

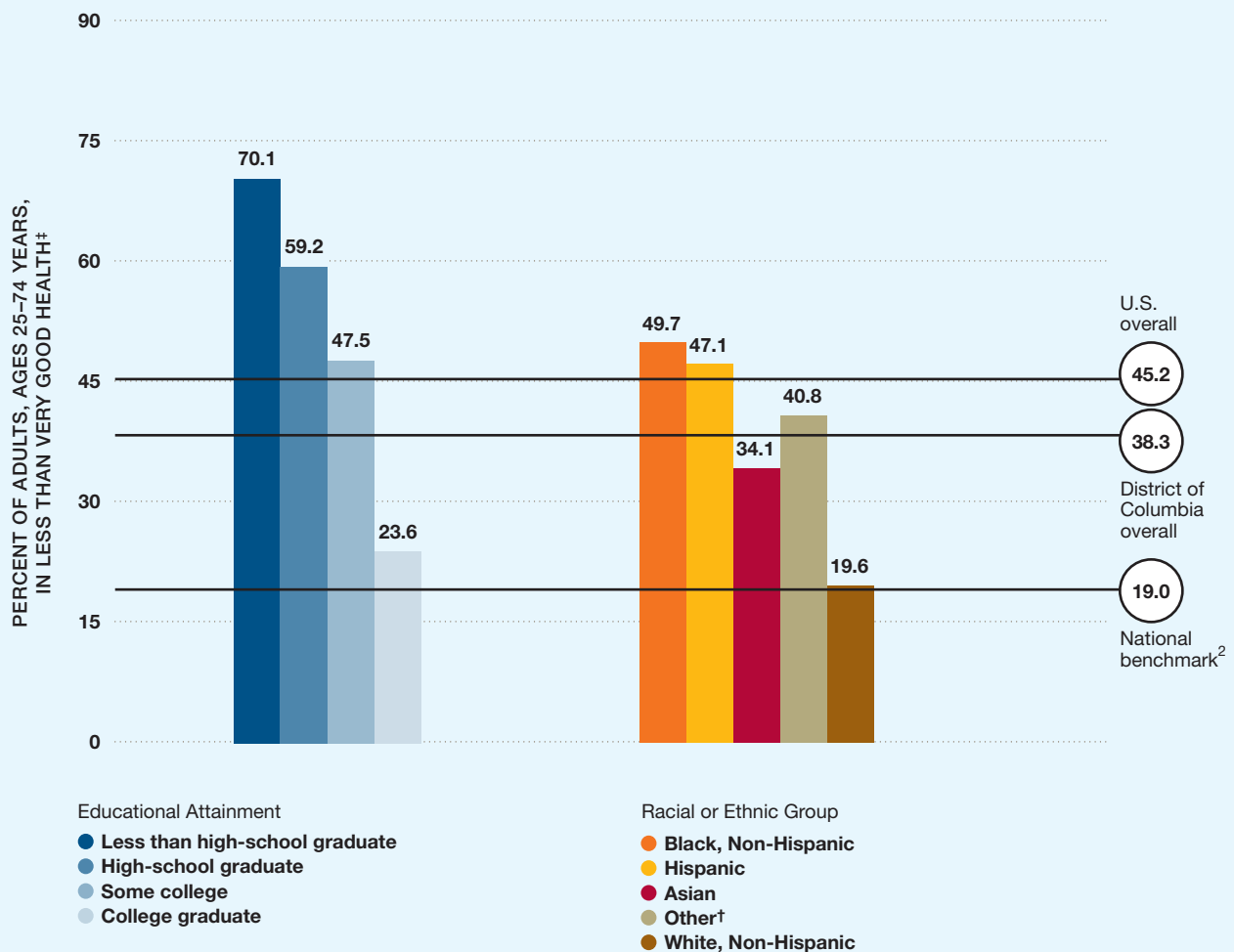
## DISTRICT OF COLUMBIA: Gaps in Adult Health Status

In the District of Columbia, adult health status<sup>1</sup> varies by level of educational attainment and by racial or ethnic group.

- Compared with college graduates, adults who have not graduated from high school are three times as likely—and those who have graduated from high school are more than twice as likely—to be in less than very good health.

- Hispanic and non-Hispanic black adults are more than twice as likely as non-Hispanic white adults to be in less than very good health.

Comparing the District of Columbia's experience against the national benchmark<sup>2</sup> for adult health status reveals that, at every education level and in most racial or ethnic groups, adults in the District of Columbia are not as healthy as they could be.



Prepared for the RWJF Commission to Build a Healthier America by the Center on Social Disparities in Health at the University of California, San Francisco. Source: 2005-2007 Behavioral Risk Factor Surveillance System Survey Data.

1 Based on self-report and measured as poor, fair, good, very good or excellent.

2 The national benchmark for adult health status represents the level of health that should be attainable for all adults in every state. The benchmark used here—19.0 percent of adults in less than very good health, seen in Vermont—is the lowest statistically reliable rate observed in any state among college graduates who were non-smokers with leisure-time physical exercise. Rates with relative standard errors of 30 percent or less were considered to be statistically reliable.

† Defined as any other or more than one racial or ethnic group, including any group with fewer than 3 percent of surveyed adults in the state in 2005-2007.

‡ Age-adjusted.