Ranking the states of the United States according to various social and economic indicators is increasingly popular. State rankings can be found in the popular media almost every week on everything from student performance on standardized tests to crime statistics. A compilation in which the state of Utah has consistently ranked very high is the publication of the United Health Foundation, *America’s Health: State Health Rankings* (see [http://www.unitedhealthfoundation.org/shr2004/](http://www.unitedhealthfoundation.org/shr2004/)). Utah has been among the top ten healthiest states in these rankings since 1990, finishing 5th in 2004 and 3rd in 2003.

**Age-adjusted All Cause Mortality: an Indicator of Overall Health**

Using age-adjusted rates as a barometer, recent trends in some important measures of overall health suggest that the health of the U.S. as a whole is actually becoming more like Utah’s. Figure 1 shows the trend for age-adjusted death rates for all causes for Utah and the U.S. In this comparison, statistically adjusted for the relative youthfulness of the Utah population, U.S. and Utah mortality rates are shown to have been converging for more than a decade. While age-adjusted all cause mortality has been steadily declining in the nation as a whole, this measure of overall health has been relatively flat in Utah following two decades of rapid decline.

**Leading Causes of Death Rankings**

The primary contributors to all cause mortality, the leading causes of death, are essentially the same for Utah and the U.S. To understand why mortality rates in Utah and the U.S are approaching the same level, it is useful to examine Utah’s national ranking over time for five leading causes of death:

- heart disease
- cancer
- stroke
- unintentional injury
- diabetes

For heart disease, the biggest cause of death, Utah ranked 1st healthiest in the nation in 1996, but fell to 4th place by 2002 (the most recent year of published national mortality data). Among the other causes shown, Utah’s cancer mortality rank remained number one,
unintentional injury improved, but stroke mortality went from 12th to 23rd.

**Risk Factor Rankings**
Comparisons of risk factor ranking trends are also interesting. Figure 3 shows Utah’s rank on heart disease mortality with six related risk factors:
- obesity
- physical inactivity
- cigarette smoking
- fruit consumption
- vegetable consumption
- poor mental health days

Utah continues to lead the nation in low tobacco use rates. Tobacco use is a leading contributor to at least three leading causes of death, heart disease, cancer, and stroke. As national smoking rates have declined, age-adjusted death rates for those causes have also declined, along with the nation’s all cause death rate.

Adult obesity is an epidemic in Utah and the U.S. Over the last seven years Utah’s rank moved from 9 to 23 among the states. Obesity is a risk factor for heart disease, diabetes, and some cancers. Growing evidence shows it may also be a risk for Alzheimer’s disease.

Examination of deaths for specific age groups indicates that death rates in recent years have been increasing primarily among Utah’s oldest citizens, those aged 85 and over. This was true for the overall death rate, and particularly for certain causes, including Alzheimer’s disease, injury, diabetes, pneumonia, heart disease, and cancer. It is unclear why death rates in this population have been increasing. Further examination of the roles of factors such as lifestyle, health care system, and the physical and social environments may be fruitful.

**Utah’s Ranking for Heart Disease Death and Risk Factors**
*Figure 3. Utah’s national rank for heart disease death, smoking, physical inactivity, obesity, fruit, poor mental health days, and vegetables, 1996-2003*

*Percentage of adults with no regular physical activity.
**Percentage of adults with a BMI of 30 or more.
***Percentage of adults who consumed 2+ servings of fruit or 3+ servings of vegetables daily.
****Percentage of adults with 7+ days in the past month with mental health “not good.”
Note: Rankings were based on age-adjusted rates for all 50 states and the District of Columbia. 2003 U.S. data were not available at the time of publication.

**Summary**
Rankings of the states are limited when they are based on rates of mortality or morbidity that are not age adjusted. Utah’s position near the top of un-adjusted rankings can be in part explained by Utah’s young age structure and traditionally low rates of tobacco use.

Using age-adjusted figures to compare Utah’s health status rankings provides an opportunity to see the progress of other states and the nation in becoming as healthy as Utah. It also allows us to take stock of Utah’s progress, identify areas of concern, and encourages us to learn from other states that are making significant progress.

Utah’s position of leadership in population health in the future will require attention to reducing even further the risk factors leading to illness and death. Utahns will need to individually adopt healthier lifestyles and support societal changes that will encourage them.