

2012 Rankings Oklahoma





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. To learn about steps that you can take to improve health in your community, click on the *Roadmaps* tab. The *Roadmaps* to *Health* Action Center provides tools and resources to help groups working together to create healthier places. The Opportunities section provides information on funding, recognition. and partnership opportunities. The Connections section helps you learn what others are doing.

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.

This report introduces the *County Health Roadmaps*, a new partnership that 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 collaborates with the University of Wisconsin Population Health Institute 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 technical assistance on strategies to improve health.

Roadmaps to Health Community Grants

The Roadmaps to Health Community Grants provide funding for 2 years to 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

The Robert Wood Johnson Foundation 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. The first Partner Grant was awarded to United Way Worldwide (UWW) in July 2011.

Roadmaps to Health Prize

The Robert Wood Johnson Foundation and the University of Wisconsin Population Health Institute will award *Roadmaps to Health* Prizes of \$25,000 to up to six communities that are working to become healthier places to live, learn, work and play. The *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.

TAKE ACTION



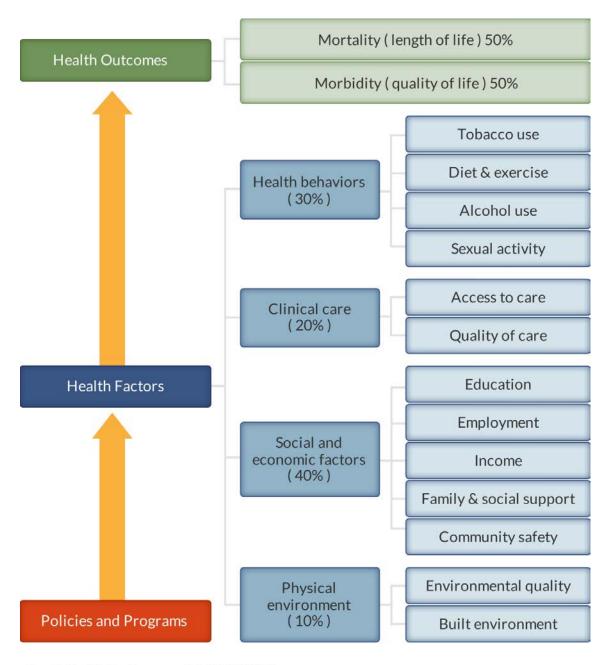
Roadmaps to Health Action Center

The Roadmaps to Health Action Center, based at the University of Wisconsin Population Health Institute, provides tools and resources to help groups working to make their communities healthier places. The new Action Center will provide guidance on developing strategies and advocacy efforts to advance pro-health policies, offer opportunities for ongoing learning, and in the summer of 2012, host a searchable database of evidence-informed policies and programs focused on health improvement. Experts provide customized consultation to local 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 2012 County Health Rankings report ranks Oklahoma 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.

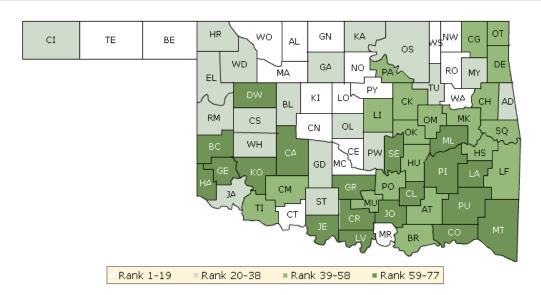


County Health Rankings model ©2012 UWPHI

The maps on this page and the next display Oklahoma'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

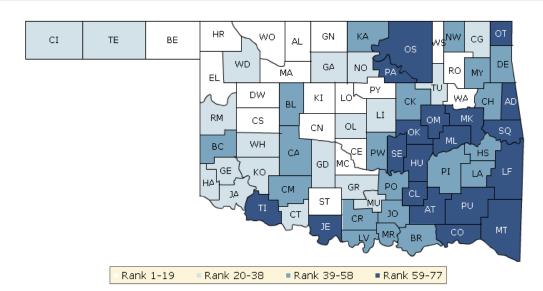
summary rankings. The green map shows the distribution of summary health outcomes. The blue displays the distribution of the summary rank for health factors.

HEALTH OUTCOMES



County	Rank	County	Rank	County	Rank	County	Rank
Adair	38	Delaware	42	Lincoln	48	Pittsburg	72
Alfalfa	19	Dewey	66	Logan	12	Pontotoc	58
Atoka	54	Ellis	29	Love	74	Pottawatomie	31
Beaver	5	Garfield	26	Major	16	Pushmataha	62
Beckham	70	Garvin	64	Marshall	17	Roger Mills	34
Blaine	36	Grady	27	Mayes	33	Rogers	9
Bryan	43	Grant	6	McClain	14	Seminole	77
Caddo	61	Greer	76	McCurtain	69	Sequoyah	56
Canadian	3	Harmon	73	McIntosh	71	Stephens	28
Carter	59	Harper	23	Murray	57	Texas	2
Cherokee	44	Haskell	45	Muskogee	50	Tillman	41
Choctaw	68	Hughes	39	Noble	18	Tulsa	24
Cimarron	22	Jackson	30	Nowata	11	Wagoner	13
Cleveland	1	Jefferson	60	Okfuskee	52	Washington	10
Coal	65	Johnston	67	Oklahoma	32	Washita	37
Comanche	40	Kay	35	Okmulgee	55	Woods	15
Cotton	7	Kingfisher	8	Osage	21	Woodward	25
Craig	53	Kiowa	75	Ottawa	51		
Creek	47	Latimer	63	Pawnee	49		
Custer	20	Le Flore	46	Payne	4		

HEALTH FACTORS



County	Rank	County	Rank	County	Rank	County	Rank
Adair	77	Delaware	45	Lincoln	36	Pittsburg	39
Alfalfa	15	Dewey	12	Logan	13	Pontotoc	44
Atoka	64	Ellis	3	Love	46	Pottawatomie	40
Beaver	18	Garfield	21	Major	1	Pushmataha	76
Beckham	41	Garvin	31	Marshall	52	Roger Mills	25
Blaine	50	Grady	29	Mayes	55	Rogers	14
Bryan	48	Grant	9	McClain	5	Seminole	70
Caddo	57	Greer	33	McCurtain	72	Sequoyah	75
Canadian	7	Harmon	37	McIntosh	69	Stephens	17
Carter	42	Harper	16	Murray	34	Texas	22
Cherokee	58	Haskell	43	Muskogee	60	Tillman	59
Choctaw	74	Hughes	73	Noble	24	Tulsa	28
Cimarron	35	Jackson	26	Nowata	47	Wagoner	19
Cleveland	2	Jefferson	71	Okfuskee	61	Washington	8
Coal	67	Johnston	51	Oklahoma	30	Washita	20
Comanche	56	Kay	54	Okmulgee	65	Woods	4
Cotton	27	Kingfisher	11	Osage	62	Woodward	23
Craig	32	Kiowa	38	Ottawa	63		
Creek	49	Latimer	53	Pawnee	68		
Custer	10	Le Flore	66	Payne	6		

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	Cleveland	1	Major
2	Texas	2	Cleveland
3	Canadian	3	Ellis
4	Payne	4	Woods
5	Beaver	5	McClain
6	Grant	6	Payne
7	Cotton	7	Canadian
8	Kingfisher	8	Washington
9	Rogers	9	Grant
10	Washington	10	Custer
11	Nowata	11	Kingfisher
12	Logan	12	Dewey
13	Wagoner	13	Logan
14	McClain	14	Rogers
15	Woods	15	Alfalfa
16	Major	16	Harper
17	Marshall	17	Stephens
18	Noble	18	Beaver
19	Alfalfa	19	Wagoner
20	Custer	20	Washita
21	Osage	21	Garfield
22	Cimarron	22	Texas
23	Harper	23	Woodward
24	Tulsa	24	Noble
25	Woodward	25	Roger Mills
26	Garfield	26	Jackson
27	Grady	27	Cotton
28	Stephens	28	Tulsa
29	Ellis	29	Grady
30	Jackson	30	Oklahoma
31	Pottawatomie	31	Garvin
32	Oklahoma	32	Craig
33	Mayes	33	Greer
34	Roger Mills	34	Murray
35	Kay	35	Cimarron
36	Blaine	36	Lincoln
37	Washita	37	Harmon
38	Adair	38	Kiowa
39	Hughes	39	Pittsburg
40	Comanche	40	Pottawatomie
41	Tillman	41	Beckham
42	Delaware	42	Carter

Rank	Health Outcomes	Rank	Health Factors
43	Bryan	43	Haskell
44	Cherokee	44	Pontotoc
45	Haskell	45	Delaware
46	Le Flore	46	Love
47	Creek	47	Nowata
48	Lincoln	48	Bryan
49	Pawnee	49	Creek
50	Muskogee	50	Blaine
51	Ottawa	51	Johnston
52	Okfuskee	52	Marshall
53	Craig	53	Latimer
54	Atoka	54	Kay
55	Okmulgee	55	Mayes
56	Sequoyah	56	Comanche
57	Murray	57	Caddo
58	Pontotoc	58	Cherokee
59	Carter	59	Tillman
60	Jefferson	60	Muskogee
61	Caddo	61	Okfuskee
62	Pushmataha	62	Osage
63	Latimer	63	Ottawa
64	Garvin	64	Atoka
65	Coal	65	Okmulgee
66	Dewey	66	Le Flore
67	Johnston	67	Coal
68	Choctaw	68	Pawnee
69	McCurtain	69	McIntosh
70	Beckham	70	Seminole
71	McIntosh	71	Jefferson
72	Pittsburg	72	McCurtain
73	Harmon	73	Hughes
74	Love	74	Choctaw
75	Kiowa	75	Sequoyah
76	Greer	76	Pushmataha
77	Seminole	77	Adair

2012 County Health Rankings: Measures, Data Sources, and Years of Data

	Measure	Data Source	Years of Data
LIFALTU OUTCOMES	IVICASUI C	Data Julice	rears or Data
HEALTH OUTCOMES			
Mortality	Premature death	National Center for Health Statistics	2006-2008
Morbidity	Poor or fair health	Behavioral Risk Factor Surveillance System	2004-2010
	Poor physical health days	Behavioral Risk Factor Surveillance System	2004-2010
	Poor mental health days	Behavioral Risk Factor Surveillance System	2004-2010
	Low birthweight	National Center for Health Statistics	2002-2008
HEALTH FACTORS			
HEALTH BEHAVIORS			
Tobacco Use	Adult smoking	Behavioral Risk Factor Surveillance System	2004-2010
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	2004-2010
	Motor vehicle crash death rate	National Center for Health Statistics	2002-2008
Sexual Activity	Sexually transmitted infections	National Center for Hepatitis, HIV, STD and TB Prevention	2009
	Teen birth rate	National Center for Health Statistics	2002-2008
CLINICAL CARE			
Access to Care	Uninsured	Small Area Health Insurance Estimates	2009
	Primary care physicians	Health Resources & Services Administration	2009
Quality of Care	Preventable hospital stays	Medicare/Dartmouth Institute	2009
	Diabetic screening	Medicare/Dartmouth Institute	2009
	Mammography screening	Medicare/Dartmouth Institute	2009
SOCIAL AND ECONOMIC	FACTORS		
Education	High school graduation	National Center for Education Statistics and state-specific sources ¹	2008-2010
	Some college	American Community Survey	2006-2010
Employment	Unemployment	Bureau of Labor Statistics	2010
Income	Children in poverty	Small Area Income and Poverty Estimates	2010
Family and Social	Inadequate social support	Behavioral Risk Factor Surveillance System	2006-2010
Support	Children in single-parent households	American Community Survey	2006-2010
Community Safety	Violent crime rate ²	Federal Bureau of Investigation	2007-2009
PHYSICAL ENVIRONMEN	NT		
Environmental Quality ³	Air pollution-particulate matter days	U.S. Environmental Protection Agency	2007
,	Air pollution-ozone days	U.S. Environmental Protection Agency	2007
Built Environment	Access to recreational facilities	Census County Business Patterns	2009
	Limited access to healthy foods ⁴	U.S. Department of Agriculture	2006
	Fast food restaurants	Census County Business Patterns	2009

 $^{^{\}rm 1}~$ NCES used for AK, AL, AR, CA, CT, FL, HI, ID, KY, MT, ND, NJ, OK, SD and TN

² State data source for IL.

³ Not available for AK and HI.

⁴ Access to Healthy Foods (2009) from Census Zip Code Business Patterns for AK and HI.

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