



County Health Rankings & Roadmaps

A Healthier Nation, County by County

2013 *Rankings*

Iowa



Robert Wood Johnson Foundation



UNIVERSITY OF WISCONSIN

Population Health Institute

Translating Research for Policy and Practice

Introduction

Where we live matters to our health. The health of a community depends on many different factors, including the environment, education and jobs, access to and quality of healthcare, and individual behaviors. We can improve a community's health by implementing effective policies and programs. For example, 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. In addition, people who live in communities with safe and accessible park and recreation space are more likely to exercise, which reduces heart disease risk.

However, health varies greatly across communities, with some places being much healthier than others. And, until now, there has been no standard method to illustrate what we know about what makes people sick or healthy or a central resource to identify what we can do to create healthier places to live, learn, work and play.

We know that much of what influences our health happens outside of the doctor's office – in our schools, workplaces and neighborhoods. The *County Health Rankings & Roadmaps* program provides information on the overall health of your community and provides the tools necessary to create community-based, evidence-informed solutions. Ranking the health of nearly every county across the nation, the *County Health Rankings* illustrate **what we know** when it comes to what is making communities sick or healthy. The *County Health Roadmaps* show **what we can do** to create healthier places to live, learn, work and play. The Robert Wood Johnson Foundation collaborates with the University of Wisconsin

Population Health Institute to bring this groundbreaking program to counties and states across the nation.

The *County Health Rankings & Roadmaps* program includes the *County Health Rankings* project, launched in 2010, and the newer *Roadmaps* project that mobilizes local communities, national partners and leaders across all sectors to improve health. The program is based on 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. Counties can improve health outcomes by addressing all health factors with effective, evidence-informed policies and programs.

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

Guide to Our Web Site

To compile the *Rankings*, we selected measures that reflect important aspects of population health that can be improved and are available at the county level across the nation. Visit www.countyhealthrankings.org to learn more.

To get started and see data, enter your county or state name in the search box. Click on the name of a county or measure to see more details. You can: Compare Counties; Download data for your state; Print one or more county

snapshots; or Share information with others via Facebook, Twitter, or Google+. To understand our methods, click on Learn about the Data and Methods. You can also take advantage of the Using the *Rankings* Data guide to help you explore the data and figure out more about what is driving your community's health. To learn about what you can do to improve health in your community, visit the *Roadmaps to Health* Action Center. Finally, you can learn what others are doing by reading Communities Stories and visiting the Project Showcase.

County Health Roadmaps

The *Rankings* illustrate **what we know** when it comes to making people sick or healthy. The *County Health Rankings* confirm the critical role that factors such as education, jobs, income and the environment play in how healthy people are and how long we live.

The *County Health Roadmaps* mobilizes local communities, national partners and leaders across all sectors to improve health. The *County Health Roadmaps* show **what we can do** to create healthier places to live, learn, work and play. The Robert Wood Johnson Foundation (RWJF) collaborates with the University of Wisconsin Population Health Institute (UWPHI) to bring this groundbreaking project to cities, counties and states across the nation.

The *Roadmaps* project includes grants to local coalitions and partnerships among policymakers, business, education, public health, health care, and community organizations; grants to national organizations working to improve health; recognition of communities whose promising efforts have led to better health; and customized guidance on strategies to improve health.

Roadmaps to Health Community Grants

The *Roadmaps to Health Community Grants* provide funding for 2 years to thirty state and local efforts among policymakers, business, education, healthcare, public health and community organizations working to create positive policy or systems changes that address the social and economic factors that influence the health of people in their community.

Roadmaps to Health Partner Grants

RWJF is awarding *Roadmaps to Health Partner Grants* to national organizations that are experienced at engaging local partners and leaders and are able to deliver high-quality training and technical assistance, and committed to making communities healthier places to live, learn, work and play. Partner grantees increase awareness about the *County Health Rankings & Roadmaps* to their members, affiliates and allies. As of February 2013, RWJF has awarded partner grants to United Way Worldwide, National Business Coalition on Health, and National Association of Counties.

RWJF Roadmaps to Health Prize

In February 2013, RWJF awarded the first *RWJF Roadmaps to Health Prizes* of \$25,000 to six communities that are working to become healthier places to live, learn, work and play. The *RWJF Roadmaps to Health Prize* is intended not only to honor successful efforts, but also to inspire and stimulate similar activities in other U.S. communities.



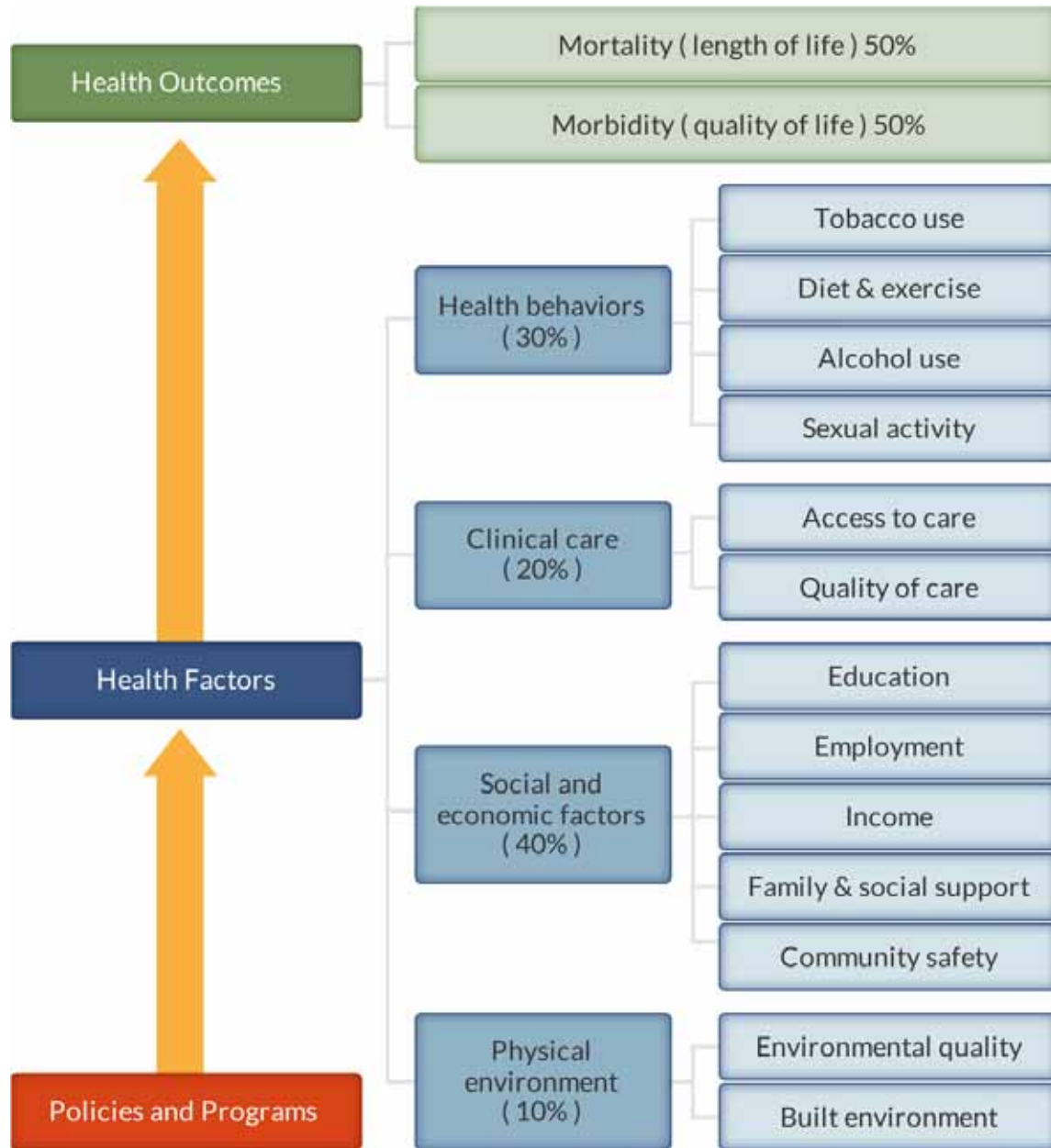
Roadmaps to Health Action Center

The *Roadmaps to Health Action Center*, based at UWPHI, provides tools and guidance to help groups working to make their communities healthier places. The Action Center website provides guidance on developing strategies and advocacy efforts to advance pro-health policies, opportunities for ongoing learning, and a searchable database of evidence-informed policies and programs focused on health improvement: *What Works for Health*. Action Center staff provide customized consultation via email and telephone to those seeking more information about how to improve health. Coaching, including possible on-site visits, is also available for communities who have demonstrated the willingness and capacity to address factors that we know influence how healthy a person is, such as education, income and family connectedness.

County Health Rankings

The 2013 *County Health Rankings* report ranks Iowa counties according to their summary measures of **health outcomes** and **health factors**. Counties also receive a rank for mortality, morbidity, health behaviors, clinical care, social and economic factors, and the physical environment. The figure below depicts the structure of the *Rankings* model; 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.

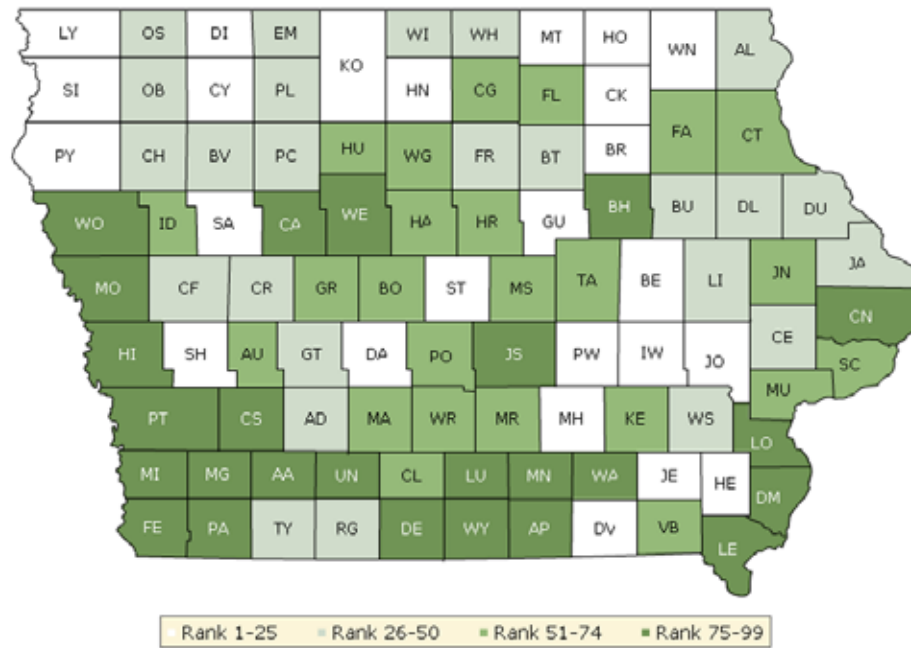


County Health Rankings model ©2012 UWPHI

The maps on this page and the next display Iowa's counties divided into groups by health rank. Maps help locate the healthiest and least healthy counties in the state. The lighter colors indicate better

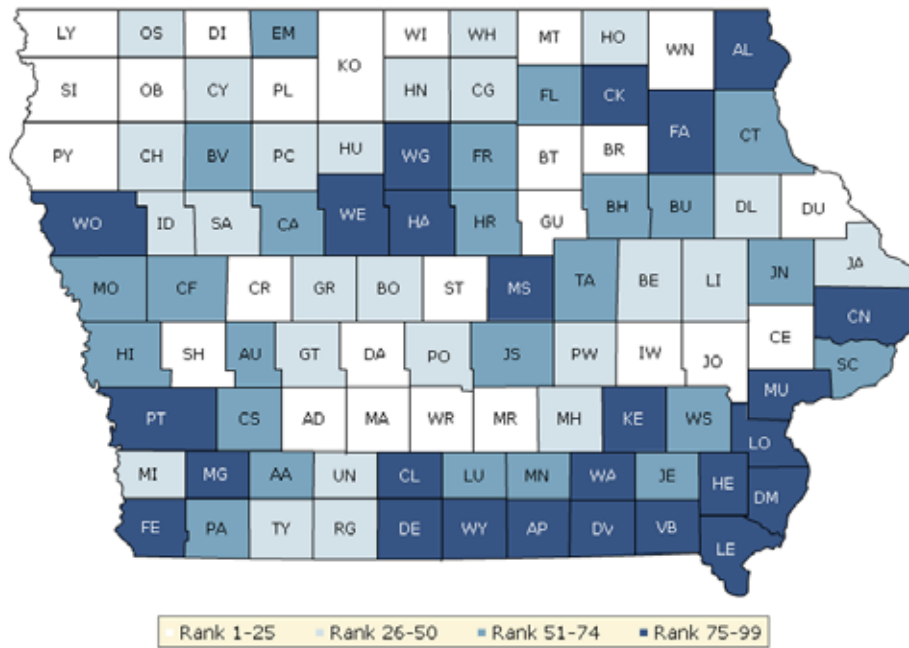
performance in the respective summary rankings. The green map shows the distribution of summary health outcomes. The blue displays the distribution of the summary rank for health factors.

HEALTH OUTCOMES



County	Rank	County	Rank	County	Rank	County	Rank
Adair	49	Davis	8	Jefferson	21	Pocahontas	40
Adams	97	Decatur	84	Johnson	13	Polk	59
Allamakee	45	Delaware	35	Jones	67	Pottawattamie	88
Appanoose	99	Des Moines	80	Keokuk	65	Poweshiek	25
Audubon	72	Dickinson	12	Kossuth	24	Ringgold	27
Benton	14	Dubuque	26	Lee	90	Sac	16
Black Hawk	77	Emmet	37	Linn	30	Scott	60
Boone	63	Fayette	54	Louisa	95	Shelby	23
Bremer	9	Floyd	71	Lucas	78	Sioux	1
Buchanan	42	Franklin	29	Lyon	2	Story	7
Buena Vista	31	Fremont	93	Madison	51	Tama	53
Butler	47	Greene	68	Mahaska	15	Taylor	41
Calhoun	75	Grundy	22	Marion	52	Union	85
Carroll	43	Guthrie	34	Marshall	69	Van Buren	73
Cass	92	Hamilton	64	Mills	98	Wapello	91
Cedar	28	Hancock	18	Mitchell	5	Warren	57
Cerro Gordo	55	Hardin	56	Monona	79	Washington	44
Cherokee	38	Harrison	81	Monroe	89	Wayne	96
Chickasaw	4	Henry	17	Montgomery	94	Webster	87
Clarke	58	Howard	19	Muscatine	66	Winnebago	50
Clay	10	Humboldt	70	O'Brien	33	Winneshiek	3
Clayton	62	Ida	74	Osceola	46	Woodbury	76
Clinton	86	Iowa	20	Page	82	Worth	32
Crawford	36	Jackson	48	Palo Alto	39	Wright	61
Dallas	11	Jasper	83	Plymouth	6		

HEALTH FACTORS



County	Rank	County	Rank	County	Rank	County	Rank
Adair	15	Davis	90	Jefferson	73	Pocahontas	47
Adams	56	Decatur	82	Johnson	1	Polk	41
Allamakee	83	Delaware	49	Jones	55	Pottawattamie	89
Appanoose	98	Des Moines	96	Keokuk	81	Poweshiek	32
Audubon	62	Dickinson	23	Kossuth	17	Ringgold	27
Benton	45	Dubuque	8	Lee	99	Sac	46
Black Hawk	63	Emmet	65	Linn	26	Scott	72
Boone	42	Fayette	77	Louisa	93	Shelby	24
Bremer	5	Floyd	54	Lucas	57	Sioux	6
Buchanan	52	Franklin	66	Lyon	9	Story	2
Buena Vista	59	Fremont	87	Madison	14	Tama	64
Butler	20	Greene	48	Mahaska	50	Taylor	36
Calhoun	53	Grundy	7	Marion	16	Union	38
Carroll	21	Guthrie	28	Marshall	85	Van Buren	88
Cass	61	Hamilton	84	Mills	43	Wapello	95
Cedar	18	Hancock	44	Mitchell	12	Warren	19
Cerro Gordo	30	Hardin	60	Monona	70	Washington	51
Cherokee	31	Harrison	58	Monroe	69	Wayne	79
Chickasaw	75	Henry	76	Montgomery	80	Webster	94
Clarke	91	Howard	37	Muscatine	86	Winnebago	10
Clay	39	Humboldt	35	O'Brien	22	Winneshiek	3
Clayton	68	Ida	34	Osceola	33	Woodbury	97
Clinton	92	Iowa	11	Page	67	Worth	29
Crawford	74	Jackson	40	Palo Alto	25	Wright	78
Dallas	4	Jasper	71	Plymouth	13		

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 represent what influences the health of the county.

Rank	Health Outcomes	Rank	Health Factors
1	Sioux	1	Johnson
2	Lyon	2	Story
3	Winneshiek	3	Winneshiek
4	Chickasaw	4	Dallas
5	Mitchell	5	Bremer
6	Plymouth	6	Sioux
7	Story	7	Grundy
8	Davis	8	Dubuque
9	Bremer	9	Lyon
10	Clay	10	Winnebago
11	Dallas	11	Iowa
12	Dickinson	12	Mitchell
13	Johnson	13	Plymouth
14	Benton	14	Madison
15	Mahaska	15	Adair
16	Sac	16	Marion
17	Henry	17	Kossuth
18	Hancock	18	Cedar
19	Howard	19	Warren
20	Iowa	20	Butler
21	Jefferson	21	Carroll
22	Grundy	22	O'Brien
23	Shelby	23	Dickinson
24	Kossuth	24	Shelby
25	Poweshiek	25	Palo Alto
26	Dubuque	26	Linn
27	Ringgold	27	Ringgold
28	Cedar	28	Guthrie
29	Franklin	29	Worth
30	Linn	30	Cerro Gordo
31	Buena Vista	31	Cherokee
32	Worth	32	Poweshiek
33	O'Brien	33	Osceola
34	Guthrie	34	Ida
35	Delaware	35	Humboldt
36	Crawford	36	Taylor
37	Emmet	37	Howard
38	Cherokee	38	Union
39	Palo Alto	39	Clay
40	Pocahontas	40	Jackson
41	Taylor	41	Polk
42	Buchanan	42	Boone

Rank	Health Outcomes	Rank	Health Factors
43	Carroll	43	Mills
44	Washington	44	Hancock
45	Allamakee	45	Benton
46	Osceola	46	Sac
47	Butler	47	Pocahontas
48	Jackson	48	Greene
49	Adair	49	Delaware
50	Winnebago	50	Mahaska
51	Madison	51	Washington
52	Marion	52	Buchanan
53	Tama	53	Calhoun
54	Fayette	54	Floyd
55	Cerro Gordo	55	Jones
56	Hardin	56	Adams
57	Warren	57	Lucas
58	Clarke	58	Harrison
59	Polk	59	Buena Vista
60	Scott	60	Hardin
61	Wright	61	Cass
62	Clayton	62	Audubon
63	Boone	63	Black Hawk
64	Hamilton	64	Tama
65	Keokuk	65	Emmet
66	Muscatine	66	Franklin
67	Jones	67	Page
68	Greene	68	Clayton
69	Marshall	69	Monroe
70	Humboldt	70	Monona
71	Floyd	71	Jasper
72	Audubon	72	Scott
73	Van Buren	73	Jefferson
74	Ida	74	Crawford
75	Calhoun	75	Chickasaw
76	Woodbury	76	Henry
77	Black Hawk	77	Fayette
78	Lucas	78	Wright
79	Monona	79	Wayne
80	Des Moines	80	Montgomery
81	Harrison	81	Keokuk
82	Page	82	Decatur
83	Jasper	83	Allamakee
84	Decatur	84	Hamilton
85	Union	85	Marshall
86	Clinton	86	Muscatine
87	Webster	87	Fremont
88	Pottawattamie	88	Van Buren
89	Monroe	89	Pottawattamie
90	Lee	90	Davis

Rank	Health Outcomes	Rank	Health Factors
91	Wapello	91	Clarke
92	Cass	92	Clinton
93	Fremont	93	Louisa
94	Montgomery	94	Webster
95	Louisa	95	Wapello
96	Wayne	96	Des Moines
97	Adams	97	Woodbury
98	Mills	98	Appanoose
99	Appanoose	99	Lee

2013 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	2008-2010
Morbidity	Poor or fair health	Behavioral Risk Factor Surveillance System	2005-2011
	Poor physical health days	Behavioral Risk Factor Surveillance System	2005-2011
	Poor mental health days	Behavioral Risk Factor Surveillance System	2005-2011
	Low birthweight	National Center for Health Statistics	2004-2010
HEALTH FACTORS			
HEALTH BEHAVIORS			
Tobacco Use	Adult smoking	Behavioral Risk Factor Surveillance System	2005-2011
Diet and Exercise	Adult obesity	National Center for Chronic Disease Prevention and Health Promotion	2009
	Physical inactivity	National Center for Chronic Disease Prevention and Health Promotion	2009
Alcohol Use	Excessive drinking	Behavioral Risk Factor Surveillance System	2005-2011
	Motor vehicle crash death rate	National Center for Health Statistics	2004-2010
Sexual Activity	Sexually transmitted infections	National Center for HIV/AIDS, Viral Hepatitis, STD, and TB prevention	2010
	Teen birth rate	National Center for Health Statistics	2004-2010
CLINICAL CARE			
Access to Care	Uninsured	Small Area Health Insurance Estimates	2010
	Primary care physicians	HRSA Area Resource File	2011-2012
	Dentists	HRSA Area Resource File	2011-2012
Quality of Care	Preventable hospital stays	Medicare/Dartmouth Institute	2010
	Diabetic screening	Medicare/Dartmouth Institute	2010
	Mammography screening	Medicare/Dartmouth Institute	2010
SOCIAL AND ECONOMIC FACTORS			
Education	High school graduation	Primarily state-specific sources, supplemented with National Center for Education Statistics	State-specific
	Some college	American Community Survey	2007-2011
Employment	Unemployment	Bureau of Labor Statistics	2011
Income	Children in poverty	Small Area Income and Poverty Estimates	2011
Family and Social Support	Inadequate social support	Behavioral Risk Factor Surveillance System	2005-2010
	Children in single-parent households	American Community Survey	2007-2011
Community Safety	Violent crime rate	Federal Bureau of Investigation	2008-2010
PHYSICAL ENVIRONMENT			
Environmental Quality	Daily fine particulate matter ¹	CDC WONDER Environmental data	2008
	Drinking water safety	Safe Drinking Water Information System	FY 2012
Built Environment	Access to recreational facilities	Census County Business Patterns	2010
	Limited access to healthy foods	USDA Food Environment Atlas	2012
	Fast food restaurants	Census County Business Patterns	2010

¹ Not available for AK and HI.

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