# The State of Health in Washington, D.C.

IHME measures the US's health problems, including in all 50 states, Washington, D.C., and US territories from 1990 through 2021. It is the most comprehensive and comparable research on US health to date, tracking 400+ diseases, injuries, and risk factors. IHME also examines disparities by race and ethnicity and sex and published findings on health in 3,110 US counties. This work is made possible through funding from National Institute on Minority Health and Health Disparities (NIMHD).

D.C. is rising in global life expectancy rankings.

Between 1990 and 2021, D.C.'s life expectancy ranking improved relative to other countries. While D.C.'s male and female life expectancy ranking started out much lower than in the US overall, by 2021, D.C. had caught up.

**DC's global ranking in life expectancy compared to US average, 1990–2021**
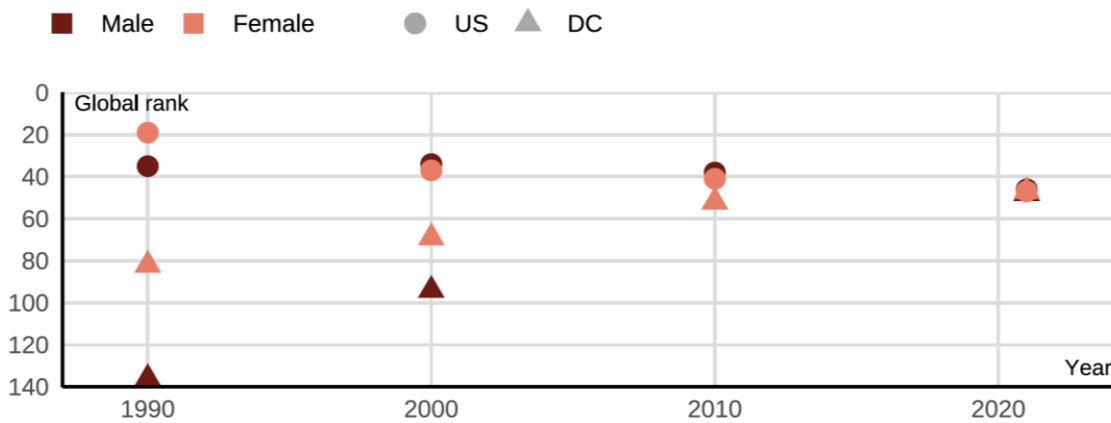
In 2021, countries including **Canada, Netherlands, and Costa Rica** had a higher life expectancy than D.C.

Tackling high blood pressure and obesity could improve D.C.'s life expectancy ranking.

If D.C. intervenes on key risk factors such as high blood pressure and obesity, its global ranking for life expectancy could rise to 28th by 2050.

DC's global ranking in life expectancy, 2022–2050, two scenarios
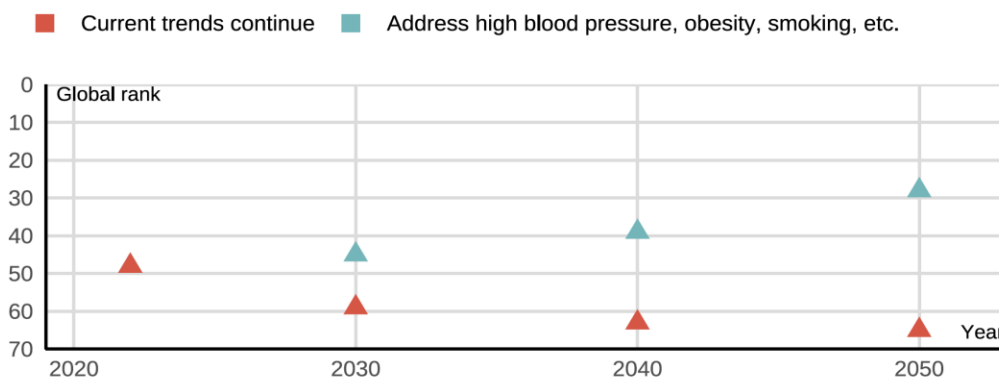
The scenario "address high blood pressure, obesity, smoking, etc." is based on the US eliminating exposure to high body mass index, high blood sugar, high blood pressure, high LDL cholesterol, poor diet, and smoking by 2050. This graphic assumes that every other location globally would continue on their current trajectory without addressing these issues.

Leading causes of poor health and early death: Drug use disorders, ischemic heart disease, and COVID-19 dominate.[1]

Leading causes 2021 ranking, D.C.	
1	Drug use disorders
2	Ischemic heart disease
3	COVID-19
4	Low back pain
5	Diabetes
6	Interpersonal violence
7	Other musculoskeletal disorders[2]
8	Stroke
9	Anxiety disorders
10	Depressive disorders

Main risk factors: Drug use is the top risk factor for poor health and early death in D.C.[3]

Leading risk factors 2021 ranking, D.C.	
1	Drug use
2	Obesity and overweight[4]
3	High blood pressure
4	High blood sugar
5	Smoking

[1]*Based on disability-adjusted life years per 100,000 people, all ages, all sexes combined, Level 3 of the Global Burden of Disease (GBD) hierarchy.*

[2]*Includes disorders such as neck pain and arthritis.*

[3]*Based on risk-attributable disability-adjusted life years in 2021 for all ages, all sexes combined, Level 3 of the GBD hierarchy.*

[4]*Body mass index greater than 25 in adults (≥18 years) and based on the International Obesity Task Force (IOTF) criteria for children (<18 years).*

## Most of the major risk factors are increasing in D.C.[5]

Among the five leading risk factors, the burden of disease from drug use is growing the fastest. Causes are ordered based on ranking for all sexes in 2021.

**Shifts in disease burden from leading risk factors, 2010–2021, DC**
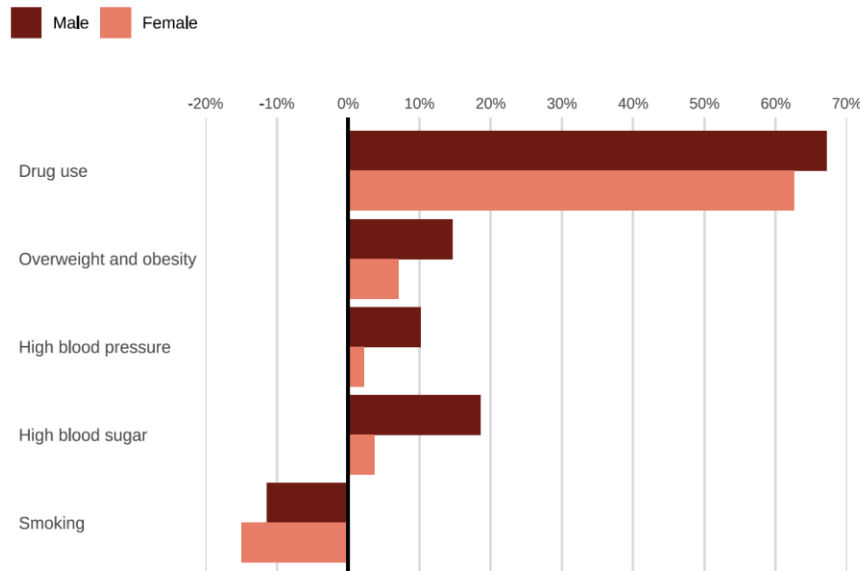
[5]*Percentage change in rates of risk-attributable disability-adjusted life years, all ages, all sexes. Risk factors are ordered based on ranking for risk-attributable disability-adjusted life years in 2021 for all sexes, Level 3.*

Source: *The Lancet*, https://bit.ly/health-US

Obesity and overweight is a rising threat to health in D.C., especially for youth.
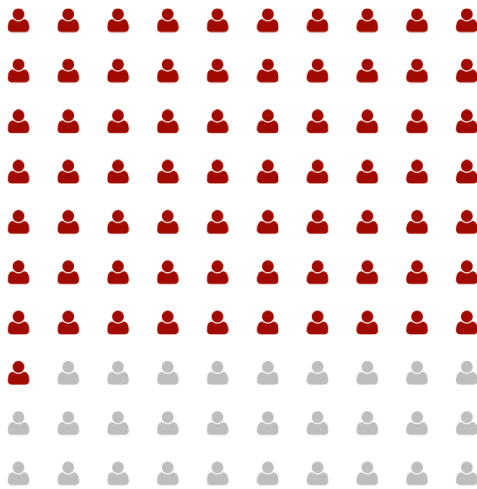
For adults ages 25+, IHME projects that **71%** will be living with overweight and obesity by 2050.
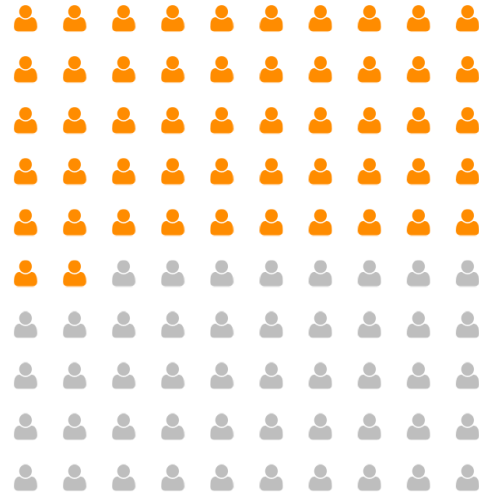
By 2050, IHME projects that **52%** of young people ages 15 to 24 will be overweight or obese in D.C.

Well-being in D.C.

IHME measures well-being across the states using a metric called the Human Development Index. This metric reflects life span, education, and income.
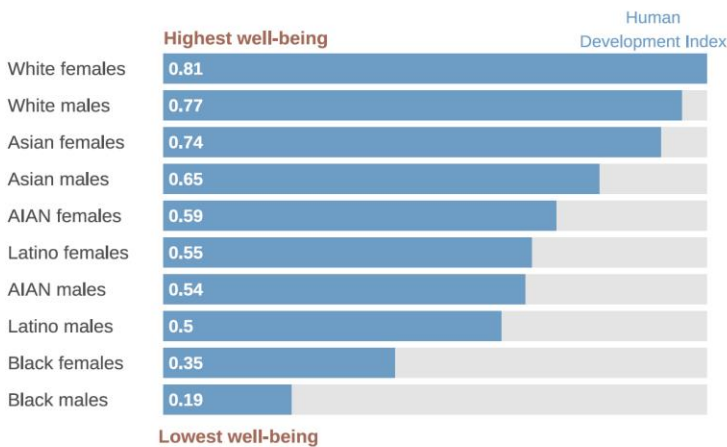

Human Development Index

	Highest well-being	
White females	0.81	
White males	0.77	
Asian females	0.74	
Asian males	0.65	
AIAN females	0.59	
Latino females	0.55	
AIAN males	0.54	
Latino males	0.5	
Black females	0.35	
Black males	0.19	
	Lowest well-being	

Chart reflects average Human Development Index measurement between 2008 and 2021. AIAN: American Indian and Alaska Native.

On average, in D.C., Black people experience the lowest well-being. They also make up the largest portion of the worst-off HDI segment.

Legend:
- Black males
- Black females
- Latino males (0.02)
- Latina females (0.02)
- White males (0.01)
- White females (<0.01)
- Asian females (<0.01)
- Asian males (<0.01)
- AIAN males (<0.01)
- AIAN females (<0.01)

Black females 0.2
Black males 0.51
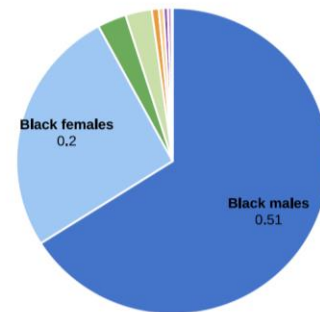
Numbers not shown in the pie chart are shown in the legend instead.

About IHME

The Institute for Health Metrics and Evaluation is an independent research organization at the University of Washington. Its mission is to deliver to the world timely, relevant, and scientifically valid evidence to improve health policy and practice. IHME carries out its mission through a range of projects within different research areas including the Global Burden of Diseases, Injuries, and Risk Factors (GBD); Future Health Scenarios; Cost Effectiveness and Efficiency; Resource Tracking; and Impact Evaluations.

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