

County Health Rankings & Roadmaps

Building a Culture of Health, County by County

A Robert Wood Johnson Foundation program

2016 *County Health Rankings* **Mississippi**



A collaboration between the Robert Wood Johnson Foundation and the University of Wisconsin Population Health Institute.



Support
provided by



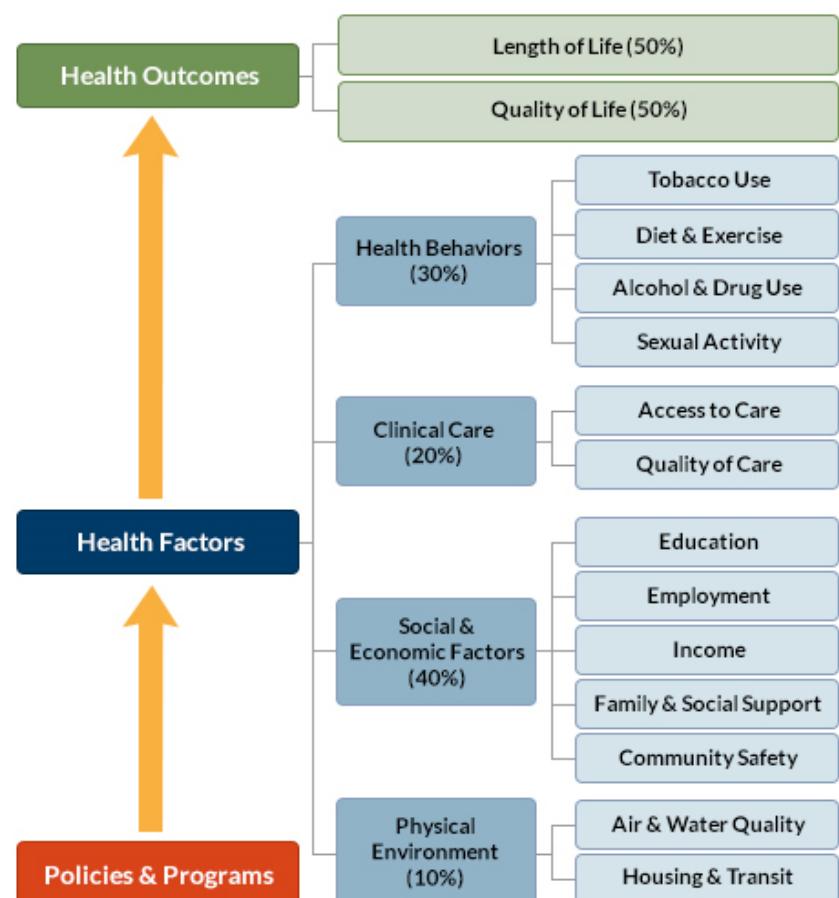
Robert Wood Johnson
Foundation

INTRODUCTION

The *County Health Rankings & Roadmaps* program brings actionable data and strategies to communities to make it easier for people to be healthy in their homes, schools, workplaces, and neighborhoods. Ranking the health of nearly every county in the nation, the *County Health Rankings* illustrate what we know when it comes to what is making people sick or healthy. The *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 program to cities, counties, and states across the nation.

WHAT ARE THE COUNTY HEALTH RANKINGS?

Published online at countyhealthrankings.org, the *Rankings* help counties understand what influences how healthy residents are and how long they will live. The *Rankings* are unique in their ability to measure the current overall health of nearly every county in all 50 states. They also look at a variety of measures that affect the future health of communities, such as high school graduation rates, access to healthy foods, rates of smoking, obesity, and teen births. Communities use the *Rankings* to help identify issues and opportunities for local health improvement, as well as to garner support for initiatives among government agencies, healthcare providers, community organizations, business leaders, policy makers, and the public.



DIGGING DEEPER INTO HEALTH DATA

Although we know that a range of factors are important for good health, every state has communities that lack both opportunities to shape good health and strong policies to promote health for everyone. Some counties lag far behind others in how well and how long people live – which we refer to as a “health gap.” Find out what's driving health differences across your state and what can be done to close those gaps. Visit countyhealthrankings.org/reports.

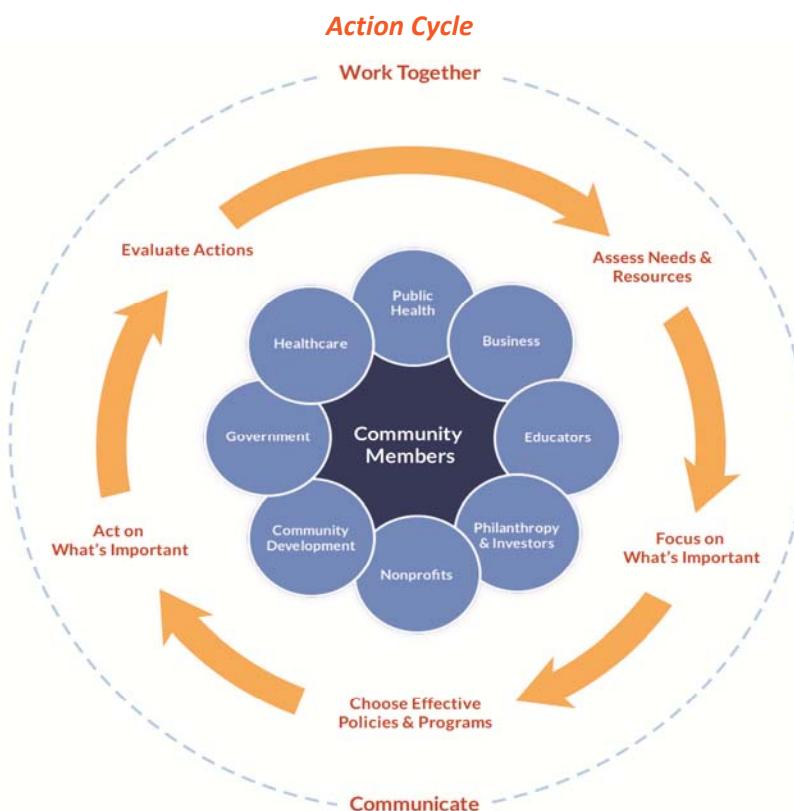
To further explore health gaps and other data sources in your community, check out the feature to [find more data](#) for your state and [dig deeper](#) on differences in health factors by geography or by population sub-groups. Visit countyhealthrankings.org/using-the-rankings-data.

MOVING FROM DATA TO ACTION

Roadmaps to Health help communities bring people together to look at the many factors that influence health and opportunities to reduce health gaps, select strategies that can improve health for all, and make changes that will have a lasting impact. The *Roadmaps* focus on helping communities move from *awareness* about their county's ranking to *actions* designed to improve everyone's health. The *Roadmaps to Health* Action Center is a one-stop shop of information to help any community member or leader who wants to improve their community's health by addressing factors that we know influence health, such as education, income, and community safety.

Within the Action Center you will find:

- Online step-by-step guidance and tools to move through the Action Cycle
- [What Works for Health](#) – a searchable database of evidence-informed policies and programs that can improve health
- Webinars featuring local community members who share their tips on how to build a healthier community
- Community coaches, located across the nation, who provide customized consultation to local leaders who request guidance in how to accelerate their efforts to improve health. You can contact a coach by activating the Get Help button at countyhealthrankings.org



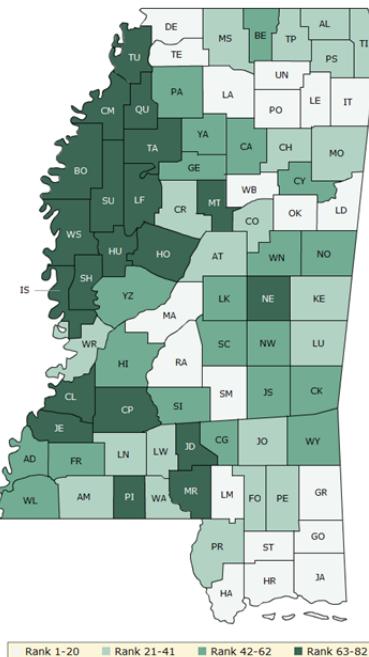
HOW CAN YOU GET INVOLVED?

You might want to contact your local affiliate of United Way Worldwide, the National Association of Counties, Local Initiatives Support Corporation (LISC), or Neighborworks— their national parent organizations have partnered with us to raise awareness and stimulate action to improve health in their local members' communities. By connecting with other leaders interested in improving health, you can make a difference in your community. In communities large and small, people from all walks of life are taking ownership and action to improve health. Visit countyhealthrankings.org to get ideas and guidance on how you can take action in your community. Working with others, you can improve the health of your community.

HOW DO COUNTIES RANK FOR HEALTH OUTCOMES?

The green map below shows the distribution of Mississippi's **health outcomes**, based on an equal weighting of length and quality of life.

Lighter shades indicate better performance in the respective summary rankings. Detailed information on the underlying measures is available at countyhealthrankings.org.

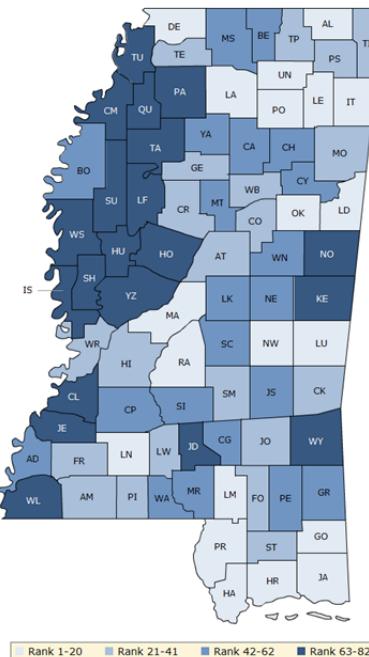


County	Rank	County	Rank	County	Rank	County	Rank
Adams	61	Grenada	58	Lincoln	33	Simpson	48
Alcorn	30	Hancock	6	Lowndes	15	Smith	13
Amite	24	Harrison	17	Madison	4	Stone	12
Attala	41	Hinds	46	Marion	71	Sunflower	72
Benton	43	Holmes	80	Marshall	32	Tallahatchie	68
Bolivar	76	Humphreys	78	Monroe	22	Tate	18
Calhoun	45	Issaquena	66	Montgomery	74	Tippah	27
Carroll	25	Itawamba	20	Neshoba	65	Tishomingo	29
Chickasaw	40	Jackson	8	Newton	52	Tunica	70
Choctaw	21	Jasper	50	Noxubee	56	Union	11
Claiborne	67	Jefferson	81	Oktibbeha	9	Walthall	34
Clarke	51	Jefferson Davis	69	Panola	62	Warren	39
Clay	42	Jones	26	Pearl River	23	Washington	75
Coahoma	82	Kemper	36	Perry	35	Wayne	59
Copiah	64	Lafayette	5	Pike	63	Webster	19
Covington	55	Lamar	3	Pontotoc	7	Wilkinson	57
DeSoto	1	Lauderdale	37	Prentiss	28	Winston	47
Forrest	38	Lawrence	31	Quitman	77	Yalobusha	60
Franklin	49	Leake	54	Rankin	2	Yazoo	53
George	14	Lee	16	Scott	44		
Greene	10	Leflore	73	Sharkey	79		

HOW DO COUNTIES RANK FOR HEALTH FACTORS?

The blue map displays Mississippi's summary ranks for **health factors**, based on weighted scores for health behaviors, clinical care, social and economic factors, and the physical environment.

Lighter shades indicate better performance in the respective summary rankings. Detailed information on the underlying measures is available at countyhealthrankings.org



County	Rank	County	Rank	County	Rank	County	Rank
Adams	53	Grenada	31	Lincoln	12	Simpson	47
Alcorn	19	Hancock	13	Lowndes	14	Smith	29
Amite	40	Harrison	20	Madison	1	Stone	24
Attala	30	Hinds	25	Marion	57	Sunflower	75
Benton	52	Holmes	82	Marshall	55	Tallahatchie	70
Bolivar	60	Humphreys	80	Monroe	41	Tate	35
Calhoun	42	Issaquena	78	Montgomery	50	Tippah	33
Carroll	34	Itawamba	9	Neshoba	45	Tishomingo	21
Chickasaw	59	Jackson	7	Newton	16	Tunica	71
Choctaw	26	Jasper	48	Noxubee	76	Union	8
Claiborne	74	Jefferson	79	Oktibbeha	17	Walthall	51
Clarke	36	Jefferson Davis	68	Panola	65	Warren	38
Clay	61	Jones	32	Pearl River	15	Washington	73
Coahoma	77	Kemper	66	Perry	54	Wayne	63
Copiah	49	Lafayette	5	Pike	39	Webster	23
Covington	43	Lamar	3	Pontotoc	10	Wilkinson	64
DeSoto	4	Lauderdale	11	Prentiss	27	Winston	46
Forrest	28	Lawrence	37	Quitman	81	Yalobusha	56
Franklin	22	Leake	62	Rankin	2	Yazoo	69
George	18	Lee	6	Scott	58		
Greene	44	Leflore	72	Sharkey	67		

2016 COUNTY HEALTH RANKINGS: MEASURES AND NATIONAL/STATE RESULTS

Measure	Description	US Median	State Overall	State Minimum	State Maximum
HEALTH OUTCOMES					
Premature death	Years of potential life lost before age 75 per 100,000 population	7,700	10,100	7,500	15,800
Poor or fair health	% of adults reporting fair or poor health	16%	21%	14%	36%
Poor physical health days	Average # of physically unhealthy days reported in past 30 days	3.7	4.0	3.2	5.8
Poor mental health days	Average # of mentally unhealthy days reported in past 30 days	3.7	4.3	3.4	5.0
Low birthweight	% of live births with low birthweight (< 2500 grams)	8%	12%	8%	19%
HEALTH FACTORS					
HEALTH BEHAVIORS					
Adult smoking	% of adults who are current smokers	18%	23%	17%	27%
Adult obesity	% of adults that report a BMI ≥ 30	31%	35%	30%	47%
Food environment index	Index of factors that contribute to a healthy food environment, (0-10)	7.2	5.5	1.8	7.3
Physical inactivity	% of adults aged 20 and over reporting no leisure-time physical activity	28%	33%	27%	41%
Access to exercise opportunities	% of population with adequate access to locations for physical activity	62%	57%	1%	83%
Excessive drinking	% of adults reporting binge or heavy drinking	17%	14%	9%	19%
Alcohol-impaired driving deaths	% of driving deaths with alcohol involvement	31%	24%	0%	57%
Sexually transmitted infections	# of newly diagnosed chlamydia cases per 100,000 population	287.7	585.1	129.8	1,707.8
Teen births	# of births per 1,000 female population ages 15-19	40	56	17	113
CLINICAL CARE					
Uninsured	% of population under age 65 without health insurance	17%	20%	15%	26%
Primary care physicians	Ratio of population to primary care physicians	1,990:1	1,860:1	1,400:0	680:1
Dentists	Ratio of population to dentists	2,590:1	2,280:1	1,400:0	1,090:1
Mental health providers	Ratio of population to mental health providers	1,060:1	830:1	20,490:1	220:1
Preventable hospital stays	# of hospital stays for ambulatory-care sensitive conditions per 1,000 Medicare enrollees	60	74	43	135
Diabetic monitoring	% of diabetic Medicare enrollees ages 65-75 that receive HbA1c monitoring	85%	84%	66%	93%
Mammography screening	% of female Medicare enrollees ages 67-69 that receive mammography screening	61%	57%	40%	68%
SOCIAL AND ECONOMIC FACTORS					
High school graduation	% of ninth-grade cohort that graduates in four years	86%	76%	55%	93%
Some college	% of adults ages 25-44 with some post-secondary education	56%	58%	32%	79%
Unemployment	% of population aged 16 and older unemployed but seeking work	6.0%	7.8%	4.7%	18.4%
Children in poverty	% of children under age 18 in poverty	23%	31%	15%	58%
Income inequality	Ratio of household income at the 80th percentile to income at the 20th percentile	4.4	5.3	3.7	7.5
Children in single-parent households	% of children that live in a household headed by a single parent	32%	45%	25%	76%
Social associations	# of membership associations per 10,000 population	13.0	12.3	2.6	21.2
Violent crime	# of reported violent crime offenses per 100,000 population	199	267	34	732
Injury deaths	# of deaths due to injury per 100,000 population	74	81	53	134
PHYSICAL ENVIRONMENT					
Air pollution – particulate matter	Average daily density of fine particulate matter in micrograms per cubic meter (PM2.5)	11.9	12.2	10.5	12.9
Drinking water violations	Indicator of the presence of health-related drinking water violations. Yes - indicates the presence of a violation, No - indicates no violation.	NA	NA	No	Yes
Severe housing problems	% of households with overcrowding, high housing costs, or lack of kitchen or plumbing facilities	14%	17%	9%	27%
Driving alone to work	% of workforce that drives alone to work	80%	84%	71%	91%
Long commute – driving alone	Among workers who commute in their car alone, % commuting > 30 minutes	29%	31%	13%	57%

2016 COUNTY HEALTH RANKINGS: DATA SOURCES AND YEARS OF DATA

Measure	Data Source	Years of Data
HEALTH OUTCOMES		
Length of Life	Premature death	National Center for Health Statistics – Mortality files
Quality of Life	Poor or fair health	Behavioral Risk Factor Surveillance System
	Poor physical health days	Behavioral Risk Factor Surveillance System
	Poor mental health days	Behavioral Risk Factor Surveillance System
	Low birthweight	National Center for Health Statistics – Natality files
HEALTH FACTORS		
HEALTH BEHAVIORS		
Tobacco Use	Adult smoking	Behavioral Risk Factor Surveillance System
Diet and Exercise	Adult obesity	CDC Diabetes Interactive Atlas
	Food environment index	USDA Food Environment Atlas, Map the Meal Gap
	Physical inactivity	CDC Diabetes Interactive Atlas
	Access to exercise opportunities	Business Analyst, Delorme map data, ESRI, & US Census Tigerline Files
Alcohol and Drug Use	Excessive drinking	Behavioral Risk Factor Surveillance System
	Alcohol-impaired driving deaths	Fatality Analysis Reporting System
Sexual Activity	Sexually transmitted infections	National Center for HIV/AIDS, Viral Hepatitis, STD, and TB Prevention
	Teen births	National Center for Health Statistics - Natality files
CLINICAL CARE		
Access to Care	Uninsured	Small Area Health Insurance Estimates
	Primary care physicians	Area Health Resource File/American Medical Association
	Dentists	Area Health Resource File/National Provider Identification file
	Mental health providers	CMS, National Provider Identification file
Quality of Care	Preventable hospital stays	Dartmouth Atlas of Health Care
	Diabetic monitoring	Dartmouth Atlas of Health Care
	Mammography screening	Dartmouth Atlas of Health Care
SOCIAL AND ECONOMIC FACTORS		
Education	High school graduation	EDFacts
	Some college	American Community Survey
Employment	Unemployment	Bureau of Labor Statistics
Income	Children in poverty	Small Area Income and Poverty Estimates
	Income inequality	American Community Survey
Family and Social Support	Children in single-parent households	American Community Survey
	Social associations	County Business Patterns
Community	Violent crime	Uniform Crime Reporting – FBI
Safety	Injury deaths	CDC WONDER mortality data
PHYSICAL ENVIRONMENT		
Air and Water Quality	Air pollution - particulate matter ¹	CDC WONDER environmental data
	Drinking water violations	Safe Drinking Water Information System
Housing and Transit	Severe housing problems	Comprehensive Housing Affordability Strategy (CHAS) data
	Driving alone to work	American Community Survey
	Long commute – driving alone	American Community Survey

¹ Not available for AK and HI.

CREDITS

Report Authors

University of Wisconsin-Madison
School of Medicine and Public Health
Department of Population Health Sciences
Population Health Institute

Bridget Catlin, PhD, MHSA
Amanda Jovaag, MS
Marjory Givens, PhD, MSPH
Julie Willems Van Dijk, PhD, RN

Suggested citation: University of Wisconsin Population Health Institute. *County Health Rankings 2016*

This publication would not have been possible without the following contributions:

Data

Centers for Disease Control and Prevention: National Center for Health Statistics and National Center for Chronic Disease and Health Promotion
Dartmouth Institute for Health Policy & Clinical Practice

Research Assistance

Paige Andrews
Kathryn Hatchell
Keith Gennuso, PhD
Hyojun Park, MA
Elizabeth Pollock
Jennifer Robinson
Matthew Rodock, MPH

Communications and Outreach

Burness
Mary Bennett, MFA
Matthew Call
Megan Garske
Kitty Jerome, MA
Kate Konkle, MPH
Jan O'Neill, MPA

Design

Forum One, Alexandria, VA

Robert Wood Johnson Foundation

Andrea Ducas, MPH
Michelle Larkin, JD, MS, RN
James Marks, MD, MPH
Joe Marx
Donald Schwarz, MD, MPH
Amy Slonim, PhD
Kathryn Wehr, MPH

County Health Rankings & Roadmaps

Building a Culture of Health, County by County

countyhealthrankings.org

