

# Spotlight on Greater Louisville

## 2015 Kentucky Health Issues Poll

Results from the Foundation for a Healthy Kentucky and Interact for Health

RELEASED JUNE 2016

# About the Kentucky Health Issues Poll

In Fall 2015, the Foundation for a Healthy Kentucky and Interact for Health sponsored the Kentucky Health Issues Poll (KHIP), a telephone survey to find out what Kentuckians think about various health issues that impact our communities, our state, and our nation. This report presents the views expressed by respondents from the KIPDA Area Development District. About 22% of Kentuckians live in this 7-county region (*please see “About the Kentucky Health Issues Poll” on page 12 for the list of counties*).

In general, responses from Greater Louisville adults were comparable to the state as a whole. Like the statewide results, in Greater Louisville:

- 7 in 10 (70%) adults favored a statewide smoke-free law
- Adults were divided on a \$1 increase in the Kentucky excise tax on a pack of cigarettes with 47% opposing and 49% favoring
- Nearly 6 in 10 adults (59%) favored increasing the minimum legal age for tobacco purchases from 18 years to 21 years
- More than 8 in 10 adults (87%) favored adopting tobacco-free campus policies in their communities
- A majority favored an increase of the Kentucky minimum wage to \$10.10 per hour (65%)
- About 1 in 10 adults aged 18-64 years were uninsured (13%)
- Two in 10 adults reported a time in the last 12 months when they or a member of their household needed medical care but did not get it or delayed getting it due to cost (19%)
- Three in 10 adults said a member of their household had trouble paying medical bills in the past 12 months (30%)
- More than 4 in 10 adults (44%) reported having a generally favorable opinion of the ACA, and about 1 in 2 (48%) had a generally unfavorable opinion of it
- More than 1 in 10 adults (17%) knew someone who has experienced problems as a result of heroin use
- Nearly 3 in 10 adults (27%) said a family member or friend has had problems as a result of abusing prescription pain medicine
- About 7 in 10 adults (67%) said it would be very difficult or difficult to make change to improve their personal health

There were two key differences in Greater Louisville as compared with the rest of the state. Adults in Greater Louisville were **more likely** to:

- Report incomes over 200% FPL
- Describe their health as “excellent” or “very good”

In 95 out of 100 cases, the statewide estimates will be accurate to  $\pm 2.4\%$  and Greater Louisville estimates to  $\pm 5.5\%$ . There are other sources of variation inherent in public opinion studies, such as non-response, question wording, or context effects that can introduce error or bias.



## Contents

### Opinions about Health Policies.....2

Pass a Statewide Smoke-free Law ..	2
Increase Cigarette Excise Tax and Increase Minimum Age to Purchase Tobacco .....	3
Adopt Policies for Tobacco-free School Campuses .....	4
Increase Kentucky Minimum Wage to \$10.10 .....	4
Identify Priorities for the New Governor and State Legislature .....	5

### Health Insurance and Health Care .....6

Insurance.....	6
Delayed Care and Medical Bills ..	7
Opinions about the Patient Protection and Affordable Care Act .....	8
ACA and Kentuckians .....	9
Drug Misuse: Heroin and Prescription Pain Relievers .....	9

### Demographic Profile ..... 10

Overall Health Status.....	11
Personal Health Challenges .....	11

### About the Kentucky Health Issues Poll ..... 12

## Opinions about Health Policies

Health policies in locations where Kentuckians live, work, and play can create healthier and safer places for our families, co-workers, children, and neighbors—all Kentuckians. The Kentucky Health Issues Poll (KHIP) measures opinions on a wide variety of current health policy issues. In 2015, KHIP asked about statewide, local, and personal health topics.

### Pass a Statewide Smoke-free Law

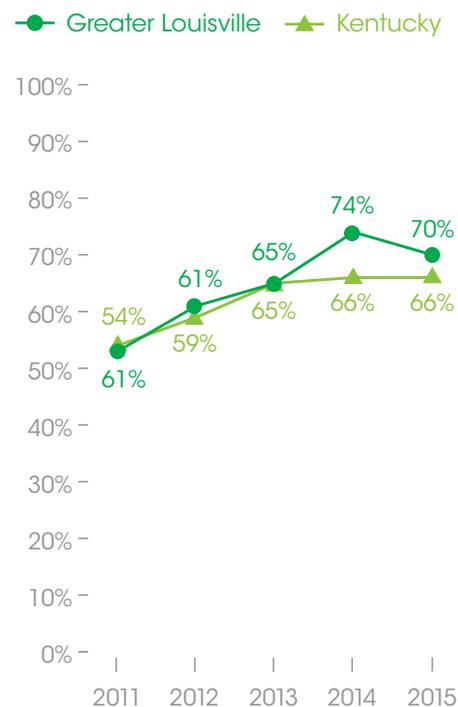
Secondhand smoke poses serious health risks, and smoke-free environments are the only way to fully protect nonsmokers from these hazards.<sup>1</sup> To reduce these risks, many states and communities have adopted smoke-free policies; Kentucky has not. According to the Centers for Disease Control and Prevention, 26 states and the District of Columbia have adopted comprehensive smoke-free laws.<sup>2</sup> The laws cover all workplaces (private and government), including bars and restaurants. At present, only about 1 in 3 Kentuckians (32.7%) are covered by a comprehensive smoke-free law.<sup>3</sup> The 2016 Kentucky legislature introduced a bill for a statewide law eliminating smoking in all indoor public places; however, it died in committee.

In 2011, KHIP began asking Kentuckians their opinions about a comprehensive statewide smoke-free law. For the state as a whole, support for this law has risen from 54% in 2011 to 66% in 2015.

In Greater Louisville, 7 in 10 (70%) adults favored a statewide smoke-free law, while 26% opposed a law, and 4% had no opinion. This is an increase in support from 2011, when just 53% of Greater Louisville adults favored a statewide law. Support for the law in Greater Louisville is similar to results for the state as a whole.

**Would you favor or oppose a state law in Kentucky that would prohibit smoking in most public places, including workplaces, public buildings, offices, restaurants and bars?**

*(Graph presents only those who favor a state law.)*



<sup>1</sup> U.S. Department of Health and Human Services (2006). *The Health Consequences of Involuntary Exposure to Tobacco Smoke: A Report of the Surgeon General*. Washington, DC: Author. Retrieved from <http://www.ncbi.nlm.nih.gov/books/NBK44324/>

<sup>2</sup> Centers for Disease Control and Prevention (2015). *State Smoke-free Indoor Air Fact Sheet*. Atlanta, GA: U.S. Department of Health and Human Services, Centers for Disease Control and Prevention, National Center for Chronic Disease Prevention and Health Promotion, Office on Smoking and Health. Retrieved from <https://chronicdata.cdc.gov/Legislation/STATE-System-Smokefree-Indoor-Air-Fact-Sheet/vgg2-kkcg>

<sup>3</sup> University of Kentucky, Center for Smoke-Free Policy (2016). Percent of the Kentucky Population Covered by 100% Smoke-free Workplace Laws - Updated February 1, 2016. Lexington, KY: Author. Retrieved from <http://www.mc.uky.edu/tobaccopolicy/Ordinances/PercentSmokefreeWorkplaceLawsorRegulationsFEB2016.pdf>

## Increasing the excise tax on a pack of cigarettes by \$1

### Favor

Greater Louisville

49%

Kentucky

45%

### Oppose

Greater Louisville

47%

Kentucky

51%

## Increasing minimum legal age to purchase tobacco products to 21

### Favor

Greater Louisville

59%

Kentucky

60%

### Oppose

Greater Louisville

36%

Kentucky

37%



## Increase Cigarette Excise Tax and Increase Minimum Age to Purchase Tobacco

These policies, increasing taxes and the minimum legal age to purchase tobacco, can deter youth and young adults from starting to smoke cigarettes. At present, more than 1 in 4 Kentucky adults (26%) report being a current smoker. Nationally, 18.1% of adults report smoking cigarettes.

In Kentucky the excise tax on a pack of cigarettes is \$.60. Kentucky is one of only 11 states with an excise tax of \$.60 or less.<sup>4</sup> KHIP asked whether Kentucky adults favor or oppose increasing the excise tax on a pack of cigarettes by \$1 to \$1.60.<sup>5</sup> Kentucky adults were split on this issue with 51% opposing and 45% favoring raising the excise tax on a pack of cigarettes by \$1.

Likewise, adults living in Greater Louisville were also split on this topic with 47% opposing and 49% favoring a \$1 increase in the excise tax on a pack of cigarettes.

Raising the minimum legal age for the purchase of tobacco products would likely delay young adults' initiation of smoking and, in the long run, decrease smoking-related health problems.<sup>6</sup> Only two states, Hawaii and California, have increased the minimum legal age for purchasing tobacco products to 21 years of age. Currently, 145 local jurisdictions in 11 states have enacted ordinances to increase the age to 21.<sup>7</sup> Six in 10 Kentucky adults (60%) favored increasing the minimum legal age for tobacco purchases in Kentucky to 21.<sup>8</sup>

In Greater Louisville, about the same percentage (59%) favored increasing the minimum legal age for tobacco purchases from 18 years to 21 years.

<sup>4</sup> Centers for Disease Control and Prevention, STATE System Excise Tax Fact Sheet, 2015. Retrieved from <https://chronicdata.cdc.gov/Legislation/STATE-System-Excise-Tax-Fact-Sheet/tsmn-nssw>

<sup>5</sup> KHIP asked: "The Commonwealth of Kentucky currently places BOTH a sales tax AND a \$0.60 cent per pack excise tax on the sale of cigarettes. One proposal would raise the current excise tax on a pack of cigarettes by \$1.00. This would bring the total excise tax on a pack of cigarettes to \$1.60 per pack. Do you favor or oppose increasing the excise tax on a pack of cigarettes by \$1.00?"

<sup>6</sup> Institute of Medicine of the National Academies, Public Health Implications of Raising the Minimum Age of Legal Access to Tobacco Products, Mar. 2015. Retrieved from <http://iom.nationalacademies.org/Reports/2015/TobaccoMinimumAgeReport.aspx>

<sup>7</sup> Campaign for Tobacco-Free Kids, Increasing the Minimum Legal Sale Age for Tobacco Products to 21, May 2016. Retrieved from <https://www.tobaccofreekids.org/research/factsheets/pdf/0376.pdf>

<sup>8</sup> KHIP asked: "Some people favor increasing the minimum legal age to purchase tobacco products from 18 years of age to 21 years of age, while others do not. What about you? Do you favor or oppose increasing the minimum legal age to purchase tobacco products from 18 years of age to 21 years of age?"

## Adopt Policies for Tobacco-free School Campuses

Only 29% of Kentucky’s school districts have decided to protect students, staff, teachers, and guests from secondhand smoke by enacting 100% tobacco-free school policies.<sup>9</sup> Kentucky ranks 50<sup>th</sup>, the worst, in the percentage of schools with a policy prohibiting tobacco use in all locations at all times on secondary school campuses.<sup>10</sup> Nationally, 65% of schools have this type of policy.<sup>11</sup>

To measure Kentucky adults’ opinions on this topic, KHIP asked, “Research indicates that the younger a person is when they first try tobacco, the more susceptible they are to becoming addicted. To help keep kids from smoking, some school systems are adopting tobacco-free campus policies that would prohibit the use of tobacco by students, staff, parents or guests while they are on school grounds or at school-sponsored activities, such as field trips and sporting events. Would you favor or oppose schools adopting tobacco-free campus policies in your community?”

More than 8 in 10 Greater Louisville adults (87%) favor tobacco-free campus policies. This is similar to the state as a whole.

## Increase Kentucky Minimum Wage to \$10.10

For most measures of health status, good health is strongly associated with higher income.<sup>12</sup> The current minimum wage in Kentucky for most workers is \$7.25. This is about \$15,000 per year for a full-time employee. In Kentucky, the median per capita income is \$23,741.<sup>13</sup>

A July 2015 executive order by Governor Steve Beshear raised the minimum wage to \$10.10 per hour for state employees. However, this increase was repealed by an executive order from newly elected Governor Matt Bevin in December 2015. Both Lexington and Louisville have recently passed minimum wage increases for public and most private workers.<sup>14</sup> Currently, 29 states and Washington, D.C., have minimum wages above the federal minimum wage of \$7.25 per hour.<sup>15</sup>

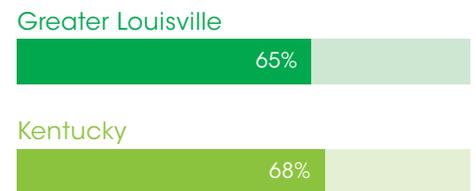
KHIP 2015 asked, “The minimum wage for most workers in the Commonwealth of Kentucky is \$7.25 per hour. Some people favor increasing the minimum wage for all workers in the Commonwealth to \$10.10 per hour, while others oppose increasing the minimum wage for all workers. What about you? Do you favor or oppose the Commonwealth of Kentucky increasing the minimum wage for all workers to \$10.10 per hour?” Nearly 7 in 10 Kentuckians (68%) favored an increase. In Greater Louisville, about the same percent favored an increase of the Kentucky minimum wage to \$10.10 per hour (65%).

### Percentage of adults who favor tobacco-free campus policies in their communities



### Increasing Kentucky Minimum Wage to \$10.10

#### Favor



#### Oppose



<sup>9</sup> Kentucky Department of Education and Kentucky Department for Public Health, Tobacco Prevention and Cessation Program, Kentucky’s 100% Tobacco Free School Districts, Dec. 2015. Retrieved from: <http://www.tobaccofreeschoolsky.org/>

<sup>10</sup> U.S. Department of Health and Human Services, Centers for Disease Control and Prevention, School Health Profiles 2014: Characteristics of Health Programs Among Secondary Schools, 2015. Retrieved from: [http://www.cdc.gov/healthyyouth/data/profiles/pdf/2014/2014\\_profiles\\_report.pdf](http://www.cdc.gov/healthyyouth/data/profiles/pdf/2014/2014_profiles_report.pdf)

<sup>11</sup> U.S. Department of Health and Human Services, Centers for Disease Control and Prevention, School Health Policies and Practices: Trends over time 2000-2014. Retrieved from: [http://www.cdc.gov/healthyyouth/data/shpps/pdf/2014factsheets/trends\\_shpps2014.pdf](http://www.cdc.gov/healthyyouth/data/shpps/pdf/2014factsheets/trends_shpps2014.pdf)

<sup>12</sup> For information on income and health, please see the Centers for Disease Control and Prevention’s report, CDC Health Disparities and Inequalities Report — United States, 2011. Access at [www.cdc.gov/mmwr/preview/ind2011\\_su.html](http://www.cdc.gov/mmwr/preview/ind2011_su.html)

<sup>13</sup> U.S. Census Bureau, QuickFacts, Per capita income in past 12 months (in 2014 dollars), 2010-2014. Retrieved from: <http://www.census.gov/quickfacts/table/PST045215/21>

<sup>14</sup> Reuters: Lexington becomes second Kentucky city to approve minimum wage hike. Nov. 19, 2015. Retrieved from <http://www.reuters.com/article/us-wagelexington-idUSKCN0T909W20151120>

<sup>15</sup> National Conference of State Legislatures, State Minimum Wages: 2016 Minimum Wage by State. Retrieved from: <http://www.ncsl.org/research/labor-and-employment/state-minimum-wagechart.aspx>



## Identify Priorities for the New Governor and State Legislature

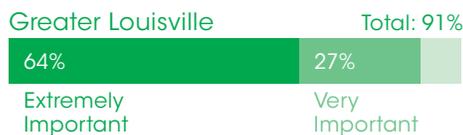
The 2015 Kentucky Health Issues Poll asked Kentuckians what they thought were the most important issues for the next Governor and Kentucky Legislature to work on in the next year. About 9 in 10 Kentucky adults said it was extremely or very important for policymakers to work to improve Kentucky’s economy (91%), the quality of K-12 public education (90%), and the job situation (89%).

When compared to the state as a whole, adults in Greater Louisville concurred on the importance legislative priorities for the next year.

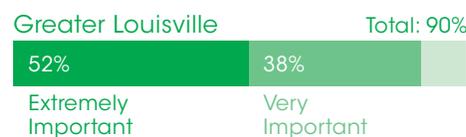
### How important is it to you that the next Governor and the Kentucky Legislature work on each of the following issues in the next year?

*(Only Extremely important and Very important reported here.)*

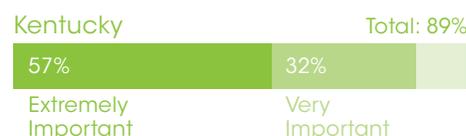
#### Improving the quality of K-12 public education in Kentucky



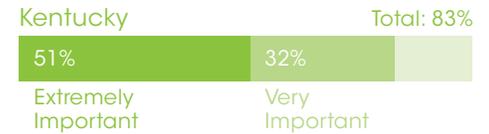
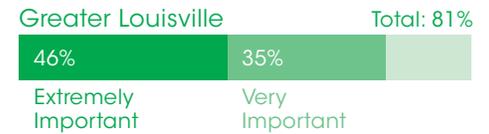
#### Improving Kentucky’s economy



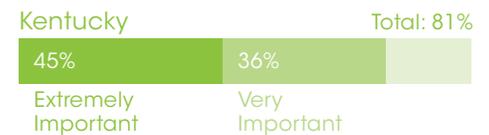
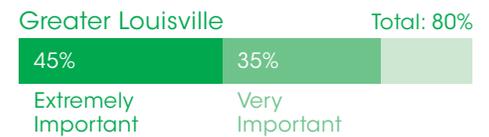
#### Improving the job situation in Kentucky



### Reducing the cost of health care in Kentucky



### Improving the health of Kentucky residents



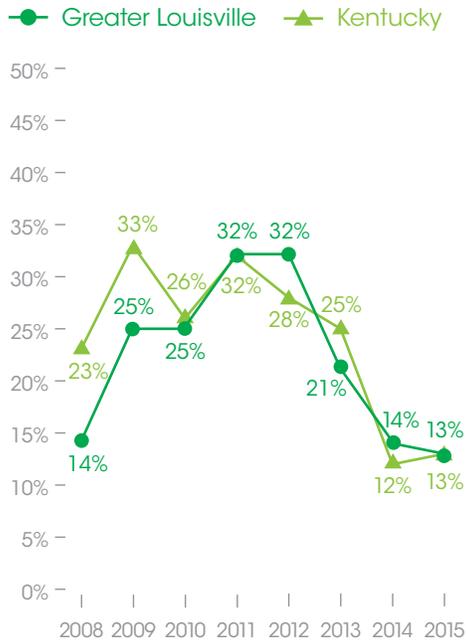
### Making government more transparent



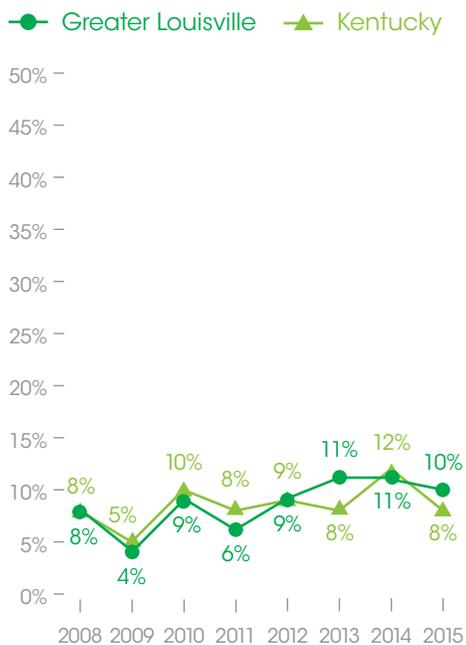
### Fully funding the Kentucky employee retirement systems



**No current insurance, adults ages 18-64**



**Currently insured, but uninsured at some point in the last 12 months, adults ages 18-64**



**Health Insurance and Health Care Insurance**

Having health insurance is an important factor in being able to get needed health care. Because nearly all Kentucky adults 65 or older (99%) are insured, this section includes only the responses for Kentuckians ages 18 to 64.

About 1 in 10 Greater Louisville adults (13%) aged 18 to 64 were uninsured at the time of the Poll. This is a significant decrease in the number of uninsured adults since 2012. Adults 18 to 64 living in Greater Louisville reported the same rate of uninsurance as the state (13%), this is down significantly from 2012 and 2013 reports.

This decline may be in part due to kynect, which began enrollment in October 2013. As part of the Affordable Care Act in Kentucky, kynect allowed Kentuckians, including those eligible for the expanded Medicaid program, to search for and enroll in insurance plans. In 2014, 521,000 people enrolled through kynect, 75% of whom were previously uninsured.<sup>16</sup>

Another factor in being able to get health care is stability of a person's health insurance coverage. One measure of this stability is whether a person has been covered continuously for the past 12 months. In Greater Louisville, 10% of adults ages 18 to 64 were insured at the time of the KHIP but had been uninsured at some point in the past 12 months. In total, nearly 1 in 4 Greater Louisville adults age 18 to 64 (23%) had been uninsured at some point in the last 12 months, including at the time of the Poll.

<sup>16</sup> Governor Steve Beshear's Communication's Office. (2014). kynect Enrollment Continues to Climb in the New Year. [Press Release]. Retrieved from <http://migration.kentucky.gov/Newsroom/governor/20150107kynect.htm>

## Delayed Care and Medical Bills

In addition to whether or not a person has health insurance, being unable to afford needed medical care or having problems paying medical bills can be barriers to receiving timely and appropriate medical care.

Some people may delay or not seek medical care because they can't afford it. Two in 10 Kentucky adults (20%) reported a time in the last 12 months when they or a member of their household needed medical care but did not get it or delayed getting it due to cost. About 2 in 10 Kentuckians living in Greater Louisville (19%) reported the same.

Nearly 3 in 10 Kentucky adults (28%) said they or another member of their household had trouble paying medical bills in the past 12 months. Likewise, 3 in 10 adults living in Greater Louisville (30%) reported having problems paying medical bills.



**In the past 12 months, was there a time when you or another member of your household needed medical care but did not get it, or delayed getting it because of the cost?**

*(Graph shows only those who said yes.)*

Greater Louisville

19%

Kentucky

20%

**In the past 12 months, did you or another family member in your household have any problems paying medical bills?**

*(Graph shows only those who said yes.)*

Greater Louisville

30%

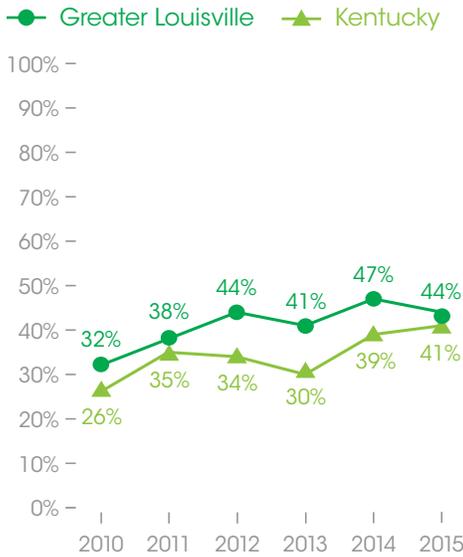
Kentucky

28%

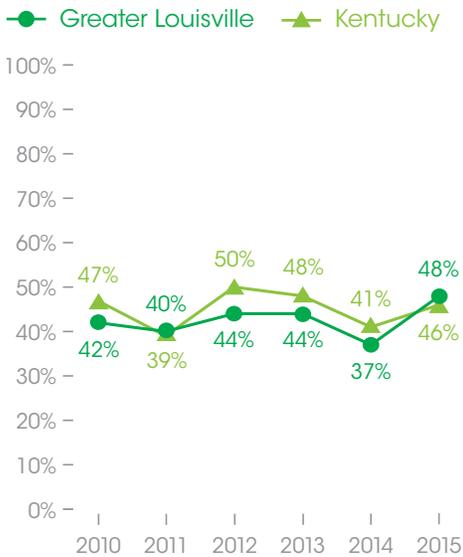
**Given what you know about the health reform law, do you have a generally favorable or generally unfavorable opinion of it?**

*(Percentages do not add to 100% because the response "don't know" is not included.)*

**Favorable**



**Unfavorable**



**Opinions about the Patient Protection and Affordable Care Act**

KHIP has tracked Kentuckians' views about the Patient Protection and Affordable Care Act (ACA) since it became law in March 2010. In June 2012, the Supreme Court upheld the constitutionality of the ACA, but it remains the subject of debate. In October 2013, kynect, Kentucky's online health benefit exchange under the ACA, opened for enrollment. While campaigning for the Kentucky Governor's race, candidate Matt Bevin, now Governor, said he would dismantle kynect.<sup>17</sup> KHIP asked Kentuckians about their experience with the ACA and its impact on their families.

More than 4 in 10 Greater Louisville adults (44%) reported having a generally favorable opinion of the ACA, and about 1 in 2 (48%) had a generally unfavorable opinion of it. Greater Louisville respondents reported similar opinions about the Affordable Care Act compared with the state and the nation.<sup>18</sup>



<sup>17</sup> Facebook Matt Bevin for Kentucky. Retrieved from: <https://www.facebook.com/mattbevinforkentucky/videos/781405655309081/>

<sup>18</sup> National results from the Kaiser Health Tracking Poll (Sept. 2015): favor 41%, unfavorable 45%. Retrieved from <http://kff.org/health-reform/poll-finding/kaiser-health-tracking-poll-september-2015/>

## ACA and Kentuckians

While about half a million Kentuckians enrolled in kynect in 2014, a majority report the ACA has not had an impact on them. Five in 10 Kentucky adults (50%) reported that the ACA has not had an effect on their family. This is down from nearly 7 in 10 (66%) in 2013. The percentage of Kentucky adults who reported that the law had a positive impact has increased. More than 2 in 10 adults (23%) reported the law has had a positive effect on their family, compared with just 1 in 10 adults in 2013 (7%). The percentage of adults (23%) who report that the law had a negative impact on their family has remained stable.

In Greater Louisville, 28% of residents reported positive impacts of the Affordable Care Act. Less than half Greater Louisville adults (45%) reported no effects from the health reform law, this is down significantly from 2014 reports.

## Drug Misuse: Heroin and Prescription Pain Relievers

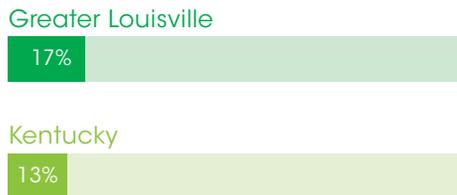
In the 2015 Kentucky Legislative session, a bill was passed and signed into law that included a number of strategies to support communities in addressing the challenge of heroin, including permitting local Kentucky communities to establish Harm Reduction and Syringe Exchange Programs.<sup>19</sup> Since 2010, KHIP has been measuring the experiences of heroin use and prescription pain reliever misuse in Kentucky communities.

Overall, about 1 in 10 Kentucky adults (13%) reported knowing family or friends who have experienced problems as a result of heroin use. However, the rate is much higher in some parts of the state. More than 1 in 10 Greater Louisville adults (17%) knew someone who has experienced problems as a result of heroin use. This is not significantly different than the rate reported for the state as a whole.

One in 4 Kentucky adults (25%) reported that a family member or friend has experienced problems as a result of abusing prescription pain relievers such as OxyContin, Vicodin, Percocet or codeine. In Greater Louisville about the same percent of adults (27%) said a family member or friend has had problems as a result of abusing prescription pain medicine.

### Have any of your family members or friends experienced problems as a result of using heroin?

(Graph shows only those who said yes.)



### Have any of your family members or friends experienced problems as a result of abusing prescription pain relievers?

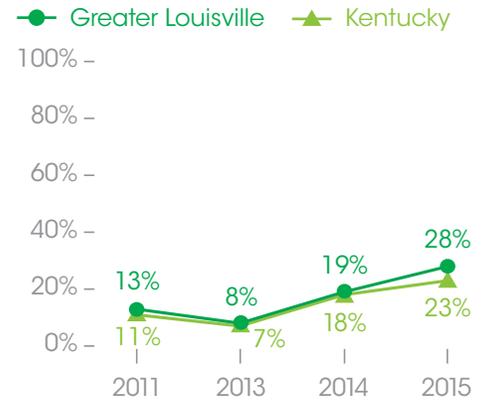
(Graph shows only those who said yes.)



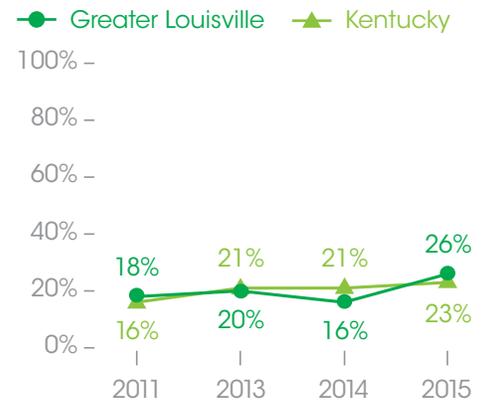
### Overall, which of the following statements would you say best describes the impact of the health reform law on you and your family personally?

(Percentages do not add to 100% because the responses "don't know" and "both positive and negative" are not included.)

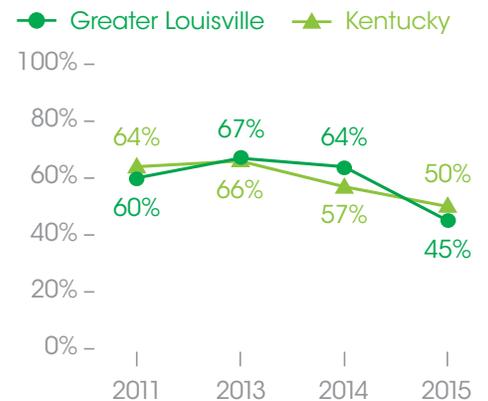
#### The health reform law has positively affected me and my family



#### The health reform law has negatively affected me and my family



#### The health reform law has not had an impact on me and my family



<sup>19</sup> Kentucky Harm Reduction and Syringe Exchange Program Guidelines available at <http://chfs.ky.gov/dph/epi/HIVAIDS/prevention.htm>

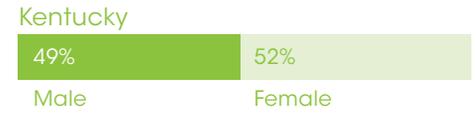
# Demographic Profile

In addition to the questions on health issues, respondents were asked several demographic questions. These findings are detailed below. (Percentages may not add to 100% due to rounding.)



In Greater Louisville, 28% of adults reported income 138% and below the Federal Poverty Level (FPL)<sup>20</sup> which is slightly lower than that reported for the state as a whole (34%). The percentage of Greater Louisville adults who lived between 138% and 200% of FPL was about the same as for the state as a whole. In Greater Louisville, 56% of adults reported income above 200% FPL, which is significantly higher than that reported for the state as a whole (48%).

## Sex



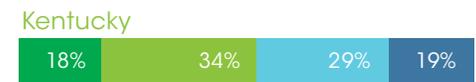
## Age



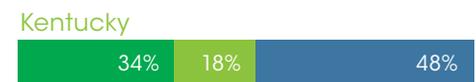
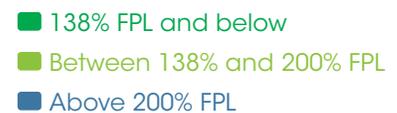
## Race



## Level of Education



## Poverty Status



<sup>20</sup> In 2014, 138% of the Federal Poverty Level (FPL) was \$32,913 for a family of four, 200% FPL was \$47,700 for a family of four.

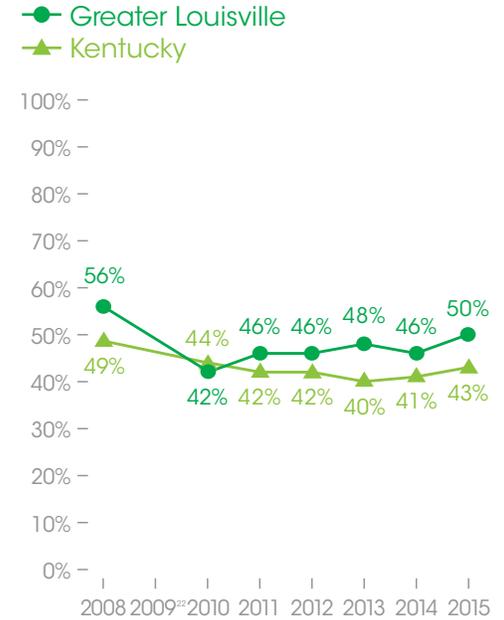
## Overall Health Status

An important indicator of community health is overall health status. In 2015, 4 in 10 Kentucky adults (43%) reported that their health was excellent or very good. Fewer than 3 in 10 (26%) said that their health was good, and about 3 in 10 (31%) said their health was fair or poor. This is about the same as was reported in 2014 on the Kentucky Health Issues Poll. Kentucky ranks as one of the lowest states nationally – 46 out of 50 states – in the percentage of adults reporting excellent or very good health.<sup>21</sup>

In 2015, half the Greater Louisville respondents (50%) described their health status as “excellent” or “very good.” This is slightly higher than reported for the state as a whole (43%).



### Kentucky adults reporting “excellent” or “very good” health



## Personal Health Challenges

In order to better understand health improvement, KHIP asked Kentuckians to name the most important thing they could do to improve their health. Increase exercise was the most common response to this question, reported by nearly 3 in 10 adults. Improve diet was the second most frequently identified category, among nearly 2 in 10 adults. Others identified improving access to health care, improving a personal health problem, and quitting smoking. For the 3 in 10 Kentuckians reporting fair or poor health (31%), most indicated that resolving a current health problem was a priority.

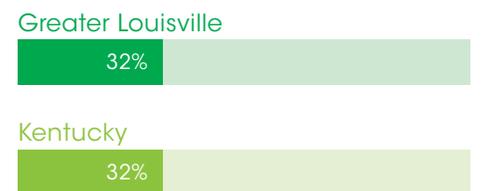
KHIP also asked Kentucky adults how difficult it would be to make the health change they had identified. Nearly 7 in 10 (65%) felt that the change would be difficult or very difficult. About 3 in 10 (32%) said it would be easy or very easy. A similar percent of adults in Greater Louisville reported the same level of difficulty (67%) and ease (32%) as reported for the state as a whole.

### How difficult would it be to make that (health) change?

#### Difficult or Very difficult



#### Easy or Very easy



<sup>21</sup> American’s Health Rankings, United Health Foundation. (2015). High Health Status, United States. Retrieved from [http://www.americashealthrankings.org/ALL/Health\\_Status](http://www.americashealthrankings.org/ALL/Health_Status).

<sup>22</sup> The question “Would you say that in general your health is excellent, very good, fair or poor?” was not asked on the 2009 KHIP.



## About the Kentucky Health Issues Poll

The Kentucky Health Issues Poll, funded by the Foundation for a Healthy Kentucky and Interact for Health, is conducted annually to assess what Kentuckians think about a variety of health topics affecting the Commonwealth. The 2015 Kentucky Health Issues Poll was conducted September 17, 2015-October 7, 2015 by the Institute for Policy Research at the University of Cincinnati.

A random sample of 1,608 adults from throughout Kentucky was interviewed by telephone. This included 986 landline interviews and 622 cell phone interviews. Of these, 314 respondents resided in the KIPDA Area Development District. The counties included in this region are:

- Bullitt County
- Henry County
- Jefferson County
- Oldham County
- Shelby County
- Spencer County
- Trimble County

This report presents a selection of questions with data specific to Greater Louisville area. Additional state and regional data highlights are available from the Foundation for a Healthy Kentucky ([www.healthy-ky.org](http://www.healthy-ky.org)) or Interact for Health ([www.interactforhealth.org/kentucky-health-issues-poll](http://www.interactforhealth.org/kentucky-health-issues-poll)). Users can access the entire survey dataset, as well as results by region or demographic group, at [www.oasisdataarchive.org](http://www.oasisdataarchive.org).

If there is a question or topic you would like to see on a future KHIP, please contact Susan Sprigg, Research Associate at Interact for Health ([ssprigg@interactforhealth.org](mailto:ssprigg@interactforhealth.org)), or Rachele Seger, Community Health Research Officer at the Foundation for a Healthy Kentucky ([rseger@healthy-ky.org](mailto:rseger@healthy-ky.org)).

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