

2013 Rankings West Virginia





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. You can also take advantage of the Using the Rankings Data guide to help you explore the data and figure out more about what is driving your community's health. To learn about what you can do to improve health in your community, visit the Roadmaps to Health Action Center. Finally, you can learn what others are doing by reading Communities Stories and visiting the Project Showcase.

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.

The County Health Roadmaps 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 (RWJF) collaborates with the University of Wisconsin Population Health Institute (UWPHI) 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 guidance on strategies to improve health.

Roadmaps to Health Community Grants

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

RWJF 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. As of February 2013, RWJF has awarded partner grants to United Way Worldwide, National Business Coalition on Health, and National Association of Counties.

RWJF Roadmaps to Health Prize

In February 2013, RWJF awarded the first RWJF Roadmaps to Health Prizes of \$25,000 to six communities that are working to become healthier places to live, learn, work and play. The RWJF 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.



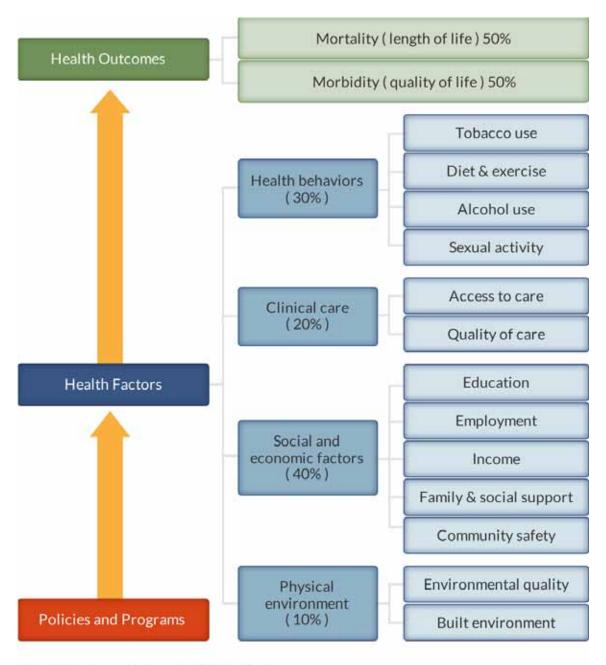
Roadmaps to Health Action Center

The Roadmaps to Health Action Center, based at UWPHI, provides tools and guidance to help groups working to make their communities healthier places. The Action Center website provides guidance on developing strategies and advocacy efforts to advance pro-health policies, opportunities for ongoing learning, and a searchable database of evidence-informed policies and programs focused on health improvement: What Works for Health. Action Center staff provide customized consultation via email and telephone to those seeking more information about how to improve health. Coaching, including possible on-site visits, is also available for 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 2013 County Health Rankings report ranks West Virginia 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.

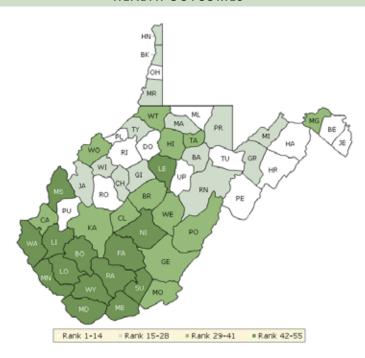


County Health Rankings model @2012 UWPHI

The maps on this page and the next display West Virginia'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

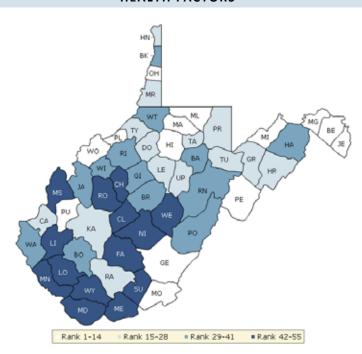
summary rankings. The green map shows the distribution of summary health outcomes. The blue displays the distribution of the summary rank for health factors.

HEALTH OUTCOMES



County	Rank	County	Rank	County	Rank	County	Rank
Barbour	25	Hancock	16	Mineral	19	Ritchie	11
Berkeley	14	Hardy	10	Mingo	53	Roane	13
Boone	51	Harrison	34	Monongalia	1	Summers	46
Braxton	31	Jackson	27	Monroe	36	Taylor	30
Brooke	23	Jefferson	4	Morgan	33	Tucker	6
Cabell	41	Kanawha	37	Nicholas	44	Tyler	17
Calhoun	26	Lewis	43	Ohio	12	Upshur	8
Clay	39	Lincoln	48	Pendleton	2	Wayne	49
Doddridge	3	Logan	52	Pleasants	7	Webster	40
Fayette	47	Marion	20	Pocahontas	38	Wetzel	29
Gilmer	24	Marshall	15	Preston	18	Wirt	22
Grant	21	Mason	42	Putnam	9	Wood	32
Greenbrier	35	McDowell	55	Raleigh	45	Wyoming	54
Hampshire	5	Mercer	50	Randolph	28		

HEALTH FACTORS



County	Rank	County	Rank	County	Rank	County	Rank
Barbour	33	Hancock	25	Mineral	10	Ritchie	32
Berkeley	13	Hardy	24	Mingo	53	Roane	51
Boone	40	Harrison	7	Monongalia	1	Summers	46
Braxton	31	Jackson	29	Monroe	6	Taylor	16
Brooke	30	Jefferson	3	Morgan	8	Tucker	22
Cabell	19	Kanawha	18	Nicholas	42	Tyler	21
Calhoun	54	Lewis	27	Ohio	4	Upshur	15
Clay	49	Lincoln	50	Pendleton	9	Wayne	37
Doddridge	17	Logan	52	Pleasants	5	Webster	47
Fayette	44	Marion	12	Pocahontas	36	Wetzel	38
Gilmer	41	Marshall	20	Preston	26	Wirt	34
Grant	28	Mason	45	Putnam	2	Wood	14
Greenbrier	11	McDowell	55	Raleigh	23	Wyoming	48
Hampshire	39	Mercer	43	Randolph	35		

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.

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Rank 1	Health Outcomes	Rank 1	Health Factors Monongalia
2	Monongalia	2	Putnam
	Pendleton		
3	Doddridge	3	Jefferson
	Jefferson		Ohio
5	Hampshire	5	Pleasants
6	Tucker	6	Monroe
7	Pleasants	7	Harrison
8	Upshur	8	Morgan
9	Putnam	9	Pendleton
10	Hardy	10	Mineral
11	Ritchie	11	Greenbrier
12	Ohio	12	Marion
13	Roane	13	Berkeley
14	Berkeley	14	Wood
15	Marshall	15	Upshur
16	Hancock	16	Taylor
17	Tyler	17	Doddridge
18	Preston	18	Kanawha
19	Mineral	19	Cabell
20	Marion	20	Marshall
21	Grant	21	Tyler
22	Wirt	22	Tucker
23	Brooke	23	Raleigh
24	Gilmer	24	Hardy
25	Barbour	25	Hancock
26	Calhoun	26	Preston
27	Jackson	27	Lewis
28	Randolph	28	Grant
29	Wetzel	29	Jackson
30	Taylor	30	Brooke
31	Braxton	31	Braxton
32	Wood	32	Ritchie
33	Morgan	33	Barbour
34	Harrison	34	Wirt
35	Greenbrier	35	Randolph
36	Monroe	36	Pocahontas
37	Kanawha	37	Wayne
38	Pocahontas	38	Wetzel
39	Clay	39	Hampshire
40	Webster	40	Boone
41	Cabell	41	Gilmer
42	Mason	42	Nicholas

Rank	Health Outcomes	Rank	Health Factors
43	Lewis	43	Mercer
44	Nicholas	44	Fayette
45	Raleigh	45	Mason
46	Summers	46	Summers
47	Fayette	47	Webster
48	Lincoln	48	Wyoming
49	Wayne	49	Clay
50	Mercer	50	Lincoln
51	Boone	51	Roane
52	Logan	52	Logan
53	Mingo	53	Mingo
54	Wyoming	54	Calhoun
55	McDowell	55	McDowell

2013 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	2008-2010
Morbidity	Poor or fair health	Behavioral Risk Factor Surveillance System	2005-2011
	Poor physical health days	Behavioral Risk Factor Surveillance System	2005-2011
	Poor mental health days	Behavioral Risk Factor Surveillance System	2005-2011
	Low birthweight	National Center for Health Statistics	2004-2010
HEALTH FACTORS			
HEALTH BEHAVIORS			
Tobacco Use	Adult smoking	Behavioral Risk Factor Surveillance System	2005-2011
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	2005-2011
	Motor vehicle crash death rate	National Center for Health Statistics	2004-2010
Sexual Activity	Sexually transmitted infections	National Center for HIV/AIDS, Viral Hepatitis, STD, and TB prevention	2010
	Teen birth rate	National Center for Health Statistics	2004-2010
CLINICAL CARE			
Access to Care	Uninsured	Small Area Health Insurance Estimates	2010
	Primary care physicians	HRSA Area Resource File	2011-2012
	Dentists	HRSA Area Resource File	2011-2012
Quality of Care	Preventable hospital stays	Medicare/Dartmouth Institute	2010
	Diabetic screening	Medicare/Dartmouth Institute	2010
	Mammography screening	Medicare/Dartmouth Institute	2010
SOCIAL AND ECONOMIC	FACTORS		
Education	High school graduation	Primarily state-specific sources, supplemented with National Center for Education Statistics	State-specific
	Some college	American Community Survey	2007-2011
Employment	Unemployment	Bureau of Labor Statistics	2011
Income	Children in poverty	Small Area Income and Poverty Estimates	2011
Family and Social	Inadequate social support	Behavioral Risk Factor Surveillance System	2005-2010
Support	Children in single-parent households	American Community Survey	2007-2011
Community Safety	Violent crime rate	Federal Bureau of Investigation	2008-2010
PHYSICAL ENVIRONMEN	т		
Environmental Quality	Daily fine particulate matter ¹	CDC WONDER Environmental data	2008
	Drinking water safety	Safe Drinking Water Information System	FY 2012
Built Environment	Access to recreational facilities	Census County Business Patterns	2010
	Limited access to healthy foods	USDA Food Environment Atlas	2012
	Fast food restaurants	Census County Business Patterns	2010

¹ Not available for AK and HI.

⁸ www.countyhealthrankings.org/west-virginia

CREDITS

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