

Looking Toward 2000 - State Health Assessment

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BEHAVIORAL RISKS

HIGHLIGHTS

Nearly one-fifth of all deaths in the U.S. and in Connecticut are estimated to be related to tobacco smoking.

About 3 in 10 high school students currently smoke.

Of all respondents aged 18+, 2.5% reported that they drink and drive. Between 1990 and 1995, the rate of binge drinking among 18-24 year olds decreased in Connecticut.

More than 20% of Connecticut adults do not engage in any leisure time physical activity.

One-quarter of Connecticut's adult population is overweight. About 1 in 5 women and nearly 3 in 10 men were considered overweight, based on their self-reported height and weight.

Nearly 1 in 5 adults has been told by a health professional that his or her blood pressure is high.

Two-thirds of Connecticut adults do not eat the recommended total of five fruits and vegetables daily.

INTRODUCTION

The Behavioral Risk Factor Surveillance System (BRFSS) is a statewide telephone survey of non-institutionalized adults aged 18 and older that provides prevalence estimates for key behavioral risk factors. Many of the risk factors assessed are directly related to several of the chronic disease conditions described in the *Chronic Diseases* section of this chapter. Table 3-9 provides a concise overview of the relationship between several modifiable risk factors (including behavioral factors) and various chronic diseases.

Table 3-9

Interrelationships between Various Chronic Diseases and Modifiable Risk Factors

(+ = Established risk factor, ? = Possible risk factor)

Risk Factor	CVD ^b	Cancer	Chronic Lung Disease	Diabetes	Cirrhosis	Musculo-skeletal Disease	Neuro-logic Disorder
Tobacco Use	+	+	+			+	?
Alcohol Use	?	+			+	+	+

High Cholesterol	+						
High Blood Pressure	+						
Diet	+	+	?	?		+	?
Physical Inactivity	+	+		+		+	
Obesity	+	+		+		+	+
Stress	?	?					
ETS c	?	+	+				
Occupation		+	+		?	+	?
Pollution		+	+				+
Low SES d	+	+	+	+	+	+	

b CVD = Cardiovascular disease, c Environmental Tobacco Smoke, d SES = Socioeconomic Status

Source: Chronic Disease Epidemiology and Control, R.C. Brownson, P. L. Remington, J. R. Davis, (Eds.) American Public Health Association, 1993.

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