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County Health Rankings & Roadmaps

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Abstract

County Health Rankings & Roadmaps, a collaboration between the Robert Wood Johnson Foundation and the University of Wisconsin Population Health Institute, provides data, evidence, guidance, and examples that youth development professionals can use in their work to improve community health and well-being. The Rankings use a population health model to describe the multiple factors that contribute to health and equity. The information and resources available at the County Health Rankings & Roadmaps website is useful to youth development organization leaders, as it provides guidance for taking action to improve the well-being of youth and communities. Key resources available at <u>www.countyealthrankings.org</u> are discussed.

Key words: population health, rankings, wellbeing, data, community improvement

Background

Health is more than what happens at the doctor's office. Health is about where people live, learn, work, and play. Youth development is influenced by personal, family, peer, community, social, and cultural factors, all of which play a significant role in current and future well-being. Important determinants of health include wealth and income inequality, access to education, safe schools, and supportive families, along with positive peer and mentor relationships to help guide youth in their transition to adulthood (Viner et al., 2012). Urie Bronfenbrenner's ecological framework for human development (Bronfenbrenner, 1979), with which many youth development practitioners are familiar, also focuses on understanding an individual's growth within the entire ecological system, including family, peers, community, local policy environment, culture, and customs.

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County Health Rankings & Roadmaps

For nearly a decade, County Health Rankings & Roadmaps (CHR&R), a collaboration between the University of Wisconsin Population Health Institute and the Robert Wood Johnson Foundation (RWJF), has shown that where people live makes a difference to how well and how long they live. CHR&R's work is rooted in a deep belief that everyone should have a fair and just opportunity to be as healthy as possible, regardless of where they live or the circumstances they were born into.

County Health Rankings

By ranking the health of nearly every county in the nation, the County Health Rankings help leaders, practitioners, and community members understand what influences the health of all residents and identify challenges and opportunities to improve these outcomes for everyone. The Rankings are guided by a model of population health (shown in Figure 1) that combines more than 30 measures collected from a variety of national data sources. The annual data snapshots illustrate how healthy residents in a county are and illuminate where to focus improvement efforts.

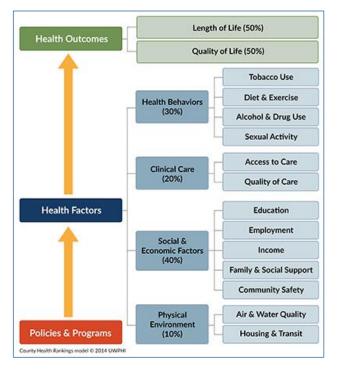


Figure 1. Population Health Model Used by County Health Rankings

Source: County Health Rankings model © 2014, University of Wisconsin Population Health Institute.

County Health Rankings & Roadmaps

Key Findings Reports

The County Health Rankings Key Findings Reports (University of Wisconsin Population Health Institute, 2017, 2018) highlight analyses that show meaningful health gaps persist not only by place, but also among racial and ethnic groups across the nation. These gaps are largely the result of differences in opportunities in the places where we live, and illustrate the context in which many youth learn and grow. Some of the key findings from the 2017 and 2018 reports included:

- More than 1 out of every 5 youth in the bottom performing counties do not graduate from high school in four years. For American Indian/Alaskan Native, Black, and Hispanic youth, it is 1 out of 4.
- Child poverty rates remain at levels higher than those of the pre-recession era despite declines in recent years, especially in rural counties and those counties with higher percentages of people of color.
- Residential segregation of Blacks and Whites is considered to be a fundamental cause of health disparities in the United States. Black children and youth in more segregated counties fare worse in rates of child poverty and high school graduation than those in less segregated counties. White residents do not.
- Approximately 4.9 million youth and young adults (age 16-24) are not connected to school or work. Youth disconnection is most prevalent among American Indian/Alaskan Native, Black, and Hispanic youth. Rates of youth disconnection are higher in rural counties than in urban counties.

Taking Action

The Rankings begin to tell the story of gaps in opportunity. But that is not the complete picture. Each of the areas measured is modifiable and the Rankings are a starting point to pivot from data to action. CHR&R provides a range of evidence and information to help guide changemakers, including the following.

What Works for Health

The What Works for Health database provides evidence summaries for nearly 400 policies, programs, and system changes that communities can use to guide their actions. The resource also rates strategies for their likelihood of reducing an opportunity gap—disparities linked to racial/ethnic, socioeconomic, geographic, or other characteristics.

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Action Center and Partner Center

CHR&R offers guidance for organizing and implementing change efforts. The Action Center provides step-by-step direction to help leaders, practitioners, and community members work together to assess their needs, drive local policy and systems changes, and evaluate the impacts of their improvement efforts. Additionally, the Partner Center helps changemakers in all sectors identify how they can connect and leverage their collective power when putting ideas into action.

RWJF Culture of Health Prize

The annual RWJF Culture of Health Prize competition recognizes communities that have placed a priority on health. Prize communities serve as examples of how collective action focused on the many factors that influence health can create opportunities and conditions for everyone to live the healthiest life possible.

Using CHR&R Data, Evidence, Guidance, and Examples

Due to data limitations, CHR&R is not able to provide analyses by age or examine measures at the city or neighborhood level. However, the county snapshots offer a starting point for local coalitions, policymakers, and researchers and serve as a guide for where to look further. Improving community health starts with understanding the data, and creating sustainable policy and systems changes requires working in partnership with multiple stakeholders. For youth development practitioners, the resources offered by CHR&R can help inform where and how to take action to improve the health and well-being of youth and communities. For example, Well Connected Communities—an initiative of Cooperative Extension System and National 4-H Council supported by RWJF—referred grant applicants to CHR&R as a source for county-level data to demonstrate need and opportunity, and has partnered with CHR&R community coaches to provide guidance to community health councils on developing action plans. Other communities have used CHR&R resources to advocate for change with policymakers, educate and recruit multi-sector partners to address the many factors that contribute to health, guide implementation of evidence-informed policies and practices, show urgency in addressing persistent gaps in opportunity, and catalyze engagement of people experiencing poor health outcomes, including youth and young adults.

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For more information, go to <u>www.countyhealthrankings.org</u>.

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