HEALTH DISPARITIES IN APPALACHIA

The first report in a series exploring health issues in Appalachia

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Appalachian Regional Commission

The Appalachian Regional Commission (ARC) provided funding, leadership, and project management for the project. Established in 1965, ARC is a regional economic development agency that represents a partnership of federal, state, and local government. ARC’s mission is to innovate, partner, and invest to build community capacity and strengthen economic growth in Appalachia to help the Region achieve socioeconomic parity with the nation.

Foundation for a Healthy Kentucky

The non-profit Foundation for a Healthy Kentucky was the grantee and fiscal agent for the project. Since 2001, the Foundation for a Healthy Kentucky has been working to improve the health of Kentuckians through policy changes and community investments. Its mission is to address the unmet health care needs of Kentucky residents by developing and influencing health policy, improving access to care, reducing health risks and disparities, and promoting health equality.

Principal Investigators

To implement the research, the Appalachian Regional Commission and the Foundation for a Healthy Kentucky named two Principal Investigators for the study: Julie L. Marshall, PhD, Economist, Division of Planning and Research for the Appalachian Regional Commission, and Gabriela Alcalde, DrPH, Vice President, Policy and Program for the Foundation for a Healthy Kentucky.
CREATING A CULTURE OF HEALTH IN APPALACHIA

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<td><strong>Area Health Resources Files</strong></td>
<td>The Area Health Resources Files (AHRF) are a family of health data resource products that draw from an extensive county-level database assembled annually from more than 50 sources. The Health Resources and Services Administration division of the United States Department of Health and Human Services manage the data. AHRF contains data on the healthcare workforce.</td>
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<td><strong>Age Adjusting</strong></td>
<td>Age adjusting is a technique that allows direct comparison of places that have different age distributions among their populations. See the Methodology section for more details.</td>
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<td><strong>Appalachian Region</strong></td>
<td>The Appalachian Region is defined in the federal legislation from which the Appalachian Regional Commission derives its authority. The Region covers 205,000 square miles, and 420 counties in 13 states. It stretches more than 1,000 miles from Mississippi to New York, and is home to more than 25 million people.</td>
</tr>
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<td><strong>Appalachian Regional Commission</strong></td>
<td>The Appalachian Regional Commission (ARC) is a regional economic development agency that represents a partnership of federal, state, and local governments. Established by an act of Congress in 1965, ARC makes investments that address the goals identified in the Commission's strategic plan, which include economic development, infrastructure improvement, and health improvement.</td>
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<td><strong>ARC Economic Index</strong></td>
<td>ARC uses an index-based classification system to compare each county in the nation with national averages on three economic indicators: three-year average unemployment rates, per capita market income, and poverty rates. Based on that comparison, each Appalachian county is classified within one of five economic status designations—distressed, at-risk, transitional, competitive, or attainment.</td>
</tr>
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<td><strong>American Community Survey (ACS)</strong></td>
<td>The ACS is an ongoing survey conducted by the U.S. Census Bureau. This survey samples the population on a number of topics including population, age, education, home ownership, income, labor force, migration, and veteran status.</td>
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<td><strong>Behavioral Risk Factor Surveillance System</strong></td>
<td>The Behavioral Risk Factor Surveillance System (BRFSS) is the nation's premier system of health-related telephone surveys that collects state-level data about United States residents regarding their health-related risk behaviors, chronic health conditions, and use of preventive services. Many of the measures used in this report were derived from BRFSS data, via County Health Rankings.</td>
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<tr>
<td><strong>Centers for Disease Control and Prevention</strong></td>
<td>The Centers for Disease Control and Prevention (CDC) is the leading national public health protection agency in the United States. The CDC administers a number of data collection programs vital for health researchers, including the WONDER data system, which contains detailed mortality information, and the Behavioral Risk Factor Surveillance System.</td>
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### County Health Rankings
The *County Health Rankings & Roadmaps* program is a collaboration between the Robert Wood Johnson Foundation and the University of Wisconsin Population Health Institute. The goals of the program are to build awareness of the multiple factors that influence health; provide a reliable, sustainable source of local data to communities to help them identify opportunities to improve their health; engage and activate local leaders from many sectors creating sustainable community change; and connect and empower community leaders working to improve health.

### Economic Distress
Distressed counties are the most economically depressed counties and rank in the worst 10 percent of the nation's counties. In fiscal year 2017, 84 Appalachian counties qualify for distressed county status on the basis of low per capita income and high rates of poverty and unemployment.

### Median
The median is the value of the midpoint in a data set; it divides a data set into two equal parts. In a data set of 41 values, 20 values are above the median, and 20 values are below the median.

### Morbidity
Morbidity measures the frequency of any particular disease or illness within a population.

### Mortality
In this report, mortality is used interchangeably with rate of death. Mortality indicators represent both disease-specific death rates, such as cancer mortality, and measures of all reasons for death, such as Years of Potential Life Lost.

### Population-Weighted Average
Rather than simply averaging values across counties, weighted averages account for the different sizes of the population in each county and weights the average accordingly. As a result, a population-weighted average will be influenced more by counties with large populations than those with small populations. The population-weighted average should be interpreted as the average for the people living in the area and not the average for counties in that area. See the Methodology section for more details.

### Quintile
Quintiles are groups of data points that have been divided into five equal parts from the dataset. The first quintile represents data points in the 20th percentile and below. The second quintile represents data points between the 20th and 40th percentiles, etc.

### Subregion
ARC divides Appalachia into five subregions: Northern, North Central, Central, South Central, and Southern. These subregions may be referred to as Northern Appalachia, North Central Appalachia, etc. Counties within each subregion share similar characteristics, such as topography, demographics, and economics.
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