Utahns may like to laud its child-oriented culture, but the levels of health for most Utah children fall far short — no matter how educated or advantaged their parents are, according to a landmark survey released last week.

The state-by-state report Reaching America's Health Potential Among Adults by the Robert Wood Johnson Foundation, which links a good education with better health, shows the state lagging behind in several predictors of children's capacity to become and stay healthy adults.

Utah ranks 19th among states, based on the gap in children's general health status by family income.

Nearly 11 percent of Utah children are in less than optimal health, and nearly 5 percent of children in well-educated households aren't nearly as healthy as they should be, according to the report. Children in Utah families at all income and education levels overshot the 3.5 percent less-than-optimal health benchmark the country should be hitting, according to the report. Only one state, Colorado, has attained that level so far, the report concludes.

The data show that the lower the education of the parents, the worse their children's chances are of being healthy during childhood and over their own lifetimes.

Utah children in households without a high school graduate are approximately six times as likely to be in less than optimal health as children living with an adult who has completed some college.

Utah children in poor families are more than four times as likely to be in less than optimal health as children in higher income families.

The report, which statistically correlates the logical notion that the better someone's education, the better their health and longevity, shows that there is more to good health than health care, said Alice M. Rivlin, co-chairwoman of the foundation's special commission that oversaw the research.

"Access to affordable, high-quality medical care is essential, but that alone will not improve the health of all Americans," Rivlin said. "What this report tells us is that education has a tremendous impact on how long and how well we live. Policymakers need to focus on schools and education, as well as promoting healthier homes, communities and workplaces, to improve the health of our nation."

Utah is generally in the middle of the pack nationwide for child well-being, but it has the second worst infant mortality rate with 5.1 deaths per 1,000 births, the report states. The rate is a point lower than the national average, but it's nearly two points higher than the report's benchmark rate researchers deem acceptable for a healthy society — 3.2 deaths per 1,000 live births.

In Utah, infant mortality rates in every maternal education and racial or ethnic group did not meet the national average of 4.0 deaths per 1,000 births among the most educated mothers nationwide, according to the study. Even if Utah achieved that rate, infant mortality would still far exceed the target.
The infant mortality rates vary by mother's education and racial ethnic group, but the death rate among babies born to mothers with fewer than 12 years of school is nearly twice that for babies born to mothers with 16 or more years of school.

"Education is a powerful predictor of health, but even the best educated are falling below an acceptable level of good health ... Those at the bottom are clearly at much more risk" said Paula Braveman, a lead study author.

Given that Utah is in well into the first phase of a 10-year health system reform effort, "this report is unusually timely," said Judi Hilman, executive director of the Utah Health Policy Project.

"It reminds us that if one of the core objectives of reform is to improve health outcomes, access to coverage is only one piece of the puzzle," Hilman said. "The report underscores the need to address the broader socioeconomic determinants of health, starting with access to education."