## 2015 Data Comparability Across States

The County Health Rankings gather data from around the nation that is comparable between counties, within states. For most of our measures, county data is also comparable across state lines. However, for a few of our measures, some caution must be exercised when making comparisons between counties in different states. Please note our cautions below:

Adult obesity	The model use	d to construct t	hese estimates inclu	des state-lev	el effects that may
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overestimate differences in border counties.

**Food environment** 

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The food insecurity models include state-level effects that may overestimate

differences in border counties.

**Physical inactivity** The model used to construct these estimates includes state-level effects that may

overestimate differences in border counties.

Sexually transmitted infections Chlamydia screening patterns may vary between states and health care systems. Differences in rates may reflect differences in these screening patterns, rather than

differences in the underlying rates of disease.

High school graduation

While most states have now adopted a comparable method of tracking student progress over time and calculating cohort graduation rates, three states have not yet adopted the shared definition: Kentucky, Idaho, and Oklahoma. The graduation rates we report in these three states are not comparable to each other or the rest of the

country.

Violent crime Violent crime

Violent crime rates are dependent on the reporting practices of both residents and law enforcement offices in states and jurisdictions. These practices can vary by both state and jurisdiction, so caution should always be observed when comparing crime

rates.



