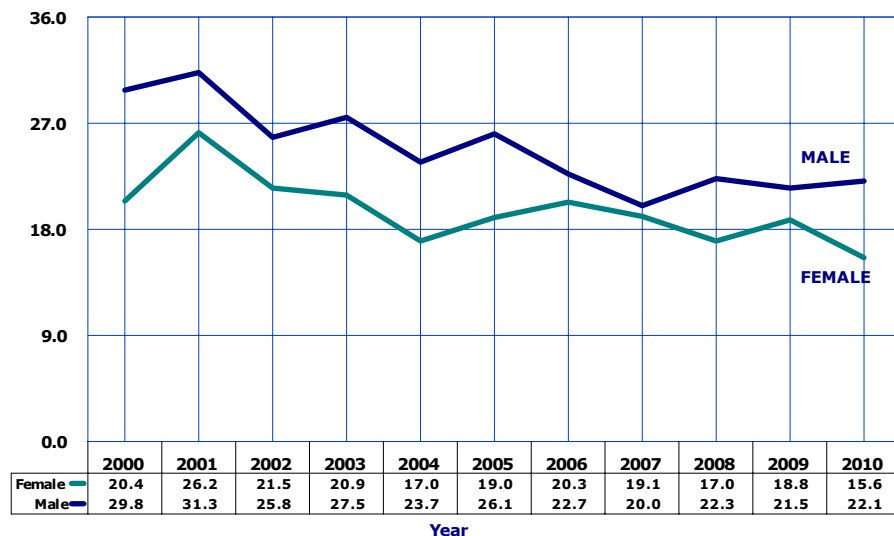


2C.AGE-SPECIFIC MORTALITY
Childhood mortality (ages 1-14 years)

Figure 2C-5
Mortality Rates by Gender and Year among Children 1-14 Years,
Arizona, 2000-2010

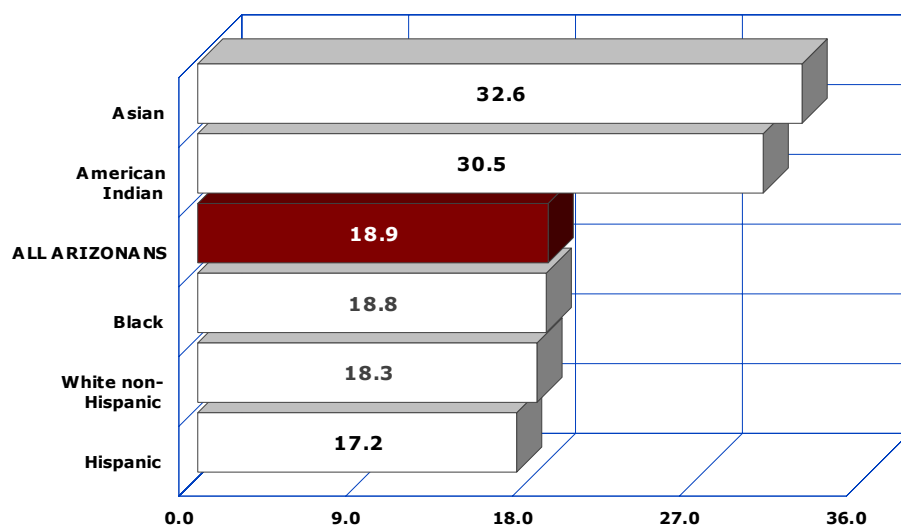


Death claimed the lives of 240 of the 1,271,006 children (1 to 14 years old) residing in Arizona in 2010. Their 2010 mortality rate of 18.9 per 100,000 was 6.4 percent lower than the rate of 20.2 in 2009 (**Table 2C-7**). Females but not males experienced a decrease in their total mortality rates from 2009 to 2010 (**Figure 2C-5, Table 2C-7**).

The five causes with the greatest number of deaths over the 2000-2010 period were *accidents* (unintentional injuries), *malignant neoplasms*, *congenital malformations*, *homicide* and *suicide* (**Table 2C-7**).

Number of deaths per 100,000 persons, 1-14 years old in specified group.

Figure 2C-6
Mortality Rates by Race/Ethnicity among Children 1-14 Years,
Arizona, 2010



Unexpectedly, Asian or Pacific Islander children had the highest 2010 total mortality rate (32.6 deaths per 100,000) followed by American Indian children (30.5/100,000; **Figure 2C-6**). The mortality rates of Black or African American, White non-Hispanic, and Hispanic or Latino children were lower than the average rate for all groups.

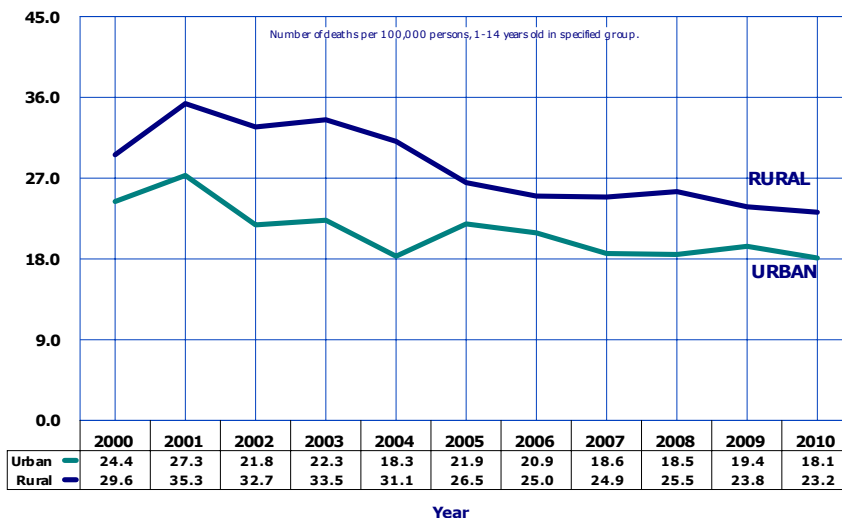
It is important to note that the rate for Asian or Pacific Islander children is based on only 11 deaths (**Table 2C-10**), and it is not statistically reliable.

In 2010, there were 9 completed *suicides* of children aged 1-14 years (**Table 2C-10**).

Number of deaths per 100,000 persons, 1-14 years old in specified group.

2C.AGE-SPECIFIC MORTALITY
Childhood mortality (ages 1-14 years)

Figure 2C-7
Mortality Rates by Urban*/Rural Area and Year among Children 1-14 Years, Arizona, 2000-2010

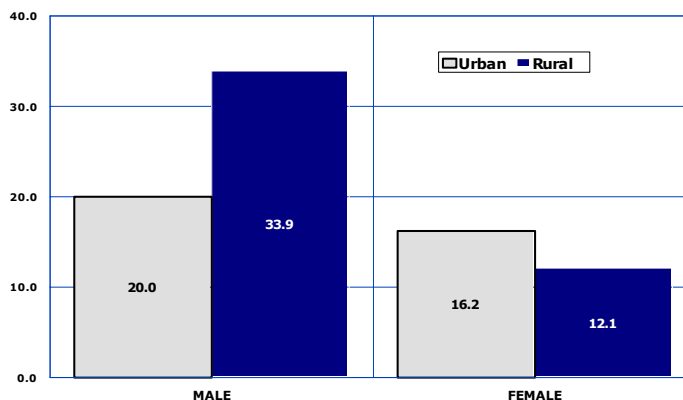


From 2008 to 2009 the total mortality rates increased for urban children but they decreased for rural children (Figure 2C-7, Table 2C-8).

In 2010, the mortality rates decreased for both urban and rural children (Figure 2C-7). From 2001 to 2010 the total mortality rates decreased by 33.6 percent for urban children and by 34.3 for rural children.

Maricopa, Pima, Pinal and Yuma Counties.

Figure 2C-8
Mortality Rates by Gender in Urban*/Rural Areas among Children 1-14 Years, Arizona, 2010



From 2009 to 2010, the mortality rate for congenital malformations decreased for rural but not urban children (Table 2C-8). The mortality rate for unintentional injuries among rural children (10.8/100,000) was 1.8 times the rate among urban children (6.0/100,000, Table 2C-8). Urban children, in contrast, had a 4.6 times greater mortality rate for cancer than rural children (2.3 deaths per 100,000 vs. 0.5 deaths per 100,000).

Rural females 1-14 years old had the lowest 2010 mortality risk among gender by area groups, followed by urban females, urban males and rural males.

Rate: The number of deaths per 100,000 children in specified area and gender.
 *Maricopa, Pima, Pinal and Yuma Counties.