

# NEBRASKA

Good Life. Great Mission.

DEPT. OF HEALTH AND HUMAN SERVICES



Pete Ricketts, Governor

September 1, 2021

The Honorable Pete Ricketts  
Governor of Nebraska  
Capitol Building  
Lincoln, NE 68509

Dear Governor Ricketts:

Attached is the 2020-2021 Women's Health Initiative's Annual Report. This report is a requirement of LB 480, Section 7 (22), Nebraska Statutes 71-701 through 71-707.

The report was written by Shirley Pickens White, Program Manager, Office of Women's Health Initiative.

Please feel free to contact me if you have questions or need further information about the report. I can be reached at [Charity.Menefee@nebraska.gov](mailto:Charity.Menefee@nebraska.gov) or (402) 471-8566.

Respectfully,

*Charity Menefee*

Charity Menefee, Director of Operations  
Division of Public Health

2020 - 2021

**Women's Health Initiatives**

Lifespan Health Services Unit

Division of Public Health

Nebraska Department of Health and Human Services

ANNUAL REPORT



NEBRASKA

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[www.dhhs.ne.gov/WHI](http://www.dhhs.ne.gov/WHI)



IN FULFILLMENT OF THE REQUIREMENTS OF  
WOMEN'S HEALTH INITIATIVE STATUTE  
NEB. REV. STAT. 71-707

## Acknowledgments

### Nebraska Department of Health and Human Services

Dannette R. Smith, Chief Executive Officer

Gary J. Anthonie, MD, Public Health Director and Chief Medical Officer

Charity Menefee, Director of Operations, Division of Public Health

Sara Morgan, Unit Administrator, Lifespan Health Services

### Women's Health Initiatives Staff

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### CONTACT

Women's Health Initiatives

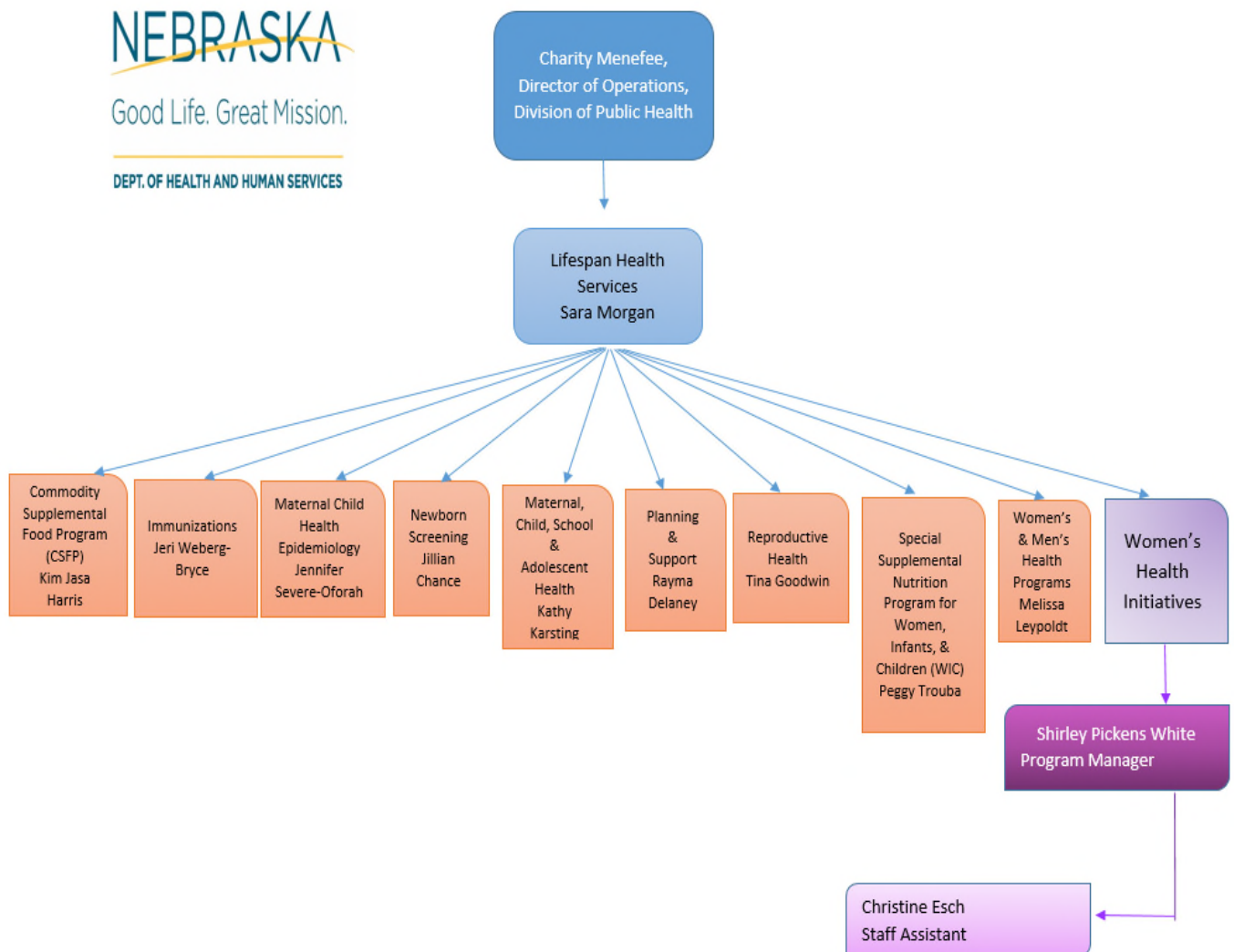
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## DHHS Lifespan Health Services Organizational Chart



## Women's Health Initiative

*Nebr. Rev. Stat. 71-701. The Women's Health Initiative of Nebraska is created within the Department of Health and Human Services. The Women's Health Initiative of Nebraska shall strive to improve the health of women in Nebraska by fostering the development of a comprehensive system of coordinated services, policy development, advocacy, and education. The initiative shall:*

- (1) Serve as a clearinghouse for information regarding women's health issues, including pregnancy, breast and cervical cancers, acquired immunodeficiency syndrome, osteoporosis, menopause, heart disease, smoking, and mental health issues as well as other issues that impact women's health, including substance abuse, domestic violence, teenage pregnancy, sexual assault, adequacy of health insurance, access to primary and preventative health care, and rural and ethnic disparities in health outcomes;*
- (2) Perform strategic planning within the Department of Health and Human Services to develop department-wide plans for implementation of goals and objectives for women's health;*
- (3) Conduct department-wide policy analysis on specific issues related to women's health;*
- (4) Coordinate pilot projects and planning projects funded by the state that are related to women's health;*
- (5) Communicate and disseminate information and perform a liaison function within the department and to providers of health, social, educational, and support services to women;*
- (6) Provide technical assistance to communities, other public entities, and private entities for initiatives in women's health, including, but not limited to, community health assessment and strategic planning and identification of sources of funding and assistance with writing of grants;*
- (7) Encourage innovative responses by public and private entities that are attempting to address women's health issues.*

## Partners

Women's Health Initiative continues to collaborate with these, and other women's health programs:

[Nebraska Pregnancy Risk Assessment Monitoring System](#) (PRAMS), is a survey of new mothers from across the state. PRAMS partners with the Centers for Disease Control and Prevention (CDC) to identify and monitor selected maternal behaviors and experiences before, during, and right after pregnancy.

[Maternal Child, Adolescent, and School Health](#) supports holistic life course development and pregnancy throughout young adulthood. Life course development is the collection of events that positively and negatively influence the health of every person. These events can happen before conception, during and after pregnancy, and throughout all stages of life.

[Nebraska Reproductive Health](#) works with providers to assist patients with determining the number and spacing of their children, to access preventive reproductive health care, and to decrease the incidence and repercussions of STDs/HIV.

[Health Disparities and Health Equity](#) works to improve health outcomes for Nebraska's culturally diverse populations through a vision of health equity for all Nebraskans. The priority populations are racial and ethnic minorities, American Indians, refugees and immigrants.

[Women's and Men's Health Programs](#) provide preventive health screenings, and public health education services to qualified Nebraska residents between the ages of 40 and seventy-four.

[The Nebraska Coalition to End Sexual and Domestic Violence](#) is a statewide advocacy organization committed to the prevention and elimination of sexual and domestic violence. The organization works to enhance safety and justice for victims of domestic violence, sexual assault, and human trafficking by supporting and building upon the services provided by our network of local programs.

## Women's Health Advisory Council

**COUNCIL PURPOSE:** The purpose of the Council shall be to advise and serve as a resource for Nebraska Department of Health and Human Services in carrying out its duties as enacted by the Legislature in the Women's Health Initiative of Nebraska Revised Statutes § 71-707.

### 2020-2021 Meetings and Members

10/14/20, Virtual  
01/13/21, Virtual  
04/14/21, Virtual

**Chair: Rachel Hays, BA, Columbus**

**Vice-Chair: Ashley Carroll, BA, Omaha**

Gary Anthon, MD, Lincoln

Robert Drvol, MD, Omaha

Kathryn Fiandt, RN, APRN-NP, Omaha

Elizabeth Mollard, RN, Lincoln

Sara Morgan, MS, Omaha

Elizabeth Hallgren, MBA, Omaha

Kayleigh Lewandowski, BS, BSN, Omaha

Typically, the Council has multiple sub-committees, such as *Healthy Aging*, *Health Disparities*, and *Behavioral Health*, but due to Covid-19, The *Legislative Committee* was the only active committee in 2020-2021. The *Legislative Committee* reviewed introduced legislation and determined that the following were the 2021 priority bills:

- [LB187](#) Change definition of sexual penetration for purposes of sexual offenses
- [LB249](#) Prohibit employers from inquiring about wage rate history under the Nebraska Fair Employment Practice Act
- [LB374](#) Adopt the Alzheimer's Disease and Other Dementia Support Act

The following are additional bills that the legislative committee tracked:

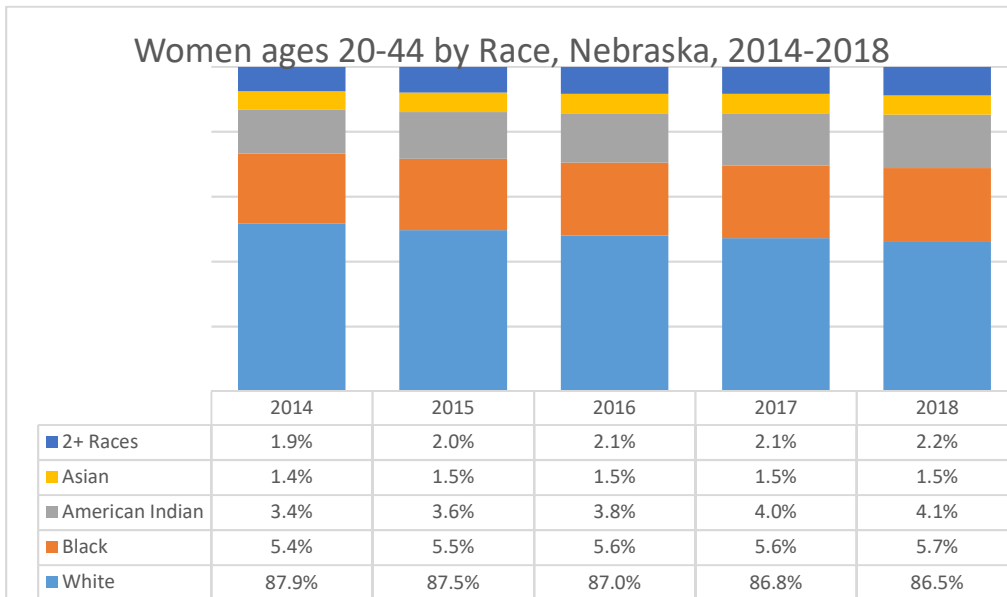
- [LB360](#) Define and redefine terms relating to sexual assault offense
- [LB519](#) Provide immunity from arrest and prosecution for certain drug and alcohol offenses for witnesses and victims of sexual assaults

Visit the Council website [HERE](#)

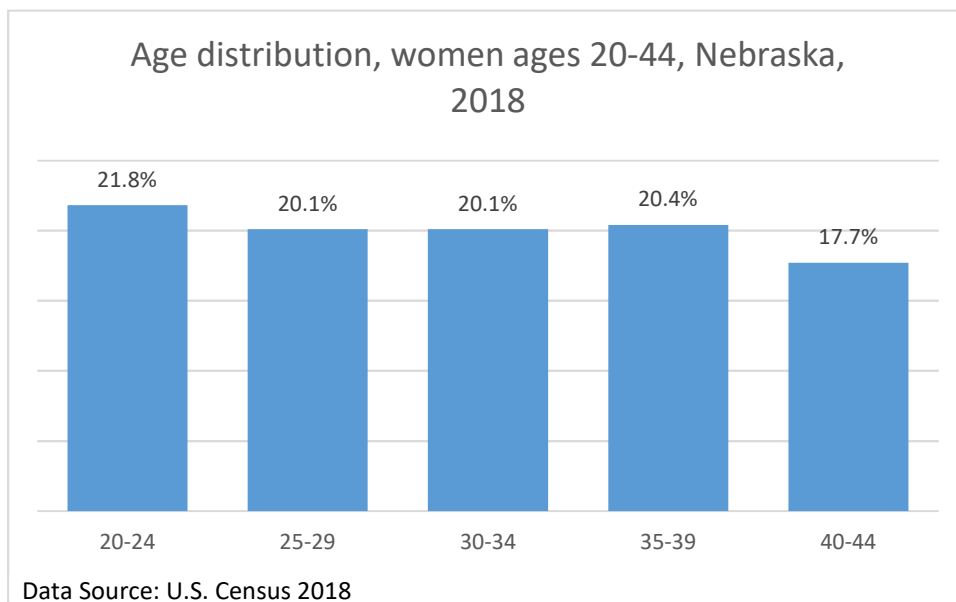
## Demographics

According to the 2020 US Census, the ratio of females to males in Nebraska is currently at approximately 50.0% females and 50.0% males.

The following tables provide a summary of the demographics of women (ages 20-44) from 2011 to 2018 in Nebraska:



Data Source: U.S. Census 2014-2018



## Mental Health

Information gathered in the *Nebraska 2020 Title V Needs Assessment* indicated that one in six women reported having poor mental health for 10+ of the past 30 days in Nebraska in 2018. In 2017, Nebraska women had a suicide rate of 8.1 per 100,000 women – higher than the national rate of 7.1 per 100,000 women. Mental health, including mitigation of mood and anxiety disorders (like depression, PTSD, and generalized anxiety disorder), is essential to an individual's well-being, healthy family and interpersonal relationships, and the ability to live a full and productive life.

The *Nebraska 2020 Title V Needs Assessment* also included an issue brief that indicates one of the ways in which women are managing their mental health is through alcohol use and binge drinking. According to the Centers for Disease Control and Prevention (CDC), approximately 46% of adult women report drinking alcohol in the last 30 days. About 1 in 2 women of child-bearing age (i.e., aged 18–44 years) drink alcohol and 18% of women who drink alcohol in this age group binge drink (4 or more drinks in 2 hours for women, 5 or more for men). In Nebraska (2018), 21% of women reported binge drinking.

### **Mental Health was not good on 14 or more of the past 30 days, Women 18-44, Nebraska, 2011-2018**

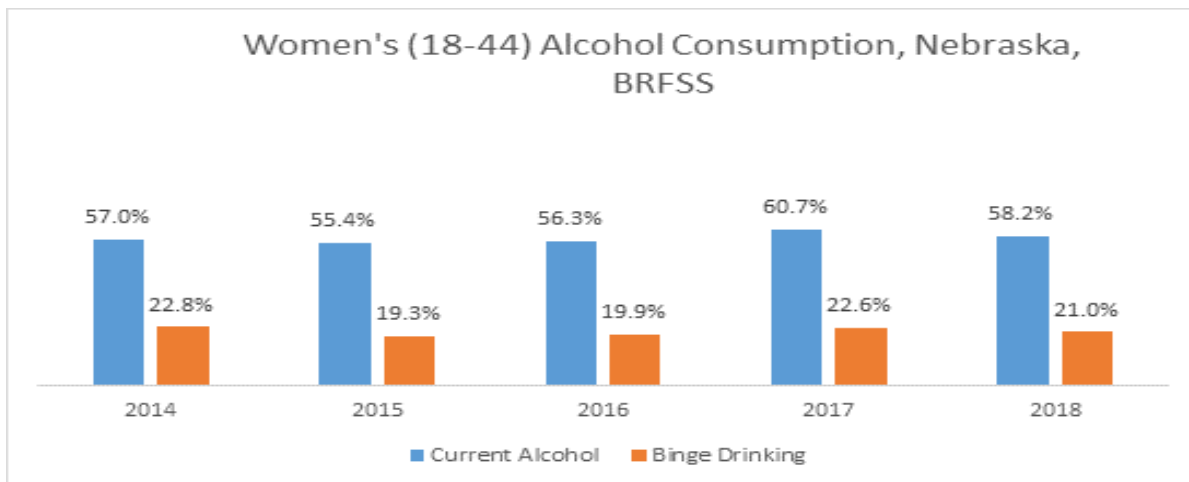
	2018		95% C.I. (Low - High)	
	N	%		
2011	3,911	12.0%	(10.7	13.5)
2012	2,753	11.9%	(10.3	13.7)
2013	2,486	12.5%	(10.7	14.5)
2014	3,246	11.6%	(10.1	13.4)
2015	2,508	11.9%	(10.1	13.9)
2016	2,270	14.6%	(12.4	17.0)
2017	2,226	17.0%	(14.8	19.5)
2018	2,200	16.1%	(14.0	18.4)

Data Source: BRFSS

### **Number and rate per 100,000 of suicides among women (15-44)**

	N	Rate
2014	25	6.9
2015	24	6.6
2016	15	4.1
2017	30	8.1
2018	18	4.8

Data Source: NE Vital Records



## Chronic Disease

Obesity is associated with serious health risks, including hypertension and diabetes. The chart below provides information on rates of obesity from 2011 to 2018 for Nebraska women, ages 18 to 44, as reported by the Nebraska Behavioral Risk Factor Surveillance System (BRFSS).

<b>Number and Percent of Women 18-44 years old overweight or obese, Nebraska, 2011-2018</b>			
	<b>N</b>	<b>%</b>	<b>95% C.I. (Low - High)</b>
<b>Obese (BMI=30+)</b>			
2011	3,581	25.5%	(23.6 27.4)
2012	2,524	25.1%	(23.0 27.3)
2013	2,275	25.1%	(22.6 27.7)
2014	2,932	26.5%	(24.1 28.9)
2015	2,204	26.4%	(23.9 29.1)
2016	2,006	28.9%	(26.0 31.9)
2017	1,964	30.9%	(28.0 33.9)
2018	1,947	31.1%	(28.4 34.0)
<b>Overweight or Obese (BMI=25+)</b>			
2011	3,581	50.0%	(47.8 52.2)
2012	2,524	51.4%	(48.9 53.9)
2013	2,275	51.0%	(47.9 54.1)
2014	2,932	54.2%	(51.4 56.9)
2015	2,204	54.9%	(51.8 57.9)
2016	2,006	55.6%	(52.3 58.8)
2017	1,964	58.6%	(55.3 61.8)
2018	1,947	57.5%	(54.4 60.6)

*Data Source: BRFSS*

The Nebraska Behavioral Risk Factor Surveillance System (BRFSS) collects data on health-related risk behaviors and events, chronic health conditions, and use of preventive services. Information gathered during the surveys is used to identify emerging health problems, establish and track health objectives, and develop, implement, and evaluate a broad array of disease prevention activities in the state.



## Chronic Disease, continued

According to the Centers for Disease Control and Prevention, National Center for Health Statistics, blood pressure normally fluctuates throughout the day, but if it stays high for a long time, it can damage the heart. Hypertension, or high blood pressure, is blood pressure that is higher than normal. Hypertension increases the risk for heart disease and stroke, which are leading causes of death in the United States. The charts below provide information on high blood pressure percentage from 2011 to 2018 for Nebraska women, ages 18 and older, as reported by the Nebraska BRFSS.

<b>Number and Percent of Women 18 and older who have ever been told they have high blood pressure (excluding pregnancy)</b>				
	<b>(excluding pregnancy)</b>		<b>95% C.I. (Low - High)</b>	
	<b>N</b>	<b>%</b>		
Ever told they have high blood pressure (excluding pregnancy)				
<i>Sub-population: Women 18 years and older</i>				
2011	15,144	26.9%	(25.9	27.9)
2012	-	-	-	-
2013	10,129	28.2%	(26.9	29.6)
2014	-	-	-	-
2015	9,969	27.2%	(26.0	28.5)
2016	-	-	-	-
2017	8,357	27.8%	(26.4	29.2)
2018	-	-	-	-

*Data Source: BRFSS*

<b>Number and Percent of Women 18 and older who have ever been told they have diabetes (excluding pregnancy)</b>				
	<b>(excluding pregnancy)</b>		<b>95% C.I. (Low - High)</b>	
	<b>N</b>	<b>%</b>		
Ever told they have diabetes (excluding pregnancy)				
<i>Sub-population: Women 18 years and older</i>				
2011	15,171	8.2%	(7.6	8.8)
2012	11,295	7.9%	(7.3	8.5)
2013	10,142	8.3%	(7.5	9.2)
2014	12,790	8.6%	(7.9	9.3)
2015	9,982	8.6%	(7.8	9.3)
2016	8,541	8.9%	(8.1	9.8)
2017	8,364	9.9%	(9.0	10.9)
2018	8,052	9.1%	(8.3	10.0)

*Data Source: BRFSS*

## Cancer Screenings

According to the Center for Disease Control (CDC), breast cancer is the second most common cancer among women in the United States (skin cancer is the most common). Black women die from breast cancer at a higher rate than White women. In 2018, the latest year for which incidence data are available in the United States, 254,744 new cases of female Breast Cancer were reported among women, and 42,465 women died of this cancer. For every 100,000 women, 127 new female Breast Cancer cases were reported and 20 women died of this cancer. The following charts summarize rate of testing for women from 2011 to 2018 in Nebraska:

<b>Mammogram in the past two years, Women 50+, Nebraska, 2011-2018</b>				
			<b>95% C.I. (Low - High)</b>	
	<b>N</b>	<b>%</b>		
2011	-	-	-	-
2012	7,536	72.9%	(71.4	74.3)
2013	-	-	-	-
2014	8,213	73.4%	(72.0	74.7)
2015	-	-	-	-
2016	5,422	70.0%	(68.2	71.8)
2017	-	-	-	-
2018	5,037	71.6%	(69.7	73.4)

*Data Source: BRFSS*

<b>Mammogram in the past two years, Women 40+, Nebraska, 2011-2018</b>				
			<b>95% C.I. (Low - High)</b>	
	<b>N</b>	<b>%</b>		
2011	-	-	-	-
2012	8,939	70.0%	(68.6	71.3)
2013	-	-	-	-
2014	9,728	70.5%	(69.1	71.9)
2015	-	-	-	-
2016	6,393	67.2%	(65.4	69.0)
2017	-	-	-	-
2018	5,927	69.3%	(67.5	71.0)

*Data Source: BRFSS*

<b>Clinical breast exam in the past two years, Women 18+, Nebraska, 2011-2018</b>				
			<b>95% C.I. (Low - High)</b>	
	<b>N</b>	<b>%</b>		
2011	-	-	-	-
2012	10,915	70.6%	(69.3	71.9)
2013	-	-	-	-
2014	12,136	69.6%	(68.2	71.0)
2015	-	-	-	-
2016	-	-	-	-
2017	-	-	-	-
2018	-	-	-	-

*Data Source: BRFSS*

**Cancer Screenings, continued**

According to the CDC, cervical cancer used to be the leading cause of cancer death for women in the United States. However, in the past 40 years, the number of cases of cervical cancer and the number of deaths from cervical cancer have decreased significantly. This decline largely is the result of many women getting regular Pap tests, which can find cervical pre-cancerous cells before it turns into cancer. The following chart summarizes rate of testing for women from 2011 to 2018 in Nebraska:

<b>Pap test in the past two years, Women 18+, Nebraska, 2011-2018</b>				
	<b>N</b>	<b>%</b>	<b>95% C.I. (Low - High)</b>	
2011	-	-	-	-
2012	7,251	67.2%	(65.6	68.8)
2013	-	-	-	-
2014	8,215	64.7%	(62.9	66.3)
2015	-	-	-	-
2016	5,490	58.4%	(56.3	60.5)
2017	-	-	-	-
2018	5,138	59.0%	(57.0	61.1)

*Data Source: BRFSS*

**Maternal Health- Total Births, Birth weight, Age of Mother, Prenatal Care**

According to the DHHS Office of Health Disparities and Health Equity 2020 Nebraska Health Disparities Report, the infant mortality rate (expressed as per 1,000 live births) among African Americans was 13.4, compared to that among the White population at 5.8. Additionally, American Indians in Nebraska (1.4% of the NE population) have a 2.7 times higher rate of inadequate prenatal care.

<b>Year</b>	<b>Births</b>
2015	26,678
2016	26,594
2017	25,833
2018	25,495
2019	24,758

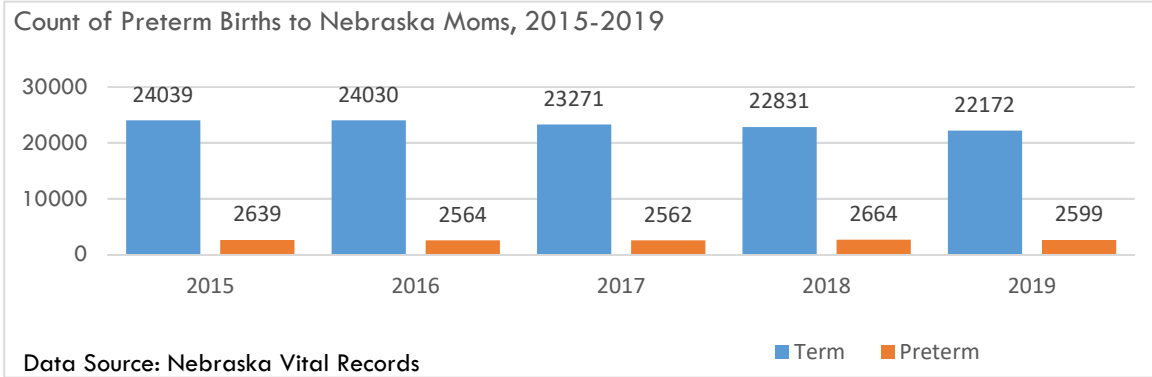
Data Source: NE Vital Records

<b>The percentage of women (15-44) whose prenatal care was adequate/adequate+, Nebraska, 2018</b>		
	<b>N</b>	<b>%</b>
Total	19,200	75.4
White (alone)	15,349	79.7
Black or African American (alone)	2,014	63.3
American Indian (alone)	222	50.1
Asian (alone)	701	70.1
Hispanic	2,598	62.8

Data Source: NE Vital Records

### Maternal Health, continued

Preterm birth occurs when a baby is born too early, before completing 37 weeks of pregnancy. According to CDC in 2019, preterm birth affected 1 of every 10 infants born in the United States. In 2019, Nebraska’s preterm births comprised 10.5% of all births (Nebraska Vital Records).

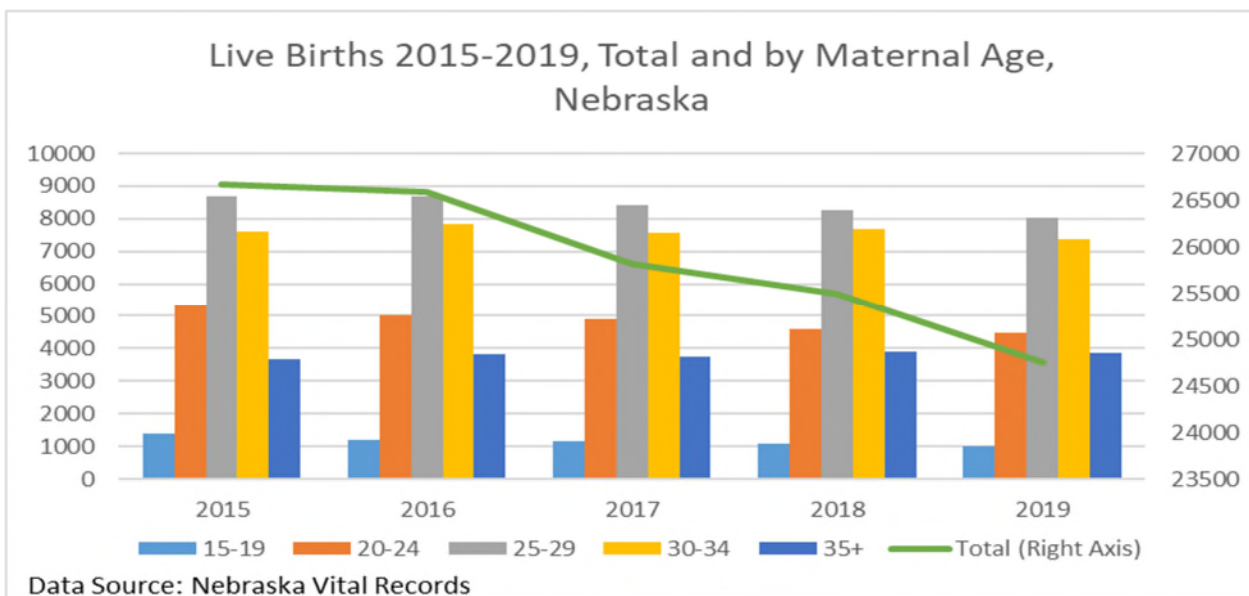
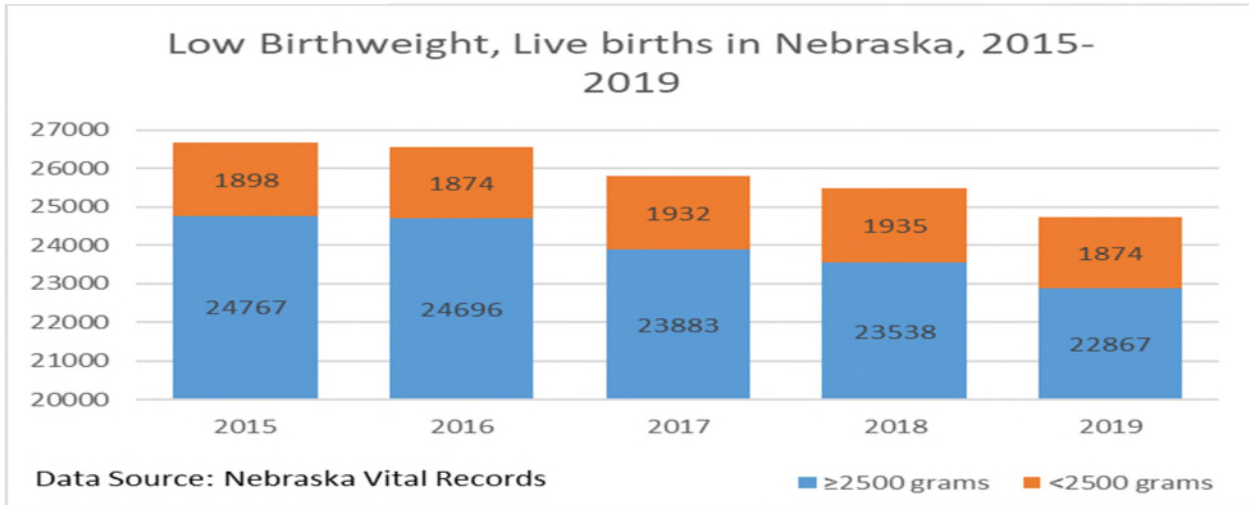


Multiple gestation pregnancies are much more likely to result in preterm births. Looking only at singleton births in Nebraska from 2015-2019, 8.3% of such singleton pregnancies resulted in preterm births. The chart below shows all live births by preterm birth status.

	N	%
Total	18,450	74.5
White (alone)	15,006	79.5
Black or African American (alone)	1,127	58.3
American Indian (alone)	220	50.8
Asian (alone)	661	67.5
Hispanic	2,347	60.1

Data Source: NE Vital Records

15-19	20-24	25-29	30-34	35+	Total
1388	5346	8669	7586	3680	26,669



## 10 Leading Causes of Death for Women

The numbers below represent the number of deaths among women (ages 15-44 in Nebraska) in 2019

1. Unintentional Injury (n=67)
2. Malignant Neoplasms (n=53)
3. Suicide (n=27)
4. Heart Disease (n=21)
5. Liver Disease (n=15)
6. Homicide (n<10)
7. Diabetes Mellitus (n<10)
8. Complicated Pregnancy (n<10)
9. Chronic Lower Respiratory Disease (n<10)
10. Pneumonitis (n<10)

CDC WISQARS (Web-based Injury Statistics Query and Reporting System) 10 leading causes of death, Nebraska, 2019, All Races, Females ages 15-44 (data source originally: National Center for Health Statistics, National Vital Statistics System)