The study identifies the biggest health problems in 195 countries and territories.

**GBD includes**

- 2 billion+ results
- 300+ diseases, injuries, and risk factors
- Results by sex
- Over 20 age groups

**What questions can it answer?**

- What are my country’s biggest health problems?
- What causes more ill health in my country, depression or breast cancer?
- What contributes to more death and disability in my country - smoking, obesity/overweight, or unsafe water?
- What is the leading cause of death among children under the age of 5 in the world?
- I’m designing an intervention to improve the health of young women - which diseases, injuries, and risk factors should I target to make the greatest impact?
- Which countries have the highest death rates from drug use? Leukemia? Cardiovascular diseases?

**GBD is a worldwide effort**

Current contributors to the study

- 1,938 collaborators
- 125 countries
- 3 territories

Published in *The Lancet*, the study uses more than 80,000 data sources, drawing from the world’s largest global health database. Governments in Australia, Brazil, Kenya, Norway, the UK, and the US, as well as the Bill & Melinda Gates Foundation and the World Bank, are using GBD findings to inform decision-making.
What are GBD’s main findings?

• The world is in the midst of an “epidemiological transition,” which means that as countries increase their levels of development, early death and disability from communicable diseases are declining and life expectancies are rising.

• While more developed countries tend to be healthier than less developed ones, some countries are much healthier than expected given their level of development, such as Ethiopia and Spain.

• People’s exposure to poor sanitation, indoor air pollution, and childhood undernutrition has dropped, resulting in dramatic declines in the burden of diarrhea and pneumonia in children.

• Several risk factors linked to development increased markedly from 1990 to 2015. These include obesity/overweight, high blood sugar, ambient air pollution, and drug use.

How can I learn more?

• Download the GBD report, Rethinking Development and Health: Findings from the Global Burden of Disease, at http://www.healthdata.org/policy-reports

• View main findings by country at http://www.healthdata.org/results/country-profiles

• Explore the GBD Compare data visualization http://vizhub.healthdata.org/gbd-compare/

• Explore the results in data visualization tools http://www.healthdata.org/results/data-visualizations

• Read about the GBD study at www.healthdata.org/gbd

How can I get involved?

IHME is is always working to expand and strengthen the GBD collaborative network. GBD collaborators have expertise in a range of areas and provide timely feedback related to interpretation of GBD results, data sources, and/or methodological approaches pertaining to their area of expertise.

We invite you to apply to be a GBD collaborator! Enrollment is now open for the next round of GBD.

For more information, visit http://www.healthdata.org/gbd/call-for-collaborators.

To contact the GBD Management Team, please email gbdsec@uw.edu.

Disability-adjusted life years (DALYs) are years of healthy life lost to premature death and disability. This figure shows that communicable diseases declined between 1990 and 2015.