

## DEMYSTIFYING THE RANKINGS:

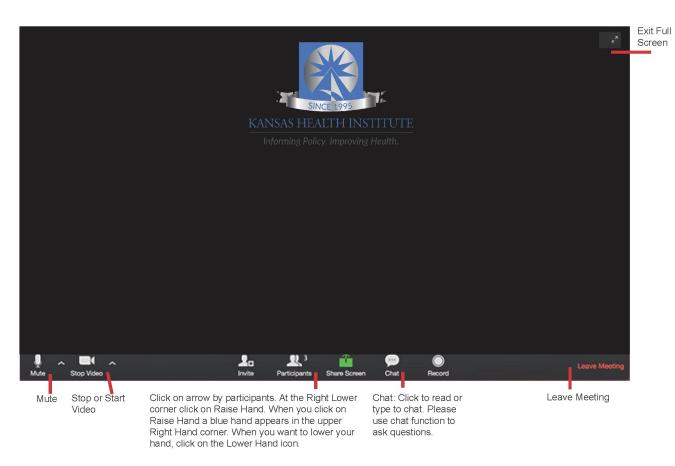
Practical Applications for Effective Policymaking

April 22, 2021 Virtual Convening

#### **Zoom Norms and Recommendations:**

- Have access to the Chat Window and be ready to type.
- Mute when not speaking.
- Use headphones to reduce background noise.
- Technical issues can be raised in the Chat Window, "IT Help".





#### Helpful Hints for KHI Zoom Meetings

If you would like to minimize the number of participants appearing on your screen, you can hide all nonvideo participants using the "three dots" that appear as you hover over a participant's window. If you have technical questions, please add them to the chat window. Thank you!

#### **WHO WE ARE**

- Nonprofit, nonpartisan educational organization based in Topeka.
- Established in 1995 with a multi-year grant by the Kansas Health Foundation and located directly across from Kansas Statehouse.
- Committed to convening meaningful conversations around tough topics related to health.

#### **TODAY'S AGENDA**

- 1. Considerations for interpreting rankings
- 2. Overview of three health-related rankings
  - Mental Health in America Rankings
  - America's Health Rankings
  - County Health Rankings & Roadmaps
- 3. Practical applications for policy-making
  - Panel discussion

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### **PANELISTS**



Brian McKiernan Commissioner for the Unified Government of Wyandotte County/Kansas City, Kansas, District 2



Mary C. Jones, LCMFT, LCAC
President and CEO
Mental Health Association of South Central Kansas





Hina Shah, M.P.H. Senior Analyst



Tatiana Lin, M.A. Senior Analyst & Strategy Team Leader



D. Charles Hunt, M.P.H. Senior Analyst

#### Hina Shah, Tatiana Lin & D. Charles Hunt

1.

## CONSIDERATIONS FOR INTERPRETING RANKINGS

# HOW ARE RANKINGS HELPFUL?



#### **Social Determinants of Health**



Who Publishes What is Published

Initial Launch Most Recent Edition

Unit of Analysis

Number of Data Sources

Indicators

**Domains** 

Composite Scores

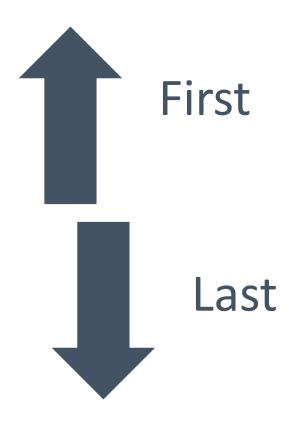
Weighting

Selection of Measures

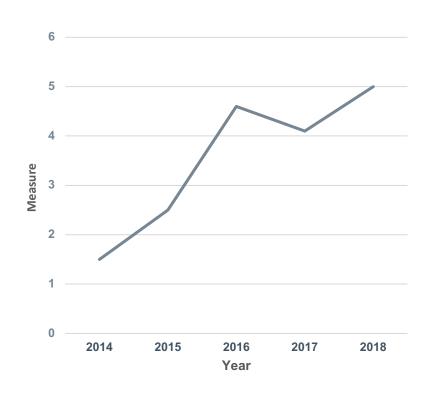
Data Years

Limitations

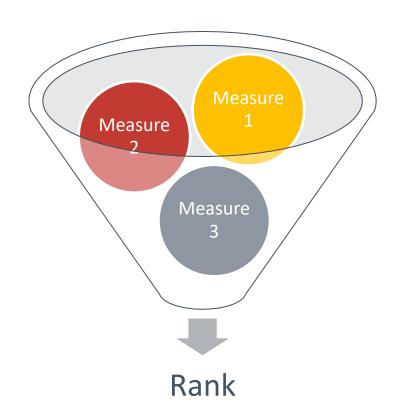
The rank of a state or county depends on what is happening in other states or counties, meaning rankings are a relative measure of health.



To monitor progress over time, it is important to examine the underlying measures because not all changes in rank translate into actual declines or improvements in health.



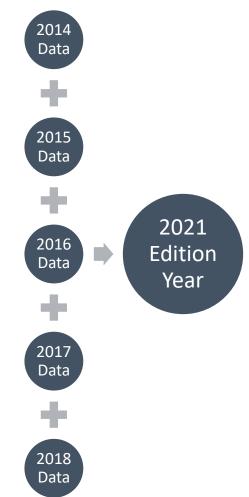
The measures that are used to compile the rankings are diverse, and their sources and methodologies can change over time.



While the most recently available data are used in the rankings, the edition year of the ranking is not the same as the associated data year(s), meaning there is a lag in the data.



For some measures, multiple years of data are combined to achieve a sufficient sample size and provide a reliable estimate.





### HOW TO USE RANKINGS

Rankings can serve as a starting point for conversations.





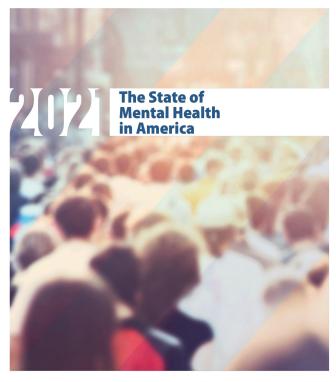
#### County Health Rankings & Roadmaps

Building a Culture of Health, County by County

Source: Mental Health America, America's Health Rankings, County Health Rankings & Roadmaps.

## MENTAL HEALTH IN AMERICA RANKINGS

### **ANNUAL REPORT**





#### DOMAINS AND TOPIC AREAS

Mental Health Issues

Substance Use Issues

Access to Insurance

Access to Adequate Insurance

Access to and Barriers to Accessing Mental Health Care

#### 2021 Measures

- 1. Adults with Any Mental Illness (AMI)
- 2. Adults with Substance Use Disorder in the Past Year
- 3. Adults with Serious Thoughts of Suicide
- 4. Youth with At Least One Major Depressive Episode (MDE) in the Past Year
- 5. Youth with Substance Use Disorder in the Past Year
- 6. Youth with Severe MDE
- 7. Adults with AMI who Did Not Receive Treatment
- 8. Adults with AMI Reporting Unmet Need
- 9. Adults with AMI who are Uninsured
- 10. Adults with Disability who Could Not See a Doctor Due to Costs
- 11. Youth with MDE who Did Not Receive Mental Health Services
- 12. Youth with Severe MDE who Received Some Consistent Treatment
- 13. Children with Private Insurance that Did Not Cover Mental or Emotional Problems
- 14. Students Identified with Emotional Disturbance for an Individualized Education Program
- 15. Mental Health Workforce Availability

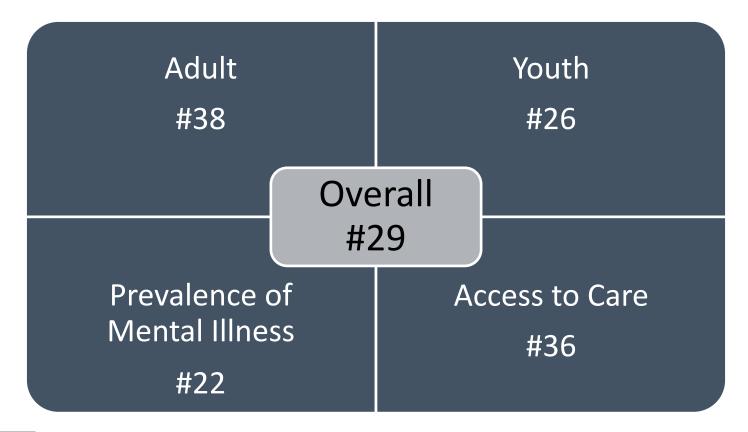
#### **METHODOLOGY**

A standardized score is calculated for each measure for each state

No weights are applied for any measure

State is ranked by sum (∑) of the standardized scores for all measures

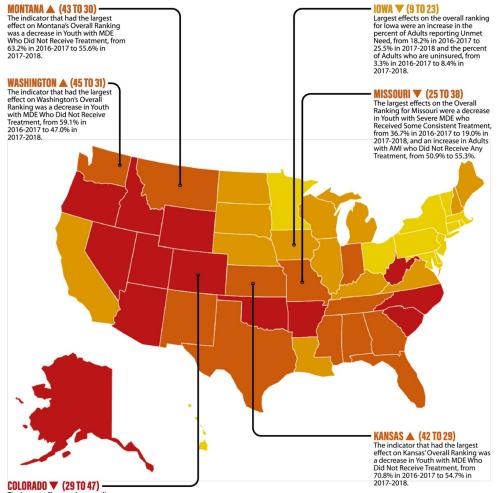
#### 2021 KANSAS MHA RANKINGS



Source: Mental Health America

# LARGEST CHANGES IN OVERALL RANKINGS: 2020-2021

 The indicator that had the largest effect on the Kansas Overall Ranking was a decrease in Youth with a Major Depressive Disorder Who Did Not Receive Treatment.



The largest effect on the overall ranking for Colorado was an increase in the prevalence of Adults with Substance Use Disorder, from 9.07% in 2016-2017 to 11.9% in 2017-2018.

### INFORM POLICYMAKING

Were there any significant policy changes or program initiatives for Youth with Major Depressive Episode between 2016-2018?

Mental Health America - Ranked Measures	KS Rank					
1. Adults with Any Mental Illness (AMI)						
2. Adults with Substance Use Disorder in the Past Year						
3. Adults with Serious Thoughts of Suicide						
4. Youth with At Least One Major Depressive Episode (MDE) in the Past Year						
5. Youth with Substance Use Disorder in the Past Year						
6. Youth with Severe MDE						
7. Adults with AMI who Did Not Receive Treatment						
8. Adults with AMI Reporting Unmet Need						
9. Adults with AMI who are Uninsured						
10. Adults with Cognitive Disability who Could Not See a Doctor Due to Costs						
11. Youth with MDE who Did Not Receive Mental Health Services	#18					
12. Youth with Severe MDE who Received Some Consistent Treatment	#21					
13. Children with Private Insurance that Did Not Cover Mental or Emotional Problems	#34					
14. Students Identified with Emotional Disturbance for an Individual Education Program						
15. Mental Health Workforce Availability	#36					
Health Institute Source: 2021 The State of Mental Health in America Report.						

Mental Health America - Ranked Measures	KS Rank					
1. Adults with Any Mental Illness (AMI)						
2. Adults with Substance Use Disorder in the Past Year						
3. Adults with Serious Thoughts of Suicide						
4. Youth with At Least One Major Depressive Episode (MDE) in the Past Year						
5. Youth with Substance Use Disorder in the Past Year	#13					
6. Youth with Severe MDE	#29					
7. Adults with AMI who Did Not Receive Treatment	#12					
8. Adults with AMI Reporting Unmet Need	#51					
9. Adults with AMI who are Uninsured	#37					
10. Adults with Cognitive Disability who Could Not See a Doctor Due to Costs	#36					
11. Youth with MDE who Did Not Receive Mental Health Services	#18					
12. Youth with Severe MDE who Received Some Consistent Treatment	#21					
13. Children with Private Insurance that Did Not Cover Mental or Emotional Problems	#34					
14. Students Identified with Emotional Disturbance for an Individual Education Program	#39					
15. Mental Health Workforce Availability	#36					
Source: 2021 The State of Mental Health in America Report.						

### MHA MEASURE – ADULTS WITH AMI WHO REPORT UNMET NEEDS

Edition Year	Data Year	Kansas	lowa	Oklahoma	Texas	United States
2015	2010-2012	28.1 (#51)	18.2 (#7)	18.6 (#11)	19.3 (#14)	20.8
2017	2009-2014	22.7 (#38)	21.7 (#33)	19.2 (#20)	18.3 (#8)	20.3
2019	2014-2016	21.0 (#29)	19.2 (#13)	19.8 (#17)	16.7 (#3)	20.6
2021	2017-2018	31.6 (#51)	25.5 (#35)	23.5 (#21)	19.9 (#3)	23.6



# Examine the values of the underlying measures.

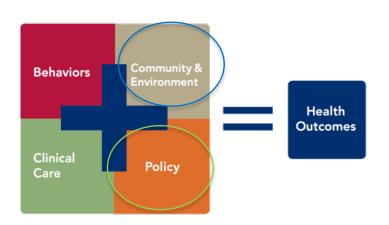
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## AMERICA'S HEALTH RANKINGS

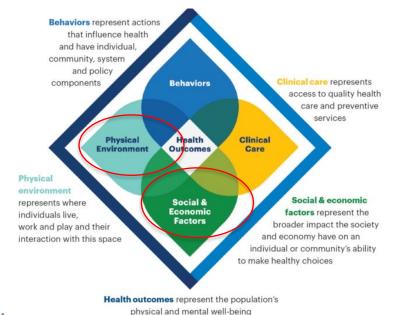


#### **NEW VS. OLD MODEL**

Old Model - Before 2020



#### New Model - 2020



Source: America's Health Rankings

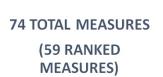
#### **REPORTS**

- 2020 Health of Women and Children Report (first published in 2016)
- 2020 Senior Report (first published in 2013)
- 2020 Health of Those Who Have Served
- Annual Report

### **ANNUAL REPORT**









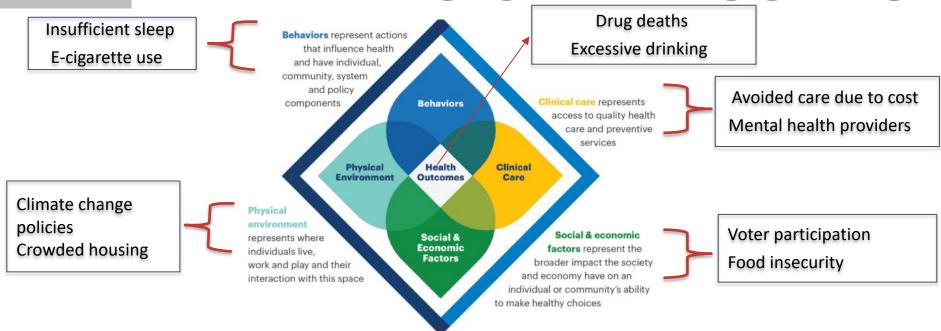
**20 DATA SOURCES** 

#### **2020 ANNUAL REPORT**



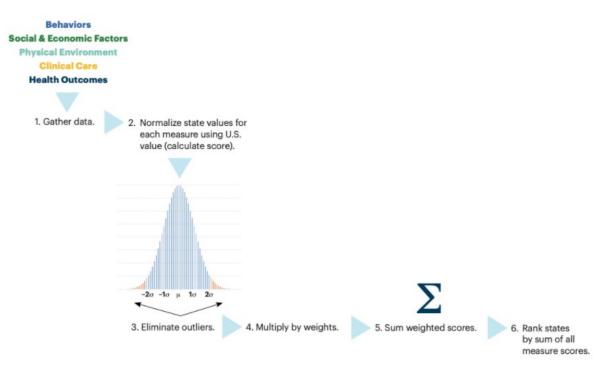
Health outcomes represent the population's physical and mental well-being

### **EXAMPLES OF MEASURES**



**Health outcomes** represent the population's physical and mental well-being

### **METHODOLOGY**



## **WEIGHTS**

CATEGORY WEIGHTS FOR ANNUAL REPORT MODEL				
Category	Weight			
Social & Economic Factors	0.30			
Physical Environment	0.10			
Clinical Care	0.15			
Behaviors	0.20			
Health Outcomes	0.25			

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# **WEIGHTS**

	ANNUAL REPORT MEASURES, WEIGHTS AND CORRELATION WITH HEALTH				
	Measure Name	Weight	Positive Effec		
	Occupational Fatalities	0.015	N		
	Public Health Funding	0.015	Y		
	Violent Crime	0.025	N		
	Economic Hardship Index	0.036	N		
	Food Insecurity	0.025	N		
	Income Inequality	0.025	N		
	High School Graduation	0.025	Υ		
	High School Graduation Racial Gap	0.025	N		
	Adverse Childhood Experiences	0.036	N		
	High-Speed Internet	0.015	Υ		
	Residential Segregation	0.025	N		

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### Kansas

State Health Department Website: kdheks.gov

#### Summary

#### Strengths:

Kansas

- Low income inequality
   Low prevalence of severe housing problems
- Low prevalence of low birthweight

#### Challenges:

· High prevalence of household food insecurity

- Low prevalence of exercise
- High prevalence of obesity

#### **Highlights:**

#### OCCUPATIONAL FATALITIES

▼52% between 1988-1990 and 2016-2018 from 11.5 to 5.5 deaths per 100,000 workers

#### HIGH-SPEED INTERNET

▲9% between 2015 and 2018 from 81.4% to 88.4% of households

#### HPV IMMUNIZATION

**444%** between 2017 and 2019 from 34.4% to 49.5% of adolescents ages 13-17

#### CHLAMYDI

▲66% between 2007 and 2018 from 294.7 to 488.5 cases per 100,000 population

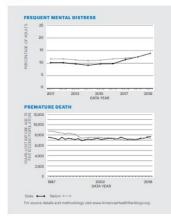
#### FREQUENT PHYSICAL DISTRESS

▲16% between 2015 and 2019 from 10.0% to 11.6% of adults

#### .....

▲ 41% between 2009 and 2018 from 13.8 to 19.5 deaths per 100.000 population

#### **Trends**



#### **Economic Hardship Index**

The economic hardship index compares financial strain between states. It combines six population-level social and economic measures to provide a more complete picture of the difficulties faced by communities than a single measure could provide.

Measure	State Value
Crowded Housing (units with more than one person/room)	1.9%
Dependency (ages 0-17 or ages 65+)	40.4%
Education (ages 25+ without a high school diploma)	8.2%
Per Capita Income	\$32,885
Poverty (households below the poverty level)	11.6%
Unemployment (ages 16-64)	3.9%

#### **Multiple Chronic Conditions**

Chronic conditions are medical conditions that isst more than a year, require ongoing medical attention and/or limit activities of daily living. Adults with multiple chronic conditions represent one of the highest-need segments of the population.

Measure	State Value	
Arthritis	25.6%	
Asthma	9.9%	
Cancer (excluding skin)	7.6%	
Cardiovascular Disease	8.2%	
Chronic Kidney Disease	2.7%	
Chronic Obstructive Pulmonary Disease	6.4%	
Depression	19.9%	
Diabetes	10.8%	



### Kansas

### **2020 ANNUAL REPORT**

Measure	Rating	2020 Value	2020 Rank
Social & Economic Factors * All Social and Economic Measures	***	0.168	21
Community and Family Safety - Annual * Sum of weighted z-scores	++	-0.415	37
Occupational Fatalities  Deaths per 100,000 workers	++	5.5	34
Public Health Funding Dollars per person	++	\$64	40
Violent Crime Offenses per 100,000 population	++	411	34
Economic Resources - Annual * Sum of weighted z-scores	+++	0.264	26
Economic Hardship Index Index from 1-100	+++	43	22

#### 1 - 10 ### 11 - 20 ### 21 - 30 ## 31 - 40 ## 41 - 50

## **KANSAS: 2020 RANKING**



In 2020 - no state ranking due to Covid-19

Source: America's Health Rankings

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# COUNTY HEALTH RANKINGS AND ROADMAPS

### County Health Rankings & Roadmaps

Building a Culture of Health, County by County

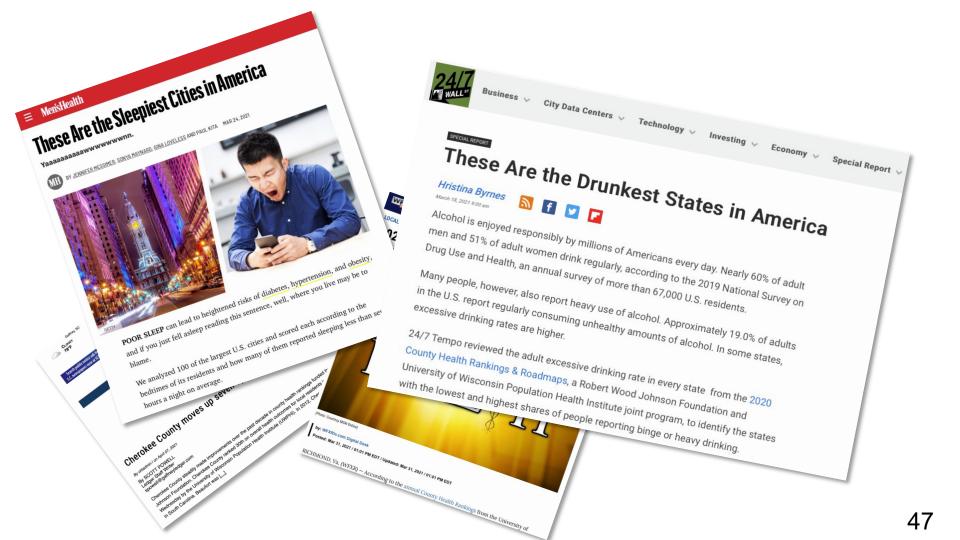
A Robert Wood Johnson Foundation program

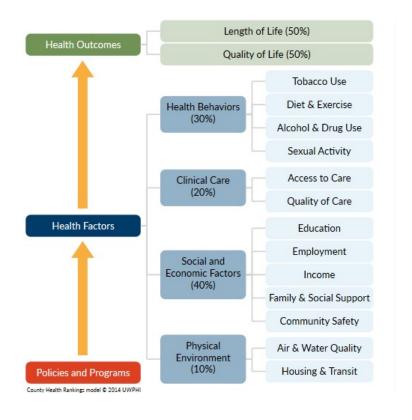
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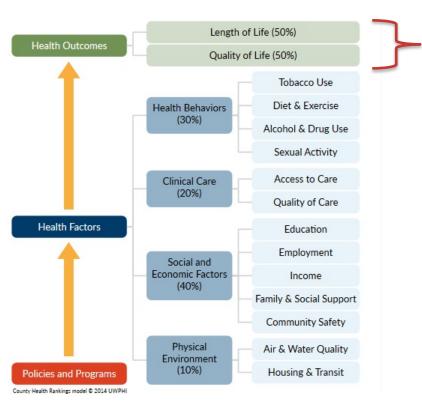




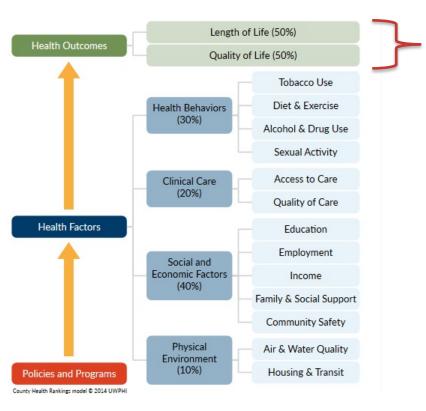






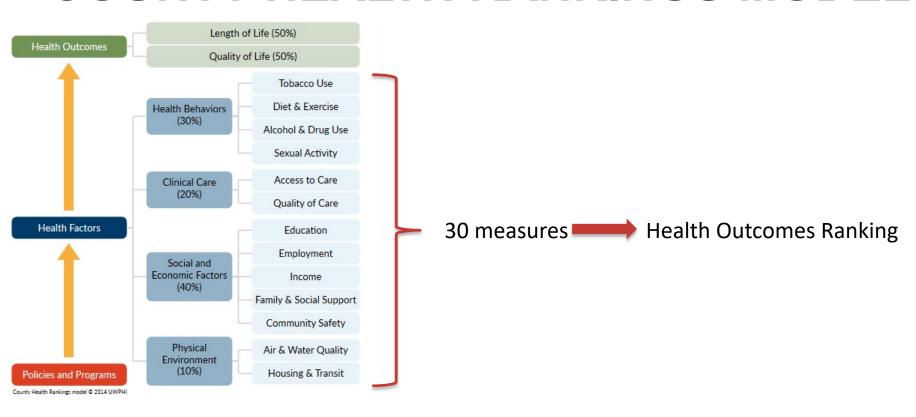


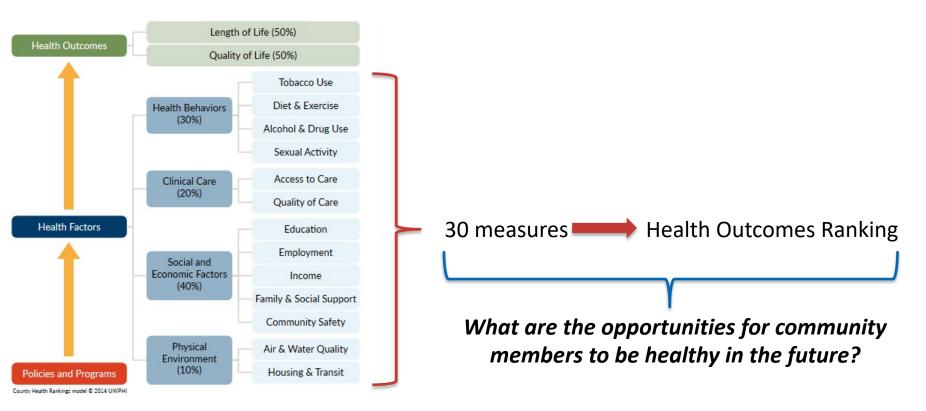
5 measures Health Outcomes Ranking

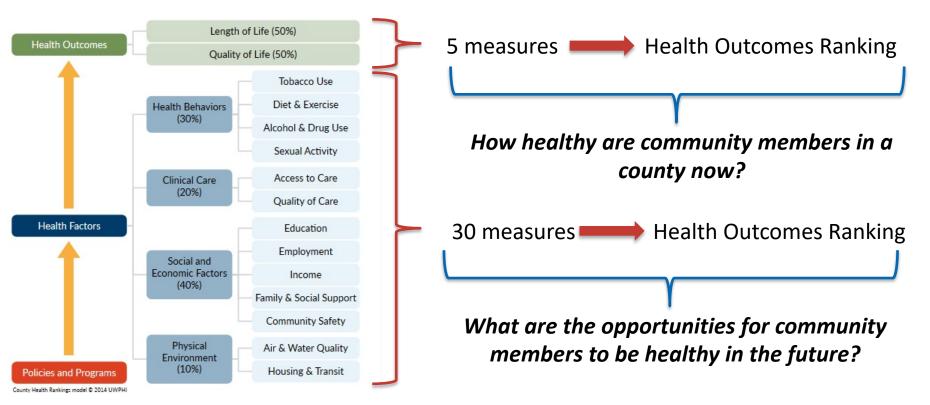




How healthy are community members in a county now?

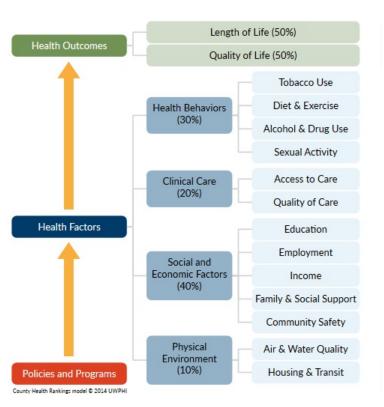


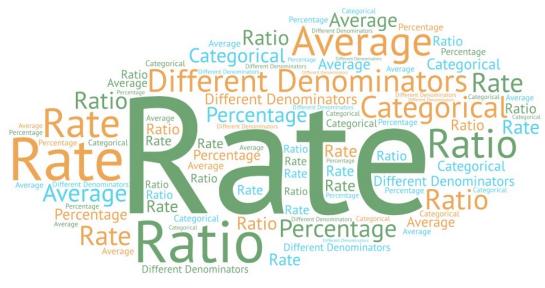


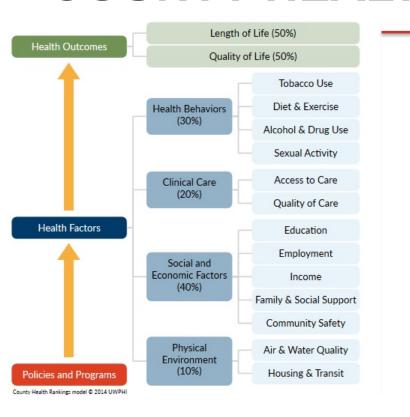


# HOW ARE THE RANKS CALCULATED?

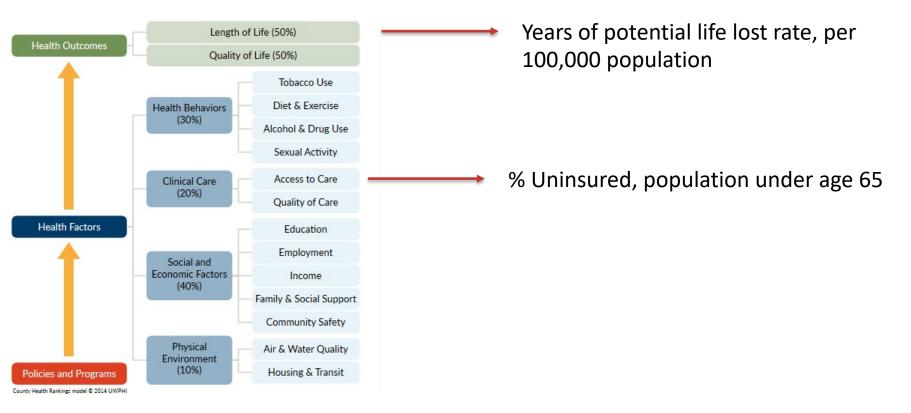


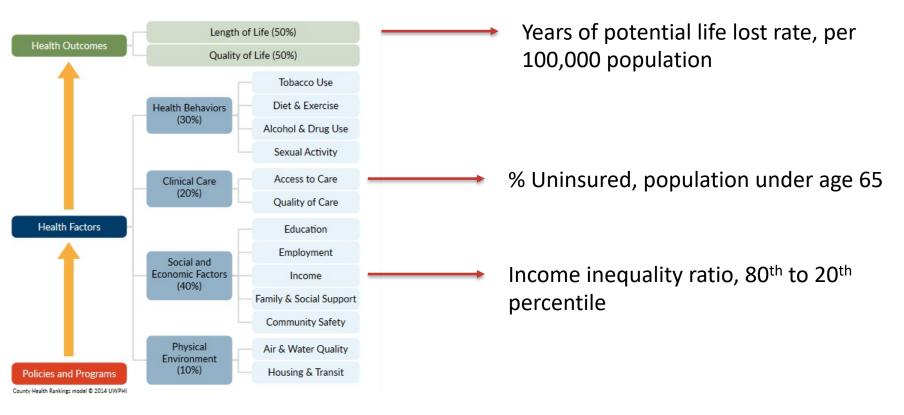






Years of potential life lost rate, per 100,000 population



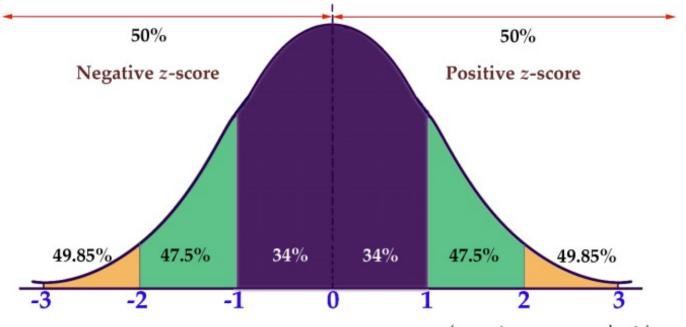


# STEP 1: STANDARDIZING MEASURES

$$Z = \frac{(County \, Value) - (Average \, of \, Counties \, in \, State)}{(Standard \, Deviation \, of \, Counties \, in \, State)}$$

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# STEP 1: STANDARDIZING MEASURES



(percentages are approximate)

## POP QUIZ!...TRUE OR FALSE?

The higher the Z-score, the better—or healthier—a county is.

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## STEP 2: REVERSE CODING

- Food environment index
- Access to exercise opportunities
- Flu Vaccinations
- Mammography screening
- High school completion
- Some college (post-secondary education)
- Social associations

# STEP 3: COMPOSITE SCORES

$$Composite\ score = \sum w_i\ Z_i$$

## **STEP 4: RANKING**

Better ranking (#1)

Lower composite score

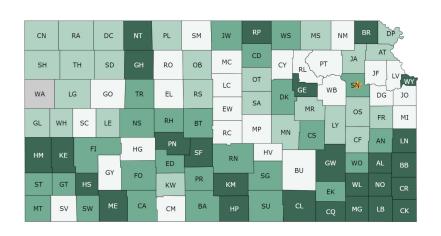
Higher composite scores

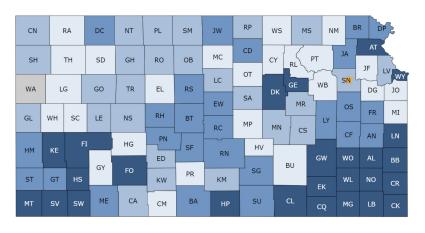
Less desirable ranking (#105)

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### 2021 Health Outcomes - Kansas

### 2021 Health Factors - Kansas







County Health
Rankings & Roadmaps
Building a Culture of Health, County by County

County Health Rankings & Roadmaps Building a Culture of Health, County by County



# Go beyond the snapshot.

## **PANELISTS**



Brian McKiernan Commissioner for the Unified Government of Wyandotte County/Kansas City, Kansas, District 2



Mary C. Jones, LCMFT, LCAC
President and CEO
Mental Health Association of South Central Kansas



"Rather than providing the final answers, the Rankings serve as a 'call to action' to collect better local data and engage community partners in collective action."

(2015 editorial by Remington in Health Services Research)









# THANK YOU Any questions?

You can connect with us at:

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Informing Policy. Improving Health.