GEORGIA HEALTHY CITIES

Your city
Your health
Your voice

Georgiahealthycities.org
Proposal Guidelines

• Dig into the 500 Cities dataset and design innovative solutions that address social factors driving community health outcomes.

• Design innovative solutions (or additional data analyses) which address social factors that influence health, such as housing, education, and transportation.

• The ideas generated can help build the foundation for more comprehensive cross-collaboration to foster a broad culture of Health and guide other communities in how to use data more effectively.
The social determinants of health framework

Conditions in the places where people live, learn, work, and play affect a wide range of health risks and outcomes. – HealthyPeople 2020
The social determinants of health framework

- Neighborhood and Built Environment
- Health and Health Care
- Social and Community
- Education
- Economic Stability
Our Proposal – Georgia Healthy Cities

• Develop Health and Wellness Toolkits for (4) Georgia Cities
• Drive Health conversations at the local level
• Strengthen community partnerships
• Have an open community conversation about health policy interventions and health equity
Health and Wellness Toolkits

Components:

1. ANALYTICS

2. VISUALIZATIONS

3. COMMUNITY WORKSHOPS
ANALYTICS
Health at the neighborhood level: The CDC’s 500 Cities project

• To help communities pinpoint where policy interventions may be most effective, the CDC created the 500 Cities dataset.

• This dataset uses modeling techniques to estimate overall health and disease risk for the country’s largest 500 Cities.

• The dataset makes it possible to examine the health of a city overall and at the neighborhood scale.

The dataset models disease prevalence, and is thereby more comprehensive than just diseases observed in a hospital setting.
## 500 Cities health measures

### Health Outcomes
- Arthritis
- Current asthma
- High blood pressure
- Cancer
- High cholesterol
- Chronic kidney disease
- COPD
- Coronary heart disease
- Diagnosed diabetes
- Mental health not good for 14 or more days
- Physical health not good for 14 or more days
- All teeth lost among adults age 65 or older
- Stroke

### Prevention
- Current lack of health insurance
- Visits to doctor for routine checkup
- Visits to dentist or dental clinic
- Taking medicine for high blood pressure control
- Cholesterol screening
- Mammography among women age 50 to 74
- Older adults age 65 and older who are up to date on core preventative services
- Colonoscopy among adults ages 50 to 75
- Well woman checkup among women 21 to 65

### Unhealthy behaviors
- Binge drinking
- Current smoking
- No leisure-time physical activity
- Obesity
- Sleeping less than 7 hours

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For additional details
Visit cdc.gov/500cities for additional details about the data and the model

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We developed a set of ranking methods for comparing cities and census tracts across both individual and composite health characteristics.

For each city, an overall health ranking was developed along with rankings for the three main indicator groupings of health outcomes, prevention, and unhealthy behaviors.

For each census tract and across each of the 27 health indicators, a national percentile rank value was calculated.

We examined five different criteria:
- Degree of Disparity
- Raw Magnitude
- Proportional Magnitude
- Ranking Threshold
- Change between the Years
### Overall Health Rankings (2017 data)

**High**

<table>
<thead>
<tr>
<th>City</th>
<th>Overall Health Rank</th>
</tr>
</thead>
<tbody>
<tr>
<td>San Ramon, CA</td>
<td>1</td>
</tr>
<tr>
<td>Newton, MA</td>
<td>2</td>
</tr>
<tr>
<td>Cary, NC</td>
<td>3</td>
</tr>
<tr>
<td>Pleasanton, CA</td>
<td>4</td>
</tr>
<tr>
<td>Plymouth, MN</td>
<td>5</td>
</tr>
</tbody>
</table>

**Middle**

<table>
<thead>
<tr>
<th>City</th>
<th>Overall Health Rank</th>
</tr>
</thead>
<tbody>
<tr>
<td>New York, NY</td>
<td>247</td>
</tr>
<tr>
<td>Sacramento, CA</td>
<td>248</td>
</tr>
<tr>
<td>Fayetteville, AR</td>
<td>249</td>
</tr>
<tr>
<td>Vancouver, WA</td>
<td>250</td>
</tr>
<tr>
<td>Little Rock, AR</td>
<td>251</td>
</tr>
<tr>
<td>Manchester, NH</td>
<td>252</td>
</tr>
<tr>
<td>Omaha, NE</td>
<td>253</td>
</tr>
</tbody>
</table>

**Low**

<table>
<thead>
<tr>
<th>City</th>
<th>Overall Health Rank</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cleveland, OH</td>
<td>494</td>
</tr>
<tr>
<td>Flint, MI</td>
<td>495</td>
</tr>
<tr>
<td>Youngstown, OH</td>
<td>496</td>
</tr>
<tr>
<td>Reading, PA</td>
<td>497</td>
</tr>
<tr>
<td>Camden, NJ</td>
<td>498</td>
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<tr>
<td>Detroit, MI</td>
<td>499</td>
</tr>
<tr>
<td>Gary, IN</td>
<td>500</td>
</tr>
</tbody>
</table>

Download the full file: [https://georgiahealthycities.org/methodology/](https://georgiahealthycities.org/methodology/)
4 target cities in Georgia

Among the country’s largest 500 cities, Columbus ranks:

➢ **#396 – Overall health**
➢ **#436 – Health outcomes**
➢ **#174 – Prevention**
➢ **#431 – Unhealthy behaviors**

<table>
<thead>
<tr>
<th>City</th>
<th>Overall Health Rank</th>
<th>Health Outcomes Rank</th>
<th>Prevention Rank</th>
<th>Unhealthy Behaviors Rank</th>
</tr>
</thead>
<tbody>
<tr>
<td>Johns Creek</td>
<td>8</td>
<td>19</td>
<td>8</td>
<td>47</td>
</tr>
<tr>
<td>Roswell</td>
<td>41</td>
<td>66</td>
<td>18</td>
<td>114</td>
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<tr>
<td>Sandy Springs</td>
<td>42</td>
<td>85</td>
<td>16</td>
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<td>Atlanta</td>
<td>266</td>
<td>374</td>
<td>123</td>
<td>308</td>
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<tr>
<td>Athens</td>
<td>375</td>
<td>433</td>
<td>238</td>
<td>332</td>
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<tr>
<td>Warner Robins</td>
<td>381</td>
<td>429</td>
<td>185</td>
<td>413</td>
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<tr>
<td>Columbus</td>
<td>396</td>
<td>436</td>
<td>174</td>
<td>431</td>
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<td>Augusta</td>
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<td>Savannah</td>
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<td>450</td>
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<tr>
<td>Albany</td>
<td>485</td>
<td>490</td>
<td>305</td>
<td>483</td>
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<tr>
<td>Macon</td>
<td>492</td>
<td>497</td>
<td>386</td>
<td>491</td>
</tr>
</tbody>
</table>

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VISUALIZATIONS
Overall Health Ranking at the neighborhood level: Columbus, Georgia

500 Cities City-wide Overall Health Rank

City-wide Overall Health Rank
- > 42 - 53
- > 31 - 42
- > 21 - 31
- > 10 - 21
- 1 - 10

Visit bit.ly/ColumbusHealthExplorer for more.
5 Health Issues
When compared to the country’s largest 500 Cities, Columbus residents have elevated prevalence rates of: **Diabetes, Arthritis, Asthma, COPD and Smoking**

➢ **Diabetes**

[Graph showing the distribution of diabetes prevalence by tracts]
5 Health Issues

When compared to the country’s largest 500 Cities, Columbus residents have elevated prevalence rates of: **Diabetes, Arthritis, Asthma, COPD and Smoking**

#### Arthritis

![Arthritis Chart]

Percentile rank (nationwide)

[Georgiahealthycities.org](http://Georgiahealthycities.org)
5 Health Issues
When compared to the country’s largest 500 Cities, Columbus residents have elevated prevalence rates of: Diabetes, Arthritis, Asthma, COPD and Smoking

➢ Asthma
5 Health Issues
When compared to the country’s largest 500 Cities, Columbus residents have elevated prevalence rates of: Diabetes, Arthritis, Asthma, COPD and Smoking
5 Health Issues
When compared to the country’s largest 500 Cities, Columbus residents have elevated prevalence rates of: **Diabetes, Arthritis, Asthma, COPD and Smoking**

➢ Smoking

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Exploring the relationship of related diseases

- Diabetes
- Kidney Failure
- Stroke
➢ Kidney Failure

Chronic kidney disease
- 4.74%-5.4%
- 3.6%-4.73%
- 2.47%-3.59%
- 1.34%-2.46%
- 0.2%-1.33%
- 0-0.19%

➢ Diabetes

Diagnosed diabetes
- 21.54%-24.9%
- 16.37%-21.53%
- 11.3%-16.36%
- 6.05%-11.2%
- 2.5%-6.04%
Stroke

- 7.26%-9.4%
- 5.1%-7.25%
- 2.94%-5.09%
- 0.77%-2.93%
- 0-0.76%

Diabetes

- 21.54%-24.9%
- 16.37%-21.53%
- 11.3%-16.36%
- 6.05%-11.2%
- 2.5%-6.04%

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Access to Healthy Food

Diagnosed diabetes
- 21.54%-24.9%
- 16.37%-21.53%
- 11.3%-16.36%
- 6.05%-11.2%
- 2.5%-6.04%

WIC Authorized Stores

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Access to Care

Diagnosed diabetes
- 21.54%-24.9%
- 16.37%-21.53%
- 11.3%-16.36%
- 6.05%-11.2%
- 2.5%-6.04%

Federally Qualified Health Centers

Hospitals
- Emergency Services Available
- Other

Medicaid-accepting providers

Estimated # of providers who accept Medicaid within the visible portion of the
COMMUNITY WORKSHOPS
Community Partnership Development meetings

• We held a CPD meeting in every city

• CPD meetings were critical:
  • Provided the first introduction of our project and our team.
  • Invited community stakeholders from different cross sectors including universities, health clinics, electeds and community partners.
  • Identifed the community’s perspective of the most pressing health social determinants.
Health and Wellness workshops

• We held a workshop in every city
• At each workshop, we:
  • Reported out and discussed each city's highest health risks,
  • Conducted trainings on how to use the data dashboard and storymap visualizations tools, and
  • Facilitated discussion around the systemic causes and evidence-based policy interventions for areas of concern.
Common Themes

• Representatives from over 145 different organizations attended the CDP meetings and Health and Wellness workshops.

• Participants are interested in more systemic partnerships, potentially coordinated through the needs assessment and strategic planning activities conducted by health departments, city planning and development departments and the CHNA process.

• Obesity, chronic disease, asthma, mental health, child development are common health concerns across all cities.

• Poverty, employment and benefits, education, housing and homelessness, and transportation are also common social and economic concerns across all cities.
Community Questions

• The awareness of persistent disparities contribute to the stigmas which prevents solutions.

• Can the health inequity issues be solved in a generation?

• Can big changes be made now that will help today’s kids become healthy adults and what does it mean for the future if there are major gaps in quality child care, parents with mental illness, and kids who aren’t getting adequate health care or developmental support?

• How can the general public and health advocates use the data to change legislative policies?
Website:
GeorgiaHealthyCities.org

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