

Nevada's poor health rankings are a call to action

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For the past 25 years, the United Health Foundation's "America's Health Rankings" have tracked the status of our nation's health and the overall healthiness of each US state. These rankings represent the longest running, most comprehensive report of its kind.

The latest installment of state rankings provides a powerful reminder that health in Nevada is shaped by the communities and environments within which we live, by social determinants such as education and poverty, and by health-consequential behaviors, such as smoking and drinking. Despite state policymakers' preoccupation with downstream tinkering with sick-care system financing and delivery, the report is a call for more energy and resources to be aimed at upstream factors influencing health in Nevada.

Nevada's overall health ranking among US states is 39<sup>th</sup> this year, a drop from last year's ranking of 37<sup>th</sup>. Over the past 25 years, Nevada's overall rank has ranged from 37<sup>th</sup> to 47<sup>th</sup>.

On the positive side, this year's report highlights Nevada's low incidence of infectious disease (rank of 4<sup>th</sup> among US states), infant mortality (18<sup>th</sup>), and our comparatively low prevalence of obesity (11<sup>th</sup>) and physical inactivity (15<sup>th</sup>). In the past year alone, preventable hospitalization rates among Medicare beneficiaries decreased by 9 percent and, over the past two years, smoking decreased from 22.9 percent to 19.4 percent of adults. In 1990, adult smoking prevalence was 35.7 percent.

Alas, these strengths are more than offset by challenges that include the nation's worst high school graduation rate (50<sup>th</sup>), low immunization coverage among children (49<sup>th</sup>), and high rates of violent crime (49<sup>th</sup>). In the past 5 years, high school graduation in Nevada increased by 8 percent from 55.8 percent to 60.0 percent of incoming ninth graders, yet Nevada remains ranked 50<sup>th</sup> among US states for high school graduation.

These persistent deficits are aggravated by chronic health care access barriers that include a low per capita number of primary care physicians (47<sup>th</sup>) and a high percentage of uninsured Nevadans (49<sup>th</sup>). Moreover, the State of Nevada's annual investment in disease surveillance and public health programs to protect and promote population health is an embarrassing pittance of \$39 per person (50<sup>th</sup>), as compared to the top state, Hawaii, which spends \$219 per capita or nearly six times of Nevada outlays on core public health activities.

Since the publication of the first set of rankings in 1990, Nevada and other states have seen significant declines in premature mortality, cancer and cardiovascular death rates, and cigarette smoking. Nonetheless, the current report concludes that as "we celebrate significant health

gains made over the past 25 years, we also don't want to lose sight of the sobering challenges we face." In Nevada, to put it mildly, plenty of work remains.

The 25<sup>th</sup> anniversary edition of health rankings data provide our state with an opportunity to renew our commitment to confront it's formidable health challenges in 2015 and a call to action for Nevada lawmakers as we approach the upcoming legislative session.

The latest American Health Rankings report and interactive state health statistics can be found at [www.americashealthrankings.org](http://www.americashealthrankings.org).

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