



2A.

TOTAL MORTALITY

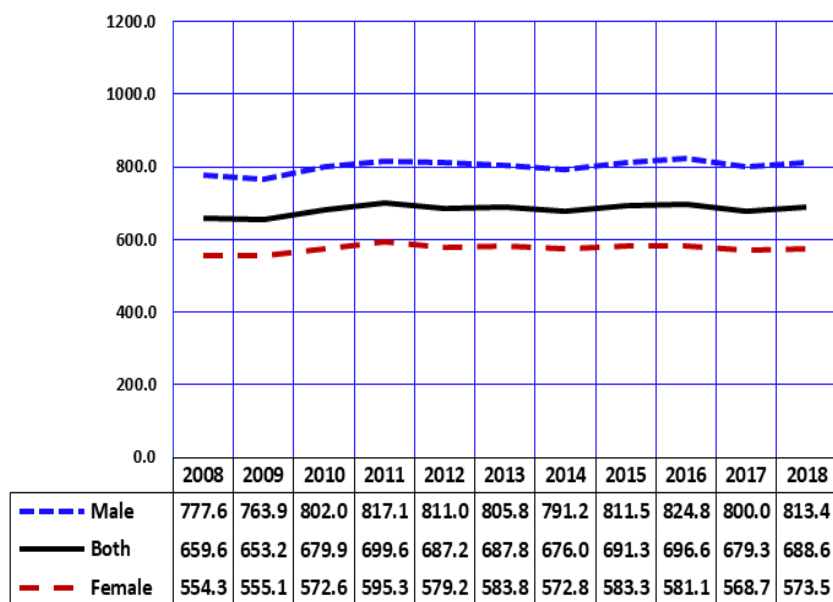
The total number of deaths from all causes among Arizona residents increased by 3.4 percent from 2017 (57,261) to 2018 (59,206; **Table 2A-1**). The age-adjusted mortality rate for all causes of death also increased from 679.3 /100,000 in 2017 to 688.6/100,000 in 2018. When considering race/ethnicity, the biggest increase in age-adjusted mortality occurred among Blacks or African Americans (5.4 percent) and the lowest was recorded among White non-Hispanics (1.3 percent).

Between 2017 and 2018, the increase in mortality did not affect all leading causes of death. A reduction in the number of deaths was recorded for septicemia (17.1 percent), essential (primary) hypertension and hypertensive renal disease (8.8 percent), homicide (3.3 percent) and Alzheimer's disease (1.3 percent).

There were some disparities by gender and race/ethnicity for most selected causes of death. Between 2017 and 2018, not all subgroups (based on gender and race/ethnicity) witnessed an increased in cerebrovascular mortality. While the highest increases in mortality due to cerebrovascular diseases was among Asian females (32.5 percent) and American Indian females (30.2 percent), a decline in mortality due to cerebrovascular diseases was recorded among both Black females (12.7 percent) and males (6.4 percent), Hispanic males (4.7 percent), and Asian males (3.7 percent) during 2017- 2018. In terms of mortality due to diabetes, the overall mortality rate for both males and females decreased from 2017 (23.8/100,000) to 2018 (23.0/100,000) following a period of stability during 2011 to 2014 (**Table 2B-2**). The decrease in deaths due to diabetes between 2017 and 2018 affected all race/ethnic groups, except Black or African Americans who witnessed an increase of 6.5 percent in their age adjusted diabetes mortality rates.

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Figure 2A-1
Age-adjusted Mortality Rates^a for all Causes by Gender and Year, Arizona, 2008-2018



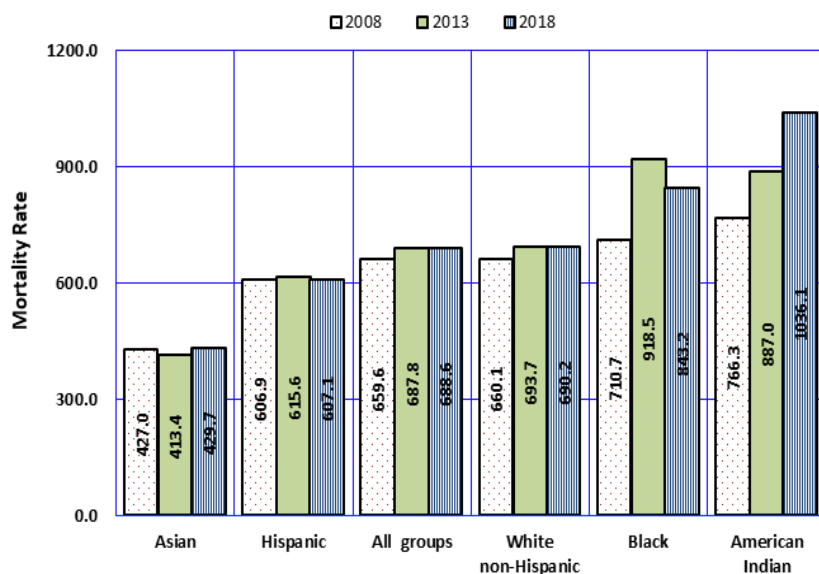
The age-adjusted mortality rates discussed below are based on the year 2000 population standard. All mortality rates in sections 2A and 2B are age-adjusted. A detailed explanation of the age-adjustment of mortality rates is given in the **Technical Notes**.

The total age-adjusted mortality rate increased by 1.4 percent, from 679.3 deaths per 100,000 population in 2017 to 688.6 deaths in 2018 (**Figure 2A-1, Table 2B-2**). Over this period, the age-adjusted mortality rates increased for both males and females.

The gap between male and female mortality rates increased between 2008 and 2018. The male age-adjusted mortality rate was 40.3 percent greater than the female age-adjusted mortality rate in 2008, but 41.8 percent greater in 2018.

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

Figure 2A-2
Age-adjusted Mortality Rates^a for all Causes by Race/Ethnicity and Year, Arizona Residents, 2008, 2013, and 2018



The 2018 age-adjusted death rates for the major racial/ethnic groups were as follows: for Asian or Pacific Islander, 429.7 deaths per 100,000 population; Hispanic or Latino, 607.1; White non-Hispanic, 690.2; Black or African American, 843.2; and American Indian or Alaska Native, 1036.1 (**Figure 2A-2, Table 2B-4**).

In 2018, as in 2008 and 2013, American Indians and Blacks 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 2008, 2013, and 2018.

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

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Figure 2A-3
Percent of Annual Deaths by Month of Occurrence and Residence Status, Arizona, 2018

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, January (10.5 percent), March (9.0 percent), and December (8.8 percent), were higher in 2018 from the expected value (**Figure 2A-3**). September was the month with the lowest proportional contributions to the total annual deaths among Arizona residents (AZR).

The majority of the 3,482 non-residents who died in Arizona during 2018 did so during the months of January, March, and February.

August was the month with the lowest percent contribution (6.8 percent) to the annual death among out-of-State residents (OSR) who died in Arizona.

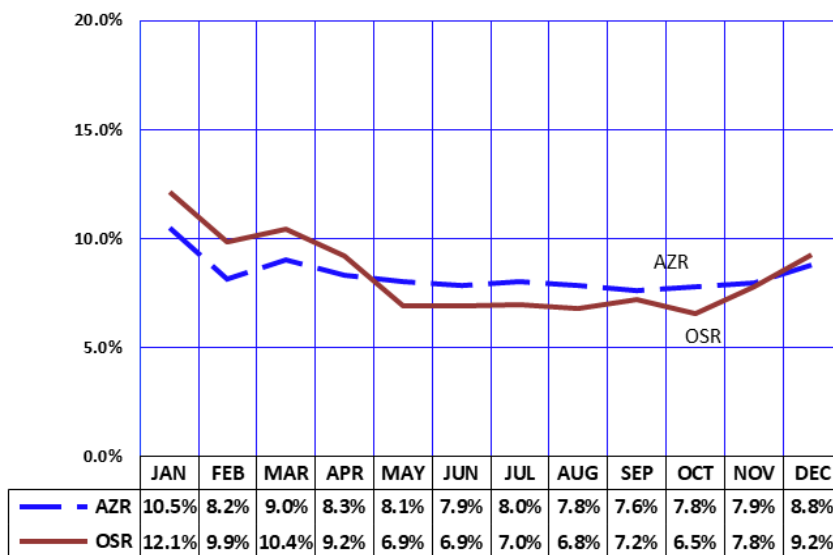


Figure 2A-4
Percentage of Deaths for which Autopsies were Reported by Race/Ethnicity and Year, Arizona Residents, 2008-2018

Autopsies were reported as performed on 5,691 decedents, or 9.6 percent of the deaths that occurred among Arizona residents in 2018. From 2008 – 2018, the percentage of deaths for which autopsies were reported varied from 9.8 percent in 2008, to a low of 8.6 percent in 2011 and 2012, a high of 10.1 percent in 2016, then 9.6 percent in 2018.

The percentage autopsied varies by the decedent's demographic characteristics. By race/ethnicity (**Figure 2A-4**) the percentage autopsied was the lowest for White non-Hispanic than for other racial/ethnic groups. The prevalence of autopsies was substantially greater among American Indian, Black, 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.

