

**County Health  
Rankings & Roadmaps**

Building a Culture of Health, County by County

A Robert Wood Johnson Foundation program

**2017 County Health Rankings**

**Alabama**



## 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](http://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](http://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](http://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](http://countyhealthrankings.org)



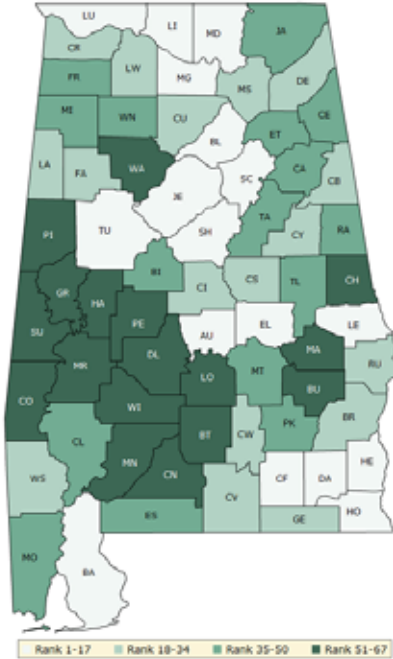
## HOW CAN YOU GET INVOLVED?

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](http://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 Alabama’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](http://countyhealthrankings.org).

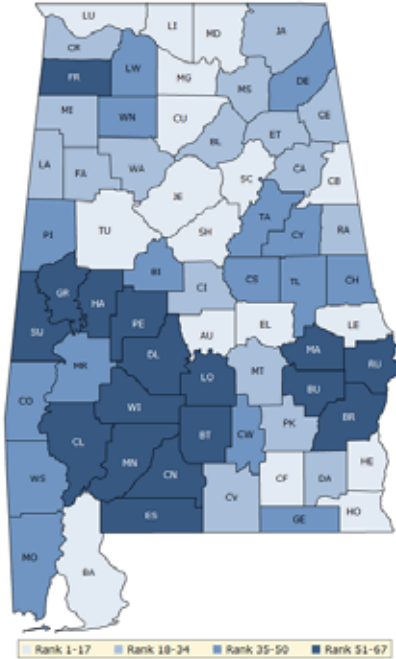


County	Rank	County	Rank	County	Rank	County	Rank
Autauga	8	Conecuh	64	Houston	12	Morgan	14
Baldwin	2	Coosa	28	Jackson	41	Perry	65
Barbour	27	Covington	23	Jefferson	17	Pickens	55
Bibb	48	Crenshaw	22	Lamar	21	Pike	39
Blount	11	Cullman	18	Lauderdale	13	Randolph	47
Bullock	54	Dale	9	Lawrence	31	Russell	20
Butler	57	Dallas	62	Lee	6	Shelby	1
Calhoun	37	DeKalb	24	Limestone	4	St. Clair	16
Chambers	51	Elmore	7	Lowndes	63	Sumter	61
Cherokee	45	Escambia	46	Macon	59	Talladega	50
Chilton	32	Etowah	35	Madison	3	Tallapoosa	43
Choctaw	56	Fayette	33	Marengo	52	Tuscaloosa	15
Clarke	40	Franklin	44	Marion	42	Walker	58
Clay	26	Geneva	19	Marshall	34	Washington	29
Cleburne	30	Greene	66	Mobile	38	Wilcox	67
Coffee	5	Hale	53	Monroe	60	Winston	49
Colbert	25	Henry	10	Montgomery	36		

## HOW DO COUNTIES RANK FOR HEALTH FACTORS?

The blue map displays Alabama’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](http://countyhealthrankings.org)



County	Rank	County	Rank	County	Rank	County	Rank
Autauga	3	Conecuh	63	Houston	11	Morgan	14
Baldwin	4	Coosa	45	Jackson	25	Perry	61
Barbour	60	Covington	24	Jefferson	12	Pickens	47
Bibb	37	Crenshaw	42	Lamar	27	Pike	34
Blount	21	Cullman	8	Lauderdale	5	Randolph	20
Bullock	64	Dale	18	Lawrence	39	Russell	52
Butler	55	Dallas	62	Lee	7	Shelby	1
Calhoun	28	DeKalb	41	Limestone	9	St. Clair	16
Chambers	49	Elmore	15	Lowndes	65	Sumter	59
Cherokee	22	Escambia	57	Macon	54	Talladega	46
Chilton	33	Etowah	30	Madison	2	Tallapoosa	44
Choctaw	50	Fayette	26	Marengo	38	Tuscaloosa	13
Clarke	53	Franklin	51	Marion	32	Walker	31
Clay	36	Geneva	35	Marshall	23	Washington	48
Cleburne	17	Greene	66	Mobile	43	Wilcox	67
Coffee	6	Hale	56	Monroe	58	Winston	40
Colbert	19	Henry	10	Montgomery	29		

## 2017 COUNTY HEALTH RANKINGS: MEASURES AND NATIONAL/STATE RESULTS

Measure	Description	US Median	State Overall	State Minimum	State Maximum
<b>HEALTH OUTCOMES</b>					
Premature death	Years of potential life lost before age 75 per 100,000 population	7,700	9,600	6,200	18,000
Poor or fair health	% of adults reporting fair or poor health	16%	21%	14%	36%
Poor physical health days	Average # of physically unhealthy days reported in past 30 days	3.8	4.5	3.4	5.8
Poor mental health days	Average # of mentally unhealthy days reported in past 30 days	3.8	4.4	3.7	5.3
Low birthweight	% of live births with low birthweight (< 2500 grams)	8%	10%	7%	17%
<b>HEALTH FACTORS</b>					
<b>HEALTH BEHAVIORS</b>					
Adult smoking	% of adults who are current smokers	17%	21%	14%	26%
Adult obesity	% of adults that report a BMI ≥ 30	31%	34%	27%	46%
Food environment index	Index of factors that contribute to a healthy food environment, (0-10)	7.3	6.5	1.2	8.4
Physical inactivity	% of adults aged 20 and over reporting no leisure-time physical activity	26%	28%	22%	36%
Access to exercise opportunities	% of population with adequate access to locations for physical activity	62%	63%	0%	82%
Excessive drinking	% of adults reporting binge or heavy drinking	17%	13%	9%	17%
Alcohol-impaired driving deaths	% of driving deaths with alcohol involvement	30%	29%	0%	62%
Sexually transmitted infections	# of newly diagnosed chlamydia cases per 100,000 population	294.8	600.2	124.4	1,376.1
Teen births	# of births per 1,000 female population ages 15-19	38	41	20	78
<b>CLINICAL CARE</b>					
Uninsured	% of population under age 65 without health insurance	14%	14%	11%	21%
Primary care physicians	Ratio of population to primary care physicians	2,030:1	1,550:1	8,420:1	890:1
Dentists	Ratio of population to dentists	2,570:1	2,180:1	16,560:1	1,200:1
Mental health providers	Ratio of population to mental health providers	1,105:1	1,260:1	23,880:1	290:1
Preventable hospital stays	# of hospital stays for ambulatory-care sensitive conditions per 1,000 Medicare enrollees	56	61	37	157
Diabetes monitoring	% of diabetic Medicare enrollees ages 65-75 that receive HbA1c monitoring	86%	85%	77%	89%
Mammography screening	% of female Medicare enrollees ages 67-69 that receive mammography screening	61%	63%	49%	71%
<b>SOCIAL AND ECONOMIC FACTORS</b>					
High school graduation	% of ninth-grade cohort that graduates in four years	88%	89%	79%	98%
Some college	% of adults ages 25-44 with some post-secondary education	57%	59%	34%	74%
Unemployment	% of population aged 16 and older unemployed but seeking work	5.3%	6.1%	4.2%	14.7%
Children in poverty	% of children under age 18 in poverty	22%	27%	10%	55%
Income inequality	Ratio of household income at the 80th percentile to income at the 20th percentile	4.4	5.2	4.0	8.1
Children in single-parent households	% of children that live in a household headed by a single parent	32%	38%	20%	73%
Social associations	# of membership associations per 10,000 population	12.6	12.4	6.6	21.0
Violent crime	# of reported violent crime offenses per 100,000 population	198	436	111	886
Injury deaths	# of deaths due to injury per 100,000 population	77	76	49	127
<b>PHYSICAL ENVIRONMENT</b>					
Air pollution – particulate matter	Average daily density of fine particulate matter in micrograms per cubic meter (PM2.5)	9.2	10.1	9.1	12.9
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%	9%	24%
Driving alone to work	% of workforce that drives alone to work	81%	85%	75%	94%
Long commute – driving alone	Among workers who commute in their car alone, % commuting > 30 minutes	30%	33%	18%	60%

## 2017 COUNTY HEALTH RANKINGS: DATA SOURCES AND YEARS OF DATA

	Measure	Data Source	Years of Data
<b>HEALTH OUTCOMES</b>			
<b>Length of Life</b>	Premature death	National Center for Health Statistics – Mortality files	2012-2014
<b>Quality of Life</b>	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
<b>HEALTH FACTORS</b>			
<b>HEALTH BEHAVIORS</b>			
<b>Tobacco Use</b>	Adult smoking	Behavioral Risk Factor Surveillance System	2015
<b>Diet and Exercise</b>	Adult obesity	CDC Diabetes Interactive Atlas	2013
	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
<b>Alcohol and Drug Use</b>	Excessive drinking	Behavioral Risk Factor Surveillance System	2015
	Alcohol-impaired driving deaths	Fatality Analysis Reporting System	2011-2015
<b>Sexual Activity</b>	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
<b>CLINICAL CARE</b>			
<b>Access to Care</b>	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
<b>Quality of Care</b>	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
<b>SOCIAL AND ECONOMIC FACTORS</b>			
<b>Education</b>	High school graduation	EDFacts <sup>1</sup>	2014-2015
	Some college	American Community Survey	2011-2015
<b>Employment</b>	Unemployment	Bureau of Labor Statistics	2015
<b>Income</b>	Children in poverty	Small Area Income and Poverty Estimates	2015
	Income inequality	American Community Survey	2011-2015
<b>Family and Social Support</b>	Children in single-parent households	American Community Survey	2011-2015
	Social associations	County Business Patterns	2014
<b>Community Safety</b>	Violent crime	Uniform Crime Reporting – FBI	2012-2014
	Injury deaths	CDC WONDER mortality data	2011-2015
<b>PHYSICAL ENVIRONMENT</b>			
<b>Air and Water Quality</b>	Air pollution - particulate matter <sup>2</sup>	CDC National Environmental Public Health Tracking Network	2012
	Drinking water violations	Safe Drinking Water Information System	FY2013-14
<b>Housing and Transit</b>	Severe housing problems	Comprehensive Housing Affordability Strategy (CHAS) data	2009-2013
	Driving alone to work	American Community Survey	2011-2015
	Long commute – driving alone	American Community Survey	2011-2015

<sup>1</sup> State sources used for California and Texas.

<sup>2</sup> 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

### Design and Communications

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

### 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, MPA  
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

### Robert Wood Johnson Foundation

## County Health Rankings & Roadmaps

Building a Culture of Health, County by County

[countyhealthrankings.org](http://countyhealthrankings.org)



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