Building a Culture of Health, County by County

2017 County Health Rankings

Iowa





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.

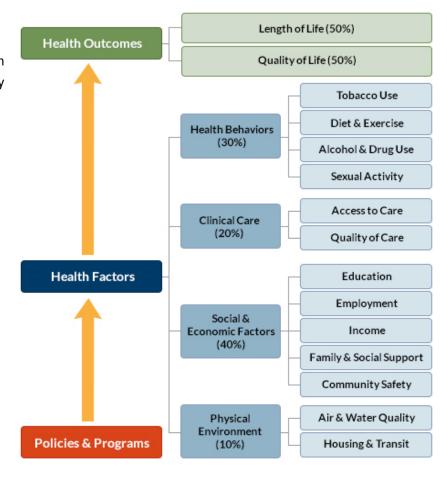
WHAT ARE THE COUNTY HEALTH RANKINGS?

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.

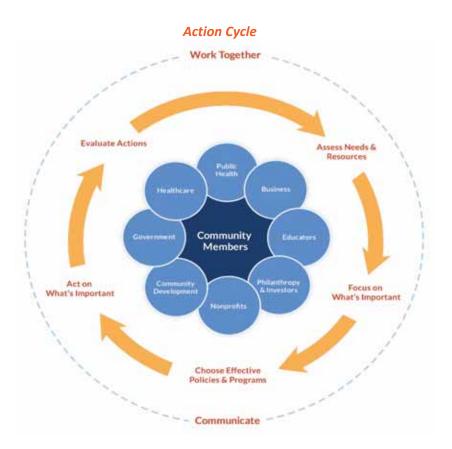
To further explore health gaps and other data sources in your community, check out the feature to <u>find</u> <u>more data</u> for your state and <u>dig deeper</u> on differences in health factors by geography or by population subgroups. Visit countyhealthrankings.org/using-the-rankings-data.

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



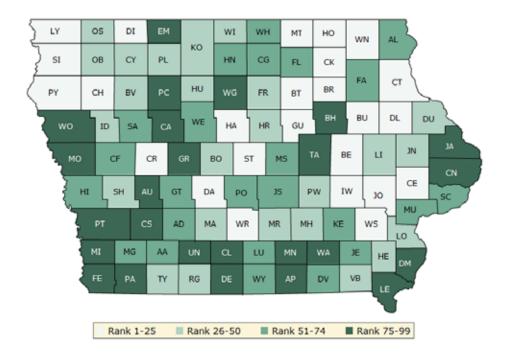
HOW CAN YOU GET INVOLVED?

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 Iowa'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.

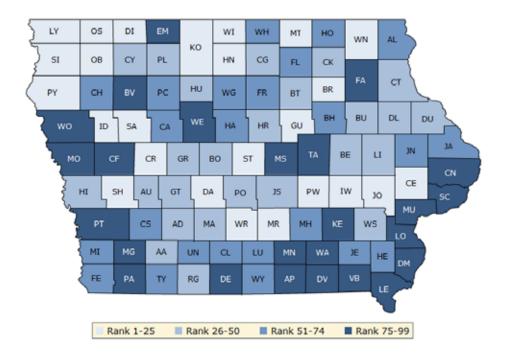


County	Rank	County	Rank	County	Rank	County	Rank
Adair	71	Davis	55	Jefferson	53	Pocahontas	96
Adams	68	Decatur	98	Johnson	16	Polk	59
Allamakee	52	Delaware	19	Jones	28	Pottawattamie	91
Appanoose	93	Des Moines	94	Keokuk	63	Poweshiek	38
Audubon	90	Dickinson	14	Kossuth	44	Ringgold	47
Benton	20	Dubuque	27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

HOW DO COUNTIES RANK FOR HEALTH FACTORS?

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

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	5,900	3,600	12,000
Poor or fair health	% of adults reporting fair or poor health	16%	12%	10%	17%
Poor physical health days	Average # of physically unhealthy days reported in past 30 days	3.8	3.0	2.7	3.6
Poor mental health days	Average # of mentally unhealthy days reported in past 30 days	3.8	3.3	2.9	3.5
Low birthweight	% of live births with low birthweight (< 2500 grams)	8%	7%	4%	10%
HEALTH FACTORS	The state of the s	3,0	7,0	1,70	1070
HEALTH BEHAVIORS					
Adult smoking	% of adults who are current smokers	17%	18%	14%	19%
Adult obesity	% of adults that report a BMI ≥ 30	31%	31%	23%	38%
Food environment index	Index of factors that contribute to a healthy food environment, (0-10)	7.3	7.8	4.8	8.9
Physical inactivity	% of adults aged 20 and over reporting no leisure-time physical activity	26%	24%	17%	32%
Access to exercise opportunities	% of population with adequate access to locations for physical activity	62%	76%	5%	92%
Excessive drinking	% of adults reporting binge or heavy drinking	17%	21%	17%	24%
Alcohol-impaired driving deaths	% of driving deaths with alcohol involvement	30%	25%	0%	100%
Sexually transmitted infections	# of newly diagnosed chlamydia cases per 100,000 population	294.8	382.0	79.6	649.9
Teen births	# of births per 1,000 female population ages 15-19	38	27	6	49
CLINICAL CARE					
Uninsured	% of population under age 65 without health insurance	14%	7%	5%	12%
Primary care physicians	Ratio of population to primary care physicians	2,030:1	1,350:1	11,160:1	550:1
Dentists	Ratio of population to dentists	2,570:1	1,600:1	7,340:1	450:1
Mental health providers	Ratio of population to mental health providers	1,105:1	820:1	25,660:1	310:1
Preventable hospital stays	# of hospital stays for ambulatory-care sensitive conditions per 1,000	56	48	23,000.1	90
	Medicare enrollees				
Diabetes monitoring	% of diabetic Medicare enrollees ages 65-75 that receive HbA1c monitoring	86%	90%	79%	96%
Mammography screening	% of female Medicare enrollees ages 67-69 that receive mammography screening	61%	69%	51%	80%
SOCIAL AND ECONOMIC FACTORS					
High school graduation	% of ninth-grade cohort that graduates in four years	88%	90%	68%	98%
Some college	% of adults ages 25-44 with some post-secondary education	57%	70%	50%	85%
Unemployment	% of population aged 16 and older unemployed but seeking work	5.3%	3.7%	2.0%	5.3%
Children in poverty	% of children under age 18 in poverty	22%	15%	6%	27%
Income inequality	Ratio of household income at the 80th percentile to income at the 20th percentile	4.4	4.3	3.3	5.6
Children in single-parent	% of children that live in a household headed by a single parent	32%	29%	14%	41%
households Social associations	# of membership associations per 10,000 population	12.6	15.3	5.7	32.6
Violent crime	# of reported violent crime offenses per 10,000 population	198	270	9	693
Injury deaths	# of deaths due to injury per 100,000 population	198 77	63	9 37	133
PHYSICAL ENVIRONMENT	" or acating due to injury per 100,000 population	,,	03	31	133
Air pollution – particulate matter	Average daily density of fine particulate matter in micrograms per	9.2	9.6	8.9	11.5
	cubic meter (PM2.5)				
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%	12%	6%	19%
Driving alone to work	% of workforce that drives alone to work	81%	81%	66%	87%
Long commute – driving alone	Among workers who commute in their car alone, % commuting > 30 minutes	30%	20%	9%	52%

2017 COUNTY HEALTH RANKINGS: DATA SOURCES AND YEARS OF DATA

	Measure	Data Source	Years of Data
HEALTH OUTCO	MES		
Length of Life	Premature death	National Center for Health Statistics – Mortality files	2012-2014
Quality of Life	Poor or fair health	Behavioral Risk Factor Surveillance System	2015
	Poor physical health days	Behavioral Risk Factor Surveillance System	2015
	Poor mental health days	Behavioral Risk Factor Surveillance System	2015
	Low birthweight	National Center for Health Statistics – Natality files	2008-2014
HEALTH FACTOR	s		
HEALTH BEHAVIO	ORS		
Tobacco Use	Adult smoking	Behavioral Risk Factor Surveillance System	2015
Diet and	Adult obesity	CDC Diabetes Interactive Atlas	2013
Exercise	Food environment index	USDA Food Environment Atlas, Map the Meal Gap	2010 & 2014
	Physical inactivity	CDC Diabetes Interactive Atlas	2013
	Access to exercise opportunities	Business Analyst, Delorme map data, ESRI, & US Census Tigerline Files	2010 & 2014
Alcohol and	Excessive drinking	Behavioral Risk Factor Surveillance System	2015
Drug Use	Alcohol-impaired driving deaths	Fatality Analysis Reporting System	2011-2015
Sexual Activity	Sexually transmitted infections	National Center for HIV/AIDS, Viral Hepatitis, STD, and TB Prevention	2014
,	Teen births	National Center for Health Statistics - Natality files	2008-2014
CLINICAL CARE			
Access to Care	Uninsured	Small Area Health Insurance Estimates	2014
	Primary care physicians	Area Health Resource File/American Medical Association	2014
	Dentists	Area Health Resource File/National Provider Identification file	2015
	Mental health providers	CMS, National Provider Identification file	2016
Quality of Care	Preventable hospital stays	Dartmouth Atlas of Health Care	2014
,	Diabetes monitoring	Dartmouth Atlas of Health Care	2014
	Mammography screening	Dartmouth Atlas of Health Care	2014
SOCIAL AND ECO	DNOMIC FACTORS		
Education	High school graduation	EDFacts ¹	2014-2015
	Some college	American Community Survey	2011-2015
Employment	Unemployment	Bureau of Labor Statistics	2015
Income	Children in poverty	Small Area Income and Poverty Estimates	2015
	Income inequality	American Community Survey	2011-2015
Family and	Children in single-parent households	American Community Survey	2011-2015
Social Support	Social associations	County Business Patterns	2014
Community	Violent crime	Uniform Crime Reporting – FBI	2012-2014
Safety	Injury deaths	CDC WONDER mortality data	2011-2015
PHYSICAL ENVIR	<u> </u>		
Air and Water	Air pollution - particulate matter ²	CDC National Environmental Public Health Tracking Network	2012
Quality	Drinking water violations	Safe Drinking Water Information System	FY2013-14
Housing and	Severe housing problems	Comprehensive Housing Affordability Strategy (CHAS) data	2009-2013
Transit	Driving alone to work	American Community Survey	2011-2015
	Long commute – driving alone	American Community Survey	2011-2015
	Long commute – univing alone	American community survey	2011-2013

State sources used for California and Texas. Not available for AK and HI.

CREDITS

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