harpswell	1,839	7.5	7.2 – 7.8
Lakes	2,910	6.7	6.4 – 6.9
Rivers	4,766	6.2	6.0 – 6.3
Casco Bay	1,993	4.0	3.9 – 4.2
COUNTY	**20,352**	**7.9**	**7.8 – 8.0**
STATE	**135,501**	**10.9**	**10.9 – 11.0**

Shading and italics indicate that the rate is significantly higher than the state.
Shading and no italics indicate that the rate is significantly lower than the state.
Source: US Census Bureau.

All HMP regions except Portland have a significantly smaller proportion of individuals in poverty than the state. However, these data are a decade old and will not be updated officially until the 2010 Federal Census has been completed.

Table 10.2. Free or Reduced School Lunch Program Eligibility (2006 to 2008)*

School Administrative District (SAD)	2007-2008 School Year			2006-2007 School Year			Any Significant Change Between Time Periods?
	Eligible for Free or Reduced Lunch (#)	Eligible for Free or Reduced Lunch (%)	95% Confidence Interval (%)	Eligible for Free or Reduced Lunch (#)	Eligible for Free or Reduced Lunch (%)	95% CI (%)	
Portland	*3,042*	*43.3*	*42.1 – 44.4*	*3,028*	*42.8*	*41.7 – 44.0*	No
Lakes (includes 9 towns in Oxford County and 5 in York County)	5,428	38.2	37.4 – 39.0	5,340	36.9	36.1 – 37.7	No
Rivers	3,220	24.1	23.4 – 24.8	2,944	23.1	22.3 – 23.8	No
Brunswick-Harpswell (plus Bowdoin, Bowdoinham, and Topsham)	1,356	22.0	21.0 – 23.1	1,405	22.4	21.3 – 23.4	No
Casco Bay	988	11.9	11.2 – 12.6	877	10.6	9.9 – 11.2	No
COUNTY	**14,034**	**28.6**	**28.2 – 29.0**	**13,594**	**27.8**	**27.4 – 28.2**	**No**
STATE	**73,130**	**37.6**	**37.4 – 37.8**	**71,536**	**36.4**	**36.2 – 36.6**	**Yes (+3%)**

*Among public school students only.
Shading and italics indicate that the rate is significantly higher than the state.
Shading and no italics indicate that the rate is significantly lower than the state.
Source: Maine Department of Education.

Table 10.3. Education* (2000)

HMP	Less than High School (#)	Less than High School (%)	95% Confidence Interval (%)
Brunswick-Harpswell	2,041	11.9	11.4 – 12.3
Portland	5,321	11.7	11.5 – 12.0
Lakes	3,382	11.2	10.8 – 11.5
Rivers	4,793	8.9	8.6 – 9.1
Casco Bay	2,363	6.9	6.6 – 7.1
COUNTY	**17,900**	**9.9**	**9.7 – 10.0**
STATE	**127,288**	**14.6**	**14.6 – 14.7**

*Among those 25 years and over.
Shading and no italics indicate that the percentage is significantly lower than the state.
Source: US Census Bureau.

Similar to poverty rates, Portland students have a higher rate of eligibility for free or reduced school lunches than the state rate. While all HMP regions and the county as a whole have had no significant changes between school years, the state has seen a 3% increase in the rate of eligibility. All parts of Cumberland County have a lower number of residents lacking a high school education than the state overall. The Casco Bay region is the most educated.

Table 10.4. Single Parent Households (2000)

HMP	Single Parent Households (#)	Single Parent Households (%)	95% Confidence Interval (%)
Lakes	1,445	8.6	8.1 – 9.0
Portland	2,415	8.1	7.8 – 8.4
Rivers	2,574	8.1	7.8 – 8.4
Brunswick-Harpswell	776	7.4	6.9 – 7.9
Casco Bay	1,213	6.3	6.0 – 6.7
COUNTY	**8,423**	**7.8**	**7.6 – 8.0**
STATE	**44,558**	**8.6**	**8.5 – 8.7**

Shading and no italics indicate that the rate is significantly lower than the state.
Source: US Census Bureau.

Table 10.5. Seniors Living Alone (2000)

HMP	65 and Over Living Alone (#)	65 and Over Living Alone (% of All 65 and Over)	95% CI (%)
Portland	*3,427*	*38.5*	*37.5 – 39.5*
Brunswick-Harpswell	*1,357*	*31.9*	*30.5 – 33.3*
Rivers	3,369	30.7	29.8 – 31.6
Casco Bay	1,632	26.6	25.5 – 27.7
Lakes	1,244	24.7	23.5 – 25.9
COUNTY	***11,029***	***31.2***	***30.7 – 31.7***
STATE	**55,483**	**30.3**	**30.0 – 30.5**

Shading and italics indicate that the rate is significantly higher than the state.
Shading and no italics indicate that the rate is significantly lower than the state.
Source: US Census Bureau.

There are significantly fewer single parent households in all parts of Cumberland County, except for the Lakes Region. Regarding senior citizens who live alone, however, there is greater disparity within the county. Both Portland and Brunswick-Harpswell have a greater proportion of seniors living alone than the state, while the Casco Bay and Lakes regions are lower than the state.

Table 10.6. Food Stamp Usage (2007 to 2008)

HMP	2008			2007			Any Significant Change Between Time Periods?
	Monthly Average on Food Stamps (#)	Monthly Average on Food Stamps (%)	95% Confidence Interval (%)	Monthly Average on Food Stamps (#)	Monthly Average on Food Stamps (%)	95% CI (%)	
Portland	*11,743*	*18.7*	*18.6 – 18.8*	*11,017*	*17.5*	*17.4 – 17.6*	Yes (+7%)
Lakes	4,773	9.7	9.6 – 9.8	4,340	8.8	8.7 – 8.9	Yes (+10%)
Rivers	6,580	7.9	7.8 – 7.9	6,102	7.3	7.3 – 7.4	Yes (+8%)
Brunswick-Harpswell	1,791	6.6	6.5 – 6.7	1,646	6.1	6.0 – 6.2	Yes (+9%)
Casco Bay	2,010	3.8	3.7 – 3.8	1,782	3.4	3.3 – 3.4	Yes (+13%)
COUNTY	**26,897**	**9.8**	**9.7 – 9.8**	**24,887**	**9.0**	**9.0 – 9.1**	**Yes (+8%)**
STATE	**182,324**	**13.8**	**13.8 – 13.9**	**167,576**	**12.7**	**12.7 – 12.7**	**Yes (+9%)**

Shading and italics indicate that the percentage is significantly higher than the state.
Shading and no italics indicate that the percentage is significantly lower than the state.
Source: Maine Department of Human Services.

Table 10.7. Other Socioeconomic Indicators

Indicator	Time Period	Data Source	Cumberland	MAINE
Families Living in Poverty (all ages) Percent	2004	US Census	9.0 (8.9-9.1)	11.3 (11.2-11.4)
Count of Families Living in Poverty (all ages)	2004	US Census	24,708	148,801
Median Annual Household Income	2004	US Census	$49,870	$41,287

Only Portland has a significantly higher percentage of residents on food stamps, while all other regions in Cumberland County are lower than the state rate. However, of note is that all parts of Cumberland County, and the state as a whole, have seen significant increases in the proportion of food stamp users, with the Casco Bay region seeing a 13% increase between 2007 and 2008.

11. Notes on Selected Health Indicators

1.1. **Retail Tobacco Licensees Accessible to Minors**: Vending machines, bars, private clubs, and adult-only facilities are not included.

1.2 to 1.4.
Prescriptions: Includes prescription medications among Schedule II, III, and IV drugs of the Federal Controlled Substances Act. For a complete list, see http://www.usdoj.gov/dea/pubs/scheduling.html.

2.4. **Smoking-related Diagnoses**: Includes cancer of the mouth, pharynx, and lung; emphysema; chronic obstructive pulmonary disease; and chronic bronchitis.

2.5. **Hospital Visits**: These reflect only inpatient stays and not outpatient or emergency department visits. Emergency department visits are counted in Table 2.6.

2.6. **Emergency Department Visits**: Does not include visits that lead to inpatient admission. Those are counted as Hospital Visits in Table 2.5.

3.1. **Population Density**: The average number of people per unit of area (typically a square mile). Calculated by dividing the total population by the total area, and expressed as a ratio (e.g., people per square mile).

3.4. **Disabilities** (United States Census definitions)
Physical Disability: "A condition that substantially limits one or more basic physical activities such as walking, climbing stairs, reaching, lifting, or carrying."
Mental Disability: "Because of a physical, mental, or emotional condition lasting 6 months or more, have any difficulty learning, remembering, or concentrating."
Sensory Disability: "Blindness, deafness, or a severe vision or hearing impairment."
Self-Care Disability: "Because of a physical, mental, or emotional condition lasting 6 months or more, have any difficulty dressing, bathing, or getting around inside the home."

3.5. **Military Service**: Includes both those who are veterans as well as those who are in active duty.

6.5. **Meningitis and Septicemia**: Includes Group A streptococcus, Group B streptococcus cases under 1 year old, Neisseria meningitidis, Haemophilus influenzae, bacterial meningitis, drug-resistant Strep pneumoniae, and Strep pneumoniae cases under 5 years old.

7.1. **Birth Rate**: Calculated by dividing the number of live births by the number of women 15 to 44 years old. This age range is commonly used to represent the childbearing years.

7.2. **Women, Infants, and Children (WIC)**: A federal nutrition program that provides healthy food, nutrition advice, tips for staying healthy, recipes, and resources. Eligible for low-income pregnant women, breastfeeding mothers, and children under five years old.

10.1. **Poverty**: There does not exist a single annual income threshold for all individuals, but rather a complex matrix depending upon one's age, family size, and number of children under 18. For example, in 1999 a single person under 65 years old had a poverty threshold of $8,667, while a family of four with two children under 18 had a poverty threshold of $16,895.

Appendix A: Community Health Status Indicators

PUBLIC HEALTH IN AMERICA

VISION

Healthy People in Healthy Communities

MISSION

Promote Physical and Mental Health and Prevent Disease, Injury, and Disability

PUBLIC HEALTH

- Prevents epidemics and spread of disease
- Protects against environmental hazards
- Prevents injuries
- Promotes and encourages healthy behaviors
- Responds to disasters and assists communities in recovery
- Assures the quality and accessibility of health services

ESSENTIAL PUBLIC HEALTH SERVICES

- Monitor health status to identify community health problems
- Diagnose and investigate health problems and health hazards in the community
- Inform, educate, and empower people about health issues
- Mobilize community partnerships to identify and solve health problems
- Develop policies and plans that support individual and community health efforts
- Enforce laws and regulations that protect health and ensure safety
- Link people to needed personal health services and assure the provision of health care when otherwise unavailable
- Assure a competent public health and personal health care workforce
- Evaluate effectiveness, accessibility, and quality of personal and population-based health services
- Research for new insights and innovative solutions to health problems

Source: Public Health Functions Steering Committee, Fall 1994.

CONFIDENCE INTERVALS

SUMMARY MEASURES OF HEALTH page 4

	Value	Confidence Interval
ALL CAUSES OF DEATH	810.5	(791.8 - 829.2)
SELF-RATED HEALTH STATUS	10.8%	(9.6 - 12.0%)
AVERAGE NUMBER OF UNHEALTHY DAYS IN PAST MONTH	5.9	(5.4 - 6.3)

ADULT PREVENTIVE SERVICES USE (%) page 10

	Value	Confidence Interval
Pap Smears (18+)	85.8%	(83.8 - 87.8%)
Mammography (50+)	85.4%	(82.7 - 88.2%)
Sigmoidoscopy (50+)	57.3%	(54.4 - 60.2%)
Pneumonia vaccine (65+)	68.9%	(64.8 - 72.9%)
Flu vaccine (65+)	75.4%	(71.7 - 79.1%)

RISK FACTORS FOR PREMATURE DEATH page 11

	Value	Confidence Interval
No exercise	17.0%	(15.6 - 18.5%)
Few Fruits/Vegetables	68.6%	(66.2 - 71.0%)
Obesity	16.6%	(15.2 - 18.1%)
High Blood Pressure	20.3%	(18.3 - 22.3%)
Smoker	18.9%	(17.3 - 20.6%)
Diabetes	5.6%	(4.8 - 6.5%)

FEDERAL PARTNERS

ATSDR
Agency for Toxic Substances and Disease Registry
atsdr.cdc.gov

CDC
Center for Disease Control and Prevention
www.cdc.gov

HRSA
Health Resources and Services Administration
www.hrsa.gov

NLM
National Library of Medicine
www.nlm.nih.gov

SELECTED TERMS

Age-Adjusted death rates allow comparison of rates between communities with different age structures. Rates have been adjusted to the year 2000 standard, the standard recommended for years 1999 and later.

Expected number of infectious disease cases has been calculated by applying the rate observed for all the peer counties to the county population.

Death rates and birth measures are consistent with U.S. Healthy People 2010 objectives.

EPA air quality standards measured and exceeded are reported. Monitoring is conducted in areas believed to be at risk and is not done in every jurisdiction.

Leading causes of death are provided for underlying cause of death categories constituting 10% or more of deaths in that race/ethnicity and age group.

Prevalence rates indicate the number in a population who have a certain characteristic at any time during the period. The BRFSS survey has been weighted to represent the State's adults.

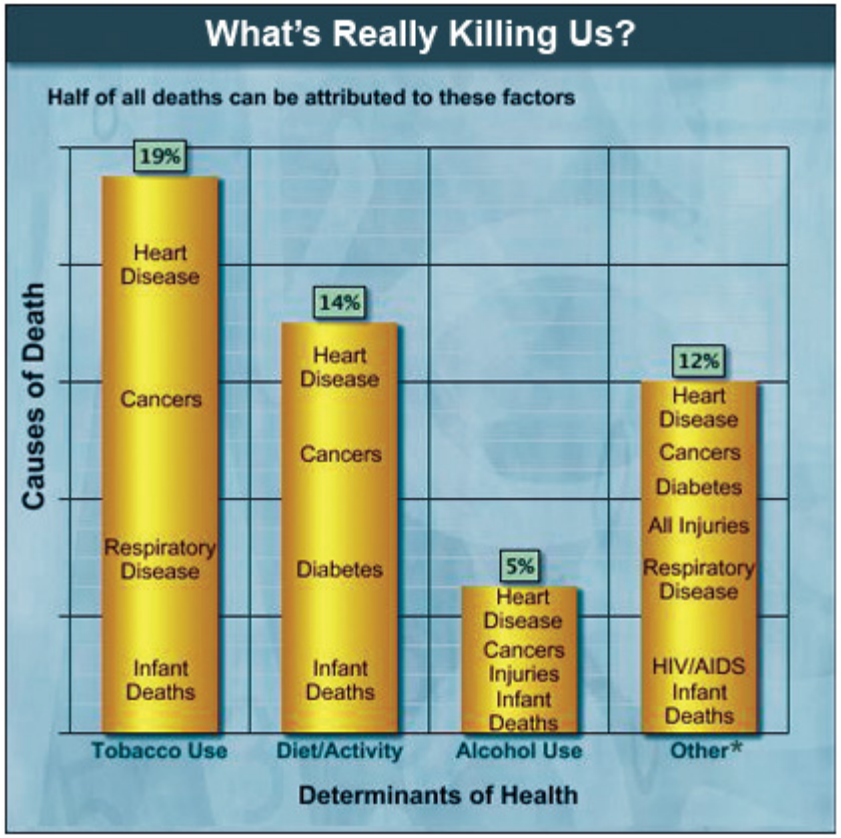
Persons enrolled in Medicaid or Medicare are program beneficiaries. The number of persons under age 65 receiving Medicare may represent a measure of disability in children and adults. Persons over age 65 with Medicaid coverage may also represent a population having grater medical needs.

Relative health importance determination of unfavorable were rates above the peer or the U.S. rate.

Vulnerable populations of the work disabled, those depressed, and recent drug users were estimated. Work disabled used a regression-based county-specific estimate. National age- or race-specific rates of major depression and recent drug use were applied to the county population to obtain the county estimate.

For complete information regarding data definitions and sources, please refer to the Data Sources, Definitions, and Notes available on HRSA's web site at:

communityhealth.hhs.gov



* Other lifestyle and personal behavior (nongenetic) risk factors include microbes, toxins, firearms, sexual behavior, motor vehicles, and drug use. Source: McGinnis, J.M., & Foege, W.H. (1993). Actual causes of death in the United States. JAMA., 270(18), 2207-2212.

While we may measure deaths due to heart disease, cancers, or infant deaths, we should always keep in mind that factors such as tobacco, diet, activity, and alcohol use substantially contribute to these deaths. For example, as shown in the above graphic, tobacco use accounts for 19 percent of all U.S. deaths.

DEMOGRAPHIC INFORMATION

Cumberland County, ME

Population size[1]	274,950
Population density (people per square mile)[2]	329
Individuals living below poverty level[3]	8.4%
Age distribution[1]	
Under Age 19	22.9%
Age 19-64	63.5%
Age 65-84	11.6%
Age 85+	2.0%
Race/Ethnicity[1]	
White	95.3%
Black	1.5%
American Indian	0.3%
Asian/Pacific Islander	1.6%
Hispanic origin (non add)	1.2%

PEER COUNTIES

Peer counties (counties and county-like geographic areas) in stratum number 9 were stratified on the basis of the following factors: frontier status, population size, poverty, age. Below are peer county ranges representing the 10th and 90th percentile of values. This trimmed range of peer county value is used consistently throughout the report.

Population size[1]	274,950 - 490,593
Population density (people per square mile)[2]	197 - 1,227
Individuals living below poverty level[3]	4.7 - 9.6%
Age distribution[1]	
Under Age 19	24.0 - 28.0%
Age 19-64	61.9 - 66.5%
Age 65-84	7.5 - 11.0%
Age 85+	1.1 - 2.1%
Race/Ethnicity[1]	
White	70.1 - 94.0%
Black	1.1 - 20.6%
American Indian	0.2 - 1.4%
Asian/Pacific Islander	1.6 - 7.8%
Hispanic origin (non add)	2.1 - 17.4%

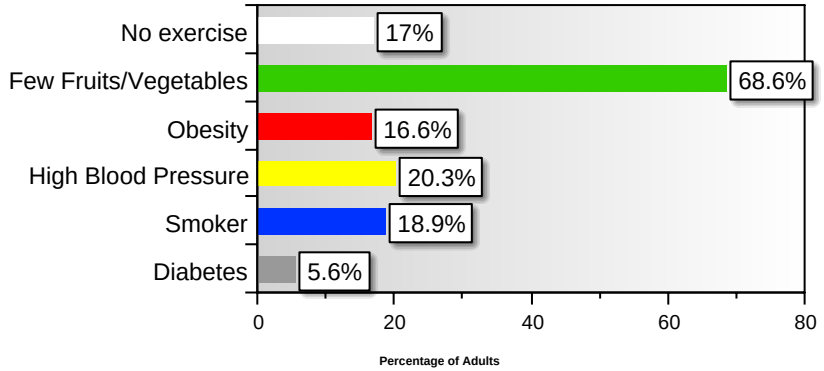
nda No data available.

[1] The Census Bureau. Current Population Estimates, 2005.
[2] HRSA. Area Resource File, 2005.
[3] The Census Bureau. Small Area Income Poverty Estimates, 2003.

RISK FACTORS FOR PREMATURE DEATH[1]

Cumberland County, ME

Communities may wish to obtain information about these measures, collected and monitored at local level.



nrf No report, survey sample size fewer than 50.

[1] CDC. Behavioral Risk Factor Surveillance System, 2000-2006.

ACCESS TO CARE

Cumberland County, ME

In addition to use of services, access to care may be characterized by medical care coverage and service availability.

Uninsured individuals[1]	15,057
Medicare beneficiaries[2]	
Elderly (Age 65+)	35,270
Disabled	7,066
Medicaid beneficiaries:	
The number of beneficiaries for each county is not available nationally, but may be obtained from your state.	
Primary care physicians per 100,000 pop.[2]	159.3
Dentists per 100,000 pop.[2]	64.4
Community/Migrant Health Centers[3]	Yes
Health Professional Shortage Area[3]	No

nda No data available.

[1] The Census Bureau. Small Area Health Insurance Estimates Program, 2000.
[2] HRSA. Area Resource File, 2005.
[3] HRSA. Geospatial Data Warehouse, 2007.

PREVENTIVE SERVICES USE

Cumberland County, ME

INFECTIOUS DISEASE CASES[1]

These diseases respond to public health control efforts. The expected number is based on the occurrence of cases among peer counties.

	Reported Cases	Expected Cases
AIDS	rna	rna
Tuberculosis	rna	rna
Haemophilus influenzae B	1	8
Hepatitis A	7	24
Hepatitis B	11	16
Measles	0	0
Pertussis	10	24
Congenital Rubella Syndrome	0	0
Syphilis	3	8

Indicates a status favorable to peers.

Indicates a status less than favorable.

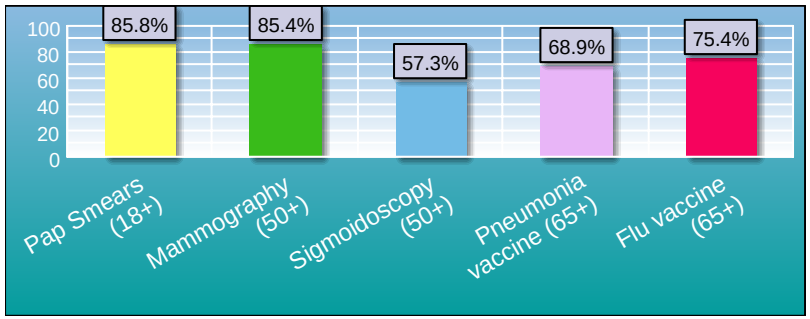
rna The release of data for all counties has not been authorized

nda No data available.

CHILD PREVENTIVE SERVICES USE

Indicators such as immunizations, dental caries, and the prevalence of lead screening are not collected at the national level and must be obtained locally.

ADULT PREVENTIVE SERVICES USE (%)[2]



nrf No report, survey sample size fewer than 50.

[1] CDC. National Notifiable Diseases Surveillance System, 2001-2003.

[2] CDC. Behavioral Risk Factor Surveillance System, 2000-2006.

PEER COUNTIES

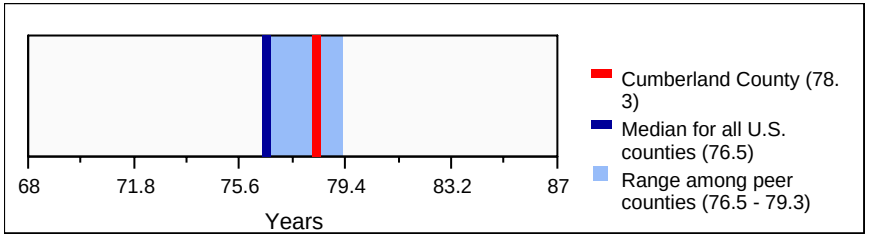
A distinctive aspect of this report is the ability to compare a county with its peers, those counties similar in population composition and selected demographics. Strata, or peer group size averages 36 and ranges from 15 to 62 counties. There are a total of 88 strata. Listed below are the 23 peer counties in stratum number 9. Due to the population size of counties within this stratum, data on vital statistics (e.g. births and deaths) and nationally notifiable diseases were aggregated across the most recent 3 year time period (2001-2003) in order to ensure stable estimates.

Alaska
Anchorage Borough
California
Sonoma County
Colorado
Boulder County
Connecticut
New London County
Delaware
New Castle County
Indiana
St. Joseph County
Iowa
Polk County
Maryland
Anne Arundel County
Michigan
Washtenaw County
Nevada
Washoe County
New Hampshire
Hillsborough County
New Hampshire
Rockingham County
New Jersey
Mercer County
Morris County
Somerset County
New York
Dutchess County
Ohio
Butler County
Oregon
Clackamas County
Pennsylvania
Chester County
York County
Virginia
Henrico County
Prince William County
Wisconsin
Dane County

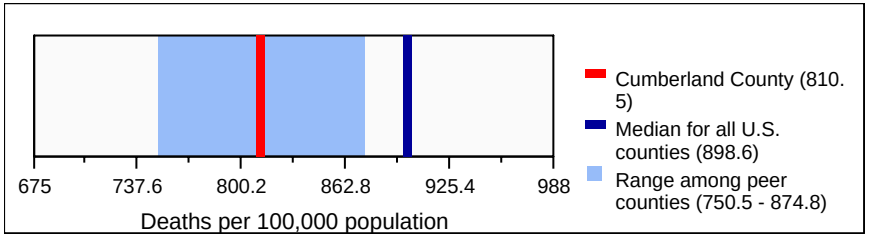
SUMMARY MEASURES OF HEALTH

Cumberland County, ME

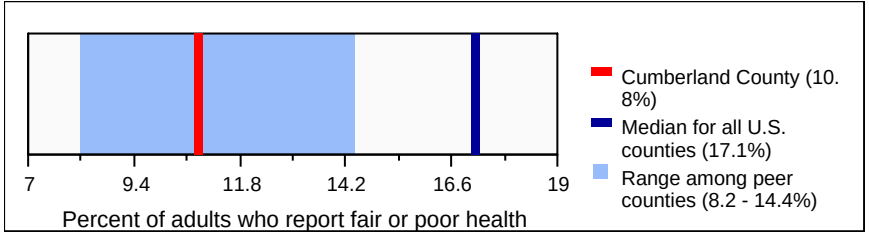
AVERAGE LIFE EXPECTANCY[1]



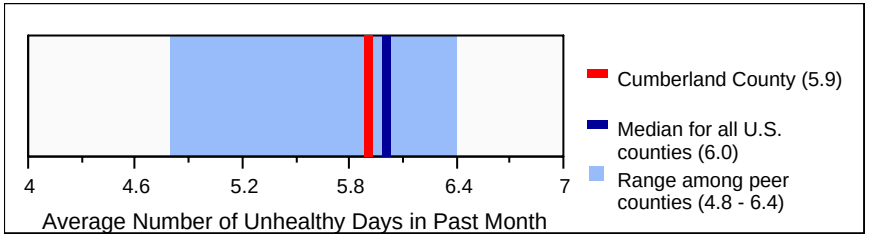
ALL CAUSES OF DEATH[2]



SELF-RATED HEALTH STATUS[3]



AVERAGE NUMBER OF UNHEALTHY DAYS IN PAST MONTH[3]



nrf No report, survey sample size fewer than 50.

nda No data available.

[1] Murray et al., PLoS Medicine 2006 Vol. 3, No. 9, e260 doi:10.1371/journal.pmed.0030260 .

[2] NCHS. Vital Statistics Reporting System, 2001-2003.

[3] CDC. Behavioral Risk Factor Surveillance System, 2000-2006.

VULNERABLE POPULATIONS

Cumberland County, ME

Vulnerable populations may face unique health risks and barriers to care, requiring enhanced services and targeted strategies for outreach and case management.

Vulnerable Populations Include People Who[1]

Have no high school diploma (among adults age 25 and older)	18,824
Are unemployed	5,808
Are severely work disabled	5,432
Have major depression	19,388
Are recent drug users (within past month)	19,935

nda No data available.

[1] The most current estimates of prevalence, obtained from various sources (see the Data Sources, Definitions, and notes for details), were applied to 2005 mid-year county population figures .

ENVIRONMENTAL HEALTH

Cumberland County, ME

INFECTIOUS DISEASES[1]

	Cases Reported	Expected
E.coli	12	16
Salmonella	98	105
Shigella	7	57

TOXIC CHEMICALS RELEASED ANNUALLY[2]: 351,250 pounds

NATIONAL AIR QUALITY STANDARDS MET BY COUNTY[3]

Carbon Monoxide	Nitrogen Dioxide	Sulfur Dioxide	Ozone	Particulate Matter	Lead
Yes	Yes	Yes	Yes	Yes	Yes

Indicates a status favorable to peers.

Indicates a status less than favorable.

nda No data available.

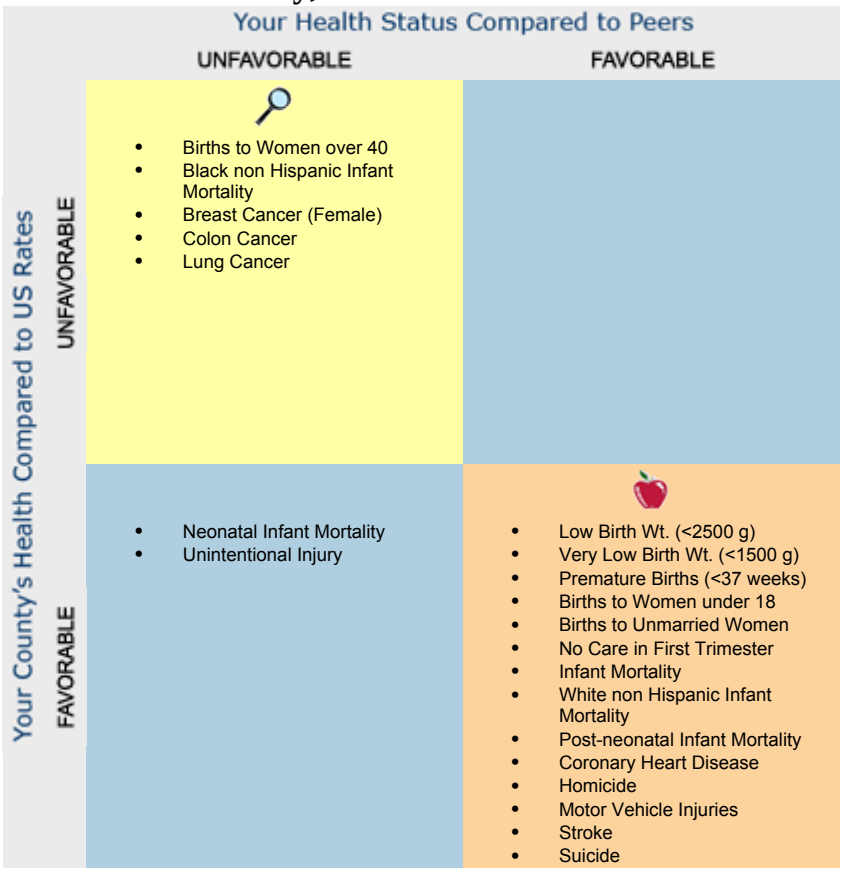
[1] CDC. National Notifiable Diseases Surveillance System, 2001-2003.

[2] EPA. Toxic Release Inventory (TRI) Explorer Report, 2005.

[3] EPA. AIRSData, 2006.

RELATIVE HEALTH IMPORTANCE

Cumberland County, ME



The Relative Health Importance table creates four categories of relative concern by simply comparing a county to its peers and to the U.S.

A county's indicators in the upper left-hand box (🔍) are higher than the U.S. and its peers and may warrant more attention. Conversely, indicators in the lower right-hand box (🍎) of the table compare favorably to both peers and the U.S. The other boxes represent intermediate levels of health where a county's rate is higher than either its peers or the U.S., but not both.

Source: Measures of Birth and Death tables, pages 6 - 7.

NATIONAL LEADING CAUSES OF DEATH[1]

Cumberland County, ME

	White	Black	Other	Hispanic
Under Age 1				
Complications of Pregnancy/Birth	67%	nrf	nrf	nrf
Birth Defects	15%	nrf	nrf	nrf
Ages 1-14				
Injuries	nrf	nrf	nrf	nrf
Cancer	nrf	nrf	nrf	nrf
Homicide	nrf	nrf	nrf	nrf
Ages 15-24				
Injuries	61%	nrf	nrf	nrf
Homicide	nrf	nrf	nrf	nrf
Suicide	11%	nrf	nrf	nrf
Cancer	nrf	nrf	nrf	nrf
Ages 25-44				
Injuries	31%	nrf	nrf	nrf
Cancer	20%	nrf	nrf	nrf
Heart Disease	nrf	nrf	nrf	nrf
Suicide	12%	nrf	nrf	nrf
HIV/AIDS	nrf	nrf	nrf	nrf
Homicide	nrf	nrf	nrf	nrf
Ages 45-64				
Cancer	40%	nrf	nrf	nrf
Heart Disease	21%	nrf	nrf	nrf
Ages 65+				
Heart Disease	24%	nrf	nrf	nrf
Cancer	23%	nrf	nrf	nrf

nrf No report, fewer than 20 deaths in race/ethnicity and age group or less than 10% of the deaths.

nda No data available.

Local data are presented for the Nation's top leading causes of death in each age group. Columns, within age categories, do not total 100% because all causes of death are not listed.

The most complete ethnicity data available are reported.

[1] NCHS. Vital Statistics Reporting System, 2001-2003.

MEASURES OF BIRTH AND DEATH[1]

Cumberland County, ME

County Percent / C.I.			Peer County Range		Birth Measures	U.S. Percent 2003	Healthy People 2010 Target
6.4	(5.9 , 6.9)	🍎	6.3 - 8.9		Low Birth Wt. (<2500 g)	7.9	5.0
1.3	(1.1 , 1.5)	🍎	0.9 - 1.8		Very Low Birth Wt. (<1500 g)	1.4	0.9
9.8	(9.2 , 10.4)	🍎	9.1 - 13.3		Premature Births (<37 weeks)	12.3	7.6
1.4	(1.1 , 1.6)	🍎	0.9 - 3.7		Births to Women under 18	3.4	No objective
3.9	(3.5 , 4.3)	🔎	2.0 - 4.7		Births to Women over 40	2.6	No objective
22.5	(21.7 , 23.4)	🍎	16.5 - 34.8		Births to Unmarried Women	34.6	No objective
8.5	(7.9 , 9.1)	🍎	8.2 - 18.4		No Care in First Trimester	16.0	10.0

County Rate / C.I.			Peer County Range		Infant Mortality[2]	U.S. Rate 2003	Healthy People 2010 Target
4.8	(3.5 , 6.4)	🍎	3.6 - 8.0		Infant Mortality	6.8	4.5
4.2	(2.9 , 5.9)	🍎	3.2 - 6.4		White non Hispanic Infant Mortality	5.7	4.5
19.7	(6.4 , 45.9)	🔎	0.0 - 17.2		Black non Hispanic Infant Mortality	13.6	4.5
nrf	(nrf , nrf)		2.2 - 8.5		Hispanic Infant Mortality	5.6	4.5
3.9	(2.7 , 5.4)	🔎	2.7 - 5.7		Neonatal Infant Mortality	4.6	2.9
0.9	(0.4 , 1.7)	🍎	0.8 - 2.3		Post-neonatal Infant Mortality	2.2	1.2

County Rate / C.I.			Peer County Range		Death Measures[3]	U.S. Rate 2003	Healthy People 2010 Target
26.7	(22.2 , 31.3)	🔎	21.8 - 29.2		Breast Cancer (Female)	25.3	21.3
21.7	(18.6 , 24.7)	🔎	16.1 - 21.4		Colon Cancer	19.1	13.7
120.7	(113.5 , 127.8)	🍎	120.7 - 194.6		Coronary Heart Disease	172.0	162.0
1.2	(0.6 , 2.3)	🍎	1.1 - 6.2		Homicide	6.0	2.8
59.9	(54.7 , 65.0)	🔎	43.6 - 60.6		Lung Cancer	54.1	43.3
9.4	(7.4 , 11.7)	🍎	8.2 - 15.4		Motor Vehicle Injuries	14.8	8.0
46.5	(42.0 , 50.9)	🍎	43.1 - 64.9		Stroke	53.0	50.0
9.8	(7.8 , 12.2)	🍎	5.3 - 14.3		Suicide	10.8	4.8
25.2	(21.8 , 28.5)	🔎	14.6 - 25.2		Unintentional Injury	37.3	17.1

The total number of births during this time period was 9,013 and the total number of deaths was 7,264.

🍎 Indicates a status favorable to peers.

🔎 Indicates a status less than favorable.

nrf No report, fewer than 500 births and 5 events (birth measures and infant mortality) or fewer than 10 events (death measures) occurred during the specified time period.

nda No data available.

[1] NCHS. Vital Statistics Reporting System, 2001-2003.

[2] Infant mortality: deaths per 1000 live births (Neonatal: <28 days; post-neonatal: day 28 to under one year) .

[3] Rates are age-adjusted to the year 2000 standard; per 100,000 population .