

# 2013 Rankings Oklahoma





#### 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.



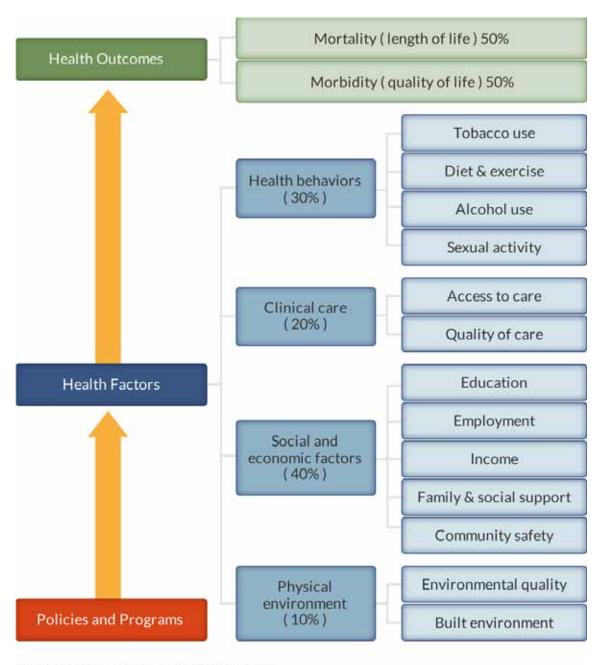
#### Roadmaps to Health Action Center

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 Oklahoma 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.

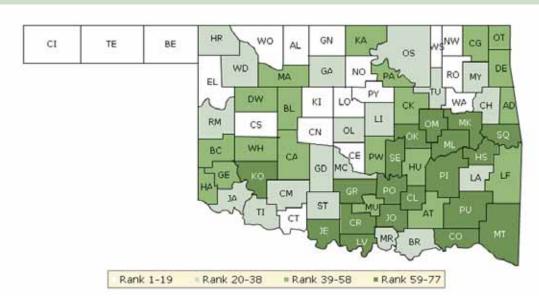


County Health Rankings model @2012 UWPHI

The maps on this page and the next display Oklahoma'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

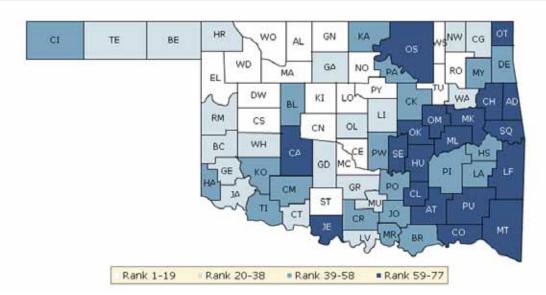
summary rankings. The green map shows the distribution of summary health outcomes. The blue displays the distribution of the summary rank for health factors.

#### **HEALTH OUTCOMES**



County	Rank	County	Rank	County	Rank	County	Rank
Adair	52	Delaware	40	Lincoln	35	Pittsburg	62
Alfalfa	14	Dewey	42	Logan	9	Pontotoc	67
Atoka	50	Ellis	15	Love	69	Pottawatomie	39
Beaver	19	Garfield	23	Major	45	Pushmataha	77
Beckham	57	Garvin	71	Marshall	27	Roger Mills	25
Blaine	44	Grady	28	Mayes	33	Rogers	8
Bryan	36	Grant	10	McClain	20	Seminole	75
Caddo	41	Greer	55	McCurtain	68	Sequoyah	59
Canadian	6	Harmon	47	McIntosh	73	Stephens	31
Carter	60	Harper	29	Murray	46	Texas	4
Cherokee	34	Haskell	66	Muskogee	64	Tillman	38
Choctaw	70	Hughes	58	Noble	7	Tulsa	22
Cimarron	3	Jackson	21	Nowata	13	Wagoner	16
Cleveland	2	Jefferson	65	Okfuskee	63	Washington	12
Coal	74	Johnston	72	Oklahoma	30	Washita	51
Comanche	32	Kay	43	Okmulgee	61	Woods	11
Cotton	18	Kingfisher	1	Osage	26	Woodward	24
Craig	56	Kiowa	76	Ottawa	54		
Creek	48	Latimer	37	Pawnee	53		
Custer	17	Le Flore	49	Payne	5		

#### **HEALTH FACTORS**



County	Rank	County	Rank	County	Rank	County	Rank
Adair	76	Delaware	46	Lincoln	37	Pittsburg	41
Alfalfa	14	Dewey	13	Logan	12	Pontotoc	45
Atoka	59	Ellis	6	Love	33	Pottawatomie	51
Beaver	23	Garfield	21	Major	2	Pushmataha	77
Beckham	38	Garvin	32	Marshall	58	Roger Mills	24
Blaine	40	Grady	27	Mayes	53	Rogers	10
Bryan	47	Grant	9	McClain	5	Seminole	68
Caddo	60	Greer	29	McCurtain	74	Sequoyah	72
Canadian	4	Harmon	56	McIntosh	70	Stephens	16
Carter	44	Harper	22	Murray	30	Texas	28
Cherokee	63	Haskell	48	Muskogee	66	Tillman	57
Choctaw	75	Hughes	73	Noble	18	Tulsa	19
Cimarron	39	Jackson	31	Nowata	36	Wagoner	25
Cleveland	1	Jefferson	71	Okfuskee	65	Washington	8
Coal	67	Johnston	43	Oklahoma	26	Washita	20
Comanche	52	Kay	49	Okmulgee	69	Woods	3
Cotton	35	Kingfisher	11	Osage	61	Woodward	17
Craig	34	Kiowa	42	Ottawa	62		
Creek	50	Latimer	54	Pawnee	55		
Custer	15	Le Flore	64	Payne	7		

# **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.

Doub	Haalah Outaanaa	Rank	Haalib Fastand
Rank 1	Health Outcomes Kingfisher	1	Health Factors Cleveland
2	Cleveland	2	
3	Cimarron	3	Major Woods
4	Texas	4	Canadian
5		5	McClain
6	Payne Canadian	6	Ellis
7	Noble	7	
8	Rogers	8	Payne Washington
9		9	Grant
10	Logan Grant	10	Rogers
11	Woods	11	
		12	Kingfisher
12 13	Washington Nowata	13	Logan
	Alfalfa		Dewey
14		14	Alfalfa
15	Ellis	15	Custer
16	Wagoner	16	Stephens
17	Custer	17	Woodward
18	Cotton	18	Noble
19	Beaver	19	Tulsa
20	McClain	20	Washita
21	Jackson	21	Garfield
22	Tulsa	22	Harper
23	Garfield	23	Beaver
24	Woodward	24	Roger Mills
25	Roger Mills	25	Wagoner
26	Osage	26	Oklahoma
27	Marshall	27	Grady
28	Grady	28	Texas
29	Harper	29	Greer
30	Oklahoma	30	Murray
31	Stephens	31	Jackson
32	Comanche	32	Garvin
33	Mayes	33	Love
34	Cherokee	34	Craig
35	Lincoln	35	Cotton
36	Bryan	36	Nowata
37	Latimer	37	Lincoln
38	Tillman	38	Beckham
39	Pottawatomie	39	Cimarron
40	Delaware	40	Blaine
41	Caddo	41	Pittsburg
42	Dewey	42	Kiowa

Rank 43	Health Outcomes Kay	Rank 43	Health Factors Johnston
45	Blaine	45	Carter
45	Major	45	Pontotoc
46	Murray	46	Delaware
47	Harmon	47	Bryan
48	Creek	48	Haskell
49	Le Flore	49	Kay
50	Atoka	50	Creek
51	Washita	51	Pottawatomie
52	Adair	52	Comanche
53	Pawnee	53	Mayes
54	Ottawa	54	Latimer
55	Greer	55	Pawnee
56	Craig	56	Harmon
57	Beckham	57	Tillman
58	Hughes	58	Marshall
59	Sequoyah	59	Atoka
60	Carter	60	Caddo
61	Okmulgee	61	Osage
62	Pittsburg	62	Ottawa
63	Okfuskee	63	Cherokee
64	Muskogee	64	Le Flore
65	Jefferson	65	Okfuskee
66	Haskell	66	Muskogee
67	Pontotoc	67	Coal
68	McCurtain	68	Seminole
69	Love	69	Okmulgee
70	Choctaw	70	McIntosh
71	Garvin	71	Jefferson
72	Johnston	72	Sequoyah
73	McIntosh	73	Hughes
74	Coal	74	McCurtain
75	Seminole	75	Choctaw
76	Kiowa	76	Adair
77	Pushmataha	77	Pushmataha

# 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	Inadequate social support	Behavioral Risk Factor Surveillance System	2005-2010
Support	Children in single-parent households	American Community Survey	2007-2011
Community Safety	Violent crime rate	Federal Bureau of Investigation	2008-2010
PHYSICAL ENVIRONMEN	Т		
Environmental Quality	Daily fine particulate matter <sup>1</sup>	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

<sup>&</sup>lt;sup>1</sup> Not available for AK and HI.

<sup>8</sup> www.countyhealthrankings.org/oklahoma

#### **CREDITS**

#### **Report Authors**

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

Bridget Booske Catlin, PhD, MHSA Amanda Jovaag, MS Patrick Remington, MD, MPH

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

#### Data

Centers for Disease Control and Prevention: National Center for Health Statistics and Division of Behavioral Surveillance

Dartmouth Institute for Health Policy & Clinical Practice

#### Research Assistance

Jennifer Buechner Hyojun Park, MA Elizabeth Pollock Jennifer Robinson Matthew Rodock, MPH Anne Roubal, MS

#### **Communications and Outreach**

**Burness Communications** Anna Graupner, MPH Kate Konkle, MPH Karen Odegaard, MPH Jan O'Neill, MPA Angela Russell, MS Julie Willems Van Dijk, PhD, RN

#### Design

Forum One, Alexandria, VA

#### **Robert Wood Johnson Foundation**

Abbey Cofsky, MPH –Senior Program Officer Michelle Larkin, JD, MS, RN – Assistant Vice-President and Deputy Director, Health Group James S. Marks, MD, MPH – Senior Vice-President and Group Director, Health Group Joe Marx – Senior Communications Officer

Suggested citation: University of Wisconsin Population Health Institute. County Health Rankings 2013.







University of Wisconsin Population Health Institute 610 Walnut St, #524, Madison, WI 53726 (608) 265-6370 / info@countyhealthrankings.org

