Arizona Residents’ View of Prevention

Arizona residents view some behaviors as more strongly associated with prevention than others. At least six in 10 associate wearing a seat belt (78%), not smoking (74%), safe sex (69%), vaccinations for children and adults (65%), and preventive screenings such as mammograms or tests for colon and prostate cancer (60%) with prevention. At least half also associate avoiding excessive drinking (57%); youth safety, such as protection from guns, car crashes and bicycle-related injuries (54%); a healthy diet (52%); physical exercise (52%), safe work practices (50%); and regular physical checkups by a health professional (50%) with prevention.

Keeping one’s weight down (47%), crime-free communities (45%) and protection from bioterrorism (45%) are items that are less associated with prevention by the state’s adult residents. Mental health screening (25%) is the aspect least strongly associated with prevention (Figure 1).

Compared to U.S. adults, Arizonians are less likely to associate prevention with nearly all attributes presented in the poll, with only a few exceptions.
Arizona residents are as likely as U.S. adults to link not smoking and youth safety to prevention in addition. They are more likely than adults nationwide to associate wearing a seat belt in motor vehicles with prevention (78% vs. 73% U.S.).

Residents Support Increased Funding For Prevention Research
Arizona residents think that the U.S. spending on public health research is insufficient (72%, Figure 2). Nearly as many adults in the state (71%) believe U.S. spending on public health research should be at least 2 cents per health care dollar (Figure 3).

**Residents Willing to Pay for Increased Funding of Public Health Research**
A large majority of Arizona residents are in favor of increasing funding for public health research by designating a percent of lottery sales revenues (81%), creating a state tax return check-off for voluntary donations to health research (81%), designating a percent of state tobacco settlement funds (79%), and increasing the sales tax on tobacco products (76%) and alcohol (73%). About half support an increase in sales tax on soft drinks and fast food (52%). However, few residents support increasing the sales tax (37%) or the state income tax (35%, Figure 4).
Chronic Diseases a High Priority for Public Health Research

Majorities of Arizona adults believe that public health research should focus on cancer (97%), heart disease and stroke (96%), diabetes (93%), Alzheimer’s disease (90%), and asthma (90%). HIV/AIDS (88%), mental illness (87%), alcohol and drug abuse (86%), conditions that lower quality of life (84%), conditions caused by poor environmental quality (81%) and overweight and obesity (81%), are also high on the list of priorities for Arizona residents. Although tobacco use (73%) is at the bottom of the list, nearly three in four believe it should be a priority for public health research (Figure 5).

Arizona residents are less likely than U.S. adults to consider Alzheimer’s disease (90% vs. 93% U.S.), HIV/AIDS (88% vs. 91% U.S.) and conditions caused by poor environmental quality a priority (81% vs. 91% U.S.), but they are slightly more likely than adults nationwide to prioritize tobacco use (73% vs. 68% U.S.).

Persuasive Messages for Increasing Support for Public Health Research

Arizona residents indicate messages and arguments to increase support for public health research are very persuasive when they emphasize that research will help improve the health of vulnerable populations (57%), protect loved ones (52%) and help improve access to health care (52%). Arizona adults are slightly less persuaded by arguments to increase support for public health research if these messages focus on lowering health care costs (46%), improving quality of life (46%), improving the environment (42%), increasing life expectancy (39%), making communities safer (39%) or preparing the community to respond to bioterrorism (38%, Figure 6).

Compared to adults nationwide, Arizona residents are less likely to find improving access to health care (52% vs. 60% U.S.) lowering health care costs (46% vs. 57% U.S.), and improving the environment (42% vs. 47% U.S.) persuasive arguments for increasing support for public health research.
Allocating Tobacco Settlement Money

Large majorities of Arizona residents think that the state tobacco settlement money should be spent on programs for the treatment of chronic disease (91%) and research to cure and prevent all diseases (89%). Support for programs to prevent tobacco use (77%) and the treatment of smoking-related health problems (76%) are also popular programs to spend money on. More than half would allocate money to decrease the state budget deficit (58%) and to fund other state programs and services (57%). Fewer Arizona adults (48%) believe that at least some of the funds from the tobacco settlement should go to tax relief (Figure 7).

Candidates’ Position on Funding for Certain Causes Influences Voters

Large majorities of Arizona residents are more likely to vote for elected officials who support more money for education (93%), increased funding for the creation of jobs (89%), more funding on research to find cures for and to prevent all diseases (87%), and health services and health education programs such as vaccinations and prenatal care (88%). Other issues only slightly less likely to influence the voting decisions of Arizona residents include more money for homeland security (82%), and increased funding to protect natural resources and the environment (77%). Compared to U.S. adults as a whole, Arizona adults are more likely than the rest of the nation to vote for a candidate who supports education (93% vs. 89% U.S.), and homeland security (82% vs.71% U.S.). In all other categories Arizonans have similar opinions to the rest of the country (Figure 8.)
Preventable Diseases and Injuries Are a Problem
Almost all (89%) of Arizona adults view preventable diseases and injuries as a health problem today. Only 7% do not consider preventable diseases and injuries to be a health problem in the state of Arizona (Figure 9).

Arizonans Want Equality in Health
Studies show that certain health problems such as diabetes, heart disease and infant mortality happen more often among people with lower incomes and among minorities. Nearly all Arizona residents (94%) believe that it is very or somewhat important to conduct medical or health research to understand and eliminate differences in disease and mortality among people with lower incomes and among minorities (Figure 10).

Public Service Announcements and Health Education Programs Reach Residents
More than seven in 10 Arizona adults changed their actions regarding the use of seat belts (73%), good nutrition (71%) and regular physical activity (71%) as a result of public service announcements and health education programs. These messages also encouraged many Arizonans to change their behavior for the better concerning the use of helmets when doing recreational activities such as biking or skateboarding (50%), moderate alcohol consumption (38%), and smoking cessation (36%, Fig. 11). The numbers include residents who indicated “does not apply” (e.g., non-smokers). If responses were recalculated excluding respondents who said “non-applicable” the numbers would be even higher. 

Preventable Diseases and Injuries are Health Problems
Are preventable diseases and injuries in Arizona today a...
Not Sure
Not a Health Problem
Minor Problem
Major Problem

Figure 9

Important to Eliminate Health Disparities
How important do you feel it is to conduct medical or health research to understand and eliminate differences in health among people with lower incomes and among minorities?
Not Very/Not at All Important
Somewhat Important
Very Important

Figure 10

Public Service Announcements and Health Education Programs
Have public service announcements or health education programs promoting ___ led you to change your behavior for the better?
The use of seatbelts
Good nutrition
Regular physical activity
Helmets (motorcycles, bikes or skateboards)
Moderate consumption of alcohol
Smoking cessation

% Saying “Yes”

Figure 11
Majorities of Arizona residents favor requiring the use of seat belts in people over 12 years of age (92%), requiring minimum standards for physical education in public schools (90%), reducing the pollution and contamination from local factories and businesses (89%), requiring the use of motorcycle helmets (83%), eliminating sales of unhealthy food in public schools (80%), establishing smoke-free environments in all public buildings (79%), as well as limiting cell phone use in cars to hands-free devices.

Many also favor raising taxes on smokeless tobacco products (77%) eliminating advertising of unhealthy food and beverages on public school property (76%), prohibiting people from riding on the back of pickup trucks (74%), and raising taxes on alcohol (74%).

In contrast, controlling the sales of guns was only supported by two-thirds of Arizona residents (66%, Figure 12).
Methodology
The Arizona Public Health Research Survey was commissioned by Research!America and is the 22nd in a series of state surveys conducted for its Prevention Research Initiative, a multi-year effort to build greater national support for public health research. The Arizona survey was conducted with 802 adults ages 18 and older, between October 20, 2004 and November 2, 2004. Support for this survey was provided by a grant from The Robert Wood Johnson Foundation.

Telephone Sample
Harris Interactive conducted a 15-minute telephone survey with a representative sample of 802 adults ages 18 years and older. The survey was conducted from the Harris Interactive telephone center between October 20, 2004 and November 2, 2004. The study relied upon a stratified sampling process to produce representative samples of persons in telephone households in Arizona. The study was conducted in both English and Spanish. Households were selected through computerized random digit dialing (RDD) generated by Survey Sampling, Inc., ensuring that the number of households assigned to each exchange in the “community” was based on the proportion of households in that exchange. Harris Interactive samples make use of random-digit selection procedures to ensure sample representation of persons in households with telephone numbers “listed” in telephone directories, as well as persons in households with telephone numbers that are “unlisted”\(^1\). The sample design also ensures proper representation of households in different geographic regions of the state and in cities, suburbs and rural areas.

Weighting the Data
The survey data were weighted by age, sex, race/ethnicity, education, income, Metropolitan Statistical Area (MSA), household size and the number of telephone lines in the household to reflect the demographic composition of the Arizona population using the March 2003 Current Population Survey from the U.S. Census Bureau. Because of rounding, percentages may not always add to shown net values.

Reliability of Survey Percentages
In theory, with a probability sample of this size, one can say with 95% certainty that the results have a statistical precision of plus or minus 3.5 percentage points of what they would be if the entire adult population of Arizona had been polled with complete accuracy.

National Benchmarks
National benchmark data were collected as part of the Harris Poll with 1,034 adults ages 18 years and older in August 2003.

For more information on this or other surveys commissioned by Research!America:
www.researchamerica.org
1-800-366-CURE

\(^1\) Some households are “unlisted” as the result of a request for an unlisted phone number by the telephone subscriber. Other households are “unlisted” in the published directory because the telephone number was assigned after the publication date of the directory. Samples that are restricted to directory listed numbers only may contain serious sample biases because of the exclusion of various types of unlisted households.