



2A.

TOTAL MORTALITY

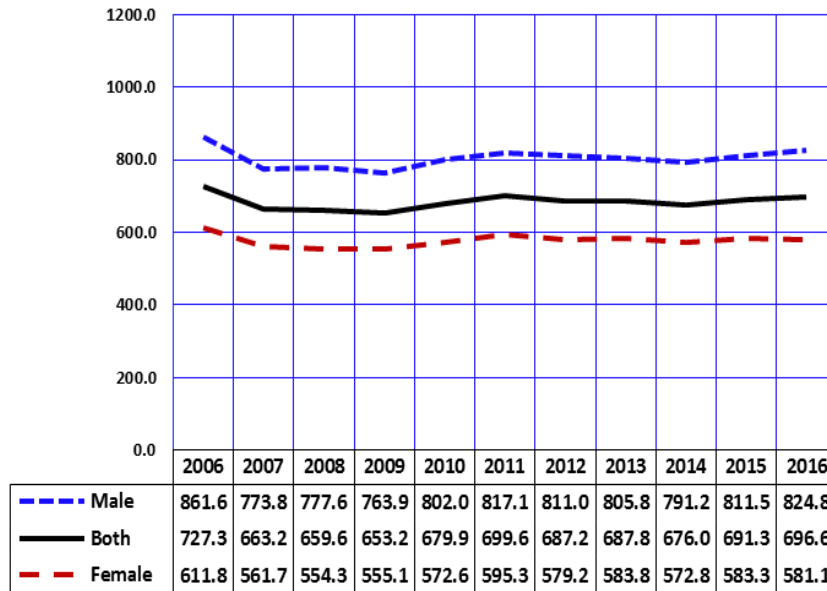
The total number of deaths from all causes among Arizona residents increased by 4.3 percent from 2015 (54,152) to 2016 (56,480; **Table 2A-1**). The age-adjusted mortality rate for all causes of death also increased from 691.3/100,000 in 2015 to 696.6 /100,000 in 2016.

Compared to 2015, there were more deaths in 2016 for all of the leading causes of mortality. The causes with the largest increases were essentially influenza and pneumonia (16.2 percent), septicemia (15.8 percent), accidents (14.6 percent), and essential primary hypertension and hypertensive renal disease (12.7 percent).

When considering race/ethnicity and gender, the age-adjusted mortality rate for deaths due to major cardiovascular diseases among American Indian or Alaska Native males increased (16.5 percent) from 2015 to 2016. In terms of mortality due to diabetes, the overall mortality rate for males and females decreased from 2015 (25.7/100,000) to 2016 (24.5/100,000) following a period of stability during 2011 to 2014 (**Figure 2B-18**). The decrease in deaths due to diabetes affected all race/ethnic groups, except American Indian or Alaska Natives where an 8.2 percent increase was observed between 2015-2016.

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Figure 2A-1
Age-adjusted Mortality Rates^a for all Causes by Gender and Year,
Arizona, 2006-2016



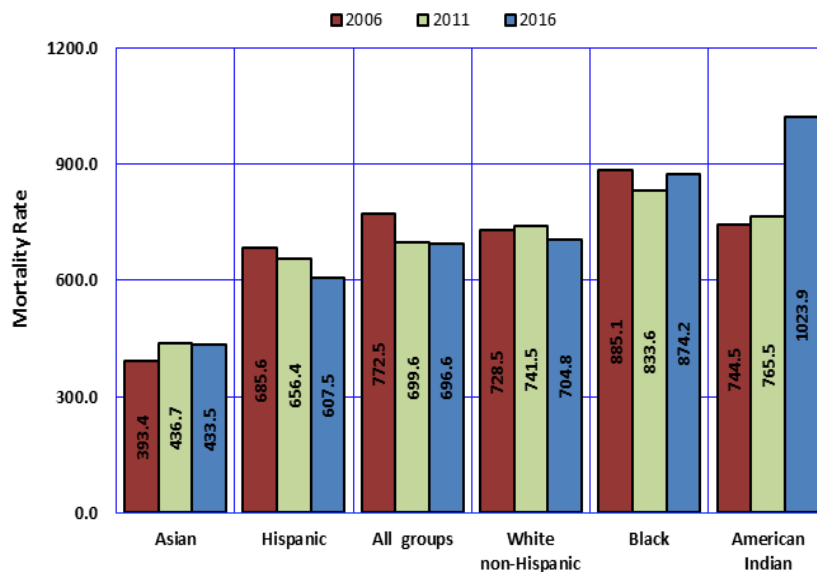
Note: ^a Number of deaths per 100,000 persons (adjusted to the 2000 standard U.S. population).

The age-adjusted mortality rates discussed below are based on the year 2000 population 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 the **Technical Notes**.

The total age-adjusted mortality rate increased by 0.8 percent, from 691.3 in 2015 to 696.6 in 2016 (**Figure 2A-1, Table 2B-2**). Over this period, the age-adjusted mortality rates increased for males but decreased for females.

The difference between male and female mortality rates increased slightly between 2006 and 2016. The male age-adjusted mortality rate was 40.8 percent greater than the female age-adjusted mortality rate on 2006, but 41.9 percent greater in 2016.

Figure 2A-2
Age-adjusted Mortality Rates^a for all Causes by Race/Ethnicity and Year,
Arizona Residents, 2006, 2011, and 2016



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

The 2016 age-adjusted death rates for the major racial/ethnic groups were as follows: for Asian or Pacific Islander, 433.5 deaths per 100,000 population; Hispanic or Latino, 607.5; White non-Hispanic, 704.8; Black or African American, 874.2; and American Indian or Alaska Native, 1023.9 (**Figure 2A-2, Table 2B-4**).

In 2016, as in 2006 and 2011, Blacks and American Indians had higher total mortality rates than White non-Hispanics, Hispanics, and Asians. The total mortality rates for Asians were lower than the rates of both White non-Hispanics and Hispanics in 2006, 2011, and 2016.

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If there was no monthly variation in proportional contribution to total annual deaths, 8.3 percent (100/12) of deaths should occur monthly. However, when the monthly distribution of resident deaths is examined, March (9.5 percent), January, February (9.1 percent), and December (8.6 percent) were higher in 2016 from the expected value (**Figure 2A-3**). June, August, and September were the months with the lowest proportional contributions to the total annual deaths among Arizona residents.

The majority of the 2,228 non-residents who died in Arizona during 2016 did so during the months of February, March, and January.

September was the month with the lowest percent contribution (6.1 percent) to the annual death among out-of-State residents who died in Arizona.

Figure 2A-3
Percent of Annual Deaths by Month of Occurrence and Residence Status, Arizona, 2016

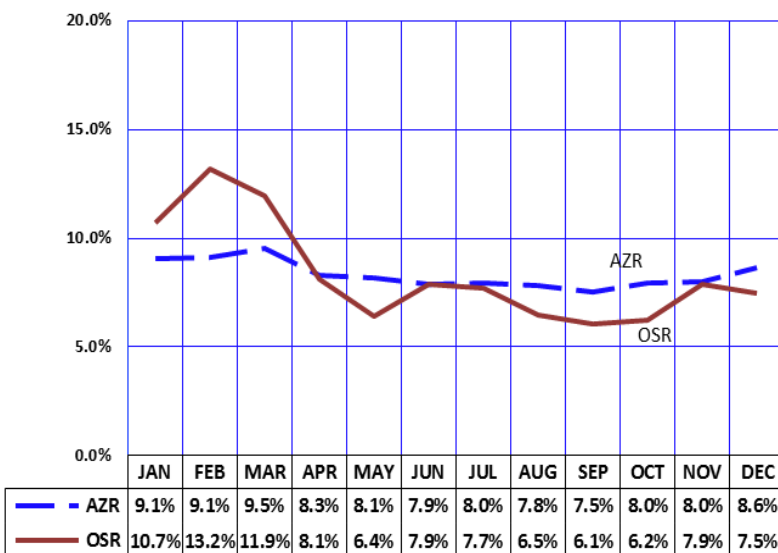


Figure 2A-4
Percentage of Deaths for which Autopsies were Reported by Race/Ethnicity and Year, Arizona Residents, 2006-2016

Autopsies were reported as performed on 5,726 decedents, or 10.1 percent of the deaths that occurred among Arizona residents in 2016. From 2006 – 2016, the percentage of deaths for which autopsies were reported varied from a high of 10.1 percent in 2006, to a low of 8.6 percent in 2011 and 2012 then back to the initial level at 10.1 percent in 2016.

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 and Asian population than for other groups. The prevalence of autopsies was substantially greater among Black, American Indian, and Hispanic or Latino sub-populations. 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 deaths by homicide, suicide, accidents, and undetermined manner.

