Public Health in Metro Atlanta: How Healthy Are We?
The latest County Health Rankings show that health is generally improving across metro Atlanta, but again, there are some notable exceptions in mostly the same places as in previous rankings.

Based on Years of Potential Life Lost (YPLL) before the age of 75, overall public health is improving slightly, but that is not true everywhere. In fact, some counties have seen dramatic increases in premature deaths.

Overall public health is improving, most notably in cardiovascular diseases. But diabetes is a troubling outlier in the general improvement of public health in the Atlanta area.

Place matters. The spatial patterns are clear – areas with lower incomes typically have poorer health outcomes.

Race matters. The racial patterns are clear, as well – Blacks generally have poorer health outcomes than Whites. This is particularly true in the case of diabetes.

Drug overdoses in general, and prescription opioid overdoses specifically, continue to rise.
In looking at the leading causes of death in Georgia, Ischemic Heart and Vascular Disease (reduced blood supply to the heart) ranks first, but this ranking is driven by high incidence in older age cohorts. The leading cause of death for those age 20-34, for example, is Motor Vehicle Crashes, with Assault (Homicide) second, and then accidental poisoning (which would include drug overdoses) at a very close third.
The County Health Rankings breaks down overall health into two basic categories – Outcomes (orange bars on the above chart) and Factors (green bars on the above chart). “Outcomes” include how healthy one feels while alive, as well as premature death. “Factors” include behaviors (smoking, drinking alcohol, etc.), quality of clinical care, and social/economic/physical characteristics. Once all of these are considered, each county is given a rank, where “1” is the healthiest county in the state, and “159” is the least healthy county in the state.

Most counties in the Atlanta area have a relatively low rank, meaning they are among the healthiest counties in the state. This is particularly true for the relatively wealthier counties of Cherokee, Cobb, Fayette, and Forsyth. There are exceptions, however. Clayton County, even though it has a moderate rank for “Outcomes,” ranks among the lowest in the state for “Factors”; eventually, these factors may begin to drag down Clayton residents’ overall health outlook. Spalding is another outlier in the region, ranking poorly in both “Outcomes” and “Factors” categories.
Metro Atlanta is a healthy place when compared to the rest of the state, and especially so when compared to the southern half of the state. However, in the Health Factors map shown on the right, Clayton and Spalding counties stand out within the metro area as poorly ranked counties—at 131 and 111 respectively.

Source: County Health Rankings, Robert Wood Johnson
Years of Potential Life Lost (YPLL) Rate (A Measure of Premature Death)

Years of Potential Life Lost (YPLL) before the age of 75 is a measure of premature death. The measure simply adds up the difference between actual age of death and age 75. So, for example, if a person dies at age 65, that equates to 10 years of potential life lost. This calculation is then performed for every death in an area.

When compared to the rest of the state, **Metro Atlanta has some of the lowest YPLL rates**. Yellows/Light Purples represent the lowest rates; Dark Purple shading represents the highest rates).

Source: County Health Rankings, Robert Wood Johnson
The chart illustrates the number of years of potential life lost before the age of 75 (YPLL) by county for all races and ethnicities. As the chart shows, the wealthier counties such as Cherokee, Cobb, Fayette and Forsyth have (in general) better health outcomes as measured by Years of Potential Life Lost (YPLL).
The chart illustrates the number of years of potential life lost before the age of 75 (YPLL) by county by race. In a number of counties, YPLL rates among Black and White residents are relatively similar. However, in Coweta, DeKalb, Fulton, and Walton YPLL rates for Blacks are much higher, while in Clayton and Douglas, White YPLL rates are significantly higher.

Note: Overall, YPLL rates for Hispanics are lower in every jurisdiction, thus we did not show those rates on this chart.
Overall, the YPLL rate is dropping over the ten year period, but not every jurisdiction has seen declines. Spalding, notably, has seen a dramatic increase in the years of life lost before age 75 since 2006. This, of course, corresponds to the county’s overall low ranking in a number of health factors and outcomes.
The two maps above show similar patterns. Place matters. It has been well-established in research that income and education levels are key determinants of health. These two maps show that, in general, the counties with the highest percentages of those without a high school education also have higher rates of premature death.

Source: Georgia Department of Public Health (OASIS), ACS- 2012-2016 via Neighborhood Nexus
Deaths Due to Major Cardiovascular Diseases Have Declined Significantly

Major cardiovascular diseases, including ischemic heart and vascular disease, are the number one cause of death in the state and region, but the rate of deaths due to cardiovascular diseases has declined greatly over the past 10 years, on an age-adjusted basis. Even when not adjusting for age, deaths due to cardiovascular diseases have declined in almost all jurisdictions, except for those that have experienced rapid aging, like Fayette.

Source: Georgia Department of Public Health (OASIS)
Hospital Discharges for Diabetes Rising in Most Jurisdictions

Despite overall improvement in public health (as evidenced by decline in YPLL rates and deaths due to major cardiovascular diseases) rates of hospital discharges due to diabetes are rising in most jurisdictions. Like most diseases, diabetes is strongly correlated to certain social determinants of health like race, education and income.

Source: Georgia Department of Public Health (OASIS)
Place Matters for Diabetes Too!

While not perfectly correlated, the two maps show a definite spatial similarity between lower incomes (map to the left) and higher rates of hospital discharges due to diabetes (map to the right).

Source: Georgia Department of Public Health (OASIS) via Neighborhood Nexus; SAPIE income estimates, Census
Place Matters for Diabetes: @ Neighborhood Level in Particular

% of population in poverty, 2012-2016

% of discharges due to diabetes, 2012-2016

Darker colors indicate higher rates of poverty (at left) and higher percentages of discharges due to diabetes (at right)

Source: Georgia Department of Public Health (OASIS) and American Community Survey via Neighborhood Nexus
Race Matters Too!

% of Black population, 2012-2016

% of discharges due to diabetes, 2012-2016

Darker colors indicate a higher share of black population and higher percentages of discharges due to diabetes.

Source: Georgia Department of Public Health (OASIS) and American Community Survey via Neighborhood Nexus
Another area that is trending the wrong way is deaths due to drug overdoses. Again, while overall public health is improving, deaths due to overdoses are increasing in most jurisdictions since 2010. The only exceptions are those counties that already had relatively high deaths rates due to overdoses in 2010 – these communities have been grappling with the problem longer. For more information, see a recent post on our 33N blog.

Source: Georgia Department of Public Health (OASIS)
## Deaths by Overdose Increasing 3 Times the Rate as Deaths Overall, Driven by Prescription Opioids

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<th>Year</th>
<th>All Deaths</th>
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<th>Overdose Deaths</th>
<th>Age-Adjusted Death Rate</th>
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Since 1999, the number of Rx opioid-related overdose deaths has increased at more than 5 times the rate of deaths overall, at 2.5 times the rate of overdose deaths, and at 1.67 times the rate of all opioid-related overdose deaths.

**Source:** Georgia Department of Public Health (OASIS)
Next Steps: 500 Cities Data Challenge

The 500 Cities project is a collaboration between CDC, the Robert Wood Johnson Foundation, and the CDC Foundation. The purpose of the 500 Cities Project is to provide city- and census tract-level small area estimates for chronic disease risk factors, health outcomes, and clinical preventive service use for the largest 500 cities in the United States. These small area estimates will allow cities and local health departments to better understand the burden and geographic distribution of health-related variables in their jurisdictions, and assist them in planning public health interventions.

This week it was announced that Neighborhood Nexus has been selected by the Urban Institute and the Robert Wood Johnson Foundation, as a 500 Cities Data Challenge Grantee. The Challenge aims to encourage communities to dig into the 500 Cities dataset and design innovative solutions which address social factors that influence health, such as housing, education, and transportation.

Source: Centers for Disease Control and Prevention, 500 Cities Project Dataset
The 500 Cities Data Challenge Grant will support Neighborhood Nexus’ work on developing Health and Wellness Community Toolkits for four cities in Georgia: Albany, Atlanta, Columbus, and Savannah. The toolkits will feature curated data based on the five social determinants of health: economic stability, education, social and community context, health and health care, and neighborhood and built environment.

Neighborhood Nexus’ aim is to provide a product that will inform and help design policy interventions for critical public health needs as well as strengthen community partnerships and collaborations to build healthier communities. With the help of our partner organizations in this work, Neighborhood Nexus is hosting a series of workshops and trainings in the target cities. These workshops are designed to bring together community stakeholders from the public and private sectors to learn how to use the tool, collaborate, and implement successful solutions to their community's public health needs.

Stay tuned for a forthcoming Regional Snapshot (scheduled for this fall), detailing our 500 Cities project work.