

Mississippi Behavioral Risk Factor Surveillance System (BRFSS)

2012 – 2021 Trend Report



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Introduction

Among health care professionals, there is a general consensus that certain health conditions and behavior patterns have a strong correlation with disease, injury and death. Examples include cigarette smoking and lung disease, overweight/obesity and hypertension, and alcohol consumption and various cancers. The Behavioral Risk Factor Surveillance System (BRFSS) is a telephone surveillance system designed to estimate the prevalence of these, along with other health risk factors, in every state and some territories in the United States (U.S.). The results provide a tool for evaluating health trends, assessing the risk of chronic diseases, and measuring the effectiveness of policies, programs, intervention strategies, and awareness campaigns.

The BRFSS is a cooperative agreement between the Centers for Disease Control and Prevention (CDC) and the Mississippi State Department of Health (MSDH). The first survey was conducted in 1984 when the data were collected at one given point in time. The survey was repeated in 1988 using the same methodology. Beginning from 1990, states have completed an annual survey with the data being collected monthly.

The BRFSS survey contains a set of core questions provided by the CDC to gather comprehensive standard information nationwide. The questions are related to health status, access to health care, health awareness, lifestyles, and preventive health. The CDC provides states with opportunities to also include questions addressing specific risk factors that are of particular concern and/or interest to that state.

Methodology

A. 2021 Sampling Design, Data Collection, Weighting, Sample Size

The Mississippi BRFSS (MS BRFSS) is a randomly sampled telephone survey that utilizes a disproportionate stratified sample (DSS) design with random digit dialing (RDD) and a Computer Assisted Telephone Interviewing (CATI) system. Until the 2011 survey, the BRFSS relied exclusively on interviews of households with only landline phones; however, the number of households having only cell phones has increased.

In 2021, all MS BRFSS interviews were conducted according to BRFSS protocols by a private survey research company and a state university on behalf of MSDH. To be eligible to participate in the survey, the respondent must have been a non-institutionalized adult aged 18 years or older at the time of the interview. For landline surveys, interviewers contacted the residences and randomly selected one adult to be interviewed from all adults residing in the household. For cell phone surveys, the interviewer established that the person answering the phone was at least 18 years of age; however, no adult was randomly selected for cell phone surveys.

The data collected during the 12-month survey period were edited and weighted by the CDC. Since 2011 the BRFSS has utilized a weighting method called iterative proportional fitting, also known as

"raking." The procedure, while not new, has been made feasible through the development of ultra-fast computer processors. In addition to the standard age, sex, race and ethnicity variables, the use of raking allows for consideration of demographic variables such as education level, marital status, renter or owner status, and phone source. By including these additional variables into the weighting process, the survey will more accurately reflect Mississippi's adult population. In the 2021 MS BRFSS, 4,421 adults were included in the final sample.

B. Questionnaire

The BRFSS questionnaire, designed through cooperative agreements with CDC, is divided into two main parts. The first part contains the Core Section topics related to health conditions and behavior. The Core Section topics are chosen by CDC, and these questions must be asked by every state and territory administering the survey. The second part contains the Optional Modules. The CDC provides a list of Optional Modules on varying topics to states and territories so that they can choose to include any that are of interest. States also have the option to include state-added questions, which are designed by the state rather than CDC.

C. Data Analysis

After CDC completed data editing, weighting procedures, and analysis, it sent each state an initial descriptive analysis report that included weights, confidence intervals, percentages, and N counts in documents called the *Codebook Report* and the *Calculated Variable Data Report*. Weighted counts were based on the 2021 Nielsen and ACS Adult Population Report for Mississippi population estimates to accurately reflect the state's demographics. The results presented in this report were produced by epidemiologists at MSDH and are weighted according to population characteristics.

Logistic regression analysis was used to test for changes over time from 2012 to 2021. The regression models control for changes in distributions by sex, race/ethnicity, age group, education, and annual household income and assess linear and quadratic time effect by including time variables that use the appropriate number of years of data for each measure. Some measures were not collected in every year from 2012 to 2021, so not all trend analyses included every year.

The term "significant" means that the increase or decrease in a measure over time was statistically significant (p-value <0.05). P-values for significant findings are listed in the corresponding tables. If there was a significant linear trend, it was described as "increased from 2012 to 2021" or "decreased from 2012 to 2021." If there was a significant quadratic trend, additional analysis was conducted using Joinpoint Regression to determine the year where a change of trend

occurred. If a significant quadratic trend was identified, both segments of the trend were reported (for example, "increased from 2012 to 2017; decreased from 2017 to 2021"). If there was no significant linear or quadratic trend, it was described as "no change from 2012 to 2021." A minimum of three years of data were required to test for a linear change, and a minimum of six years were required to test for a quadratic change using Joinpoint; if either of these criteria were not met, then it was reported as "N/A" (not applicable).

A Chi-square test was used to evaluate change in prevalence from 2020 to 2021.

D. Limitations of Data

All data collection systems are subject to error, and records may be incomplete and/or contain inaccurate information. Additionally, all data collected via the BRFSS program are self-reported. It is not always possible to measure the magnitude of these errors or their impact on the data. The user must be the final arbiter in evaluating the accuracy of the data. In addition, respondents who did not answer and/or refused to respond are not included in the counts or percentages listed in this report.

NOTE: Only select MS BRFSS health indicators are included in this report. If you would like to request additional data, please <u>submit a data request</u> <u>using MSDH's online form</u>. For other information about the MS BRFSS, contact the MS BRFSS Coordinator at BRFSS@msdh.ms.gov.

Section 1: Health Status

Percentage of adults who reported fair or poor health

The percentage of adults who reported that, in general, their health was fair or poor significantly increased from 2012 to 2017 and then significantly decreased from 2017 to 2021.



Percentage of adults who said that their physical health was not good for 14+ days of past 30 days

The percentage of adults who reported that their physical health was not good for 14 or more days in the past 30 days **significantly** increased from 2012 to 2017 and then **significantly decreased from** 2017 to 2021.



Percentage of adults who said that their mental health was not good for 14+ days of past 30 days

The percentage of adults who reported that their mental health was not good for 14 or more days in the past 30 days **significantly** increased from 2012 to 2021.



Table 1. Health status indicators, Mississippi BRFSS, 2012 - 2021

2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	Linear ⁽²⁾ Change	Quadratic ⁽³⁾ Change	Change ⁽⁴⁾ 2020-2021		
	Percent (95% Confidence Interval) ⁽¹⁾													
Percentage of adults who reported that, in general, their health was fair or poor														
23.4 (22.1-24.6)	24.4 (23.1-25.8)	22.0 (20.4-23.7)	23.6 (22.1-25.1)	23.2 (21.7-24.7)	25.3 (23.6-27.0)	23.3 (22.0-24.7)	23.6 (22.1-25.0)	19.9 (18.7-21.1)	22.5 (18.7-21.1)	No	Yes ⁽⁵⁾ (p=0.004)	Increased (p=0.009)		
Percentage	e of adults w	ho reported	that their p	hysical heal	th was not g	ood for 14 o	r more days	in the past	30 days					
15.1 (14.0-16.2)	15.8 (14.6-17.0)	13.5 (12.1-14.8)	15.0 (13.8-16.2)	14.8 (13.5-16.1)	16.6 (15.1-18.1)	15.4 (14.2-16.6)	14.0 (12.8-15.2)	10.3 (9.4-11.2)	12.9 (11.6-14.2)	Decreased (p=0.01)	Yes ⁽⁶⁾ (p<0.001)	Increased (p<0.001)		
Percentage	e of adults w	ho reported	that their n	nental healt	h was not go	od for 14 or	more days i	n the past 3	0 days					
14.3 (13.1-15.5)	14.2 (13.0-15.4)	13.7 (12.1-15.3)	15.0 (13.6-16.4)	14.1 (12.7-15.5)	15.9 (14.2-17.5)	15.5 (14.2-16.8)	17.3 (15.8-18.7)	14.4 (13.1-15.6)	14.7 (13.2-16.2)	Increased (p<0.001)	No	No		

⁽¹⁾ A confidence interval provides a measure of estimate precision; the wider the interval, the more imprecise the estimate.

⁽²⁾ Linear change - Indicates whether there was a significant linear change in prevalence during 2012-2021. That is, did the prevalence increase, decrease, or stay the same?

⁽³⁾ Quadratic change - Indicates whether there was a significant change in the direction of prevalence during 2012-2021.

⁽⁴⁾ Change from 2020-2021 - Indicates whether there was a significant increase or decrease in prevalence between 2020 and 2021.

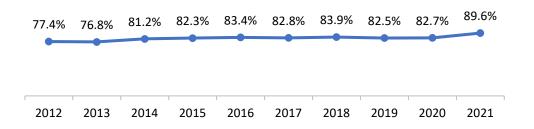
 $^{^{(5)}}$ Increased from 2012 to 2017 (p=0.008); decreased from 2017 to 2021 (p=0.03).

 $^{^{(6)}}$ Increased from 2012 to 2017 (p=0.02); decreased from 2017 to 2021 (p<0.001).

Section 2: Health Care Coverage and Access

Percentage of adults who had any kind of health coverage

The percentage of adults who had any kind of health coverage significantly increased from 2012 to 2021.



Percentage of adults who needed to see a doctor in the past 12 months but could not due to cost

The percentage of adults who needed to see a doctor in the past 12 months but could not due to cost **significantly decreased from 2012 to 2021**.



Table 2. Health care coverage and access, Mississippi BRFSS, 2012 - 2021

2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	Linear ⁽²⁾ Change	Quadratic ⁽³⁾ Change	Change ⁽⁴⁾ 2020-2021		
	Percent (05% Confidence Interval) (1)													
Percentage	(95% Confidence Interval) (1) Percentage of adults who had any kind of health coverage													
77.4 (75.9-78.9)	76.8 (75.3-78.4)	81.2 (79.3-83.1)	82.3 (80.7-83.9)	83.4 (81.9-85.0)	82.8 (80.9-84.6)	83.9 (82.5-85.3)	82.5 (80.9-84.1)	82.7 (81.3-84.0)	89.6 (88.2-90.9)	Increased (p<0.001)	No	Increased (p<0.001)		
Percentage	Percentage of adults who needed to see a doctor in the past 12 months but could not due to cost													
21.7 (20.3-23.1)	21.7 (20.2-23.2)	19.4 (17.6-21.2)	18.7 (17.2-20.3)	19.2 (17.7-20.7)	18.2 (16.6-19.9)	17.6 (16.2-18.9)	17.2 (15.8-18.7)	13.9 (12.7-15.1)	13.1 (11.7-14.4)	Decreased (p<0.001)	No	No		

⁽¹⁾ A confidence interval provides a measure of estimate precision; the wider the interval, the more imprecise the estimate.

⁽²⁾ Linear change - Indicates whether there was a significant linear change in prevalence during 2012-2021. That is, did the prevalence increase, decrease, or stay the same?

⁽³⁾ Quadratic change - Indicates whether there was a significant change in the direction of prevalence during 2012-2021.

⁽⁴⁾ Change from 2020-2021 - Indicates whether there was a significant increase or decrease in prevalence between 2020 and 2021.

Section 3: Health Behaviors

Percentage of adults who did not participate in any physical activities or exercise outside of work in the past month

There were no significant changes in the percentage of adults who did not participate in any physical activity outside of work in the past month from 2012 to 2021.



Percentage of adults who were current cigarette smokers

The percentage of adults who were current smokers **significantly decreased from 2012 to 2021**.



Percentage of adults who were binge drinkers

There were no significant changes in the percentage of adults who were binge drinkers from 2012 to 2021.



Table 3. Health behavior indicators, Mississippi BRFSS, 2012 - 2021

2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	Linear ⁽²⁾ Change	Quadratic ⁽³⁾ Change	Change ⁽⁴⁾ 2020-2021	
	Percent (95% Confidence Interval) ⁽¹⁾												
Percentage	of adults w	ho did not p	articipate in	any physica	al activities o	or exercises (outside of w	ork in the pa	ast month				
30.8 (29.3-32.3)	38.1 (36.4-39.8)	31.6 (29.6-33.6)	36.8 (35.0-38.7)	30.3 (28.6-32.0)	33.2 (31.1-35.2)	32.0 (30.4-33.6)	37.7 (36.0-39.5)	30.0 (28.5-31.5)	30.9 (29.1-32.7)	No	No	No	
Percentage	of adults w	ho were cur	rent smoker	·s									
24.0 (22.5-25.5)	24.8 (23.3-26.4)	23.0 (21.0-24.9)	22.5 (20.9-24.2)	22.7 (21.0-24.4)	22.2 (20.4-24.0)	20.5 (19.1-22.0)	20.4 (18.8-22.0)	20.1 (18.7-21.5)	19.6 (17.8-21.3)	Decreased (p=0.04)	No	No	
Percentage	of adults w	ho were bin	ge drinkers										
12.1 (10.9-13.4)	12.4 (11.1-13.6)	12.8 (11.2-14.4)	11.9 (10.4-13.3)	12.3 (10.9-13.7)	12.6 (11.1-14.2)	12.7 (11.4-14.1)	13.4 (11.9-14.9)	13.4 (12.1-14.6)	12.5 (11.0-14.0)	No	No	No	

⁽¹⁾ A confidence interval provides a measure of estimate precision; the wider the interval, the more imprecise the estimate.

⁽²⁾ Linear change - Indicates whether there was a significant linear change in prevalence during 2012-2021. That is, did the prevalence increase, decrease, or stay the same?

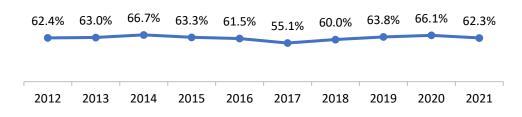
⁽³⁾ Quadratic change - Indicates whether there was a significant change in the direction of prevalence during 2012-2021.

⁽⁴⁾ Change from 2020-2021 - Indicates whether there was a significant increase or decrease in prevalence between 2020 and 2021.

Section 4: Use of Preventive Services

Percentage of adults aged 65+ years who had a flu vaccine during the past 12 months

There were no significant changes in the percentage of adults aged 65+ years who had a flu vaccine during the past 12 months from 2012 to 2021.



Percentage of adults aged 65+ years who have ever had a pneumonia shot

There were no significant changes in the percentage of adults aged 65+ years who have ever had a pneumonia shot from 2012 to 2021.



Percentage of adults who have ever been tested for HIV

There were no significant changes in the percentage of adults who had ever been tested for HIV from 2012 to 2021.



Table 4. Use of preventive service indicators, Mississippi BRFSS, 2012 - 2021

2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	Linear ⁽²⁾ Change	Quadratic ⁽³⁾ Change	Change ⁽⁴⁾ 2020-2021		
					cent	`								
	(95% Confidence Interval) (1)													
Percentage	Percentage of adults (65+) who had the flu vaccine during the past 12 months													
62.4 (60.1-64.6)	63.0 (60.3-65.7)	66.7 (63.6-69.8)	63.3 (60.5-66.0)	61.5 (58.5-64.5)	55.1 (52.0-58.2)	60.0 (57.2-62.8)	63.8 (61.0-66.6)	66.1 (63.7-68.5)	62.3 (59.2-65.4)	No	No	No		
Percentage	e of adults (6	55+) who ha	ve ever had	a pneumoni	a shot									
65.8 (63.5-68.1)	66.2 (63.4-68.9)	67.2 (64.1-70.4)	65.3 (62.6-68.1)	65.6 (62.6-68.5)	71.8 (69.0-74.6)	68.7 (66.0-71.4)	66.6 (63.9-69.4)	66.6 (64.2-69.0)	63.2 (60.1-66.4)	No	No	No		
Percentage	e of adults w	ho have eve	er been teste	ed for HIV										
39.7 (38.0-41.4)	41.3 (39.5-43.1)	37.8 (35.6-40.1)	40.6 (38.6-42.6)	41.2 (39.3-43.2)	39.1 (36.8-41.3)	41.0 (39.2-42.8)	43.5 (41.6-45.5)	37.6 (35.9-39.3)	37.7 (35.7-39.8)	No	No	No		

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⁽²⁾ Linear change - Indicates whether there was a significant linear change in prevalence during 2012-2021. That is, did the prevalence increase, decrease, or stay the same?

⁽³⁾ Quadratic change - Indicates whether there was a significant change in the direction of prevalence during 2012-2021.

⁽⁴⁾ Change from 2020-2021 - Indicates whether there was a significant increase or decrease in prevalence between 2020 and 2021.

Section 5: Health Conditions

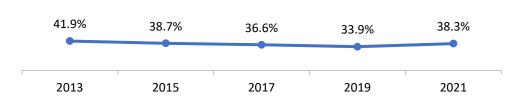
Percentage of adults ever told by a health professional that they had high blood pressure

The percentage of adults who have ever been told by a health professional that they had high blood pressure **significantly increased** from 2013 to 2021.



Percentage of adults ever told by a health professional that they had high blood cholesterol

The percentage of adults who have ever been told by a health professional that they had high blood cholesterol **significantly decreased from 2013 to 2021**.



Percentage of adults who were overweight or obese

The percentage of adults who were overweight or obese **significantly** increased from 2012 to 2021.



Percentage of adults ever told by a health professional that they had a cardiovascular disease

There were no significant changes in the percentage of adults aged who have ever been told that they had a cardiovascular disease from 2012 to 2021.



Percentage of adults ever told by a health professional that they had asthma

The percentage of adults who have ever been told by a health professional that they had asthma **significantly increased from 2012 to 2021**.



Percentage of adults ever told by a health professional that they had arthritis

There were no significant changes in the percentage of adults who have ever been told by a health professional that they had arthritis from 2012 to 2021.



Percentage of adults ever told by a health professional that they had skin cancer

There were no significant changes in the percentage of adults who have ever been told by a health professional that they had skin cancer from 2012 to 2021.



Percentage of adults ever told by a health professional that they had any other types of cancer (other than skin cancer)

The percentage of adults who have ever been told by a health professional that they had any other types of cancer (other than skin cancer) increased significantly from 2020 to 2021.

6.4%						7.1%			7.9%
2012	2013	2014	2015	2016	2017	2018	2019	2020	2021

Percentage of adults ever told by a health professional that they had COPD, emphysema, or chronic bronchitis

The percentage of adults who have ever been told by a health professional that they had COPD, emphysema, or chronic bronchitis significantly increased from 2012 to 2021.



Percentage of adults ever told by a health professional that they had a depressive disorder

The percentage of adults who have ever been told by a health professional that they had a depressive disorder **significantly** increased from 2012 to 2021.



Percentage of adults ever told by a health professional that they had prediabetes

The percentage of adults who have ever been told by a health professional that they had prediabetes **significantly increased** from 2012 to 2021.



Percentage of adults ever told by a health professional that they had diabetes

The percentage of adults who have ever been told by a health professional that they had diabetes **significantly increased from 2012 to 2021**.



Table 5. Health conditions, Mississippi BRFSS, 2012 - 2021

2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	Linear ⁽²⁾ Change	Quadratic ⁽³⁾ Change	Change ⁽⁴⁾ 2020-2021
			(cent nce Interval) ⁽¹	.)						
Percentage	e of adults w	ho have eve	er been told	by a health	professional	that they h	ad high bloc	d pressure				
No data	40.2 (38.6-41.8)	No data	42.4 (40.6-44.1)	No data	40.8 (38.8-42.7)	No data	43.6 (41.9-45.4)	No data	43.9 (42.0-45.8)	Increased (p<0.001)	N/A	N/A
Percentage	e of adults w	ho have eve	er been told	by a health	professional	that they h	ad high bloc	d cholester	ol			
No data	41.9 (40.2-43.7)	No data	38.7 (36.9-40.6)	No data	36.6 (34.6-38.5)	No data	33.9 (32.2-35.6)	No data	38.3 (36.3-40.3)	Decreased (p=0.009)	N/A	N/A
Percentage	e of adults w	ho were ov	erweight or	obese								
68.9 (67.3-70.5)	69.3 (67.6-70.9)	70.7 (68.6-72.7)	70.1 (68.3-71.9)	71.3 (69.5-73.1)	69.9 (67.9-71.9)	73.3 (71.6-75.0)	72.7 (71.0-74.5)	72.8 (71.2-74.3)	72.7 (70.8-74.6)	Increased (p<.001)	No	No
Percentage	e of adults w	ho have eve	er been told	by a health	professional	that they h	ad a cardiov	ascular dise	ase			
11.0 (10.1-11.8)	10.5 (9.6-11.5)	10.8 (9.7-11.9)	11.2 (10.2-12.3)	12.1 (11.0-13.2)	11.5 (10.4-12.6)	11.6 (10.6-12.6)	11.3 (10.2-12.3)	11.7 (10.8-12.7)	12.4 (11.2-13.6)	No	No	No
Percentage	e of adults w	ho have eve	er been told	by a health	professional	that they h	ad asthma					
11.7 (10.6-12.7)	12.5 (11.4-13.6)	12.5 (11.1-14.0)	12.2 (10.9-13.6)	12.7 (11.4-14.0)	12.8 (11.4-14.2)	15.2 (13.9-16.5)	14.4 (13.0-15.7)	14.2 (13.1-15.4)	15.0 (13.5-16.5)	Increased (p<0.001)	No	No
Percentage	e of adults w	ho have eve	er been told	by a health	professional	that they h	ad arthritis					
30.8 (29.4-32.1)	30.0 (28.5-31.4)	29.2 (27.5-31.0)	28.6 (27.1-30.1)	31.3 (29.7-32.9)	29.2 (27.5-30.9)	32.2 (30.7-33.7)	28.9 (27.4-30.4)	30.4 (29.1-31.8)	30.6 (28.9-32.2)	No	No	No

⁽¹⁾ A confidence interval provides a measure of estimate precision; the wider the interval, the more imprecise the estimate.

⁽²⁾ Linear change - Indicates whether there was a significant linear change in prevalence during 2012-2021. That is, did the prevalence increase, decrease, or stay the same?

⁽³⁾ Quadratic change - Indicates whether there was a significant change in the direction of prevalence during 2012-2021.

⁽⁴⁾ Change from 2020-2021 - Indicates whether there was a significant increase or decrease in prevalence between 2020 and 2021.

Table 5. (continued) Health conditions, Mississippi BRFSS, 2012 - 2021

2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	Linear ⁽²⁾ Change	Quadratic ⁽³⁾ Change	Change ⁽⁴⁾ 2020-2021		
			(_	cent nce Interval) ⁽¹	L)								
Percentage	e of adults w	ho have eve	er been told	by a health	professional	that they h	ad skin canc	er						
5.7 (5.1-6.2)	5.9 (5.3-6.4)	5.7 (4.9-6.4)	6.1 (5.4-6.8)	5.9 (5.2-6.7)	5.4 (4.7-6.1)	6.0 (5.3-6.7)	6.3 (5.5-7.0)	5.6 (5.0-6.3)	6.6 (5.7-7.4)	No	No	No		
Percentage	Percentage of adults who have ever been told by a health professional that they had other types of cancer (other than skin cancer)													
6.4 (5.8-7.1)	6.7 (6.0-7.4)	6.4 (5.6-7.3)	6.9 (6.1-7.7)	6.4 (5.6-7.1)	7.1 (6.2-8.0)	7.1 (6.3-7.9)	6.6 (5.9-7.4)	6.7 (5.9-7.4)	7.9 (7.0-8.8)	No	No	Increased (p=0.04)		
Percentage	Percentage of adults who have ever been told by a health professional that they had COPD, emphysema, or chronic bronchitis													
6.7 (6.0-7.4)	8.7 (7.8-9.6)	7.4 (6.4-8.4)	7.8 (6.8-8.7)	8.3 (7.3-9.2)	8.2 (7.2-9.2)	9.7 (8.8-10.6)	9.4 (8.4-10.4)	8.6 (7.8-9.5)	9.1 (8.0-10.1)	Increased (p<0.001)	No	No		
Percentage	e of adults w	ho have eve	er been told	by a health	professiona	that they h	ad a depress	sive disorde	r					
18.4 (17.2-19.7)	19.2 (17.9-20.5)	19.9 (18.2-21.7)	18.2 (16.8-19.7)	18.8 (17.4-20.3)	20.7 (19.0-22.3)	21.7 (20.3-23.1)	20.6 (19.2-22.1)	20.9 (19.5-22.2)	20.0 (18.4-21.7)	Increased (p<0.001)	No	No		
Percentage	e of adults w	ho have eve	er been told	by a health	professiona	that they h	ad prediabe	tes						
6.5 (5.8-7.3)	7.3 (6.5-8.2)	7.5 (6.4-8.6)	No data	8.4 (7.3-9.5)	8.2 (7.1-9.3)	8.3 (7.4-9.3)	9.2 (8.2-10.3)	10.5 (9.5-11.6)	11.3 (10.0-12.6)	Increased (p<0.001)	No	No		
Percentage	e of adults w	ho have eve	er been told	by a health	professiona	that they h	ad diabetes							
12.5 (11.6-13.4)	12.9 (11.9-13.8)	13.0 (11.7-14.2)	14.7 (13.6-15.9)	13.6 (12.4-14.7)	14.2 (13.0-15.4)	14.3 (13.3-15.4)	14.8 (13.7-15.9)	14.6 (13.6-15.7)	15.2 (13.9-16.5)	Increased (p<0.001)	No	No		

⁽¹⁾ A confidence interval provides a measure of estimate precision; the wider the interval, the more imprecise the estimate.

⁽²⁾ Linear change - Indicates whether there was a significant linear change in prevalence during 2012-2021. That is, did the prevalence increase, decrease, or stay the same?

⁽³⁾ Quadratic change - Indicates whether there was a significant change in the direction of prevalence during 2012-2021.

⁽⁴⁾ Change from 2020-2021 - Indicates whether there was a significant increase or decrease in prevalence between 2020 and 2021.