

## Minority Health Disparities in Pennsylvania Mortality (2016):

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Please keep in mind that, as you digest the data provided, many factors influence health outcomes. Where one lives, works and plays impacts one's health and quality of life. Interrelationships among the social determinants of health (SDOH), such as income, education, housing and transportation, all contribute to a community's chances to thrive.

### **Black residents had significantly higher age-adjusted death rates than whites for:**

- Total deaths
- Cardiovascular disease
- Heart disease
- Total cancers
- External cause of death, injury and accidents
- Cerebrovascular diseases
- Infectious and parasitic diseases
- Genitourinary system
- Diabetes
- Nephritis, nephrotic syndrome and nephrosis
- Renal failure
- Homicide
- Firearm related injuries
- Septicemia
- Homicide (firearm discharge)
- Perinatal conditions
- Hypertension and hypertensive renal disease
- Viral disease
- HIV
- Viral hepatitis
- Anemias
- Fire, smoke and flames (accidental)
- Asthma
- Cancer of lung and bronchus
- Cancer of prostate
- Cancer of female breast
- Cancer of colon and rectum
- Cancer of pancreas
- Cancer of liver and intrahepatic bile duct
- Cancer of corpus/uterus, NOS
- Cancer, myeloma
- Cancer of stomach

### **Hispanic residents had significantly higher age-adjusted death rates than whites for:**

- Homicide
- Homicide (firearm discharge)
- Viral disease
- Perinatal conditions
- HIV
- Viral hepatitis
- Cancer of cervix uteri

### **Asian/Pacific Islander residents had significantly higher age-adjusted death rates than whites for:**

- Cancer of liver and intrahepatic bile duct

### **Data Highlights**

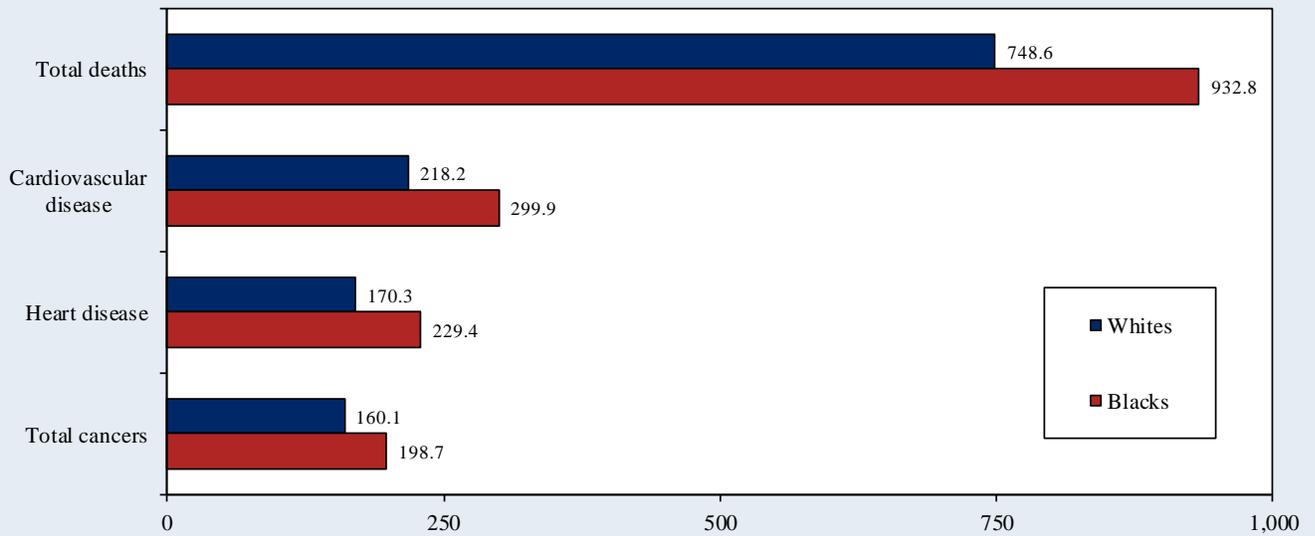
**Black:** In 2016, the age-adjusted rate per 100,000 for total deaths in Pennsylvania was 25 percent higher for blacks (932.8) compared to whites (748.6). The homicide rate for black residents (27.6), compared to whites (2.3), was 12 times higher. In addition, the homicide with firearm discharge rate for black residents (23.3) was 18 times higher than the rate for whites (1.3). The death rate for HIV among black residents (6.3) was 16 times higher than the rate for whites (0.4). The death rate for viral disease among black residents (10.0) was five times higher than the rate for whites (2.1). The death rate among blacks for perinatal conditions (12.7) was over four times higher than the rate for whites (2.9). The death rate for viral hepatitis (3.4) was over three times higher than the rate for whites (1.0). The death rates for prostate cancer (42.3); infectious and parasitic diseases (37.3); firearm related injuries (26.5); hypertension and hypertensive renal disease (11.2); myeloma (6.7); stomach cancer (5.1); anemias (3.2); fire, smoke and flames (2.0); and asthma (1.6) among blacks were at least twice the rates among whites.

**Hispanic:** The 2016 age-adjusted death rate per 100,000 for HIV (4.2) among Hispanic residents was 11 times higher than the rate among whites (0.4). The deaths rates among Hispanic residents for viral hepatitis (3.9) and viral disease (8.6) were four times higher than the rates among whites (1.0 and 2.1, respectively). The death rates for homicide with firearm discharge (4.3) and cancer of the cervix uteri (5.6) among Hispanic residents were three times higher than the rate among whites (1.3 and 1.8, respectively). The homicide rate (5.6) and the death rate for perinatal conditions (6.4) for Hispanic residents were at least twice the rates for whites (2.3 and 2.9, respectively).

**Asian/Pacific Islander:** In 2016, the age-adjusted death rate per 100,000 for cancer of the liver and intrahepatic bile duct among Asian/Pacific Islanders (12.2) was twice the rate among whites (5.7).

## Death Rates, 2016

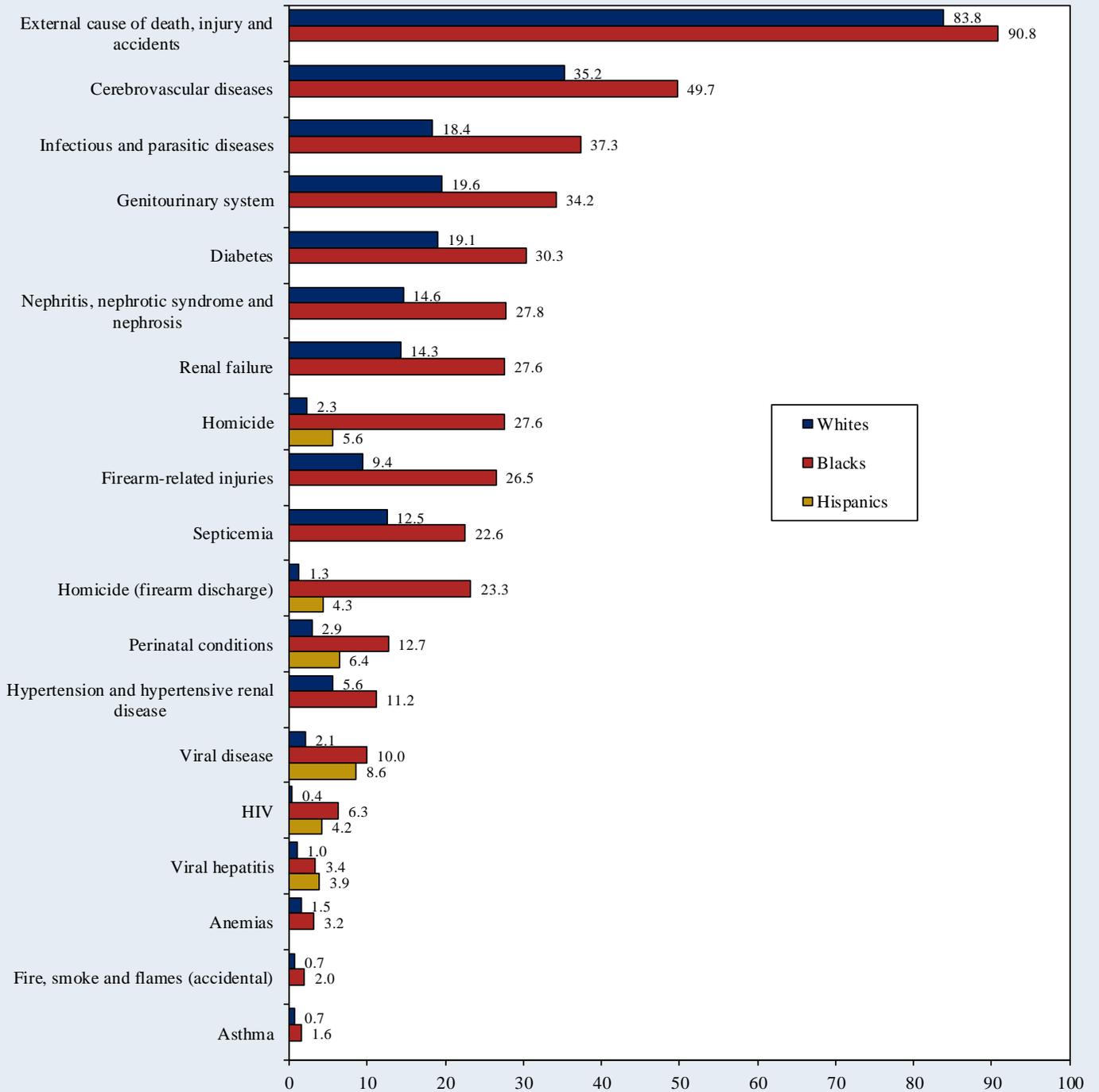
### Significant Differences Compared to White Pa. Residents



NOTE: Rates are age-adjusted per 100,000 using the 2000 U.S. standard million population. Starting in 2013, race of decedent was derived from multiple race selections. A person is multiracial if they identify as more than one race. Prior to 2013, race of decedent was derived from a single race designation.  
 SOURCE: Pennsylvania Department of Health, Pennsylvania Certificates of Death

## Death Rates, 2016

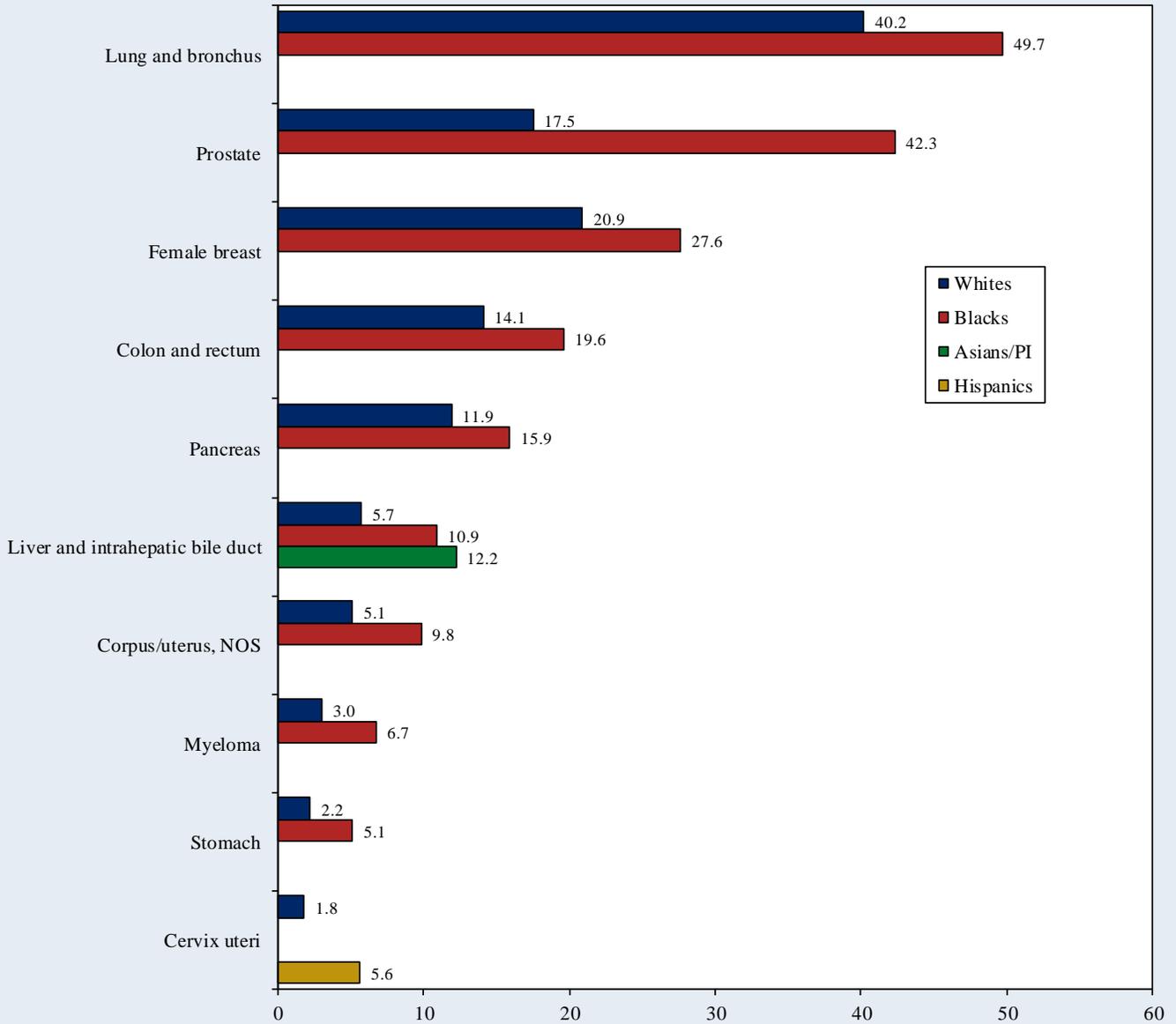
### Significant Differences Compared to White Pa. Residents



NOTE: Rates are age-adjusted per 100,000 using the 2000 U.S. standard million population. Starting in 2013, race of decedent was derived from multiple race selections. A person is multiracial if they identify as more than one race. Prior to 2013, race of decedent was derived from a single race designation.  
 SOURCE: Pennsylvania Department of Health, Pennsylvania Certificates of Death

## Cancer Death Rates, 2016

### Significant Differences Compared to White Pa. Residents



NOTE: Rates are age-adjusted per 100,000 using the 2000 U.S. standard million population. Starting in 2013, race of decedent was derived from multiple race selections. A person is multiracial if they identify as more than one race. Prior to 2013, race of decedent was derived from a single race designation.  
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For additional death statistics, please visit the [EDDIE](#) system.