



2A.

TOTAL MORTALITY

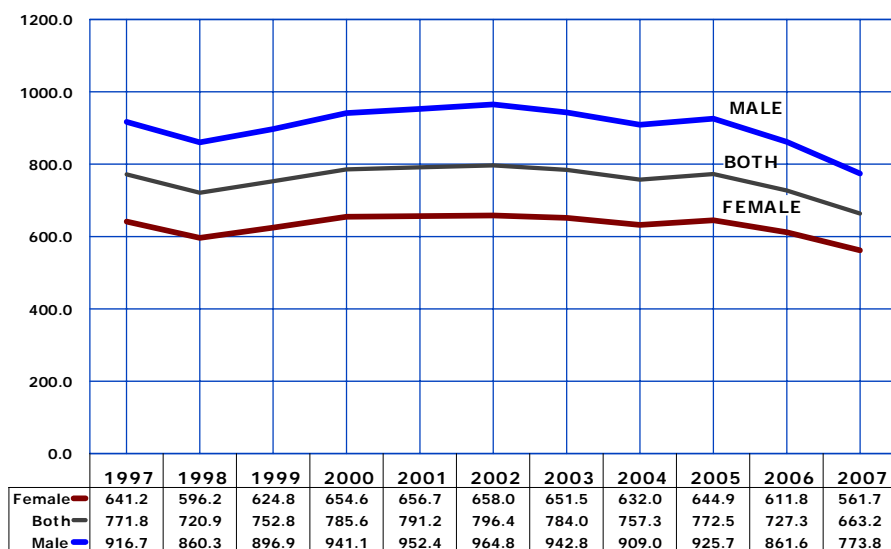
The number of deaths among Arizona residents decreased by 775 between 2006 and 2007 (**Table 2A-1**). The number of deaths occurring in Arizona (including the deaths of out-of-State residents) also decreased from 47,182 in 2006 to 46,325 in 2007 (**Table 5E-2**). In the second fastest growing State, the decline in the number of resident deaths is unusual.

Most population subgroups (based on age and race/ethnicity) did not experience declines in mortality. The number of deaths among Hispanic or Latinos, Blacks or African Americans, American Indians and Asian or Pacific Islanders actually increased from 2006 to 2007 (**Table 2A-1**). In contrast, the number of deaths among White non-Hispanics decreased by 1,147 from 36,952 in 2006 to 35,805 in 2007. The number of deaths decreased among preschoolers 1-4 years old, adolescents ages 15-19 years, young adults ages 20-29 years, and elderly 65-89 years old. Other age groups, including infants under 1 years of age experienced an increase in mortality between 2006 and 2007.

The 2007 overall decline in mortality may be due to several factors. The first one is incomplete reporting of out-of-State deaths of Arizona residents. During 2007, 518 deaths of Arizona residents were reported by other States, 48.7 percent less than the number of 1,009 reported in 2006. Another factor may be fewer deaths in 2007 for some of the leading causes of mortality. The causes with the largest declines were influenza and pneumonia (23.7 percent), primary hypertension (7.4 percent), Parkinson's disease (7 percent), accidents (4.5 percent), chronic lower pulmonary diseases (4.3 percent), and cerebrovascular disease (3.7 percent). Since accidents are the leading cause of death of Arizona residents who die elsewhere, the difference from 2006 may not be a true decrease in mortality but a decrease in the number of copies of death certificates received from other States.

2A. TOTAL MORTALITY

Figure 2A-1
Age-Adjusted Mortality Rates for all Causes by Gender and Year,
Arizona, 1997-2007



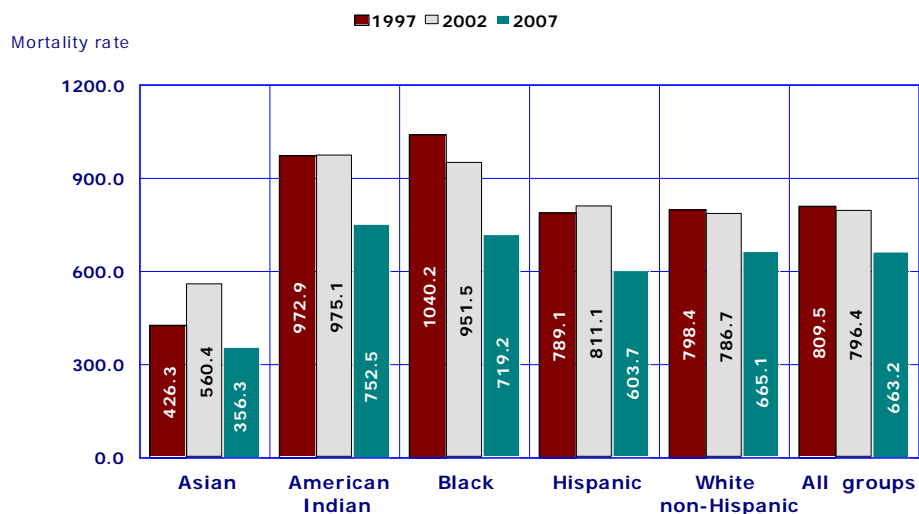
Beginning with the 2000 data year in Arizona, the age-adjusted mortality rates discussed below are based on the year 2000 population standard. The rates for 1997-1999 were re-calculated using the new standard. All mortality rates in sections 2A and 2B are age-adjusted. A detailed explanation of the age-adjustment of mortality rates is given in *Technical Notes*.

The total age-adjusted mortality rate decreased from 727.3 in 2006 to 663.2 in 2007 (**Figure 2A-1, Table 2B-2**). The death rate for females in 2007 was 561.7, 14.6 percent lower than in 2002 when it reached its peak of 658.0. For males, the age-adjusted mortality rate decreased by 10.2 percent from 861.6 in 2006 to 773.8 in 2007.

The percent difference between male and female mortality rates narrowed from 43 percent greater mortality rate in 1997 to 38 percent greater in 2007, continuing the trend toward convergence in mortality risk between males and females.

Number of deaths per 100,000 persons (adjusted to the 2000 standard U.S. population).

Figure 2A-2
Age-Adjusted Mortality Rates* for all Causes by Race/Ethnicity and Year,
Arizona Residents, 1997, 2002 and 2007



The 2007 age-adjusted death rates for the major race/ethnic groups were as follows: for Asian or Pacific Islander, 356.3 deaths per 100,000 population; Hispanic or Latino, 603.7; White non-Hispanic, 665.1; Black or African American, 719.2 and American Indian or Alaska Native, 752.5 (**Figure 2A-2, Table 2B-4**).

In 2007, as in 2002 and in 1997, Blacks and American Indians had higher total mortality rates than White non-Hispanics, Hispanics and Asians. In contrast, the total mortality rates for Asians were lower than the rates of White non-Hispanics in 1997, 2002 and 2007.

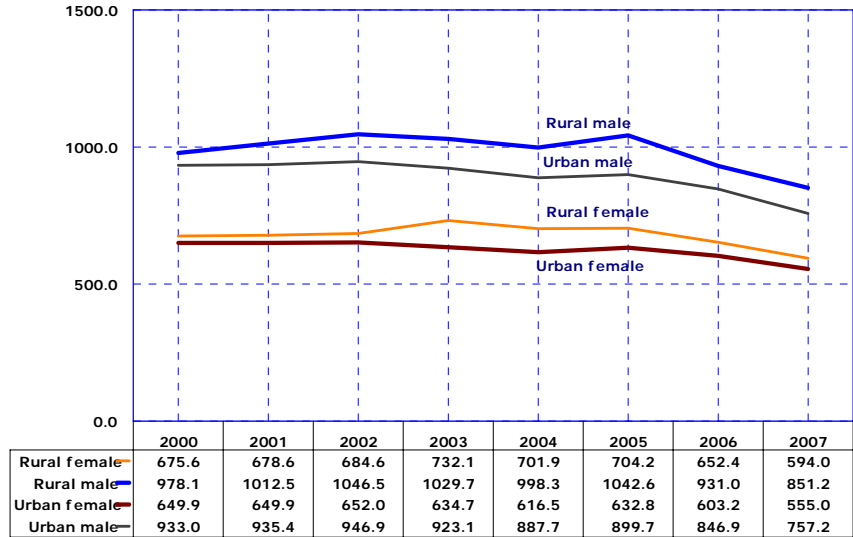
Number of deaths per 100,000 population age-adjusted to the 2000 standard U.S.

2A. TOTAL MORTALITY

Figure 2A-3
Age-Adjusted Mortality Rates* for all Causes by Gender in Urban and Rural Areas, Arizona Residents, 2000-2007

The residents of Arizona's urban (Maricopa, Pima, Pinal, Yuma counties) and rural (all other counties) areas both experienced improvements in total mortality from 2000 to 2007 (Figure 2A-3, Table 2B-5). However, in each year from 2000 to 2007, rural males had the highest total mortality rate, followed by urban males, rural females, and urban females. In 2000, the risk of death for rural males was 50.5 higher than for urban males (978.1 vs. 649.9). This ratio increased to 53.4 percent in 2007.

In 2007, per 100,000 persons, for every death of an urban female (the lowest mortality group), 1.1 rural females, 1.4 urban males, and 1.5 rural males died.



*The number of deaths per 100,000 population in specified group age-adjusted to the 2000 U.S. standard.

Figure 2A-4
Percentage of Deaths for which Autopsies were Reported by Race/Ethnicity and Year, Residents, 1997-2007

Autopsies were reported as performed on 4,700 decedents, or 10.5 percent of the deaths that occurred among Arizona residents in 2007. In 1997 – 2007, the percentage of deaths for which autopsies were reported varied from a high of 12.0 percent in 1998 to a low of 10.0 percent in 2005.

The percentage autopsied varies by the decedent's demographic characteristics. By race/ethnicity (Figure 2A-4) the percentage autopsied was lower for the White non-Hispanic population than for other groups. The prevalence of autopsies was substantially greater among Hispanic or Latino, American Indians and Black or African Americans. A substantial portion of the differential in the use of autopsy by race/ethnicity reflects differences in the age and manner of death. For example, autopsies tend to be more common at younger ages and for homicide, suicide, accidents and undetermined manner.

