



# Statistical Notes

From the CENTERS FOR DISEASE CONTROL AND PREVENTION/National Center for Health Statistics

## ***Healthy People 2000* Midcourse Revisions: A Compendium**

Kathleen Turczyn, M.P.H. and Colleen Ryan, M.P.H.

As part of the continuing evaluation of the health of Americans, a midcourse review of the *Healthy People 2000* objectives (1) added several new objectives and identified changes to some of the objectives released in 1990 (2). The midcourse review also documented numerous previous revisions to *Healthy People 2000* baselines (3) and the setting of new targets for some objectives. The purpose of this *Statistical Note* is to indicate the changes in the year 2000 objectives between *Healthy People 2000* (2), released in 1990, and the *Healthy People 2000 Midcourse Review and 1995 Revisions* (1), released in 1995. Refer to the complete documents for specific details of the changes.

Beginning in the fall of 1993 and culminating in the publication of the *Healthy People 2000 Midcourse Review and 1995 Revisions* 2 years later, a review of the *Healthy People 2000* health promotion and disease prevention initiative was coordinated by the Office of Disease Prevention and Health Promotion. During the initial phase of the review, Public Health Service (PHS) workgroups met to consider new data, new information, and new science that had become available since the release of *Healthy People 2000* in 1990. Agencies suggested new objectives, modified existing objectives, and created new special population subobjectives.

The criteria for drafting new objectives included in the *Healthy People 2000 Midcourse Review and 1995 Revisions* followed the same eight criteria used in 1989–90 to draft the initial year 2000 objectives (1):

- CREDIBILITY—Objectives should be realistic and should address the issues of greatest priority.
- PUBLIC COMPREHENSION—Objectives should be understandable and relevant to a broad audience, including those who plan, manage, deliver, use, and pay for health services.
- BALANCE—Objectives should be a mixture of outcome and process measures, recommending methods for achieving changes and setting standards for evaluating progress.
- MEASURABILITY—Objectives should be quantified.
- CONTINUITY—Year 2000 objectives should be linked to the 1990 objectives where possible but reflect the lessons learned in implementing them.
- COMPATIBILITY—Objectives should be compatible where possible with goals already adopted by Federal agencies and health organizations.
- FREEDOM FROM DATA CONSTRAINTS—The availability or form of the data should not be the principal determinant of the nature of the objectives. Alternate and proxy data should be used where necessary.
- RESPONSIBILITY—The objectives should reflect the concerns and engage the participation of professionals, advocates, and consumers as well as State and local health departments.

In the resulting draft of the proposed midcourse revisions, published in the *Federal Register* on October 3, 1994 for public review and comment, there were no changes



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to the three goals of *Healthy People 2000* nor to the organization of the 22 priority areas (4). There were, however, a number of proposed changes to the original objectives and subobjectives. More than 550 public comments were received on these proposed revisions. These public comments were used by PHS agencies to complete the revised Summary List of Objectives that includes all midcourse changes (1). These changes can be grouped into five categories:

- New objectives that reflect scientific developments and new information that has become available;
- New duplicates of existing objectives shared across priority areas;
- Revisions to published objectives to encompass current issues and data reporting systems;
- New special population subobjectives to focus on groups that are at highest risk of premature death, disease, or disability; and
- Revisions to year 2000 targets.

As a result of the review process, 19 new objectives were added to the original 300 unduplicated main objectives (table 1), bringing the total number of objectives to 319. Because some priority areas share identical objectives, the number of objectives including the duplicates is 376. *Healthy People 2000* contains a total of 638 objectives and subobjectives; 805 including duplicates. The 20 new shared duplicate objectives are shown in table 2.

There were revisions to the original text of 68 published objectives and subobjectives, in some cases considerably modifying the objective. Table 3 contains the revised text of these objectives.

Fifty-eight objective or subobjective targets were revised to correspond with revised baselines (table 4). Other targets were revised to reflect new data, new measures or new definitions. Fourteen of the objectives and subobjectives had surpassed the original targets at the time of the midcourse review. The majority of the revisions made more challenging targets.

A number of baselines have been changed since the midcourse review. These changes, which continue to evolve,

are due to corrections, updated data and methodologies, changes in data sources, and changes in definitions. Baseline data that have been revised from those published in the *Midcourse Review and 1995 Revisions* are published in the most recent *Healthy People 2000 Review* and are indicated by a footnote “a” in each priority area summary data table.

Because new data showed increased health risk or disparity between the total population and people in age, gender, racial, or ethnic minority groups, the midcourse review added 111 new special population subobjectives (table 5). There are now 319 subobjectives; with duplicates, there are 429. Twelve subobjectives were dropped, but continue to exist as part of a complex objective with many subpopulations and targets (objective 21.1). The total numbers of subobjectives for each special population group are listed in table 6.

Table 3 in this Statistical Note contains the full text of the objectives. Tables 1, 2, 4, and 5 include an abbreviated text of objectives and subobjectives. The full text of all the objectives and subobjectives can be found in the *Healthy People 2000 Midcourse Review and 1995 Revisions* (1) and in *Healthy People 2000 Reviews* that have been published subsequent to the midcourse review (5).

## References

1. U.S. Department of Health and Human Services. *Healthy people 2000 midcourse review and 1995 revisions*. Washington: Public Health Service. 1995.
2. U.S. Department of Health and Human Services. *Healthy people 2000: National health promotion and disease prevention objectives*. Washington: Public Health Service. 1991.
3. Klein RJ and Freedman MA. *Revisions to Healthy People 2000 baselines*. National Center for Health Statistics. *Healthy people 2000 statistical notes*; no 5. Hyattsville, Maryland. 1993.
4. U.S. Department of Health and Human Services. *Availability and request for comment on the healthy people 2000 midcourse revisions*. *Federal Register* 59(190). Notices. 1994.
5. National Center for Health Statistics. *Healthy people 2000 review, 1995–96*. Hyattsville, Maryland: Public Health Service. 1996.

**Table 1. Healthy People 2000 objectives added during midcourse review**

<b>Number(s)</b>	<b>Description</b>
3.23	Tobacco excise tax
3.24	Treatment for nicotine addiction
3.25, 10.20	Clean indoor air laws
3.26	Cigarette vending machine laws
4.20	Hospitality Resource Panels
5.12	Contraceptive use by females 15-44 years
6.15	Depressive disorders
7.19, 9.25	Firearm storage laws
9.24	Bicycle helmet laws
9.26	Graduated driver licensing systems
10.16	Work-related homicides
10.17	Occupational lung disease deaths
12.7	Adverse events reporting
12.8	Information for new prescriptions
14.17	Incidence of spina bifida
17.21	Prevalence of peptic ulcer disease
17.23	Dilated eye exams for people with diabetes
18.16	HIV/AIDS workplace programs
18.17	Substance abuse treatment links

**Table 2. Shared duplicate objectives added during midcourse review**

<b>Original objective</b>	<b>Description</b>	<b>Duplicate objectives</b>
3.08	Children exposed to tobacco smoke at home	11.17
3.09	Smokeless tobacco use	13.17
3.11	Worksites with formal smoking policies	10.18
3.12	Number of States with comprehensive laws for clean indoor air	10.19
4.01	Alcohol-related motor vehicle crash deaths	9.23
4.05	Average age at first substance use	3.19
4.06	Use in past month by adolescents and young adults of alcohol/cocaine/marijuana/cigarettes	3.20
4.09	Adolescent perception of social disapproval of alcohol/cocaine/marijuana/cigarettes	3.21
4.10	Adolescent perception of harm from alcohol/cocaine/marijuana/cigarettes	3.22
5.05	Adolescent abstinence from sexual intercourse for previous 3 months	18.15, 19.16
13.07	Oral cancer deaths	3.17, 16.17
15.02	Stroke deaths	2.22, 3.18
15.04	Control of high blood pressure	2.26
15.06	Mean serum cholesterol level	2.27
15.07	Blood cholesterol levels	2.25
16.05	Colorectal cancer deaths	2.23
17.03	Self-care problems	1.13
17.11	Diabetes incidence and prevalence	2.24
18.11	HIV and STD education for students at colleges and universities	19.17
22.04	Data gaps	17.22

**Table 3. List of objectives with revised text**

Objective	Full text of objective with revisions	Change																																		
2.05, 15.09, 16.07	Reduce dietary fat intake to an average of 30 percent of calories or less and average saturated fat intake to less than 10 percent of calories among people aged 2 and older. In addition, increase to at least 50 percent the proportion of people aged 2 and older who meet the <i>Dietary Guidelines'</i> average daily goal of no more than 30 percent of calories from fat, and increase to at least 50 percent the proportion of people aged 2 and older who meet the average daily goal of less than 10 percent of calories from saturated fat. Dietary fat intake among people 2 years and over.	Added new measure, age change																																		
2.06, 16.08	Increase complex carbohydrate and fiber-containing foods in the diets of people aged 2 and older to an average of five or more daily servings for vegetables (including legumes) and fruits, and to an average of six or more daily servings for grain products. In addition, increase to at least 50 percent the proportion of people aged 2 and older who meet the <i>Dietary Guidelines'</i> average daily goal of five or more servings of vegetables/fruits, and increase to at least 50 percent the proportion who meet the goal of six or more servings of grain products. Average daily intake of vegetables, fruits, and grain products.	Added new measure, age change																																		
2.08	Increase calcium intake so at least 50 percent of people aged 11-24 and 50 percent of pregnant and lactating women consume an average of three or more daily servings of foods rich in calcium, and at least 75 percent of children aged 2-10 and 50 percent of people aged 25 and older consume an average of two or more servings daily.	Age change, text clarification																																		
3.10	Establish tobacco-free environments and include tobacco-use prevention in the curricula of all elementary, middle, and secondary schools, preferably as part of comprehensive school health education.	Text clarification																																		
3.12, 10.19	Enact in 50 States and the District of Columbia comprehensive laws on clean indoor air that prohibit smoking or limit it to separately ventilated areas in the workplace and enclosed public places.	Change in definition of measure																																		
3.14	Establish in 50 States and the District of Columbia plans to reduce tobacco use, especially among youth.	Text clarification																																		
3.20, 4.06	<p>Reduce the proportion of young people who have used alcohol, marijuana, and cocaine, or cigarettes in the past month as follows:</p> <table data-bbox="342 1058 1203 1486"> <thead> <tr> <th data-bbox="342 1058 971 1085">Substance and age</th> <th data-bbox="976 1058 1203 1085">2000 target (percent)</th> </tr> </thead> <tbody> <tr> <td colspan="2" data-bbox="342 1085 1203 1113">Alcohol:</td> </tr> <tr> <td data-bbox="342 1113 971 1140">12-17 years</td> <td data-bbox="1013 1113 1203 1140">12.6</td> </tr> <tr> <td data-bbox="342 1140 971 1167">18-20 years</td> <td data-bbox="1013 1140 1203 1167">29.0</td> </tr> <tr> <td colspan="2" data-bbox="342 1167 1203 1194">Marijuana:</td> </tr> <tr> <td data-bbox="342 1194 971 1222">12-17 years</td> <td data-bbox="1013 1194 1203 1222">3.2</td> </tr> <tr> <td data-bbox="342 1222 971 1249">18-25 years</td> <td data-bbox="1013 1222 1203 1249">7.8</td> </tr> <tr> <td colspan="2" data-bbox="342 1249 1203 1276">Cocaine:</td> </tr> <tr> <td data-bbox="342 1276 971 1304">12-17 years</td> <td data-bbox="1013 1276 1203 1304">0.6</td> </tr> <tr> <td data-bbox="342 1304 971 1331">18-25 years</td> <td data-bbox="1013 1304 1203 1331">2.3</td> </tr> <tr> <td colspan="2" data-bbox="342 1331 1203 1358">Alcohol:</td> </tr> <tr> <td data-bbox="342 1358 971 1386">Hispanic 12-17 years</td> <td data-bbox="1013 1358 1203 1386">12.0</td> </tr> <tr> <td colspan="2" data-bbox="342 1386 1203 1413">Cocaine:</td> </tr> <tr> <td data-bbox="342 1413 971 1440">Hispanic 12-17 years</td> <td data-bbox="1013 1413 1203 1440">0.6</td> </tr> <tr> <td data-bbox="342 1440 971 1467">Hispanic 18-25 years</td> <td data-bbox="1013 1440 1203 1467">1.0</td> </tr> <tr> <td colspan="2" data-bbox="342 1467 1203 1495">Cigarettes:</td> </tr> <tr> <td data-bbox="342 1495 971 1522">12-17 years</td> <td data-bbox="1013 1495 1203 1522">6.0</td> </tr> </tbody> </table>	Substance and age	2000 target (percent)	Alcohol:		12-17 years	12.6	18-20 years	29.0	Marijuana:		12-17 years	3.2	18-25 years	7.8	Cocaine:		12-17 years	0.6	18-25 years	2.3	Alcohol:		Hispanic 12-17 years	12.0	Cocaine:		Hispanic 12-17 years	0.6	Hispanic 18-25 years	1.0	Cigarettes:		12-17 years	6.0	Added new measure
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3.21, 4.09	<p>Increase the proportion of high school seniors who perceive social disapproval of heavy use of alcohol, occasional use of marijuana, and experimentation with cocaine, or regular use of tobacco, as follows:</p> <table data-bbox="342 1583 1203 1709"> <thead> <tr> <th data-bbox="342 1583 971 1610"></th> <th data-bbox="976 1583 1203 1610">2000 target (percent)</th> </tr> </thead> <tbody> <tr> <td data-bbox="342 1610 971 1638">Heavy use of alcohol</td> <td data-bbox="1013 1610 1203 1638">70</td> </tr> <tr> <td data-bbox="342 1638 971 1665">Occasional use of marijuana</td> <td data-bbox="1013 1638 1203 1665">85</td> </tr> <tr> <td data-bbox="342 1665 971 1692">Trying cocaine once or twice</td> <td data-bbox="1013 1665 1203 1692">95</td> </tr> <tr> <td data-bbox="342 1692 971 1719">Smoking one or more packs of cigarettes per day</td> <td data-bbox="1013 1692 1203 1719">95</td> </tr> </tbody> </table>		2000 target (percent)	Heavy use of alcohol	70	Occasional use of marijuana	85	Trying cocaine once or twice	95	Smoking one or more packs of cigarettes per day	95	Added new measure																								
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**Table 3. List of objectives with revised text - Continued**

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3.22, 4.10	<p>Increase the proportion of high school seniors who associate physical or psychological harm with the heavy use of alcohol, occasional use of marijuana, experimentation with cocaine, or regular use of tobacco, as follows:</p> <table style="margin-left: 40px;"> <tr> <td></td> <td style="text-align: right;">2000 target (percent)</td> </tr> <tr> <td>Heavy use of alcohol</td> <td style="text-align: right;">70</td> </tr> <tr> <td>Regular use of marijuana</td> <td style="text-align: right;">90</td> </tr> <tr> <td>Trying cocaine once or twice</td> <td style="text-align: right;">80</td> </tr> <tr> <td>Smoking one or more packs of cigarettes per day</td> <td style="text-align: right;">95</td> </tr> <tr> <td>Using smokeless tobacco regularly</td> <td style="text-align: right;">95</td> </tr> </table>		2000 target (percent)	Heavy use of alcohol	70	Regular use of marijuana	90	Trying cocaine once or twice	80	Smoking one or more packs of cigarettes per day	95	Using smokeless tobacco regularly	95	Added new measure
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4.13	Provide to children in all school districts and private schools primary and secondary school educational programs on alcohol and other drugs, preferably as part of comprehensive school health education.	Text clarification												
5.01	Reduce pregnancies among females aged 15-17 to no more than 50 per 1,000 adolescents.	Text clarification, age change												
5.05, 18.15, 19.16	Increase to at least 40 percent the proportion of ever sexually active adolescents aged 17 and younger who have not had sexual intercourse during the previous 3 months.	Text clarification												
5.06	Increase to at least 90 percent the proportion of sexually active, unmarried people aged 15-24 who use contraception, especially combined method contraception that both effectively prevents pregnancy and provides barrier protection against disease.	Age change												
5.07	Increase the effectiveness with which family planning methods are used, as measured by a decrease to no more than 7 percent in the proportion of women experiencing pregnancy despite use of a contraceptive method.	Text clarification												
5.08	Increase to at least 85 percent the proportion of people aged 10-18 who have discussed human sexuality, including correct anatomical names, sexual abuse, and values surrounding sexuality, with their parents and/or have received information through another parentally endorsed source, such as youth, school, or religious programs.	Text clarification												
5.09	Increase to at least 90 percent the proportion of family planning counselors who offer accurate information about all options, including prenatal care and delivery, infant care, foster care, or adoption and pregnancy termination to their patients with unintended pregnancies.	Text clarification												
5.11, 18.13, 19.11	Increase to at least 50 percent the proportion of family planning clinics, maternal and child health clinics, sexually transmitted disease clinics, tuberculosis clinics, drug treatment centers, and primary care clinics that provide on site primary prevention and provide or refer for secondary prevention services for HIV infection and bacterial sexually transmitted diseases (gonorrhea, syphilis, and Chlamydia) to high-risk individuals and their sex or needle-sharing partners.	Text clarification												
6.05	Reduce to less than 35 percent the proportion of people aged 18 and older who report adverse health effects from stress within the past year.	Text clarification												
6.12	Establish a network to facilitate access to mutual self-help activities, resources, and information by people and their family members who are experiencing emotional distress resulting from mental or physical illness.	Change in definition of measure												
7.03	Reduce firearm-related deaths to no more than 11.6 per 100,000 people from major causes.	Change in definition of measure												
7.16	Increase to at least 50 percent the proportion of elementary and secondary schools that teach nonviolent conflict resolution skills, preferably as a part of comprehensive school health education.	Text clarification												
8.02	Increase the high school graduation rate to at least 90 percent, thereby reducing risks for multiple problem behaviors and poor mental and physical health.	Change in definition of measure												
8.04	Increase to at least 75 percent the proportion of the Nation's elementary and secondary schools that provide planned and sequential kindergarten-12th grade comprehensive school health education.	Text clarification												
9.11	Reduce by 20 percent the incidence of secondary conditions (i.e., pressure sores) associated with traumatic spinal cord injuries.	Change in definition of measure												
9.12	Increase use of safety belts and child safety seats to at least 85 percent of motor vehicle occupants.	Text clarification												

**Table 3. List of objectives with revised text - Continued**

<b>Objective</b>	<b>Full text of objective with revisions</b>	<b>Change</b>																				
9.18	Provide academic instruction on injury prevention and control, preferably as part of comprehensive school health education, in at least 50 percent of public school systems (grades K-12).	Text clarification																				
9.20	Increase to at least 50 the number of States that have design standards for markings, signing, and other characteristics of the roadway environment to improve the visual stimuli and protect the safety of older drivers and pedestrians.	Text clarification																				
9.22	Extend to 20 States the capability to link emergency medical services, trauma systems, and hospital data.	Change in definition of measure																				
10.05, 20.03e	Reduce hepatitis B infections among occupationally exposed workers to an incidence of no more than 623 cases.	Text clarification																				
11.07	Reduce human exposure to toxic agents by decreasing the release of hazardous substances from industrial facilities: 65 percent decrease in the substances on the Department of Health and Human Services list of carcinogens. 50 percent reduction in the substances on the Agency for Toxic Substances and Disease Registry (ATSDR) priority list of the most toxic chemicals.	Text clarification																				
11.08	Reduce human exposure to solid waste-related water, air, and soil contamination, as measured by a reduction in average pounds of municipal solid waste produced per person each day to no more than 4.3 pounds before recovery and 3.2 pounds after recovery.	Added new measures																				
11.10	Reduce potential risks to human health from surface water, as measured by an increase in the proportion of assessed rivers, lakes, and estuaries that support beneficial uses, such as consumable fishing and recreational activities.	Change in definition of measure																				
	<table border="0"> <tr> <td>Waters supporting beneficial use</td> <td>2000 target (percent)</td> </tr> <tr> <td>Rivers supporting:</td> <td></td> </tr> <tr> <td>    Consumable fish</td> <td>94</td> </tr> <tr> <td>    Recreational activities</td> <td>85</td> </tr> <tr> <td>Lakes supporting:</td> <td></td> </tr> <tr> <td>    Consumable fish</td> <td>82</td> </tr> <tr> <td>    Recreational activities</td> <td>88</td> </tr> <tr> <td>Estuaries supporting:</td> <td></td> </tr> <tr> <td>    Consumable fish</td> <td>97</td> </tr> <tr> <td>    Recreational activities</td> <td>91</td> </tr> </table>	Waters supporting beneficial use	2000 target (percent)	Rivers supporting:		Consumable fish	94	Recreational activities	85	Lakes supporting:		Consumable fish	82	Recreational activities	88	Estuaries supporting:		Consumable fish	97	Recreational activities	91	
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11.15	Establish curbside recycling programs that serve at least 50 percent of the U.S. population and continue to increase household hazardous waste collection programs.	Change in definition of measure																				
	<table border="0"> <tr> <td>Recyclable materials and household hazardous waste programs</td> <td>2000 target (percent)</td> </tr> <tr> <td>    Percentage of population served by curbside recycling programs</td> <td>50</td> </tr> <tr> <td>Permanent and temporary household hazardous waste collection events</td> <td>2000 target (number of events)</td> </tr> <tr> <td>    Permanent</td> <td>215</td> </tr> <tr> <td>    Temporary</td> <td>1,314</td> </tr> <tr> <td>    Total</td> <td>1,529</td> </tr> </table>	Recyclable materials and household hazardous waste programs	2000 target (percent)	Percentage of population served by curbside recycling programs	50	Permanent and temporary household hazardous waste collection events	2000 target (number of events)	Permanent	215	Temporary	1,314	Total	1,529									
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12.04	Extend to at least 70 percent the proportion of States and territories that have implemented Food Code 1993 for institutional food operations and to at least 70 percent the proportion that have adopted the new uniform food protection code that sets recommended standards for regulation of all food operations.	Text clarification																				
16.10	Increase to at least 75 percent the proportion of primary care providers who routinely counsel patients about tobacco-use cessation, diet modification, and cancer screening recommendations, which includes providing information on the potential benefit or harm attributed to the various screening modalities and discussion of risk factors associated with breast, prostate, cervical, colorectal, and lung cancers.	Text clarification																				
16.11	Increase to at least 60 percent those women aged 50 and older who have received a clinical breast examination and a mammogram within the preceding 1 to 2 years.	Change in definition of measure																				

**Table 3. List of objectives with revised text - Continued**

Objective	Full text of objective with revisions	Change
16.12	Increase to at least 95 percent the proportion of women aged 18 and older who have ever received a Pap test, and to at least 85 percent those who received a Pap test within the preceding 1 to 3 years.	Change in definition of measure
16.16	Ensure that mammograms meet quality standards by inspecting and certifying 100 percent of mammography facilities according to the requirements of the Mammography Quality Standards Act.	Change in definition of measure
17.19	Increase to at least 75 percent the proportion of worksites with 50 or more employees that have a policy or program for the hiring of people with disabilities.	Text clarification
18.01	Confine annual incidence of diagnosed AIDS cases to no more than 43 per 100,000 population.	Change in definition of measure
18.05	Increase to at least 50 percent the estimated proportion of all injecting drug users who are in drug abuse treatment programs.	Text clarification
18.06	Increase to at least 75 percent the estimated proportion of active injecting drug users who use only new or properly decontaminated syringes, needles, and other drug paraphernalia ("works").	Text clarification
18.08	Increase to at least 80 percent the proportion of HIV-infected people who know their serostatus.	Change in definition of measure
18.09, 19.14	Increase to at least 75 percent the proportion of primary care and mental health care providers who provide appropriate counseling on the prevention of HIV and other sexually transmitted diseases.	Text clarification
18.10, 19.12	Increase to at least 95 percent the proportion of schools that have appropriate HIV and other STD education curricula for students in 4th-12th grade, preferably as part of comprehensive school health education, based upon scientific information that includes the way HIV and other STDs are prevented and transmitted.	Change in definition of measure
18.11, 19.17	Increase to at least 90 percent the proportion of students who received HIV and other STD information, education, or counseling on their college or university campus.	Change in definition of measure
19.02	Reduce the prevalence of Chlamydia trachomatis infections among young women (under the age of 25 years) to no more than 5 percent.	Change in definition of measure
19.06	Reduce the incidence of pelvic inflammatory disease, as measured by a reduction in hospitalizations for pelvic inflammatory disease, to no more than 100 per 100,000 women aged 15-44 and a reduction in the number of initial visits to physicians for pelvic inflammatory disease to no more than 290,000.	Added new measure
20.03a	Reduce hepatitis B among injecting drug users to no more than 7,932 cases.	Text clarification
20.11	<p>Increase immunization levels as follows:</p> <p>Basic immunization series among children under age 2: at least 90 percent.</p> <p>Basic immunization series among children in licensed child care facilities and kindergarten through post-secondary education institutions: at least 95 percent.</p> <p>Hepatitis B immunization among high-risk populations, including infants of hepatitis B surface antigen-positive mothers to at least 90 percent; occupationally exposed workers to at least 90-percent; injecting drug users in drug treatment programs to at least 50 percent; and men who have sex with men to at least 50 percent.</p> <p>Pneumococcal and influenza immunization among institutionalized chronically ill or older people: at least 80 percent.</p> <p>Pneumococcal and influenza immunization among noninstitutionalized, high-risk populations, as defined by the Immunization Practices Advisory Committee: at least 60 percent.</p>	Text clarification
21.02	Increase the proportion of people who have received selected clinical preventive screening and immunization services and at least one of the counseling services appropriate for their age and gender as recommended by the U.S. Preventive Services Task Force.	Change in definition of measure

**Table 3. List of objectives with revised text - Continued**

<b>Objective</b>	<b>Full text of objective with revisions</b>	<b>Change</b>
21.05	Ensure that at least 90 percent of people for whom primary care services are provided directly by publicly funded programs are offered, at a minimum, the screening, counseling, and immunization services recommended by the U.S. Preventive Services Task force.	Text clarification
22.02a	Identify, and create where necessary, State-level data for at least two-thirds of the objectives in State year 2000 plans in all 50 States.	Text clarification



**Table 4. Revised Healthy People 2000 objective targets**

Objective	Description	Special population target	Original target	New target	Comment
3.11	Worksite smoking policies		75%	100%	No original baseline; new data
4.01, 9.23	Alcohol-related motor vehicle crash deaths		8.5/100,000	5.5/100,000	Original target surpassed
4.01a, 9.23a	Alcohol-related motor vehicle crash deaths	American Indians/Alaska Natives	44.8/100,000	35.0/100,000	Baseline change
4.01b, 9.23b	Alcohol-related motor vehicle crash deaths	Ages 15-24 years	18.0/100,000	12.5/100,000	Original target surpassed
4.02b	Cirrhosis deaths	American Indians/Alaska Natives	12.0/100,000	10.0/100,000	Baseline change
5.07	Failure of contraceptive method		5%	7%	Baseline change <sup>1</sup>
6.01d, 7.02d	Suicide	American Indian/Alaska Native males	12.8/100,000	17.0/100,000	Baseline change
6.03	Mental disorders among youth		10%	17%	Baseline change <sup>1</sup>
6.07	Treatment for depression		45%	54%	
6.13	Clinical mental health review		50%	60%	No original baseline
7.01d	Homicide	Hispanic males 15-34 years	42.5/100,000	33.0/100,000	Baseline change
7.01f	Homicide	American Indians/Alaska Natives	11.3/100,000	9.0/100,000	Baseline change
7.04	Maltreatment of children		<25.2/1,000	<22.6/1,000	Baseline change <sup>1</sup>
7.04a	Maltreatment of children	Physical abuse	<5.7/1,000	<4.9/1,000	Baseline change <sup>1</sup>
7.04b	Maltreatment of children	Sexual abuse	<2.5/1,000	<2.1/1,000	Baseline change <sup>1</sup>
7.04c	Maltreatment of children	Emotional abuse	<3.4/1,000	<3.0/1,000	Baseline change <sup>1</sup>
7.04d	Maltreatment of children	Neglect	<15.9/1,000	<14.6/1,000	Baseline change <sup>1</sup>
7.06	Assault injuries		10/1,000	8.7/1,000	Baseline change <sup>1</sup>
7.09	Physical fighting among adolescents		Reduce by 20%	110/100	Changed measure
7.10	Weapon-carrying by adolescents		Reduce by 20%	86/100	Changed measure
9.01a	Unintentional injury deaths	American Indians/Alaska Natives	66.1/100,000	53.0/100,000	Baseline change
9.03	Motor vehicle crash deaths Per 100 million vehicle miles traveled Per 100,000 population		1.9/100m VMT <sup>2</sup> 16.8/100,000	1.5/100m VMT <sup>2</sup> 14.2/100,000	Original target surpassed Baseline change <sup>1</sup>
9.03a	Motor vehicle crash deaths	Ages 14 years and under	5.5/100,000	4.4/100,000	Original target surpassed
9.03b	Motor vehicle crash deaths	Ages 15-24 years	33.0/100,000	26.8/100,000	Original target surpassed
9.03d	Motor vehicle crash deaths	American Indians/Alaska Natives	39.2/100,000	32.0/100,000	Baseline change
9.03e	Motor vehicle crash deaths	Motorcyclists	33.0/100m VMT <sup>2</sup>	25.6/100m VMT <sup>2</sup>	Original target surpassed
	Motor vehicle crash deaths	Motorcyclists	1.5/100,000	0.9/100,000	Original target surpassed
9.03f	Motor vehicle crash deaths	Pedestrians	2.7/100,000	2.0/100,000	Original target surpassed
9.06e	Residential fire deaths	Caused by smoking	5.0%	8.0%	Baseline change <sup>1</sup>
9.20	States with roadway safety standards		30 States	50 States	
10.05	Incidence of Hepatitis B among occupationally exposed workers		1,250 cases	623 cases	Baseline change <sup>1</sup>
10.06	Worksite occupant protection systems		75%	95%	No original baseline; new data
11.03a	Waterborne disease outbreaks	Community water systems	6 outbreaks	2 outbreaks	Baseline change; new data
11.04	Blood lead levels over 15µg/dL		500,000 children	300,000 children	No explanation
11.08	Solid waste (average pounds per person per day)		3.6 pounds	4.3 pounds	No explanation
14.10	Abstinence by pregnant females: Use of alcohol Use of cocaine Use of marijuana		Increase by 20% Increase by 20% Increase by 20%	95% 100% 100%	New definition New definition New definition
18.01	Slow the rise in incidence of AIDS cases		98,000 cases	43/100,000	Changed measure

**Table 4. Revised Healthy People 2000 objective targets - Continued**

Objective	Description	Special population target	Original target	New target	Comment
18.02	Slow the rise in prevalence of HIV infection		800/100,000	400/100,000	HIV infection less prevalent than expected
18.04c, 19.10c	Condom use	Injecting drug users	60%	75%	No original baseline
18.06	Injecting drug users in treatment who did not share needles		50%	75%	Baseline change
19.01	Incidence of gonorrhea		225/100,000	100/100,000	Original target surpassed
19.01a	Incidence of gonorrhea	Blacks	1,300/100,000	650/100,000	Original target surpassed
19.01b	Incidence of gonorrhea	Adolescents 15-19 years	750/100,000	375/100,000	Original target surpassed
19.01c	Incidence of gonorrhea	Females 15-44 years	290/100,000	175/100,000	Original target surpassed
19.03	Primary and secondary syphilis		10/100,000	4/100,000	More challenging target
19.03a	Primary and secondary syphilis	Blacks	65/100,000	30/100,000	More challenging target
19.04	Congenital syphilis		50/100,000	40/100,000	Baseline change
19.05	Annual number of first-time consultations:				
	Genital herpes		142,000	138,500	Baseline change
	Genital warts		385,000	246,500	Baseline change
19.06	Pelvic inflammatory disease		250/100,000	100/100,00	Original target surpassed
20.02	Epidemic-related pneumonia/flu deaths		7.3/100,000	15.9/100,000	Baseline change <sup>1</sup>
20.03	Viral hepatitis A		23/100,000	16/100,000	Baseline change <sup>3</sup>
20.03a	Viral hepatitis B (number of cases)	Injecting drug users	22,500 cases	7,932 cases	Original target surpassed
20.03b	Viral hepatitis B (number of cases)	Heterosexually active people	22,000 cases	22,663 cases	Baseline change
20.03c	Viral hepatitis B (number of cases)	Homosexual males	8,500 cases	4,568 cases	Baseline change
20.03d	Viral hepatitis B (number of cases)	Children of Asians/Pacific Islanders	1,800 cases	1,500 cases	Trends
20.03e	Hepatitis B (number of cases)	Occupationally exposed workers	1,250 cases	623 cases	Baseline change
20.03f	Hepatitis B (number of cases)	Infants	550 cases	1,111 cases	Trends
20.06	Illness among international travelers				
	Hepatitis A		640 cases	1,119 cases	Baseline change <sup>3</sup>
	Malaria		1,000 cases	750 cases	Baseline change <sup>3</sup>
20.10	Pneumonia-related restricted activity				
	Ages 65 years and over		38 days/100	15.1 days/100	Baseline change <sup>1</sup>

<sup>1</sup>Updated methodology.

<sup>2</sup>100m VMT = 100 million vehicle miles traveled.

<sup>3</sup>Original data were preliminary.

**Table 5. Special population subobjectives added during midcourse review**

<b>Subobjectives</b>	<b>Description</b>	<b>Special populations</b>
1.02h, 2.03h, 15.10h, 17.12h	Overweight prevalence	Mexican-American males 20-74 years
1.03a, 15.11a, 17.13a	Moderate physical activity	Hispanics 18 years and over
1.04b	Vigorous physical activity	Blacks 18 years and over
1.04c	Vigorous physical activity	Hispanics 18 years and over
1.05d	Sedentary lifestyle	Blacks 18 years and over
1.05e	Sedentary lifestyle	Hispanics 18 years and over
1.05f	Sedentary lifestyle	American Indians/ Alaska Natives
1.07a, 2.07a	Sound weight-loss practices among overweight people 12 years and over	Overweight Hispanic males 18 years and over
1.07b, 2.07b	Sound weight-loss practices among overweight people 12 years and over	Overweight Hispanic females 18 years and over
1.13b, 17.03b	People with self-care problems	Blacks 65 years and over
2.02a, 16.01a	Cancer deaths	Blacks
2.03h, 1.02h, 15.10h, 17.12h	Overweight prevalence	Mexican-American males 20-74 years
2.07a, 1.07a	Sound weight-loss practices among overweight people 12 years and over	Overweight Hispanic males 18 years and over
2.07b, 1.07b	Sound weight-loss practices among overweight people 12 years and over	Overweight Hispanic females 18 years and over
2.08a	Foods rich in calcium (percent who consume) [proportion who met average daily goal]	Females 11-24 years
2.12c, 13.11c	Baby bottle tooth decay	Black parents or caregivers
2.12d, 13.11d	Baby bottle tooth decay	Hispanic parents or caregivers
2.23a, 16.05a <sup>1</sup>	Colorectal cancer deaths	Blacks
2.26b, 15.04b	Controlled high blood pressure	Mexican-Americans with high blood pressure
2.26c, 15.04c	Controlled high blood pressure	Females 70 years and over with high blood pressure
3.02a, 16.02a	Slow the rise in lung cancer deaths	Females
3.02b, 16.02b	Slow the rise in lung cancer deaths	Black males
3.17a, 13.07a, 16.17a <sup>1</sup>	Oral cancer deaths	Black males 45-74 years
3.17b, 13.07b, 16.17b <sup>1</sup>	Oral cancer deaths	Black females 45-74 years
4.02c	Cirrhosis deaths	Hispanics
4.03a	Drug-related deaths	Blacks
4.03b	Drug-related deaths	Hispanics
5.02b	Unintended pregnancy	Hispanic females
5.04a, 18.03a, 19.09a	Adolescents who ever had sexual intercourse	Black males 15 years
5.04b, 18.03b, 19.09b	Adolescents who ever had sexual intercourse	Black males 17 years
5.04c, 18.03c, 19.09c	Adolescents who ever had sexual intercourse	Black females 17 years
5.07a	Failure of contraceptive method	Black females
5.07b	Failure of contraceptive method	Hispanic females
5.12a	Contraception use	Black females 15-44 years
5.12b	Contraception use	Females with incomes under 100% of poverty
5.12c	Contraception use	Females 15-19 years with incomes under 200% of poverty
6.02a, 7.08a	Suicide attempts among adolescents 14-17 years	Females 14-17 years
6.15a	Prevalence of depression	Females
7.03a	Firearm-related deaths	Blacks
7.08a, 6.02a	Suicide attempts among adolescents 14-17 years	Females 14-17 years
7.09a	Physical fighting among adolescents 14-17 years	Black males 14-17 years
7.10a	Weapon-carrying by adolescents 14-17 years	Blacks 14-17 years
8.02a	Completion of high school	Hispanics
8.02b	Completion of high school	Blacks
9.01d	Unintentional injury deaths	Mexican-American males
9.02a	Unintentional injury hospitalizations	Black males

**Table 5. Special population subobjectives added during midcourse review - Continued**

<b>Subobjectives</b>	<b>Description</b>	<b>Special populations</b>
9.03g	Motor vehicle crash deaths	Mexican-Americans
9.04d	Fall-related deaths	American Indians/Alaska Natives
9.05d	Drowning deaths	American Indians/Alaska Natives
9.06f	Residential fire deaths	American Indians/Alaska Natives
9.06g	Residential fire deaths	Puerto Ricans
10.02f	Nonfatal work-related injuries	Adolescent workers
11.01c	Asthma hospitalizations	Females
13.02e	Untreated dental caries	Adolescents 15 years whose parents have less than a high school education
13.02f	Untreated dental caries	American Indians/Alaska Natives 15 years
13.02g	Untreated dental caries	Blacks 15 years
13.02h	Untreated dental caries	Hispanics 15 years
13.04b	Complete tooth loss	American Indians/Alaska Natives
13.07a, 3.17a, 16.17a	Oral cancer deaths	Black males 45-74 years
13.07b, 3.17b; 16.17b	Oral cancer deaths	Black females 45-74 years
13.08a	Protective sealants	Blacks 8 years
13.08b	Protective sealants	Blacks 14 years
13.08c	Protective sealants	Hispanics 8 years
13.08d	Protective sealants	Hispanics 14 years
13.11c, 2.12c	Baby bottle tooth decay	Black parents or caregivers
13.11d, 2.12d	Baby bottle tooth decay	Hispanic parents or caregivers
13.12a	Oral health screening, referral, and followup	Blacks 5 years
13.12b	Oral health screening, referral, and followup	Hispanics 5 years
13.14c	Regular dental visits	Blacks 35 years and over
13.14d	Regular dental visits	Mexican-Americans 35 years and over
13.14e	Regular dental visits	Puerto Ricans 35 years and over
14.05b <sup>2</sup>	Low birthweight	Very low birthweight blacks
14.05c	Low birthweight	Low birthweight Puerto Ricans
14.05d	Low birthweight	Very low birthweight Puerto Ricans
14.07a	Severe complications of pregnancy	Blacks
15.04b, 2.26b	Controlled high blood pressure	Mexican-Americans with high blood pressure
15.04c, 2.26c	Controlled high blood pressure	Females 70 years and over with high blood pressure
15.10h, 1.02h, 2.03h, 17.12h	Overweight prevalence	Mexican-American males 20-74 years
15.11a, 1.03a, 17.13a	Moderate physical activity	Hispanics 18 years and over
15.13a	Knowledge of blood pressure values	Mexican-American males
15.14a	Blood cholesterol checked (ever)	Blacks
15.14b	Blood cholesterol checked (ever)	Mexican-Americans
15.14c	Blood cholesterol checked (ever)	American Indians/Alaska Natives
15.14d	Blood cholesterol checked (past 2 years)	Mexican-Americans
15.14e	Blood cholesterol checked (past 2 years)	American Indians/Alaska Natives
15.14f	Blood cholesterol checked (past 2 years)	Asians/Pacific Islanders
16.01a, 2.02a	Cancer deaths	Blacks
16.02a, 3.02a	Slow the rise in lung cancer deaths	Females
16.02b, 3.02b	Slow the rise in lung cancer deaths	Black males
16.03a	Female breast cancer deaths	Black females
16.04a	Cervical cancer deaths	Black females
16.04b	Cervical cancer deaths	Hispanic females
16.05a, 2.23a	Colorectal cancer deaths	Blacks
16.17a, 3.17a, 13.07a	Oral cancer deaths	Black males 45-74 years
16.17b, 3.17b, 13.07b	Oral cancer deaths	Black females 45-74 years
17.02d	Limitation in major activity due to chronic conditions	Puerto Ricans

**Table 5. Special population subobjectives added during midcourse review - Continued**

<b>Subobjectives</b>	<b>Description</b>	<b>Special populations</b>
17.04a	Percent of people with asthma with activity limitation	Blacks with asthma
17.04b	Percent of people with asthma with activity limitation	Puerto Ricans with asthma
17.09c	Diabetes-related deaths	Mexican-Americans
17.09d	Diabetes-related deaths	Puerto Ricans
17.12h, 1.02h, 2.03h, 15.10h	Overweight prevalence	Mexican-American males 20-74 years
17.13a, 1.13a, 15.11a	Moderate physical activity	Hispanics 18 years and over
17.14c	Formal patient education	Blacks with diabetes
17.14d	Patient education for people with chronic and disabling conditions	Hispanics with diabetes
17.16a	Earlier detection of significant hearing impairment in children	Blacks
18.01d	Slow the rise in incidence of AIDS cases	Females
18.01e	Slow the rise in incidence of AIDS cases	Injecting drug users
18.03a, 5.04a, 19.09a	Adolescents who ever had sexual intercourse	Black males 15 years
18.03b, 5.04b, 19.09b	Adolescents who ever had sexual intercourse	Black males 17 years
18.03c, 5.04c, 19.09c	Adolescents who ever had sexual intercourse	Black females 17 years
18.04d, 19.10d	Condom use at last sexual intercourse	Black females 15-44 years
18.09b, 19.14b	Clinician counseling to prevent HIV and other STDs	Family physicians
18.09c, 19.14c	Clinician counseling to prevent HIV and other STDs	Internists
18.09d, 19.14d	Clinician counseling to prevent HIV and other STDs	Nurse practitioners
18.09e, 19.14e	Clinician counseling to prevent HIV and other STDs	Obstetricians/gynecologists
18.09f, 19.14f	Clinician counseling to prevent HIV and other STDs	Pediatricians
18.09g, 19.14g	Clinician counseling to prevent HIV and other STDs	Mental health care providers
19.04a	Congenital syphilis	Blacks
19.04b	Congenital syphilis	Hispanics
19.06a	Pelvic inflammatory disease	Blacks 15-44 years
19.06b	Pelvic inflammatory disease	Adolescents 15-19 years
19.08a	Repeat gonorrhea infection	Blacks
19.09a, 5.04a, 18.03a	Adolescents who ever had sexual intercourse	Black males 15 years
19.09b, 5.04b, 18.03b	Adolescents who ever had sexual intercourse	Black males 17 years
19.09c, 5.04c, 18.03c	Adolescents who ever had sexual intercourse	Black females 17 years
19.10d, 18.04d	Condom use at last sexual intercourse	Black females 15-44 years
19.14b, 18.09b	Clinician counseling to prevent HIV and other STDs	Family physicians
19.14c, 18.09c	Clinician counseling to prevent HIV and other STDs	Internists
19.14d, 18.9d	Clinician counseling to prevent HIV and other STDs	Nurse practitioners
19.14e, 18.09e	Clinician counseling to prevent HIV and other STDs	Obstetricians/gynecologists
19.14f, 18.09f	Clinician counseling to prevent HIV and other STDs	Pediatricians
19.14g, 18.09g	Clinician counseling to prevent HIV and other STDs	Mental health care providers
20.03h	Viral hepatitis (Hepatitis B)	Blacks
20.03i	Viral hepatitis (Hepatitis A)	Hispanics
20.03j	Viral hepatitis (Hepatitis A)	American Indians/Alaska Natives
20.03k	Viral hepatitis (Hepatitis C)	Hispanics
20.11a	Immunization (Pneumonia and influenza)	Blacks 65 years and over
20.11b	Immunization (Pneumonia and influenza)	Hispanics 65 years and over
21.03d	Access to primary care	American Indians/Alaska Natives 18 years and over
21.03e	Access to primary care	Asians/Pacific Islanders 18 years and over
21.04a	Financial barriers to receipt of clinical preventive services	American Indians/Alaska Natives under 65 years
21.04b	Financial barriers to receipt of clinical preventive services	Hispanics under 65 years
21.04c	Financial barriers to receipt of clinical preventive services	Blacks under 65 years
	Racial/ethnic minority representation in the health professions	Blacks, Hispanics, Asians/Pacific Islanders, and American Indians/ Alaska Natives enrolled in schools of nursing

<sup>1</sup>Inadvertently left out of *Healthy People 2000 Midcourse Review and 1995 Revisions*.

<sup>2</sup>Previously existed as part of a compound objective; redefined into a subobjective.

**Table 6. Number of special population objectives and subobjectives by *Healthy People 2000* priority area including midcourse review additions**

Priority Area	Black	American Indian/ Alaska Native	Asian/ Pacific Islander	Hispanic	Mexican American	Cuban	Puerto Rican	Male	Female	Older adults <sup>1</sup>	Adolescents/ young adults <sup>2</sup>	Children	Low education	Low income	Disabilities
1	5	2	0	6	1	0	0	3	5	3	0	0	0	3	2
2	11	6	2	8	3	1	1	4	15	1	1	8	1	13	1
3	4	2	1	1	0	0	0	3	6	0	2	0	3	0	0
4	2	2	0	2	0	0	0	2	0	0	1	0	0	0	0
5	8	0	0	4	0	0	0	2	10	0	6	0	1	1	0
6	0	1	0	0	0	0	0	3	2	1	2	0	0	0	2
7	5	2	0	1	0	0	0	6	3	1	9	1	0	0	0
8	2	0	0	2	0	0	0	0	0	1	0	0	0	0	0
9	6	6	0	0	2	0	1	10	2	5	4	4	0	0	0
10	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0
11	2	0	0	0	0	0	0	0	1	0	0	3	0	1	0
12	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
13	10	8	0	7	1	0	1	1	1	1	8	11	4	2	0
14	12	6	0	3	0	0	5	0	11	0	0	0	0	2	0
15	7	4	2	3	5	0	0	6	8	1	0	0	1	1	1
16	9	1	1	5	0	0	0	2	22	7	0	0	4	3	0
17	11	5	0	4	3	1	4	2	4	4	0	0	0	2	1
18	5	0	0	1	0	0	0	5	5	0	5	0	0	0	0
19	9	0	0	1	0	0	0	3	4	0	7	0	0	0	0
20	3	4	2	4	0	0	0	1	0	2	0	2	0	0	1
21	4	3	2	4	0	0	0	0	0	1	0	0	0	1	0
22	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Total: <sup>3</sup>	115	52	10	56	15	2	12	53	99	28	46	29	14	29	8
Midcourse additions:	57	12	3	28	13	0	7	21	29	6	19	4	1	4	0

<sup>1</sup>Subobjectives targeting adults 50 years and over are included in "Older adults."

<sup>2</sup>Subobjectives targeting persons 18-34 years are included in "Adolescents/young adults."

<sup>3</sup>Totals do not sum to the overall number of objectives and subobjectives because some objectives and subobjectives apply to more than one subpopulation (for example, a subobjective for an older black female is counted three times in this table).

Acronyms:

AIDS Acquired Immune Deficiency Syndrome  
HIV Human Immunodeficiency Virus  
STD Sexually Transmitted Disease

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