

A Demographic and Health Snapshot of the U.S. Hispanic/Latino Population

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A Demographic and Health Snapshot of the US Hispanic/Latino Population

DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS FOR DISEASE CONTROL AND PREVENTION
SAFER • HEALTHIER • PEOPLE



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Prepared by: The National Centers for Health Statistics, Centers for Disease Control and Prevention

ntroduction

of the Hispanic population and Hispanic subgroups at the beginning of the new century. They are divided into 3 main sections: Disease Control and Prevention (CDC). The charts are designed to provide a "snapshot" of the demographic and health characteristics The attached set of data charts have been provided by the National Center for Health Statistics (NCHS), part of the Centers for

- Demographic data from the U.S. Bureau of the Census
- Data on health access and utilization, health status, chronic conditions, and risk factors from the National Health Interview Survey and the Behavioral Risk Factor Surveillance System
- Natality and mortality data from the National Vital Statistics System

number of Hispanic residents, (b) the 10 States with the highest proportion of the population that is Hispanic, or (c) the 11 States that with the non-Hispanic white population and for specified Hispanic subgroups. The mortality charts also show data for Puerto Rico are either (a) or (b) (called "selected States") in the charts. Where possible the data are shown for the Hispanic population compared The charts include data for the U.S. and/or for selected States. State data are presented either for (a) the 10 States with the largest

a road map for improving the health of all people in the United States by the year 2010. by the Department of Health and Human Services in January 2000. Healthy People 2010 contains 467 objectives designed to serve as People 2010 process. Healthy People 2010 is a comprehensive, nationwide health promotion and disease prevention agenda launched Healthy People 2010 and the Leading Health Indicators—Some of the charts are based on measures identified through the Healthy

The objectives are organized in 28 focus areas, each representing an important public health area. Each objective has a target for improvements to be achieved by the year 2010. The Year 2010 target is shown on charts that are Healthy People 2010 measures. years of healthy life, and eliminate health disparities--served as a guide for developing objectives that will actually measure progress Healthy People 2010 builds on similar initiatives pursued over the past two decades. Two overarching goals-increase quality and

importance of health promotion and disease prevention and to encourage wide participation in improving health in the next decade relevance as broad public health issues. Measures that are Leading Health Indicators are noted on the charts as "LHI measure" A limited set of the objectives, known as the Leading Health Indicators, are intended to help everyone more easily understand the These Indicators were chosen based on their ability to motivate action, the availability of data to measure their progress, and their

Website: http://www.health.gov/healthypeople/

Data sources

Bureau data systems. The data presented in the charts were obtained from the following U.S. Department of Health and Human Services and U.S. Census

National Vital Statistics System - Mortality (NVSS)

included residents occurring in the U.S.- deaths to nonresidents of the United States or deaths to residents occurring outside of U.S. are not certification of cause of death is provided by the physician, medical examiner, or coroner. Reported data include only deaths to U.S. Demographic information is provided by the funeral director and is based on information supplied by an informant. Medical The NVSS mortality data are based on 100 percent of the death certificates filed in the 50 States and the District of Columbia

This system is sponsored by CDC's National Center for Health Statistics.

Website: http://www.cdc.gov/nchs/nvss.htm

National Vital Statistics System - Natality (NVSS)

records. Reported data include only births to U.S. residents occurring in the U.S.- births to nonresidents of the United States or births to residents occurring outside of U.S. are not included Demographic information is provided by each mother. Medical and health information is generally based on hospital and other The NVSS natality data are based on 100 percent of the birth certificates filed in the 50 States and the District of Columbia.

This system is sponsored by CDC's National Center for Health Statistics.

Website: http://www.cdc.gov/nchs/nvss.htm

National Vital Statistics System - Linked Birth/Infant Death Data Set

weighted to equal the sum of the linked plus unlinked infant deaths by State of residence at birth and age at death. The addition of the certificates are linked with corresponding birth certificates for infants who die in the U.S. before their first birthday. Linked data files weight greatly reduces the potential for bias in comparing infant mortality rates by characteristics. corresponding birth certificates. The number of infant deaths in the linked file for the 50 States and the District of Columbia is records. A record weight is added to the linked file to compensate for the infant death records that could not be linked to their including cause of death and age at death. Each year, 97-98 percent of infant death records are linked to their corresponding birth include all variables on the national natality file, including race and ethnicity data, as well as variables on the national mortality file, National linked files of live births and infant deaths are data sets for research on infant mortality. To create these data sets, death

This system is sponsored by CDC's National Center for Health Statistics.

Website: http://www.cdc.gov/nchs/linked.htm

Census 2000 (decennial)

Constitution requires that a census be taken every ten years for the purpose of reapportioning the U.S. House of Representatives The decennial 2000 Census is a complete enumeration of the U.S. population taken by the Census Bureau in 2000. Article I of the

for age, sex, households, household relationship, housing units, and tenure (whether the residence is owned or rented). The Summary File presents 100-percent population and housing data for specified race and Hispanic origin categories. Data are shown

Website: http://www.census.gov/main/www/cen2000.html

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Census 2000 Supplementary Survey

characteristics from the Census 2000 Supplementary Survey are reported for the United States as a whole, the 50 states, and the combination with data from the ACS comparison site tests to produce annual estimates. Economic, demographic, and housing counties with monthly samples of about 58,000 housing units. The Census 2000 Supplementary Survey is designed to be used in form type information at the same time as, but separate from, the Decennial Census. It used the questionnaire and methods developed District of Columbia, as well as large counties and cities. households. Group quarters were not included in the sample. The Census 2000 Supplementary Survey was conducted in 1,203 for the American Community Survey to collect demographic, social, economic, and housing data from a national sample of 700,000 The Census 2000 Supplementary Survey is a Decennial Census program designed to demonstrate the feasibility of collecting long

Website: http://www.census.gov/c2ss/www/

Current Population Survey (CPS)

a whole, and various other population subgroups. Census. CPS provides estimates of employment, unemployment, and other characteristics of the general labor force, the population as The CPS is a household sample survey of the civilian non-institutionalized population conducted monthly by the U.S. Bureau of the

estimated population undercount; therefore, estimates can be different from the Census 2000 Supplementary Survey and Census 2000 of selection, uses adjustments for non-response, and ratio adjustment. Sample weighting is based on the 1990 census adjusted for the were, for various reasons, unavailable for interview. The estimation procedure inflates the sample by the reciprocal of the probability during 2000, the number of housing units or living quarters eligible for interview was about 50,000; of these about 6 or 7 percent The 2000 CPS sample is located in 75 sample areas, with coverage in every State and the District of Columbia. In an average month

Website: http://www.bls.gov

National Health Interview Survey (NHIS)

reports of the household respondents collected annually from approximately 43,000 households including about 106,000 persons. Data from the NHIS are based on self The sampling plan follows a multistage area probability design that permits the representative sampling of households. NHIS data are The NHIS is an annual household interview survey on the health of the civilian, noninstitutionalized population of the United States.

This survey is sponsored by CDC's National Center for Health Statistics.

Website: http://www.cdc.gov/nchs/nhis.htm

Behavioral Risk Factor Surveillance System (BRFSS)

institutionalized population 18 years of age or older. Every month, States select a random sample of adults for a telephone interview. collected. Data from the BRFSS are based on self reports of the household respondent. This selection process results in a representative sample for each State so that statistical inferences can be made from the information The BRFSS is a state-based, ongoing data collection program designed to measure behavioral risk factors in the adult, non-

This survey is sponsored by CDC's National Center for Chronic Disease Prevention and Health Promotion.

Website: http://www.cdc.gov/brfss/

Data issues

Age adjustment

specific rates in a population of interest to a standardized age distribution in order to eliminate differences that result from age groups) at one point in time or one population at two or more points in time. differences in the population composition. This adjustment is done when comparing two or more populations (such as race/ethnic The data for the mortality measures and most of the health measures are age adjusted. Age adjustment is the application of age-

and, therefore, has no intrinsic meaning. Because age-adjusted rates are adjusted to a predetermined standard, they should be viewed numbers or crude rates are used.) The actual numerical value of an age-adjusted rate is dependent on the standard population used must be adjusted to the same standard population as constructs or indexes rather than as direct or actual measures. It is important to note that in order to compare age-adjusted rates they Age-adjusted rates are useful for comparison purposes only, not to measure absolute magnitude. (To compare absolute magnitude,

All data shown in the charts were age adjusted to the 2000 Standard Population. Details have been published in other reports:

http://www.cdc.gov/nchs/data/statnt/statnt06rv.pdf http://www.cdc.gov/nchs/data/statnt/statnt20.pdf

Cause-of-death classification and definitions

which was implemented for coding of mortality data in the United States in 1999. Cause-of-death data shown are classified according to the Tenth Revision of the International Classification of Diseases (ICD-10),

Data reliability

reliable statistic, the figure is not shown. The general criteria for reliability is (a) at least 20 deaths for mortality data or (b) a relative standard error of <30% for the data derived from health surveys. The data shown in the charts meet basic standards of statistical reliability. If there are not a sufficient number of events to produce a

Race and ethnicity classification

respondents the option of selecting one or more races and must tabulate multiple race when reporting data and (2) the Asian or Pacific Along with some changes in terminology, the 1997 revision includes two major changes: (1) Agencies are now required to offer Islander category is split into 2 categories - Asian and Native Hawaiian or Other Pacific Islander. Directive 15, adopted in 1977. The standards were revised in 1997 and are gradually being implemented by all Federal data systems The racial and ethnic categories used in the charts are based on those recommended by the Office of Management and Budget (OMB)

percent; and Hispanics, 2 percent. (Rosenberg HM, Maurer JD, Sorlie PD, Johnson NJ, et al. Quality of death rates by race and Hispanic origin: A summary of current research, 1999. National Center for Health Statistics. Vital Health Stat 2(128). 1999). underestimated for the American Indian or Alaska Native population by approximately 21 percent; Asian or Pacific Islanders, 11 estimates. As a consequence of the combined effect of numerator and denominator biases, it has been estimated that death rates for the may be seriously under-reported. Additional reporting problems, such as net census undercount affect population counts and Hispanic origin on the death certificate is good for the white and African American populations; however, reporting of other groups certificate information with that from independent sources such as the Current Population Survey, the quality of reporting of race and or the Census of Population, is either self-reported or is reported by a member of the household. Based on comparisons of death the funeral director based on information from an informant, usually a family member; while denominator information, from surveys misreporting and under-coverage in the denominator of the rates. Numerator information is from the death certificate as reported by Death rates by race and Hispanic origin may be biased from misreporting of race and Hispanic origin in the numerator of the rates and white population are overestimated by about 1 percent and for the African American population by about 5 percent; and are

illnesses returning the country of origin. This has been termed the "salmon bias" (Abraido-Lanza BP, Dohrenwend DS, Ng-Mak and It has also been hypothesized that death rates for Hispanics in the U.S. may be underestimated due to people with life-threatening Turner JB. The Latino mortality paradox: a test of the "salmon bias" and healthy migrant hypotheses

chart or (b) the specified country of origin is unknown. The mortality data for Puerto Rico (island) shown on the charts are based on shown in the charts includes people who are of Hispanic origin but either (a) are not from one of the specified countries shown in the data are available. For some charts, data are also shown for Hispanics from Central/South America. The category "Other Hispanic" events occurring in Puerto Rico regardless of the place of residence or the race/ethnicity of the decedent. Data for Hispanic subcategories based on the country of origin - Cuban, Mexican, Puerto Rican - are included in most charts where

Telephone coverage

living in the South, some minorities, and those in lower socioeconomic groups typically have lower telephone coverage. households have telephones, coverage ranges from 87-98 percent across states and varies for subgroups as well. For example, persons The Behavioral Risk Factor Surveillance System (BRFSS) obtains data from telephone-based surveys. Although 94 percent of U.S.

prevalence. selection and nonresponse, as well as non-coverage, and are used to derive representative population-based estimates of risk behavior used, and may partially correct for any bias caused by non-telephone coverage. These weights adjust for differences in probability of For the BRFSS, no direct method of compensating for non-telephone coverage is employed; however, post-stratification weights are

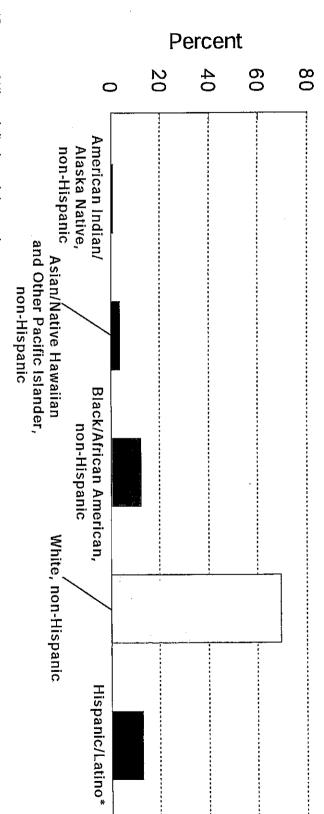
The percent of households in 1998 with telephones from the Census Bureau for specified groups are shown below:

	Household income \$10,000-\$14,999	Hispanic	Asian, non-Hispanic	Black, non-Hispanic	White, non-Huspanic	Total		<u>U.S.</u>
	88.7	87.7 82.7	84.9	05.3	88 7	05.7	04 1	
Texas Washington	New Mexico New York	Nevada New Jersey	Illinois	Florida	Colorado	California	Arizona	States with largest # and/
91.6 95.5	87.1 95.1	91.8 95.1	92.3	93.3	95.4	95.1	92.9	d/or % Hispanic

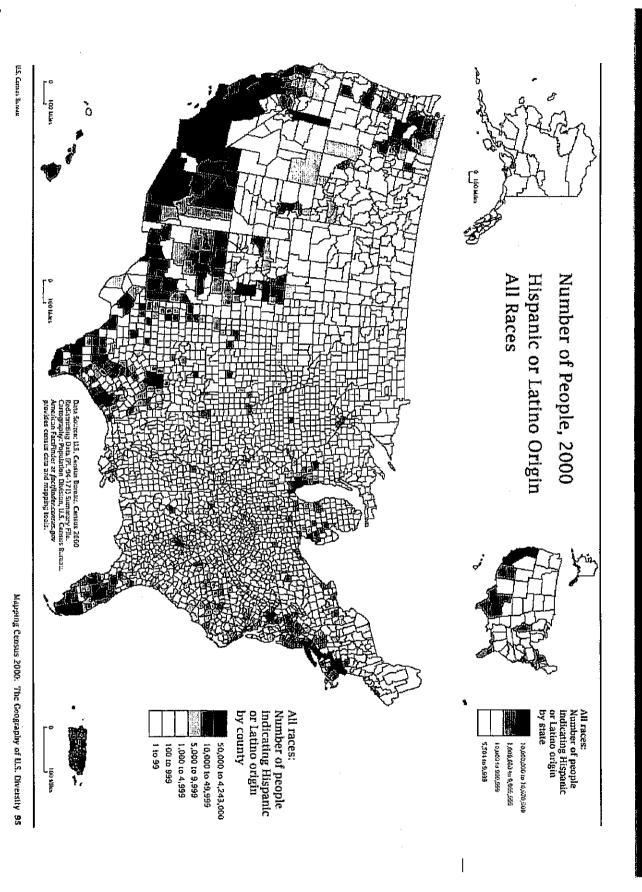
Hispanic/Latino Population Snapshots of U.S.

Demographic characteristics

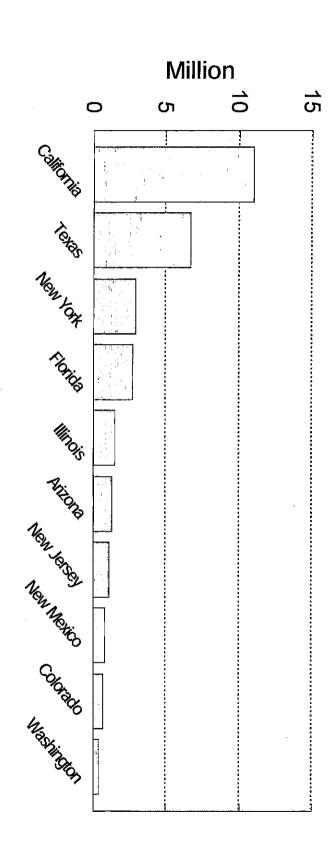
Percent distribution of the population by specified race/ethnicity: United States, 2000



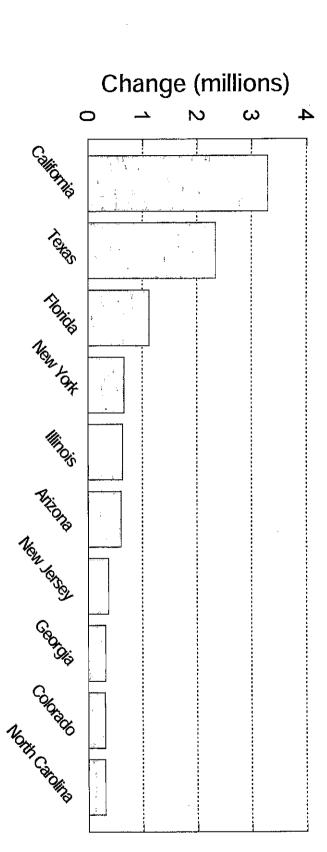
^{*}Persons of Hispanic/Latino origin may be any race.
Source: Census 2000 Summary File 1, U.S.Bureau of the Census.

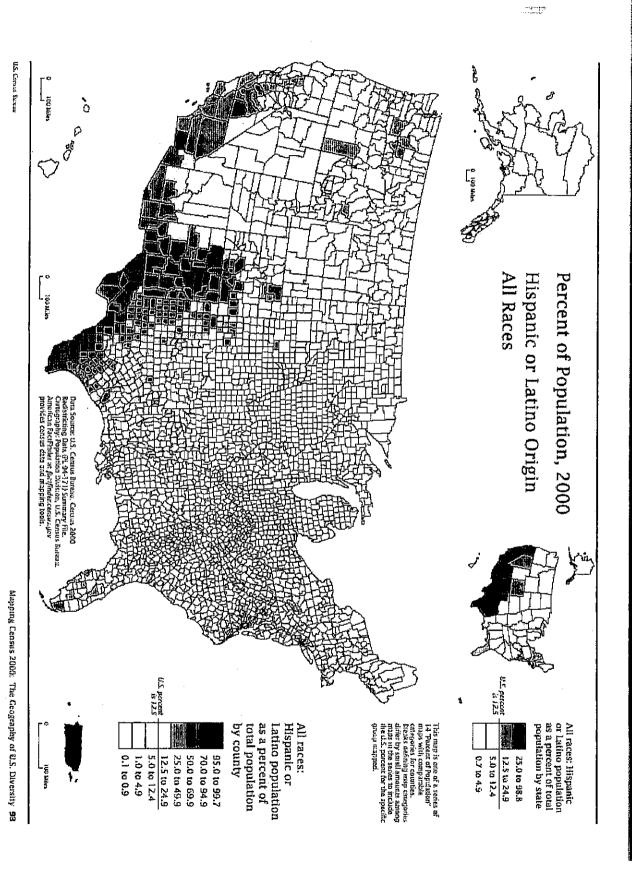


Number of Hispanic/Latino residents: Ten States with largest Hispanic/Latino populations, 2000

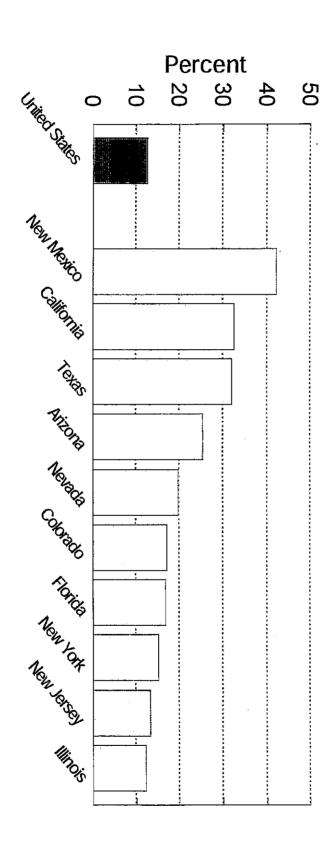


Change in number of Hispanic/Latino residents between 1990 and 2000: Ten States with largest change

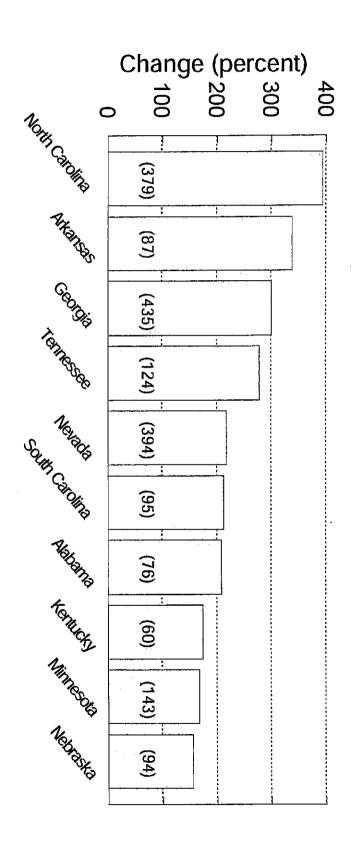




proportion of Hispanic/Latino residents, 2000 Percent of population that is Hispanic/Latino: United States and ten States with largest

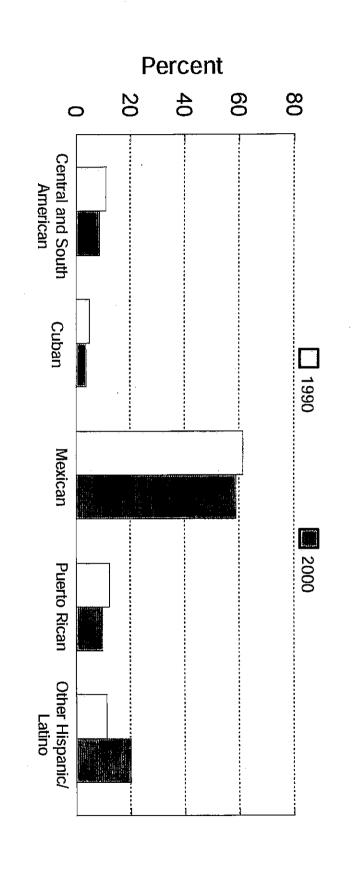


Change in proportion of Hispanic/Latino residents between 1990 and 2000: Ten States with largest change



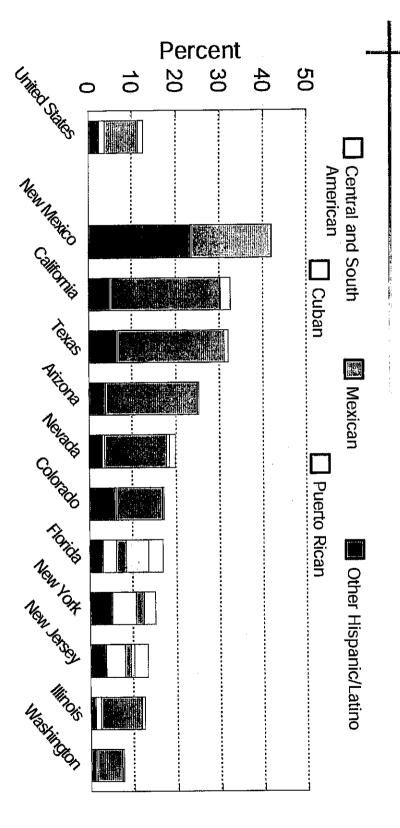
Note: Figures in parentheses represent the number of Hispanic residents in thousands in 2000 Source: Census 2000 Summary File 1, U.S.Bureau of the Census.



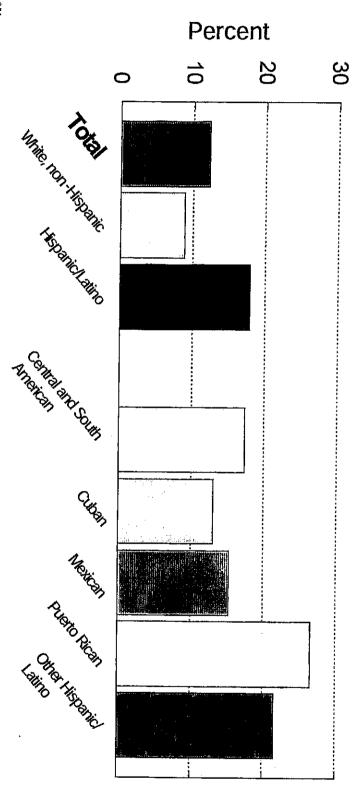


Source: 1990 Census Summary File 3, Census 2000 Summary File 1, U.S.Bureau of the Census.

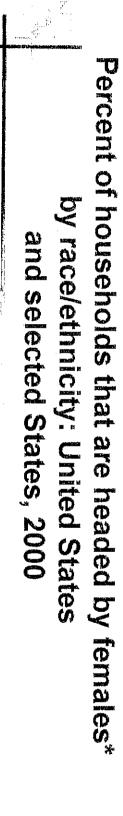
Percent of population that is Hispanic/Latino by specified origin: United States and selected States, 2000

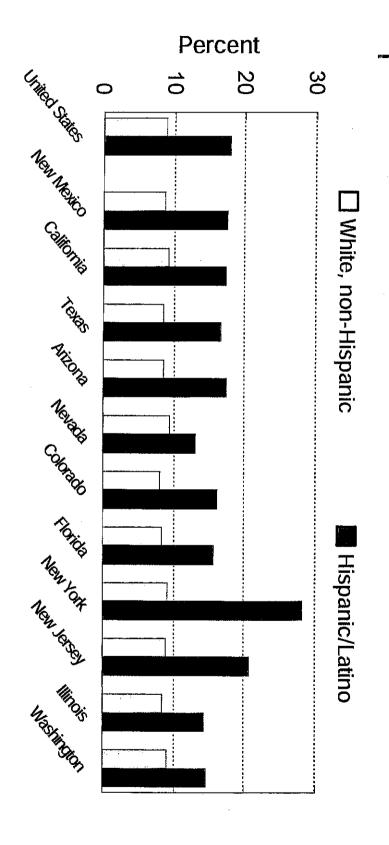


Percent of households that are headed by females* by race/ethnicity and specified origin: United States, 2000



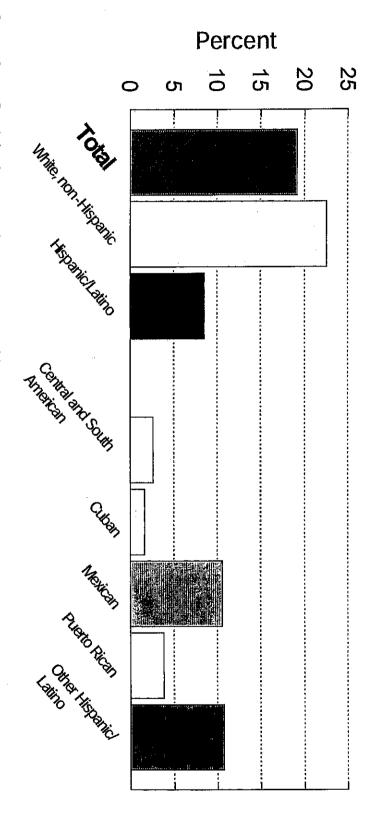
*No spouse present Source: Census 2000 Summary File 2, U.S.Bureau of the Census.



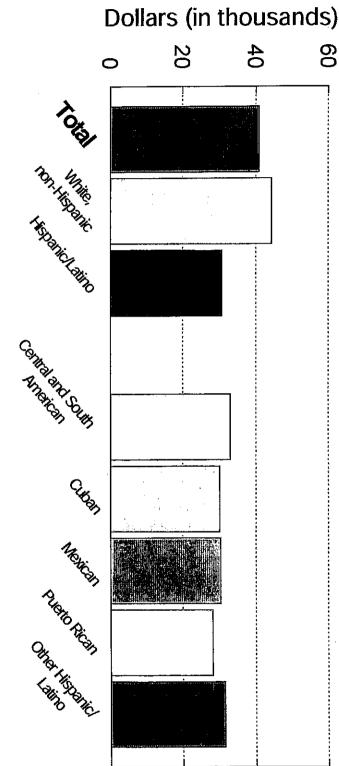


*No spouse present Source: Census 2000 Summary File 2, U.S.Bureau of the Census.

Percent of population that lives in non-metropolitan areas by race/ethnicity and specified origin: United States, 2000



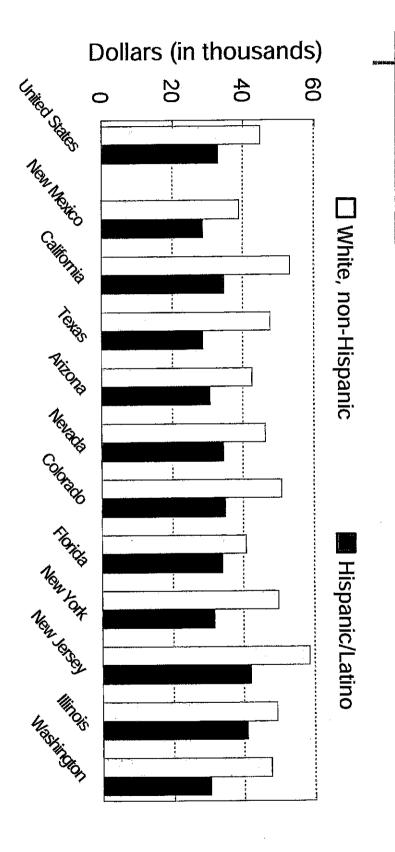




Source: Current Population Survey, March 2000, U.S.Bureau of the Census

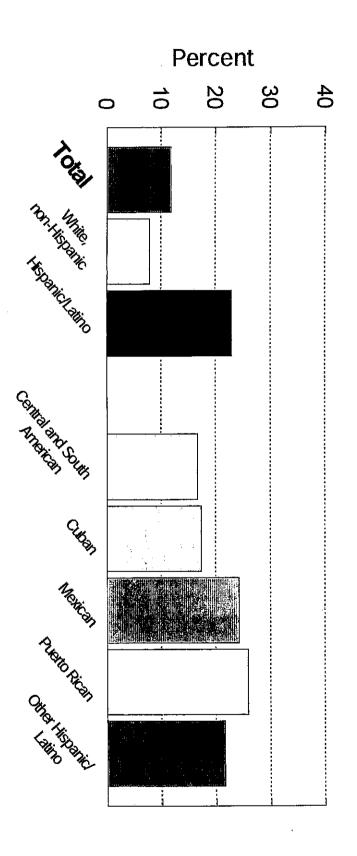
Median household income by race/ethnicity: United States and selected States, 2000

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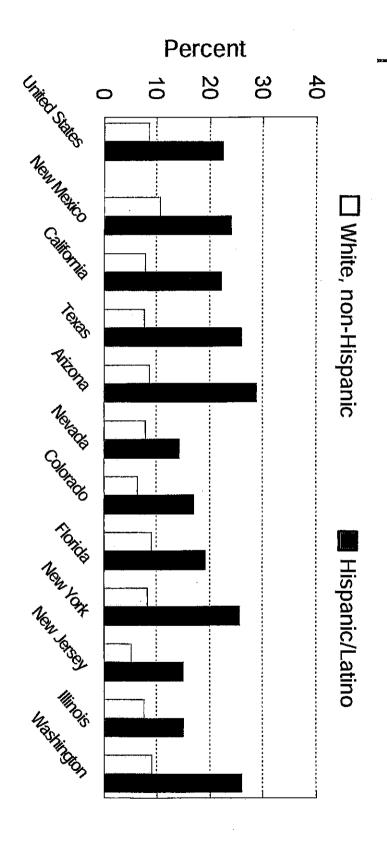
Source: Census 2000 Supplementary Survey, U.S.Bureau of the Census.

Percent of population below the federal poverty level by race/ethnicity and specified origin: United States, 2000



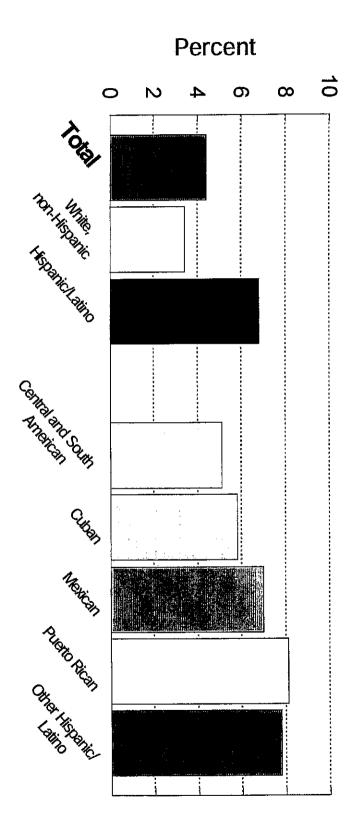
Source: Current Population Survey, March 2000, U.S.Bureau of the Census

Percent of population below the federal poverty level by race/ethnicity: United States and selected States, 2000



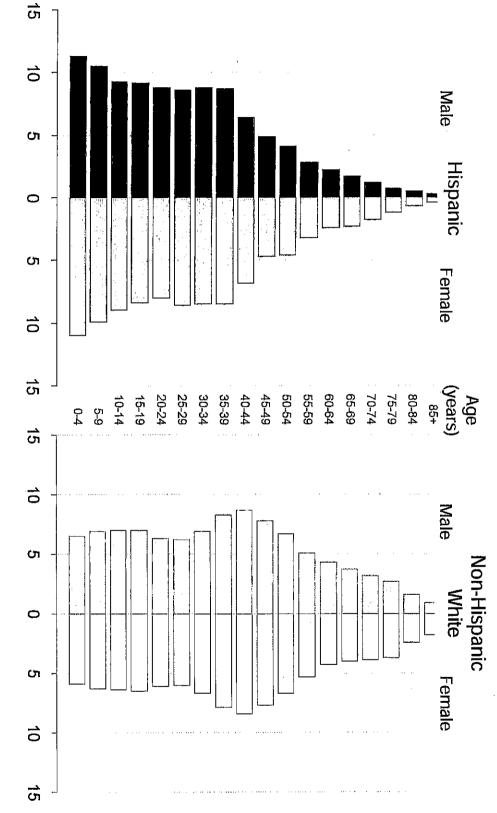
Source: Census 2000 Supplementary Survey, U.S.Bureau of the Census.

who are unemployed by race/ethnicity and Percent of civilian labor force 16 and over specified origin: United States, 2000

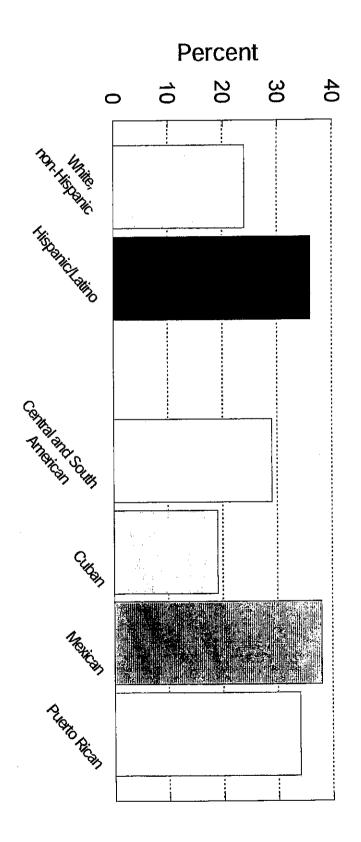


Source: Current Population Survey, March 2000, U.S.Bureau of the Census.

Percent distribution of the population by age, sex and race/ethnicity: United States, 2000

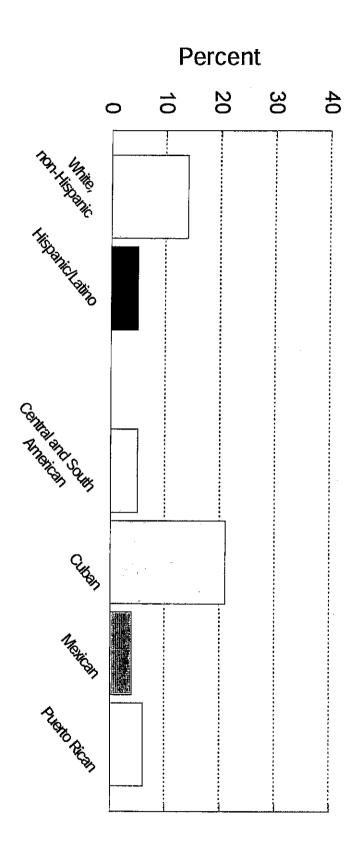


Percent of population under 18 years by race/ethnicity and specified origin: United States, 2000



Source: Current Population Survey, March 2000, U.S.Bureau of the Census.

Percent of population 65 years and over by race/ethnicity and specified origin: United States, 2000

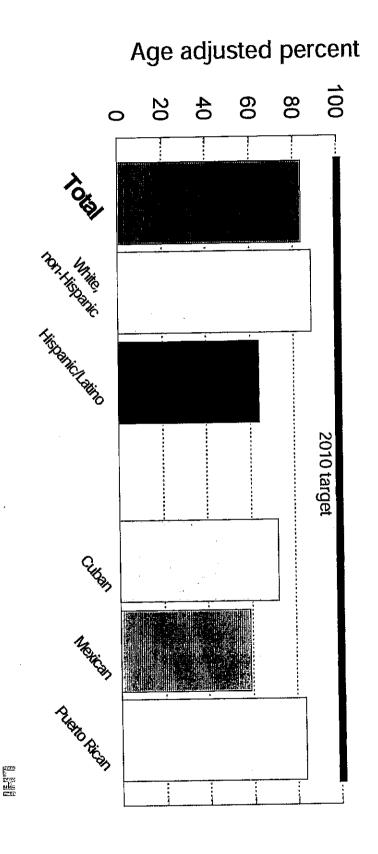


Source: Current Population Survey, March 2000, U.S.Bureau of the Census

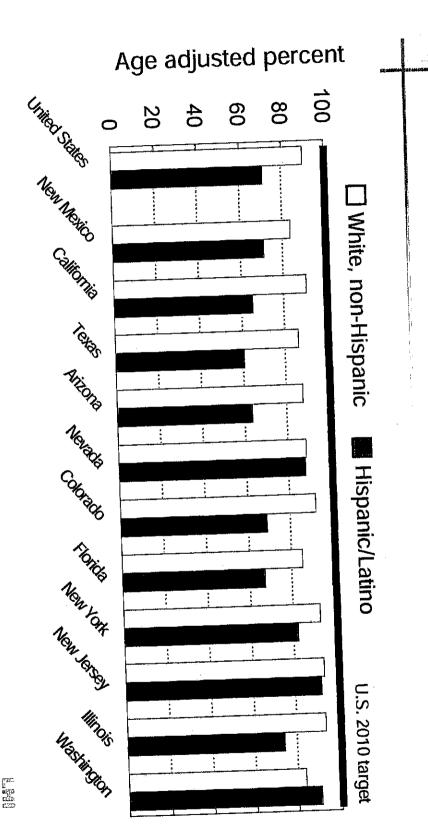
Health access and utilization

Percent of population under 65 years with health insurance by race/ethnicity and specified origin: United States, 2000

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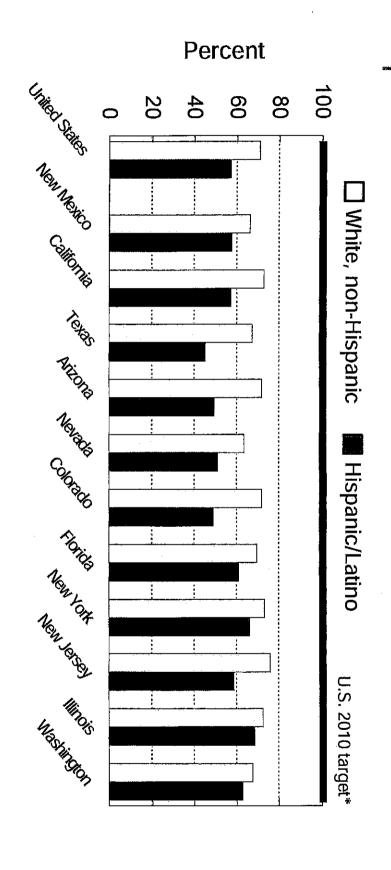
Percent of population under 65 years with health insurance by race/ethnicity: United States and selected States, 2000



Percents are age-adjusted to the year 2000 standard population. Source: Behavior Risk Factor Surveillance Survey, National Center for Chronic Health Promotion and Disease Prevention, CDC.

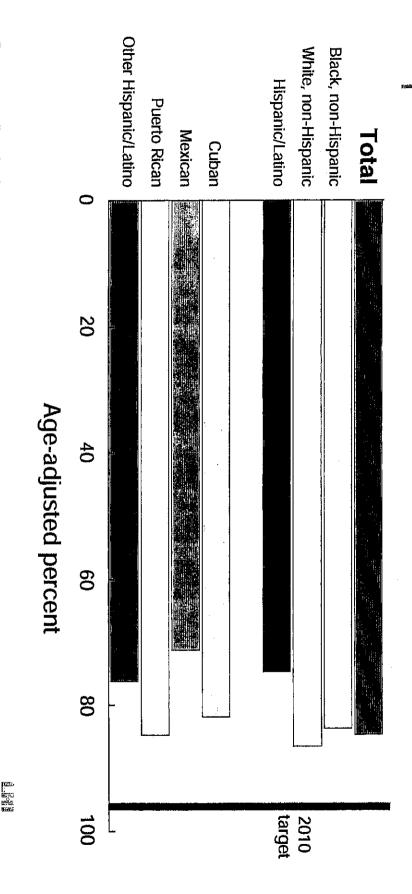
Messare

Percent of people 18 and older who visited a dentist or dental clinic within the past year by race/ethnicity: United States and selected States, 1999



Source: Behavior Risk Factor Surveillance Survey, National Center for Chronic Health Promotion and Disease Prevention, CDC *The 2010 target for the United States is for people ages 2 years and older.

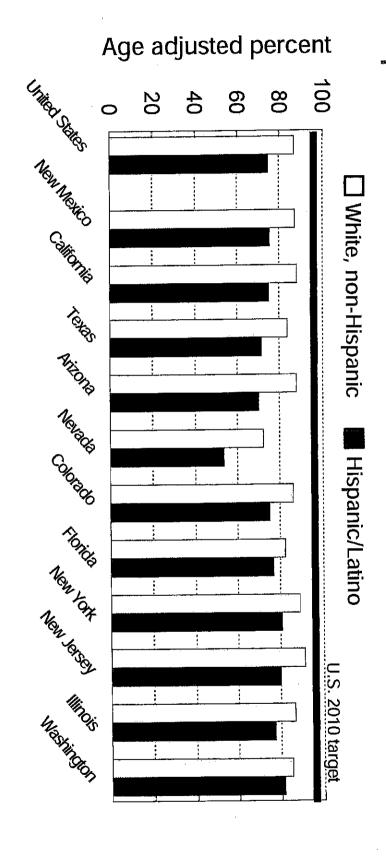
Percent of adults 18 years and older with a specific source of ongoing care by race/ethnicity and specified origin: United States, 1997-2000



Source: National Health interview Survey, National Center for Health Statistics, CDC.

Data are age adjusted to the 2000 standard population.

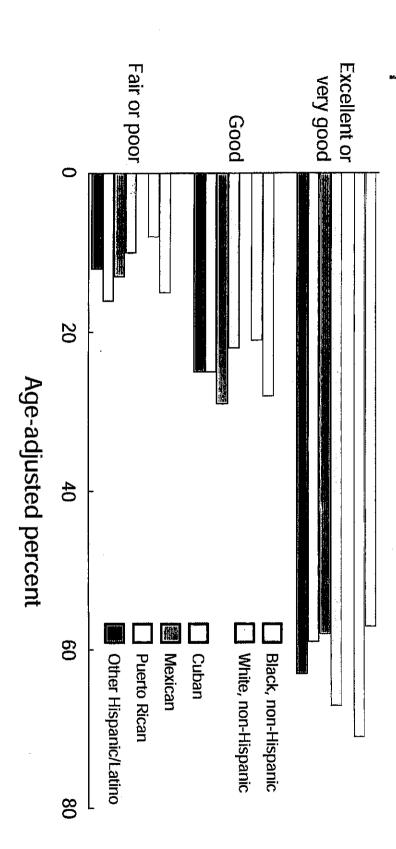
Percent of adults 18 years and older with a specific United States and selected States, 1997-2000 source of ongoing care by race/ethnicity:



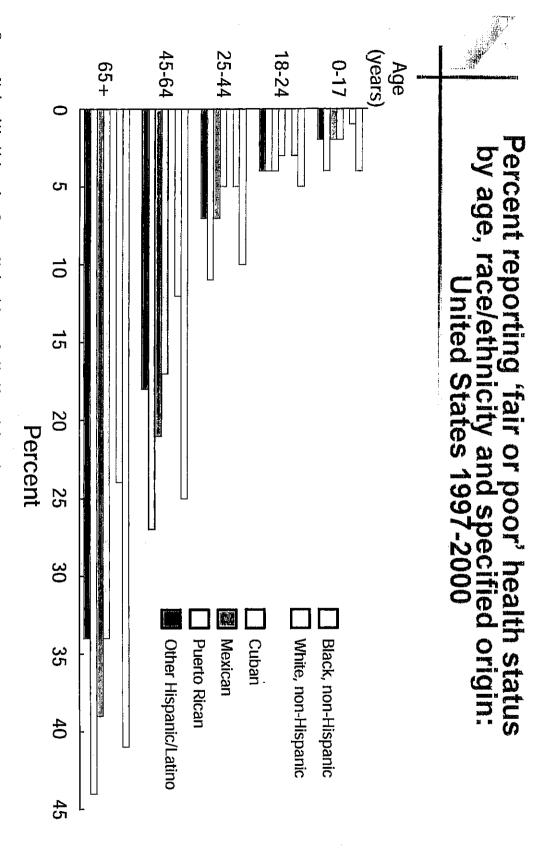
Data are age adjusted to the 2000 standard population.

Health status

Percent distribution of the population according to self-assessed health status by race/ethnicity and specified origin: United States, 1997-2000

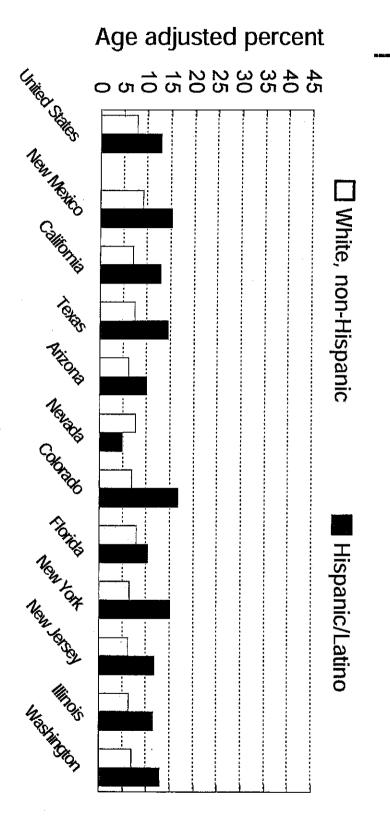


Data are age adjusted to the 2000 standard population.
Source: National Health interview Survey, National Center for Health Statistics, CDC.





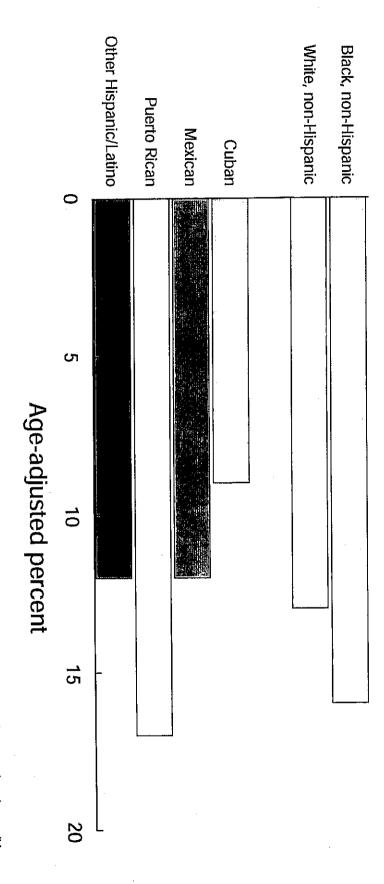
Percent reporting 'fair or poor' health status: United States and selected States, 1997-2000



Data are age adjusted to the 2000 standard population. Source: National Health interview Survey, National Center for Health Statistics, CDC.

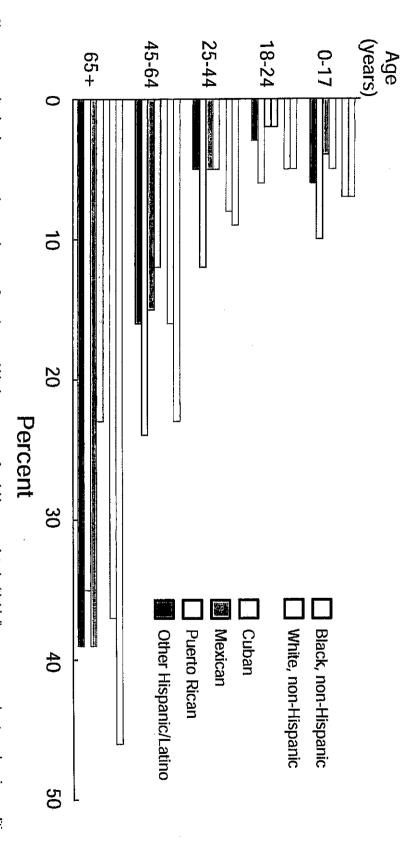
· Control of

Percent of the population with any activity limitation* by race/ethnicity and specified origin: United States, 1997-2000



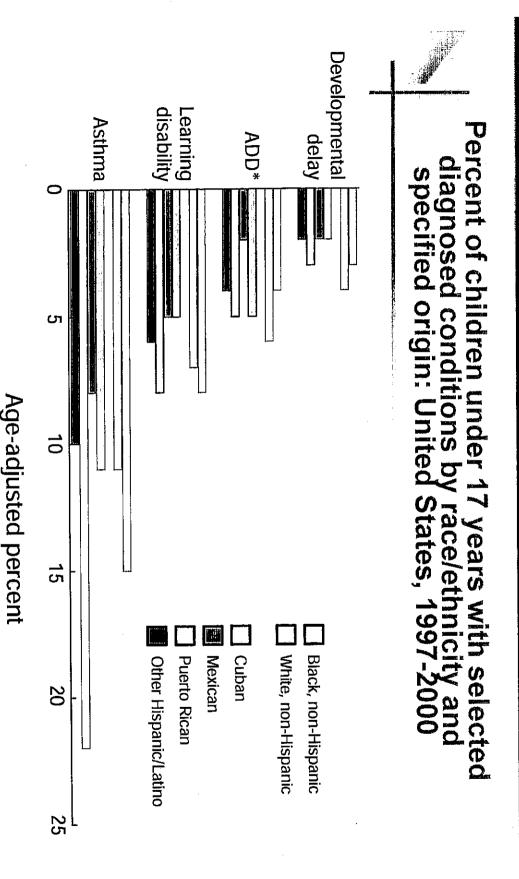
^{*}Long-term reduction in a person's capacity to perform the usual kind or amount of activities associated with his/her age group due to a chronic condition. Data are age adjusted to the 2000 standard population.

Percent of the population with any activity limitation* by age, race/ethnicity and specified origin: United States, 1997-2000



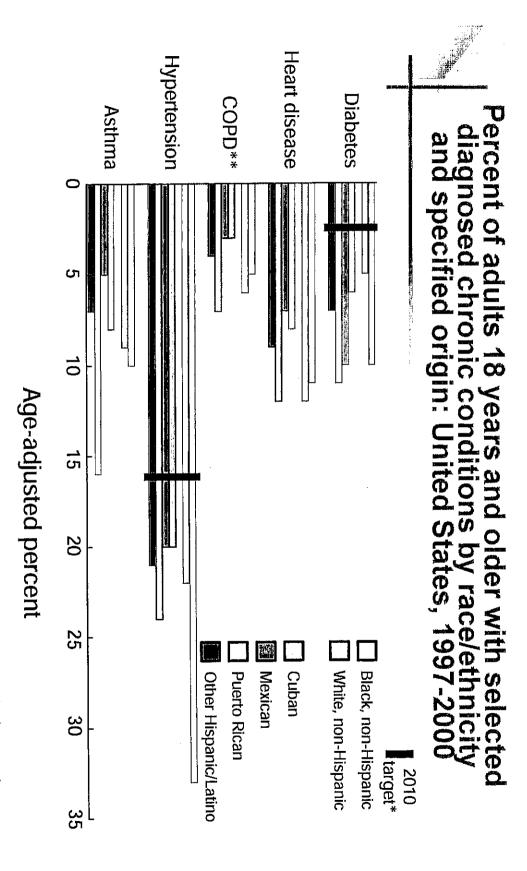
Source: National Health interview Survey, National Center for Health Statistics, CDC. *Long-term reduction in a person's capacity to perform the usual kind or amount of activities associated with his/her age group due to a chronic condition.

Chronic conditions



^{*}Attention Deficit Disorder, also know as Attention-Deficit/Hyperactivity Disorder (ADHD). Data are age adjusted to the 2000 standard population.

Source: National Health interview Survey, National Center for Health Statistics, CDC.

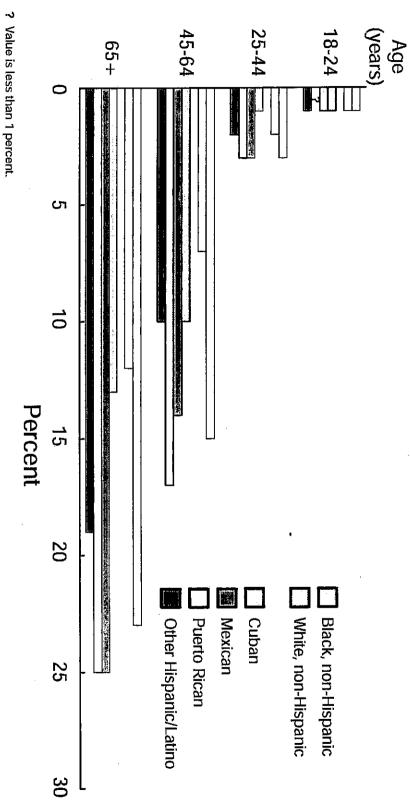


*2010 target for hypertension based on measured blood pressure. No 2010 targets were set for heart disease, COPD, and asthma prevalence.

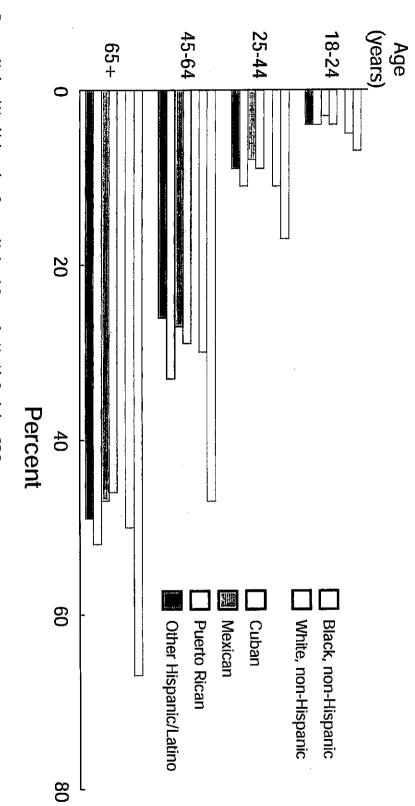
**Chronic obstructive pulmonary diseases (also known as chronic lower respiratory diseases.)

Data are age adjusted to the 2000 standard population.

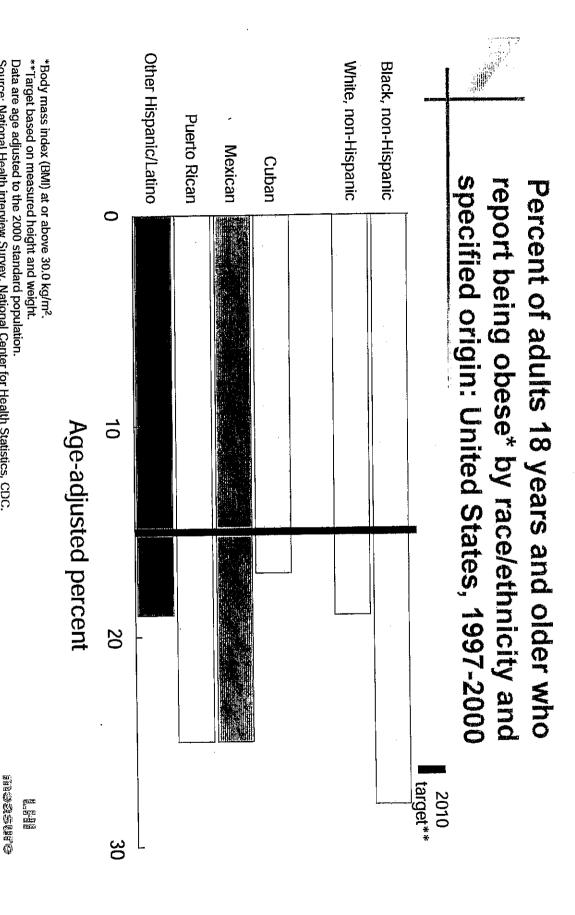
Percent of adults with diagnosed diabetes specified origin: United States, 1997-2000 by age, race/ethnicity and

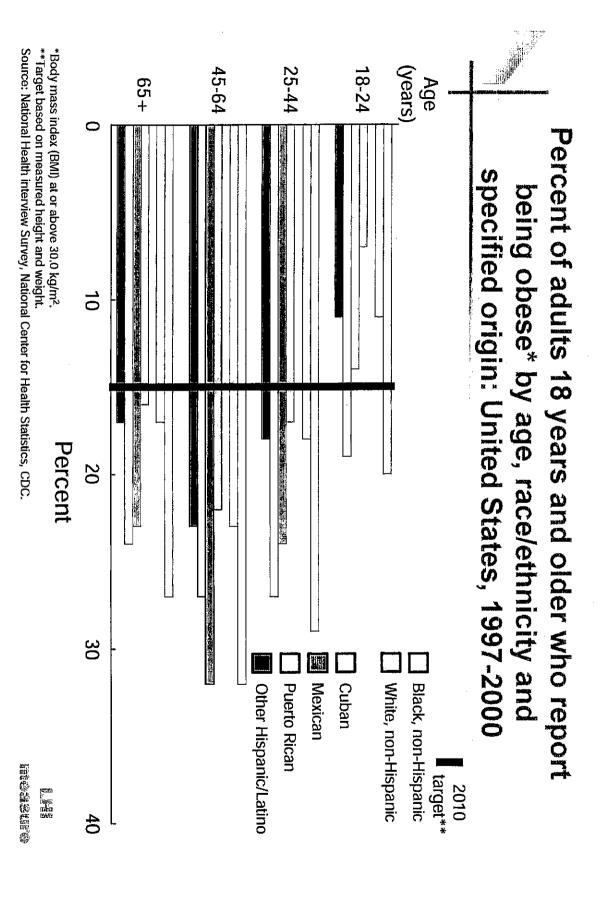


Percent of adults with diagnosed hypertension specified origin: United States, 1997-2000 by age, race/ethnicity and



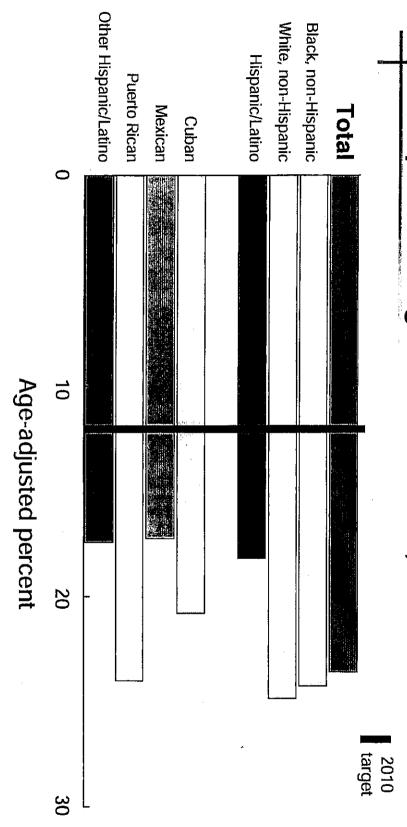
Risk factors





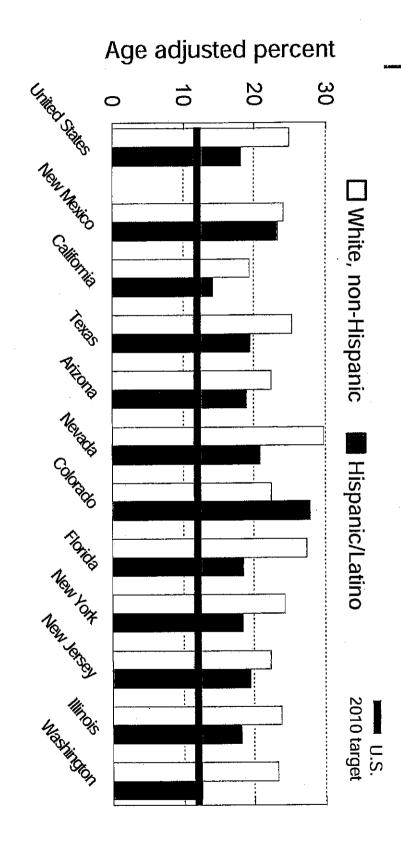
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are current smokers by race/ethnicity and specified origin: United States, 1997-2000 Percent of adults 18 years and older who



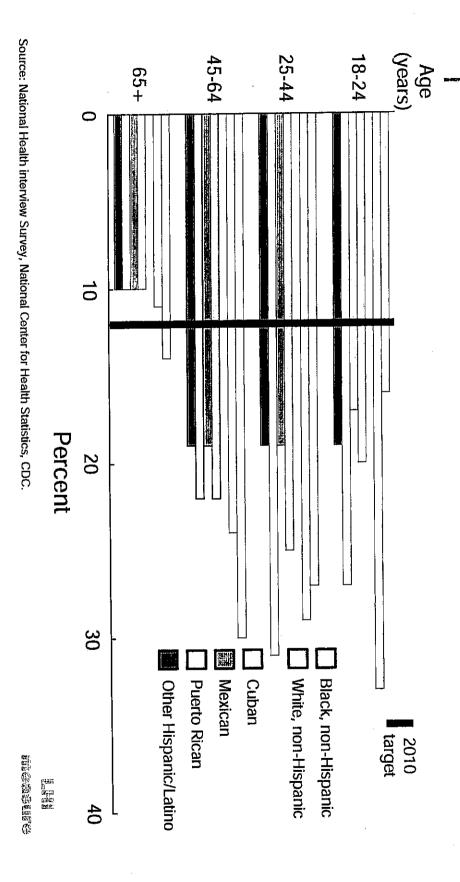
Data are age adjusted to the 2000 standard population.
Source: National Health interview Survey, National Center for Health Statistics, CDC.

United States and selected States, 1997-2000 Percent of adults 18 years and older who are current smokers by race/ethnicity:



Data are age adjusted to the 2000 standard population.
Source: National Health interview Survey, National Center for Health Statistics, CDC.

Percent of adults 18 years and older who are current smokers by age, race/ethnicity and specified origin: United States, 1997-2000

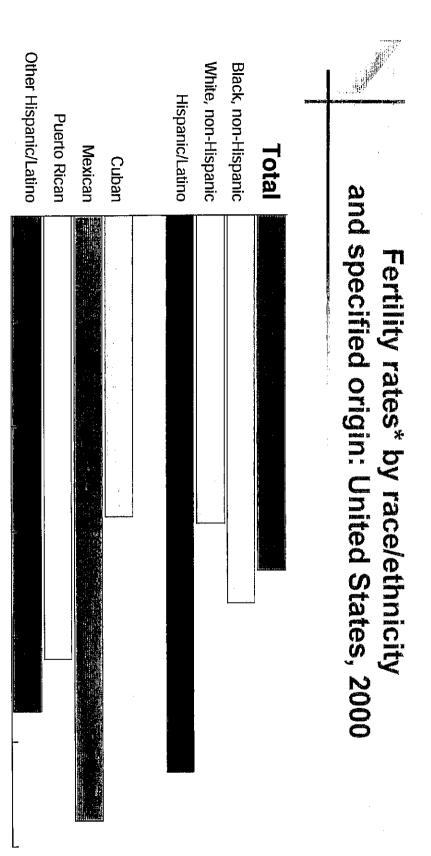


Births and deaths

race/ethnicity and specified origin: Number of births and deaths by United States and Puerto Rico

2000

Puerto Rico (island)	Hispanic Puerto Rican Mexican Cuban Other Hispanic	Non-Hispanic White Black	
30,696	13,909 57,425 11,029 21,377	1,953,197 281,979	1999 Deaths
59,333	58,124 581,915 13,429 162,400	2,362,968 604,346	2000 Births

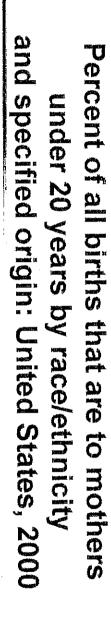


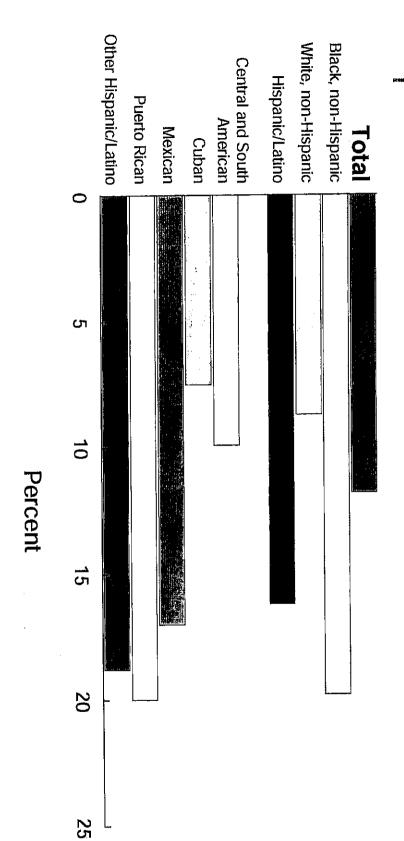
Births per 1,000 women 15-44 years

100

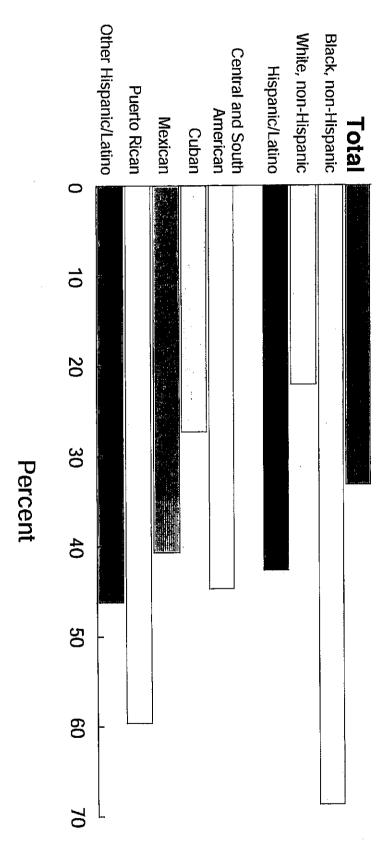
.

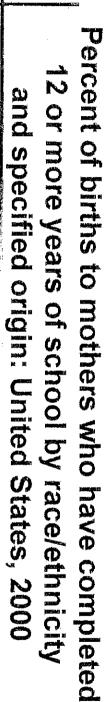
^{*}Total live births, regardless of age of mother, divided by the number of women 15-44 years in specified groups. Source: National Vital Statistics Surveillance System, National Center for Health Statistics, CDC.

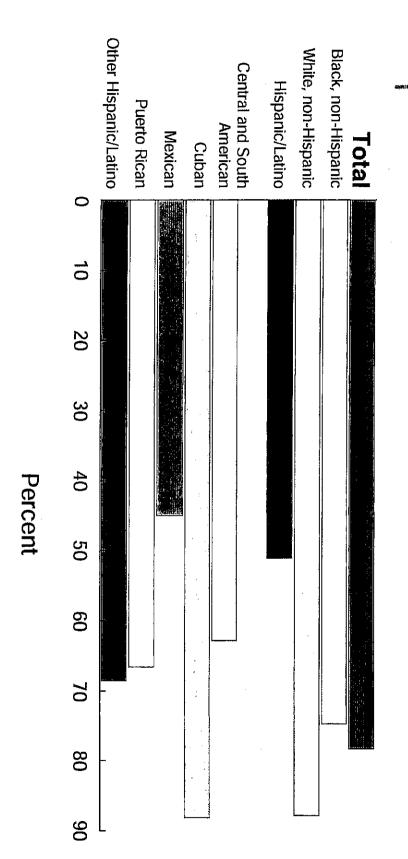






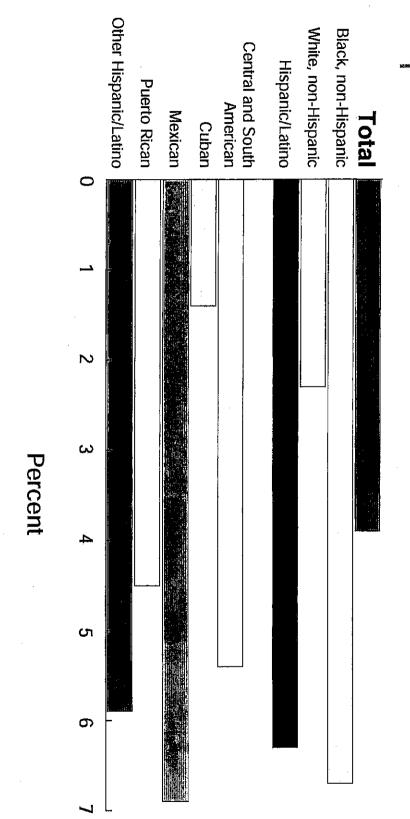








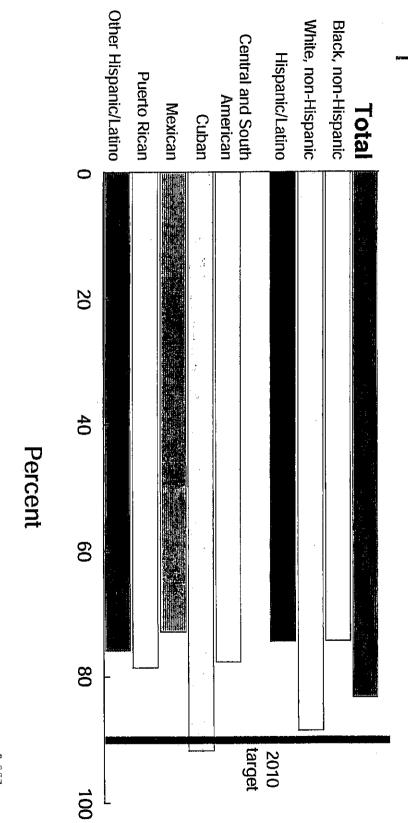
and specified origin: United States, 2000 Percent of births to mothers with late* or no prenatal care by race/ethnicity



^{*}Care beginning in 3rd trimester.

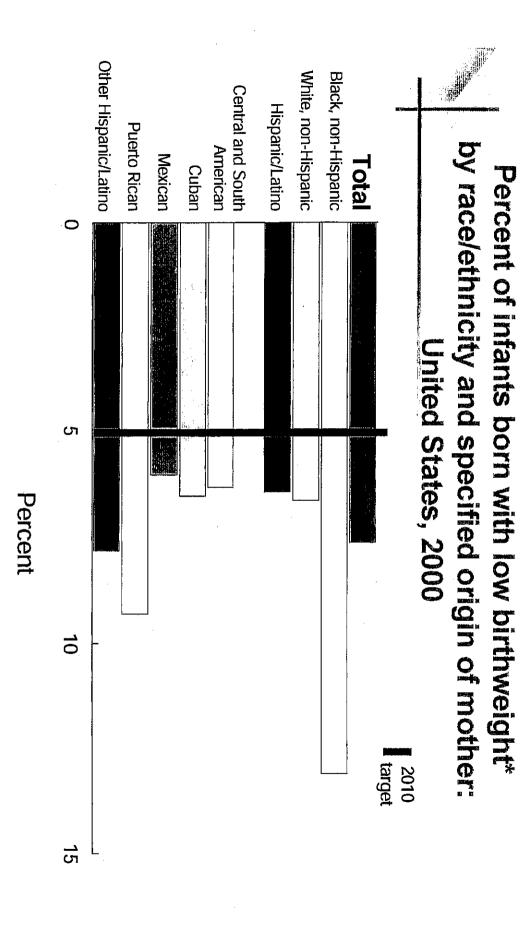
Source: National Vital Statistics Surveillance System, National Center for Health Statistics, CDC.

Percent of births to mothers who began prenatal care in the first trimester by race/ethnicity and specified origin: United States, 2000

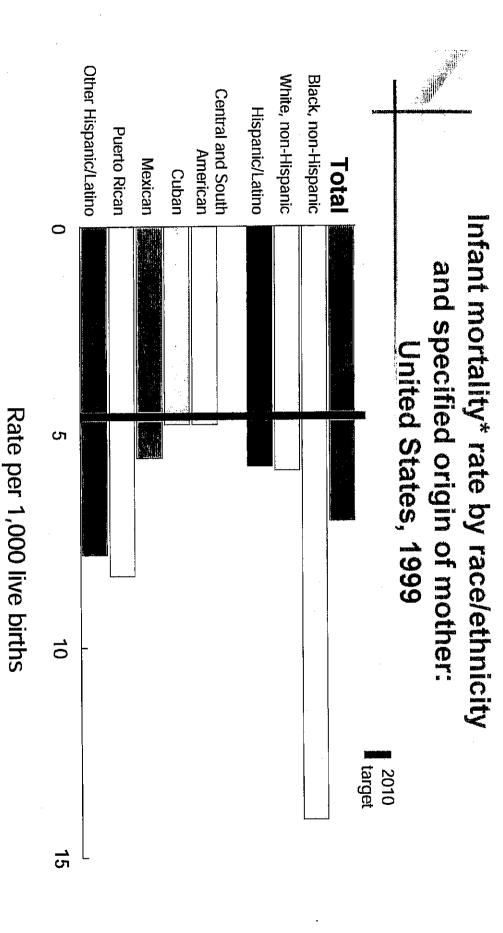


Source: National Vital Statistics Surveillance System, National Center for Health Statistics, CDC

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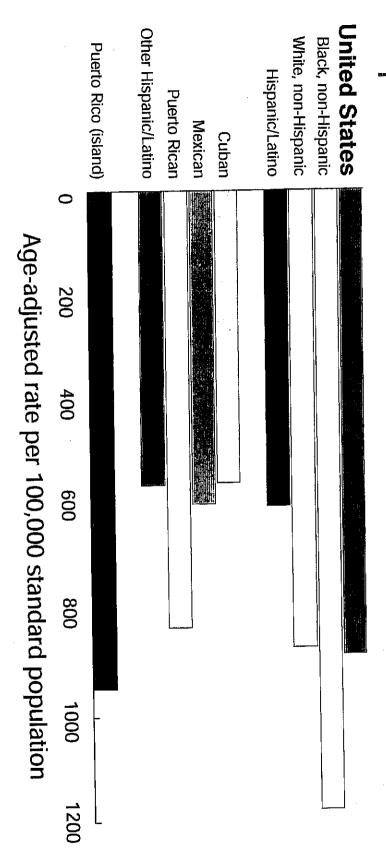
^{*}Less than 2,500 grams (5 lbs. 8 oz.)
Source: National Vital Statistics Surveillance System, National Center for Health Statistics, CDC.



*Deaths to infants less than I year per 1,000 live births.

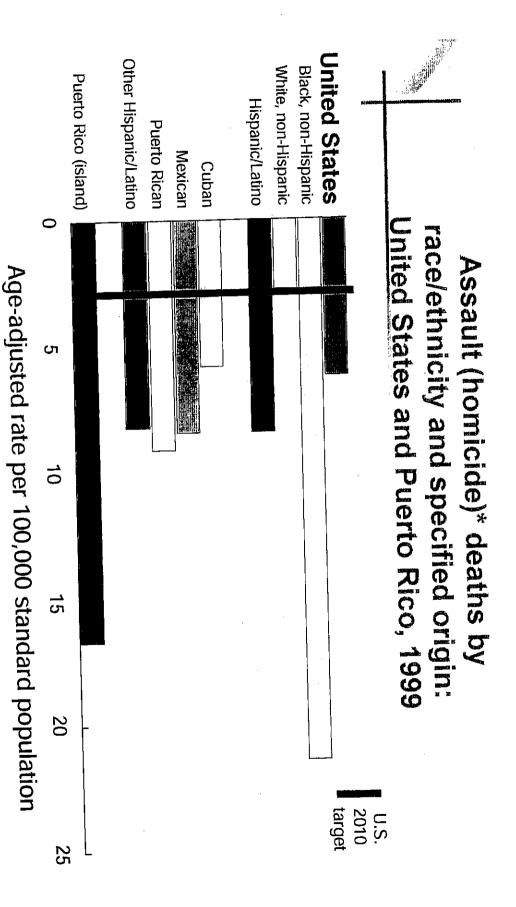
Source: National Vital Statistics System, Linked Birth and Infant Death File, National Center for Health Statistics, CDC.





Data are age adjusted to the 2000 standard population.

Death rates for Hispanic populations may be underestimated, see Data Issues.



*Homicides are classified by ICD-10 codes: X85-Y09, Y87.1. Data are age adjusted to the 2000 standard population.

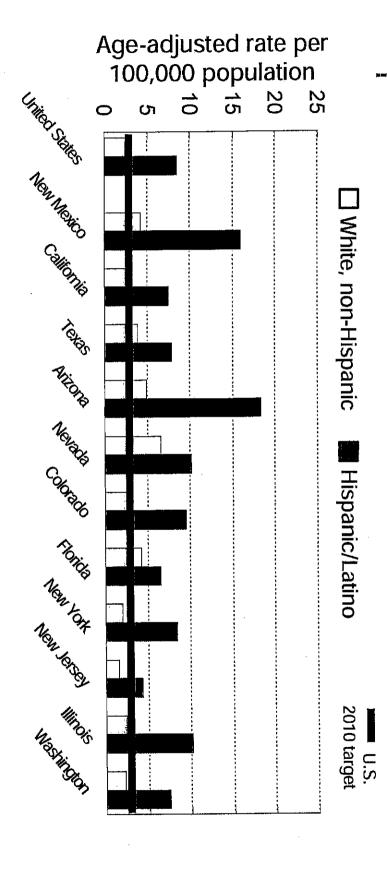
Death rates for Hispanic populations may be underestimated, see Data Issues. Source: National Vital Statistics Surveillance System, National Center for Health Statistics, CDC.

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Assault (homicide)* deaths by race/ethnicity: United States and selected States, 1999



Source: National Vital Statistics Surveillance System, National Center for Health Statistics, CDC Death rates for Hispanic populations may be underestimated, see Data Issues. *Homicides are classified by ICD-10 codes: X85-Y09, Y87.1. Data are age adjusted to the 2000 standard population.

100

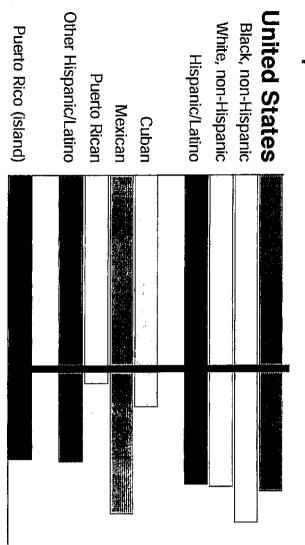
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United States and Puerto Rico, 1999 race/ethnicity and specified origin: Motor vehicle accident* deaths by

target

U.S. 2010



Age-adjusted rate per 100,000 standard population

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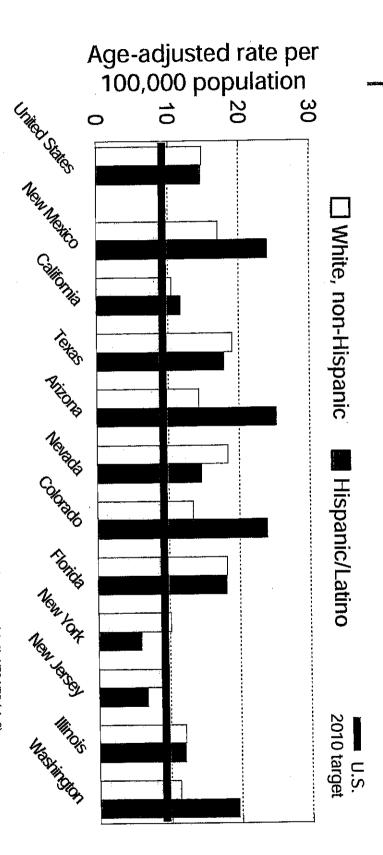
Source: National Vital Statistics Surveillance System, National Center for Health Statistics, CDC Death rates for Hispanic populations may be underestimated, see Data Issues.

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^{*}Motor vehicle accident deaths are classified by ICD-10 codes: V30-V39 (.4-9), V40-V49 (.4-9), V50-V59 (.4-9), V60-V69 (.4-9), V70-V79 (.4-9), V81.1, V82.1, V83-V86 (.0-3), V20-V28 (.3-9), V29 (.4-9), V12-V14 (.3-9), V19 (.4-6), V02-V04 (.1, 9), V09.2, V80 (.3-5), V87 (.0-8), V89.2. Data are age adjusted to the 2000 standard population.

United States and selected States, 1999 Motor vehicle accident* deaths by race/ethnicity:



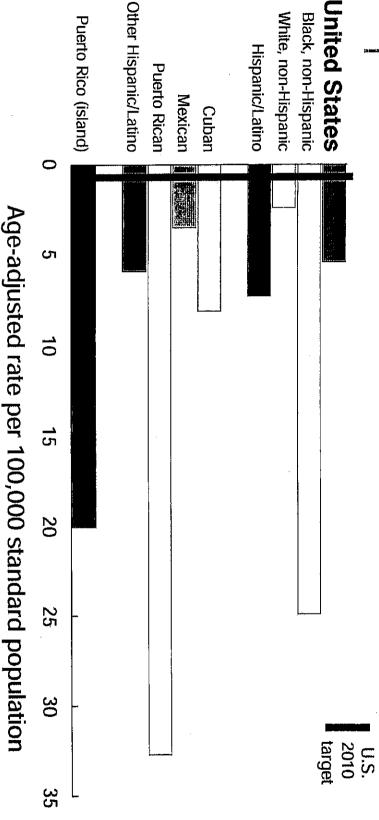
*Motor vehicle accident deaths are classified by ICD-10 codes; V30-V39 (.4-9), V40-V49 (.4-9), V50-V59 (.4-9), V60-V69 (.4-9), V70-V79 (.4-9), V81.1, V82.1, V83-V86 (.0-3), V20-V28 (.3-9), V29 (.4-9), V12-V14 (.3-9), V19 (.4-6), V02-V04 (.1, 9), V09.2, V80 (.3-5), V87 (.0-8), V89.2. Data are age adjusted to the 2000 standard population.

Death rates for Hispanic populations may be underestimated, see Data Issues. Source: National Vital Statistics Surveillance System, National Center for Health Statistics, CDC

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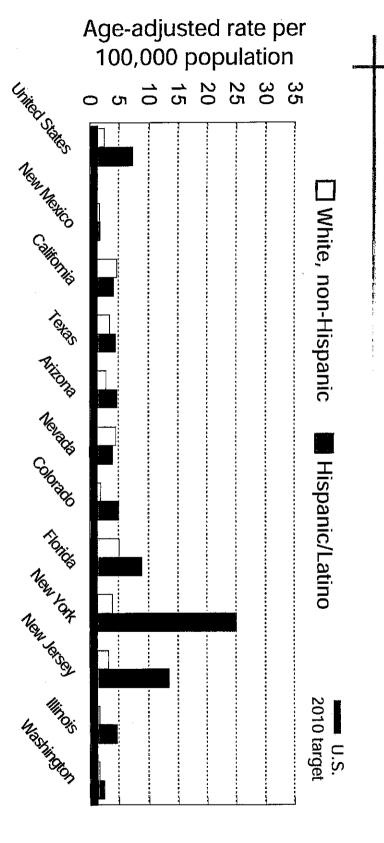


Human immunodeficiency virus (HIV)* deaths by race/ethnicity and specified origin: United States and Puerto Rico, 1999



*HIV deaths are classified by ICD-10 codes; I11, I20-I25. Data are age adjusted to the 2000 standard population. Death rates for Hispanic populations may be underestimated, see Data Issues.

Human immunodeficiency virus (HIV)* deaths United States and selected States, 1999 by race/ethnicity:



*HIV deaths are classified by ICD-10 codes: I11, I20-I25. Data are age adjusted to the 2000 standard population. Death rates for Hispanic populations may be underestimated, see Data Issues.

Leading causes of death for race and ethnic groups in the United States and in Puerto Rico, 1999

			United States	states				
	ļ				Hispanic	nic		P Pin
		Non-Hispanic Non-Hispanic	Von-Hispanic			Puerto Rican	Other	Pueno Kico
Cause of death (based on ICD-10)	Total	White	Black	Cuban	Mexican	(mainland)	Hispanic	(isiailu)
				I				
				Cause	Cause of death rank			
	•	7	٠.	- 2		_1	_	د. ،
Diseases of heart (100-109,111,1113,120-151)	-	۰ -) -	ა -	ა .	s	2	2
Malignant neoblasms (C00-C97)	2	2	N	٨	^	ı N	. 1	_
Combracher diseases (ISO-ISO)	ω	ω	ω	ω	4	O)	4	4
Charlis James recognizations dispasses (TAC-TAZ)	4	4	თ	4	9	7	Ø	σ
Accidents (unintentional injuries) (VD1-X59.)	n
\85.\86\)	ഗ	OI	4	o	ယ	4	ı Cu	. C
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	7	တ	6	7	ð	9	œ	•
	o ·	20	14	00	귥	14	ಭ	12
Aizneimei sidisease (Goo)	(•						
Nephrits, neprirotic sylutotic and reprirosis)	5	Ď	٥	ជ	<u> </u>	⇉	۵
(NOO-NO7,N17-N19,N25-N27)	, cc	<u>.</u> «	<u>.</u> u	, (1 . A (3	12	G
Septicemia (A40-A41)	5	=	11	; =	ī	i i	ĵί	1
Intentional self-harm (suicide) (X60-X84,Y87.0)	⇉	6	ថា	6	- 12	, ຜ	5 ہ	ά
Chronic liver disease and cirrhosis (K70,K73-K74)	12	12	13	12	`	0	c	•
Essential (primary) hypertension and				ì) J	14	ऊं
hypertensive renal disease (I10,I12)	င်	14	· 1	: 7)	ćć	7 :	1
Assault (homicide) (X85-Y09,Y87.1)	14	햐	C	i 	ď	5	<u>э</u> .	1 :
Aortic aneruysm and dissection (I71)	슔	ಚ	15	ŭ	!	ŀ	7	
Human immunodeficiency virus (HIV) disease			1			w	i	1
(B20-B24)	į	ļ	`	1	1	Ć		
Certain conditions originating in the perinatal					ю	l	!	14
period (P00-P96)	1	1	l	ļ	c			
Congenital malformations, deformations and			1	l	11	1	1	
chromosomal abnormalities (400-435)								

Rank is based on number of deaths.

--- Not one of the 15 leading causes of death for this population.

--- Not one of the 15 leading causes of death for this population.

Age-adjusted rates per 100,000 U.S. standard population based on year 2000 standard.

Race and Hispanic origin are reported separately on the death certificate. Persons of Hispanic origin may be of any race.

Data for Hispanic persons are not tabulated separately by race; data for non-Hispanic persons are tabulated by race.

Data for Hispanic origin should be interpreted with caution because of inconsistencies reporting Hispanic origin on death certificates

and on censuses and surveys.
Source: National Vital Statistics System (NVSS), CDC, NCHS.