

2013 Rankings Montana





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.



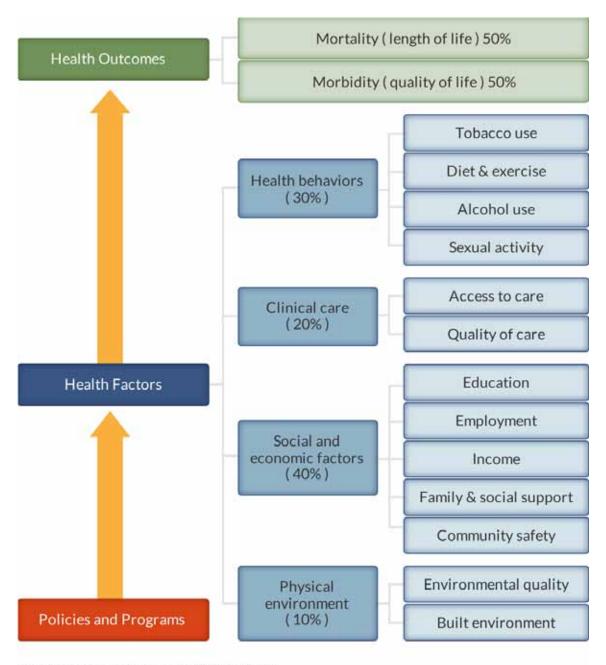
Roadmaps to Health Action Center

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 Montana 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.

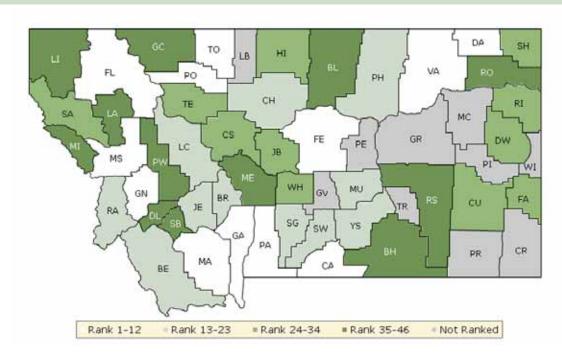


County Health Rankings model @2012 UWPHI

The maps on this page and the next display Montana'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

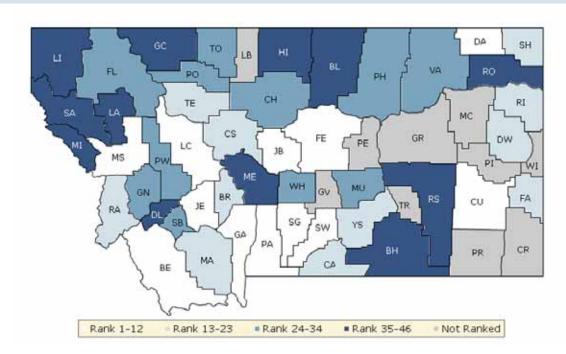
summary rankings. The green map shows the distribution of summary health outcomes. The blue displays the distribution of the summary rank for health factors.

HEALTH OUTCOMES



County	Rank	County	Rank	County	Rank	County	Rank
Beaverhead	13	Flathead	7	McCone	NR	Roosevelt	46
Big Horn	43	Gallatin	1	Meagher	38	Rosebud	40
Blaine	44	Garfield	NR	Mineral	41	Sanders	30
Broadwater	14	Glacier	45	Missoula	6	Sheridan	28
Carbon	11	Golden Valley	NR	Musselshell	20	Silver Bow	39
Carter	NR	Granite	2	Park	9	Stillwater	15
Cascade	24	Hill	32	Petroleum	NR	Sweet Grass	22
Chouteau	18	Jefferson	21	Phillips	16	Teton	25
Custer	34	Judith Basin	26	Pondera	8	Toole	4
Daniels	5	Lake	37	Powder River	NR	Treasure	NR
Dawson	29	Lewis and Clark	23	Powell	36	Valley	12
Deer Lodge	42	Liberty	NR	Prairie	NR	Wheatland	31
Fallon	33	Lincoln	35	Ravalli	17	Wibaux	NR
Fergus	10	Madison	3	Richland	27	Yellowstone	19

HEALTH FACTORS



County	Rank	County	Rank	County	Rank	County	Rank
Beaverhead	9	Flathead	24	McCone	NR	Roosevelt	44
Big Horn	45	Gallatin	1	Meagher	36	Rosebud	39
Blaine	43	Garfield	NR	Mineral	37	Sanders	41
Broadwater	21	Glacier	46	Missoula	5	Sheridan	20
Carbon	18	Golden Valley	NR	Musselshell	27	Silver Bow	29
Carter	NR	Granite	33	Park	12	Stillwater	4
Cascade	22	Hill	42	Petroleum	NR	Sweet Grass	7
Chouteau	26	Jefferson	2	Phillips	28	Teton	14
Custer	11	Judith Basin	8	Pondera	34	Toole	31
Daniels	6	Lake	40	Powder River	NR	Treasure	NR
Dawson	19	Lewis and Clark	3	Powell	30	Valley	25
Deer Lodge	35	Liberty	NR	Prairie	NR	Wheatland	32
Fallon	13	Lincoln	38	Ravalli	23	Wibaux	NR
Fergus	10	Madison	15	Richland	17	Yellowstone	16

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	Gallatin	1	Gallatin
2	Granite	2	Jefferson
3	Madison	3	Lewis and Clark
4	Toole	4	Stillwater
5	Daniels	5	Missoula
6	Missoula	6	Daniels
7	Flathead	7	Sweet Grass
8	Pondera	8	Judith Basin
9	Park	9	Beaverhead
10	Fergus	10	Fergus
11	Carbon	11	Custer
12	Valley	12	Park
13	Beaverhead	13	Fallon
14	Broadwater	14	Teton
15	Stillwater	15	Madison
16	Phillips	16	Yellowstone
17	Ravalli	17	Richland
18	Chouteau	18	Carbon
19	Yellowstone	19	Dawson
20	Musselshell	20	Sheridan
21	Jefferson	21	Broadwater
22	Sweet Grass	22	Cascade
23	Lewis and Clark	23	Ravalli
24	Cascade	24	Flathead
25	Teton	25	Valley
26	Judith Basin	26	Chouteau
27	Richland	27	Musselshell
28	Sheridan	28	Phillips
29	Dawson	29	Silver Bow
30	Sanders	30	Powell
31	Wheatland	31	Toole
32	Hill	32	Wheatland
33	Fallon	33	Granite
34	Custer	34	Pondera
35	Lincoln	35	Deer Lodge
36	Powell	36	Meagher
37	Lake	37	Mineral
38	Meagher	38	Lincoln
39	Silver Bow	39	Rosebud
40	Rosebud	40	Lake
41	Mineral	41	Sanders
42	Deer Lodge	42	Hill

Rank	Health Outcomes	Rank	Health Factors
43	Big Horn	43	Blaine
44	Blaine	44	Roosevelt
45	Glacier	45	Big Horn
46	Roosevelt	46	Glacier

Not Ranked: Carter, Garfield, Golden Valley, Liberty, McCone, Petroleum, Powder River, Prairie, Treasure, Wibaux

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 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.

⁸ www.countyhealthrankings.org/montana

CREDITS

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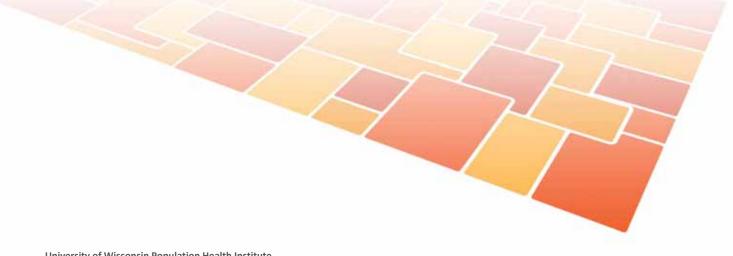
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