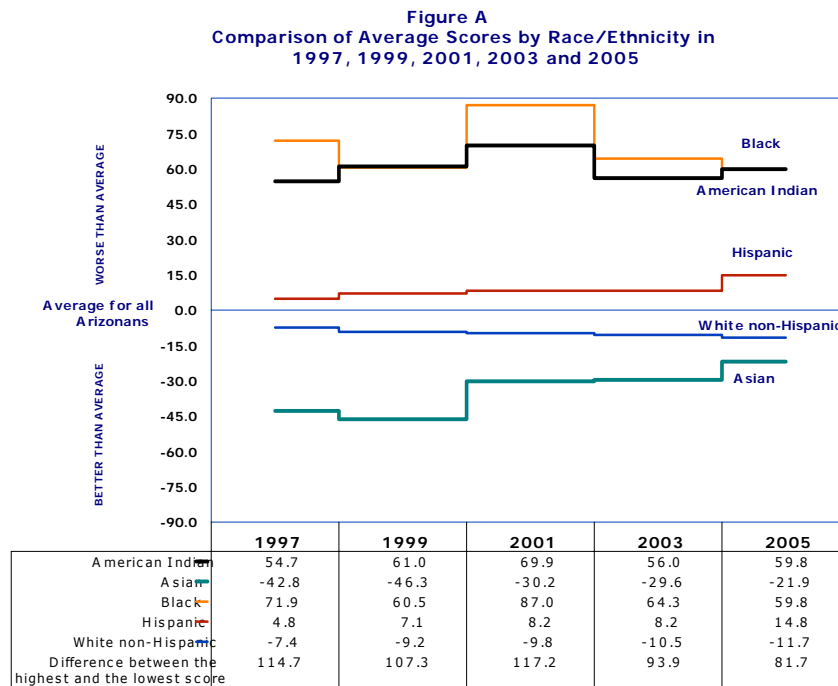


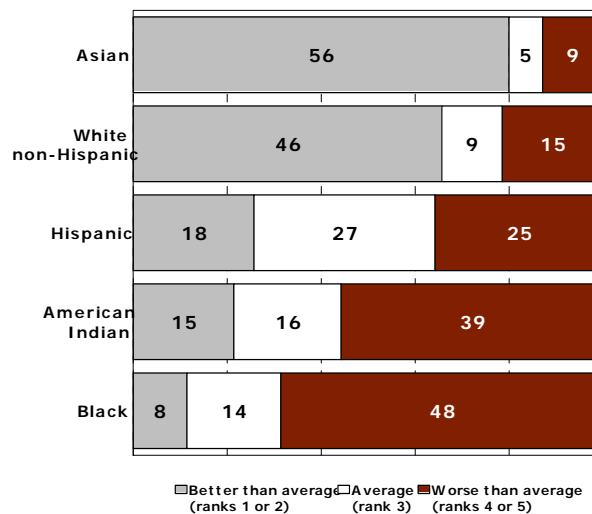
KEY FINDINGS

The inequity between the groups, as measured by the range of score values from the lowest (the most favorable standing among the groups) to the highest (the least favorable standing), narrowed from 117.2 points in 2001 to 81.7 in 2005 (**Figure A**). The average score for Blacks improved from 87.0 in 2001 to 59.8 in 2005. Compared to a score of -7.4 in 1997, the average score for White non-Hispanics steadily improved to -11.7 in 2005. In contrast, the average score for American Indians worsened from 56.0 in 2003 to 59.8 in 2005. Both Asians and Hispanics had their worst average scores in 2005, compared to their average scores in 1997, 1999, 2001 and 2003 (**Figure A**).

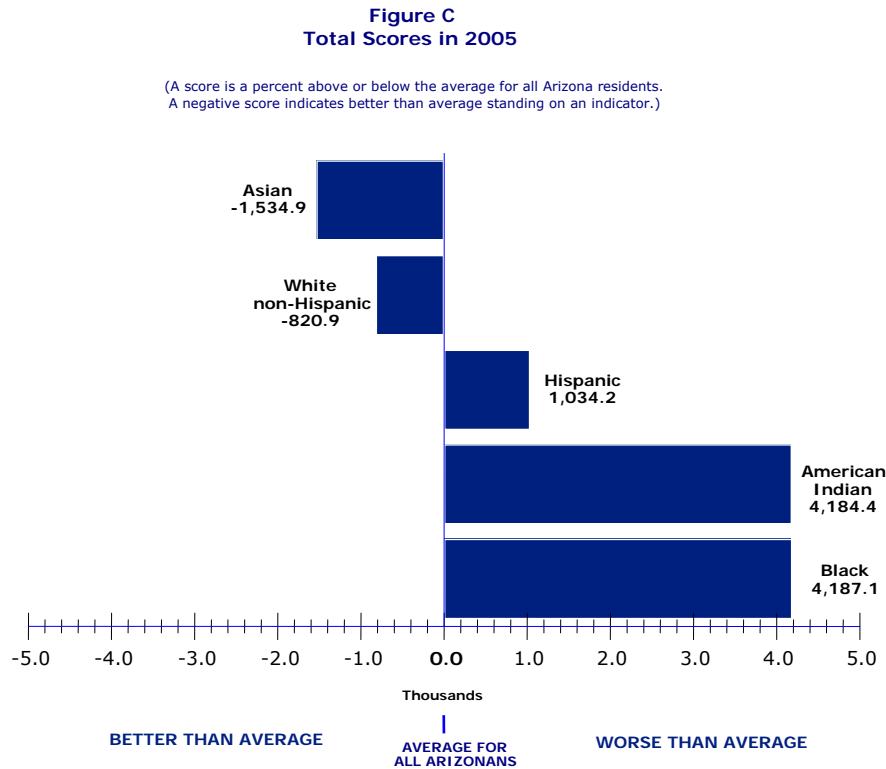


In 2005 as in 2003, 2001, 1999 and 1997, Arizona's Asian residents ranked best among race/ethnic groups in the overall health status, followed by White non-Hispanics, Hispanics, American Indians, and Blacks (**Figure B**).

Figure B
Number of Times Each Group Ranked Better Than
Average, Average, and Worse Than Average
on 70 Indicators, Arizona, 2005



The total scores based on all 70 measurements ranged from -1,534.9 for Asians to 4,187.1 for Blacks (**Figure C**). The difference in the average scores for White non-Hispanics and Hispanics widened from 12.2 points in 1997 (-7.4 and 4.8) to 26.5 points in 2005 (-11.7 and 18.9; **Figure A**). The total scores for American Indians (4,184.4) and Blacks (4,187.1) differed by a mere 0.6 percent.



ASIANS or PACIFIC ISLANDERS

Average rank: 2.0* Total score: -1,534.9 Average score: -21.9**

In 2005, Asian residents of Arizona ranked best or second best among race/ethnic groups on 56 of 70 indicators, including measures of utilization of prenatal care services, cause-and-age-specific mortality and in low incidence of teen pregnancies or reportable diseases. Asians median age at death was the second highest among the race/ethnic groups in Arizona in 2005. Asians also had the lowest risk of injury mortality in accidents, as well as drug-induced deaths and firearm-related mortality. However, their overall score deteriorated steadily from -46.3 in 1999 to -30.2 in 2001, -29.6 in 2003 and -21.9 in 2005. The rate of drug-induced deaths among Asians increased from 0.0 (no fatalities) in 2002 and 2003 to 0.8 in 2004 and 2.1 in 2005 (See *Comparative Rates and Ratios for 2000-2005*). The rate of firearm-related deaths jumped from 1.4 in 2004 to 7.5 in 2005. The total mortality rate of 629.5 deaths per 100,000 Asian or Pacific Islander residents of the State was the lowest rate among the race/ethnic groups, but it was the highest rate for Asians since 2000. So were the mortality rates for Alzheimer's disease, cardiovascular diseases, influenza and pneumonia and fall-related injuries.

*The average rank based on all 70 measurements (the sum of the ranks divided by 70 measurements. Ranks range between 1 = the highest rank of health indicators and 5 = the lowest rank of health indicators). See section RATES AND RATIOS IN 2005, p.95.

**The average score based on all 70 measurements (the sum of all scores divided by 70 measurements). See section SCORES IN 2005, p.101.

WHITE NON-HISPANICS

Average rank: 2.4 Total score: -820.9 Average score: -11.7

White non-Hispanics ranked second best in the relative healthiness among race/ethnic groups in Arizona. They ranked No.1 or No.2 on 46 of 70 measures of health, including low teen pregnancy rates, high utilization of prenatal care and low premature mortality. However, in the use of tobacco among women giving birth, as well as in the incidence of genital herpes during pregnancy and in mortality rates for chronic lower respiratory diseases, White non-Hispanics ranked worst among race/ethnic groups. The White non-Hispanic overall score of -11.7 in 2005 was their best score since 1997. It reflects consistent improvements in teen pregnancy rates, as well as mortality rates for cardiovascular diseases in general (and coronary heart disease and stroke in particular), cancer, and HIV disease. The total mortality rate 744.6 deaths/100,000 in 2005 was the second lowest mortality rate of White non-Hispanics in 2000-2005.

HISPANICS or LATINOS

Average rank: 3.0 Total score: 1,034.2 Average score: +14.8

In 2005, as in 2003, 2001, 1999 and 1997, Hispanics achieved a 3rd place health ranking. However, unlike in the past, their 2005 average score was substantially higher than that of White non-Hispanics (14.8 vs. -11.7). The average score of Hispanics increased 1.8 times from 8.2 in 2003 to 14.8 in 2005. Hispanics ranked in the middle of five groups on 27 of 70 measures of health. They ranked best or second best on 18 indicators in 2005, a decrease from 22 indicators in 2003. They ranked worse than average with high teen pregnancy rates and high premature mortality. They ranked better than average with low suicide mortality rate, low alcohol and tobacco use among women giving birth, low incidence of preterm births and postneonatal mortality. The overall score of 14.8 reflects a wider gap between the statewide averages in 2005 and the rates or ratios specific to Hispanics. In 2003, the mortality rate for diabetes among Hispanics was 92.6 percent greater than the average rate for all groups; in 2005 it was 128.9 percent greater. *Comparative Rates and Ratios for 2000-2005* provide detailed picture of changes over time for all of the 70 measures.

AMERICAN INDIANS or ALASKA NATIVES

Average rank: 3.7 Total score: 4,184.4 Average score: +59.8

In 2005, American Indians in Arizona had the second highest average score among all groups and second lowest rank of overall health status. They ranked 5th or 4th 39 times on 70 indicators (**Figure B**), and they exceeded the statewide averages by a wider margin than any other group except Blacks (**Figure C**). American Indians ranked poorly on measures of maternal lifestyle and health as well as in utilization of prenatal care. High incidence of birth defects and high infant mortality, alcoholism, diabetes, motor vehicle accidents and mortality from unintentional injuries contributed to the premature death rate. In 2005, compared to White non-Hispanics, on average American Indian residents of Arizona were 20 years younger at time of death. This resulted in the second lowest ranking of American Indians in the relative healthiness among racial and ethnic groups in Arizona.

BLACKS or AFRICAN AMERICANS

Average rank: 3.9

Total score: 4,187.1

Average score: +59.8

The average score of Arizona Black or African American residents has improved from 87.0 in 2001 to 64.3 in 2003 and 59.8 in 2005. Despite this improvement, Blacks or African Americans had the lowest rank of overall health status because they ranked 5th or 4th among the five race/ethnic groups on 48 of 70 measures (see **Figure B**). No other race/ethnic group exceeded the statewide averages by a wider margin than Blacks. High infant mortality rate, high ratios of low birthweight and very low birthweight births, high incidence of many reportable diseases, high mortality rates for almost all of the leading causes of death and high rate of premature death all lowered the ranking for this population group. However, Blacks or African Americans ranked better than average with low mortality rates for alcohol-induced causes, cervical cancer and fall-related injuries.

COMPARATIVE RATES AND RATIOS FOR 2000 and 2005

The 140 bar charts provide a snapshot of differences between the race/ethnic groups in Arizona in 2000 and 2005. For the convenience of the readers, these inter-group comparisons for two points in time are supplemented by more detailed comparisons over time in a special section of the report (*Comparative Rates and Ratios for 2000 – 2005*, p.111), which documents the race/ethnicity-specific changes by year from 2000 through 2005 on the 70 health status measures.

RISK PROFILES

Risk profiles presented on the following pages summarize how each race/ethnic group compares to the State average for the entire set of measures of health status. These profiles use scores, which were developed to describe the level of each of the 70 measures for each race/ethnic group in comparison to the average level for all groups. The profiles visually describe the better-than-average and worse-than-average clusters of health status characteristics for each race/ethnic group.