

Health Disparities in WV and the WVU Health Disparities Program

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12/1/2016



Health Disparities

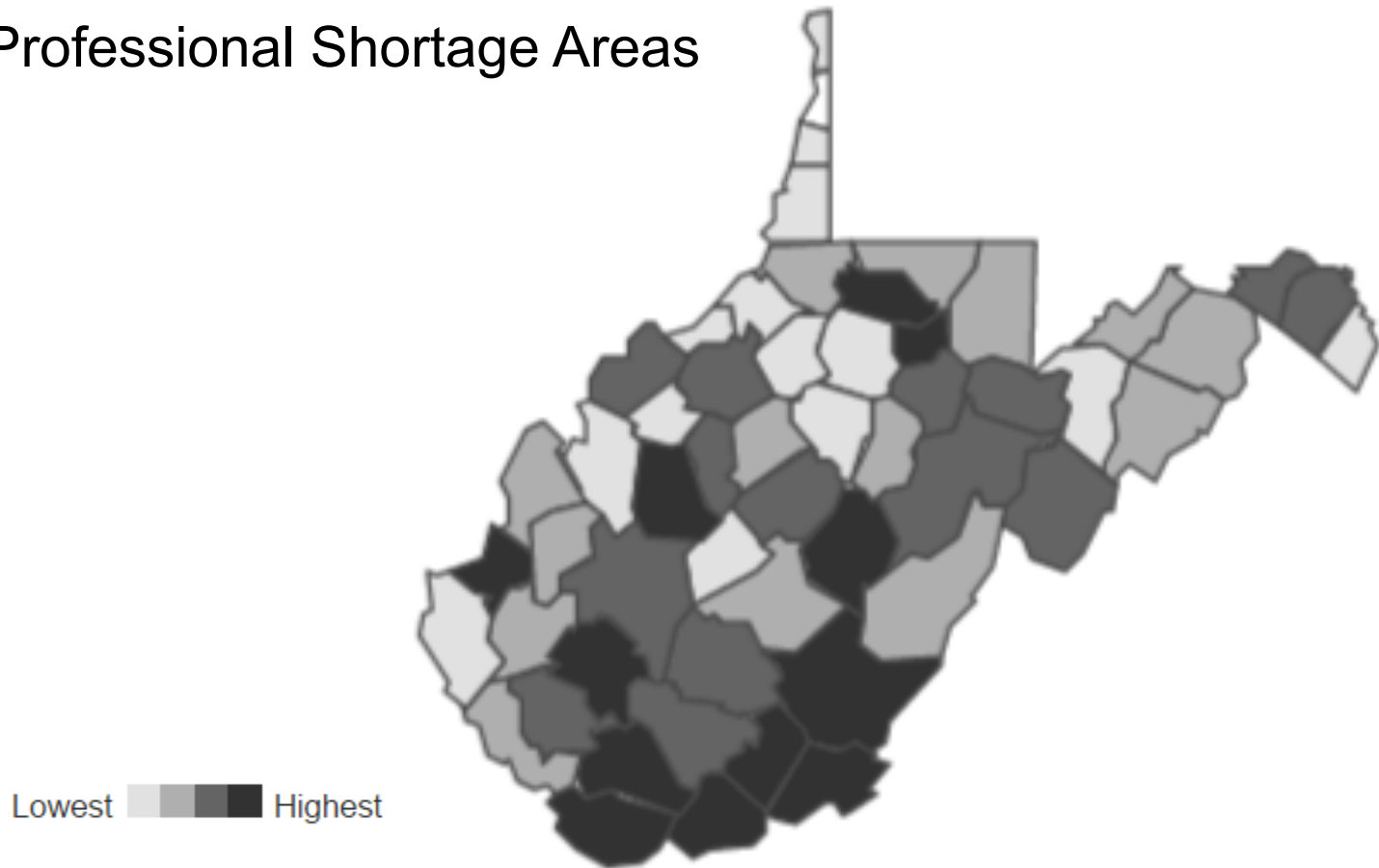
Inequalities in the prevalence, morbidity, mortality, or survival rates in a given population as compared to the health status of the general population.

Disparities in WV

- Provider shortage areas
- Geography
- Socioeconomic Status
- Health Insurance status
- Education

Access to Care

Health Professional Shortage Areas



Source: Health Services and Resources Administration

Access to Care

- Number of Stroke Neurologists (fellowship trained) for the entire state: 5
- Oncologist density of 4.1 specialists per 100,000 residents
- 46.5% of elderly lung cancer patients in rural and medically-underserved areas of WV received guideline-concordant care

Geography



Socioeconomic Status

- Average per capita income - WV: \$23,327
- Average per capita income - US: \$28,555
- Average household income – WV: \$41,576
- Average household income – US: \$53,482

- Poverty rate in WV: 17.9%
- Poverty rate in US: 13.5%

Health Insurance Status

- Prior to Affordable Care Act:
 - 18% Uninsured rate
- Post Affordable Care Act:
 - Enrolled more than 150,000 into Medicaid through Medicaid Expansion Program
 - Enrolled additional people through health care exchange
 - 6-8% Uninsured rate

Education

- 89.5% High school graduation rate
- 18.7% Obtain a Bachelor's degree

Health Outcomes

Health Measure	US Value	WV Value	WV Rank
Cancer Deaths (per 100,000 population)	146.1	221.6	48
Cardiovascular Deaths (per 100,000 population)	186.5	299.6	45
Dental Visits (% of adults by self report)	74.9	54.2	50
Diabetes Mellitus (% of adults)	7.1	14.1	50
Drug Deaths (per 100,000 population)	2.7	32.4	50
Heart Attack (% of adults by self report)	2.9	7.4	50
Heart Disease (% of adults by self report)	2.4	7.8	50
High Blood Pressure (% of adults by self report)	24.2	41	50
Obesity (% of Population)	21.3	35.7	49
Poor Physical Health Days (Days in previous 30)	2.9	5.3	50
Premature Death (Years lost per 100,000 population)	5,414	10,129	49
Preventable Hospitalizations (discharges per 1,000 Medicare beneficiaries)	24.4	81.2	49
Smoking (% of adults by self report)	9.7	26.7	50
Stroke (% of adults by self report)	1.8	4.6	48

Data Source: America's Health Rankings, 2015 Annual Report

Health-Related Quality of Life Measures

	West Virginia	United States
14 or More Physically Unhealthy Days per Month	16.9%	11.1%
14 or More Mentally Unhealthy Days per Month	14.9%	10.7%
Fair or Poor Self-Rated Worth	23.4%	16.1%

Behavioral Risk Factor Surveillance System (BRFSS)/CDC

Use data...

- Identify the disparities
- Look for the story
- Drives the research
- Develops the intervention
- Leads to dissemination
- Maybe the science is dissemination research, maybe it is systems-based practice change, maybe it is new drug discovery addressing something unique to our population, etc.

Bright Spots

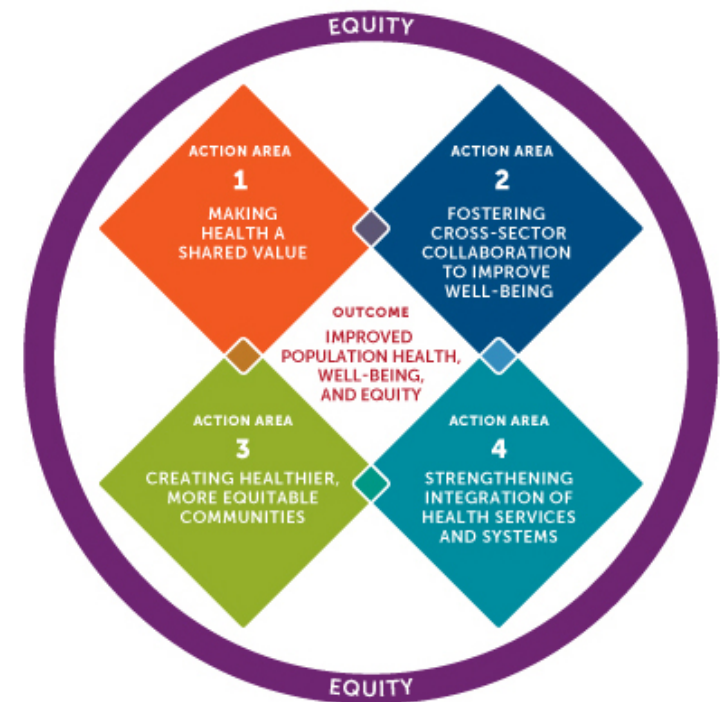
- Changing the narrative
- Building on the strengths of the population
- Identifying places and people that are doing better than expected given their resources

Culture of Health

The overall approach uses the RWJF Culture of Health framework:

- 1. Making Health a Shared Value**
- 2. Fostering Cross-Sector Collaboration to Improve Well-Being**
- 3. Creating Healthier, More Equitable Communities**
- 4. Strengthening Integration of Health Services and Systems**

Other typical controls (e.g. sociodemographic)



Delineating Bright Spots

- Identify Appalachian counties with better than expected health.
- Identify the relationship between each of 19 outcomes and 29 drivers among Appalachian and “Appalachian-like” counties.
- Determine predicted values for each outcome in each Appalachian county given its drivers.
- Calculate the gap between predicted and observed values for each outcome.
- Find the counties with the largest average residual. These counties are, on average, the most “unexpectedly healthy” and therefore “Bright Spots.”

Outcome Measures

Category	Measure
Behavioral Health	Suicide Incidence Depression Prevalence Excessive Drinking Poisoning Mortality Opioid Prescription Rates
Children	Low Birthweight Births Infant Mortality
Mortality	Heart Disease Deaths Years of Potential Life Lost Rate Cancer Deaths Injury Deaths Stroke Deaths COPD Deaths

Category	Measure
Morbidity	Physically Unhealthy Days Mentally Unhealthy Days Medicare HCCs Diabetes Prevalence Obesity Prevalence
Health Care Systems and Utilization	Heart Disease Hospitalizations

Driver Measures

Category	Measure
Children	Teen Birth Rate
Environment	Full-Service Restaurants / 1,000 Pop Access to Exercise Opportunities Average Daily Particulate Matter 2.5 Grocery Stores / 1,000 Pop Student-Teacher Ratio Average Travel Time To Work
Health Behaviors	% Adult Smokers % Physically Inactive Chlamydia Rate
Health Care System and Utilization	Primary Care Physician Ratio Dentist Ratio Specialist Physician Ratio Mental Health Provider Ratio Electronic Prescription Adoption Uninsured Rate Under 65

Category	Measure
Quality	A1C Screening Rates for Persons with Diabetes Mammogram Screening Rates
Social Determinants	% Employed in Social Assistance % Single-Parent Households SNAP Benefits per Capita Households No Car & Low Access to Stores % With Housing > 30% Income Composite Index Value Social Association Rate % Using Disability Benefits % Adults with Some College Education Poverty Rate Median Income

Bright Spots: Top Ten Residuals

Non-Metro

Metro

County	State	Avg. Residual
Wayne	Kentucky	0.71
Grant	West Virginia	0.67
Noxubee	Mississippi	0.64
McCreary	Kentucky	0.62
Morgan	Kentucky	0.57
Calhoun	West Virginia	0.55
Russell	Kentucky	0.54
Bledsoe	Tennessee	0.53
Pulaski	Kentucky	0.52
Hardy	West Virginia	0.49

County	State	Avg. Residual
Wirt	West Virginia	0.44
Hale	Alabama	0.41
Clay	West Virginia	0.40
Madison	North Carolina	0.35
Henderson	North Carolina	0.34
Sequatchie	Tennessee	0.33
Tioga	New York	0.32
Whitfield	Georgia	0.31
Marshall	Mississippi	0.29
Jefferson	West Virginia	0.29

WVU Health Disparities Program

- Mission: fostering multidisciplinary collaboration among researchers and practitioners across West Virginia to achieve health equity in the Appalachian region.

WVU Health Disparities Program

- Programming
 - Highlights health disparities research across the University campus
 - Promotes collaboration by focusing on funding announcements and networking sessions
 - Shares available data resources and statewide partnerships that can be helpful in building research proposals

WVU Health Disparities Program

- Planning/Implementing
 - “Meeting of the Minds” sessions for the Spring Semester
 - Expansion of Steering Committee to include representation from all Colleges and Schools across the campus
 - Increase in the Program’s visibility and mission, both inside and outside the institution
 - Strategic plan completion

Questions/Discussion

PARTNERING FOR BETTER HEALTH



West Virginia
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