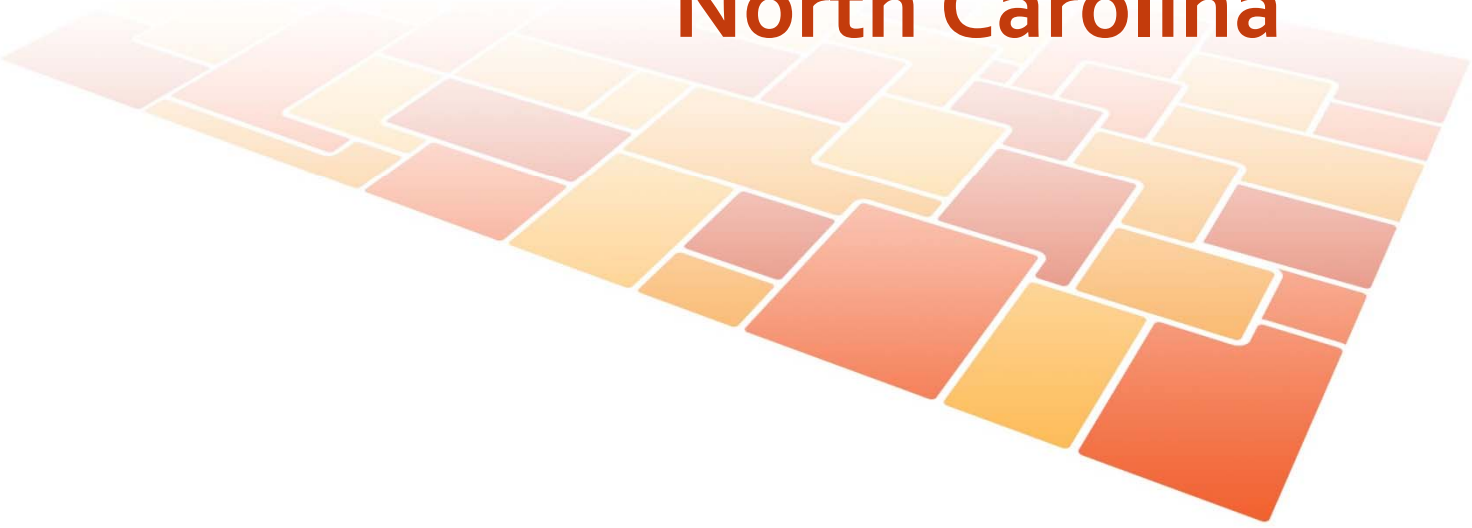
County Health Rankings & Roadmaps

Building a Culture of Health, County by County

A Robert Wood Johnson Foundation program

2016 *County Health Rankings*

North Carolina



A collaboration between the Robert Wood Johnson Foundation and the University of Wisconsin Population Health Institute.

University of Wisconsin Population Health Institute
SCHOOL OF MEDICINE AND PUBLIC HEALTH

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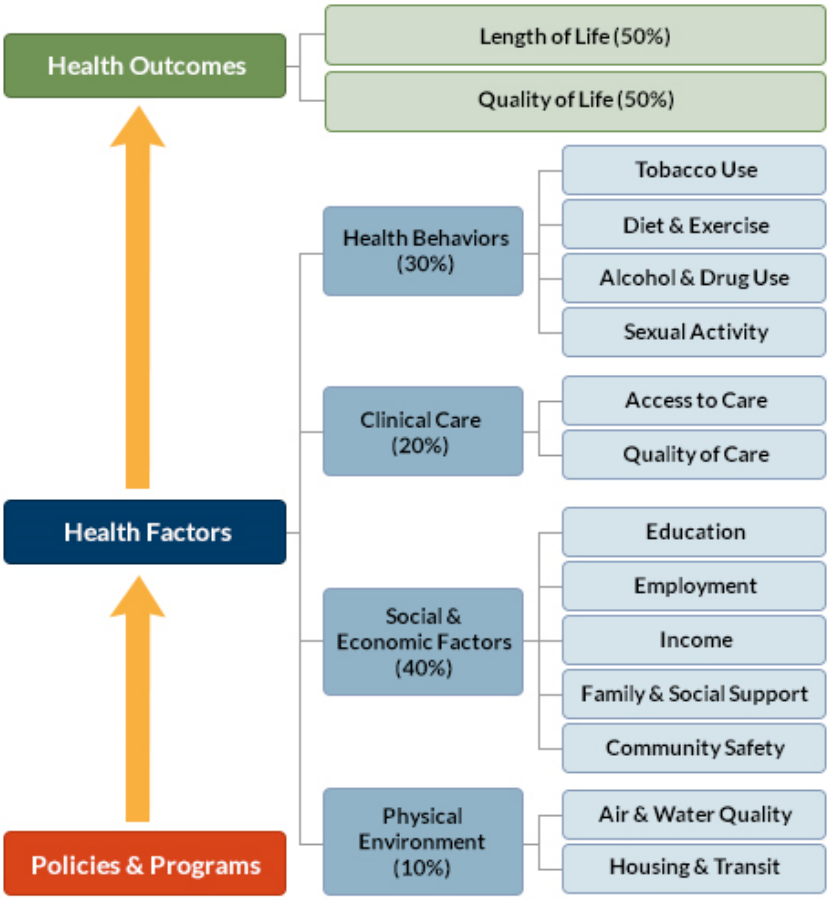
INTRODUCTION

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**, 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.

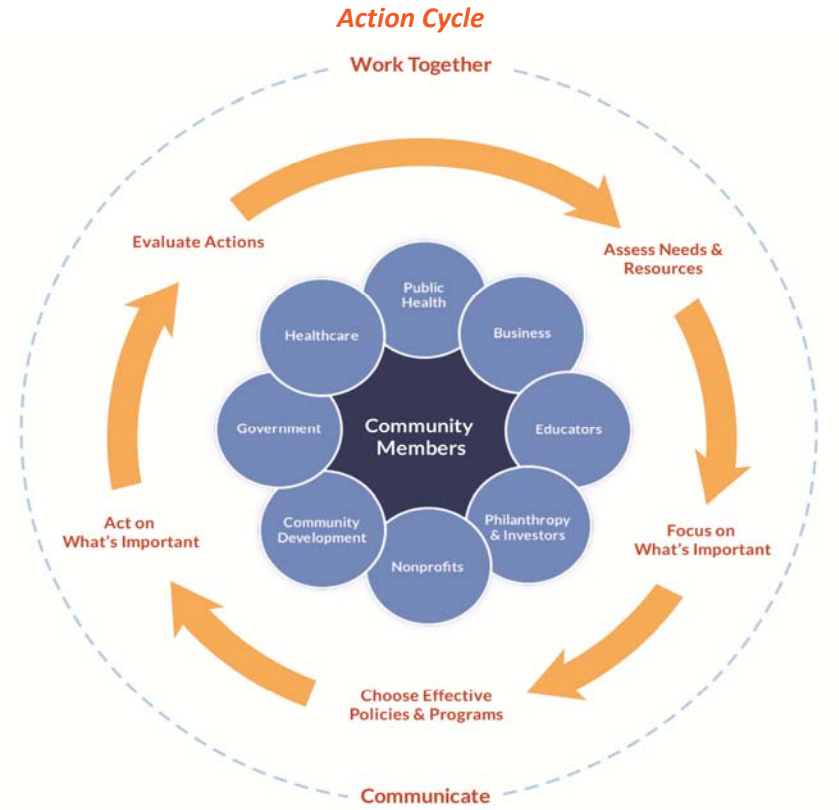
To further explore health gaps and other data sources in your community, check out the feature to find more data for your state and dig deeper on differences in health factors by geography or by population sub-groups. Visit countyhealthrankings.org/using-the-rankings-data.

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



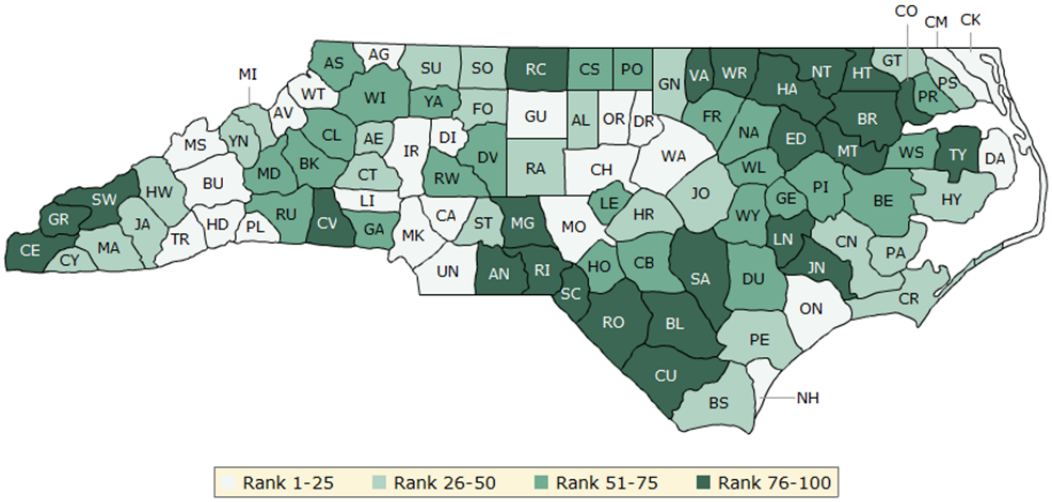
HOW CAN YOU GET INVOLVED?

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 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 North Carolina'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**.

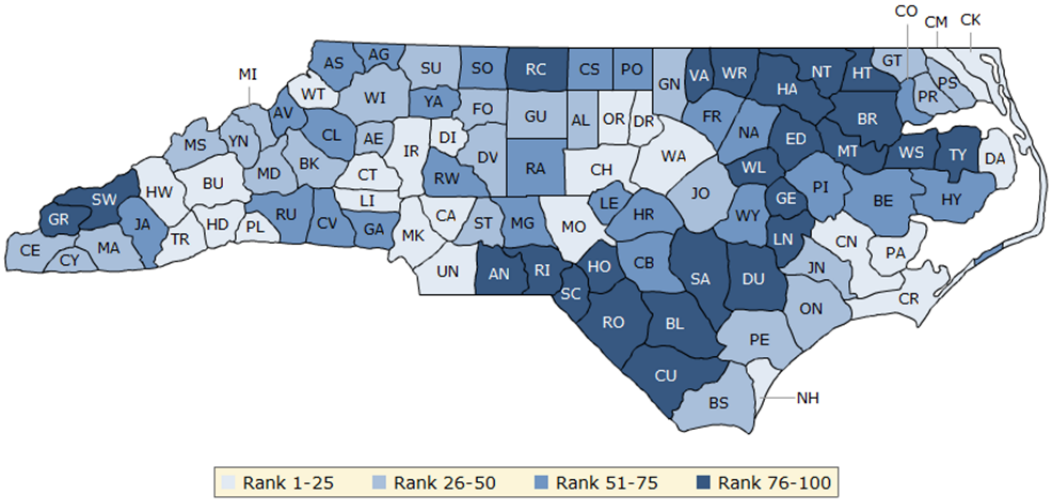


County	Rank	County	Rank	County	Rank	County	Rank
Alamance	48	Cumberland	75	Johnston	28	Randolph	47
Alexander	32	Currituck	10	Jones	82	Richmond	90
Alleghany	20	Dare	7	Lee	70	Robeson	100
Anson	94	Davidson	55	Lenoir	85	Rockingham	77
Ashe	60	Davie	18	Lincoln	24	Rowan	74
Avery	19	Duplin	62	Macon	40	Rutherford	73
Beaufort	71	Durham	15	Madison	11	Sampson	78
Bertie	86	Edgecombe	95	Martin	83	Scotland	99
Bladen	91	Forsyth	43	McDowell	56	Stanly	37
Brunswick	45	Franklin	54	Mecklenburg	5	Stokes	38
Buncombe	17	Gaston	67	Mitchell	31	Surry	46
Burke	51	Gates	26	Montgomery	79	Swain	92
Cabarrus	13	Graham	88	Moore	23	Transylvania	16
Caldwell	69	Granville	35	Nash	65	Tyrrell	87
Camden	4	Greene	68	New Hanover	14	Union	3
Carteret	27	Guilford	21	Northampton	93	Vance	98
Caswell	64	Halifax	97	Onslow	25	Wake	1
Catawba	34	Harnett	49	Orange	2	Warren	81
Chatham	8	Haywood	39	Pamlico	29	Washington	52
Cherokee	84	Henderson	12	Pasquotank	44	Watauga	6
Chowan	76	Hertford	89	Pender	33	Wayne	61
Clay	41	Hoke	66	Perquimans	53	Wilkes	63
Cleveland	80	Hyde	50	Person	57	Wilson	72
Columbus	96	Iredell	22	Pitt	59	Yadkin	58
Craven	36	Jackson	30	Polk	9	Yancey	42

HOW DO COUNTIES RANK FOR HEALTH FACTORS?

The blue map displays North Carolina'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**



County	Rank	County	Rank	County	Rank	County	Rank
Alamance	40	Cumberland	70	Johnston	47	Randolph	55
Alexander	33	Currituck	19	Jones	41	Richmond	95
Alleghany	51	Dare	17	Lee	64	Robeson	100
Anson	89	Davidson	35	Lenoir	77	Rockingham	80
Ashe	56	Davie	13	Lincoln	24	Rowan	68
Avery	52	Duplin	86	Macon	39	Rutherford	75
Beaufort	62	Durham	15	Madison	29	Sampson	82
Bertie	83	Edgecombe	97	Martin	79	Scotland	99
Bladen	94	Forsyth	34	McDowell	46	Stanly	27
Brunswick	31	Franklin	58	Mecklenburg	12	Stokes	54
Buncombe	7	Gaston	67	Mitchell	48	Surry	38
Burke	43	Gates	45	Montgomery	73	Swain	93
Cabarrus	9	Graham	81	Moore	14	Transylvania	8
Caldwell	65	Granville	44	Nash	61	Tyrrell	85
Camden	4	Greene	78	New Hanover	10	Union	3
Carteret	18	Guilford	26	Northampton	87	Vance	98
Caswell	72	Halifax	96	Onslow	28	Wake	2
Catawba	25	Harnett	74	Orange	1	Warren	92
Chatham	5	Haywood	22	Pamlico	23	Washington	84
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Columbus	88	Iredell	16	Pitt	57	Yadkin	53
Craven	21	Jackson	63	Polk	11	Yancey	30

2016 *COUNTY HEALTH RANKINGS*: MEASURES AND NATIONAL/STATE RESULTS

Measure	Description	US Median	State Overall	State Minimum	State Maximum
HEALTH OUTCOMES					
Premature death	Years of potential life lost before age 75 per 100,000 population	7,700	7,200	4,500	12,000
Poor or fair health	% of adults reporting fair or poor health	16%	19%	13%	29%
Poor physical health days	Average # of physically unhealthy days reported in past 30 days	3.7	3.9	3.2	5.6
Poor mental health days	Average # of mentally unhealthy days reported in past 30 days	3.7	3.7	3.3	4.9
Low birthweight	% of live births with low birthweight (< 2500 grams)	8%	9%	6%	14%
HEALTH FACTORS					
HEALTH BEHAVIORS					
Adult smoking	% of adults who are current smokers	18%	19%	15%	29%
Adult obesity	% of adults that report a BMI ≥ 30	31%	29%	20%	39%
Food environment index	Index of factors that contribute to a healthy food environment, (0-10)	7.2	6.7	4.1	8.2
Physical inactivity	% of adults aged 20 and over reporting no leisure-time physical activity	28%	25%	15%	35%
Access to exercise opportunities	% of population with adequate access to locations for physical activity	62%	75%	6%	100%
Excessive drinking	% of adults reporting binge or heavy drinking	17%	15%	10%	19%
Alcohol-impaired driving deaths	% of driving deaths with alcohol involvement	31%	33%	0%	56%
Sexually transmitted infections	# of newly diagnosed chlamydia cases per 100,000 population	287.7	496.5	40.6	1,114.0
Teen births	# of births per 1,000 female population ages 15-19	40	39	9	70
CLINICAL CARE					
Uninsured	% of population under age 65 without health insurance	17%	18%	14%	26%
Primary care physicians	Ratio of population to primary care physicians	1,990:1	1,410:1	11,650:1	550:1
Dentists	Ratio of population to dentists	2,590:1	1,910:1	12,900:1	530:1
Mental health providers	Ratio of population to mental health providers	1,060:1	440:1	11,570:1	160:1
Preventable hospital stays	# of hospital stays for ambulatory-care sensitive conditions per 1,000 Medicare enrollees	60	51	26	99
Diabetic monitoring	% of diabetic Medicare enrollees ages 65-75 that receive HbA1c monitoring	85%	89%	48%	94%
Mammography screening	% of female Medicare enrollees ages 67-69 that receive mammography screening	61%	68%	54%	83%
SOCIAL AND ECONOMIC FACTORS					
High school graduation	% of ninth-grade cohort that graduates in four years	86%	83%	65%	93%
Some college	% of adults ages 25-44 with some post-secondary education	56%	65%	26%	80%
Unemployment	% of population aged 16 and older unemployed but seeking work	6.0%	6.1%	4.4%	12.9%
Children in poverty	% of children under age 18 in poverty	23%	24%	13%	47%
Income inequality	Ratio of household income at the 80th percentile to income at the 20th percentile	4.4	4.8	2.9	7.8
Children in single-parent households	% of children that live in a household headed by a single parent	32%	36%	20%	74%
Social associations	# of membership associations per 10,000 population	13.0	11.7	6.6	28.0
Violent crime	# of reported violent crime offenses per 100,000 population	199	355	70	819
Injury deaths	# of deaths due to injury per 100,000 population	74	63	36	119
PHYSICAL ENVIRONMENT					
Air pollution – particulate matter	Average daily density of fine particulate matter in micrograms per cubic meter (PM2.5)	11.9	12.3	11.4	13.4
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%	17%	11%	28%
Driving alone to work	% of workforce that drives alone to work	80%	81%	63%	91%
Long commute – driving alone	Among workers who commute in their car alone, % commuting > 30 minutes	29%	31%	17%	61%

2016 COUNTY HEALTH RANKINGS: DATA SOURCES AND YEARS OF DATA

	Measure	Data Source	Years of Data
HEALTH OUTCOMES			
Length of Life	Premature death	National Center for Health Statistics – Mortality files	2011-2013
Quality of Life	Poor or fair health	Behavioral Risk Factor Surveillance System	2014
	Poor physical health days	Behavioral Risk Factor Surveillance System	2014
	Poor mental health days	Behavioral Risk Factor Surveillance System	2014
	Low birthweight	National Center for Health Statistics – Natality files	2007-2013
HEALTH FACTORS			
HEALTH BEHAVIORS			
Tobacco Use	Adult smoking	Behavioral Risk Factor Surveillance System	2014
Diet and Exercise	Adult obesity	CDC Diabetes Interactive Atlas	2012
	Food environment index	USDA Food Environment Atlas, Map the Meal Gap	2013
	Physical inactivity	CDC Diabetes Interactive Atlas	2012
	Access to exercise opportunities	Business Analyst, Delorme map data, ESRI, & US Census Tigerline Files	2010 & 2014
Alcohol and Drug Use	Excessive drinking	Behavioral Risk Factor Surveillance System	2014
	Alcohol-impaired driving deaths	Fatality Analysis Reporting System	2010-2014
Sexual Activity	Sexually transmitted infections	National Center for HIV/AIDS, Viral Hepatitis, STD, and TB Prevention	2013
	Teen births	National Center for Health Statistics - Natality files	2007-2013
CLINICAL CARE			
Access to Care	Uninsured	Small Area Health Insurance Estimates	2013
	Primary care physicians	Area Health Resource File/American Medical Association	2013
	Dentists	Area Health Resource File/National Provider Identification file	2014
	Mental health providers	CMS, National Provider Identification file	2015
Quality of Care	Preventable hospital stays	Dartmouth Atlas of Health Care	2013
	Diabetic monitoring	Dartmouth Atlas of Health Care	2013
	Mammography screening	Dartmouth Atlas of Health Care	2013
SOCIAL AND ECONOMIC FACTORS			
Education	High school graduation	EDFacts	2012-2013
	Some college	American Community Survey	2010-2014
Employment	Unemployment	Bureau of Labor Statistics	2014
Income	Children in poverty	Small Area Income and Poverty Estimates	2014
	Income inequality	American Community Survey	2010-2014
Family and Social Support	Children in single-parent households	American Community Survey	2010-2014
	Social associations	County Business Patterns	2013
Community Safety	Violent crime	Uniform Crime Reporting – FBI	2010-2012
	Injury deaths	CDC WONDER mortality data	2009-2013
PHYSICAL ENVIRONMENT			
Air and Water Quality	Air pollution - particulate matter [1]	CDC WONDER environmental data	2011
	Drinking water violations	Safe Drinking Water Information System	FY2013-14
Housing and Transit	Severe housing problems	Comprehensive Housing Affordability Strategy (CHAS) data	2008-2012
	Driving alone to work	American Community Survey	2010-2014
	Long commute – driving alone	American Community Survey	2010-2014

[1] 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

Bridget Catlin, PhD, MHSA
Amanda Jovaag, MS
Marjory Givens, PhD, MSPH
Julie Willems Van Dijk, PhD, RN

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Keith Gennuso, PhD
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Elizabeth Pollock
Jennifer Robinson
Matthew Rodock, MPH

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Burness
Mary Bennett, MFA
Matthew Call
Megan Garske
Kitty Jerome, MA
Kate Konkle, MPH
Jan O'Neill, MPA

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Andrea Ducas, MPH
Michelle Larkin, JD, MS, RN
James Marks, MD, MPH
Joe Marx
Donald Schwarz, MD, MPH
Amy Slonim, PhD
Kathryn Wehr, MPH

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