County Health Rankings

Mobilizing Action Toward Community Health

2011
Utah

Robert Wood Johnson Foundation

UNIVERSITY OF WISCONSIN
Population Health Institute
*Translating Research into Policy and Practice*

Introduction

Where we live matters to our health. The health of a community depends on many different factors, including quality of health care, individual behavior, education and jobs, and the environment. We can improve a community's health through programs and policies. For example, people who live in communities with ample park and recreation space are more likely to exercise, which reduces heart disease risk. 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.

The problem is that there are big differences in health across communities, with some places being much healthier than others. And up to now, it has been hard to get a standard way to measure how healthy a county is and see where they can improve.

The Robert Wood Johnson Foundation and the University of Wisconsin Population Health Institute are pleased to present the 2011 *County Health Rankings*, a collection of 50 reports that reflect the overall health of counties in every state across the country. For the second year in a row, counties can get a snapshot of how healthy their residents are by comparing their overall health and the factors that influence their health with other counties in their state. This allows communities to see county-to-county where they are doing well and where they need to improve.

Everyone has a stake in community health. We all need to work together to find solutions. The *County Health Rankings* serve as both a call to action and a needed tool in this effort.

All of the *County Health Rankings* are based upon this model of population health improvement:
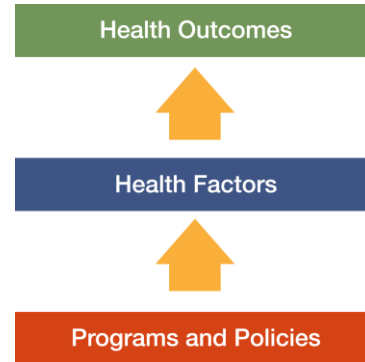
In this model, health outcomes are measures that describe the current health status of a county. These health outcomes are influenced by a set of health factors. These health factors and their outcomes may also be affected by community-based programs and policies designed to alter their distribution in the community. Counties can improve health outcomes by addressing all health factors with effective, evidence-based programs and policies.

To compile the *Rankings*, we built on our prior work in Wisconsin, obtained input from a team of expert advisors, and worked closely with staff from the National Center for Health Statistics. Together we selected a number of population health measures based on scientific relevance, importance, and availability of data at the county level.
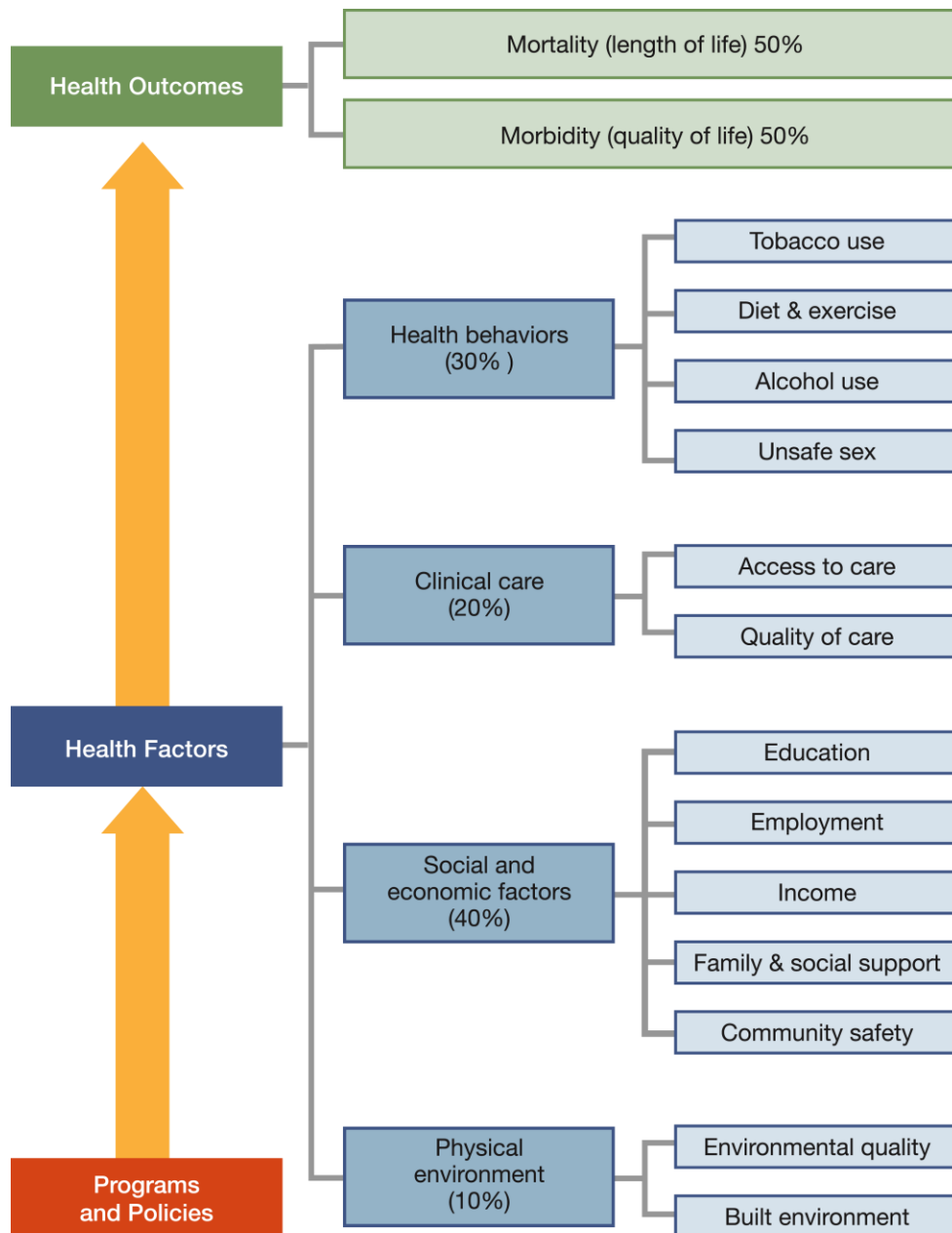
For a more detailed explanation of our approach, the methods used to compile the *Rankings,* information on the action steps communities can take to improve their health, and examples of communities in action, see www.countyhealthrankings.org

The Rankings

This report ranks Utah counties according to their summary measures of **health outcomes** and **health factors**, as well as the components used to create each summary measure. The figure below depicts the structure of the *Rankings* model. Counties receive a rank for each population health component; 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.

Health Outcomes	Mortality (length of life) 50%
	Morbidity (quality of life) 50%

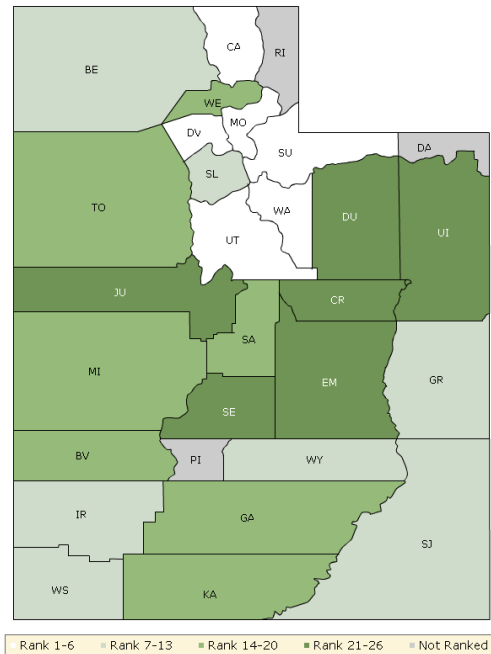|	Health behaviors (30%)	Tobacco use
		Diet & exercise
		Alcohol use
		Unsafe sex
	Clinical care (20%)	Access to care
Health Factors		Quality of care
	Social and economic factors (40%)	Education
		Employment
		Income
		Family & social support
		Community safety
Programs and Policies	Physical environment (10%)	Environmental quality
		Built environment

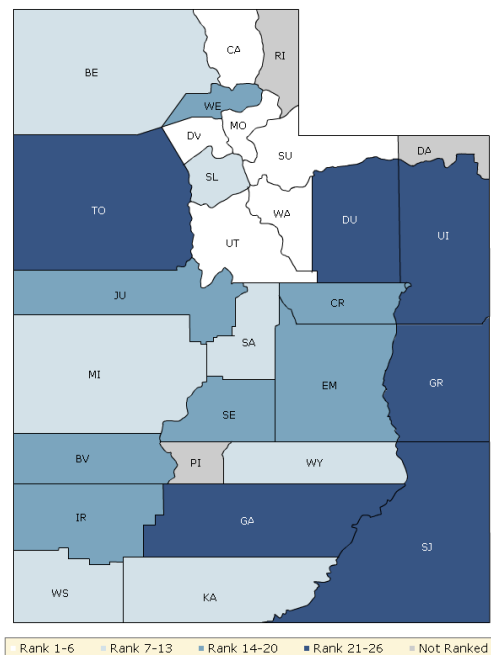*County Health Rankings* model ©2010 UWPHI

The maps on this page display Utah's counties divided into groups by health rank. 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.

Maps help locate the healthiest and least healthy counties in the state. The health factors map appears similar to the health outcomes map, showing how health factors and health outcomes are closely related.

HEALTH OUTCOMES

Rank 1-6 | Rank 7-13 | Rank 14-20 | Rank 21-26 | Not Ranked

HEALTH FACTORS

Rank 1-6 | Rank 7-13 | Rank 14-20 | Rank 21-26 | Not Ranked

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 are what influences the health of the county.

Rank	Health Outcomes	Rank	Health Factors
1	Morgan	1	Summit
2	Cache	2	Morgan
3	Utah	3	Cache
4	Summit	4	Davis
5	Davis	5	Utah
6	Wasatch	6	Wasatch
7	Grand	7	Kane
8	Washington	8	Box Elder
9	Box Elder	9	Washington
10	Wayne	10	Wayne
11	Salt Lake	11	Salt Lake
12	Iron	12	Millard
13	San Juan	13	Sanpete
14	Millard	14	Beaver
15	Weber	15	Juab
16	Sanpete	16	Emery
17	Tooele	17	Carbon
18	Beaver	18	Sevier
19	Kane	19	Iron
20	Garfield	20	Weber
21	Juab	21	Tooele
22	Emery	22	Garfield
23	Uintah	23	Grand
24	Sevier	24	Duchesne
25	Duchesne	25	Uintah
26	Carbon	26	San Juan

Not Ranked: Daggett, Piute, Rich

Health Outcomes Rankings

The summary health outcomes ranking is based on measures of mortality and morbidity. Each county's ranks for mortality and morbidity are displayed here. The mortality rank, representing length of life, is based on a measure of premature death: the years of potential life lost prior to age 75.

The morbidity rank is based on measures that represent health-related quality of life and birth outcomes. We combine four morbidity measures: self-reported fair or poor health, poor physical health days, poor mental health days, and the percent of births with low birthweight.

Rank	Mortality	Rank	Morbidity
1	Morgan	1	Morgan
2	Cache	2	Cache
3	Summit	3	Grand
4	Utah	4	Wasatch
5	Davis	5	Wayne
6	Salt Lake	6	Beaver
7	Washington	7	Utah
8	Box Elder	8	Washington
9	Wasatch	9	San Juan
10	Grand	10	Box Elder
11	Weber	11	Davis
12	Sanpete	12	Summit
13	Garfield	13	Iron
13	Wayne	14	Millard
15	Tooele	15	Juab
16	Kane	16	Salt Lake
17	Millard	17	Tooele
18	Iron	18	Kane
19	San Juan	19	Weber
20	Emery	20	Sanpete
21	Sevier	21	Uintah
22	Uintah	22	Duchesne
23	Juab	23	Emery
24	Beaver	24	Garfield
25	Carbon	25	Sevier
26	Duchesne	26	Carbon

Health Factors Rankings

The summary health factors ranking is based on four factors: health behaviors, clinical care, social and economic, and physical environment factors. In turn, each of these factors is based on several measures. Health behaviors include measures of smoking, diet and exercise, alcohol use, and risky sex behavior. Clinical care includes measures of access to care and quality of care. Social and economic factors include measures of education, employment, income, family and social support, and community safety. The physical environment includes measures of environmental quality and the built environment.

Rank	Health Behaviors	Rank	Clinical Care	Rank	Social & Economic Factors	Rank	Physical Environment
1	Summit	1	Summit	1	Morgan	1	Kane
2	Morgan	2	Davis	2	Cache	2	Wayne
3	Cache	3	Salt Lake	3	Davis	3	Summit
4	Utah	4	Carbon	4	Utah	4	Wasatch
5	Davis	5	Morgan	5	Summit	5	Juab
6	Wasatch	6	Weber	6	Beaver	6	Duchesne
7	Washington	7	Box Elder	7	Wasatch	7	Emery
8	Millard	8	Wasatch	8	Box Elder	8	Morgan
9	Sanpete	9	Washington	9	Kane	9	Sevier
10	Garfield	10	Grand	10	Emery	10	Millard
11	Kane	11	Utah	11	Salt Lake	11	San Juan
12	San Juan	12	Tooele	12	Juab	12	Sanpete
13	Iron	13	Cache	13	Carbon	13	Carbon
14	Wayne	14	Sevier	14	Tooele	14	Garfield
15	Salt Lake	15	Wayne	15	Sanpete	14	Grand
16	Box Elder	16	Millard	16	Wayne	16	Iron
17	Sevier	17	Emery	17	Washington	17	Washington
18	Juab	18	Uintah	18	Iron	18	Weber
19	Beaver	19	Duchesne	19	Millard	19	Uintah
20	Weber	20	Juab	20	Weber	20	Beaver
21	Emery	21	Iron	21	Sevier	21	Tooele
22	Carbon	22	Sanpete	22	Uintah	22	Cache
23	Grand	23	Kane	23	Duchesne	23	Davis
24	Tooele	24	Garfield	24	Grand	24	Box Elder
25	Duchesne	25	Beaver	25	Garfield	25	Utah
26	Uintah	26	San Juan	26	San Juan	26	Salt Lake

2011 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	2005-2007
Morbidity	Poor or fair health	Behavioral Risk Factor Surveillance System	2003-2009
	Poor physical health days	Behavioral Risk Factor Surveillance System	2003-2009
	Poor mental health days	Behavioral Risk Factor Surveillance System	2003-2009
	Low birthweight	National Center for Health Statistics	2001-2007
HEALTH FACTORS			
HEALTH BEHAVIORS			
Tobacco	Adult smoking	Behavioral Risk Factor Surveillance System	2003-2009
Diet and Exercise	Adult obesity	National Center for Chronic Disease Prevention and Health Promotion	2008
Alcohol Use	Excessive drinking	Behavioral Risk Factor Surveillance System	2003-2009
	Motor vehicle crash death rate	National Center for Health Statistics	2001-2007
High Risk Sexual Behavior	Sexually transmitted infections	National Center for Hepatitis, HIV, STD and TB Prevention	2008
	Teen birth rate	National Center for Health Statistics	2001-2007
CLINICAL CARE			
Access to Care	Uninsured adults	Small Area Health Insurance Estimates, U.S. Census	2007
	Primary care providers	Health Resources & Services Administration	2008
Quality of Care	Preventable hospital stays	Medicare/Dartmouth Institute	2006-2007
	Diabetic screening	Medicare/Dartmouth Institute	2006-2007
	Mammography screening	Medicare/Dartmouth Institute	2006-2007
SOCIOECONOMIC FACTORS			
Education	High school graduation	National Center for Education Statistics[1]	2006-2007
	Some college	American Community Survey	2005-2009
Employment	Unemployment	Bureau of Labor Statistics	2009
Income	Children in poverty	Small Area Income and Poverty Estimates, U.S. Census	2008
Family and Social Support	Inadequate social support	Behavioral Risk Factor Surveillance System	2005-2009
	Single-parent households	American Community Survey	2005-2009
Community Safety	Violent crime[2]	Uniform Crime Reporting, Federal Bureau of Investigation	2006-2008
PHYSICAL ENVIRONMENT			
Air Quality[3]	Air pollution-particulate matter days	U.S. Environmental Protection Agency / Centers for Disease Control and Prevention	2006
	Air pollution-ozone days	U.S. Environmental Protection Agency / Centers for Disease Control and Prevention	2006
Built Environment	Access to healthy foods	Census Zip Code Business Patterns	2008
	Access to recreational facilities	Census County Business Patterns	2008

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[1] State data sources for KY, NH, NC, PA, SC, and UT (2008-2009).

[2] Homicide rate (2001-2007) from National Center for Health Statistics for AK, AZ, AR, CO, CT, GA, ID, IN, IA, KS, KY, LA, MN, MS, MT, NE, NH, NM, NC, ND, OH, SD, UT, and WV. State data source for IL.

[3] Not available for AK and HI.

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