Tennessee

Summary

Low Disparities

- Between metropolitan and non-metropolitan areas for low birthweight
- Between females and males for less than a high school education
- Between those with less than a high school education and college graduates for cancer

High Disparities

- Between those with less than a high school education and college graduates for physical inactivity
- Between American Indian/Alaska Native and Asian/Pacific Islander for high health status
- Between Hispanic and white for dedicated health care provider

1 Low disparities within a state does not indicate that all populations are doing well. Consider rates in comparison to national averages.
2 Rates worse than national average.
3 Rates same or better than national average.

Highlights

- Infant Mortality in Black infants between 2003-2006 and 2015-2018 from 16.3 to 11.3 deaths (before age 1) per 1,000 live births
- Food Insecurity in households headed by an adult with less than a high school education between 2003-2007 and 2015-2019 from 18.8% to 26.9%
- Unemployment in Hispanic civilians between 2005-2009 and 2015-2019 from 8.1% to 4.5%
- Asthma in male adults between 2011-2013 and 2017-2019 from 5.0% to 7.9%
- Smoking in college graduates between 2011-2013 and 2017-2019 from 10.9% to 7.0%
- Excessive Drinking in female adults between 2011-2013 and 2017-2019 from 7.3% to 11.3%

Trends

High Health Status by Race & Ethnicity

Frequent Mental Distress by Education

Income Inequality

Income inequality measures the ratio of median household income of the 20% richest to the 20% poorest. A high ratio indicates greater income inequality. Research demonstrates an association between greater income disparity and poorer population health.

In Tennessee, income inequality has decreased since 2011. Tennessee’s ratio is currently lower than the national ratio.

For source details and methodology visit www.AmericasHealthRankings.org.