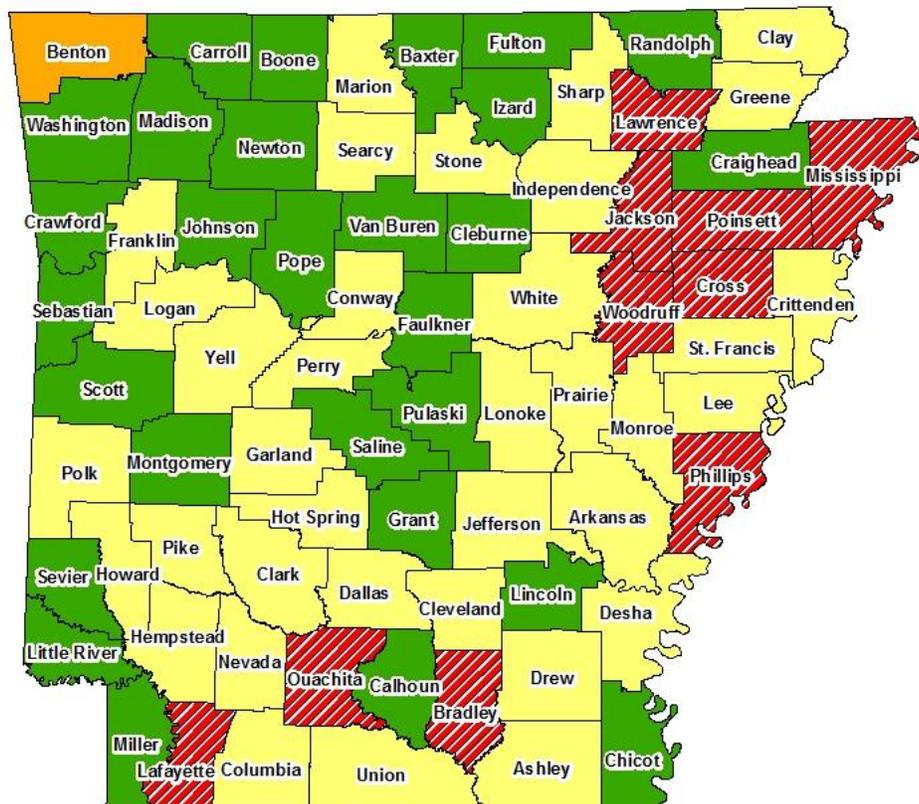


# Red County

# Comprehensive Report

# County Life Expectancy Profile

# 2015



**Office of Minority Health & Health Disparities**  
**Arkansas Department of Health**

**Arkansas Minority Health Commission**

In Accordance with Act 790 and Act 798 of 2011



# **Red County**

# **Comprehensive Report**

# **County Life Expectancy Profile**

# **2015**

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# EXECUTIVE SUMMARY

This report is prepared in accordance with the 2011 Arkansas Act 790<sup>1</sup> to define Arkansas “Red Counties.” Ten counties were defined and ranked as “Red Counties” in 2015. This report assists the Red County Action Planning Committee in continuing interventions in the “Red Counties.”

## Key Findings

- Arkansas ranked 48<sup>th</sup> (1<sup>st</sup> being the best) in the *America’s Health Rankings 2015 Annual Report*,<sup>2</sup> an annual assessment of the nation’s health on a state-by-state basis.
- The life expectancy in Arkansas has been consistently lower than the United States (U.S.). Arkansas ranked 47<sup>th</sup> in the U.S. in life expectancy in 2010<sup>3</sup> (1<sup>st</sup> being the best).
- The 2011 and 2013 life expectancies were 76.1 and 76.2 years for Arkansas compared to the 78.7 and 78.8 years for the U.S., respectively. In 2013, 50 out of the 75 (67%) county-specific life expectancies fell below the state’s average life expectancy.
- Benton County had the highest life expectancy of 79.8 years, 3.6 years higher than the state’s average, and was used as reference for comparison in this report for the 2013 life expectancy.
- Poinsett and Phillips Counties had the lowest life expectancy of 72.1 years in 2013, which is 4.1 years less than the state’s average and 7.7 years less than Benton County’s life expectancy.
- In 2013, the cutoffs generated one Gold County (79.1-80.0), 28 Green Counties (76.0-79.0), 36 Yellow Counties (74.0-75.9), and 10 Red Counties (<74.0).
- The 10 Red Counties of 2013 were Poinsett, Phillips, Cross, Mississippi, Lafayette, Ouachita, Bradley, Jackson, Woodruff, and Lawrence.
- A total of 41 counties gained life expectancy in 2013 compared to the 2011 life expectancy. The highest gain was 1.9 years in Fulton County.

# INTRODUCTION

According to the National Center for Health Statistics (NCHS), life expectancy at birth represents the average number of years that the members of a particular life table cohort can expect to live at the time of birth.<sup>4</sup>

While struggling to improve health outcomes at the state level, Arkansas also faces disparities in life expectancy at the county level. Concerned with the disparity, Senator Jack Crumbly (16<sup>th</sup> District) sponsored a bill in 2011 to designate counties with the lowest life expectancies in the state as Red Counties. The Red Counties were defined as counties where the life expectancy at birth ranged from six to ten years less than the county with the highest life expectancy.<sup>1</sup>

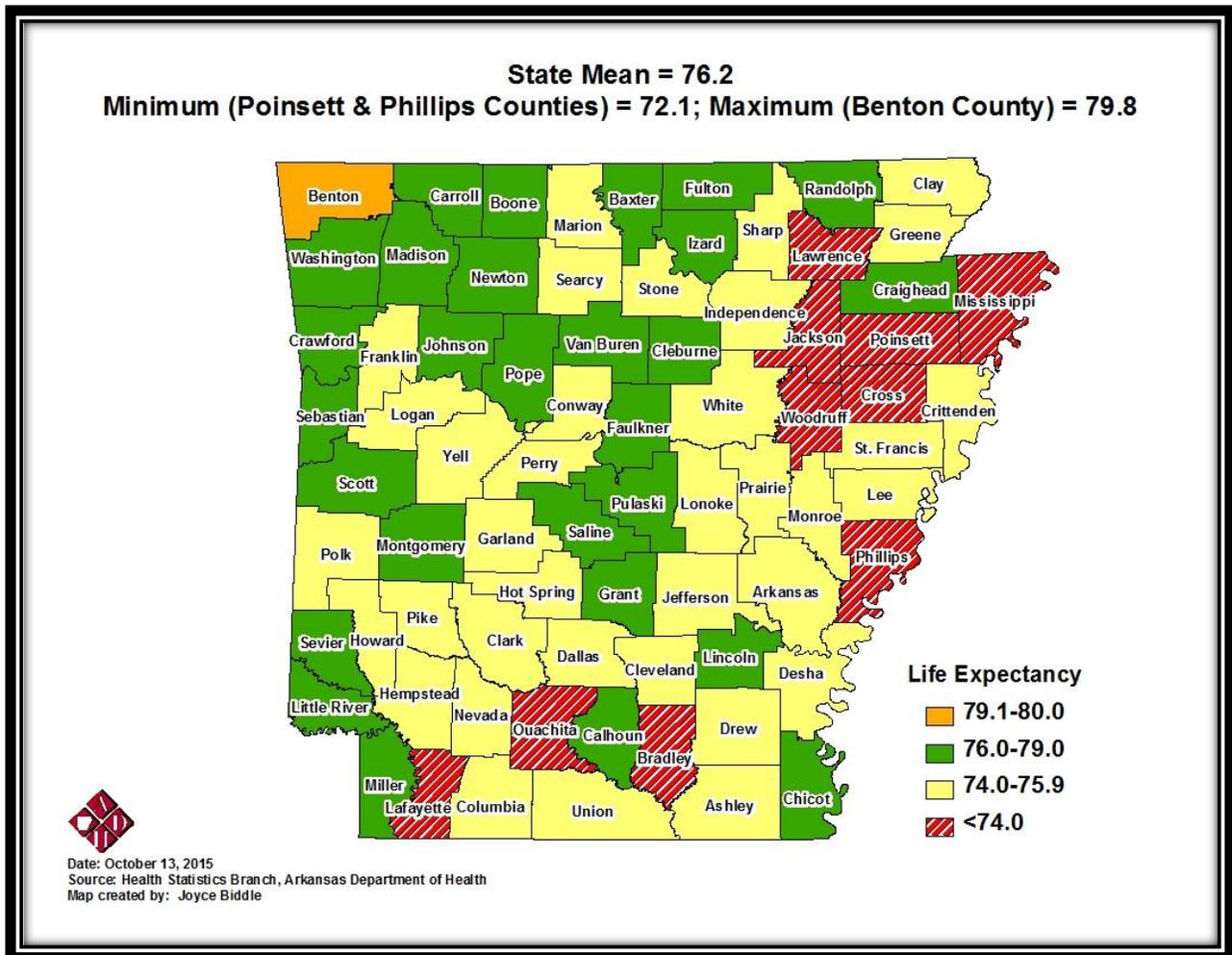
Acts 790<sup>1</sup> and 798<sup>5</sup> were passed in the Arkansas Legislature in 2011 to encourage state agencies and organizations to make appropriate services/programs available to improve public health in these counties. Following the directives of the legislation, the Red County Action Planning Committee (RCAPC) was formed in October 2012. Several agencies, including the Arkansas Department of Health (ADH), continue to work collaboratively with the RCAPC to plan and implement interventions in the 17 Red Counties identified from the 2008 data.

In the 2015 report, 10 Red Counties have been identified. Life expectancy was calculated using 2012-2014 Arkansas resident death data and 2013 Arkansas population estimates. For consistency, the same categories for defining life expectancy have been used each year within the Red County Reports using Gold, Green, Yellow, and Red as depicted in the map on page 5. The Gold category represents the county with the highest life expectancy and the Red category represents counties with the lowest life expectancies. The same categories were used to monitor changes in life expectancies over time within those ranges, i.e. the same cut-off points.

Ten Red County Profiles, as well as Benton County for comparison, were created using data on eight demographic characteristics and 30 health, social/economic and environmental factors. These data were obtained from the U.S. Census Bureau, the ADH, Centers for Disease Control and Prevention (CDC) Wonder, CDC Diabetes Interactive Atlas and the *County Health Rankings & Roadmaps*. The Red County Profiles will assist the readers in understanding the issues related to health outcomes and behaviors, access to care, socio-economic factors, and physical/environmental conditions in these counties that may directly or indirectly lead to premature death.

# 2013 LIFE EXPECTANCY AT BIRTH MAP

2012-2014 Death Data and 2013 Population Estimates  
In Accordance with Act 790 and Act 798 of 2011



## SUMMARY OF RESULTS

The following five tables (pp. 7-10) and two figures (pp. 11-12) illustrate the life expectancies in the U.S., state of Arkansas, and the 75 counties in Arkansas.

- Table 1 shows 2013 life expectancies at the national and state levels. Arkansas counties with the highest and lowest life expectancies are also shown.
  - While Arkansas's life expectancy was lower than the national average, Benton County, located in the northwest region of Arkansas, exceeded the national average.
  - Benton County had the highest life expectancy of 79.8 years.
  - Poinsett and Phillips Counties had the lowest life expectancy of 72.1 years, 7.7 years less than Benton County.
- Table 2 presents 2013 life expectancies of 28 Green Counties ranging from 76.0 to 78.4 years. Twenty-four Green Counties were identified in 2011.
- Table 3 presents 2013 life expectancies of 36 Yellow Counties ranging from 74.2 to 75.9 years. Thirty-six counties were identified as Yellow in 2011.
- Table 4 presents 2013 life expectancies of 10 Red Counties ranging from 72.1 to 73.9 years. Fourteen Red Counties were identified in 2011.
- Table 5 presents a comparison of 2011 and 2013 life expectancies by county.
  - A total of 41 counties gained life expectancy in 2013 ranging from as low as 0.1 year (Hempstead County) to a high of 1.9 years (Fulton County).
  - The life expectancies for 34 counties decreased ranging from 0.1 (Pope, Washington, Pulaski and Conway Counties) to 2.0 years (Pike County).
- Figure 1 presents life expectancy trends by gender and race for the state of Arkansas. There has been an increasing trend of life expectancy among black males and females as well as white males.
- Figure 2 presents life expectancy trends by gender and race for the 10 Red Counties combined. Life expectancies for black males and females have continued to rise during this time period, 2005-2013. Life expectancies for black and white females have become equal. Although life expectancies for black males have continued to rise, they are still below that of all race-gender groups.

# LIFE EXPECTANCY AT BIRTH BY COUNTY

Table 1: Comparing U.S., Arkansas State, and Arkansas Counties with the Highest and Lowest Life Expectancies

Location	Population 2013	Life Expectancy (Years)
United States	316,497,531	78.8
State of Arkansas	2,959,373	76.2
Benton County (highest life expectancy)	237,297	79.8
Phillips County (lowest life expectancy)	20,399	72.1
Poinsett County (lowest life expectancy)	24,145	72.1

Table 2: Green Counties Life Expectancies

County (n=28)	Population 2013	Life Expectancy (Years)
Washington	216,410	78.4
Saline	114,404	77.9
Newton	8,064	77.7
Carroll	27,808	77.5
Boone	37,396	77.4
Cleburne	25,686	77.4
Montgomery	9,226	77.2
Johnson	25,846	77.1
Van Buren	16,932	77.1
Faulkner	119,580	77.0
Scott	10,950	76.9
Little River	12,730	76.8
Fulton	12,304	76.8
Miller	43,402	76.8
Pope	62,547	76.7
Calhoun	5,241	76.7
Craighead	101,488	76.7
Izard	13,368	76.6
Madison	15,701	76.6
Baxter	40,957	76.5
Sevier	17,366	76.4
Sebastian	127,342	76.3
Grant	18,019	76.3
Pulaski	391,284	76.3
Randolph	17,692	76.1
Lincoln	14,031	76.1
Crawford	61,640	76.0
Chicot	11,335	76.0

Sources: U.S. Census Bureau; Health Statistics Branch, Arkansas Department of Health

# LIFE EXPECTANCY AT BIRTH BY COUNTY

Table 3: Yellow Counties Life Expectancies

County (n=36)	Population 2013	Life Expectancy (Years)
Prairie	8,374	75.9
Independence	36,997	75.9
Searcy	8,023	75.9
Drew	18,785	75.8
Hempstead	22,474	75.7
Lonoke	70,753	75.6
Cleveland	8,593	75.6
Dallas	7,933	75.6
Perry	10,345	75.5
St. Francis	27,260	75.4
Polk	20,406	75.4
Columbia	24,164	75.3
Howard	13,581	75.3
Stone	12,581	75.3
White	78,483	75.3
Garland	97,173	75.3
Clark	22,743	75.2
Conway	21,245	75.2
Marion	16,430	75.2
Sharp	17,049	75.1
Lee	10,015	75.0
Crittenden	49,746	75.0
Arkansas	18,777	74.9
Ashley	21,283	74.8
Logan	22,082	74.8
Hot Spring	33,500	74.7
Monroe	7,682	74.6
Yell	21,893	74.6
Greene	43,097	74.5
Pike	11,177	74.5
Desha	12,505	74.4
Franklin	18,034	74.4
Nevada	8,799	74.4
Clay	15,402	74.3
Jefferson	73,191	74.2
Union	40,694	74.2

Sources: U.S. Census Bureau; Health Statistics Branch, Arkansas Department of Health

# LIFE EXPECTANCY AT BIRTH BY COUNTY

**Table 4: Red Counties Life Expectancies**

<b>County (n=10)</b>	<b>Population 2013</b>	<b>Life Expectancy (Years)</b>
Lawrence	17,011	73.9
Woodruff	7,072	73.8
Jackson	17,615	73.8
Bradley	11,249	73.8
Ouachita	25,002	73.6
Lafayette	7,252	73.4
Mississippi	44,765	73.3
Cross	17,548	73.0
Phillips	20,399	72.1
Poinsett	24,145	72.1

Sources: U.S. Census Bureau; Health Statistics Branch, Arkansas Department of Health

# CHANGES IN LIFE EXPECTANCIES

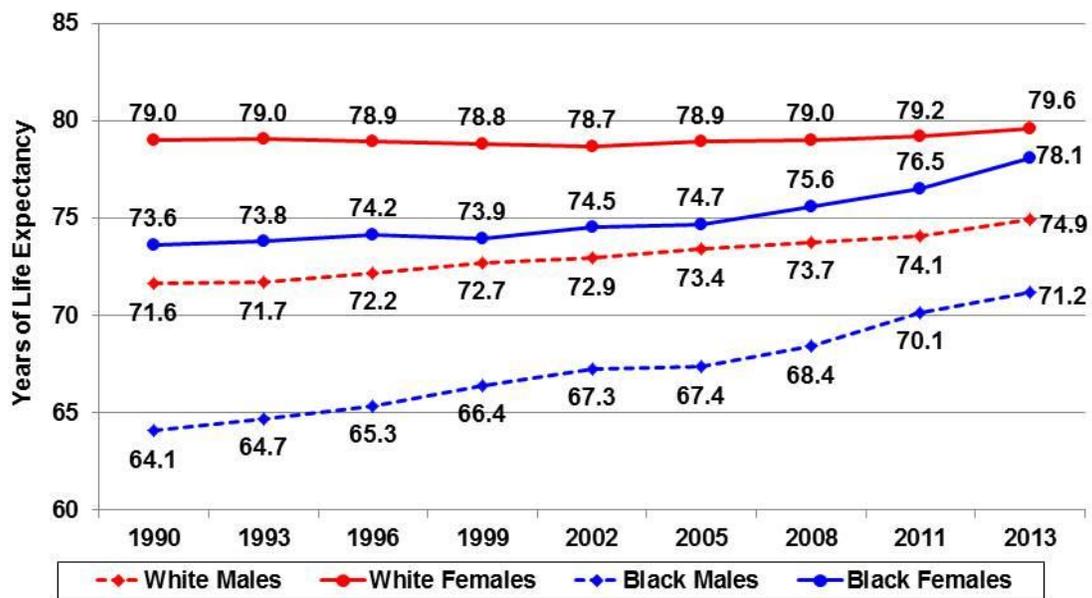
Table 5: Changes in Life Expectancies from 2011 to 2013

County	Life Expectancy (Years) 2011	Life Expectancy (Years) 2013	County	Life Expectancy (Years) 2011	Life Expectancy (Years) 2013
State Total	76.1	76.2	Perry	76.7	75.5
Benton	79.6	79.8	St. Francis	74.5	75.4
Washington	78.5	78.4	Polk	75.7	75.4
Saline	78.2	77.9	Columbia	74.6	75.3
Newton	76.2	77.7	Howard	74.0	75.3
Carroll	77.0	77.5	Stone	75.7	75.3
Boone	77.9	77.4	White	75.6	75.3
Cleburne	76.6	77.4	Garland	75.5	75.3
Montgomery	76.9	77.2	Clark	74.5	75.2
Johnson	76.3	77.1	Conway	75.3	75.2
Van Buren	77.7	77.1	Marion	76.5	75.2
Faulkner	77.3	77.0	Sharp	73.5	75.1
Scott	75.9	76.9	Lee	73.8	75.0
Little River	75.6	76.8	Crittenden	73.6	75.0
Fulton	74.9	76.8	Arkansas	73.7	74.9
Miller	75.0	76.8	Ashley	75.0	74.8
Pope	76.8	76.7	Logan	75.4	74.8
Calhoun	76.4	76.7	Hot Spring	75.7	74.7
Craighead	76.1	76.7	Monroe	75.1	74.6
Izard	75.8	76.6	Yell	75.2	74.6
Madison	77.0	76.6	Greene	74.7	74.5
Baxter	75.9	76.5	Pike	76.5	74.5
Sevier	75.7	76.4	Desha	73.4	74.4
Sebastian	76.5	76.3	Franklin	74.1	74.4
Grant	75.1	76.3	Nevada	74.9	74.4
Pulaski	76.4	76.3	Clay	73.1	74.3
Randolph	75.9	76.1	Jefferson	74.8	74.2
Lincoln	76.9	76.1	Union	74.8	74.2
Crawford	75.4	76.0	Lawrence	74.8	73.9
Chicot	75.0	76.0	Woodruff	72.6	73.8
Prairie	74.6	75.9	Jackson	73.1	73.8
Independence	76.2	75.9	Bradley	75.0	73.8
Searcy	76.5	75.9	Ouachita	73.4	73.6
Drew	77.0	75.8	Lafayette	72.2	73.4
Hempstead	75.6	75.7	Mississippi	72.0	73.3
Lonoke	75.3	75.6	Cross	73.3	73.0
Cleveland	76.2	75.6	Phillips	71.9	72.1
Dallas	74.9	75.6	Poinsett	71.7	72.1

Source: Health Statistics Branch, Arkansas Department of Health

# TRENDS BY GENDER AND RACE, ARKANSAS

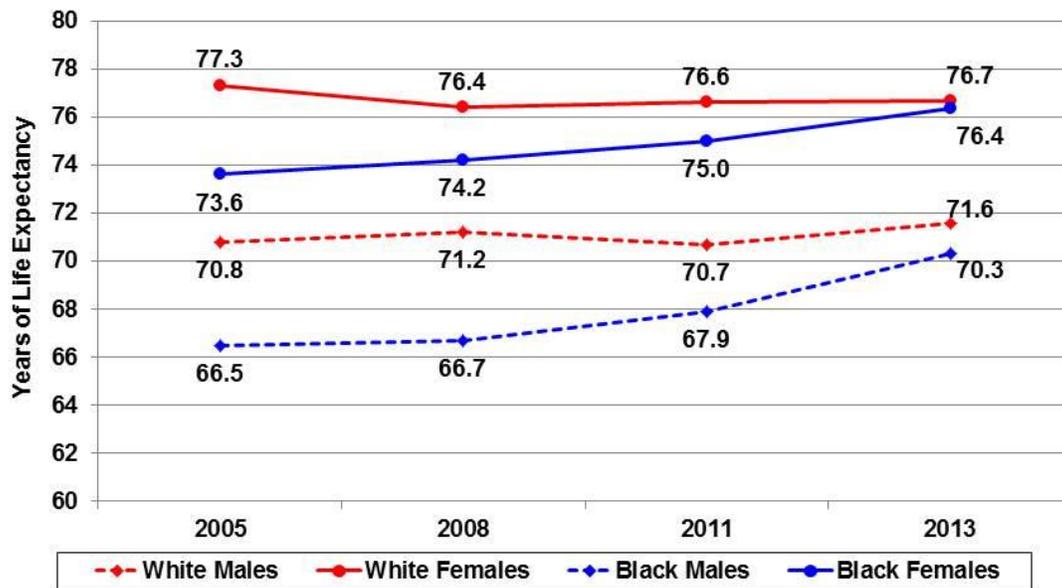
**Figure 1: Life Expectancy at Birth by Gender and Race  
Arkansas, 1990-2013**



Source: Health Statistics Branch, Arkansas Department of Health

# TRENDS BY GENDER AND RACE, RED COUNTIES

Figure 2: Life Expectancy at Birth by Gender and Race  
Red Counties, 2005-2013



Source: Health Statistics Branch, Arkansas Department of Health

## DISCUSSION

Arkansas's average life expectancy for 2013 was similar to that of 2011, 76.2 and 76.1, respectively. The gap between the highest and the lowest ranking counties narrowed from 10 years in 2008 to 8.3 years in 2011, and 7.7 years in 2013. This demonstrates that the disparity in life expectancy in Arkansas is decreasing. This increase in life expectancy can be largely attributed to the initiatives and efforts of a number of organizations and partners across the state. Through these initiatives, many Arkansans have made better lifestyle choices resulting in increased life expectancy. In 2013, the life expectancy increased for 41 counties and decreased for 34 counties. Benton County continued to have the highest life expectancy (79.8). Fulton and Pike Counties experienced the greatest increase (1.9) and decrease (2.0), respectively.

A closer look at the state's life expectancy by gender and race revealed that life expectancies gradually increased for both blacks and whites. Life expectancy for black males in the U.S. increased from 64.5 years in 1990 to 72.3 years in 2013.<sup>6</sup> Similar trends were observed for blacks in the Red Counties from 2005 and 2013. A majority of the Red Counties with high black populations are located in the Arkansas Delta Region that runs along the eastern border of the state next to the Mississippi River. Several counties in this region gained life expectancy in 2013 (Arkansas, Chicot, Craighead, Crittenden, Desha, Lee, Mississippi, Phillips, Poinsett, and St. Francis Counties). This potentially led to narrowing of the gap between the highest and lowest life expectancy counties in Arkansas, as mentioned above.

Health profiles of Benton County and the 10 Red Counties were developed using 38 measures derived from the U.S. Census Bureau, the Arkansas Department of Health, CDC Wonder, CDC Diabetes Interactive Atlas and the *County Health Rankings & Roadmaps*. These indicators were related to demographic characteristics (eight), health outcomes (seven), health behaviors (five), clinical care (six), social and economic factors (nine), and physical environmental factors (three). Appendix 2 illustrates the importance of selecting these measures.

A review of the statewide data reveals that Phillips, Lafayette, and Poinsett Counties were ranked as the bottom three for premature death rate. Phillips County also ranked the worst for inability to see a doctor due to cost, children in poverty, children in single parent households, adult obesity, and homicide rate. Phillips County ranked second to the worst for chlamydia infection, teen birth rate, severe housing problems, and violent crime rate. Crittenden County ranked worst for violent crime, chlamydia infections, and severe housing problems. Desha County ranked worst for low birth weight, Newton County for infant mortality, Mississippi County for physical inactivity and air pollution, Monroe County for diabetes prevalence, Bradley County for alcohol-impaired driving deaths, Chicot County for drinking water violations, and Lafayette County for injury mortality.

Six of the counties mentioned above are among the 10 Red Counties identified in 2015. The rankings are indicative of the fact that, despite the gradual improvement of life expectancy in Arkansas, significant challenges exist in the Red Counties concerning health outcomes, health behaviors, socio-economic, and environmental factors that affect the length and quality of life.



# COUNTY PROFILES



# BENTON COUNTY PROFILE

INDICATOR	YEAR	MEASURE	COUNTY	STATE
<b>DEMOGRAPHICS</b>				
Total population	2014	Count	242,321	2,966,369
White non-Hispanic	2014	Percent	76.3%	74.5%
Black/African American non-Hispanic	2014	Percent	2.0%	15.9%
American Indian or Alaskan Native	2014	Percent	1.7%	0.8%
Asian or Pacific Islander	2014	Percent	3.9%	1.8%
Hispanic or Latino	2014	Percent	16.2%	7.0%
Persons 65 years and older	2014	Percent	13.0%	15.7%
Not proficient in English	2009-2013	Percent	3.9%	1.7%
<b>HEALTH OUTCOMES</b>				
Premature death (before age 75)	2012-2014	YPLL per 100,000 population <sup>1</sup>	5,766	9,488
Diabetes prevalence	2012	Percent	10.0%	10.3%
HIV prevalence	2014	Per 100,000 population	94.9	183.9
Chlamydia Infections	2013	Per 100,000 population	238.5	518.9
Low birth weight	2010-2014	Percent	7.6%	8.9%
Teen birth rate	2010-2014	Per 1,000 female population	33.6	46.0
Infant death	2009-2013	Per 1,000 live births	5.9	6.9
<b>HEALTH BEHAVIOR</b>				
Adult smoking	2006-2012	Percent	16.8%	22.4%
Adult obesity	2012	Percent	28.4%	32.9%
Physical inactivity	2012	Percent	24.8%	30.5%
Excessive drinking	2006-2012	Percent	14.0%	12.6%
Alcohol impaired driving deaths	2009-2013	Percent	29.5%	30.9%
<b>CLINICAL CARE</b>				
Uninsured (under age 65)	2012	Percent	18.9%	19.4%
Primary Care Physicians (PCP)	2014	Ratio, population to PCP	993:1	797:1
Dentists	2014	Ratio, population to dentist	112:1	1,301:1
Could not see doctor due to cost	2006-2012	Percent	13.3%	16.8%
Health care costs	2012	Dollar, per Medicare enrollee	\$8,931	\$9,595
Preventable hospital stays	2012	Per 1,000 Medicare enrollees	57.7	71.6
<b>SOCIAL &amp; ECONOMIC FACTORS</b>				
Median household income	2009-2013	Dollar	\$54,515	\$40,768
Unemployment	2013	Percent	5.7%	7.5%
Children in poverty	2013	Percent	17.7%	28.3%
Children in single parent household	2009-2013	Percent	22.1%	36.5%
High school graduation	2009-2013	Percent	85.8%	83.7%
Bachelor's degree or higher	2009-2013	Percent	28.7%	20.1%
Homicide rate	2010-2014	Per 100,000 population	2.1	7.3
Violent crime rate	2010-2012	Per 100,000 population	270.5	484.5
Injury death rate	2010-2014	Per 100,000 population	58.6	74.1
<b>PHYSICAL ENVIRONMENTAL FACTORS</b>				
Air pollution - particulate matter	2011	Micrograms/cubic meter	10.6	11.8
Drinking water violations	FY 2013-2014	Percent	1.8%	8.8%
Severe housing problems	2007-2011	Percent	12.8%	14.8%

<sup>1</sup>Years of Potential Life Lost



# BRADLEY COUNTY PROFILE

INDICATOR	YEAR	MEASURE	COUNTY	STATE
<b>DEMOGRAPHICS</b>				
Total population	2014	Count	11,148	2,966,369
White non-Hispanic	2014	Percent	57.1%	74.5%
Black/African American non-Hispanic	2014	Percent	27.7%	15.9%
American Indian or Alaskan Native	2014	Percent	0.6%	0.8%
Asian or Pacific Islander	2014	Percent	0.3%	1.8%
Hispanic or Latino	2014	Percent	14.3%	7.0%
Persons 65 years and older	2014	Percent	18.3%	15.7%
Not proficient in English	2009-2013	Percent	2.6%	1.7%
<b>HEALTH OUTCOMES</b>				
Premature death (before age 75)	2012-2014	YPLL per 100,000 population <sup>1</sup>	11,371	9,488
Diabetes prevalence	2012	Percent	12.5%	10.3%
HIV prevalence	2014	Per 100,000 population	98.7	183.9
Chlamydia Infections	2013	Per 100,000 population	411.0	518.9
Low birth weight	2010-2014	Percent	10.9%	8.9%
Teen birth rate	2010-2014	Per 1,000 female population	57.2	46.0
Infant death	2009-2013	Per 1,000 live births	12.4	6.9
<b>HEALTH BEHAVIOR</b>				
Adult smoking	2006-2012	Percent	14.4%	22.4%
Adult obesity	2012	Percent	37.1%	32.9%
Physical inactivity	2012	Percent	36.7%	30.5%
Excessive drinking	2006-2012	Percent	NA	12.6%
Alcohol impaired driving deaths	2009-2013	Percent	57.1%	30.9%
<b>CLINICAL CARE</b>				
Uninsured (under age 65)	2012	Percent	23.7%	19.4%
Primary Care Physicians (PCP)	2014	Ratio, population to PCP	1,239:1	797:1
Dentists	2014	Ratio, population to dentist	2,787:1	1,301:1
Could not see doctor due to cost	2006-2012	Percent	12.7%	16.8%
Health care costs	2012	Dollar, per Medicare enrollee	\$11,192	\$9,595
Preventable hospital stays	2012	Per 1,000 Medicare enrollees	112.7	71.6
<b>SOCIAL &amp; ECONOMIC FACTORS</b>				
Median household income	2009-2013	Dollar	\$30,409	\$40,768
Unemployment	2013	Percent	9.1%	7.5%
Children in poverty	2013	Percent	39.8%	28.3%
Children in single parent household	2009-2013	Percent	44.4%	36.5%
High school graduation	2009-2013	Percent	76.0%	83.7%
Bachelor's degree or higher	2009-2013	Percent	10.8%	20.1%
Homicide rate	2010-2014	Per 100,000 population	10.7	7.3
Violent crime rate	2010-2012	Per 100,000 population	263.9	484.5
Injury death rate	2010-2014	Per 100,000 population	86.0	74.1
<b>PHYSICAL ENVIRONMENTAL FACTORS</b>				
Air pollution - particulate matter	2011	Micrograms/cubic meter	11.9	11.8
Drinking water violations	FY 2013-2014	Percent	4.1%	8.8%
Severe housing problems	2007-2011	Percent	16.3%	14.8%

<sup>1</sup>Years of Potential Life Lost



# CROSS COUNTY PROFILE

INDICATOR	YEAR	MEASURE	COUNTY	STATE
<b>DEMOGRAPHICS</b>				
Total population	2014	Count	17,227	2,966,369
White non-Hispanic	2014	Percent	74.0%	74.5%
Black/African American non-Hispanic	2014	Percent	23.2%	15.9%
American Indian or Alaskan Native	2014	Percent	0.3%	0.8%
Asian or Pacific Islander	2014	Percent	0.6%	1.8%
Hispanic or Latino	2014	Percent	1.9%	7.0%
Persons 65 years and older	2014	Percent	17.6%	15.7%
Not proficient in English	2009-2013	Percent	0.2%	1.7%
<b>HEALTH OUTCOMES</b>				
Premature death (before age 75)	2012-2014	YPLL per 100,000 population <sup>1</sup>	11,642	9,488
Diabetes prevalence	2012	Percent	13.6%	10.3%
HIV prevalence	2014	Per 100,000 population	180.0	183.9
Chlamydia Infections	2013	Per 100,000 population	582.7	518.9
Low birth weight	2010-2014	Percent	10.7%	8.9%
Teen birth rate	2010-2014	Per 1,000 female population	59.4	46.0
Infant death	2009-2013	Per 1,000 live births	6.0	6.9
<b>HEALTH BEHAVIOR</b>				
Adult smoking	2006-2012	Percent	33.8%	22.4%
Adult obesity	2012	Percent	37.7%	32.9%
Physical inactivity	2012	Percent	35.5%	30.5%
Excessive drinking	2006-2012	Percent	12.6%	12.6%
Alcohol impaired driving deaths	2009-2013	Percent	33.3%	30.9%
<b>CLINICAL CARE</b>				
Uninsured (under age 65)	2012	Percent	18.7%	19.4%
Primary Care Physicians (PCP)	2014	Ratio, population to PCP	1,723:1	797:1
Dentists	2014	Ratio, population to dentist	1,723:1	1,301:1
Could not see doctor due to cost	2006-2012	Percent	20.3%	16.8%
Health care costs	2012	Dollar, per Medicare enrollee	\$9,913	\$9,595
Preventable hospital stays	2012	Per 1,000 Medicare enrollees	104.2	71.6
<b>SOCIAL &amp; ECONOMIC FACTORS</b>				
Median household income	2009-2013	Dollar	\$38,085	\$40,768
Unemployment	2013	Percent	8.3%	7.5%
Children in poverty	2013	Percent	31.3%	28.3%
Children in single parent household	2009-2013	Percent	29.1%	36.5%
High school graduation	2009-2013	Percent	79.0%	83.7%
Bachelor's degree or higher	2009-2013	Percent	11.4%	20.1%
Homicide rate	2010-2014	Per 100,000 population	11.7	7.3
Violent crime rate	2010-2012	Per 100,000 population	331.3	484.5
Injury death rate	2010-2014	Per 100,000 population	84.9	74.1
<b>PHYSICAL ENVIRONMENTAL FACTORS</b>				
Air pollution - particulate matter	2011	Micrograms/cubic meter	12.6	11.8
Drinking water violations	FY 2013-2014	Percent	1.2%	8.8%
Severe housing problems	2007-2011	Percent	15.1%	14.8%

<sup>1</sup>Years of Potential Life Lost



# JACKSON COUNTY PROFILE

INDICATOR	YEAR	MEASURE	COUNTY	STATE
<b>DEMOGRAPHICS</b>				
Total population	2014	Count	17,534	2,966,369
White non-Hispanic	2014	Percent	78.0%	74.5%
Black/African American non-Hispanic	2014	Percent	17.9%	15.9%
American Indian or Alaskan Native	2014	Percent	0.6%	0.8%
Asian or Pacific Islander	2014	Percent	0.5%	1.8%
Hispanic or Latino	2014	Percent	2.9%	7.0%
Persons 65 years and older	2014	Percent	16.7%	15.7%
Not proficient in English	2009-2013	Percent	0.1%	1.7%
<b>HEALTH OUTCOMES</b>				
Premature death (before age 75)	2012-2014	YPLL per 100,000 population <sup>1</sup>	10,170	9,488
Diabetes prevalence	2012	Percent	12.7%	10.3%
HIV prevalence	2014	Per 100,000 population	119.8	183.9
Chlamydia Infections	2013	Per 100,000 population	447.2	518.9
Low birth weight	2010-2014	Percent	8.2%	8.9%
Teen birth rate	2010-2014	Per 1,000 female population	70.7	46.0
Infant death	2009-2013	Per 1,000 live births	11.2	6.9
<b>HEALTH BEHAVIOR</b>				
Adult smoking	2006-2012	Percent	27.0%	22.4%
Adult obesity	2012	Percent	40.1%	32.9%
Physical inactivity	2012	Percent	39.0%	30.5%
Excessive drinking	2006-2012	Percent	NA	12.6%
Alcohol impaired driving deaths	2009-2013	Percent	39.3%	30.9%
<b>CLINICAL CARE</b>				
Uninsured (under age 65)	2012	Percent	19.8%	19.4%
Primary Care Physicians (PCP)	2014	Ratio, population to PCP	1,096:1	797:1
Dentists	2014	Ratio, population to dentist	2,922:1	1,301:1
Could not see doctor due to cost	2006-2012	Percent	22.6%	16.8%
Health care costs	2012	Dollar, per Medicare enrollee	\$11,390	\$9,595
Preventable hospital stays	2012	Per 1,000 Medicare enrollees	121.4	71.6
<b>SOCIAL &amp; ECONOMIC FACTORS</b>				
Median household income	2009-2013	Dollar	\$30,284	\$40,768
Unemployment	2013	Percent	10.2%	7.5%
Children in poverty	2013	Percent	40.3%	28.3%
Children in single parent household	2009-2013	Percent	47.7%	36.5%
High school graduation	2009-2013	Percent	75.6%	83.7%
Bachelor's degree or higher	2009-2013	Percent	8.8%	20.1%
Homicide rate	2010-2014	Per 100,000 population	9.4	7.3
Violent crime rate	2010-2012	Per 100,000 population	411.1	484.5
Injury death rate	2010-2014	Per 100,000 population	91.1	74.1
<b>PHYSICAL ENVIRONMENTAL FACTORS</b>				
Air pollution - particulate matter	2011	Micrograms/cubic meter	12.4	11.8
Drinking water violations	FY 2013-2014	Percent	0.0%	8.8%
Severe housing problems	2007-2011	Percent	13.5%	14.8%

<sup>1</sup>Years of Potential Life Lost



# LAFAYETTE COUNTY PROFILE

INDICATOR	YEAR	MEASURE	COUNTY	STATE
<b>DEMOGRAPHICS</b>				
Total population	2014	Count	7,111	2,966,369
White non-Hispanic	2014	Percent	60.2%	74.5%
Black/African American non-Hispanic	2014	Percent	37.2%	15.9%
American Indian or Alaskan Native	2014	Percent	0.2%	0.8%
Asian or Pacific Islander	2014	Percent	0.5%	1.8%
Hispanic or Latino	2014	Percent	2.0%	7.0%
Persons 65 years and older	2014	Percent	21.5%	15.7%
Not proficient in English	2009-2013	Percent	0.6%	1.7%
<b>HEALTH OUTCOMES</b>				
Premature death (before age 75)	2012-2014	YPLL per 100,000 population <sup>1</sup>	12,938	9,488
Diabetes prevalence	2012	Percent	15.3%	10.3%
HIV prevalence	2014	Per 100,000 population	140.6	183.9
Chlamydia Infections	2013	Per 100,000 population	731.5	518.9
Low birth weight	2010-2014	Percent	13.4%	8.9%
Teen birth rate	2010-2014	Per 1,000 female population	56.9	46.0
Infant death	2009-2013	Per 1,000 live births	14.2	6.9
<b>HEALTH BEHAVIOR</b>				
Adult smoking	2006-2012	Percent	NA	22.4%
Adult obesity	2012	Percent	34.0%	32.9%
Physical inactivity	2012	Percent	35.0%	30.5%
Excessive drinking	2006-2012	Percent	NA	12.6%
Alcohol impaired driving deaths	2009-2013	Percent	40.9%	30.9%
<b>CLINICAL CARE</b>				
Uninsured (under age 65)	2012	Percent	21.8%	19.4%
Primary Care Physicians (PCP)	2014	Ratio, population to PCP	3,556:1	797:1
Dentists	2014	Ratio, population to dentist	NA	1,301:1
Could not see doctor due to cost	2006-2012	Percent	15.5%	16.8%
Health care costs	2012	Dollar, per Medicare enrollee	\$9,867	\$9,595
Preventable hospital stays	2012	Per 1,000 Medicare enrollees	68.6	71.6
<b>SOCIAL &amp; ECONOMIC FACTORS</b>				
Median household income	2009-2013	Dollar	\$29,732	\$40,768
Unemployment	2013	Percent	10.4%	7.5%
Children in poverty	2013	Percent	40.3%	28.3%
Children in single parent household	2009-2013	Percent	48.4%	36.5%
High school graduation	2009-2013	Percent	77.5%	83.7%
Bachelor's degree or higher	2009-2013	Percent	10.7%	20.1%
Homicide rate	2010-2014	Per 100,000 population	2.4	7.3
Violent crime rate	2010-2012	Per 100,000 population	143.3	484.5
Injury death rate	2010-2014	Per 100,000 population	122.0	74.1
<b>PHYSICAL ENVIRONMENTAL FACTORS</b>				
Air pollution - particulate matter	2011	Micrograms/cubic meter	11.1	11.8
Drinking water violations	FY 2013-2014	Percent	0.0%	8.8%
Severe housing problems	2007-2011	Percent	9.1%	14.8%

<sup>1</sup>Years of Potential Life Lost



# LAWRENCE COUNTY PROFILE

INDICATOR	YEAR	MEASURE	COUNTY	STATE
<b>DEMOGRAPHICS</b>				
Total population	2014	Count	16,931	2,966,369
White non-Hispanic	2014	Percent	96.8%	74.5%
Black/African American non-Hispanic	2014	Percent	1.2%	15.9%
American Indian or Alaskan Native	2014	Percent	0.4%	0.8%
Asian or Pacific Islander	2014	Percent	0.3%	1.8%
Hispanic or Latino	2014	Percent	1.3%	7.0%
Persons 65 years and older	2014	Percent	19.3%	15.7%
Not proficient in English	2009-2013	Percent	0.0%	1.7%
<b>HEALTH OUTCOMES</b>				
Premature death (before age 75)	2012-2014	YPLL per 100,000 population <sup>1</sup>	11,021	9,488
Diabetes prevalence	2012	Percent	12.1%	10.3%
HIV prevalence	2014	Per 100,000 population	41.3	183.9
Chlamydia Infections	2013	Per 100,000 population	375.1	518.9
Low birth weight	2010-2014	Percent	8.2%	8.9%
Teen birth rate	2010-2014	Per 1,000 female population	39.6	46.0
Infant death	2009-2013	Per 1,000 live births	6.4	6.9
<b>HEALTH BEHAVIOR</b>				
Adult smoking	2006-2012	Percent	16.3%	22.4%
Adult obesity	2012	Percent	33.3%	32.9%
Physical inactivity	2012	Percent	37.7%	30.5%
Excessive drinking	2006-2012	Percent	NA	12.6%
Alcohol impaired driving deaths	2009-2013	Percent	33.3%	30.9%
<b>CLINICAL CARE</b>				
Uninsured (under age 65)	2012	Percent	20.9%	19.4%
Primary Care Physicians (PCP)	2014	Ratio, population to PCP	1,539:1	797:1
Dentists	2014	Ratio, population to dentist	5,644:1	1,301:1
Could not see doctor due to cost	2006-2012	Percent	NA	16.8%
Health care costs	2012	Dollar, per Medicare enrollee	\$11,110	\$9,595
Preventable hospital stays	2012	Per 1,000 Medicare enrollees	111.8	71.6
<b>SOCIAL &amp; ECONOMIC FACTORS</b>				
Median household income	2009-2013	Dollar	\$32,239	\$40,768
Unemployment	2013	Percent	9.2%	7.5%
Children in poverty	2013	Percent	33.6%	28.3%
Children in single parent household	2009-2013	Percent	27.9%	36.5%
High school graduation	2009-2013	Percent	77.4%	83.7%
Bachelor's degree or higher	2009-2013	Percent	10.4%	20.1%
Homicide rate	2010-2014	Per 100,000 population	3.6	7.3
Violent crime rate	2010-2012	Per 100,000 population	149.4	484.5
Injury death rate	2010-2014	Per 100,000 population	80.8	74.1
<b>PHYSICAL ENVIRONMENTAL FACTORS</b>				
Air pollution - particulate matter	2011	Micrograms/cubic meter	12.4	11.8
Drinking water violations	FY 2013-2014	Percent	2.2%	8.8%
Severe housing problems	2007-2011	Percent	14.5%	14.8%

<sup>1</sup>Years of Potential Life Lost



# MISSISSIPPI COUNTY PROFILE

INDICATOR	YEAR	MEASURE	COUNTY	STATE
<b>DEMOGRAPHICS</b>				
Total population	2014	Count	44,235	2,966,369
White non-Hispanic	2014	Percent	60.0%	74.5%
Black/African American non-Hispanic	2014	Percent	35.2%	15.9%
American Indian or Alaskan Native	2014	Percent	0.3%	0.8%
Asian or Pacific Islander	2014	Percent	0.5%	1.8%
Hispanic or Latino	2014	Percent	4.0%	7.0%
Persons 65 years and older	2014	Percent	13.4%	15.7%
Not proficient in English	2009-2013	Percent	0.6%	1.7%
<b>HEALTH OUTCOMES</b>				
Premature death (before age 75)	2012-2014	YPLL per 100,000 population <sup>1</sup>	11,680	9,488
Diabetes prevalence	2012	Percent	14.7%	10.3%
HIV prevalence	2014	Per 100,000 population	187.6	183.9
Chlamydia Infections	2013	Per 100,000 population	1084.2	518.9
Low birth weight	2010-2014	Percent	11.1%	8.9%
Teen birth rate	2010-2014	Per 1,000 female population	67.6	46.0
Infant death	2009-2013	Per 1,000 live births	10.6	6.9
<b>HEALTH BEHAVIOR</b>				
Adult smoking	2006-2012	Percent	29.5%	22.4%
Adult obesity	2012	Percent	37.7%	32.9%
Physical inactivity	2012	Percent	40.4%	30.5%
Excessive drinking	2006-2012	Percent	5.4%	12.6%
Alcohol impaired driving deaths	2009-2013	Percent	36.4%	30.9%
<b>CLINICAL CARE</b>				
Uninsured (under age 65)	2012	Percent	18.8%	19.4%
Primary Care Physicians (PCP)	2014	Ratio, population to PCP	1,769:1	797:1
Dentists	2014	Ratio, population to dentist	4,915:1	1,301:1
Could not see doctor due to cost	2006-2012	Percent	20.2%	16.8%
Health care costs	2012	Dollar, per Medicare enrollee	\$10,060	\$9,595
Preventable hospital stays	2012	Per 1,000 Medicare enrollees	98.6	71.6
<b>SOCIAL &amp; ECONOMIC FACTORS</b>				
Median household income	2009-2013	Dollar	\$36,428	\$40,768
Unemployment	2013	Percent	11.0%	7.5%
Children in poverty	2013	Percent	39.0%	28.3%
Children in single parent household	2009-2013	Percent	50.2%	36.5%
High school graduation	2009-2013	Percent	77.8%	83.7%
Bachelor's degree or higher	2009-2013	Percent	13.0%	20.1%
Homicide rate	2010-2014	Per 100,000 population	16.7	7.3
Violent crime rate	2010-2012	Per 100,000 population	791.5	484.5
Injury death rate	2010-2014	Per 100,000 population	82.7	74.1
<b>PHYSICAL ENVIRONMENTAL FACTORS</b>				
Air pollution - particulate matter	2011	Micrograms/cubic meter	13.2	11.8
Drinking water violations	FY 2013-2014	Percent	19.4%	8.8%
Severe housing problems	2007-2011	Percent	15.1%	14.8%

<sup>1</sup>Years of Potential Life Lost



# OUACHITA COUNTY PROFILE

INDICATOR	YEAR	MEASURE	COUNTY	STATE
<b>DEMOGRAPHICS</b>				
Total population	2014	Count	24,828	2,966,369
White non-Hispanic	2014	Percent	56.2%	74.5%
Black/African American non-Hispanic	2014	Percent	40.8%	15.9%
American Indian or Alaskan Native	2014	Percent	0.4%	0.8%
Asian or Pacific Islander	2014	Percent	0.5%	1.8%
Hispanic or Latino	2014	Percent	2.2%	7.0%
Persons 65 years and older	2014	Percent	18.3%	15.7%
Not proficient in English	2009-2013	Percent	0.5%	1.7%
<b>HEALTH OUTCOMES</b>				
Premature death (before age 75)	2012-2014	YPLL per 100,000 population <sup>1</sup>	11,079	9,488
Diabetes prevalence	2012	Percent	13.4%	10.3%
HIV prevalence	2014	Per 100,000 population	217.5	183.9
Chlamydia Infections	2013	Per 100,000 population	927.5	518.9
Low birth weight	2010-2014	Percent	10.4%	8.9%
Teen birth rate	2010-2014	Per 1,000 female population	56.8	46.0
Infant death	2009-2013	Per 1,000 live births	10.1	6.9
<b>HEALTH BEHAVIOR</b>				
Adult smoking	2006-2012	Percent	23.3%	22.4%
Adult obesity	2012	Percent	37.8%	32.9%
Physical inactivity	2012	Percent	38.3%	30.5%
Excessive drinking	2006-2012	Percent	12.5%	12.6%
Alcohol impaired driving deaths	2009-2013	Percent	17.9%	30.9%
<b>CLINICAL CARE</b>				
Uninsured (under age 65)	2012	Percent	16.4%	19.4%
Primary Care Physicians (PCP)	2014	Ratio, population to PCP	1,307:1	797:1
Dentists	2014	Ratio, population to dentist	3,104:1	1,301:1
Could not see doctor due to cost	2006-2012	Percent	22.7%	16.8%
Health care costs	2012	Dollar, per Medicare enrollee	\$9,470	\$9,595
Preventable hospital stays	2012	Per 1,000 Medicare enrollees	72.4	71.6
<b>SOCIAL &amp; ECONOMIC FACTORS</b>				
Median household income	2009-2013	Dollar	\$32,015	\$40,768
Unemployment	2013	Percent	9.4%	7.5%
Children in poverty	2013	Percent	43.6%	28.3%
Children in single parent household	2009-2013	Percent	46.4%	36.5%
High school graduation	2009-2013	Percent	84.7%	83.7%
Bachelor's degree or higher	2009-2013	Percent	15.5%	20.1%
Homicide rate	2010-2014	Per 100,000 population	10.4	7.3
Violent crime rate	2010-2012	Per 100,000 population	345.6	484.5
Injury death rate	2010-2014	Per 100,000 population	82.5	74.1
<b>PHYSICAL ENVIRONMENTAL FACTORS</b>				
Air pollution - particulate matter	2011	Micrograms/cubic meter	11.5	11.8
Drinking water violations	FY 2013-2014	Percent	4.5%	8.8%
Severe housing problems	2007-2011	Percent	14.6%	14.8%

<sup>1</sup>Years of Potential Life Lost



# PHILLIPS COUNTY PROFILE

INDICATOR	YEAR	MEASURE	COUNTY	STATE
<b>DEMOGRAPHICS</b>				
Total population	2014	Count	19,930	2,966,369
White non-Hispanic	2014	Percent	36.1%	74.5%
Black/African American non-Hispanic	2014	Percent	61.6%	15.9%
American Indian or Alaskan Native	2014	Percent	0.3%	0.8%
Asian or Pacific Islander	2014	Percent	0.4%	1.8%
Hispanic or Latino	2014	Percent	1.7%	7.0%
Persons 65 years and older	2014	Percent	16.3%	15.7%
Not proficient in English	2009-2013	Percent	0.0%	1.7%
<b>HEALTH OUTCOMES</b>				
Premature death (before age 75)	2012-2014	YPLL per 100,000 population <sup>1</sup>	14,050	9,488
Diabetes prevalence	2012	Percent	15.2%	10.3%
HIV prevalence	2014	Per 100,000 population	296.0	183.9
Chlamydia Infections	2013	Per 100,000 population	1263.1	518.9
Low birth weight	2010-2014	Percent	12.9%	8.9%
Teen birth rate	2010-2014	Per 1,000 female population	80.7	46.0
Infant death	2009-2013	Per 1,000 live births	6.2	6.9
<b>HEALTH BEHAVIOR</b>				
Adult smoking	2006-2012	Percent	24.2%	22.4%
Adult obesity	2012	Percent	41.5%	32.9%
Physical inactivity	2012	Percent	38.0%	30.5%
Excessive drinking	2006-2012	Percent	14.0%	12.6%
Alcohol impaired driving deaths	2009-2013	Percent	45.0%	30.9%
<b>CLINICAL CARE</b>				
Uninsured (under age 65)	2012	Percent	17.9%	19.4%
Primary Care Physicians (PCP)	2014	Ratio, population to PCP	1,533:1	797:1
Dentists	2014	Ratio, population to dentist	4,983:1	1,301:1
Could not see doctor due to cost	2006-2012	Percent	30.0%	16.8%
Health care costs	2012	Dollar, per Medicare enrollee	\$8,275	\$9,595
Preventable hospital stays	2012	Per 1,000 Medicare enrollees	73.4	71.6
<b>SOCIAL &amp; ECONOMIC FACTORS</b>				
Median household income	2009-2013	Dollar	\$26,737	\$40,768
Unemployment	2013	Percent	11.2%	7.5%
Children in poverty	2013	Percent	53.0%	28.3%
Children in single parent household	2009-2013	Percent	65.0%	36.5%
High school graduation	2009-2013	Percent	72.8%	83.7%
Bachelor's degree or higher	2009-2013	Percent	12.0%	20.1%
Homicide rate	2010-2014	Per 100,000 population	36.6	7.3
Violent crime rate	2010-2012	Per 100,000 population	1134.7	484.5
Injury death rate	2010-2014	Per 100,000 population	101.3	74.1
<b>PHYSICAL ENVIRONMENTAL FACTORS</b>				
Air pollution - particulate matter	2011	Micrograms/cubic meter	12.3	11.8
Drinking water violations	FY 2013-2014	Percent	3.6%	8.8%
Severe housing problems	2007-2011	Percent	21.0%	14.8%

<sup>1</sup>Years of Potential Life Lost



# POINSETT COUNTY PROFILE

INDICATOR	YEAR	MEASURE	COUNTY	STATE
<b>DEMOGRAPHICS</b>				
Total population	2014	Count	24,246	2,966,369
White non-Hispanic	2014	Percent	88.4%	74.5%
Black/African American non-Hispanic	2014	Percent	8.4%	15.9%
American Indian or Alaskan Native	2014	Percent	0.3%	0.8%
Asian or Pacific Islander	2014	Percent	0.3%	1.8%
Hispanic or Latino	2014	Percent	2.7%	7.0%
Persons 65 years and older	2014	Percent	17.1%	15.7%
Not proficient in English	2009-2013	Percent	0.1%	1.7%
<b>HEALTH OUTCOMES</b>				
Premature death (before age 75)	2012-2014	YPLL per 100,000 population <sup>1</sup>	12,335	9,488
Diabetes prevalence	2012	Percent	12.7%	10.3%
HIV prevalence	2014	Per 100,000 population	74.2	183.9
Chlamydia Infections	2013	Per 100,000 population	408.7	518.9
Low birth weight	2010-2014	Percent	8.5%	8.9%
Teen birth rate	2010-2014	Per 1,000 female population	59.4	46.0
Infant death	2009-2013	Per 1,000 live births	10.3	6.9
<b>HEALTH BEHAVIOR</b>				
Adult smoking	2006-2012	Percent	19.4%	22.4%
Adult obesity	2012	Percent	40.4%	32.9%
Physical inactivity	2012	Percent	35.0%	30.5%
Excessive drinking	2006-2012	Percent	-	12.6%
Alcohol impaired driving deaths	2009-2013	Percent	30.0%	30.9%
<b>CLINICAL CARE</b>				
Uninsured (under age 65)	2012	Percent	20.3%	19.4%
Primary Care Physicians (PCP)	2014	Ratio, population to PCP	8,082:1	797:1
Dentists	2014	Ratio, population to dentist	6,062:1	1,301:1
Could not see doctor due to cost	2006-2012	Percent	24.5%	16.8%
Health care costs	2012	Dollar, per Medicare enrollee	\$11,464	\$9,595
Preventable hospital stays	2012	Per 1,000 Medicare enrollees	91.7	71.6
<b>SOCIAL &amp; ECONOMIC FACTORS</b>				
Median household income	2009-2013	Dollar	\$32,089	\$40,768
Unemployment	2013	Percent	8.3%	7.5%
Children in poverty	2013	Percent	37.9%	28.3%
Children in single parent household	2009-2013	Percent	44.6%	36.5%
High school graduation	2009-2013	Percent	73.3%	83.7%
Bachelor's degree or higher	2009-2013	Percent	8.6%	20.1%
Homicide rate	2010-2014	Per 100,000 population	6.9	7.3
Violent crime rate	2010-2012	Per 100,000 population	398.9	484.5
Injury death rate	2010-2014	Per 100,000 population	86.9	74.1
<b>PHYSICAL ENVIRONMENTAL FACTORS</b>				
Air pollution - particulate matter	2011	Micrograms/cubic meter	12.7	11.8
Drinking water violations	FY 2013-2014	Percent	0.3%	8.8%
Severe housing problems	2007-2011	Percent	15.1%	14.8%

<sup>1</sup>Years of Potential Life Lost



# WOODRUFF COUNTY PROFILE

INDICATOR	YEAR	MEASURE	COUNTY	STATE
<b>DEMOGRAPHICS</b>				
Total population	2014	Count	6,910	2,966,369
White non-Hispanic	2014	Percent	70.4%	74.5%
Black/African American non-Hispanic	2014	Percent	27.5%	15.9%
American Indian or Alaskan Native	2014	Percent	0.3%	0.8%
Asian or Pacific Islander	2014	Percent	0.3%	1.8%
Hispanic or Latino	2014	Percent	1.5%	7.0%
Persons 65 years and older	2014	Percent	21.2%	15.7%
Not proficient in English	2009-2013	Percent	0.0%	1.7%
<b>HEALTH OUTCOMES</b>				
Premature death (before age 75)	2012-2014	YPLL per 100,000 population <sup>1</sup>	12,031	9,488
Diabetes prevalence	2012	Percent	13.9%	10.3%
HIV prevalence	2014	Per 100,000 population	-	183.9
Chlamydia Infections	2013	Per 100,000 population	482.1	518.9
Low birth weight	2010-2014	Percent	7.7%	8.9%
Teen birth rate	2010-2014	Per 1,000 female population	56.1	46.0
Infant death	2009-2013	Per 1,000 live births	7.1	6.9
<b>HEALTH BEHAVIOR</b>				
Adult smoking	2006-2012	Percent	22.1%	22.4%
Adult obesity	2012	Percent	36.1%	32.9%
Physical inactivity	2012	Percent	32.9%	30.5%
Excessive drinking	2006-2012	Percent	-	12.6%
Alcohol impaired driving deaths	2009-2013	Percent	20.0%	30.9%
<b>CLINICAL CARE</b>				
Uninsured (under age 65)	2012	Percent	21.1%	19.4%
Primary Care Physicians (PCP)	2014	Ratio, population to PCP	1,728:1	797:1
Dentists	2014	Ratio, population to dentist	6,910:1	1,301:1
Could not see doctor due to cost	2006-2012	Percent	24.1%	16.8%
Health care costs	2012	Dollar, per Medicare enrollee	\$10,100	\$9,595
Preventable hospital stays	2012	Per 1,000 Medicare enrollees	91.0	71.6
<b>SOCIAL &amp; ECONOMIC FACTORS</b>				
Median household income	2009-2013	Dollar	\$28,259	\$40,768
Unemployment	2013	Percent	10.3%	7.5%
Children in poverty	2013	Percent	41.3%	28.3%
Children in single parent household	2009-2013	Percent	38.4%	36.5%
High school graduation	2009-2013	Percent	73.6%	83.7%
Bachelor's degree or higher	2009-2013	Percent	10.1%	20.1%
Homicide rate	2010-2014	Per 100,000 population	15.1	7.3
Violent crime rate	2010-2012	Per 100,000 population	33.9	484.5
Injury death rate	2010-2014	Per 100,000 population	81.8	74.1
<b>PHYSICAL ENVIRONMENTAL FACTORS</b>				
Air pollution - particulate matter	2011	Micrograms/cubic meter	12.3	11.8
Drinking water violations	FY 2013-2014	Percent	19.8%	8.8%
Severe housing problems	2007-2011	Percent	13.7%	14.8%

<sup>1</sup>Years of Potential Life Lost

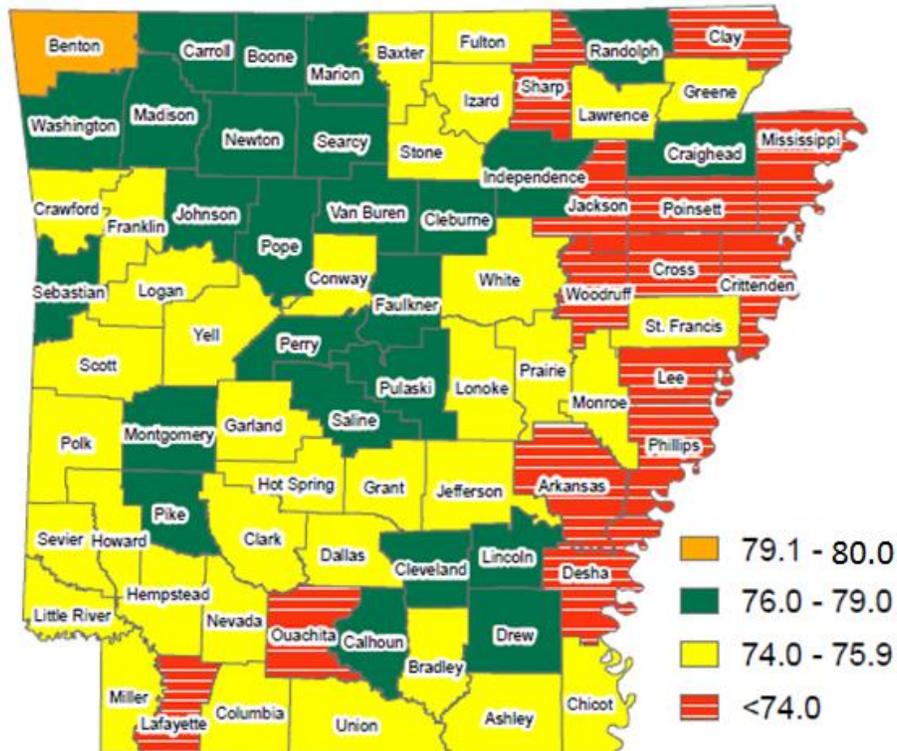
# APPENDIX 1: 2011 Life Expectancy at Birth Map

## LIFE EXPECTANCY AT BIRTH

2010-2012 Death Data and 2011 Population Estimates  
In Accordance with Act 790 and Act 798 of 2011

State Mean = 76.1

Minimum (Poinsett County) = 71.7; Maximum (Benton County) = 79.6



Source: Health Statistics Branch, Arkansas Department of Health

## APPENDIX 2: Selection of Health Measures

### HEALTH OUTCOMES

Measuring **premature mortality**, rather than overall mortality, focuses attention on deaths that could have been prevented. Measuring Years of Potential Life Lost (YPLL) allows communities to target resources to high-risk areas and further investigate the causes of premature death. YPLL is a widely used measure of the rate and distribution of premature mortality. The measure was introduced mainly because simple mortality rates do not fully address the issue of premature death, the impact of disease and death, and their costs to society.

*Data Source: Arkansas Department of Health, Health Statistics Branch*

**Diabetes** is an important marker for a range of health behaviors. Diabetes can cause serious health complications including heart disease, blindness, kidney failure, and lower-extremity amputations. Diabetes is the seventh leading cause of death in the United States.<sup>7</sup>

*Data Source: Centers for Disease Control and Prevention Diabetes Interactive Atlas*

**Human Immunodeficiency Virus (HIV)** is also an important marker for a range of risky health behaviors and it can put significant burden on the population and the health care system. Through the surveillance of HIV, a data system can be developed that combines information on HIV infection, disease progression, and behaviors and characteristics of people at high risk. With this system, CDC can direct HIV prevention funding to where it is needed the most.<sup>8</sup>

*Data Source: Arkansas eHARS (enhanced HIV/AIDS Reporting System)*

**Chlamydia** is the most common bacterial Sexually Transmitted Infection (STI) in North America and is one of the major causes of tubal infertility, ectopic pregnancy, pelvic inflammatory disease, and chronic pelvic pain. STIs are associated with a significantly increased risk of morbidity and mortality, including increased risk of cervical cancer, involuntary infertility, and premature death. STIs also have a high economic burden on society. For example, the direct medical cost of managing STIs and the complications in the U.S. was approximately 15.6 billion dollars in 2008.

*Data Source: Arkansas STD\*MIS Surveillance Data System*

**Low birth weight (LBW)** represents two factors: maternal exposure to health risks and an infant's current and future morbidity, as well as premature mortality risk. From the perspective of maternal health outcomes, LBW indicates maternal exposure to health risks in all categories of health factors, including her health behaviors, access to health care, the social and economic environment she inhabits, and environmental risks to which she is exposed. In terms of the infant's health outcomes, LBW serves as a predictor of premature mortality and/or morbidity over the life course and for potential cognitive development problems.

*Data Source: Arkansas Department of Health, Health Statistics Branch Query System*

Evidence suggests **teen pregnancy** significantly increases the risk of repeat pregnancy and of contracting a STI, both of which can result in adverse health outcomes for mothers, children, families, and communities. A systematic review of the sexual risk among pregnant and mothering teens concludes that pregnancy is a marker for current and future sexual risk behaviors and adverse outcomes. Pregnant teens are more likely than older women to receive late

or no prenatal care, have gestational hypertension and anemia, and achieve poor maternal weight gain. Teens are also more likely than older women to have a pre-term delivery and LBW baby, increasing the risk of child developmental delay, illness, and mortality.

*Data Source: Arkansas Department of Health, Health Statistics Branch Query System*

**Infant mortality** represents the health of the most vulnerable age group (those under 365 days). This measure can help to interpret the YPLL rate in a county.

*Data Source: Arkansas Department of Health, Health Statistics Branch Query System*

## **HEALTH BEHAVIOR**

**Cigarette smoking** is identified as a cause of various cancers, cardiovascular disease, and respiratory conditions, as well as LBW and other adverse health outcomes. Measuring the prevalence of tobacco use in the population can alert communities to potential adverse health outcomes and can be valuable for assessing the need for cessation programs or the effectiveness of existing programs.

*Data Source: University of Wisconsin Population Health Institute, 2015 County Health Rankings*

**Obesity** is often the result of an overall energy imbalance due to poor diet and limited physical activity. Obesity increases the risk for health conditions such as coronary heart disease, type 2 diabetes, cancer, hypertension, dyslipidemia, stroke, liver and gallbladder disease, sleep apnea and respiratory problems, osteoarthritis, and poor health status.

*Data Source: Centers for Disease Control and Prevention Diabetes Interactive Atlas*

Decreased physical activity has been related to several disease conditions such as type 2 diabetes, cancer, stroke, hypertension, cardiovascular disease, and premature mortality, independent of obesity. **Physical inactivity** causes 11% of premature mortality in the U.S. In addition, physical inactivity at the county level is related to health care expenditures for circulatory system diseases.

*Data Source: Centers for Disease Control and Prevention Diabetes Interactive Atlas*

**Excessive drinking** is a risk factor for a number of adverse health outcomes such as alcohol poisoning, hypertension, acute myocardial infarction, sexually transmitted infections, unintended pregnancy, fetal alcohol syndrome, sudden infant death syndrome, suicide, interpersonal violence, and motor vehicle crashes. Approximately 80,000 deaths are attributed annually to excessive drinking. Excessive drinking is the third leading lifestyle-related cause of death in the U.S.

*Data Source: University of Wisconsin Population Health Institute, 2015 County Health Rankings*

Approximately 17,000 Americans are killed annually in alcohol-related motor vehicle crashes. Binge/heavy drinkers account for most episodes of **alcohol-impaired driving**. An important strength of this measure is that alcohol-impaired driving deaths directly measure the relationship between alcohol and motor vehicle crash deaths.

*Data Source: University of Wisconsin Population Health Institute, 2015 County Health Rankings*

## **CLINICAL CARE**

**Lack of health insurance** coverage is a significant barrier to accessing needed health care. The Kaiser Family Foundation released a report in October 2015 that outlines the effects

insurance has on access to health care. One key finding was that "Uninsured people are far more likely than those with insurance to report problems getting needed medical care. Thirty percent of adults without coverage say that they went without care in the past year because of its cost compared to 4% of adults with private coverage."<sup>9</sup>

*Data Source: University of Wisconsin Population Health Institute, 2015 County Health Rankings*

Access to care requires not only financial coverage, but also, access to providers. While high rates of specialist physicians have been shown to be associated with higher, and perhaps unnecessary utilization, sufficient availability of **primary care physicians** is essential for preventive and primary care, and when needed, referrals to appropriate specialty care.

*Data Source: Arkansas Department of Health, Health Statistics Branch, Arkansas Health Professions Manpower Statistics 2014*

Untreated dental disease can lead to serious health effects including pain, infection, and tooth loss. Although lack of sufficient **dental providers** is only one barrier to accessing oral health care, much of the country suffers from shortages. According to the Health Resources and Services Administration, as of December 2012, there were 4,585 Dental Health Professional Shortage Areas (HPSAs) with 45 million people living in them.

*Data Source: Arkansas Department of Health, Health Statistics Branch, Arkansas Health Professions Manpower Statistics 2014*

**Could not see a doctor due to cost** is the percentage of the population who reported being unable to see a doctor because of cost in the past year. Health care costs have important health implications.

*Data Source: University of Wisconsin Population Health Institute, 2015 County Health Rankings*

**Health care costs** are an important measure of the efficiency of a health care system. Health care costs are the price-adjusted Medicare reimbursements (Parts A and B) per enrollee. However, in order to rank a measure, an ideal value must be known. Research shows that 'too little' or 'too much' health care spending is not good for health care outcomes. However, it is not yet known what the 'ideal' level of spending on patients should be.

*Data Source: University of Wisconsin Population Health Institute, 2015 County Health Rankings*

**Preventable hospital stays** is the hospital discharge rate for ambulatory care-sensitive conditions per 1,000 fee-for-service Medicare enrollees. Ambulatory care-sensitive conditions include: convulsions, chronic obstructive pulmonary disease, bacterial pneumonia, asthma, congestive heart failure, hypertension, angina, cellulitis, diabetes, gastroenteritis, kidney/urinary infection, and dehydration. Hospitalization for diagnoses treatable in outpatient services suggests that the quality of care provided in the outpatient setting was less than ideal. The measure may also represent a tendency to overuse hospitals as a main source of care.

*Data Source: University of Wisconsin Population Health Institute, 2015 County Health Rankings*

## **SOCIAL & ECONOMIC FACTORS**

**Median household income** is the income at which half the households earn more and half the households earn less. Median household income is a well-recognized indicator of income and poverty.

*Data Source: United States Census Bureau, American Community Survey*



The unemployed population experiences worse health and higher mortality rates than the employed population. **Unemployment** has been shown to lead to an increase in unhealthy behaviors related to alcohol and tobacco consumption, diet, exercise, and other health-related behaviors, which in turn can lead to increased risk for disease or mortality, especially suicide. Because employer-sponsored health insurance is the most common source of health insurance coverage, unemployment can also limit access to health care.

*Data Source: University of Wisconsin Population Health Institute, 2015 County Health Rankings*

Poverty can result in an increased risk of mortality, prevalence of medical conditions and disease incidence, depression, intimate partner violence, and poor health behaviors. A 1990 study found that if poverty were considered a cause of death in the U.S., it would rank among the top 10 causes. While negative health effects resulting from poverty are present at all ages, **children in poverty** experience greater morbidity and mortality than adults due to increased risk of accidental injury and lack of health care access.

*Data Source: University of Wisconsin Population Health Institute, 2015 County Health Rankings*

Adults and **children in single parent households** are at risk for adverse health outcomes such as mental health problems (including substance abuse, depression, and suicide) and unhealthy behaviors such as smoking and excessive alcohol use. Self-reported health has been shown to be worse among lone parents (male and female) than for parents living as couples, even when controlling for socioeconomic characteristics. Mortality risk is also higher among lone parents. Children in single parent households are at greater risk of severe morbidity and all-cause mortality than their peers in two-parent households.

*Data Source: University of Wisconsin Population Health Institute, 2015 County Health Rankings*

Not only does one's **education level** affect his or her health, education can have multi-generational implications that make it an important measure for the health of future generations. Evidence links maternal education with the health of her offspring. Parents' level of education affects their children's health directly through resources available to the children, and also indirectly through the quality of schools that the children attend.

*Data Source: United States Census Bureau, American Community Survey*

The relationship between **higher education** and improved health outcomes is well known, with years of formal education correlating strongly with improved work and economic opportunities, reduced psychosocial stress, and healthier lifestyles.

*Data Source: United States Census Bureau, American Community Survey*

**Homicides** are the number of deaths from assaults.

*Data Source: Arkansas Department of Health, Health Statistics Branch Query System*

High levels of **violent crime** compromise physical safety and psychological well-being. High crime rates can also deter residents from pursuing healthy behaviors such as exercising outdoors. Exposure to crime and violence has been shown to increase stress, which may exacerbate hypertension and other stress-related disorders and may contribute to obesity prevalence.

*Data Source: University of Wisconsin Population Health Institute, 2015 County Health Rankings*



**Injuries** are one of the leading causes of death. Unintentional injuries were the 5<sup>th</sup> leading cause and intentional injuries the 10<sup>th</sup> leading cause of U.S. mortality in 2010. The leading causes of death among unintentional injuries, respectively are: motor vehicle traffic, poisoning, and falls. Among intentional injuries the leading causes of death are: suicide by firearm, homicide by firearm, and suicide by suffocation, respectively. Unintentional injuries are a substantial contributor to premature death as the leading cause of death for persons under age 45.

*Data Source: Arkansas Department of Health, Health Statistics Branch Query System*

### **PHYSICAL ENVIRONMENTAL FACTORS**

The relationship between **elevated air pollution**, particularly fine particulate matter and ozone, and compromised health has been well documented. Negative consequences of ambient air pollution include decreased lung function, chronic bronchitis, asthma, and other adverse pulmonary effects.

*Data Source: University of Wisconsin Population Health Institute, 2015 County Health Rankings*

Studies estimate that **contaminants in drinking water** sicken 1.1 million people each year. Ensuring the safety of drinking water is important to prevent illness, birth defects, and death for those with compromised immune systems. Other health problems have been associated with contaminated water, including nausea, lung and skin irritation, cancer, kidney, liver, and nervous system damage.

*Data Source: University of Wisconsin Population Health Institute, 2015 County Health Rankings*

Good health depends on having homes that are safe and free from physical hazards. When **adequate housing** protects individuals and families from harmful exposures and provides them with a sense of privacy, security, stability and control, it can make important contributions to health. In contrast, poor quality and inadequate housing contributes to health problems such as infectious and chronic diseases, injuries and poor childhood development.

*Data Source: University of Wisconsin Population Health Institute, 2015 County Health Rankings*

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