



County Health Rankings

Mobilizing Action Toward Community Health

2011

Washington



Robert Wood Johnson Foundation



UNIVERSITY OF WISCONSIN

Population Health Institute

Translating Research into Policy and Practice

Introduction

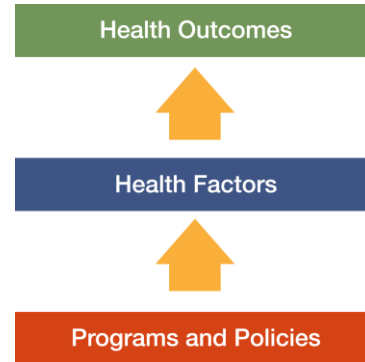
Where we live matters to our health. The health of a community depends on many different factors, including quality of health care, individual behavior, education and jobs, and the environment. We can improve a community's health through programs and policies. For example, people who live in communities with ample park and recreation space are more likely to exercise, which reduces heart disease risk. People who live in communities with smoke-free laws are less likely to smoke or to be exposed to second-hand smoke, which reduces lung cancer risk.

The problem is that there are big differences in health across communities, with some places being much healthier than others. And up to now, it has been hard to get a standard way to measure how healthy a county is and see where they can improve.

The Robert Wood Johnson Foundation and the University of Wisconsin Population Health Institute are pleased to present the 2011 *County Health Rankings*, a collection of 50 reports that reflect the overall health of counties in every state across the country. For the second year in a row, counties can get a snapshot of how healthy their residents are by comparing their overall health and the factors that influence their health with other counties in their state. This allows communities to see county-to-county where they are doing well and where they need to improve.

Everyone has a stake in community health. We all need to work together to find solutions. The *County Health Rankings* serve as both a call to action and a needed tool in this effort.

All of the *County Health Rankings* are based upon this model of population health improvement:



In this model, health outcomes are measures that describe the current health status of a county. These health outcomes are influenced by a set of health factors. These health factors and their outcomes may also be affected by community-based programs and policies designed to alter their distribution in the community. Counties can improve health outcomes by addressing all health factors with effective, evidence-based programs and policies.

To compile the *Rankings*, we built on our prior work in Wisconsin, obtained input from a team of expert advisors, and worked closely with staff from the National Center for Health Statistics. Together we selected a number of population health measures based on scientific relevance, importance, and availability of data at the county level.

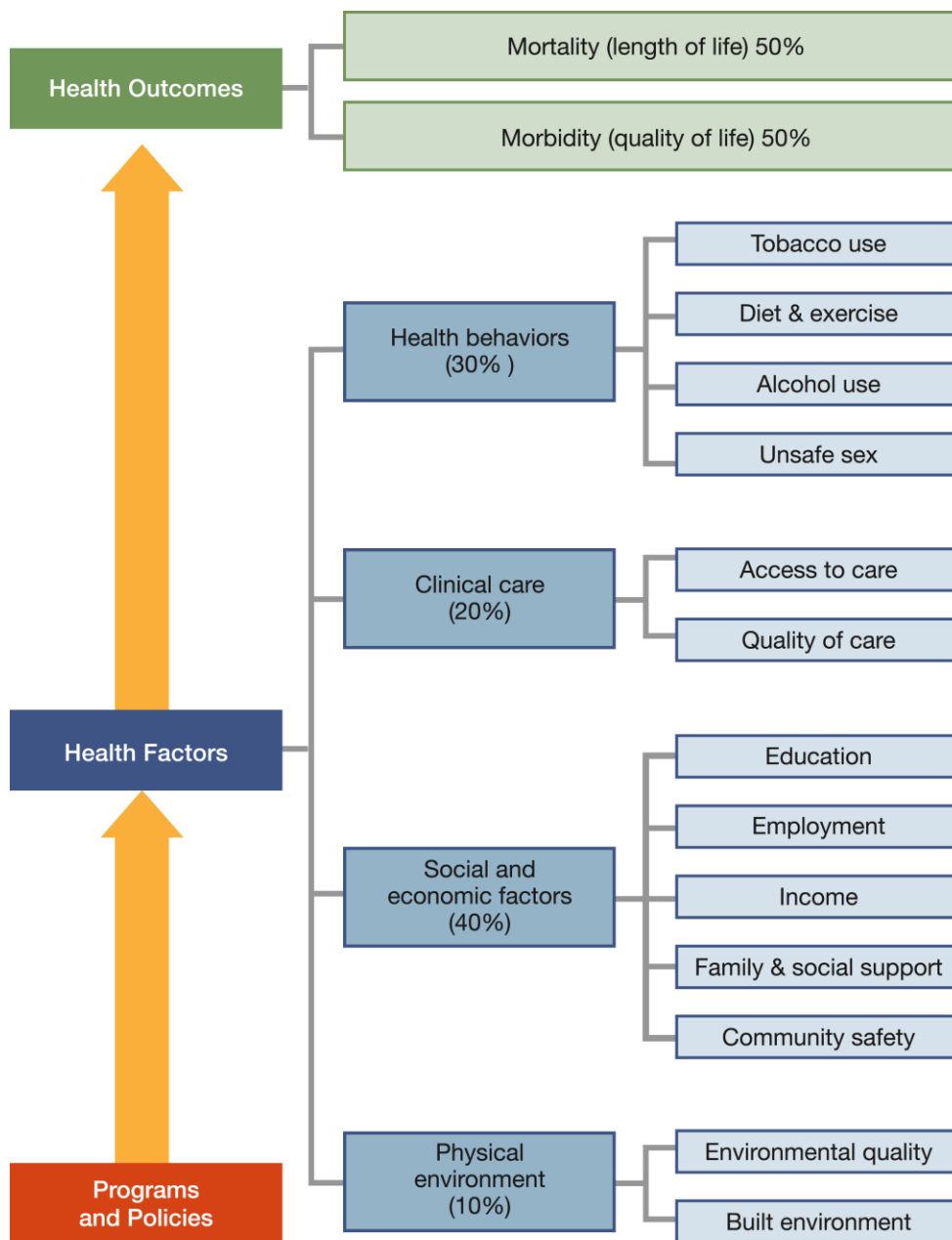
For a more detailed explanation of our approach, the methods used to compile the *Rankings*, information on the action steps communities can take to improve their health, and examples of communities in action, see www.countyhealthrankings.org



The Rankings

This report ranks Washington counties according to their summary measures of **health outcomes** and **health factors**, as well as the components used to create each summary measure. The figure below depicts the structure of the *Rankings* model. Counties receive a rank for each population health component; those having high ranks (e.g., 1 or 2) are estimated to be the “healthiest.”

Our summary **health outcomes** rankings are based on an equal weighting of mortality and morbidity measures. The summary **health factors** rankings are based on weighted scores of four types of factors: behavioral, clinical, social and economic, and environmental. The weights for the factors (shown in parentheses in the figure) are based upon a review of the literature and expert input, but represent just one way of combining these factors.

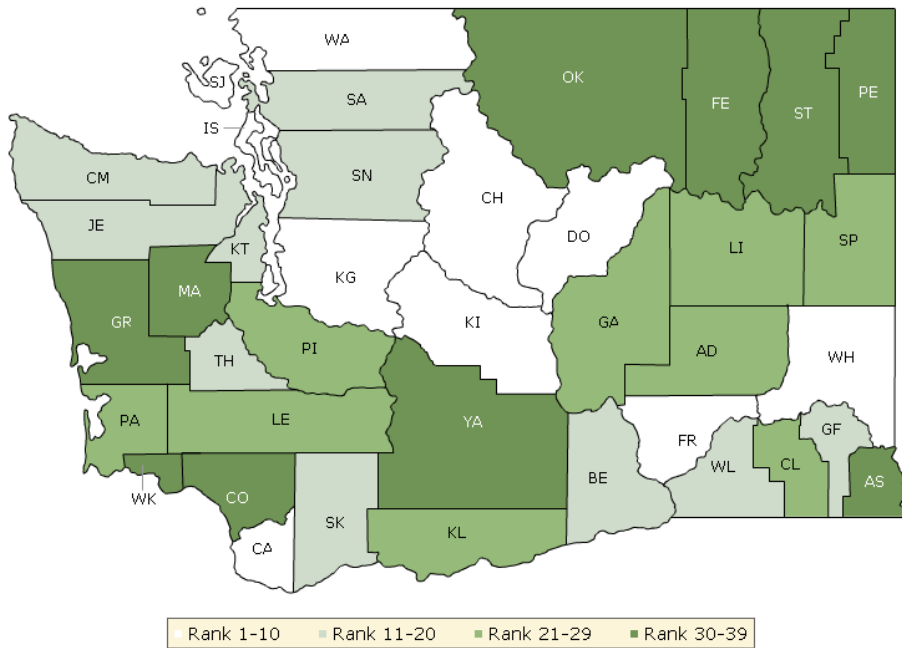


County Health Rankings model ©2010 UWPHI

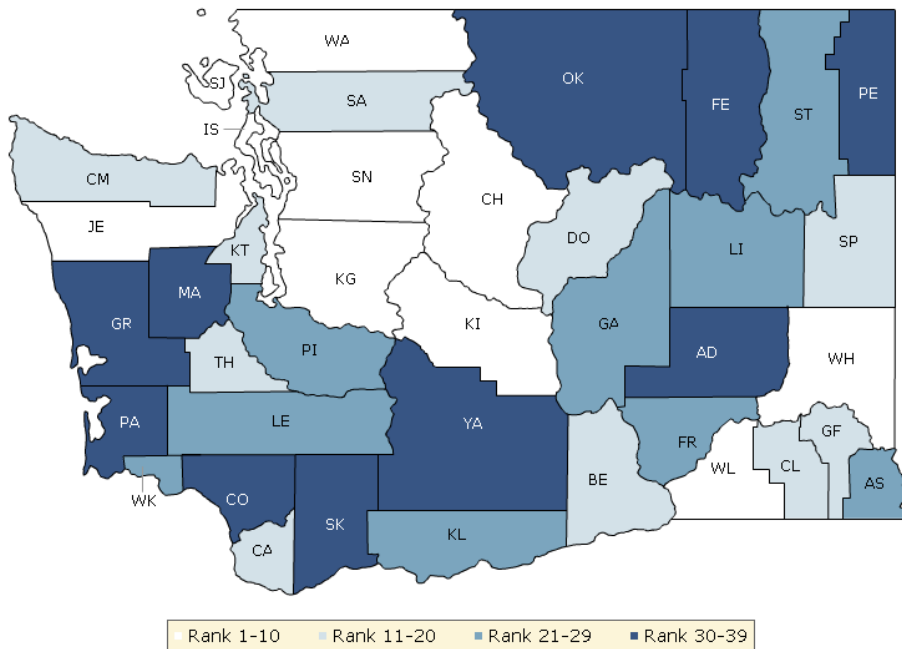
The maps on this page display Washington's counties divided into groups by health rank. The lighter colors indicate better performance in the respective summary rankings. The green map shows the distribution of summary health outcomes. The blue displays the distribution of the summary rank for health factors.

Maps help locate the healthiest and least healthy counties in the state. The health factors map appears similar to the health outcomes map, showing how health factors and health outcomes are closely related.

HEALTH OUTCOMES



HEALTH FACTORS



Summary Health Outcomes & Health Factors Rankings

Counties receive two summary ranks:

- Health Outcomes
- Health Factors

Each of these ranks represents a weighted summary of a number of measures.

Health outcomes represent how healthy a county is while health factors are what influences the health of the county.

Rank	Health Outcomes	Rank	Health Factors
1	San Juan	1	San Juan
2	Kittitas	2	King
3	Whitman	3	Whitman
4	Island	4	Kittitas
5	King	5	Chelan
6	Whatcom	6	Whatcom
7	Chelan	7	Island
8	Douglas	8	Jefferson
9	Clark	9	Walla Walla
10	Franklin	10	Snohomish
11	Skagit	11	Thurston
12	Snohomish	12	Kitsap
13	Thurston	13	Benton
14	Benton	14	Spokane
15	Kitsap	15	Douglas
16	Skamania	16	Clallam
17	Walla Walla	17	Columbia
18	Jefferson	18	Clark
19	Clallam	19	Skagit
20	Garfield	20	Garfield
21	Columbia	21	Lincoln
22	Spokane	22	Wahkiakum
23	Lincoln	23	Klickitat
24	Adams	24	Pierce
25	Pierce	25	Asotin
26	Klickitat	26	Franklin
27	Grant	27	Grant
28	Lewis	28	Lewis
29	Pacific	29	Stevens
30	Yakima	30	Mason
31	Grays Harbor	31	Skamania
32	Cowlitz	32	Okanogan
33	Stevens	33	Cowlitz
34	Pend Oreille	34	Yakima
35	Mason	35	Pend Oreille
36	Asotin	36	Adams
37	Okanogan	37	Pacific
38	Wahkiakum	38	Grays Harbor
39	Ferry	39	Ferry

Health Outcomes Rankings

The summary health outcomes ranking is based on measures of mortality and morbidity. Each county's ranks for mortality and morbidity are displayed here. The mortality rank, representing length of life, is based on a measure of premature death: the years of potential life lost prior to age 75.

The morbidity rank is based on measures that represent health-related quality of life and birth outcomes. We combine four morbidity measures: self-reported fair or poor health, poor physical health days, poor mental health days, and the percent of births with low birthweight.

Rank	Mortality	Rank	Morbidity
1	San Juan	1	San Juan
2	Whitman	2	Kittitas
3	Franklin	3	Douglas
4	King	4	Whatcom
5	Island	5	Island
6	Whatcom	6	Whitman
7	Chelan	7	Jefferson
8	Snohomish	8	King
9	Clark	9	Clallam
10	Kittitas	10	Chelan
11	Skagit	11	Skamania
12	Kitsap	12	Skagit
13	Benton	13	Clark
14	Thurston	14	Thurston
15	Douglas	15	Garfield
16	Spokane	16	Pacific
17	Walla Walla	17	Snohomish
18	Adams	18	Lincoln
19	Pierce	19	Columbia
20	Columbia	20	Franklin
20	Garfield	21	Walla Walla
22	Skamania	22	Benton
23	Asotin	23	Kitsap
24	Lincoln	24	Klickitat
25	Grant	25	Lewis
26	Clallam	26	Grant
27	Klickitat	27	Spokane
28	Jefferson	28	Pierce
29	Yakima	29	Adams
30	Lewis	30	Stevens
31	Pend Oreille	31	Cowlitz
32	Grays Harbor	32	Grays Harbor
33	Cowlitz	33	Yakima
34	Mason	34	Mason
35	Okanogan	35	Wahkiakum
36	Pacific	36	Pend Oreille
37	Stevens	37	Okanogan
38	Wahkiakum	38	Ferry
39	Ferry	39	Asotin

Health Factors Rankings

The summary health factors ranking is based on four factors: health behaviors, clinical care, social and economic, and physical environment factors. In turn, each of these factors is based on several measures. Health behaviors include measures of smoking, diet and exercise, alcohol use, and risky sex behavior. Clinical

care includes measures of access to care and quality of care. Social and economic factors include measures of education, employment, income, family and social support, and community safety. The physical environment includes measures of environmental quality and the built environment.

Rank	Health Behaviors	Clinical Care	Social & Economic Factors	Physical Environment
1	San Juan	King	Whitman	Chelan
2	King	Walla Walla	San Juan	Jefferson
3	Whitman	Columbia	King	Kittitas
4	Jefferson	San Juan	Thurston	Benton
5	Whatcom	Chelan	Kittitas	Snohomish
6	Chelan	Clallam	Island	Pacific
7	Walla Walla	Spokane	Kitsap	Kitsap
8	Kittitas	Asotin	Benton	Thurston
9	Franklin	Cowlitz	Lincoln	Clallam
10	Island	Kittitas	Whatcom	Walla Walla
11	Wahkiakum	Whatcom	Snohomish	Whatcom
12	Clallam	Snohomish	Douglas	Yakima
13	Klickitat	Thurston	Chelan	Skagit
14	Douglas	Jefferson	Spokane	Clark
15	Columbia	Island	Walla Walla	Island
16	Snohomish	Skagit	Jefferson	Spokane
17	Clark	Wahkiakum	Clark	Pend Oreille
18	Garfield	Pierce	Garfield	Lewis
19	Thurston	Kitsap	Skagit	Grant
20	Kitsap	Okanogan	Skamania	Douglas
21	Benton	Benton	Columbia	Grays Harbor
22	Skagit	Pend Oreille	Mason	Garfield
23	Spokane	Garfield	Asotin	Columbia
24	Lincoln	Klickitat	Lewis	Franklin
25	Yakima	Clark	Clallam	Cowlitz
26	Grant	Lewis	Pierce	Skamania
27	Pierce	Grant	Stevens	Stevens
28	Ferry	Douglas	Wahkiakum	Adams
29	Adams	Lincoln	Grant	San Juan
30	Stevens	Mason	Klickitat	Asotin
31	Okanogan	Stevens	Adams	Mason
32	Pend Oreille	Yakima	Cowlitz	Whitman
33	Skamania	Grays Harbor	Franklin	Klickitat
34	Asotin	Skamania	Pacific	Pierce
35	Mason	Adams	Grays Harbor	Ferry
36	Lewis	Franklin	Okanogan	Okanogan
37	Pacific	Whitman	Yakima	King
38	Grays Harbor	Pacific	Pend Oreille	Wahkiakum
39	Cowlitz	Ferry	Ferry	Lincoln

2011 County Health Rankings: Measures, Data Sources, and Years of Data

	Measure	Data Source	Years of Data
HEALTH OUTCOMES			
Mortality	Premature death	National Center for Health Statistics	2005-2007
Morbidity	Poor or fair health	Behavioral Risk Factor Surveillance System	2003-2009
	Poor physical health days	Behavioral Risk Factor Surveillance System	2003-2009
	Poor mental health days	Behavioral Risk Factor Surveillance System	2003-2009
	Low birthweight	National Center for Health Statistics	2001-2007
HEALTH FACTORS			
HEALTH BEHAVIORS			
Tobacco	Adult smoking	Behavioral Risk Factor Surveillance System	2003-2009
Diet and Exercise	Adult obesity	National Center for Chronic Disease Prevention and Health Promotion	2008
Alcohol Use	Excessive drinking	Behavioral Risk Factor Surveillance System	2003-2009
	Motor vehicle crash death rate	National Center for Health Statistics	2001-2007
High Risk Sexual Behavior	Sexually transmitted infections	National Center for Hepatitis, HIV, STD and TB Prevention	2008
	Teen birth rate	National Center for Health Statistics	2001-2007
CLINICAL CARE			
Access to Care	Uninsured adults	Small Area Health Insurance Estimates, U.S. Census	2007
	Primary care providers	Health Resources & Services Administration	2008
Quality of Care	Preventable hospital stays	Medicare/Dartmouth Institute	2006-2007
	Diabetic screening	Medicare/Dartmouth Institute	2006-2007
	Mammography screening	Medicare/Dartmouth Institute	2006-2007
SOCIOECONOMIC FACTORS			
Education	High school graduation	National Center for Education Statistics ¹	2006-2007
	Some college	American Community Survey	2005-2009
Employment	Unemployment	Bureau of Labor Statistics	2009
Income	Children in poverty	Small Area Income and Poverty Estimates, U.S. Census	2008
Family and Social Support	Inadequate social support	Behavioral Risk Factor Surveillance System	2005-2009
	Single-parent households	American Community Survey	2005-2009
Community Safety	Violent crime ²	Uniform Crime Reporting, Federal Bureau of Investigation	2006-2008
PHYSICAL ENVIRONMENT			
Air Quality ³	Air pollution-particulate matter days	U.S. Environmental Protection Agency / Centers for Disease Control and Prevention	2006
	Air pollution-ozone days	U.S. Environmental Protection Agency / Centers for Disease Control and Prevention	2006
Built Environment	Access to healthy foods	Census Zip Code Business Patterns	2008
	Access to recreational facilities	Census County Business Patterns	2008

¹ State data sources for KY, NH, NC, PA, SC, and UT (2008-2009).

² Homicide rate (2001-2007) from National Center for Health Statistics for AK, AZ, AR, CO, CT, GA, ID, IN, IA, KS, KY, LA, MN, MS, MT, NE, NH, NM, NC, ND, OH, SD, UT, and WV. State data source for IL.

³ Not available for AK and HI.

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