



WVAHC Reform News

West Virginians for Affordable Health Care

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SPECIAL REPORT

Women in Southern West Virginia Have Some of the Lowest Life Expectancy in the Country

*West Virginians have lower life expectancies than the rest of the United States, and southern West Virginians have some of the lowest life expectancies in the country, particularly for women. These are some of the findings of a report issued this month by West Virginians for Affordable Health Care (WVAHC). The full report, *Early Deaths*, can be read on our web site, www.wvahc.org. Some of the major findings of the report include the following:*

- Out of 3,141 counties in the United States, women in McDowell have the 10th lowest life expectancy in the U.S. Women in Mingo County had the 15th shortest lives, and Logan County women had the 16th lowest life expectancy. All three counties were in the lowest one percent for shortest lives in the country in 1999, the last year available for analysis by WVAHC. Another 4 counties - Lincoln, Wyoming, Boone and Fayette -- were in the lowest 10 percent of counties in the country for life expectancy for women.
- If women in McDowell County had life expectancies at the national average, they would live on average more than 6 additional years. If women in McDowell County had the same life expectancy as women in the county with the highest life expectancy, they would live an additional 11 years. Women in Logan County would add a decade of life if they had life expectancies equal to the best in the country, and would live more than five additional years if they had life expectancies at the national average.
- In 1999, not a single county in West Virginia had life expectancies for women at or above the national average. The best county for women in West Virginia (Tucker County) had a life expectancy of 79.5 years, while the national average was 79.6 years.
- Life expectancy for women in three counties (or groups of counties) was reduction by more than two

years. In Logan County life expectancy for women dropped by more than 2 ½ years from 1989 to 1999. In Boone County life expectancy fell by almost 2 ¼ years between 1992 and 1999. In Taylor/Barbour counties life expectancy for women fell by 2 ¼ years between 1988 and 1999. Women in McDowell, Lincoln and Wyoming counties all experienced almost a two year reduction in life expectancy.

When one considers both men and women the numbers improve, but not by much. For example:

- McDowell, Logan and Mingo counties were rated 14th, 21st and 27th lowest in life expectancy in the US for both men and women rather than 10th, 15th and 16th for women.
- Only four counties in West Virginia (Pendleton, Grant, Tucker and Monongalia) had life expectancy above the national average.
- A number of counties in West Virginia experienced a reduction in life expectancy of both men and women, although in only two counties was the reduction in life expectancy more than one year. From 1995 to 1999 the life expectancy in Logan County fell by 1½ years, and in Wyoming County life expectancy fell by 1⅓ years between 1992 and 1999.

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County	National Ranking for Both Men & Women	National Ranking for Women Only
McDowell	14	10
Mingo	21	15
Logan	27	16
Lincoln	100	53
Wyoming	145	58
Boone	224	107
Fayette	319	265

Limitation of the Report: The Early Deaths report was prepared by WVAHC using data from a report issued by Harvard researchers published this spring examining life expectancy in the United

States. The report examined life expectancy over a 38-year period (from 1961 to 1999) by all 3,141 counties in the country and by gender. The major limitation of the Harvard report and the *Early Deaths* report is that there is no life expectancy data from 1999 to 2008. It is impossible to determine what has occurred in the intervening 9 years. It is conceivable that the life expectancy of the citizens of southern West Virginia has improved. Conversely, it is possible that the trend in life expectancy among women in southern West Virginia has continued to stagnate or decline. Either conclusion is pure speculation.

WVAHC has called for a number of reforms to address these disturbing statistics. WVAHC has asked the WVU Health Policy Research Institute to review the report to determine whether the numbers are correct. WVAHC will meet with officials of Bluefield State College to determine if a longitudinal study can be conducted to determine what the causes are for the short life expectancy in southern West Virginia, particularly for women in these areas.

But we cannot wait for additional studies before taking action. WVAHC has called for immediate action to address the early deaths in southern West Virginia. Our recommendations include:

- Establish a regional Health Department for the counties of Boone, Logan, McDowell, Mingo, and Wyoming, referred to as the focus area in our report. The county Health Departments in these counties currently lack the resources to address the public health initiative that is necessary to remedy this crisis.
- The regional Health Department would focus on tobacco reduction/ prevention and obesity reduction, two preventable major contributors to early deaths. The regional Health Department should adopt indoor clean air ordinances in each of the counties.
- Aggressive tobacco cessation programs should be conducted in each of these counties. And the legislature should increase tobacco taxes to the national average.



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- Obesity should be addressed in several ways. The state Superintendent of Schools should work with each county board of education within the focus area to ensure that no soft drinks are sold within the school day in any school within the target area by January 2009. Additionally, the state Superintendent of Schools should ensure that every student within the target area is receiving the required physical activity required by state Board policy, and take steps to restore elementary physical education teachers to schools in the focus area.
- The state Secretary of Transportation should conduct an inventory of the major municipalities within the focus area to determine whether these municipalities are suitable for walking and biking, and make specific recommendations about how these communities can promote pedestrian and bicycle activities. While this will be difficult given the steep hills and narrow valleys in the focus area, we need to act to make physical activity a normal part of life in southern West Virginia.

Stories Needed

WVAHC is seeking stories from West Virginians about their experience with the health care system. If you had a needed service denied by an insurance company, or were subject to a pre-existing condition, or were the victim of a medical error, let us know. Log on to our web site, www.wvahc.org, and on the home page click "Tell Us Your Story". The stories of West Virginians are a powerful statement for promoting health care reform. If you are willing to share your story, you will be a part of bringing about needed change. We will not use your name without your consent.

- Better nutrition is essential to reducing obesity. The legislature should consider providing a tax incentive to grocery stores that provide fresh fruits and vegetables. The WVU Extension Service in conjunction with the West Virginia Department of Agriculture and the faith-based community should promote family and community vegetable gardens in the focus area. Additionally, the state Department of Agriculture and the Governor's Office of Economic Opportunity should support the establishment of farmers' markets in the focus area.
 - The Governor's Office of Economic and Community Development should conduct an inventory of drinking water supplies and sewage treatment facilities in the focus area and prioritize areas in the greatest need of safe drinking water and sewage treatment facilities.
 - Finally, WVAHC is recommending we change the delivery of health care throughout the state with emphasis on the focus area. The West Virginia Health Improvement Institute is identifying patient-centered medical home pilot projects. Patient-centered medical homes are a team concept designed to improve the health status of patients. A physician or other provider leads a team that may include a nurse practitioner and other mid-level providers. The nurse practitioners or others provides in-depth patient education. The patient-centered medical home is supported by health information technology that ensures that preventive screens are scheduled timely and lab tests are not duplicated.
- The Health Improvement Institute should ensure that the pilot project for establishing a medical home includes clinics and private physician offices in the focus area.
- It will take a sea change to improve the life expectancy in southern West Virginia. We owe the citizens of southern West Virginia a concentrated effort to improve their health and ensure that they have life expectancy equal to the rest of the United States.

Health Care for All Rally a Success



Despite thunder and the threat of rain all morning more than 300 people attended the WVAHC sponsored Health Care for All Rally on May 3rd. People gathered at the West Virginia Health Right on Washington Street in Charleston and marched to the Capitol. Speakers at the Capitol included Don Perdue, Chairman of the House Health and Human Resources Committee, Rev. James Patterson, President of the Partnership of African American Churches, Kenny Perdue, President of the AFL-CIO, and Charles Delauder, former President of West Virginia Education Association. Pat White of Health Right moderated the rally.

The rally is part of our strategy to convince the Governor and the legislature to adopt comprehensive health care reform during the 2009 legislative session including health care for all. Thanks to all who attended the rally.



Save the date.
WVAHC 3rd Annual
Membership Meeting
will be Saturday, October 25th
10 am to 2 pm.
The place is to be determined.

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