



Health & Democracy Index

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Director, Southeastern Region



Overview



Project background



Index development



Goals



Walkthrough of website



Next steps



Why is a public health lawyer working on the Health & Democracy Index?

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More than a Vote: Civic Engagement and Health Amid COVID-19

June 12, 2020

by [Dawn Hunter](#)





Health metrics associated with civic engagement or voting

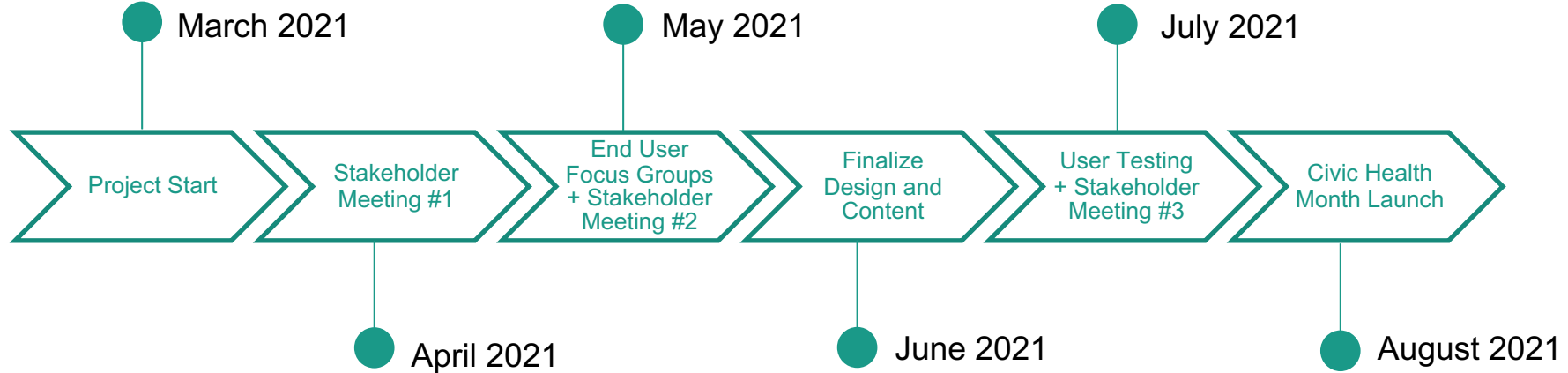
- Self-rated health & mental health
- Self-reported chronic health condition
- Self-reported disability preventing work
- Disability status
- Use of healthcare services
- Health risk behaviors like smoking
- Life expectancy & mortality rates
- Income level
- Education level
- Neighborhood safety



State health metrics sorted by Cost of Voting (averages)

	Voter Turnout 2020 General Election	Self-Rated Health - Good or Better	Poor Mental Health Days in Last 30 Days	Adults Receiving Disability Benefits	Uninsured	Active Physicians Per Capita	Chronic Disease Prevalence	Premature Mortality (YPPL)	Infant Mortality Rate	Poverty
Top 15 States	71.7%	84.7%	4.15	4.34%	10.27%	305.70	8.85%	6588	5.43	10.38%
US Average	66.8%	82.7%	4.3	4.7%	11%	277.8	9.5%	7350	5.67	12.2%
Bottom 15 States	64.0%	80.7%	4.71	5.95%	15.04%	238.56	11.49%	8901	6.52	13.46%

Index Development



Core Planning Group

Research and Analysis



Goals

Illustrate and describe the connections between voting rights/access and population health as broadly defined across the social determinants of health.

Show evidence of the health impacts of inequities in access to the ballot.

Build public understanding and commitment to inclusive civic participation by expanding the narrative about voting to include the impact on our collective health.

Support public health professionals in their roles in promoting access to the ballot as necessary to advancing health equity and population health.

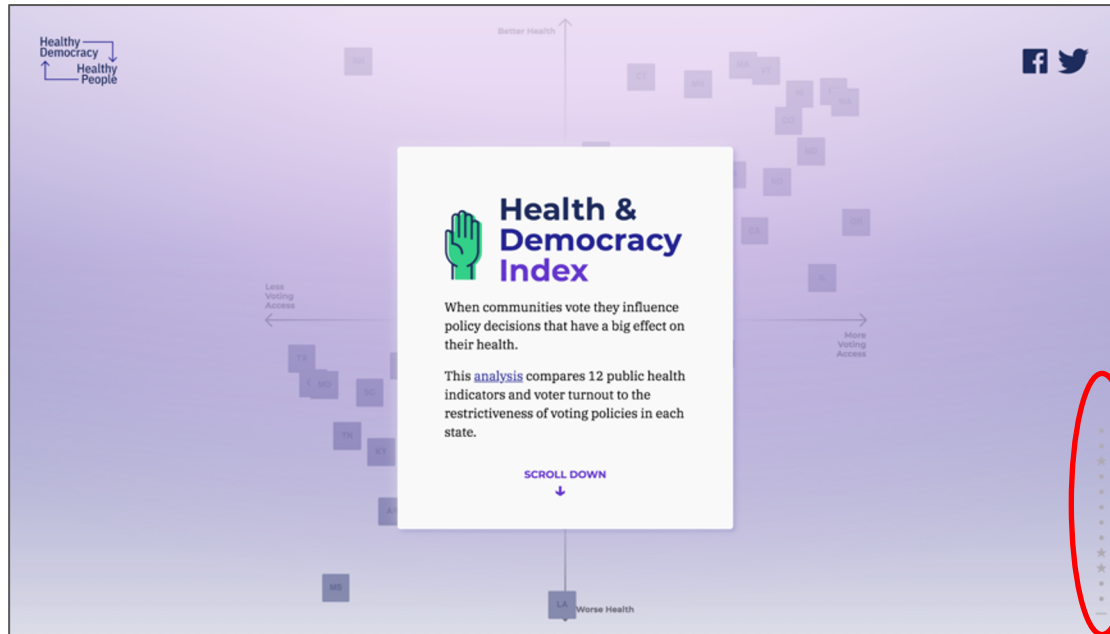
Strengthen relationships across policy sectors and with others advocating for expanded access to the ballot by contributing a health and health equity analysis.

Identify policies and demonstrate practical ways to expand access to the ballot and improve population health as a public health imperative.

Aid and support mobilization to defend and broaden voting rights.

Health & Democracy Index Walkthrough

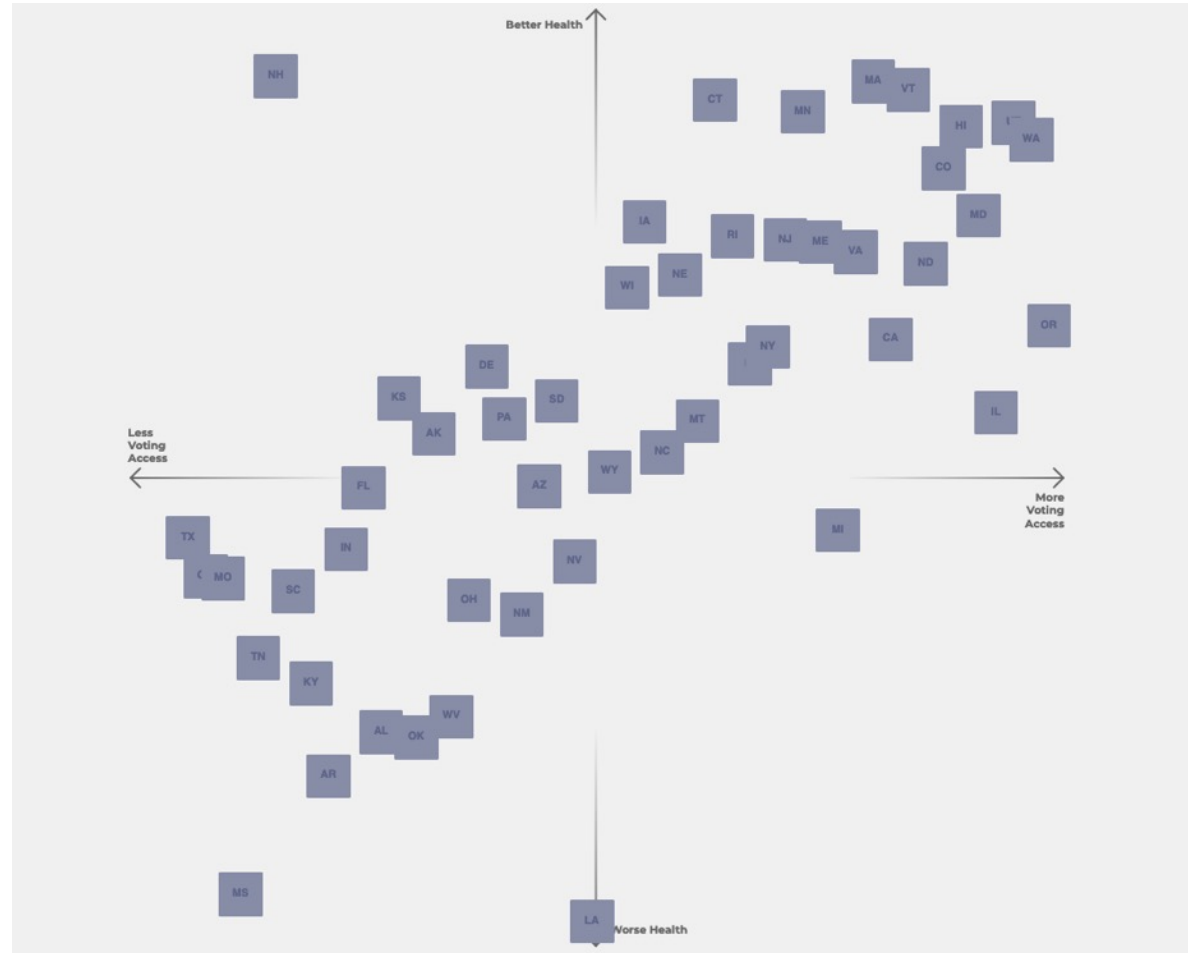
Landing page



Site Navigator

Two Core Components

- Cost of Voting Index
- Measures of Health Status (12)
- Default plot view is Overall Health



EDITION YEAR:

< 2019 ▾ >

ANIMATE



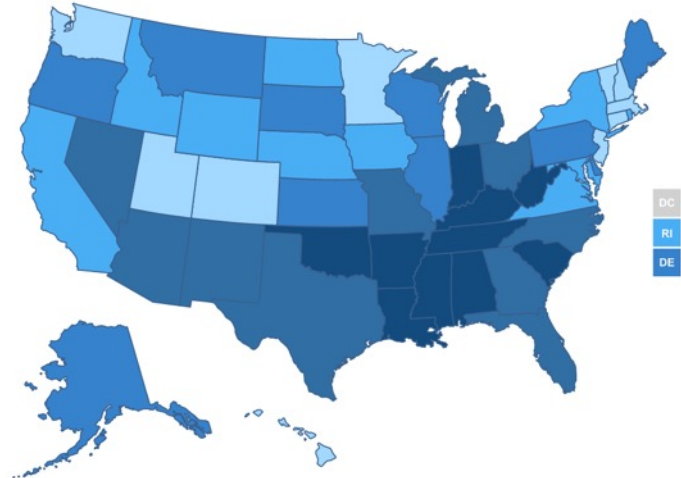
Overall Health

From America's Health Rankings

The Index uses 2020 data

A state's overall score is calculated by adding the products of the score for each ranked measure multiplied by its assigned weight.

Rank Based On: Weighted sum of the number of standard deviations each core measure is from the national average.



1 - 10

11 - 20

21 - 30

31 - 40

41 - 50

N/A

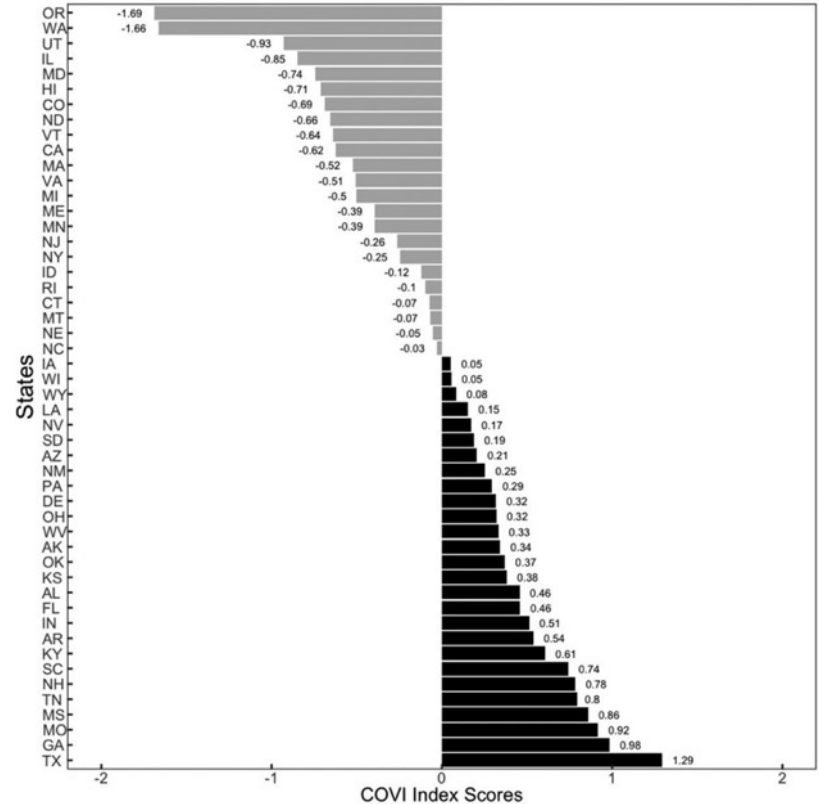
America's Health Rankings analysis of America's Health Rankings composite measure, United Health Foundation, AmericasHealthRankings.org, Accessed 2021.

Source:

- America's Health Rankings composite measure

Cost of Voting Index, 2020

Scot Schraufnagel, Michael J.
Pomante II, and Quan Li.
Election Law Journal: Rules,
Politics, and Policy.
Dec 2020. 503-509.





Components of the Cost of Voting Index: 2020

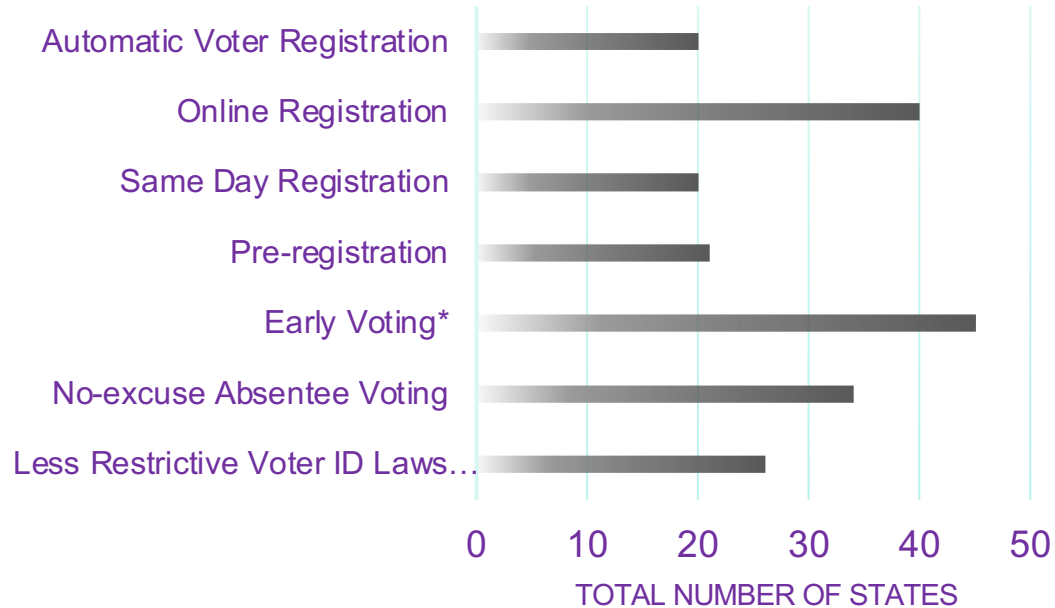
Registering to Vote

- Registration deadlines
- Voter registration restrictions
- Registration drive restrictions
- Pre-registration laws
- Automatic voter registrations

Casting a Ballot

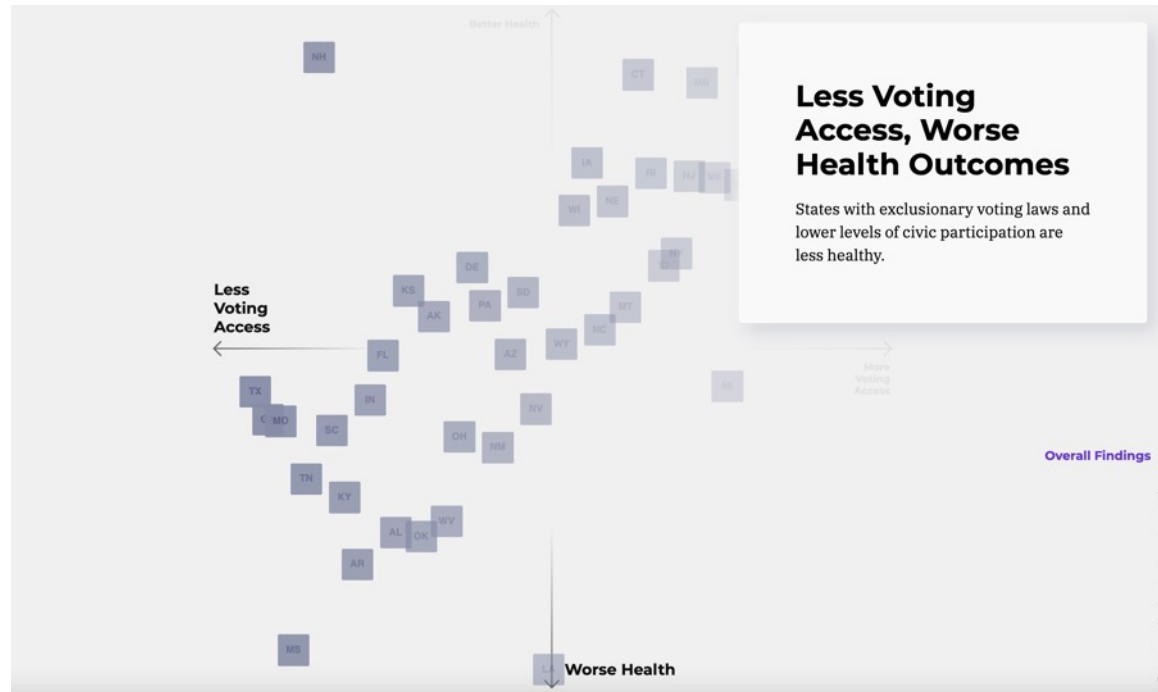
- Voting inconvenience
- Voter ID laws
- Poll hours
- Early voting

What supports electoral participation?

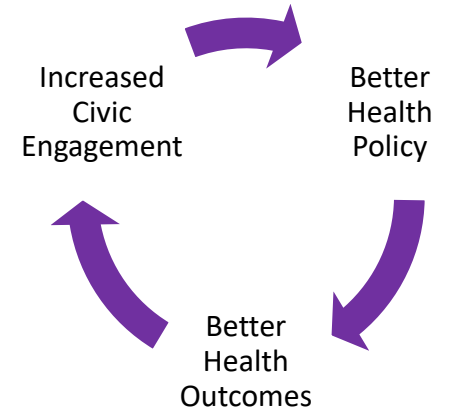
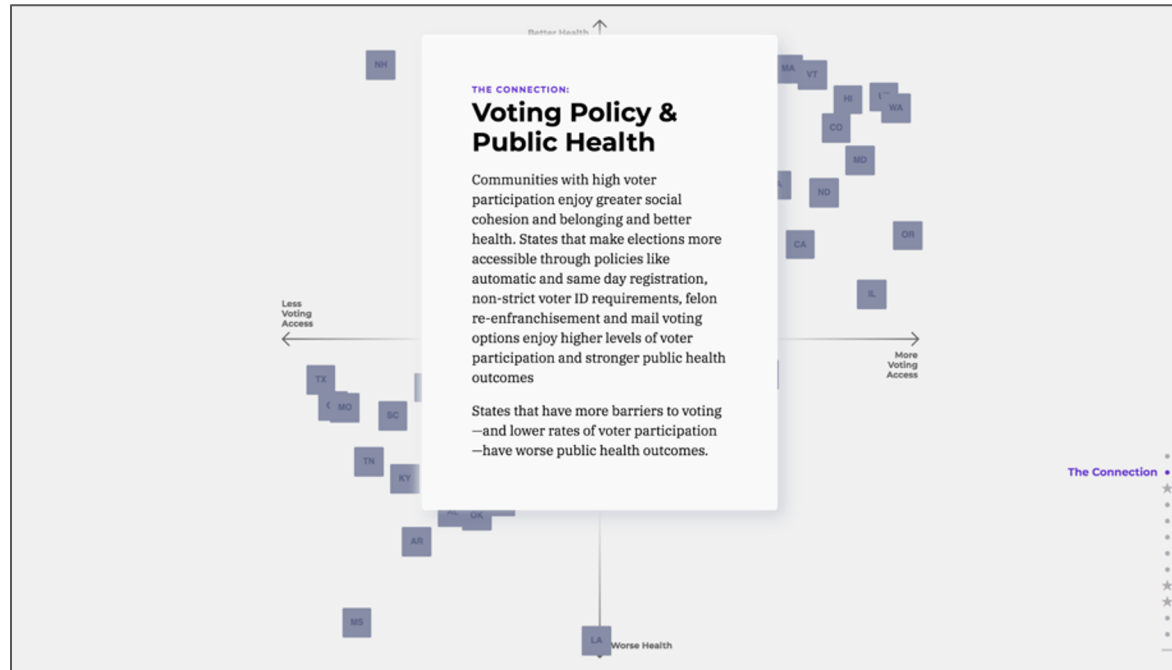


*early voting laws vary significantly across the states

Overall findings: Less Voting Access, Worse Health Outcomes



The Connection: Voting Policy & Public Health

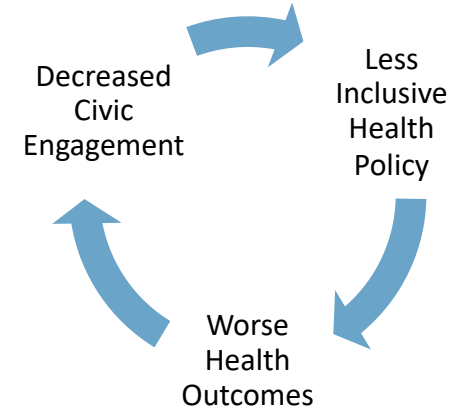
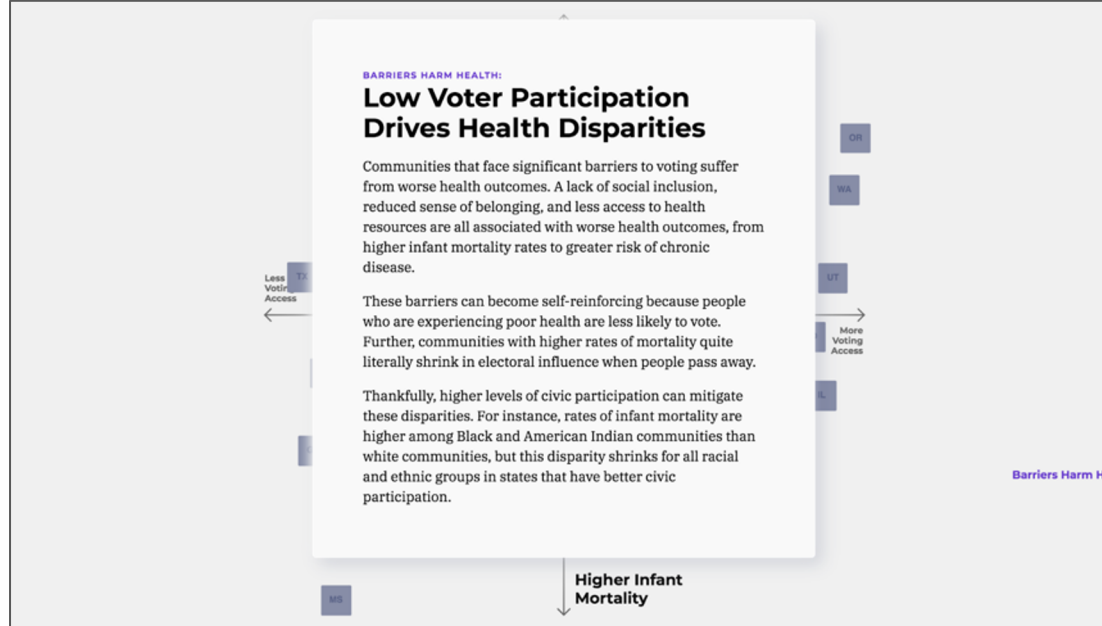


Interactive Voting Policy Picker

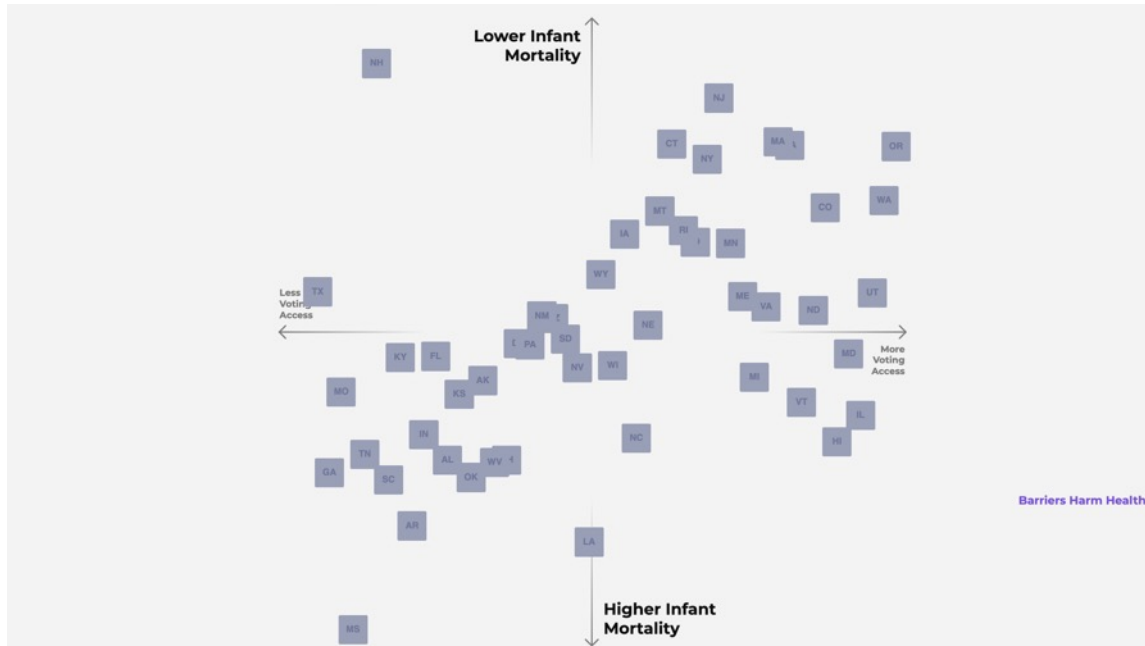


- Inclusive Registration
- Vote at Home
- Restrictive Voter ID
- Voting Rights Restoration

Low Voter Participation Drives Health Disparities

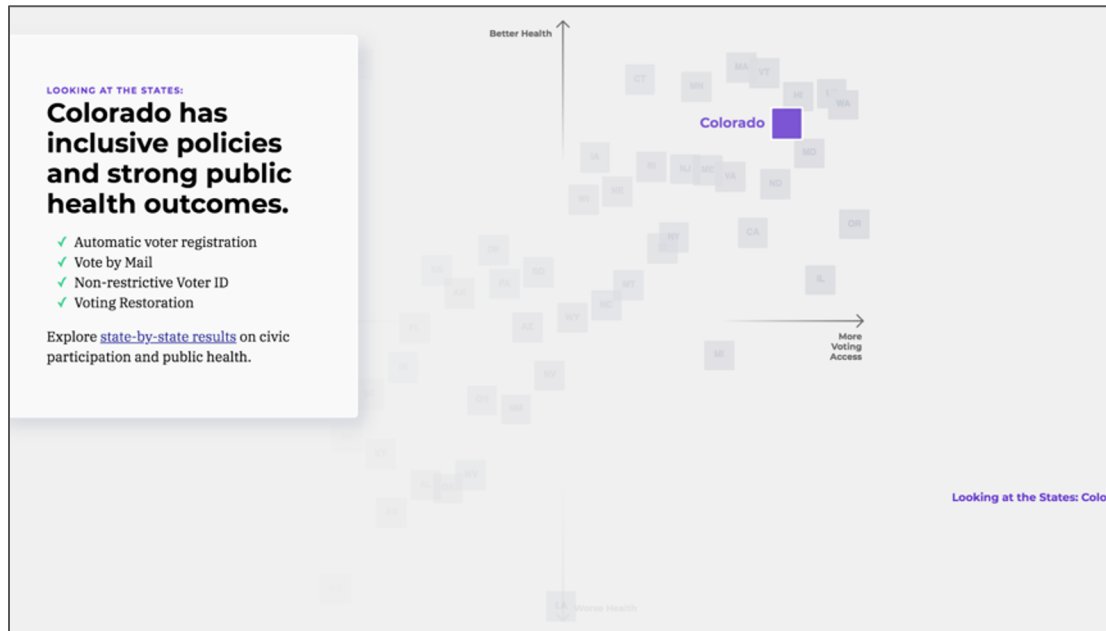


Voting and Health Disparities: Infant Mortality



Disparities in infant mortality shrink for all racial and ethnic groups in states that have better civic participation.

Looking at the states: Colorado



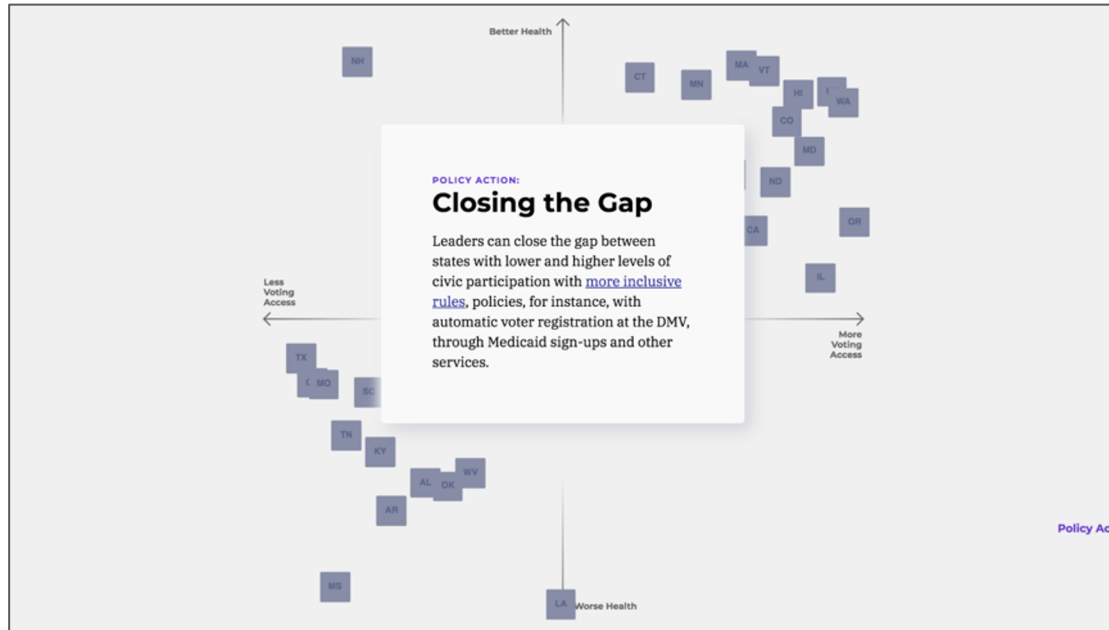
- Voters automatically registered through the Department of Motor Vehicles
- Same day and Election Day registration allowed
- Allows non-photo ID
- Rights restored post-incarceration

Looking at states:Tennessee



- Does not have automatic, same day, or election day registration
- Strict photo ID requirement (or must vote a provisional ballot)
- Must petition for restoration of voting rights post-sentence

Political action: Closing the Gap



- Automatic voter registration
- Registration through other government services besides motor vehicle agencies
- Restoration of Civic Participation to Healthy People 2030

Policy implications



Policy Implications

There are several ways health and civic engagement policies can be more closely linked.

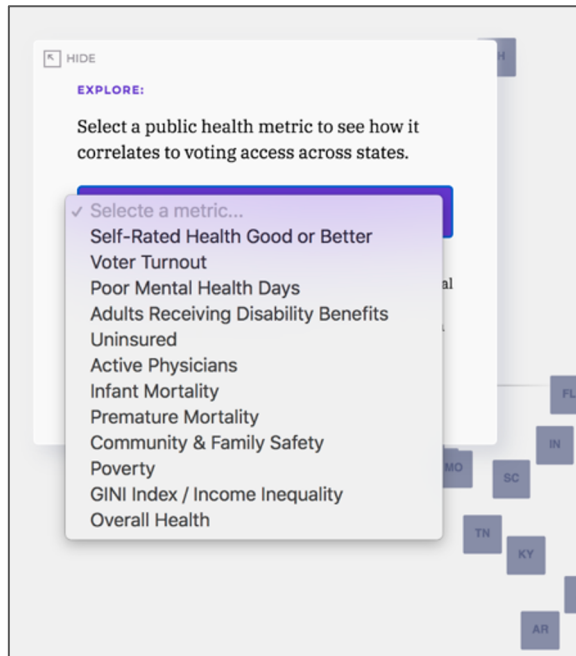
Update Voter Registration through Government Services

We can help people update their voter registration when they sign up for other government services, just like when they renew their driver's license. This can be expanded to include more services, including health services such as Medicaid.

For instance, the Centers for Medicare and Medicaid Services can empower states to let people update their registration when they enroll in Medicaid. Currently, 73 million people are enrolled in Medicaid. Health offices already verify relevant information for voting including people's address, so this makes our elections more secure and helps election offices keep their voter registration information up to date. Further, enrollment happens every year, which means voters can easily keep their info up to date.

Restores Civic Participation to Our National Health Goals

Explore the data through metrics: list of metrics



Individual Health
Population Health
Other Social Determinants





List of metrics: definitions

Health Outcomes

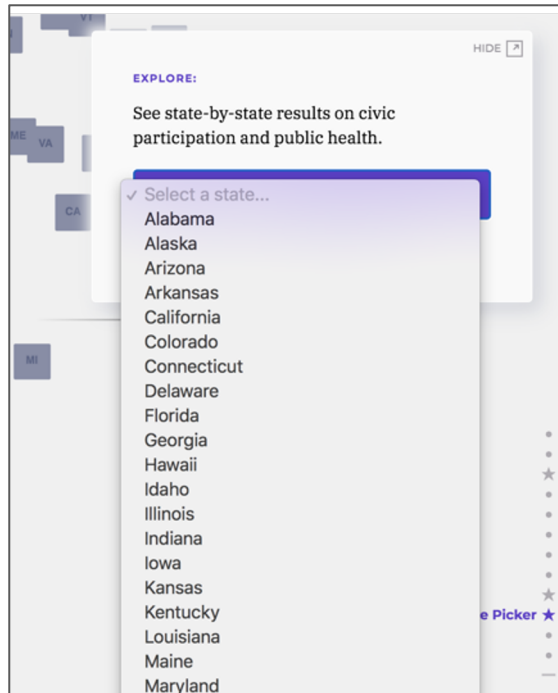
The public health indicators selected include individual health measures as well as factors that influence health outcomes, also known as determinants of health. Indicators are only included if there is an evidence-based link between an indicator and civic engagement (most commonly seen as voter turnout). The 12 indicators selected are described below. The data have been standardized for graphical representation.

Individual and Community Health

- **Self-rated health.** This is the percentage of adults reporting that their health is good or better when asked "How is your general health?" People who report fair or poor health are less likely to vote, but people who have good or better health are more likely to vote. Higher is better.
- **Self-rated mental health.** This is the average number of poor mental health days reported in the last 30 days. People with poor mental health are less likely to vote. Lower is better.
- **Adults receiving disability benefits.** This is the percentage of adults 18-64 receiving Social Security Disability Insurance (SSDI) payments. This tells us about economic stability for workers with disabilities and also helps us understand labor force participation rates in each state. People with disabilities tend to vote at lower rates than people without disabilities. Lower is better.
- **Premature mortality.** This analysis uses a state ranking based on years of potential life lost (YPLL) before age 75. Many premature deaths are preventable. People of color are at higher risk for premature death, and there is some evidence linking this to lost votes over time resulting in significant voting disparities. Lower is better (1 is the best, 50 is the worst).
- **Infant mortality.** This is the rate of infants dying within the first year of life. It is a common measure of public health worldwide, and tells us about access to and quality of healthcare in a community. Lower is better.
- **Chronic disease prevalence.** This analysis uses the percentage of adults who report having 3 or more chronic conditions. People with chronic conditions may vote at lower rates than people without chronic conditions. Having multiple chronic conditions also affects the risk of mortality. Lower is better.
- **Active physicians per capita.** This is the total number of active physicians of all types per 100,000

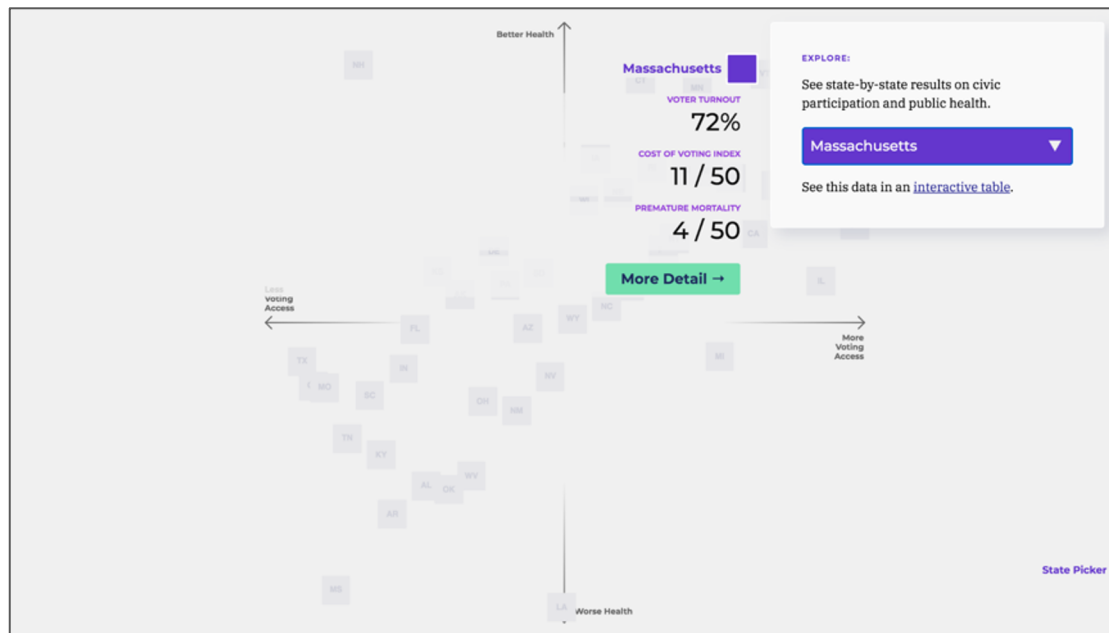
On the [Methods](#) page

Explore the data through state picker

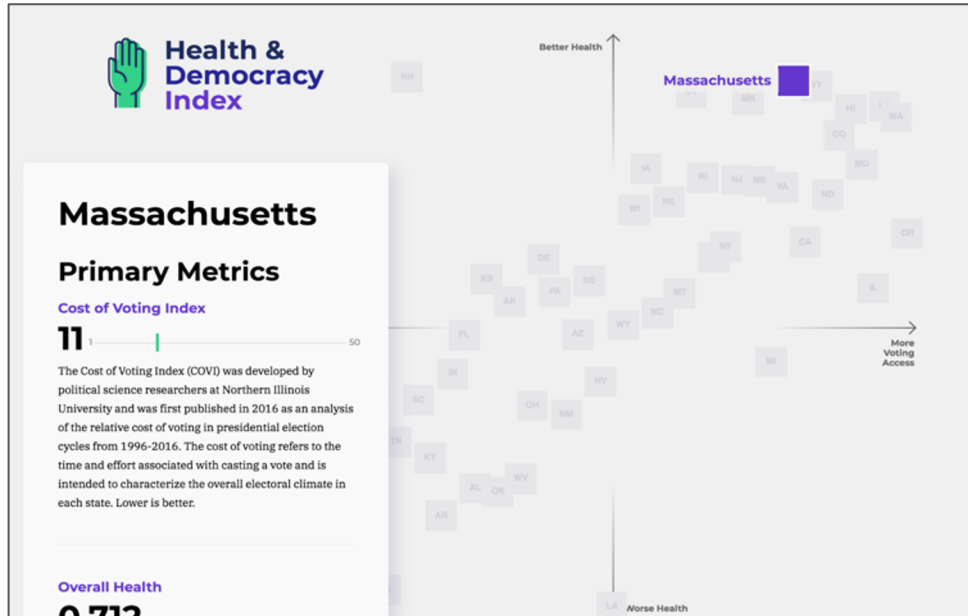


- Currently includes 50 states
- Does not include territories or freely associated states
- Does not include county-level data

Explore the data through state picker: two views



State landing page (second view) Example: Massachusetts

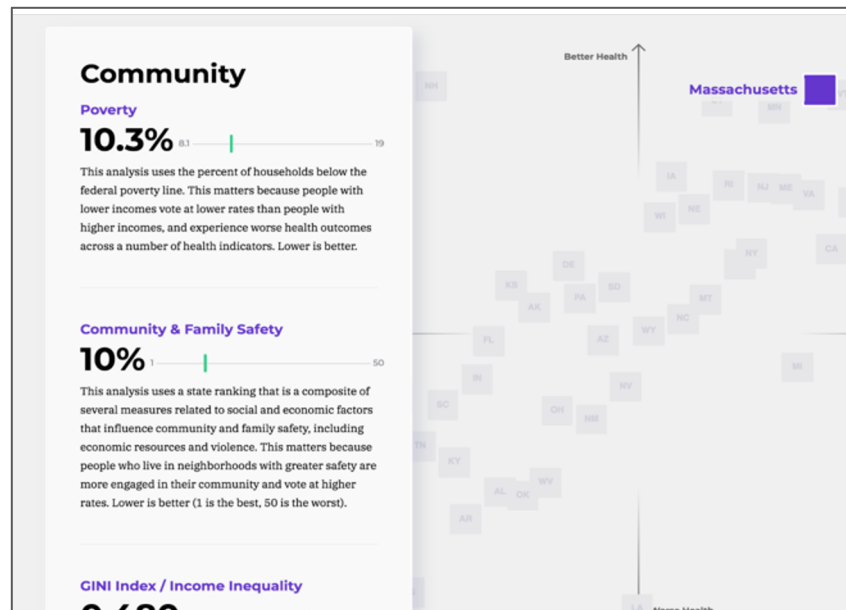
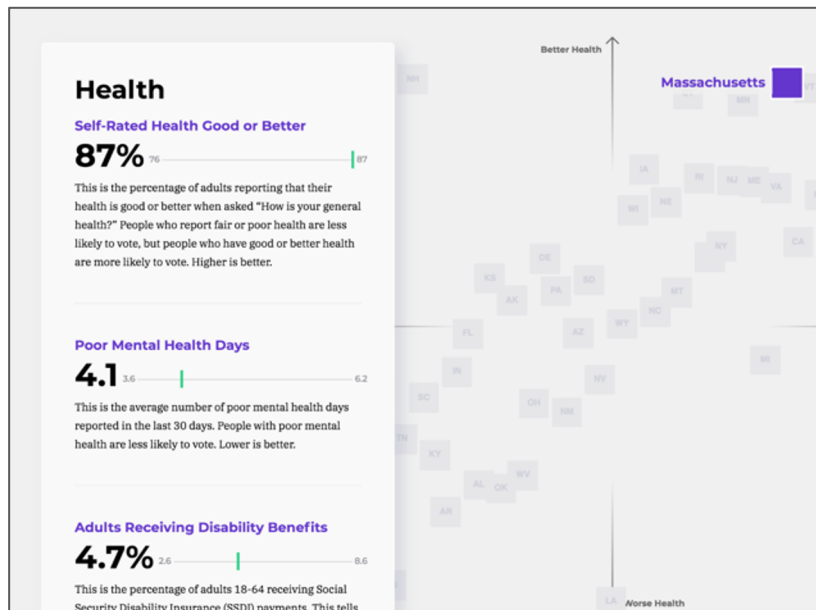


Includes:

- Primary metrics – Cost of Voting Index and Overall Health
- Voting policies
- Civic participation (turnout and registration)
- All of the health metrics

State detail

Example: Massachusetts



State detail - Massachusetts

Health

Self-Rated Health Good or Better

87%

76

87

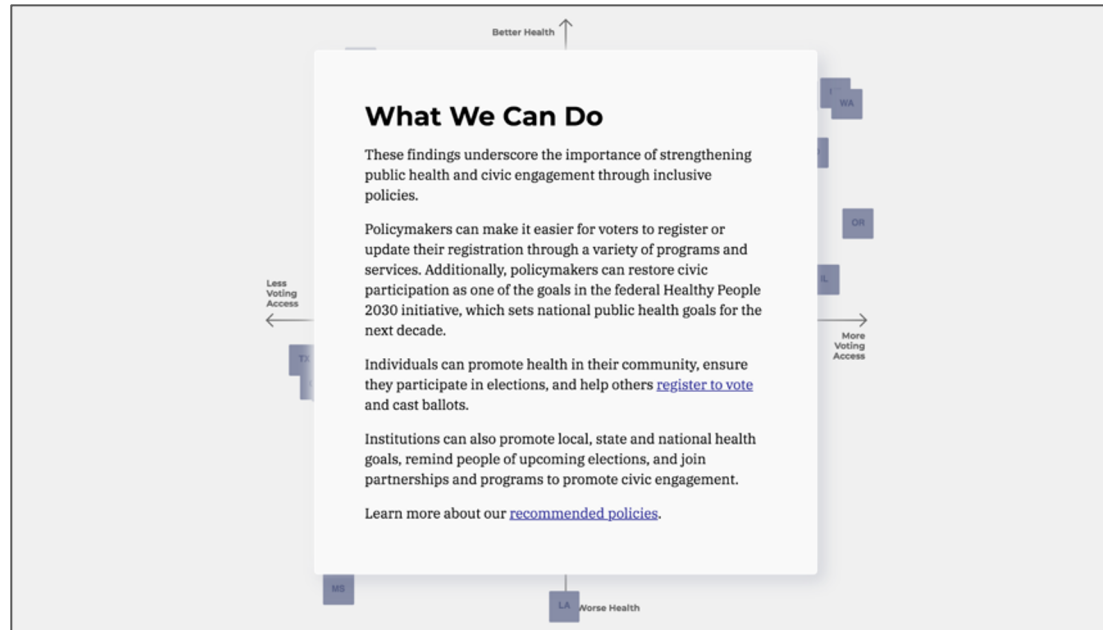
This is the percentage of adults reporting that their health is good or better when asked “How is your general health?” People who report fair or poor health are less likely to vote, but people who have good or better health are more likely to vote. Higher is better.

Health measure

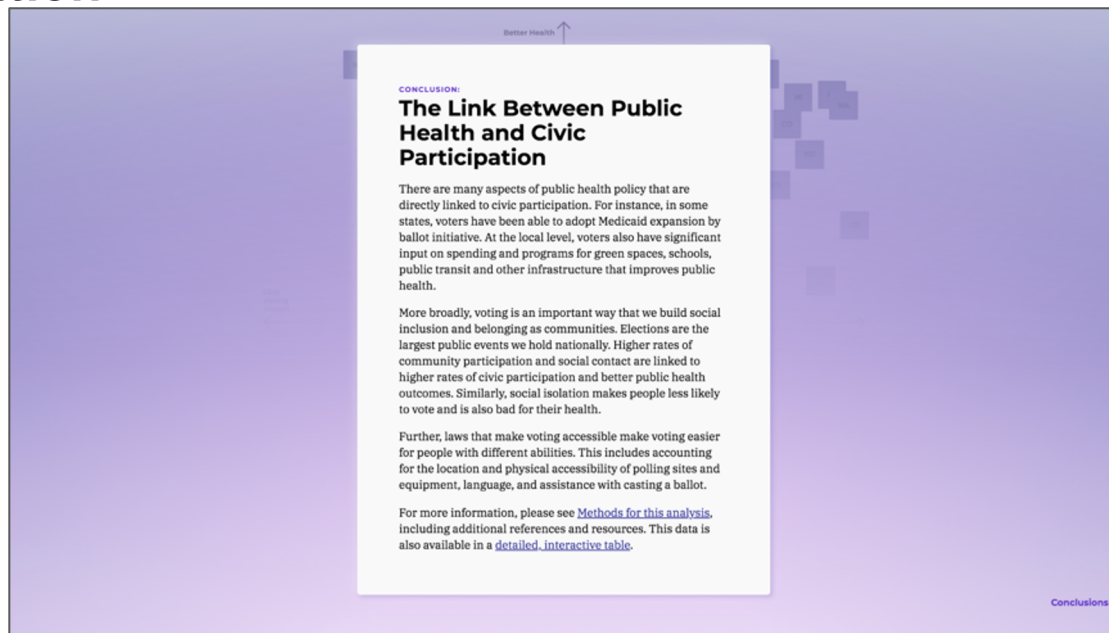
Scale

Definition

What we can do



Conclusion: The Link between public health and civic participation



Better Health ↑

CONCLUSION:

The Link Between Public Health and Civic Participation

There are many aspects of public health policy that are directly linked to civic participation. For instance, in some states, voters have been able to adopt Medicaid expansion by ballot initiative. At the local level, voters also have significant input on spending and programs for green spaces, schools, public transit and other infrastructure that improves public health.

More broadly, voting is an important way that we build social inclusion and belonging as communities. Elections are the largest public events we hold nationally. Higher rates of community participation and social contact are linked to higher rates of civic participation and better public health outcomes. Similarly, social isolation makes people less likely to vote and is also bad for their health.

Further, laws that make voting accessible make voting easier for people with different abilities. This includes accounting for the location and physical accessibility of polling sites and equipment, language, and assistance with casting a ballot.

For more information, please see [Methods for this analysis](#), including additional references and resources. This data is also available in a [detailed interactive table](#).

Conclusions

Methods, limitations, and references



Methods

This analysis compares 12 public health indicators and voter turnout to the Cost of Voting Index for U.S. states for the 2020 general election. All indicators and measures were selected based on an analysis of published literature linking civic participation and health.

Civic Participation

Cost of Voting in the American States: 2020

The Cost of Voting Index (COVI) was developed by political science researchers at Northern Illinois

- Explanation of the Cost of Voting Index
- Definitions for all health metrics and why they matter
- Data sources
- Limitations
- References and resources

Interactive data table

Data Table

This is a summary table of health indicators and voting policies for each state. On desktop, clicking on an indicator will sort the values from highest to lowest or lowest to highest.

	Inclusive Registration	Restrictive Voter ID	Voting Rights Restoration	Cost of Voting Index	Overall Health	Voter Turnout	Voter Registration	Self-rated Health Good or better	Poor Mental Health Days	Adults Receiving Disability Benefits	Uninsured	Active Physicians	Infant Mortality	Prenatal Mortality	Child Index / Income Inequality	Community & Family Safety	Poverty	
Alabama	No	Yes	No	No	39	-0.59	63%	68%	79	5.4	8	15.2	217.1	6.94	48	0.474	43	15.9
Alaska	Yes	No	Yes	No	36	0.007	69%	74.2%	85	3.9	2.8	10.4	216.9	6.29	33	0.438	49	9.1
Arizona	No	Yes	Yes	No	30	-0.098	66%	76.4%	82	4.5	3.7	16	242	8.71	26	0.459	37	12.4
Arkansas	No	Yes	No	No	42	-0.878	66%	62%	76	5.4	7.9	14.7	207.6	7.81	44	0.475	30	16.3
California	Yes	No	Yes	Yes	10	0.196	69%	69.4%	82	3.8	2.7	13	219.6	4.21	2	0.487	20	11.4
Colorado	Yes	No	Yes	Yes	7	0.538	76%	71.3%	86	4	2.8	12.9	285.7	4.75	10	0.456	19	9.5
Connecticut	Yes	No	No	No	20	0.675	72%	73.3%	86	3.8	3.9	9.2	382.1	4.2	5	0.502	6	10.4

You can...

- sort by each metric
- sort highest to lowest OR lowest to highest

Interactive data table

	Inclusive Registration	Restrictive Voter ID	Voting Rights Restoration	Cost of Voting Index	Overall Health	Self-Rated Health	Adults Receiving Poor Health Days	Uninsured	Physicians	Mortality	GINI Index	Community Inequality

Click on a state to go to the state landing page

This is the percentage of adults reporting that their health is good or better when asked "How is your general health?" People who report fair or poor health are less likely to vote, but people who have good or better health are more likely to vote. Higher is better.

Hover for definition



About the Index

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Next steps

What's next?



More research!



More data!



Calls to action!



Thank you!

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The Network
for Public Health Law