

North Texans' Health and Wellness

A community's most precious resource is the health of its citizens. A myriad of factors influence this resource, some controllable, such as clean air and healthy lifestyles and some are not, such as a person's genetic make-up. Health status is important to a community because it can impact the overall quality of life as well as business productivity and cost of living.

For the first time in recent history, the status of our health as the 12-county Dallas/ Fort Worth Metroplex has been collected in one report. A task force composed of the Health Industry Council in cooperation with the Texas Institute for Health Policy Research in Austin, Pricewaterhouse Coopers and the Fort Worth Health Department has collected and conducted analyses of health data from 1999 to 2003. The counties included in this study include Collin, Dallas, Denton, Ellis, Henderson, Hood, Hunt, Johnson, Kaufman, Parker, Rockwall and Tarrant.

The Health Industry Council task force responsible for producing this report hopes that the results will help drive interventions and effectively allocate resources towards ameliorating some of the areas principal health concerns. Ultimately, the aim of this activity is to improve the health of the local community and elevate the overall health status of the state of Texas as one of the healthiest in the nation.

Benchmarking the overall health of a community of more than 5.5 million people is a daunting task. However, conclusions can be drawn from key indicators that point to current health status and future health priorities. In constructing the report, the task force captured 13 key indicators. The indicators chosen organize the data to represent insight throughout life. These include "beginning of life" indices such as access to prenatal care and conclude with "end-of-life" data, such as mortality rates.

Improvement Demonstrated on Eight of 13 Health Indicators

The scorecard on the following page illustrates how North Texans fared on these indicators. The good news is that on six of the 13 indicators, health status is improving. Throughout this report, the task force used the most recent data available. These were then compared to 1999, or in some cases to 2001, data to demonstrate progress. The results indicate that rates for mortality due to heart disease, stroke, and cancer have decreased and pre-natal care has increased. For example, between 1999 and 2002, the incidence of heart disease and cancer – the nation's two biggest killers -- dropped 9% and 5%, respectively. In addition, the region showed improvement in the number of residents who have stopped smoking and maintained health insurance coverage.

However, on seven other indicators, health status seems to have deteriorated. For example, over one-half of North Texans are either overweight or obese. The percent of North Texans who maintain a healthy weight dropped 19% between 1999 and 2002. Since obesity is known to lead to dangerous and costly health problems, such as diabetes, cancer and heart disease, this change could severely increase incidents of those diseases in the future.

In addition, the rates for infant morality and low-weight babies did not improve, and the percentage of North Texans with asthma and diabetes increased.

Health Scores are Better than Statewide Averages on Only Five of 13 Indicators

Overall, North Texans fare worse than their fellow Texans, according to the indicators considered. On eight of the 13 measures, North Texans' status was the same or worse than statewide averages. This is likely to lead to higher healthcare costs, lower productivity and a poorer quality of life for local residents. For example, a recent *Health Affairs* article reported that obese adults incur annual medical expenditures that are \$395 higher than people with normal weight. For North Texas, this would amount to more than \$571 million in additional medical spending each year.¹

The only indicators in which North Texas rated better than statewide were in the categories of health insurance coverage, smoking, diabetes, diabetes mortality and exercise activity.

The following chart illustrates North Texas' progress on 13 key indicators and how it fared compared with statewide figures.

Overall Health Indicators			
	<i>Rates Improved</i>	<i>Rates Worsened</i>	<i>Better than Statewide Average</i>
<i>Low-weight babies</i>		✓	
<i>Prenatal care</i>	✓		
<i>Infant mortality rate</i>		✓	
<i>Uninsured</i>	✓		✓
<i>Smoking</i>	✓		✓
<i>Asthma</i>		✓	
<i>Diabetes</i>		✓	✓
<i>Overweight/obesity</i>		✓	
<i>Exercise activity</i>		✓	✓
<i>Heart disease mortality rate</i>	✓		
<i>Stroke mortality rate</i>	✓		
<i>Cancer mortality rate</i>	✓		
<i>Diabetes mortality rate</i>		✓	✓

¹ National Medical Spending Attributable to Overweight and Obesity: How Much, and Who's Paying?, Eric A. Finkelstein, Ian C. Fiebelkorn, and Guijing Wang, *Health Affairs*, May 14, 2003.

Methodology

Since this is the first such report on the health status of the DFW region, the task force decided to gauge progress by using 1999 data as a benchmark, when available. For the scorecard, "Rates Improved" was the result of comparing 1999 data to the most recent year for which data was available. On some indicators, 2003 data was available; in others, the most recent is from 2001. On the indicator about North Texans participating in regular exercise, 1999 figures were not available, so progress was measured between 2000 and 2003. In future scorecards, progress measures are expected on an annual basis.

Texas Institute for Health Policy Research collected the data from its Landscape Project, an online database of county level health data. The sources for these data are Texas Department of Health, Texas Health and Human Services Commission and Texas State Data Center. The data was analyzed by the Texas Institute for Health Policy Research, PricewaterhouseCoopers' healthcare research practice and Fort Worth Health Department.

The lifestyle data originates from The Texas Behavioral Risk Factor Surveillance System, a federally funded telephone survey conducted on a monthly basis of 1,500 randomly selected adult Texans to collect data on lifestyle risk factors contributing to the leading causes of death and chronic diseases. The reported rates are weighted for Texas demographics and the probability of selection.

North Texas Demographic Snapshot									
		Anglo		Black		Hispanic		All Other	
County	Total Population	#	%	#	%	#	%	#	%
Collin	565,338	430,305	76%	28,734	5%	61,705	11%	44,594	8%
Dallas	2,280,453	960,939	42%	465,549	20%	739,965	32%	114,000	5%
Denton	490,753	371,966	76%	30,588	6%	63,483	13%	24,716	5%
Ellis	120,417	84,812	70%	10,601	9%	23,844	20%	1,160	1%
Henderson	75,502	64,098	85%	4,977	7%	5,754	8%	673	1%
Hood	43,774	39,648	91%	150	0%	3,470	8%	506	1%
Hunt	79,877	63,383	79%	7,888	10%	7,411	9%	1,195	1%
Johnson	136,544	112,712	83%	3,581	3%	18,181	13%	2,070	2%
Kaufman	78,519	59,784	76%	8,256	11%	9,558	12%	921	1%
Parker	96,579	86,224	89%	1,867	2%	7,437	8%	1,051	1%
Rockwall	50,829	42,169	83%	1,690	3%	6,044	12%	926	2%
Tarrant	1,526,403	922,004	60%	201,572	13%	328,174	21%	74,653	5%
Region	5,544,988	3,238,044	58%	765,453	14%	1,275,026	23%	266,465	5%
Texas	21,779,893	11,239,251	52%	2,510,744	12%	7,260,714	33%	769,184	4%
<i>Source: Texas State Data Center. January 2002 population based on population estimates.</i>									

Bookend I – Beginning Life Indicators

Getting a good start in life is vital to the health of any individual. The percentage of mothers receiving inadequate prenatal care dropped nearly 7% in between 2000 and 2002. However, the percentage of low weight babies increased by 3% between 2000 and 2002, and the infant mortality rate rose 17% during the 2000 to 2002 time-span. The infant mortality rate in North Texas is 6.3, meaning that 6 babies out of 1,000 die in their first year of life. This rate is often used as an indicator of the overall health of the community. Although representing a dramatic increase, infant mortality rates fluctuate greatly from year to year due to the influence of a relatively small number of cases on the overall rate.

On each of these three indicators, North Texans scored the same or worse than state averages.

Infant Mortality						
	2000		2001		2002	
	Number	Rate	Number	Rate	Number	Rate
Collin	30	3.5	36	4.2	39	4.1
Dallas	235	5.5	272	6.6	285	6.6
Denton	30	4	36	5	39	4.7
Ellis	11	6.2	10	5.7	17	9.1
Henderson	6	6.3	5	5.3	5	5.2
Hood	1	2.1	4	-	2	4.1
Hunt	2	2	8	7.8	10	8.9
Johnson	12	6.3	9	4.9	14	7.2
Kaufman	5	4.5	11	10.6	7	5.8
Parker	5	4.7	9	8.6	10	8.3
Rockwall	1	1.5	7	10.8	4	5.3
Tarrant	160	6.3	196	7.9	183	6.8
Region	498	5.4	603	6.7	615	6.3
TEXAS	2,064	6.2	2,181	6.2	2,369	6.4
Rates are per 1,000 live births						
<i>Source: Texas Department of Health</i>						

Inadequate prenatal care						
	2000		2001		2002	
	#	%	#	%	#	%
Collin	304	4.4%	370	4.8%	829	9.9%
Dallas	2,894	9.4%	2,302	7.6%	2,966	8.0%
Denton	300	4.5%	292	4.2%	435	6.4%
Ellis	108	7.0%	117	7.4%	98	5.6%
Henderson	41	4.7%	49	5.7%	54	5.8%
Hood	48	10.7%	34	7.9%	28	5.9%
Hunt	72	7.9%	134	13.0%	147	13.6%
Johnson	218	11.9%	186	10.0%	200	10.4%
Kaufman	80	8.4%	62	6.4%	61	5.5%
Parker	45	4.9%	55	5.4%	56	5.1%
Rockwall	41	7.0%	35	5.5%	34	4.9%
Tarrant	2,432	10.2%	1,998	8.0%	2,018	7.9%
Region	6,583	8.6%	5,634	7.2%	6,926	8.0%
TEXAS	25,122	8.1%	23,655	7.6%	25,913	7.7%
<p>Percent is calculated based on mothers receiving inadequate prenatal care beginning in first trimester. Inadequate prenatal care is defined as prenatal care (where data is available) that did not meet the Kessner Criteria.</p> <p>Source: Texas Department of Health</p>						

Low Birth Weight						
	2000		2001		2002	
	#	%	#	%	#	%
Collin	601	6.9%	691	7.3%	695	7.3%
Dallas	3,323	7.8%	3,322	7.7%	3,310	7.7%
Denton	498	6.7%	538	6.8%	575	6.9%
Ellis	109	6.2%	119	6.6%	131	7.0%
Henderson	83	8.7%	85	9.1%	79	8.2%
Hood	35	7.5%	17	3.8%	32	6.6%
Hunt	81	8.0%	96	8.6%	77	6.8%
Johnson	121	6.4%	141	7.4%	129	6.6%
Kaufman	83	7.4%	88	8.0%	108	8.9%
Parker	72	6.8%	76	6.9%	92	7.6%
Rockwall	39	5.7%	43	6.1%	44	5.9%
Tarrant	1,867	7.3%	2,040	7.7%	2,114	7.9%
Region	6,912	7.4%	7,256	7.6%	7,386	7.6%
TEXAS	26,751	7.4%	27,585	7.6%	28,649	7.7%

Percent is calculated based on all births, low birthweight babies are less than 2, 500 grams (5.5 pounds at birth)

Source: Texas Department of Health

Lifestyle Indicators

Lifestyle indicators are important because they reveal current status as well as infer future health problems. On these, North Texans demonstrated improvement on two of the six indicators. Those indicators were insurance coverage and smoking. The region showed no trended improvement on asthma, diabetes, and weight. However, North Texans scored better than statewide on four of the six – insurance coverage, smoking, diabetes and exercise activity.

Texas leads the nation in the percentage of population without health insurance. While the percentage of North Texans remains high at 22.6%, this represents a slight drop from 2001 and this percentage of uninsured is lower than the statewide average of 28.2%

Insurance coverage is an important indicator because the uninsured generally have less access to healthcare and poorer health status. They tend to postpone medical care, which can lead to more serious illness and avoidable health problems.

Total Uninsured						
	1999		2000		2002	
	Uninsured	%	Uninsured	%	Uninsured	%
Collin	55,521	18.4	55,669	19.2	57,755	17
Dallas	358,176	26.9	348,100	25	364,109	25.4
Denton	59,568	21.9	59,566	21.1	58,188	18.8
Ellis	17,524	23.3	17,525	23.3	13,802	20
Henderson	10,077	24.7	9,888	23.2	13,768	32.4
Hood	5,191	23.6	5,179	20.6	5,073	20.8
Hunt	10,355	23.7	10,018	23.3	12,515	26.3
Johnson	19,858	26.4	19,750	22.5	16,260	20.6
Kaufman	10,126	24.8	10,061	22.7	9,424	21.3
Parker	12,246	23.5	12,202	20.7	11,247	20.1
Rockwall	5,307	21.9	5,322	20.3	4,734	17.2
Tarrant	235,858	26.6	231,917	22.9	202,645	21.8
Region	799,807	25.3	785,197	23.2	769,519	22.6
Texas	3,247,201	26.7	3,247,201	26.3	3,680,601	28.2
Percent of population 19-64 years of age						
Source: Texas Health and Human Services Commission						

Lifestyle²

Currently have asthma

	1999	2000	2001	2002	2003
<i>Region</i>	6.0	6.6	8.6	7.6	6.8
<i>Texas</i>	6.1	6.5	6.1	7.1	6.8

Ever told have diabetes

	1999	2000	2001	2002	2003
<i>Region</i>	3.8	5.6	6.1	6.8	6.4
<i>Texas</i>	6.2	6.2	7.1	7.0	8.2

Overweight (Body Mass Index between 25.0 and 29.999)

	1999	2000	2001	2002	2003
<i>Region</i>	36.4	36.2	36.8	37.4	35.5
<i>Texas</i>	36.6	36.6	36.7	36.0	36.9

Obese (Body Mass Index >=30)

	1999	2000	2001	2002	2003
<i>Region</i>	18.8	22.0	20.7	26.2	20.7
<i>Texas</i>	21.7	23.1	24.6	27.6	24.8

Currently Smoking

	1999	2000	2001	2002	2003
<i>Region</i>	24.9	20.8	23.8	22.2	22.8
<i>Texas</i>	22.4	21.9	22.4	22.9	22.2

No Exercise Activity

	1999	2000	2001	2002	2003
<i>Region</i>	N/A	26.8	24.6	26.4	27.6
<i>Texas</i>	N/A	28.6	27.1	29.3	27.7

²Source: Texas Behavioral Risk Factor Surveillance System, Statewide BRFSS Survey, 1999-2002
Note: All reported rates are weighted for Texas demographics and the probability of selection
Prepared by: Texas Behavioral Surveillance System, Texas Department of Health June 5, 2002

Bookend II – End of Life Indicators

The four end-of-life indicators were selected based on their influence by lifestyle choices. North Texans demonstrated improvements in mortality rates for heart disease, stroke, and cancer. The diabetes mortality rate increased 2% from 1999 to 2002. However, North Texans failed to score better than the statewide averages on three of the four indicators, as depicted in the following tables:

Heart disease age adjusted mortality rate, per 100,000								
	1999		2000		2001		2002	
	Rate	Deaths	Rate	Deaths	Rate	Deaths	Rate	Deaths
Collin	272	461	221.7	473	200.5	492	207.9	535
Dallas	269.3	3,964	274.8	4,015	263.1	3,932	261.1	3,954
Denton	315.7	481	264.5	493	220	448	219.6	469
Ellis	333	269	297	246	316.3	273	280.3	251
Henderson	307.4	289	309.1	293	319.5	310	288.6	284
Hood	306.6	125	249.5	131	230.4	129	221.6	126
Hunt	355	272	309.2	234	301.6	230	362.3	280
Johnson	303.3	281	331.2	324	288.2	295	314.5	336
Kaufman	324.1	178	353.5	214	317.3	201	302.7	204
Parker	317.3	218	287.6	205	274.7	212	269	217
Rockwall	299.2	62	336.3	97	297.9	98	250.1	88
Tarrant	287.7	2,658	270.1	2,653	264.1	2,678	258.7	2,707
Region	282.5	9,258	274	9,378	261	9,298	257.9	9,451
Texas	272.7	43,333	262.9	42,963	257.3	43,093	253.1	43,370
Age Adjustment Standard Population: 2000 US								ICD-
10 (1999-2001) - 100-109,111,113,120-151								
Output Produced by Texas VitalPro for Texas Institute for Health Policy Research								

Stroke Age Adjusted Mortality Rate								
	1999		2000		2001		2002	
	Rate	Deaths	Rate	Deaths	Rate	Deaths	Rate	Deaths
Collin	69.2	105	64.2	127	59.8	131	52.4	119
Dallas	64.1	923	65.9	943	64.8	943	61	908
Denton	87.2	119	64.3	110	57.7	103	65.4	124
Ellis	76.1	60	79	64	83.4	72	66.9	57
Henderson	72.8	70	75.2	70	64.3	63	64.6	63
Hood	82	34	76.7	39	55.4	30	66	38
Hunt	75.1	59	61.2	46	80.8	60	64.9	49
Johnson	94.7	83	76.7	73	80.8	79	84.1	87
Kaufman	73.4	40	83.3	50	56.2	35	68.4	45
Parker	86	55	79	54	74.5	53	68.7	53
Rockwall	78.5	17	57	16	60.2	19	50.2	17
Tarrant	77	681	78.5	747	79.1	775	77.3	778
Region	71.2	2,246	70.5	2,339	69	2,363	66.2	2,338
Texas	66.3	10,395	66.6	10,721	64.5	10,596	62.7	10,534
Age Adjustment Standard Population: 2000 US					ICD-10 (1999-2001) – 160-169			

Cancer Age Adjusted Mortality Rate								
	1999		2000		2001		2002	
	Rate	Deaths	Rate	Deaths	Rate	Deaths	Rate	Deaths
Collin	199.8	395	164.8	421	171.3	481	177.2	535
Dallas	194.5	3,045	202.6	3,141	202.9	3,177	195.7	3,123
Denton	201	367	184.2	404	175.4	410	175.8	441
Ellis	216.9	181	222.5	196	234.5	215	205.2	193
Henderson	238.3	211	234.8	222	233.8	231	188.9	194
Hood	260	103	269.3	142	264.2	148	195.2	115
Hunt	214	162	183.9	142	211.3	165	190.3	152
Johnson	218.6	214	198.2	208	227.5	256	202.2	230
Kaufman	244.3	140	202.7	130	222.7	149	234.8	166
Parker	242.2	177	242.1	186	207.8	171	185.5	162
Rockwall	241.3	65	226	74	171	63	182.5	74
Tarrant	205.5	2,059	200.5	2,088	191.9	2,067	194.2	2,150
Region	201.8	7,119	200.1	7,354	198.4	7,533	192.5	7,535
Texas	199.7	32,703	196.2	33,298	192.4	33,437	191.5	34,122
Age Adjustment Standard Population: 2000 US								
ICD-10 (1999-2001) - C00-C97								
Output Produced by Texas VitalPro for Texas Institute for Health Policy Research								

Diabetes Age Adjusted Mortality Rate								
	1999		2000		2001		2002	
	Rate	Deaths	Rate	Deaths	Rate	Deaths	Rate	Deaths
Collin	32.1	52	16.6	42	19.5	52	17.3	47
Dallas	23.5	366	26.4	401	22.7	357	26.7	425
Denton	25.9	41	18.6	39	32.7	69	28.8	67
Ellis	32.9	29	37.7	33	35.5	33	27.4	26
Henderson	11.3	11	15.3	14	16.31	16	29.2	28
Hood	34.8	14	14.7	8	20.5	11	21.7	12
Hunt	24.5	19	41.7	32	38.7	30	26.9	21
Johnson	33.9	34	28.3	30	29.7	32	34.1	39
Kaufman	28.4	19	33.9	21	33.8	22	35.5	24
Parker	46.8	32	26.8	21	31.6	25	20.3	18
Rockwall	11.7	3	9.5	3	8.9	3	29.1	11
Tarrant	31	301	23.9	244	28.4	300	30.3	331
Region	26.7	921	24.7	888	25.4	950	27.2	1,049
Texas	30.4	4,925	31.1	5,195	31.8	5,445	32.1	5,650
Age Adjustment Standard Population: 2000 US					ICD-10 (1999-2001) – E10-E14			

COMMUNITY HEALTH AND WELLNESS PARTNERS AND ASSOCIATIONS

Program Creation and Management **The Health Industry Council**

The Health Industry Council of the DFW Region, 150 members strong, was organized to unify the healthcare industry in North Texas. It serves as a catalyst to gather and update industry data, promote conferences, and encourage expansions and relocations of health-related entities to the DFW area. Monthly meetings and various events hosted by the council offer endless opportunities for networking and education to its diverse membership and the public and professional communities.

Data Collection and Analysis

Texas Institute for Health Policy Research

With a vision of an improved health care system for our communities, the Texas Institute for Health Policy Research analyzes health care issues and their impact on all Texans. From hosting unbiased health policy forums on critical timely issues, to helping local communities develop and realize their own unique health care system models, the Institute works with stakeholders at every level to promote innovative ideas for improving the health care system.

PricewaterhouseCoopers

PricewaterhouseCoopers (www.pwc.com) is the world's largest professional services organization. Drawing on the knowledge and skills of more than 125,000 people in 142 countries, the firm builds relationships by providing services based on quality and integrity. PricewaterhouseCoopers Healthcare Practice provides assurance, tax, consulting and advisory services to providers, payors, entitlements, suppliers, and employers.

Fort Worth Public Health Department

The mission of the Fort Worth Public Health Department is to promote and protect the health and safety of the diverse Fort Worth population using partnerships to enhance the quality of life and reduce disparities among population groups. The Fort Worth Public Health Department conducts the most powerful Community Needs Assessment in the country. The results of this assessment along with numerous other projects provide data that is used by numerous community partners, city departments and stakeholders to justify funding, drive intervention and measure outcomes.



COMMUNITY HEALTH AND WELLNESS TASK FORCE

GOALS

Goal 1:

- Determine the health and wellness of the Dallas/ Fort Worth Metroplex by developing a model, collecting valid data, and analyzing findings.

Goal 2:

- Create a document listing positive findings of the population's health and wellness for use in economic development and business recruitment to the Metroplex.

Goal 3:

- Create a document identifying problem indicators within the population.

Goal 4:

- Foster establishment and identification of initiatives to improve the overall health of the population in North Texas.