

**TABLE 6 (continued)
MONITORING PROGRESS TOWARD ARIZONA AND SELECTED NATIONAL YEAR 2010 OBJECTIVES (2001 STATUS)**

Focus areas and selected objectives: (in parentheses are Healthy People 2010 objective numbers)	2010 TARGET	RATES, RATIOS OR CASES IN 2001:															
		Arizona	Apache	Cochise	Coconino	Gila	Graham	Greenlee	Maricopa	Mohave	Navajo	Pima	Pinal	Santa Cruz	Yavapai	Yuma	La Paz
6F. DIABETES																	
Reduce the diabetes-related death rate (HP5-5)	45.0	47.5	68.4	60.0	58.4	73.3	72.7	54.5	45.8	48.0	50.0	47.7	56.0	68.6	44.6	37.7	29.8
6G. HEART DISEASE AND STROKE																	
Reduce coronary heart disease deaths (HP12-1)	166.0	149.3	96.1	173.0	129.8	152.6	139.6	106.6	158.3	161.0	121.6	145.9	116.8	73.9	127.0	106.7	114.1
Reduce stroke deaths (HP12-7)	48.0	47.7	37.5	59.8	65.7	50.5	64.3	17.1	48.3	38.0	50.5	49.7	38.3	44.9	51.8	30.1	15.7
6H. RESPIRATORY DISEASES																	
Reduce deaths from chronic lower respiratory disease among adults aged 45 years and older (HP24-10)	60.0	128.6	86.2	105.4	100.1	53.5	101.0	87.9	133.3	109.6	74.0	143.8	138.0	58.7	123.6	88.9	106.6
6I. HUMAN IMMUNODEFICIENCY VIRUS (HIV) DISEASE																	
♦ Reduce the number of new AIDS cases per 100,000 population	9.0	6.4	*	0.0	*	0.0	*	0.0	7.4	3.7	*	8.2	10.9	*	2.9	*	0.0
Reduce deaths from HIV disease (HP13-14)	8	3.1	1.7	1.0	1.9	3.8	.0	.0	3.2	2.2	2.3	3.9	4.6	2.6	1.4	.5	.0
6J. SUBSTANCE ABUSE																	
♦ Reduce cirrhosis deaths (HP26-2)	♦ 6.7	12.3	12.3	11.9	10.0	20.7	17.1	11.5	11.5	19.0	23.4	12.6	16.0	3.2	15.2	4.9	10.7
♦ Reduce drug-induced deaths (HP26-3)	♦ 4.5	11.3	6.1	11.7	4.8	11.1	3.5	.0	10.6	6.3	8.8	17.6	8.2	5.6	11.3	10.4	8.7

♦ Indicates objectives and targets identified in **Healthy Arizona 2010**.

Notes: Objective 5-5 of **Healthy People 2010** uses as the numerator the number of deaths due to diabetes reported as the underlying or multiple cause of death. The multiple cause of death data are not available for out-of-State deaths of Arizona residents, therefore the diabetes-related deaths are understated. All mortality rates are age-adjusted to the 2000 U.S. standard and expressed per 100,000 population. The age-adjustment standard for chronic lower respiratory disease uses the weights for three age groups among persons 45 years or older (45-49 years, 50-64 years, and 65+ years). The incidence rates of new AIDS cases are based on numerators provided by the HIV Surveillance Section, Office of HIV/STD/HCV Services, Bureau of Epidemiology and Disease Control (* indicates fewer than 5 cases; 0.0 = no cases).

The rates based on fewer than 10 deaths/cases are not statistically reliable. See Tables 5E-12 and 5F-3 for the denominators.