

County Health Rankings & Roadmaps

Building a Culture of Health, County by County

A Robert Wood Johnson Foundation program

2017 *County Health Rankings* Missouri



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



Support
provided by



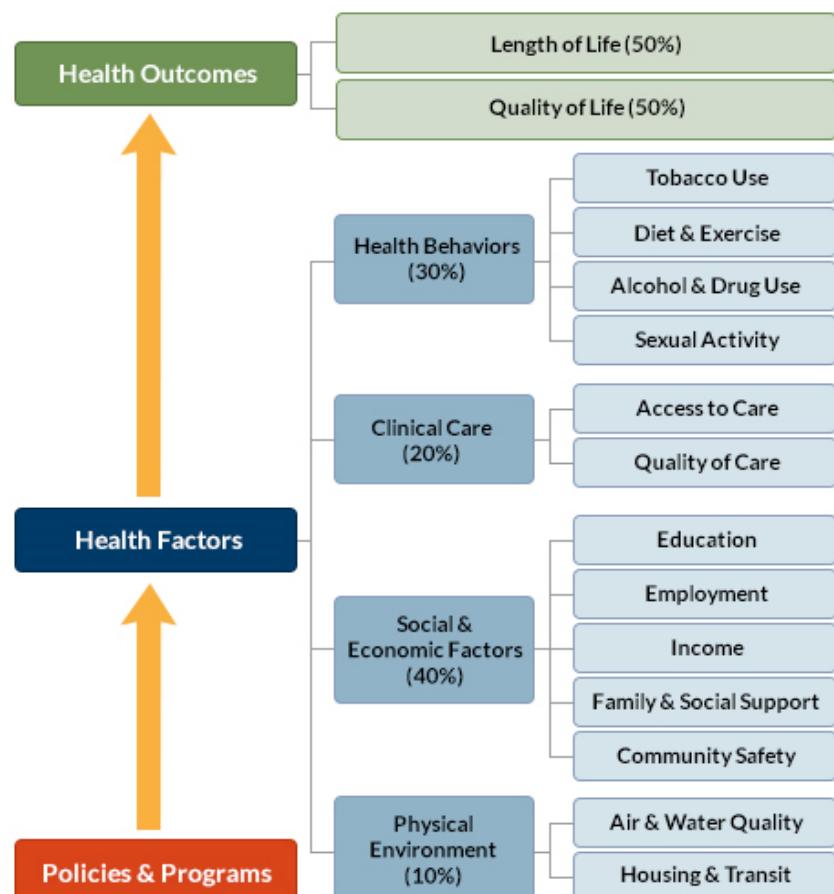
Robert Wood Johnson
Foundation

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



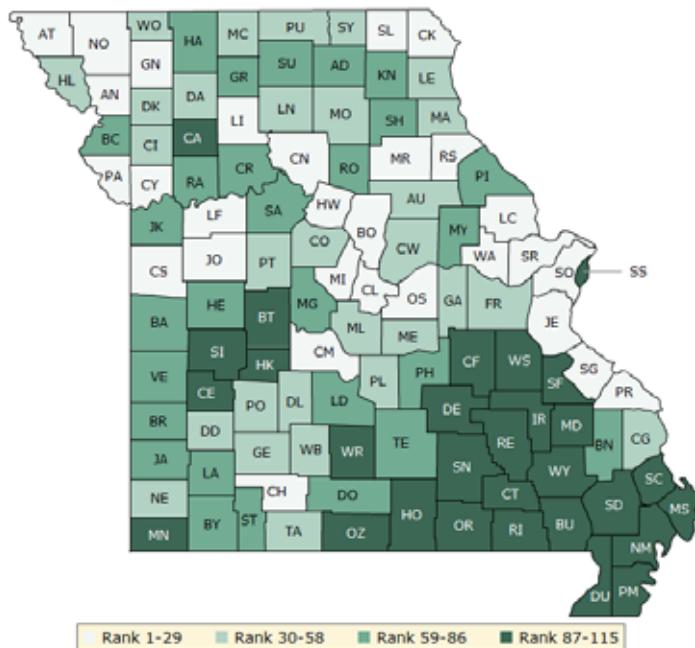
HOW CAN YOU GET INVOLVED?

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 Missouri'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.

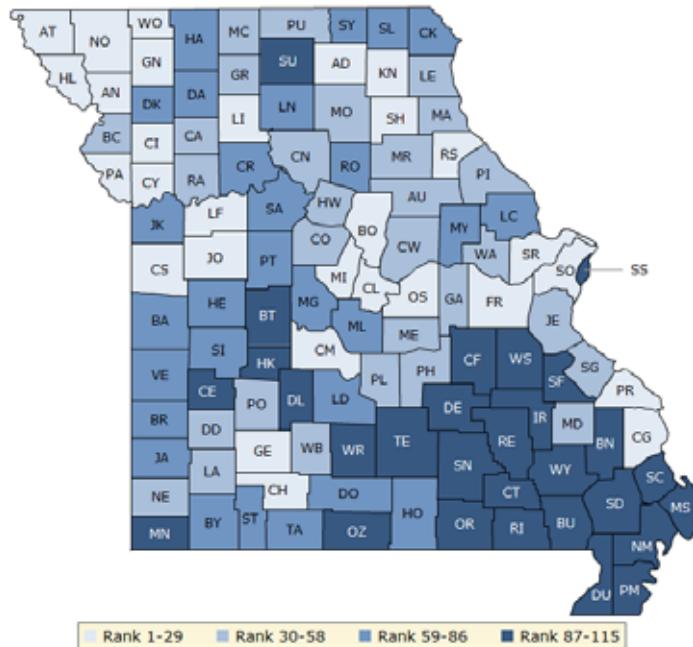


County	Rank	County	Rank	County	Rank	County	Rank
Adair	75	Dallas	50	Livingston	22	Randolph	77
Andrew	7	Daviess	32	Macon	37	Ray	59
Atchison	4	DeKalb	45	Madison	96	Reynolds	99
Audrain	55	Dent	97	Maries	41	Ripley	102
Barry	86	Douglas	81	Marion	52	Saline	68
Barton	84	Dunklin	114	McDonald	107	Schuylerville	42
Bates	74	Franklin	34	Mercer	47	Scotland	21
Benton	88	Gasconade	35	Miller	53	Scott	98
Bollinger	69	Gentry	15	Mississippi	113	Shannon	101
Boone	19	Greene	39	Moniteau	23	Shelby	72
Buchanan	76	Grundy	80	Monroe	28	St. Charles	2
Butler	110	Harrison	83	Montgomery	63	St. Clair	89
Caldwell	87	Henry	67	Morgan	85	St. Francois	100
Callaway	54	Hickory	90	New Madrid	112	St. Louis	8
Camden	26	Holt	30	Newton	38	St. Louis City	111
Cape Girardeau	44	Howard	24	Nodaway	13	Ste. Genevieve	29
Carroll	62	Howell	94	Oregon	105	Stoddard	92
Carter	104	Iron	108	Osage	9	Stone	65
Cass	6	Jackson	61	Ozark	103	Sullivan	73
Cedar	93	Jasper	70	Pemiscot	115	Taney	56
Chariton	25	Jefferson	27	Perry	10	Texas	82
Christian	5	Johnson	18	Pettis	49	Vernon	60
Clark	16	Knox	79	Phelps	71	Warren	17
Clay	3	Laclede	78	Pike	66	Washington	106
Clinton	33	Lafayette	14	Platte	1	Wayne	109
Cole	12	Lawrence	64	Polk	57	Webster	36
Cooper	58	Lewis	31	Pulaski	40	Worth	51
Crawford	91	Lincoln	11	Putnam	46	Wright	95
Dade	48	Linn	43	Ralls	20		

HOW DO COUNTIES RANK FOR HEALTH FACTORS?

The blue map displays Missouri'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
Adair	26	Dallas	91	Livingston	20	Randolph	76
Andrew	7	Daviess	71	Macon	45	Ray	54
Atchison	12	DeKalb	68	Madison	56	Reynolds	104
Audrain	51	Dent	102	Maries	55	Ripley	112
Barry	66	Douglas	83	Marion	50	Saline	63
Barton	86	Dunklin	113	McDonald	108	Schuylerville	59
Bates	81	Franklin	17	Mercer	32	Scotland	72
Benton	88	Gasconade	35	Miller	80	Scott	100
Bollinger	90	Gentry	22	Mississippi	109	Shannon	106
Boone	6	Greene	18	Moniteau	23	Shelby	19
Buchanan	38	Grundy	46	Monroe	33	St. Charles	1
Butler	98	Harrison	62	Montgomery	70	St. Clair	82
Caldwell	42	Henry	64	Morgan	85	St. Francois	95
Callaway	44	Hickory	96	New Madrid	111	St. Louis	5
Camden	28	Holt	9	Newton	39	St. Louis City	114
Cape Girardeau	16	Howard	41	Nodaway	24	Ste. Genevieve	30
Carroll	65	Howell	79	Oregon	89	Stoddard	87
Carter	103	Iron	105	Osage	3	Stone	73
Cass	13	Jackson	75	Ozark	107	Sullivan	97
Cedar	92	Jasper	67	Pemiscot	115	Taney	78
Chariton	40	Jefferson	31	Perry	15	Texas	101
Christian	8	Johnson	25	Pettis	74	Vernon	60
Clark	84	Knox	27	Phelps	43	Warren	37
Clay	4	Laclede	77	Pike	58	Washington	110
Clinton	29	Lafayette	21	Platte	2	Wayne	99
Cole	11	Lawrence	36	Polk	47	Webster	57
Cooper	53	Lewis	49	Pulaski	34	Worth	10
Crawford	94	Lincoln	61	Putnam	52	Wright	93
Dade	48	Linn	69	Ralls	14		

2017 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	7,700	5,000	16,000
Poor or fair health	% of adults reporting fair or poor health	16%	17%	13%	27%
Poor physical health days	Average # of physically unhealthy days reported in past 30 days	3.8	4.1	3.3	5.7
Poor mental health days	Average # of mentally unhealthy days reported in past 30 days	3.8	4.2	3.4	4.9
Low birthweight	% of live births with low birthweight (< 2500 grams)	8%	8%	5%	13%
HEALTH FACTORS					
HEALTH BEHAVIORS					
Adult smoking	% of adults who are current smokers	17%	22%	16%	29%
Adult obesity	% of adults that report a BMI ≥ 30	31%	31%	25%	38%
Food environment index	Index of factors that contribute to a healthy food environment, (0-10)	7.3	6.9	4.0	8.1
Physical inactivity	% of adults aged 20 and over reporting no leisure-time physical activity	26%	25%	17%	35%
Access to exercise opportunities	% of population with adequate access to locations for physical activity	62%	76%	4%	99%
Excessive drinking	% of adults reporting binge or heavy drinking	17%	18%	12%	21%
Alcohol-impaired driving deaths	% of driving deaths with alcohol involvement	30%	32%	0%	71%
Sexually transmitted infections	# of newly diagnosed chlamydia cases per 100,000 population	294.8	462.9	52.3	1,255.0
Teen births	# of births per 1,000 female population ages 15-19	38	35	10	88
CLINICAL CARE					
Uninsured	% of population under age 65 without health insurance	14%	14%	8%	24%
Primary care physicians	Ratio of population to primary care physicians	2,030:1	1,420:1	13,700:1	750:1
Dentists	Ratio of population to dentists	2,570:1	1,840:1	3,690:0	970:1
Mental health providers	Ratio of population to mental health providers	1,105:1	630:1	17,300:1	290:1
Preventable hospital stays	# of hospital stays for ambulatory-care sensitive conditions per 1,000 Medicare enrollees	56	57	35	134
Diabetes monitoring	% of diabetic Medicare enrollees ages 65-75 that receive HbA1c monitoring	86%	86%	76%	92%
Mammography screening	% of female Medicare enrollees ages 67-69 that receive mammography screening	61%	63%	41%	79%
SOCIAL AND ECONOMIC FACTORS					
High school graduation	% of ninth-grade cohort that graduates in four years	88%	90%	72%	98%
Some college	% of adults ages 25-44 with some post-secondary education	57%	65%	36%	80%
Unemployment	% of population aged 16 and older unemployed but seeking work	5.3%	5.0%	3.2%	9.1%
Children in poverty	% of children under age 18 in poverty	22%	20%	8%	43%
Income inequality	Ratio of household income at the 80th percentile to income at the 20th percentile	4.4	4.6	3.2	6.2
Children in single-parent households	% of children that live in a household headed by a single parent	32%	34%	18%	60%
Social associations	# of membership associations per 10,000 population	12.6	11.6	6.0	35.3
Violent crime	# of reported violent crime offenses per 100,000 population	198	442	0	1,703
Injury deaths	# of deaths due to injury per 100,000 population	77	77	46	140
PHYSICAL ENVIRONMENT					
Air pollution – particulate matter	Average daily density of fine particulate matter in micrograms per cubic meter (PM2.5)	9.2	9.5	8.9	12.3
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%	15%	5%	23%
Driving alone to work	% of workforce that drives alone to work	81%	82%	54%	87%
Long commute – driving alone	Among workers who commute in their car alone, % commuting > 30 minutes	30%	31%	12%	57%

2017 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
	Diabetes monitoring	Dartmouth Atlas of Health Care
	Mammography screening	Dartmouth Atlas of Health Care
SOCIAL AND ECONOMIC FACTORS		
Education	High school graduation	EDFacts ¹
	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 ²	CDC National Environmental Public Health Tracking Network
	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 State sources used for California and Texas.

² 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

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

Suggested citation: University of Wisconsin Population Health Institute. *County Health Rankings 2017*.

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
Measure of America

Research Assistance

Paige Andrews
Keith Gennuso, PhD
Kathryn Hatchell
Melissa Marver
Elizabeth Pollock
Jennifer Robinson
Matthew Rodock, MPH
Anne Roubal, MS, PhD

Communications and Outreach

Kate Kingery, MPA
Kitty Jerome, MA
Kate Konkle, MPH
Mary Bennett, MFA
Raquel Bournhonesque, MPH
Ericka Burroughs-Girardi, MA, MPH
Aliana Havrilla, MPIA
Antonia Lewis, MPH, HO
Karen Odegaard, MPH
Jan O'Neill, MPA
Justin Rivas, MPH, MIPA
Attica Scott, MS
Jerry Spegman, JD
Janna West Kowalski, MS

Design and Communications

Forum One, Alexandria, VA
Burness
Kim Linsenmayer, MPA
Matthew Call

Robert Wood Johnson Foundation

County Health Rankings & Roadmaps

Building a Culture of Health, County by County

countyhealthrankings.org



University of Wisconsin Population Health Institute
610 Walnut St, #527, Madison, WI 53726
(608) 265-8240 / info@countyhealthrankings.org