

**TABLE 6A
MONITORING PROGRESS TOWARD ARIZONA AND SELECTED HEALTHY PEOPLE OBJECTIVES: STATEWIDE TRENDS**

Focus areas and selected objectives: (in parentheses are <i>Healthy People 2030 (HP)</i> objective numbers)	Baseline for AZ (2020)	ARIZONA RATES, RATIOS OR CASES BY YEAR:										AZ TARGET / (U.S. for HP 2030)
		2021	2022	2023	2024	2025	2026	2027	2028	2029	2030	
6A-1. MATERNAL, INFANT, AND CHILD HEALTH												
Reduce the rate of fetal deaths at 20 or more weeks of gestation (HP-MICH-01)	6.2	6.7										5.7
Reduce fetal and infant deaths during perinatal period	5.6	6.1										5.9
Reduce the rate of infant deaths (HP-MICH-02)	5.3	5.5										5.0
Reduce neonatal deaths	3.5	3.8										4.1
Reduce postneonatal deaths	1.8	1.7										2.0
Reduce infant deaths due to birth defects	1.1	1.2										1.3
Reduce deaths from sudden infant death syndrome (SIDS)	0.2	0.2										0.50
Reduce the rate of death among children aged 1 to 4 years	29.5	31.5										25.7
Reduce the rate of death among children aged 5 to 9 years	11.4	11.8										12.3
Reduce the rate of death among children aged 10 to 14 years	18.7	19.2										15.2
Reduce the rate of death among adolescents aged 15 to 19 years	82.3	83.7										55.7
Reduce the rate of death among young adults aged 20 to 24 years	141.9	150.2										88.5
Reduce maternal deaths	50.8	48.8										11.4
Increase the proportion of pregnant women who receive prenatal care in the first trimester	68.8%	71.7%										77.9%
Reduce low birth weight (LBW)	7.4%	7.9%										7.8%
Reduce very low birth weight (VLBW)	1.1%	1.3%										1.4%
Reduce preterm births (HP-MICH-07)	9.5%	10.0%										9.4%
Increase abstinence from cigarette smoking among pregnant women (HP-MICH-10)	95.5%	95.9%										95.7%

Notes: Fetal and perinatal death rates were revised in order to include only spontaneous fetal losses and exclude induced terminations of pregnancy. The fetal death rate is per 1,000 live births plus spontaneous fetal losses of 20 or more weeks of gestation. The perinatal death rate is per 1,000 live births plus spontaneous fetal losses of 28 or more weeks of gestation (Perinatal period = 28 weeks of gestation to 7 days after birth). Infant, neonatal, and postneonatal deaths are per 1,000 live births. Infant deaths due to birth defects, congenital birth defects, and SIDS are per 1,000 live births. All age-specific mortality rates are per 100,000 persons. The maternal mortality ratio is per 100,000 live births. All other proportions and ratios are per 100 live births. Preterm births = births prior to 37 completed weeks of gestation.

** Cell suppressed due to rate/ratio/percent based on non-zero count less than 6.

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		2021	2022	2023	2024	2025	2026	2027	2028	2029	2030		
6A-2. SEXUALLY TRANSMITTED DISEASES													
Reduce pregnancies among adolescent females aged 15 to 17 years ^a	9.3	8.3											36.2
Reduce proportion of chlamydia infections among females aged 15 to 24 years attending family planning clinics	6.9	8.6											NA
Reduce chlamydia rates among females aged 15 to 44 years ^b	1694.3	1829.9											NA
Reduce gonorrhea rates among females aged 15 to 44 years ^b	458.4	503.4											NA
Reduce gonorrhea rates among males aged 15 to 44 years ^b	572.2	646.4											NA
Reduce sustained transmission of primary and secondary syphilis among females	8.5	13.1											NA
Reduce sustained transmission of primary and secondary syphilis among males	31.9	41.4											NA
Reduce congenital syphilis	155.0	232.5											NA
6A-3. VACCINE PREVENTABLE DISEASES													
Reduce or eliminate congenital rubella syndrome	0	0											0
Reduce Haemophilus influenzae type b among children under age 5 years	0	**											0.27
Reduce or eliminate measles	0	0											30
Reduce or eliminate mumps	10	**											500
Reduce or eliminate rubella	1	0											10
Reduce the rate of hepatitis A ^c (HP-IID-10)	0.8	0.6											0.4
Reduce the rate of meningococcal disease ^c	3	**											0.3
Reduce tuberculosis cases ^c (HP-IID-17)	1.9	1.8											1.4

Notes: N/A indicates no target identified by the Arizona Department of Health Services, Bureau of Infectious Disease and Services, Office of Sexually Transmitted Infections Control; ^a The pregnancy rate is the number of pregnancies per 1,000 females aged 15 to 19 years; ^b The rates of chlamydia, gonorrhea, and syphilis are per 100,000 persons. The rate of congenital syphilis is per 100,000 live births. Source: The numerators are by report date. The denominators are by the date of birth. **Source: Arizona Department of Health Services, Bureau of Infectious Disease and Services, Office of Sexually Transmitted Infections Control;** ^c The rates of hepatitis A, meningococcal disease, and tuberculosis are per 100,000 persons. **Source: Arizona Department of Health Services, Bureau of Infectious Disease and Services, Office of Infectious Disease Surveillance Epidemiology and Office of Infectious Disease Control.**

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6A-4. INJURY AND VIOLENCE												
Reduce firearm-related deaths (HP-IVP-13)	17.2	18.3										10.7
Reduce deaths caused by poisonings	39.8	41.3										13.1
Reduce deaths caused by suffocation	1.2	1.6										1.7
Reduce unintentional injury deaths (HP-IVP-03)	71.5	77.8										43.2
Reduce deaths caused by motor vehicle crashes (HP-IVP-06)	14.0	18.4										10.1
Reduce residential fire deaths	0.5	0.5										0.86
Reduce fall-related deaths among older adults (HP-IVP-08)	12.2	12.0										63.4
Reduce drownings	1.3	1.6										1.1
Reduce homicides (HP-IVP-09)	7.7	8.1										5.5
Reduce the suicide rate (HP-MHMD-01)	18.2	19.4										12.8
Reduce the suicide rate among adolescents aged 15 to 19 years	14.6	14.2										NA
6A-5. CANCER												
Reduce the overall cancer death rate (HP-C-01)	134.7	131.8										122.7
Reduce the lung cancer death rate (HP-C-02)	26.8	25.8										25.1
Reduce the female breast cancer death rate (HP-C-04)	18.5	19.5										15.3
Reduce the death rate from cancer of the uterine cervix	1.7	2.5										2.2
Reduce the colorectal cancer death rate (HP-C-06)	12.7	12.4										8.9
Reduce the oropharyngeal cancer death rate	2.3	2.3										2.3
Reduce the prostate cancer death rate (HP-C-08)	18.5	17.2										16.9
Reduce the rate of melanoma cancer deaths	2.3	2.3										2.4

Notes: Firearm-related deaths, deaths caused by poisonings, and deaths caused by suffocation include accidents, homicides, and suicides. Residential fire deaths, deaths from falls, and drowning deaths include only accidents. All mortality rates are per 100,000 persons. All mortality rates that are not age-specific are age-adjusted to the 2000 U.S. standard. The age-adjusted rates for breast and cervical cancer are female specific; the age-adjusted rates for prostate cancer are male specific.

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6A-6. DIABETES													
Reduce the diabetes-related death rate	87.4	91.3											65.8
6A-7. HEART DISEASE AND STROKE													
Reduce coronary heart disease deaths (HP-HDS-02)	109.4	108.1											71.1
Reduce stroke deaths (HP-HDS-03)	34.6	34.4											33.4
6A-8. RESPIRATORY DISEASES													
Reduce asthma deaths among children and adults <35 years	7.0	4.8											NA
Reduce asthma deaths among adults aged 35 to 64 years	19.7	11.5											6.0
Reduce asthma deaths among adults aged 65 years and older	36.4	31.9											22.9
Reduce deaths from chronic obstructive pulmonary disease (COPD) among adults aged 45 years and older (HP-RD-05)	122.1	113.7											107.2
6A-9. HUMAN IMMUNODEFICIENCY VIRUS (HIV) DISEASE													
Reduce the number of new AIDS cases per 100,000 population	9.7	11.1											13.0
Reduce deaths from HIV disease	0.9	1.3											3.3
6A-10. SUBSTANCE ABUSE													
Reduce cirrhosis deaths (HP-SU-02)	17.4	21.6											10.9
Reduce drug-induced deaths	38.4	40.6											11.3

Mortality rates for asthma are per 1,000,000 population. All other mortality rates are per 100,000 persons. Mortality rates for diabetes, coronary heart disease, stroke, chronic lower respiratory disease, HIV disease, cirrhosis and drug-induced deaths are age-adjusted to the 2000 U.S. standard.

The rates for prior years are revised annually and reflect reported new HIV/AIDS cases by year of diagnosis. **Source: Arizona Department of Health Services, Bureau of Infectious Disease and Services, Office of HIV and HCV Care and Surveillance (OOHCS) HIV/AIDS Services.**