

2019 South Dakota Vital Statistics Report: A State and County Comparison of Leading Health Indicators

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Preface

2019 South Dakota Vital Statistics Report: A State and County Comparison of Leading Health Indicators was prepared by the South Dakota Department of Health.

This report contains state and county leading health indicators for vital statistics. The report is divided into eight main sections: Overview, Natality, Infant Mortality, Mortality, Marriage and Divorce, Infectious Disease, and Health Status Profiles. Each section contains written analysis plus tables and figures. There is also a technical notes section that provides additional information regarding the sources of data, data limitations, geographic allocation, populations, rates, and definitions. Reading this section before reading the county profiles may provide the answers to questions in advance.

Race Allocation

Race is assigned based on standards set forth by the National Center for Health Statistics and the US Census Bureau in order for South Dakota's race data to be comparable to other areas. Race data in this report are categorized in the following manner:

- White, non-Hispanic
- American Indian, non-Hispanic
- Black, non-Hispanic
- Asian, non-Hispanic
- Pacific Islander, non-Hispanic
- Hispanic
- Multi-racial, non-Hispanic

In other words, if more than one of the first five races is reported, the race is categorized as "Multi-racial, non-Hispanic." Due to space constraints and small numbers, some of these race

categories are grouped into an "Other" category in this report.

Any questions concerning the data, or request for additional statistics, may be directed to the following agency within the South Dakota Department of Health.

Office of Health Statistics
615 East 4th St.
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Phone: (605) 773-3361
Internet: <http://doh.sd.gov/statistics/>

For specific information or questions on Infectious Disease contact:

Office of Disease Prevention
615 East 4th St.
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Overview

<u>Resident Live Births</u>	
Number of Live Births	11,448
Rate per 1,000 Population	12.9
<u>Infant Deaths</u>	
Number of Infant Deaths	80
Rate per 1,000 Live Births	7.0
<u>Resident Deaths</u>	
Number of Resident Deaths	8,273
Rate per 100,000 Population	935.2
<u>Fetal Deaths</u>	
Number of Fetal Deaths	69
Rate per 1,000 Live Births + Fetal Deaths	6.0
<u>Marriages</u>	
Number of Marriages	5,403
Rate per 1,000 Population	6.1
<u>Divorces</u>	
Number of Divorces	2,308
Rate per 1,000 Population	2.6

This report contains selected health statistics that are widely used by the Department of Health, other government agencies, and the public. This information has proven to be useful in determining trends in health status, for planning health care services and for making decisions about public health programs. It also fulfills diverse requirements in the business community and academic research.

Vital statistics data are compiled and maintained under the direction of the Director of the Health Statistics Office (HSO). The data are analyzed by staff from the HSO and can be found in the following sections: Natality, Infant Mortality, Mortality, Marriage and Divorce, and Health Status Profiles. When referring to divorce throughout this report, please note that annulments are included in the Divorce category. Induced Abortion data are now a separate report available online July 1 of each year.

Infectious disease data are collected, compiled, and analyzed within the Office of Disease Prevention. Data on communicable diseases can be found in the Infectious Disease section of the report.

Quick References

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The contacts listed in the Preface welcome suggestions for additional changes that would make the next compilation even more useful to those involved in improving the health of South Dakotans.

Table 1
South Dakota Vital Statistics by County, 2019

	Births		Deaths		Infant Deaths		Fetal Deaths		Marriages		Divorces	
	Number	Rate	Number	Rate	Number	Rate	Number	Rate	Number	Rate	Number	Rate
South Dakota	11,448	12.9	8,273	935.2	80	7.0	69	6.0	5,403	6.1	2,308	2.6
County												
Aurora	39	14.2	32	1,163.2	*	*	*	*	14	5.1	4	1.5
Beadle	284	15.4	205	1,110.9	*	*	*	*	94	5.1	60	3.3
Bennett	47	14.0	32	951.0	*	*	*	*	13	3.9	4	1.2
Bon Homme	59	8.5	92	1,333.1	*	*	*	*	35	5.1	7	1.0
Brookings	410	11.7	202	575.9	*	*	*	*	190	5.4	78	2.2
Brown	464	11.9	337	867.7	*	*	*	*	190	4.9	111	2.9
Brule	73	13.8	64	1,208.2	*	*	*	*	34	6.4	12	2.3
Buffalo	40	20.4	20	1,019.4	*	*	*	*	*	*	*	*
Butte	120	11.5	131	1,256.1	*	*	*	*	64	6.1	23	2.2
Campbell	12	8.7	16	1,162.8	*	*	*	*	3	2.2	*	*
Charles Mix	138	14.9	107	1,151.5	*	*	*	*	52	5.6	13	1.4
Clark	66	17.7	41	1,097.4	*	*	*	*	21	5.6	6	1.6
Clay	141	10.0	97	689.4	*	*	*	*	79	5.6	35	2.5
Codington	297	10.6	270	964.0	*	*	3	10.0	194	6.9	78	2.8
Corson	99	24.2	50	1,223.7	*	*	*	*	10	2.4	*	*
Custer	72	8.0	111	1,237.2	*	*	*	*	178	19.8	30	3.3
Davison	249	12.6	237	1,198.5	*	*	3	11.9	114	5.8	56	2.8
Day	48	8.8	68	1,253.7	*	*	*	*	22	4.1	14	2.6
Deuel	53	12.2	44	1,011.3	*	*	*	*	24	5.5	8	1.8
Dewey	119	20.2	59	1,001.4	*	*	*	*	12	2.0	*	*
Douglas	49	16.8	44	1,506.3	*	*	*	*	15	5.1	6	2.1
Edmunds	48	12.5	34	888.0	*	*	*	*	17	4.4	8	2.1
Fall River	45	6.7	123	1,832.3	*	*	*	*	44	6.6	31	4.6
Faulk	33	14.4	29	1,261.4	*	*	*	*	9	3.9	*	*
Grant	76	10.8	98	1,389.7	*	*	*	*	32	4.5	12	1.7
Gregory	48	11.5	57	1,362.0	*	*	*	*	15	3.6	11	2.6
Haakon	21	11.1	25	1,316.5	*	*	*	*	5	2.6	5	2.6
Hamlin	127	20.6	74	1,200.5	*	*	*	*	34	5.5	16	2.6
Hand	31	9.7	38	1,190.8	*	*	*	*	23	7.2	5	1.6
Hanson	45	13.0	24	695.0	*	*	*	*	26	7.5	8	2.3
Harding	11	8.5	6	462.2	*	*	*	*	6	4.6	*	*
Hughes	218	12.4	202	1,152.6	3	13.8	*	*	77	4.4	49	2.8
Hutchinson	110	15.1	112	1,536.1	*	*	*	*	35	4.8	10	1.4

Table 1 (continued)
South Dakota Vital Statistics by County, 2019

County	Births		Deaths		Infant Deaths		Fetal Deaths		Marriages		Divorces	
	Number	Rate	Number	Rate	Number	Rate	Number	Rate	Number	Rate	Number	Rate
Hyde	18	13.8	26	1,998.5	*	*	*	*	8	6.1	*	*
Jackson	63	18.8	21	628.0	*	*	*	*	14	4.2	3	0.9
Jerauld	20	9.9	38	1,887.7	*	*	*	*	7	3.5	*	*
Jones	7	7.8	8	885.9	*	*	*	*	6	6.6	*	*
Kingsbury	52	10.5	56	1,133.8	*	*	*	*	19	3.8	7	1.4
Lake	119	9.3	86	672.0	*	*	*	*	58	4.5	28	2.2
Lawrence	213	8.2	228	882.2	*	*	*	*	378	14.6	80	3.1
Lincoln	813	13.3	303	495.7	*	*	7	8.5	299	4.9	152	2.5
Lyman	54	14.3	33	872.8	*	*	3	52.6	20	5.3	3	0.8
McCook	83	14.9	83	1,485.9	*	*	*	*	18	3.2	9	1.6
McPherson	24	10.1	41	1,723.4	*	*	*	*	13	5.5	3	1.3
Marshall	68	13.8	37	749.7	*	*	*	*	21	4.3	5	1.0
Meade	245	8.6	242	854.2	*	*	*	*	265	9.4	90	3.2
Mellette	30	14.6	24	1,164.5	*	*	*	*	12	5.8	*	*
Miner	22	9.9	33	1,489.2	*	*	*	*	8	3.6	4	1.8
Minnehaha	2,789	14.4	1,588	822.2	33	11.8	12	4.3	1,227	6.4	599	3.1
Moody	93	14.1	57	866.8	*	*	*	*	40	6.1	10	1.5
Oglala Lakota	256	18.1	136	959.3	3	11.7	3	11.6	5	0.4	*	*
Pennington	1,451	12.8	1,081	950.1	5	3.4	9	6.2	751	6.6	416	3.7
Perkins	42	14.7	42	1,466.0	*	*	*	*	15	5.2	*	*
Potter	22	10.2	25	1,161.2	*	*	*	*	9	4.2	5	2.3
Roberts	166	16.0	116	1,116.0	*	*	3	17.8	67	6.4	20	1.9
Sanborn	32	13.7	27	1,151.9	*	*	*	*	5	2.1	8	3.4
Spink	85	13.3	66	1,035.1	*	*	*	*	27	4.2	9	1.4
Stanley	29	9.4	23	742.4	*	*	*	*	19	6.1	8	2.6
Sully	17	12.2	8	575.1	*	*	*	*	6	4.3	*	*
Todd	235	23.1	87	854.9	*	*	*	*	16	1.6	*	*
Tripp	84	15.4	87	1,599.0	*	*	*	*	30	5.5	8	1.5
Turner	92	11.0	93	1,109.3	*	*	*	*	73	8.7	15	1.8
Union	180	11.3	145	910.1	*	*	*	*	110	6.9	38	2.4
Walworth	71	13.1	59	1,085.6	*	*	*	*	21	3.9	8	1.5
Yankton	247	10.8	273	1,196.6	3	12.1	*	*	149	6.5	62	2.7
Ziebach	34	12.3	19	689.4	*	*	*	*	4	1.5	*	*

Note: Births, deaths, infant deaths, and fetal deaths are by county of residence; marriages and divorces are by county of occurrence. Birth, marriage, and divorce rates are per 1,000 population. Death rates are per 100,000 population. Infant mortality rates are per 1,000 live births. Fetal mortality rates are per 1,000 live births plus fetal deaths.

*Department of Health policy prohibits publishing vital events in cells with less than three events at a county level.

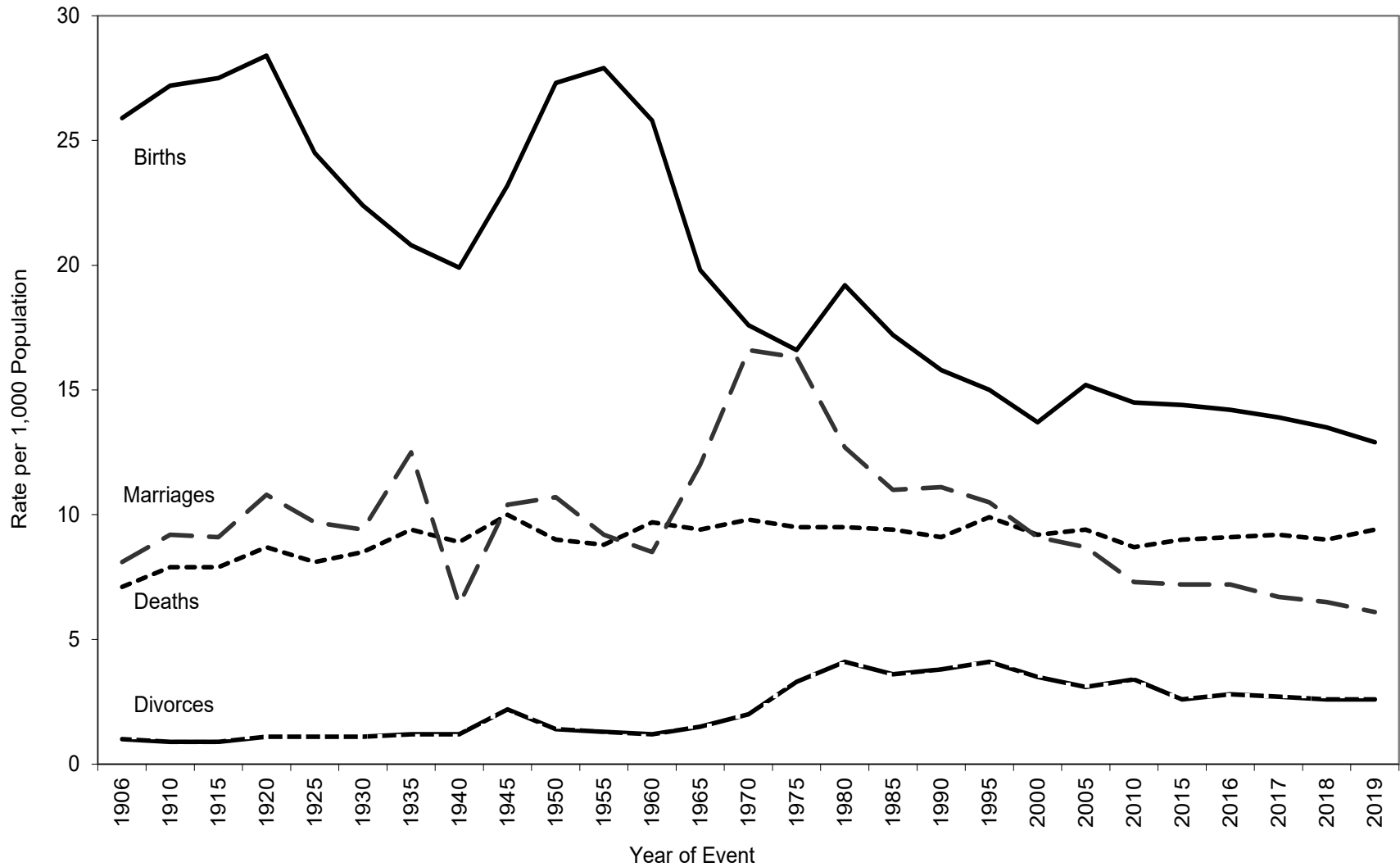
Source: South Dakota Department of Health, Office Health Statistics

**Table 2
Selected Records in Vital Statistics,
South Dakota, 2019**

NATALITY			
Oldest Father:	69	Oldest Mother:	51
Youngest Father:	15	Youngest Mother:	14
Smallest Live Birth:	1 lb. 2 oz.		
Largest Live Birth:	12 lbs. 2 oz.		
Most Popular Names for Infants			
<u>Boy's Names</u>	<u>Number</u>	<u>Girl's Names</u>	<u>Number</u>
Liam	62	Harper	55
Oliver	51	Emma	53
Asher	41	Ava	49
Hudson	39	Olivia	42
Lincoln	39	Charlotte	40
Wyatt	39	Amelia	36
Jack	38	Nora	35
Elijah	36	Evelyn	34
Noah	36	Sophia	30
Theodore	35	Mila	27
MORTALITY			
Oldest Male Decedent:	106	Oldest Female Decedent:	108
DIVORCE			
Longest Duration of a Marriage Ending in a Divorce:	57 Years		

Source: South Dakota Department of Health, Office of Health Statistics

Figure 1
Birth, Death, Marriage, and Divorce Rates for
South Dakota, 1906-2019



Source: South Dakota Department of Health, Office of Health Statistics

Table 3
South Dakota Resident Births by Resident County and Year of Birth, 2010-2019

	Year of Birth									
	2019	2018	2017	2016	2015	2014	2013	2012	2011	2010
Total	11,448	11,890	12,128	12,270	12,323	12,281	12,243	12,092	11,834	11,795
County										
Aurora	39	41	36	49	33	42	40	30	39	29
Beadle	284	284	273	347	297	366	337	327	294	274
Bennett	47	55	61	65	71	72	69	69	76	70
Bon Homme	59	77	64	68	76	56	57	77	62	67
Brookings	410	435	451	414	471	406	430	404	385	379
Brown	464	508	510	557	492	482	512	476	485	467
Brule	73	62	78	71	69	77	70	84	69	74
Buffalo	40	22	47	52	42	53	58	47	57	49
Butte	120	146	131	135	100	142	133	120	136	114
Campbell	12	14	14	8	13	15	12	9	8	16
Charles Mix	138	156	168	164	156	174	151	161	157	156
Clark	66	66	66	65	61	67	51	43	52	48
Clay	141	114	155	147	145	143	166	151	152	138
Codington	297	326	336	370	381	372	410	376	372	375
Corson	99	91	101	101	89	86	93	87	84	78
Custer	72	63	78	69	86	65	71	66	77	85
Davison	249	263	227	257	242	271	263	264	262	258
Day	48	72	62	50	73	56	52	76	59	68
Deuel	53	53	53	64	44	47	46	46	48	51
Dewey	119	138	154	163	148	153	148	151	144	118
Douglas	49	41	44	46	43	40	33	37	36	30
Edmunds	48	34	43	46	48	53	46	46	47	34
Fall River	45	44	51	60	76	55	63	61	49	55
Faulk	33	32	38	31	32	38	23	28	28	24
Grant	76	80	87	84	74	97	80	83	69	81
Gregory	48	50	52	58	50	62	45	44	42	50
Haakon	21	14	26	19	26	17	20	18	23	23
Hamlin	127	125	110	111	121	118	124	127	107	102
Hand	31	35	44	39	24	42	38	28	36	46
Hanson	45	38	42	39	36	49	56	51	44	55
Harding	11	19	15	16	21	20	17	14	9	15
Hughes	218	246	221	233	249	229	255	230	237	225
Hutchinson	110	115	117	120	120	102	107	86	72	81

Table 3 (continued)
South Dakota Resident Births by Resident County and Year of Birth, 2010-2019

County	Year of Birth									
	2019	2018	2017	2016	2015	2014	2013	2012	2011	2010
Hyde	18	14	18	20	15	14	19	9	15	12
Jackson	63	73	92	81	67	71	78	69	68	75
Jerauld	20	24	18	20	16	32	24	23	24	29
Jones	7	17	9	13	11	9	10	10	11	10
Kingsbury	52	71	67	67	64	66	61	54	71	51
Lake	119	128	131	133	134	122	140	128	133	128
Lawrence	213	202	241	241	220	245	230	240	213	252
Lincoln	813	829	846	810	751	766	753	852	781	808
Lyman	54	74	63	82	74	71	69	60	76	72
McCook	83	85	90	68	80	81	75	74	66	80
McPherson	24	24	18	27	22	30	24	25	24	18
Marshall	68	66	73	74	70	72	62	56	60	50
Meade	245	261	258	269	304	318	320	327	314	334
Mellette	30	33	45	44	40	35	37	27	27	38
Miner	22	29	27	21	32	22	28	20	24	19
Minnehaha	2,789	2,890	2,908	2,936	3,046	2,947	2,863	2,811	2,779	2,749
Moody	93	81	87	91	93	93	93	93	86	89
Oglala Lakota	256	261	321	284	337	312	352	350	344	370
Pennington	1,451	1,541	1,466	1,470	1,536	1,540	1,596	1,532	1,502	1,549
Perkins	42	33	37	40	33	35	40	30	29	32
Potter	22	24	15	28	24	24	20	25	27	24
Roberts	166	167	164	168	181	177	201	176	187	159
Sanborn	32	32	33	39	39	37	35	34	28	24
Spink	85	84	82	85	67	69	80	91	72	78
Stanley	29	44	29	42	45	39	35	36	43	41
Sully	17	16	24	16	11	15	17	13	18	18
Todd	235	230	256	260	274	279	250	288	313	242
Tripp	84	88	84	79	71	71	65	66	70	61
Turner	92	101	103	75	104	81	86	89	89	101
Union	180	166	191	163	169	140	150	178	169	179
Walworth	71	66	88	61	86	85	70	66	69	56
Yankton	247	253	269	318	266	281	253	275	246	258
Ziebach	34	24	19	27	32	35	31	48	38	54

Note: Failure of births to add to the total is due to county not stated.
Source: South Dakota Department of Health, Office of Health Statistics

Table 4
South Dakota Resident Deaths by Resident County and Year of Death, 2010-2019

	Year of Death									
	2019	2018	2017	2016	2015	2014	2013	2012	2011	2010
Total	8,273	7,971	7,991	7,838	7,724	7,500	7,079	7,283	7,271	7,087
County										
Aurora	32	37	31	20	24	28	32	29	29	26
Beadle	205	188	177	195	205	196	175	182	201	187
Bennett	32	39	42	45	34	32	29	30	31	37
Bon Homme	92	74	88	75	71	77	78	71	69	69
Brookings	202	202	177	202	182	202	183	230	182	165
Brown	337	369	364	376	362	393	399	378	355	396
Brule	64	43	45	60	57	53	50	69	56	47
Buffalo	20	27	20	33	21	17	16	18	18	16
Butte	131	99	121	98	112	102	93	110	123	100
Campbell	16	12	19	13	19	11	10	17	21	11
Charles Mix	107	113	111	113	129	95	83	82	98	99
Clark	41	37	40	47	41	45	50	40	62	56
Clay	97	101	110	105	101	100	101	101	89	105
Codington	270	240	248	241	235	264	224	229	239	237
Corson	50	51	52	51	47	37	52	43	44	40
Custer	111	100	96	110	92	85	77	88	82	82
Davison	237	235	217	224	210	241	179	213	205	190
Day	68	87	86	76	69	66	73	76	86	65
Deuel	44	50	53	47	48	37	39	38	43	36
Dewey	59	57	59	52	72	68	68	65	48	56
Douglas	44	45	36	42	45	47	38	39	58	50
Edmunds	34	48	45	43	40	39	44	55	50	45
Fall River	123	116	122	113	120	130	118	111	113	104
Faulk	29	35	27	31	40	28	34	27	23	28
Grant	98	83	87	91	89	86	106	66	72	66
Gregory	57	63	56	59	64	64	63	72	58	74
Haakon	25	26	30	22	29	23	35	26	27	22
Hamlin	74	61	55	73	59	61	68	76	78	60
Hand	38	52	41	48	49	41	55	38	41	43
Hanson	24	17	33	22	20	34	21	11	24	22
Harding	6	4	12	8	*	11	4	8	11	12
Hughes	202	159	163	148	154	137	135	124	147	136
Hutchinson	112	111	110	115	119	118	106	106	111	113

Table 4 (continued)
South Dakota Resident Deaths by Resident County and Year of Death, 2010-2019

County	Year of Death									
	2019	2018	2017	2016	2015	2014	2013	2012	2011	2010
Hyde	26	15	29	28	21	15	14	27	15	20
Jackson	21	29	44	37	37	34	34	34	35	35
Jerauld	38	31	30	26	25	28	18	38	32	27
Jones	8	12	16	8	10	9	9	10	16	5
Kingsbury	56	59	68	68	75	69	77	58	73	79
Lake	86	122	129	126	118	110	105	110	101	113
Lawrence	228	255	249	235	240	225	226	240	201	208
Lincoln	303	271	279	259	230	207	181	201	216	181
Lyman	33	45	31	39	41	32	24	42	46	28
McCook	83	68	63	73	85	83	73	80	68	74
McPherson	41	28	33	40	35	43	41	34	37	33
Marshall	37	39	39	63	39	49	47	56	59	73
Meade	242	220	222	193	185	200	190	180	165	157
Mellette	24	32	38	28	26	19	19	24	25	25
Miner	33	35	30	38	34	28	34	27	37	38
Minnehaha	1,588	1,508	1,437	1,382	1,408	1,277	1,256	1,232	1,301	1,273
Moody	57	68	62	48	54	58	53	53	49	57
Oglala Lakota	136	150	164	163	149	112	124	130	109	131
Pennington	1,081	948	972	902	883	832	743	796	795	758
Perkins	42	34	44	41	39	51	39	38	57	48
Potter	25	30	34	39	40	34	29	44	42	28
Roberts	116	121	113	112	106	126	104	141	103	113
Sanborn	27	31	22	29	25	33	35	32	34	18
Spink	66	76	76	83	76	67	84	84	73	72
Stanley	23	12	22	23	19	27	14	17	22	18
Sully	8	16	12	6	11	5	13	13	8	10
Todd	87	109	89	94	85	87	101	98	81	68
Tripp	87	63	78	82	73	73	67	72	66	81
Turner	93	106	119	108	109	124	92	95	105	90
Union	145	122	138	121	116	137	92	119	107	120
Walworth	59	81	68	89	94	92	79	79	77	76
Yankton	273	240	249	240	254	221	207	199	211	211
Ziebach	19	14	19	17	20	12	12	11	11	24

Note: Failure of deaths to add to the total is due to unknown resident county deaths not being shown.
 *Department of Health policy prohibits publishing vital events in cells with less than three events at a county level.
 Source: South Dakota Department of Health, Office of Health Statistics

Table 5
Marriages Occurring in South Dakota by County of Occurrence and Year of Marriage, 2010-2019

	Year of Marriage									
	2019	2018	2017	2016	2015	2014	2013	2012	2011	2010
Total	5,403	5,757	5,862	6,271	6,195	6,040	5,919	6,236	6,145	5,939
County										
Aurora	14	20	12	15	19	10	9	18	17	8
Beadle	94	98	90	120	117	143	135	148	147	138
Bennett	13	11	14	22	21	16	18	21	33	23
Bon Homme	35	37	32	36	34	36	35	54	47	51
Brookings	190	197	227	228	217	240	227	210	178	194
Brown	190	240	252	271	273	238	221	239	239	224
Brule	34	36	40	34	56	45	54	57	46	48
Buffalo	*	*	4	3	7	4	3	6	*	3
Butte	64	60	68	66	78	90	81	80	89	77
Campbell	3	*	5	4	6	8	6	8	6	7
Charles Mix	52	49	41	52	47	36	42	46	58	42
Clark	21	14	23	23	20	27	22	18	21	12
Clay	79	68	110	79	61	71	67	77	86	75
Codington	194	172	180	203	200	207	219	224	268	236
Corson	10	13	11	17	25	25	20	22	30	19
Custer	178	161	174	156	194	181	162	152	137	131
Davison	114	114	115	133	136	120	127	139	156	153
Day	22	29	29	26	34	34	31	40	29	26
Deuel	24	35	34	45	31	38	36	36	31	31
Dewey	12	10	15	24	19	15	15	18	15	7
Douglas	15	20	17	23	20	21	18	20	20	21
Edmunds	17	20	21	24	18	12	19	16	20	17
Fall River	44	42	55	53	66	68	63	60	62	52
Faulk	9	12	9	8	6	15	13	12	20	11
Grant	32	39	40	46	49	52	60	60	67	58
Gregory	15	28	31	41	19	26	19	16	36	30
Haakon	5	8	11	8	9	9	10	17	8	5
Hamlin	34	28	25	33	32	33	31	40	25	37
Hand	23	11	13	19	22	28	12	13	24	20
Hanson	26	18	20	21	15	17	15	6	12	15
Harding	6	5	8	10	7	7	3	9	5	11
Hughes	77	87	122	116	123	122	116	106	109	98
Hutchinson	35	31	30	36	23	39	29	39	33	34

Table 5 (continued)
Marriages Occurring in South Dakota by County of Occurrence and Year of Marriage, 2010-2019

County	Year of Marriage									
	2019	2018	2017	2016	2015	2014	2013	2012	2011	2010
Hyde	8	4	7	4	3	3	3	9	7	6
Jackson	14	9	13	11	11	15	14	11	14	18
Jerauld	7	8	*	6	5	10	15	7	10	10
Jones	6	4	3	6	5	*	6	3	6	5
Kingsbury	19	23	10	28	19	14	22	22	27	31
Lake	58	61	71	83	74	76	83	89	64	81
Lawrence	378	491	459	450	474	448	482	487	466	454
Lincoln	299	325	287	218	167	178	196	155	147	168
Lyman	20	25	14	22	22	17	19	14	16	21
McCook	18	27	31	24	30	31	21	36	24	24
McPherson	13	15	14	8	11	10	7	9	9	7
Marshall	21	37	25	37	28	23	31	33	20	33
Meade	265	252	253	261	321	238	264	204	216	218
Mellette	12	21	23	29	30	19	17	29	21	30
Miner	8	10	13	9	6	9	11	9	14	16
Minnehaha	1,227	1,323	1,373	1,522	1,529	1,494	1,367	1,492	1,398	1,321
Moody	40	38	29	22	36	26	40	46	43	37
Oglala Lakota	5	6	5	6	10	13	8	4	6	6
Pennington	751	780	737	832	786	774	768	863	893	891
Perkins	15	12	11	19	20	19	20	22	16	13
Potter	9	13	8	17	7	18	18	12	18	8
Roberts	67	76	86	91	91	77	85	116	100	104
Sanborn	5	9	10	13	10	10	8	13	7	8
Spink	27	37	32	29	32	29	20	22	33	24
Stanley	19	25	27	24	14	13	18	24	25	20
Sully	6	4	5	6	5	6	4	3	5	*
Todd	16	20	22	14	12	11	13	11	15	19
Tripp	30	24	30	34	28	33	28	36	25	34
Turner	73	73	43	47	45	55	51	34	38	44
Union	110	114	130	175	157	148	146	169	151	189
Walworth	21	15	31	39	26	37	30	32	50	26
Yankton	149	156	181	183	171	149	162	184	180	155
Ziebach	4	3	*	7	6	*	4	9	5	3

Note: *Department of Health policy prohibits publishing vital events in cells with less than three events at a county level.
Source: South Dakota Department of Health, Office of Health Statistics

Table 6
Divorces Occurring in South Dakota by County of Occurrence and Year of Divorce, 2010-2019

	Year of Divorce									
	2019	2018	2017	2016	2015	2014	2013	2012	2011	2010
Total	2,308	2,265	2,340	2,400	2,252	2,374	2,450	2,550	2,694	2,774
County										
Aurora	4	*	7	3	4	5	5	7	6	4
Beadle	60	56	51	48	55	67	52	57	70	78
Bennett	4	3	4	4	3	3	*	4	*	*
Bon Homme	7	13	15	15	15	16	9	15	10	14
Brookings	78	69	66	66	83	57	79	85	93	91
Brown	111	99	125	108	86	86	119	127	138	146
Brule	12	12	14	14	16	19	21	13	17	10
Buffalo	*	*	*	*	*	*	*	*	*	*
Butte	23	25	35	38	35	42	35	35	31	40
Campbell	*	*	*	*	*	*	4	5	*	5
Charles Mix	13	16	10	7	12	11	5	11	12	13
Clark	6	*	5	10	8	9	9	*	8	17
Clay	35	23	27	32	38	40	39	50	36	35
Codington	78	71	87	91	73	92	103	79	96	125
Corson	*	*	4	4	5	*	3	3	*	5
Custer	30	29	31	29	30	21	20	13	32	31
Davison	56	60	51	60	47	58	49	63	68	68
Day	14	11	13	12	11	11	8	11	10	12
Deuel	8	5	10	10	4	13	15	12	13	12
Dewey	*	4	*	*	4	*	4	3	6	4
Douglas	6	5	*	5	7	5	*	9	5	5
Edmunds	8	5	6	15	6	10	8	12	12	8
Fall River	31	24	25	29	23	23	35	36	20	30
Faulk	*	*	5	4	*	5	*	5	3	3
Grant	12	18	10	14	16	17	20	19	22	10
Gregory	11	12	13	10	11	8	10	6	6	5
Haakon	5	*	*	10	*	*	5	6	3	6
Hamlin	16	7	13	13	4	3	12	8	14	14
Hand	5	10	*	11	6	5	10	4	10	8
Hanson	8	*	3	*	5	*	4	*	5	*
Harding	*	3	6	*	3	*	4	3	4	*
Hughes	49	52	62	54	49	43	62	58	64	61
Hutchinson	10	7	11	17	9	18	10	9	16	15

Table 6 (continued)
Divorces Occurring in South Dakota by County of Occurrence and Year of Divorce, 2010-2019

County	Year of Divorce									
	2019	2018	2017	2016	2015	2014	2013	2012	2011	2010
Hyde	*	3	*	*	4	4	4	5	3	3
Jackson	3	5	7	3	3	3	*	5	3	3
Jerauld	*	4	7	3	6	3	8	10	14	6
Jones	*	4	*	*	*	5	5	*	5	*
Kingsbury	7	16	12	13	14	7	12	17	10	16
Lake	28	22	39	29	31	21	32	28	22	36
Lawrence	80	79	77	85	74	90	80	94	109	95
Lincoln	152	134	129	139	111	147	143	142	156	128
Lyman	3	3	4	*	3	3	4	6	4	4
McCook	9	5	12	16	15	21	11	17	7	15
McPherson	3	*	5	4	3	5	*	5	6	10
Marshall	5	11	7	13	8	10	11	11	10	13
Meade	90	109	84	77	99	65	83	90	107	83
Mellette	*	*	*	4	4	*	*	3	*	4
Miner	4	6	*	4	4	8	6	5	3	7
Minnehaha	599	591	611	634	586	610	593	591	662	693
Moody	10	13	12	9	15	13	10	16	16	14
Oglala Lakota	*	4	*	*	*	*	*	*	*	*
Pennington	416	423	432	432	406	452	442	481	478	515
Perkins	*	*	*	*	*	*	3	7	*	*
Potter	5	7	5	4	3	5	3	7	*	4
Roberts	20	17	20	9	11	11	18	20	19	18
Sanborn	8	5	*	3	4	5	6	12	7	9
Spink	9	17	14	18	17	23	17	16	17	15
Stanley	8	6	12	14	7	*	5	10	7	14
Sully	*	3	*	8	4	3	*	*	5	5
Todd	*	*	3	5	3	*	*	*	*	3
Tripp	8	12	6	10	11	11	7	20	10	9
Turner	15	21	17	13	20	17	31	27	36	21
Union	38	36	40	35	38	51	61	46	46	46
Walworth	8	5	3	12	8	10	14	9	15	14
Yankton	62	50	52	60	62	65	69	71	73	89
Ziebach	*	*	*	*	*	*	*	*	*	*

Note: *Department of Health policy prohibits publishing vital events in cells with less than three events at a county level.
Source: South Dakota Department of Health, Office of Health Statistics

Natality

An Overview: 2019

Total Resident Live Births	11,448
Crude Birth Rate per 1,000 Population	12.9
Median Live Birth Weight (Grams)	3,369
Low Weight Births (Less than 2,500 grams)	806
Percent Low Birth Weight	7.0%
Mean Age of Mother	28
No Prenatal Care	0.9%

There were 11,448 births to South Dakota residents in 2019, for a crude birth rate of 12.9 per 1,000 South Dakota resident population.

Resident births decreased nearly four percent from 2018 when there were 11,890 births. In 2019, 51.3 percent of the babies born were male and 48.7 percent were female. Racially, white, non-Hispanic births were 51.8 percent male and 48.2 percent female; American Indian, non-Hispanic births were 50.8 percent male, 49.2 percent female.

The low birth weight rate per 1,000 live births increased from 66.6 in 2018 to 70.4 in 2019. This was a 5.7 percent increase from the 2018 low birth weight rate.

Table 7, below, displays the live births and crude birth rates for the United States and South Dakota for the past 15 years. South Dakota's birth rate remains above the national average as shown in this table.

Table 7
Resident Live Births and Crude Birth Rates,
South Dakota and United States, 2005-2019

Year	United States		South Dakota	
	Number	Crude Rate	Number	Crude Rate
2019	3,745,540*	11.4*	11,448	12.9
2018	3,791,712	11.6	11,890	13.5
2017	3,855,500	11.8	12,128	13.9
2016	3,945,875	12.2	12,270	14.2
2015	3,978,497	12.4	12,323	14.4
2014	3,988,076	12.5	12,281	14.4
2013	3,932,181	12.4	12,243	14.5
2012	3,952,841	12.6	12,092	14.5
2011	3,953,590	12.7	11,834	14.4
2010	3,999,386	13.0	11,795	14.5
2009	4,130,665	13.5	11,930	14.7
2008	4,247,694	14.0	12,074	15.0
2007	4,316,223	14.3	12,253	15.4
2006	4,265,555	14.2	11,914	15.1
2005	4,138,349	14.0	11,466	14.7

Note: * 2019 U.S. data are provisional at time of publication.

Crude birth rates are per 1,000 population.

Sources: National Center for Health Statistics

South Dakota Department of Health, Office of Health Statistics

Births by Race

Race is assigned based on standards set forth by the National Center for Health Statistics and the US Census Bureau, in order for South Dakota's race data to be comparable to other areas. All race data in this section are categorized in the following manner:

- white, non-Hispanic
- American Indian, non-Hispanic
- black, non-Hispanic
- multi-racial, non-Hispanic
- Hispanic

The remaining categories (Asian, non-Hispanic, and Pacific Islander, non-Hispanic) are included in the totals but are not necessarily shown specifically in any tables.

Table 8, below, shows the number and percent of resident births by mother's race since 2010. In 2019, the number of births to white, non-Hispanics, American Indian, non-Hispanics, Hispanics, and multi-racial, non-Hispanics decreased by 4.0 percent, 2.2 percent, 2.7 percent, and 8.2 percent respectively. The number of births to black, non-Hispanics, increased by 1.0 percent.

**Table 8
South Dakota Resident Live Births by Mother's Race, 2010-2019**

Births	White, non-Hispanic		American Indian, non-Hispanic		Hispanic		Black, non-Hispanic		Multi-racial, non-Hispanic		Other		Not Stated		
	Year	Num	Num	%	Num	%	Num	%	Num	%	Num	%	Num	%	
2019	11,448	8,149	71.3	1,610	14.1	641	5.6	414	3.6	393	3.4	215	1.9	26	-
2018	11,890	8,487	71.5	1,647	13.9	659	5.6	410	3.5	428	3.6	233	2.0	26	-
2017	12,128	8,612	71.1	1,808	14.9	624	5.1	398	3.3	417	3.4	258	2.1	11	-
2016	12,270	8,830	72.1	1,783	14.6	634	5.2	360	2.9	369	3.0	273	2.2	21	-
2015	12,323	8,824	71.9	1,928	15.7	559	4.6	266	2.2	423	3.4	277	2.3	46	-
2014	12,281	8,901	72.8	1,826	14.9	602	4.9	295	2.4	383	3.1	226	1.8	48	-
2013	12,243	8,909	73.0	1,907	15.6	530	4.3	277	2.3	336	2.8	248	2.0	36	-
2012	12,092	8,822	73.1	1,863	15.4	552	4.6	270	2.2	382	3.2	183	1.5	20	-
2011	11,834	8,669	73.4	1,880	15.9	509	4.3	235	2.0	320	2.7	198	1.7	23	-
2010	11,795	8,827	74.9	1,791	15.2	507	4.3	227	1.9	296	2.5	142	1.2	5	-

Source: South Dakota Department of Health, Office of Health Statistics

Multiple Births

Table 9, below, displays resident multiple births for the last 10 years. The highest number of twins and triplets (or more) were

born in 2016 with 212 sets of twins and seven sets of triplets.

**Table 9
South Dakota Resident Multiple Live Births, 2010-2019**

Year of Birth	Twins	Triplets or More
2019	209	1
2018	210	1
2017	208	4
2016	212	7
2015	187	4
2014	192	4
2013	178	5
2012	175	2
2011	166	2
2010	176	6

Source: South Dakota Department of Health, Office of Health Statistics

Marital Status

In 2019, the majority of women who gave birth, 63.8 percent, were married as displayed in Table 10 below. When looking at the data by race, American

Indian, non-Hispanic women have consistently had the highest percent of births out of wedlock with 85.2 percent in 2019.

Table 10
South Dakota Resident Births Out of Wedlock by Year of Birth and Race, 2010-2019

Year	All Races		White, non-Hispanic		American Indian, non-Hispanic		Hispanic		Black, non-Hispanic		Multi-racial, non-Hispanic		Other	
	Num	%	Num	%	Num	%	Num	%	Num	%	Num	%	Num	%
2019	4,145	36.2	1,954	24.0	1,371	85.2	355	55.4	148	35.7	260	66.2	48	22.3
2018	4,287	36.1	2,008	23.7	1,400	85.0	357	54.3	158	38.5	304	71.0	50	21.5
2017	4,506	37.2	2,155	25.0	1,523	84.2	327	52.5	172	43.2	273	65.5	50	19.4
2016	4,519	36.8	2,505	25.0	1,513	84.9	349	55.1	156	43.3	230	62.3	54	19.8
2015	4,571	37.1	2,213	25.1	1,606	83.5	322	57.6	105	39.5	270	63.8	40	14.4
2014	4,623	37.7	2,303	25.9	1,533	84.2	331	55.0	135	45.8	258	67.4	47	20.8
2013	4,669	38.1	2,370	26.6	1,611	84.7	297	56.3	119	43.0	223	66.4	38	15.3
2012	4,671	38.6	2,393	27.1	1,571	84.5	305	55.4	127	47.0	240	62.8	33	18.0
2011	4,597	38.8	2,340	27.0	1,600	85.2	287	56.4	105	44.7	209	65.3	47	23.7
2010	4,427	37.5	2,377	26.9	1,484	83.1	256	50.5	91	40.1	184	62.4	33	23.2

Note: Failure of races to add to the total is due to races not stated included in the total.

Source: South Dakota Department of Health, Office of Health Statistics

Birth Weight

Table 11, below, indicates that in 2019 the majority of births fell into the 3,000 to 3,499 gram range. This is consistent with data from past years. Of all South Dakota resident live births in 2019, 7.0 percent (806) were low weight births. When looking at race, 6.6 percent of white, non-

Hispanic babies, 7.7 percent of American Indian, non-Hispanic babies, 6.6 percent of Hispanic babies, 11.4 percent of black, non-Hispanic babies, and 6.6 multi-racial, non-Hispanic babies were low birth weight in 2019. Table 12, on the next page, compares the birth weights of infants for the past 10 years.

Table 11
South Dakota Resident Live Births by Birth Weight and Mother's Race, 2019

Birth Weight (in Grams)	Total		Race of Mother											
			White, non-Hispanic		American Indian, non-Hispanic		Hispanic		Black, non-Hispanic		Multi-racial, non-Hispanic		Other	
	Num	%	Num	%	Num	%	Num	%	Num	%	Num	%	Num	%
<2,000	303	2.6	205	2.5	47	2.9	12	1.9	22	5.3	8	2.0	6	2.8
2,000-2,499	503	4.4	336	4.1	77	4.8	30	4.7	25	6.0	18	4.6	16	7.4
2,500-2,999	1,903	16.6	1,305	16.0	247	15.3	140	21.8	97	23.4	62	15.8	50	23.3
3,000-3,499	4,261	37.2	3,039	37.3	557	34.6	256	39.9	160	38.6	147	37.4	91	42.3
3,500-3,999	3,409	29.8	2,540	31.2	458	28.4	156	24.3	89	21.5	113	28.8	47	21.9
4,000-4,499	926	8.1	638	7.8	187	11.6	38	5.9	17	4.0	39	9.9	4	1.9
4,500+	142	1.2	85	1.0	37	2.3	9	1.4	4	1.0	6	1.5	1	0.5
Not Stated	1	-	1	-	0	-	0	-	0	-	0	-	0	-
Total	11,448	100	8,149	100	1,610	100	641	100	414	100	393	100	215	100
Median birth weight in grams	3,369		3,380		3,393		3,255		3,183		3,391		3,230	
Mean birth weight in grams	3,320		3,331		3,361		3,254		3,118		3,347		3,148	
Modal birth weight in grams	3,260		3,510		3,317		2,910		3,280		3,510		3,280	

Note: Failure of the races to add to the total is due to race not stated in the total birth column.

Source: South Dakota Department of Health, Office of Health Statistics

Table 12
South Dakota Resident Births by Birth Weight and Year of Birth, 2010-2019

Year	Total Births		< 2500 Grams		2500 + Grams		Not Stated	
	Num	%	Num	%	Num	%	Num	%
2019	11,448	100	806	7.0	10,641	93.0	1	-
2018	11,890	100	792	6.7	11,095	93.3	3	-
2017	12,128	100	841	6.9	11,286	93.1	1	-
2016	12,270	100	830	6.8	11,440	93.2	0	-
2015	12,323	100	759	6.2	11,563	93.8	1	-
2014	12,281	100	805	6.6	11,474	93.4	2	-
2013	12,243	100	770	6.3	11,468	93.7	5	-
2012	12,092	100	751	6.2	11,338	93.8	3	-
2011	11,834	100	746	6.3	11,084	93.7	4	-
2010	11,795	100	811	6.9	10,981	93.1	3	-

Source: South Dakota Department of Health, Office of Health Statistics

Table 13, below, compares the low birth weight babies by race of mother. In 2019, there were 541 (6.6%) low birth weight babies born to white, non-Hispanic women. For American Indian, non-Hispanic women there were 124 (7.7%) low birth weight

babies and for black, non-Hispanic women there were 47 (11.4%) low birth weight babies. From 2018 to 2019, there was an increase in low birth weight babies for white, non-Hispanic, American Indian, non-Hispanic, and black, non-Hispanic.

Table 13
South Dakota Resident Low Birth Weight Births by Race of Mother, 2010-2019

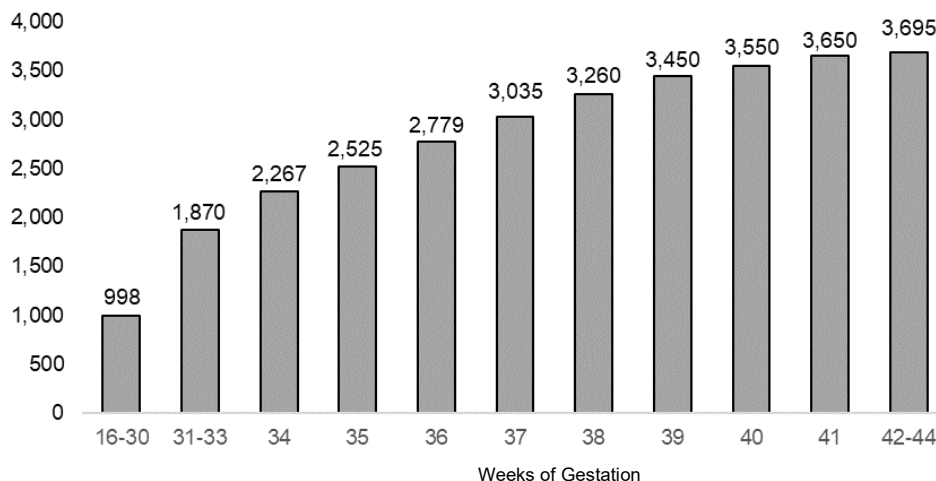
Year	Mother's Race						
	Total	White, non-Hispanic	American Indian, non-Hispanic	Hispanic	Black, non-Hispanic	Multi-racial, non-Hispanic	Other
2019	7.0%	6.6%	7.7%	6.6%	11.4%	6.6%	10.2%
2018	6.7%	6.1%	7.5%	7.6%	8.3%	8.4%	12.9%
2017	6.9%	6.7%	7.9%	5.6%	10.5%	6.0%	10.9%
2016	6.8%	6.2%	8.0%	6.0%	10.3%	7.6%	7.7%
2015	6.2%	5.7%	7.3%	5.5%	6.0%	8.7%	9.0%
2014	6.6%	6.3%	7.1%	7.3%	10.2%	6.0%	6.2%
2013	6.3%	5.9%	6.7%	8.5%	8.3%	6.0%	8.9%
2012	6.2%	5.6%	7.8%	8.0%	10.7%	6.3%	7.7%
2011	6.3%	5.8%	6.9%	6.7%	12.3%	7.5%	10.6%
2010	6.9%	7.0%	6.1%	5.9%	10.1%	6.8%	9.9%

Source: South Dakota Department of Health, Office of Health Statistics

Figure 2, below, shows live births by weeks of gestation and median birth weight in grams for the past five years.

Overall, the longer the weeks of gestation the higher the median birth weight.

Figure 2
South Dakota Live Births by Gestation and Median Birth Weight, 2015-2019



Source: South Dakota Department of Health, Office of Health Statistics

Table 14, below, displays resident births by year of birth and weeks of gestation. In 2019, the majority of births, 64.7 percent,

occurred between 37 to 39 weeks of gestation. This is consistent with the past several years.

Table 14
South Dakota Resident Births by Year of Birth and Weeks of Gestation, 2010-2019

Year	Total		<35		35-36		37-39		40+		Not Stated	
	Num	%	Num	%	Num	%	Num	%	Num	%	Num	%
2019	11,448	100	409	3.6	686	6.0	7,403	64.7	2,946	25.7	4	-
2018	11,890	100	410	3.5	709	6.0	7,442	62.7	3,312	27.9	16	-
2017	12,128	100	432	3.6	693	5.7	7,333	60.5	3,657	30.2	13	-
2016	12,270	100	399	3.3	699	5.7	7,366	60.1	3,796	31.0	10	-
2015	12,323	100	385	3.1	665	5.4	7,268	59.1	3,990	32.4	15	-
2014	12,281	100	416	3.4	622	5.1	7,310	59.7	3,894	31.8	39	-
2013	12,243	100	373	3.1	618	5.1	7,069	57.9	4,157	34.0	26	-
2012	12,092	100	373	3.1	572	4.7	6,734	55.8	4,393	36.4	20	-
2011	11,834	100	379	3.2	561	4.7	6,730	56.9	4,151	35.1	13	-
2010	11,795	100	412	3.5	600	5.1	6,764	57.5	3,996	33.9	23	-

Source: South Dakota Department of Health, Office of Health Statistics

Tobacco Use

Table 15, below, displays the percent of mothers who smoked cigarettes during the past 10 years. In 2019, 15.9 percent stated

they smoked cigarettes three months prior to pregnancy, and 10.7 percent smoked cigarettes anytime during their pregnancy.

Table 15
South Dakota Resident Live Births by Cigarette Smoking Status, 2010-2019

Year	Mother's Cigarette Smoking Status				
	Three Months Prior to Pregnancy	First Trimester	Second Trimester	Third Trimester	Anytime During Pregnancy
2019	15.9%	10.5%	8.2%	7.5%	10.7%
2018	17.2%	11.4%	8.9%	8.1%	11.8%
2017	18.1%	12.2%	9.7%	8.8%	12.6%
2016	19.5%	13.2%	10.1%	9.2%	13.6%
2015	20.9%	13.6%	10.4%	9.5%	14.0%
2014	21.7%	14.4%	11.1%	10.2%	14.8%
2013	22.5%	14.6%	11.4%	10.5%	15.1%
2012	24.0%	16.0%	12.5%	11.4%	16.5%
2011	24.4%	16.1%	12.5%	11.5%	16.9%
2010	24.5%	16.4%	12.8%	11.9%	17.1%

Source: South Dakota Department of Health, Office of Health Statistics

Table 16, on the next page, displays the percent of mothers who smoked cigarettes prior to pregnancy by their cigarette smoking status during pregnancy since 2010.

The largest percentage of women stated they never quit smoking cigarettes during their pregnancy with 44.8 percent in 2019.

Table 16
South Dakota Resident Births to Mothers Who Smoked Cigarettes Prior to Pregnancy by Cigarette Smoking Status During Pregnancy, 2010-2019

Year	Quit before becoming pregnant	Quit before second trimester	Quit before third trimester	Never quit	Stopped at some point during pregnancy, but started again before giving birth
2019	33.4%	13.8%	6.1%	44.8%	1.9%
2018	32.3%	15.0%	6.0%	44.8%	2.1%
2017	32.0%	13.5%	6.4%	45.8%	2.2%
2016	31.5%	15.8%	6.4%	44.3%	2.1%
2015	33.9%	15.0%	6.1%	42.9%	2.2%
2014	32.3%	15.5%	5.5%	44.4%	2.3%
2013	33.8%	14.0%	5.9%	43.5%	2.8%
2012	32.3%	14.4%	6.1%	44.6%	2.6%
2011	32.5%	15.0%	6.0%	43.6%	3.0%
2010	31.2%	14.7%	5.6%	45.1%	3.4%

Source: South Dakota Department of Health, Office of Health Statistics

Mother's Age and Race

Table 17, below, displays that women aged 25 to 29 accounted for the largest percentage of South Dakota resident births in 2019 at 33.2 percent.

The median ages for white, non-Hispanic and black, non-Hispanic were 29 while American Indian, non-Hispanic was 26 and Hispanic was 27.

Table 17
South Dakota Resident Live Births by Mother's Age and Race, 2019

Age of Mother	Total		Race of Mother											
			White, non-Hispanic		American Indian, non-Hispanic		Hispanic		Black, non-Hispanic		Multi-racial, non-Hispanic		Other	
	Num	%	Num	%	Num	%	Num	%	Num	%	Num	%	Num	%
Less than 18	147	1.3	39	0.5	71	4.4	23	3.6	4	1.0	9	2.3	1	0.5
18-19 Years	393	3.4	146	1.8	155	9.6	40	6.2	9	2.2	35	8.9	8	3.7
20-24 Years	2,197	19.2	1,353	16.6	462	28.7	158	24.6	70	16.9	102	26.0	47	21.9
25-29 Years	3,801	33.2	2,817	34.6	433	26.9	219	34.2	145	35.0	121	30.8	59	27.4
30-34 Years	3,356	29.3	2,631	32.3	316	19.6	123	19.2	127	30.7	85	21.6	64	29.8
35-39 Years	1,349	11.8	1,017	12.5	149	9.3	66	10.3	49	11.8	37	9.4	28	13.0
40 & over	205	1.8	146	1.8	24	1.5	12	1.9	10	2.4	4	1.0	8	3.7
Total	11,448	100	8,149	100	1,610	100	641	100	414	100	393	100	215	100

Note: Failure of race to add to the total is due to races not stated in the total birth column.
 Source: South Dakota Department of Health, Office of Health Statistics

Table 18, below, displays the mother's age for births in the past 10 years. The largest

percentage of births in this time period were to mothers aged 25-29 years old.

Table 18
South Dakota Resident Live Births by Mother's Age and Year of Birth, 2010-2019

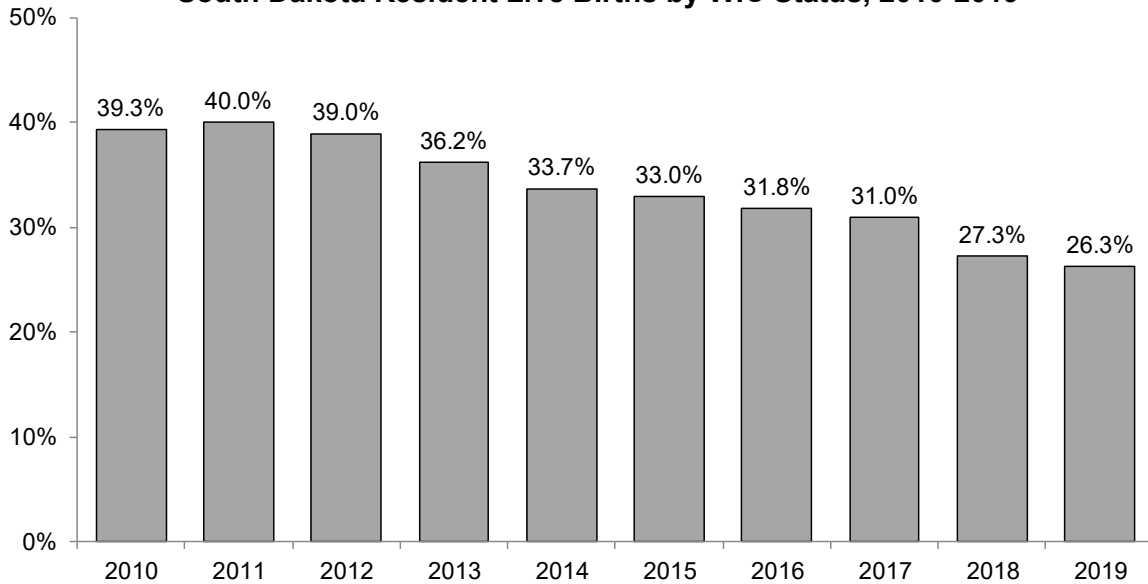
Year	Total Births		Age of Mother													
			< 18		18-19		20-24		25-29		30-34		35-39		40+	
	Num	%	Num	%	Num	%	Num	%	Num	%	Num	%	Num	%	Num	%
2019	11,448	100	147	1.3	393	3.4	2,197	19.2	3,801	33.2	3,356	29.3	1,349	11.8	205	1.8
2018	11,890	100	166	1.4	403	3.4	2,329	19.6	4,016	33.8	3,435	28.9	1,336	11.2	205	1.7
2017	12,128	100	155	1.3	467	3.9	2,493	20.6	4,023	33.2	3,401	28.0	1,342	11.1	247	2.0
2016	12,270	100	208	1.7	481	3.9	2,615	21.3	4,166	34.0	3,312	27.0	1,255	10.2	233	1.9
2015	12,323	100	161	1.3	565	4.6	2,746	22.3	4,172	33.9	3,331	27.0	1,130	9.2	218	1.8
2014	12,281	100	223	1.8	519	4.2	2,778	22.6	4,161	33.9	3,251	26.5	1,148	9.3	201	1.6
2013	12,243	100	224	1.8	598	4.9	2,885	23.6	4,184	34.2	3,027	24.7	1,123	9.2	202	1.6
2012	12,092	100	272	2.2	665	5.5	2,950	24.4	4,105	33.9	2,905	24.0	1,001	8.3	194	1.6
2011	11,834	100	256	2.2	718	6.1	2,877	24.3	4,023	34.0	2,740	23.2	988	8.3	232	2.0
2010	11,795	100	269	2.3	714	6.1	2,989	25.3	4,033	34.2	2,638	22.4	959	8.1	193	1.6

Note: Failure of ages to add to total births is due to mother's age not stated.
 Source: South Dakota Department of Health, Office of Health Statistics

Figure 3, below, displays the percent of South Dakota resident live births on the Special Supplemental Nutrition Program for Women, Infants and Children (WIC) for the

past 10 years. In 2019, 26.3 percent of mothers were on WIC during their pregnancy.

Figure 3
South Dakota Resident Live Births by WIC Status, 2010-2019

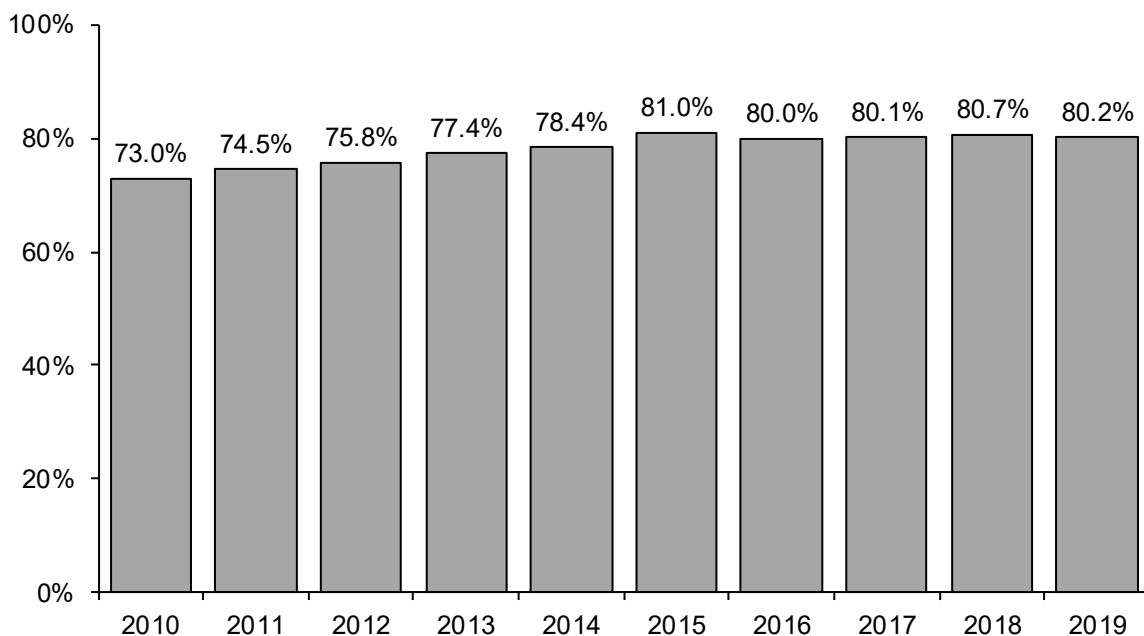


Source: South Dakota Department of Health, Office of Health Statistics

Figure 4, below, displays the percent of mothers breastfeeding at time of hospital discharge. The percent of women who

were breastfeeding at time of discharge decreased slightly from 80.7 percent in 2018 to 80.2 percent in 2019.

Figure 4
South Dakota Resident Live Births by Breastfeeding Status at Time of Discharge, 2010-2019



Source: South Dakota Department of Health, Office of Health Statistics

Table 19, below, displays South Dakota resident teen births (15 to 17 years old) by race from 2010 to 2019. In 2019, the teen birth rate was 8.6, down from the 2018 rate of 9.9.

When looking at race, the white, non-Hispanic teen birth rate was 3.2 compared to a teen birth rate of 30.5 for American Indian, non-Hispanics and 24.7 for Hispanics in 2019.

Table 19
South Dakota Resident Teen Births and Rates by Year and Mother's Race, 2010-2019

Year	Total		White, non-Hispanic		American Indian, non-Hispanic		Hispanic		Black, non-Hispanic		Multi-racial, non-Hispanic		Other	
	Num	Rate	Num	Rate	Num	Rate	Num	Rate	Num	Rate	Num	Rate	Num	Rate
2019	143	8.6	39	3.2	67	30.5	23	24.7	4	10.3	9	13.5	1	3.4
2018	162	9.9	37	3.1	86	40.2	18	21.3	7	19.3	11	18.0	3	7.9
2017	147	9.1	41	3.4	80	37.3	13	16.6	1	3.1	10	16.8	1	3.4
2016	200	12.5	60	5.0	93	44.6	23	29.7	4	13.5	15	24.8	5	16.6
2015	153	9.5	44	3.7	76	36.0	18	23.4	2	7.3	10	16.4	3	10.2
2014	216	13.2	87	7.1	86	41.4	19	23.3	8	19.8	14	23.9	1	3.9
2013	214	13.2	76	6.2	91	43.0	23	31.6	5	14.4	16	28.6	2	9.6
2012	264	16.4	108	8.8	100	48.2	20	32.3	6	18.3	26	47.8	2	9.6
2011	245	15.2	93	7.5	107	52.2	23	37.2	4	16.0	15	28.0	1	4.7
2010	259	15.8	116	9.2	103	48.2	25	42.1	2	7.9	12	24.0	1	5.2

Note: Rates are per 1,000 female population ages 15-17. Failure of races to add to the total is due to races not stated.
Source: South Dakota Department of Health, Office of Health Statistics

Prenatal Care

Table 20, below, shows the number of South Dakota resident live births by when the mothers started prenatal care in 2019.

non-Hispanic mothers, and 65.6 percent of Hispanic mothers. Overall, 0.9 percent failed to obtain prenatal care at all, however this includes 4.0 percent of American Indian, non-Hispanic mothers and 1.5 percent of multi-racial, non-Hispanic mothers.

Just over three-fourths (75.9%) of mothers started care in the first trimester – 82.8 percent of white, non-Hispanic mothers, 52.1 percent of American Indian, non-Hispanic mothers, 62.2 percent of black,

Table 20
South Dakota Resident Live Births by Trimester Prenatal Care Began and Mother's Race, 2019

Trimester Prenatal Care Began	Total		Race of Mother											
			White, non-Hispanic		American Indian, non-Hispanic		Hispanic		Black, non-Hispanic		Multi-racial, non-Hispanic		Other	
	Num	%	Num	%	Num	%	Num	%	Num	%	Num	%	Num	%
First	8,605	75.9	6,723	82.8	808	52.1	417	65.6	253	62.2	240	61.9	145	69.0
Second	2,094	18.5	1,153	14.2	502	32.3	149	23.4	119	29.2	111	28.6	56	26.7
Third	533	4.7	212	2.6	180	11.6	67	10.5	33	8.1	31	8.0	7	3.3
None	105	0.9	30	0.4	62	4.0	3	0.5	2	0.5	6	1.5	2	1.0
Not Stated	111	-	31	-	58	-	5	-	7	-	5	-	5	-
Total	11,448	100	8,149	100	1,610	100	641	100	414	100	393	100	215	100

Note: Failure of the races to add to the total is due to the races not stated contained in the total birth column.
Source: South Dakota Department of Health, Office of Health Statistics

Table 21, below, shows the number of mothers who began prenatal care by trimester for the past 10 years.

Most mothers in all years began prenatal care in their first trimester.

Table 21
South Dakota Resident Live Births by Trimester Prenatal Care Began, 2010-2019

Year	Total		First		Second		Third		No Prenatal Care		Not Stated	
	Num	%	Num	%	Num	%	Num	%	Num	%	Num	%
2019	11,448	100	8,605	75.9	2,094	18.5	533	4.7	105	0.9	111	-
2018	11,890	100	8,864	75.4	2,212	18.8	561	4.8	119	1.0	134	-
2017	12,128	100	8,853	74.0	2,360	19.7	622	5.2	129	1.1	164	-
2016	12,270	100	9,160	75.5	2,248	18.5	629	5.2	98	0.8	135	-
2015	12,323	100	9,128	75.3	2,292	18.9	588	4.9	107	0.9	208	-
2014	12,281	100	9,089	75.4	2,236	18.5	637	5.3	98	0.8	221	-
2013	12,243	100	8,974	74.9	2,353	19.6	588	4.9	73	0.6	255	-
2012	12,092	100	8,596	72.8	2,519	21.3	610	5.2	78	0.7	289	-
2011	11,834	100	8,346	72.0	2,563	22.1	606	5.2	75	0.6	244	-
2010	11,795	100	8,479	73.4	2,418	20.9	581	5.0	79	0.7	238	-

Source: South Dakota Department of Health, Office of Health Statistics

Payment Type

Table 22, below, displays the number of births by payment type for the past five years. In 2019, the majority of births, 61.8

percent, were paid by private insurance. The second highest payment type was Medicaid with 28.6 percent.

Table 22
South Dakota Resident Live Births by Payment Type, 2015-2019

Payment Type	Year									
	2015		2016		2017		2018		2019	
	Num	%	Num	%	Num	%	Num	%	Num	%
Private Insurance	7,259	59.0	7,431	60.7	7,160	59.3	7,183	60.6	7,067	61.8
Medicaid	3,831	31.2	3,806	31.1	3,867	32.1	3,513	29.6	3,273	28.6
Self-Pay	379	3.1	348	2.8	360	3.0	395	3.3	360	3.1
Champus/Tricare	348	2.8	377	3.1	369	3.1	384	3.2	337	2.9
Indian Health Service	386	3.1	204	1.7	246	2.0	311	2.6	309	2.7
Other Government	42	0.3	36	0.3	33	0.3	39	0.3	65	0.6
Other	48	0.4	34	0.3	30	0.2	30	0.3	24	0.2
Not Stated	30	-	34	-	63	-	35	-	13	-

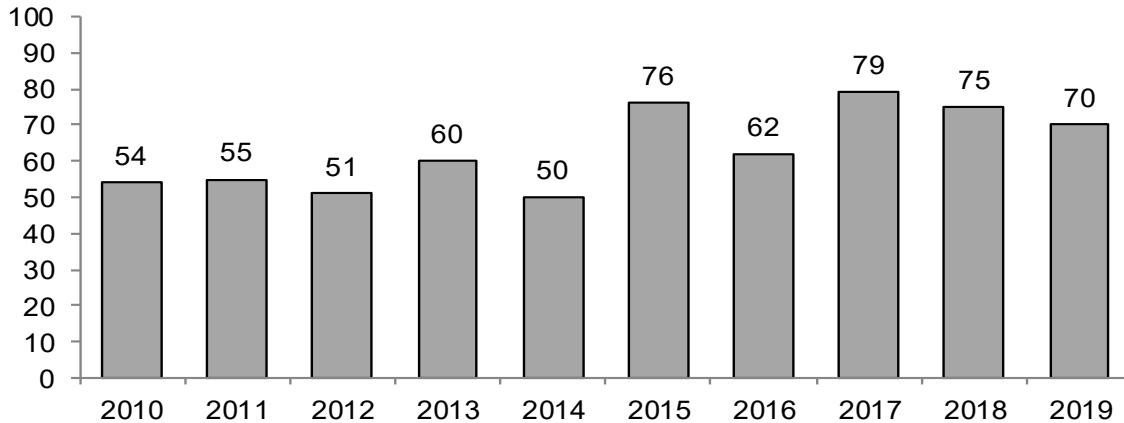
Source: South Dakota Department of Health, Office of Health Statistics

Home Births

Figure 5, on the following page, displays the number of intended home births for South Dakota residents in the past 10 years.

In 2019, intended home births constituted less than one percent (0.6 percent) of South Dakota resident births.

Figure 5
South Dakota Resident Intended Home Births, 2010-2019



Source: South Dakota Department of Health, Office of Health Statistics

Attendant at Birth

Table 23, below, displays South Dakota resident live births by the attendant at birth for the past 10 years. In all years the

majority of attendants at birth have been physicians.

Table 23
South Dakota Resident Live Births by Attendant at Birth, 2010-2019

Year	Total		Physician (MD, Resident, Intern)		Doctor of Osteopathy (DO)		Certified Nurse Midwife (CNM)		Nurse (RN, LPN, NC)		Licensed Certified Nurse Midwife		Other		Not Stated	
	Num	%	Num	%	Num	%	Num	%	Num	%	Num	%	Num	%	Num	%
2019	11,448	100	9,246	80.8	1,187	10.4	841	7.3	65	0.6	38	0.3	70	0.6	1	-
2018	11,890	100	9,699	81.6	1,140	9.6	889	7.5	38	0.3	39	0.3	82	0.7	3	-
2017	12,128	100	9,928	81.9	1,145	9.4	857	7.1	71	0.6	46	0.4	77	0.6	4	-
2016	12,270	100	10,400	84.8	904	7.4	811	6.6	55	0.4	35	0.3	47	0.4	3	-
2015	12,323	100	10,630	86.3	669	5.4	844	6.8	66	0.5	53	0.4	52	0.4	0	-
2014	12,281	100	10,604	86.4	687	5.6	792	6.5	59	0.5	55	0.4	43	0.4	2	-
2013	12,243	100	10,560	87.3	569	4.7	770	6.4	60	0.5	63	0.5	81	0.7	140	-
2012	12,092	100	10,573	88.5	491	4.1	755	6.3	42	0.4	32	0.3	57	0.5	142	-
2011	11,834	100	10,471	88.5	423	3.6	699	5.9	148	1.3	29	0.2	60	0.5	4	-
2010	11,795	100	10,342	87.7	617	5.2	711	6.0	39	0.3	24	0.2	53	0.4	9	-

Note: Licensed Certified Nurse Midwives are licensed by the Board of Nursing to deliver out of an institution. Certified Nurse Midwives are those that deliver in a hospital under a physician's license.

Source: South Dakota Department of Health, Office of Health Statistics

Infections Present and/or Treated

Table 24, on the next page, displays resident births by infections present and/or treated during mother's pregnancy for the past five years. The majority of births, 95.2 percent in 2019, had no infections present or treated.

For all five years, chlamydia was the main infection present and/or treated during pregnancy. In 2019, chlamydia infections were present or treated in 2.4 percent of births.

Table 24
South Dakota Resident Live Births by Infections Present and/or Treated
During This Pregnancy and Year of Birth, 2015-2019

	Year of Birth									
	2015		2016		2017		2018		2019	
	Num	%	Num	%	Num	%	Num	%	Num	%
Chlamydia	324	2.6	312	2.5	306	2.5	267	2.2	280	2.4
Genital herpes*	178	1.4	190	1.5	166	1.4	151	1.3	186	1.6
Gonorrhea	54	0.4	52	0.4	64	0.5	66	0.6	77	0.7
Hepatitis C	43	0.3	32	0.3	37	0.3	68	0.6	53	0.5
Hepatitis B	19	0.2	22	0.2	23	0.2	23	0.2	17	0.1
Syphilis	5	0.0	6	0.0	15	0.1	9	0.1	11	0.1
Toxoplasmosis	5	0.0	1	0.0	1	0.0	1	0.0	2	0.0
Cytomegalovirus (CMV)	4	0.0	4	0.0	5	0.0	2	0.0	1	0.0
Rubella	0	0.0	2	0.0	2	0.0	0	0.0	1	0.0
No infections	11,712	95.3	11,688	95.3	11,565	95.4	11,344	95.6	10,893	95.2

Source: South Dakota Department of Health, Office of Health Statistics

Medical History Factors

Table 25, below, lists the medical history factors for South Dakota resident mothers during the past five years.

The most common medical history factor for all five years was the mother had a previous cesarean delivery.

Table 25
South Dakota Resident Live Births by Mother's Medical History Factors
and Year of Birth, 2015-2019

	Year of Birth									
	2015		2016		2017		2018		2019	
	Num	%	Num	%	Num	%	Num	%	Num	%
Mother had a previous cesarean delivery	1,864	15.2	1,739	14.2	1,680	13.9	1,677	14.1	1,577	13.8
Diabetes, gestational	962	7.8	954	7.8	951	7.8	991	8.3	1,006	8.8
Hypertension, gestational	619	5.1	724	5.9	749	6.2	803	6.7	820	7.2
Other previous poor pregnancy outcomes	481	3.9	573	4.7	552	4.6	537	4.6	478	4.2
Previous preterm births	370	3.0	403	3.3	381	3.2	460	3.9	430	3.8
Fertility-enhancing drugs, artificial insemination or intrauterine insemination	132	1.1	177	1.5	178	1.5	152	1.3	179	1.6
Hypertension, pre-pregnancy	169	1.3	154	1.3	155	1.3	167	1.4	163	1.4
Diabetes, pre-existing	104	0.8	119	1.0	141	1.2	118	1.0	106	0.9
Hypertension, eclampsia	36	0.3	72	0.6	75	0.6	74	0.6	96	0.8
Assisted reproductive technology	40	0.3	70	0.6	72	0.6	67	0.6	77	0.7
No medical risk factors for this pregnancy	8,299	68.0	8,204	67.3	8,125	67.5	7,755	65.8	7,533	65.9

Note: Percentages may sum to more than 100 percent because multiple factors may be reported for a single birth.
Source: South Dakota Department of Health, Office of Health Statistics

Apgar Score

The Apgar score was developed by the late Virginia Apgar, M.D., as a standardized mechanism to assess the physical condition of newborns. The score considers five easily identifiable characteristics – heart rate, respiratory effort, muscle tone, reflex, and color.

Each characteristic is assessed and assigned a value from zero to two, with two being optimum. If the total score of these five components is seven or greater, a newborn is considered to be in good to excellent physical condition.

In 2019, 2.4 percent of South Dakota resident infants received five-minute Apgar scores less than seven.

Considering race, 2.4 percent of white, non-Hispanic infants, 1.6 percent of American Indian, non-Hispanic infants, 1.6 percent of

Hispanic infants, 3.7 percent of black, non-Hispanic infants, and 3.3 percent multi-racial, non-Hispanic infants received a five-minute Apgar score less than seven in 2019.

Characteristics of Labor and Delivery

Table 26, below, lists the characteristics of labor and delivery for the past five years reported on South Dakota resident birth certificates. The four most prevalent characteristics in 2019 were epidural or spinal anesthesia with 55.5 percent,

induction of labor with 34.2 percent, augmentation of labor with 31.2 percent, antibiotics during labor with 28.5 percent. Overall characteristics of labor and delivery were present in 82.3 percent of resident births in 2019.

**Table 26
South Dakota Resident Live Births by Characteristics of Labor and Delivery and Year of Birth, 2015-2019**

	Year of Birth									
	2015		2016		2017		2018		2019	
	Num	%	Num	%	Num	%	Num	%	Num	%
Epidural or spinal anesthesia	6,594	53.5	6,861	55.9	6,730	55.4	6,589	55.4	6,358	55.5
Induction of labor	3,219	26.1	3,553	28.9	3,680	30.3	3,851	32.3	3,918	34.2
Augmentation of labor	3,712	30.2	3,754	30.7	3,755	31.0	3,904	33.0	3,574	31.2
Antibiotics during labor	3,394	27.6	3,334	27.2	3,383	27.9	3,298	27.8	3,258	28.5
Steroids (glucocorticoids) for fetal lung maturation received by the mother prior to delivery	369	3.0	643	5.3	769	6.3	873	7.4	975	8.5
Fetal intolerance	583	4.8	686	5.6	660	5.5	667	5.7	764	6.7
Meconium staining of the amniotic fluid	1,125	9.2	835	6.8	1,023	8.5	829	7.0	726	6.4
Non-vertex presentation	500	4.1	568	4.7	545	4.5	551	4.7	531	4.6
Chorioamnionitis diagnosed during labor	158	1.3	144	1.2	149	1.2	136	1.1	149	1.3
None of the above	2,487	20.4	2,410	19.8	2,316	19.2	2,134	18.1	2,022	17.7

Note: Percentages may sum to more than 100 percent because multiple characteristics of labor and delivery may be reported for a single birth.
Source: South Dakota Department of Health, Office of Health Statistics

Obstetric Procedures

Table 27, on the next page, shows obstetric procedures by year of birth for the past five.

years. Tocolysis was the top obstetric procedure used for all years.

Table 27
South Dakota Resident Live Births by Obstetric Procedures and Year of Birth, 2015-2019

	Year of Birth									
	2015		2016		2017		2018		2019	
	Num	%	Num	%	Num	%	Num	%	Num	%
Tocolysis	160	1.3	118	1.0	141	1.2	99	0.8	108	0.9
External cephalic version-failed	36	0.3	38	0.3	33	0.3	36	0.3	50	0.4
Cervical cerclage	26	0.2	40	0.3	42	0.3	40	0.3	30	0.3
External cephalic version-successful	26	0.2	40	0.3	28	0.2	24	0.2	28	0.2
No obstetric procedures	12,052	98.0	12,040	98.1	11,894	98.1	11,697	98.4	11,236	98.2

Note: Percentages may sum to more than 100 percent because multiple obstetric procedures may be reported for a single birth.
Source: South Dakota Department of Health, Office of Health Statistics

Onset of Labor

Table 28, below, displays the complications associated with the onset of labor for the past five years. The primary complication in 2019 associated with onset of labor for

mothers was precipitous labor (< 3 hours). In 2019, 12.7 percent of births had a complication associated with the onset of labor.

Table 28
South Dakota Resident Live Births by Onset of Labor and Year of Birth, 2015-2019

	Year of Birth									
	2015		2016		2017		2018		2019	
	Num	%	Num	%	Num	%	Num	%	Num	%
Precipitous labor (< 3 hours)	653	5.3	676	5.5	812	6.7	1,336	11.2	763	6.7
Premature rupture of membranes	365	3.0	422	3.4	458	3.8	400	3.4	372	3.3
Prolonged labor (20 + hours)	459	3.7	469	3.8	359	3.0	410	3.4	350	3.1
None of the above	10,852	88.2	10,751	87.6	10,543	87.0	9,801	82.5	9,993	87.3

Note: Percentages may sum to more than 100 percent because multiple complications with the onset of labor may be reported for a single birth.
Source: South Dakota Department of Health, Office of Health Statistics

Maternal Complications

Table 29, below, illustrates the maternal complications for the past five years. The highest maternal complication in 2019 was third or fourth degree perineal

laceration with 1.0 percent of births. Overall, maternal complications were present in 1.8 percent of resident births in 2019.

Table 29
South Dakota Resident Live Births by Maternal Complications and Year of Birth, 2015-2019

	Year of Birth									
	2015		2016		2017		2018		2019	
	Num	%	Num	%	Num	%	Num	%	Num	%
Third or fourth degree perineal laceration	115	0.9	119	1.0	111	0.9	102	0.9	111	1.0
Maternal transfusion	42	0.3	43	0.4	48	0.4	60	0.5	51	0.4
Unplanned operating procedure following delivery	45	0.4	38	0.3	38	0.3	49	0.4	41	0.4
Unplanned hysterectomy	7	0.1	3	0.0	4	0.0	12	0.1	9	0.1
Admitted to intensive care	10	0.1	6	0.0	7	0.1	11	0.1	6	0.1
Ruptured uterus	4	0.0	3	0.0	7	0.1	6	0.1	1	0.0
None of the above	12,112	98.3	12,079	98.5	11,930	98.4	11,678	98.2	11,246	98.2

Note: Percentages may sum to more than 100 percent because multiple complications may be reported for a single birth.
Source: South Dakota Department of Health, Office of Health Statistics

Methods of Delivery

Table 30, below, displays the method of delivery for the past five years. Vaginal birth was the primary method of delivery for South Dakota residents for the

past five years. Primary C-section was the second largest method of delivery followed by repeat C-section methods.

Table 30
South Dakota Resident Births by Method of Delivery and Year of Birth, 2015-2019

	2015		2016		2017		2018		2019	
	Num	%	Num	%	Num	%	Num	%	Num	%
Vaginal (Total)	9,157	74.3	9,162	74.7	9,155	75.5	8,964	75.4	8,647	75.5
Vaginal with no previous C-section	8,791	71.3	8,820	71.9	8,787	72.5	8,593	72.3	8,321	72.7
Vaginal after previous C-section	338	2.7	334	2.7	363	3.0	360	3.0	324	2.8
Vaginal (unknown previous types)	28	0.2	8	0.1	5	0.0	11	0.1	2	0.0
C-Section (Total)	3,166	25.7	3,108	25.3	2,973	24.5	2,926	24.6	2,801	24.5
Primary C-section	1,637	13.3	1,700	13.9	1,656	13.7	1,608	13.5	1,548	13.5
Repeat C-section	1,526	12.4	1,405	11.5	1,317	10.9	1,317	11.1	1,253	10.9
C-section (unknown previous types)	3	-	3	-	0	-	1	-	0	-

Source: South Dakota Department of Health, Office of Health Statistics

Table 31, below, displays the method of delivery by fetal presentation. The majority of births, 95.1 percent, were cephalic while 4.0 percent were breech.

When looking at primary C-section births, 21.2 percent were breech while 76.0 percent were cephalic.

Table 31
South Dakota Resident Births by Method of Delivery and Fetal Presentation, 2019

	Total		Cephalic		Breech		Other	
	Num	%	Num	%	Num	%	Num	%
Total	11,448	100	10,889	95.1	459	4.0	100	0.9
Vaginal (Total)	8,647	100	8,564	99.0	43	0.5	40	0.5
Vaginal with no previous C-section	8,321	100	8,243	99.4	41	0.5	37	0.4
Vaginal after previous C-section	324	100	319	98.5	2	0.6	3	0.9
Vaginal (unknown previous types)	2	100	2	0.0	0	-	0	-
C-Section (Total)	2,801	100	2,325	83.0	416	14.9	60	2.1
Primary C-section	1,548	100	1,176	76.0	328	21.2	44	2.8
Repeat C-section	1,253	100	1,149	91.7	88	7.0	16	1.3

Source: South Dakota Department of Health, Office of Health Statistics

Abnormal Conditions of the Newborn

Table 32, on the next page, shows abnormal conditions in newborns for the past five years. In 2019, 12.4 percent of South Dakota resident live birth certificates reported abnormal conditions of the

newborn. Overall, NICU admission was the most frequently reported condition in 2019 followed by assisted ventilation required immediately following delivery.

Table 32

South Dakota Resident Live Births by Abnormal Conditions of Newborn and Year of Birth, 2015-2019

	Year of Birth									
	2015		2016		2017		2018		2019	
	Num	%	Num	%	Num	%	Num	%	Num	%
NICU admission	1,224	9.9	1,241	10.1	1,243	10.3	1,169	9.8	1,154	10.1
Assisted ventilation required immediately following delivery	797	6.5	802	6.5	804	6.6	684	5.8	682	6.0
Antibiotics received by the newborn for suspected neonatal sepsis	628	5.1	596	4.9	580	4.8	495	4.2	475	4.1
Assisted ventilation required for more than 6 hrs	281	2.3	296	2.4	315	2.6	280	2.4	320	2.8
Newborn given surfactant replacement therapy	87	0.7	92	0.7	95	0.8	62	0.5	98	0.9
Seizure or serious neurologic dysfunction	9	0.1	11	0.1	9	0.1	3	0.0	19	0.2
Significant birth injury	13	0.1	12	0.1	13	0.1	18	0.2	11	0.1
None of the above	10,724	87.0	10,666	86.9	10,520	86.8	10,472	88.1	10,024	87.6

Note: Percentages may sum to more than 100 percent because multiple abnormal conditions may be reported for a single birth.

Source: South Dakota Department of Health, Office of Health Statistics

Congenital Anomalies

Table 33, below, displays congenital anomalies for the past five years. In 2019 the most prevalent congenital anomaly was

chromosomal disorder and cleft palate alone followed by cleft lip with or without a cleft palate.

Table 33

South Dakota Resident Births with Reported Congenital Anomalies and Year of Birth, 2015-2019

	Year of Birth									
	2015		2016		2017		2018		2019	
	Num	%	Num	%	Num	%	Num	%	Num	%
Chromosomal disorder	20	0.2	21	0.2	21	0.2	21	0.2	17	0.1
Cleft palate alone	2	0.0	12	0.1	13	0.1	14	0.1	17	0.1
Cleft lip with or without a cleft palate	11	0.1	25	0.2	11	0.1	14	0.1	16	0.1
Down syndrome (Trisomy 21)	8	0.1	15	0.1	20	0.2	13	0.1	16	0.1
Cyanotic congenital heart disease	8	0.1	15	0.1	13	0.1	9	0.1	15	0.1
Other craniofacial abnormality	13	0.1	17	0.1	10	0.1	8	0.1	12	0.1
Hypospadias	6	0.0	17	0.1	12	0.1	11	0.1	11	0.1
Gastroschisis	5	0.0	10	0.1	4	0.0	5	0.0	10	0.1
Congenital diaphragmatic hernia	5	0.0	1	0.0	3	0.0	1	0.0	7	0.1
Meningomyelocele/Spina bifida	5	0.0	6	0.0	5	0.0	6	0.1	4	0.0
Omphalacele	2	0.0	1	0.0	2	0.0	2	0.0	4	0.0
Anencephaly	0	0.0	1	0.0	0	0.0	2	0.0	4	0.0
Limb reduction defect	6	0.0	8	0.1	4	0.0	3	0.0	3	0.0
At least one anomaly	79	0.6	121	1.0	96	0.8	94	0.8	100	0.9
None of the above	12,236	99.4	12,149	99.0	12,029	99.2	11,793	99.2	11,346	99.1

Note: Percentages may sum to more than 100 percent because multiple congenital anomalies may be reported for a single birth.

Source: South Dakota Department of Health, Office of Health Statistics

Infant Mortality

An Overview: 2019

Infant Deaths	
Number	80
Rate per 1,000 Live Births	7.0
Neonatal Deaths	
Number	46
Rate per 1,000 Live Births	4.0
Postneonatal Death	
Number	34
Rate per 1,000 Live Births	3.0

During 2019, there were 80 South Dakota resident infant deaths reported for an infant mortality rate of 7.0 per 1,000 live births. In comparison, there were 70 infant deaths in 2018, with the infant mortality rate of 5.9 per 1,000 live births.

Caution should be used when comparing these annual rates, because the number of South Dakota resident births creates a relatively small denominator to determine infant mortality rates; a small change in the number of infant deaths can result in a relatively large rate change. Infant mortality rates should be monitored over a period of time.

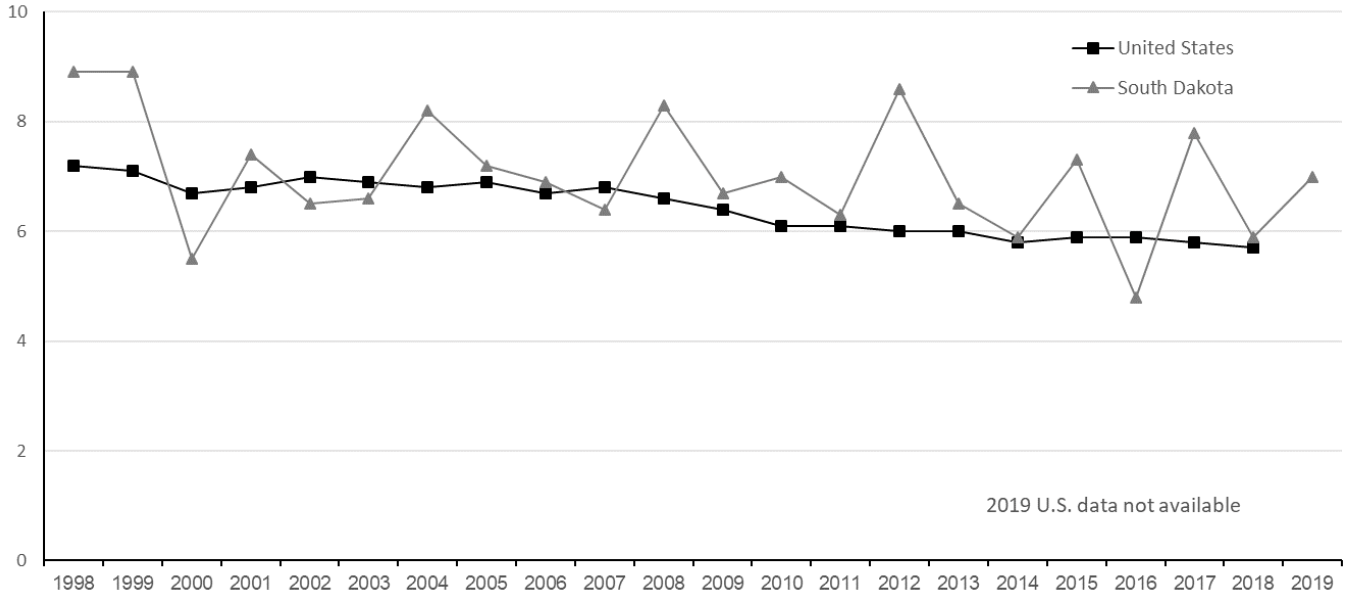
Table 34
Resident Infant Deaths and Infant Mortality Rates,
South Dakota and United States, 1998-2019

Year	United States		South Dakota	
	Number	Mortality Rate	Number	Mortality Rate
2019	*NA	*NA	80	7.0
2018	21,498	5.7	70	5.9
2017	22,341	5.8	94	7.8
2016	23,161	5.9	59	4.8
2015	23,455	5.9	90	7.3
2014	23,215	5.8	73	5.9
2013	23,446	6.0	80	6.5
2012	23,629	6.0	104	8.6
2011	23,985	6.1	75	6.3
2010	24,586	6.1	83	7.0
2009	26,412	6.4	80	6.7
2008	28,059	6.6	100	8.3
2007	29,138	6.8	79	6.4
2006	28,527	6.7	82	6.9
2005	28,440	6.9	82	7.2
2004	27,936	6.8	93	8.2
2003	28,025	6.9	73	6.6
2002	28,034	7.0	70	6.5
2001	27,568	6.8	78	7.4
2000	27,200	6.7	57	5.5
1999	27,937	7.1	94	8.9
1998	28,371	7.2	92	8.9

Note: *U.S. 2019 data were not available at time of publication.
Infant mortality rates are per 1,000 live births.

Source: National Center for Health Statistics
South Dakota Department of Health, Office of Health Statistics

Figure 6
Resident Infant Mortality Rates, South Dakota and United States, 1998-2019

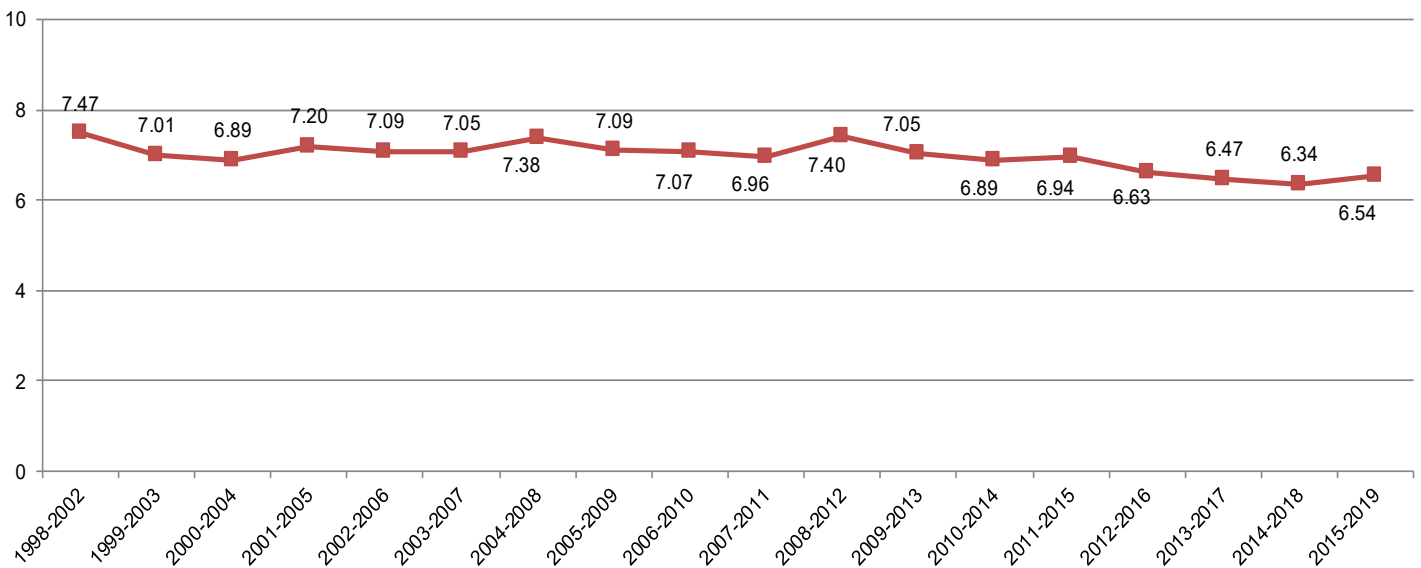


Note: Rate Per 1,000 Live Births. U.S. 2019 data are not available.
 Source: National Center for Health Statistics and South Dakota Department of Health, Office of Health Statistics

Figure 7, below, displays South Dakota's infant mortality rate grouped in five year increments. This graph shows that over

the past 21 years, South Dakota's infant mortality rate has been slowly decreasing.

Figure 7
Resident Infant Mortality Rates for South Dakota, 1998-2019



Note: Rate Per 1,000 Live Births.
 Source: South Dakota Department of Health, Office of Health Statistics

Table 35, below, lists the overall leading causes of infant death in 2015-2019. The leading causes of infant death in 2019 can be broken down as follows: congenital

malformations, 33.8 percent, short gestation and low birth weight with 12.5 percent, and unintentional injuries also with 12.5 percent.

Table 35
South Dakota Resident Leading Causes of Infant Death, 2015-2019

	Total	2015	2016	2017	2018	2019
Total Deaths	393	90	59	94	70	80
Congenital Malformations, Deformations, & Chromosomal Abnormalities (Q00-Q99)	103	19	13	25	19	27
Chromosomal abnormalities (Q90-Q99)	29	6	5	7	5	6
Edward's syndrome (Q91.0-Q91.3)	18	4	2	4	3	5
Congenital malformations of the heart (Q20-Q24)	18	2	3	2	5	6
Congenital malformations of the nervous system (Q00-Q07)	17	2	3	4	4	4
Anencephaly and similar malformations (Q00)	7	0	1	0	2	4
Congenital malformations and deformations of the musculoskeletal system, limbs and integument (Q65-Q85)	13	4	1	3	2	3
Congenital diaphragmatic hernia (Q79.0)	6	3	0	2	0	1
Congenital malformations of the genitourinary system (Q50-Q64)	6	0	0	3	2	1
Congenital malformations of the digestive system (Q35-Q45)	5	1	0	1	1	2
Multiple congenital malformations (Q89.7)	5	1	0	2	0	2
Congenital malformations of the respiratory system (Q30-Q34)	5	2	0	1	0	2
Disorders related to short gestation and low birth weight (P07)	50	11	7	19	3	10
Unintentional Injuries (V01-X59, Y85-Y86)	47	11	8	10	8	10
Accidental suffocation and strangulation in bed (W75)	36	10	6	7	6	7
Ill-Defined and Unknown Causes of Mortality (R96-R99)	28	7	5	3	5	8
Sudden Infant Death Syndrome (R95)	28	11	6	3	7	1
Newborn affected by complications of placenta, cord, and membranes (P02)	15	7	0	2	4	2
Newborn affected by complications involving placenta (P02.0-P02.3)	10	4	0	2	3	1
Newborn affected by maternal complications of pregnancy (P01)	15	4	3	1	3	4
Newborn affected by premature rupture of membranes (P01.1)	7	1	2	1	1	2
Cardiovascular disorders originating in the perinatal period (P29)	12	4	3	3	2	0
Neonatal cardiac dysrhythmia (P29.1)	6	3	2	1	0	0
Respiratory distress of newborn (P22)	9	1	1	4	2	1
Homicide (X85-Y09, Y87.1)	9	2	2	2	2	1
Diseases of the circulatory system (I00-I99)	7	0	1	1	2	3
Atelectasis (P28.0-P28.1)	6	2	0	3	0	1
Bacterial sepsis of newborn (P36)	5	0	0	3	2	0
Intrauterine hypoxia and birth asphyxia (P20-P21)	5	3	0	1	1	0
Influenza and Pneumonia (J09-J18)	5	1	0	2	1	1
All Other Causes	49	7	10	12	9	11

Source: South Dakota Department of Health, Office of Health Statistics

There were 46 neonatal deaths (deaths occurring to infants from birth through 27 days old) for a rate of 4.0 deaths per 1,000 live births. There were 34 postneonatal deaths (deaths occurring to infants 28 days

to 1 year of age) for a rate of 3.0 deaths per 1,000 live births. In comparison, in 2018 neonatal and postneonatal rates were 3.0 and 2.9 per 1,000 live births, respectively.

Infant Mortality by Race

Race is assigned based on standards set forth by the National Center for Health Statistics and the US Census Bureau in order for South Dakota's race data to be comparable to other areas. All race data in this section are categorized in the following manner:

white, non-Hispanic
 American Indian, non-Hispanic
 black, non-Hispanic
 multi-racial, non-Hispanic
 Hispanic

The remaining categories (Asian, non-Hispanic, and Pacific Islander, non-Hispanic) are included in the totals but are not necessarily shown specifically in any tables.

Table 36a, below, indicates that from 2018 to 2019, the number of South Dakota resident infant deaths increased for white, American Indians, and blacks. Table 36b, below, displays infant mortality grouped by five-year increments.

Table 36a
South Dakota Resident Infant Deaths and Mortality Rates by Infant's Race, 2010-2019

Year	Race of Infant										Total	
	White, non-Hispanic		American Indian, non-Hispanic		Black, non-Hispanic		Hispanic		Multi-racial, non-Hispanic			
	Num	Rate	Num	Rate	Num	Rate	Num	Rate	Num	Rate	Num	Rate
2019	50	6.1	18	11.2	5	12.1	4	6.2	2	5.1	80	7.0
2018	44	5.2	14	8.5	2	4.9	4	6.1	5	11.7	70	5.9
2017	61	7.1	15	8.3	7	17.6	3	4.8	6	14.4	94	7.8
2016	33	3.7	21	11.8	3	8.3	1	1.6	1	2.7	59	4.8
2015	52	5.9	24	12.5	3	11.3	3	5.4	7	16.6	90	7.3
2014	36	4.0	23	12.7	3	10.2	4	6.6	7	18.3	73	5.9
2013	46	5.2	22	11.6	4	14.4	2	3.8	4	11.9	80	6.5
2012	53	6.0	24	12.9	3	11.1	9	16.3	10	26.2	104	8.6
2011	42	4.8	24	12.8	3	12.8	0	0.0	4	12.5	75	6.3
2010	52	5.9	19	10.7	1	4.4	3	5.9	7	23.6	83	7.0

Note: Infant mortality rates are per 1,000 live births. Failure of races to add to the total is due to other and unknown races included in the total.
 Source: South Dakota Department of Health, Office of Health Statistics

Table 36b
South Dakota Resident Infant Deaths and Mortality Rates by Infant's Race, Five-Year Increments, 2006-2019

Year	Race of Infant										Total	
	White, non-Hispanic		American Indian, non-Hispanic		Black, non-Hispanic		Hispanic		Multi-racial, non-Hispanic			
	Num	Rate	Num	Rate	Num	Rate	Num	Rate	Num	Rate	Num	Rate
2015-2019	240	5.6	92	10.5	20	10.8	15	4.8	21	10.3	393	6.5
2014-2018	226	5.2	97	10.8	18	10.4	15	4.9	26	12.9	386	6.3
2013-2017	228	5.2	105	11.4	20	12.5	13	4.4	25	13.0	396	6.5
2012-2016	220	5.0	114	12.3	16	10.9	19	6.6	29	15.3	406	6.6
2011-2015	229	5.2	117	12.5	16	11.9	18	6.5	32	17.4	422	6.9
2010-2014	229	5.2	112	12.1	14	10.7	18	6.7	32	18.6	415	6.9
2009-2013	247	5.6	108	11.7	14	11.4	16	6.2	27	16.4	422	7.0
2008-2012	256	5.8	115	12.4	12	10.6	20	8.0	30	18.9	442	7.4
2007-2011	251	5.6	111	11.8	10	9.5	16	6.6	25	17.1	417	7.0
2006-2010	257	5.7	112	11.9	11	11.1	19	8.2	23	16.5	424	7.1

Note: Infant mortality rates are per 1,000 live births. Failure of races to add to the total is due to other and unknown races included in the total.
 Source: South Dakota Department of Health, Office of Health Statistics

When analyzed by race, Table 37a, below, indicates that the South Dakota resident neonatal mortality rate per 1,000 live births increased for all races from 2010 to 2019 except American Indians. The American Indian, non-Hispanic neonatal mortality rate

was the same as the white rate. In Table 37b, below, neonatal mortality is grouped in five-year increments. The five-year neonatal mortality rate increased for the first time since 2008-2012.

Table 37a
South Dakota Resident Neonatal Deaths and Mortality Rates by Infant's Race, 2010-2019

Year	Race of Infant										Total	
	White, non-Hispanic		American Indian, non-Hispanic		Black, non-Hispanic		Hispanic		Multi-racial, non-Hispanic			
	Num	Rate	Num	Rate	Num	Rate	Num	Rate	Num	Rate	Num	Rate
2019	30	3.7	6	3.7	5	12.1	3	4.7	1	2.5	46	4.0
2018	24	2.8	7	4.3	1	2.4	3	4.6	1	2.3	36	3.0
2017	46	5.3	10	5.5	6	15.1	2	3.2	2	4.8	67	5.5
2016	22	2.5	8	4.5	0	0.0	0	0.0	1	2.7	31	2.5
2015	36	4.1	15	7.8	3	11.3	2	3.6	2	4.7	59	4.8
2014	25	2.8	8	4.4	1	3.4	4	6.6	4	10.4	42	3.4
2013	31	3.5	9	4.7	4	14.4	1	1.9	2	6.0	48	3.9
2012	39	4.4	14	7.6	1	3.7	6	10.9	6	15.7	69	5.7
2011	29	3.3	10	5.3	2	8.5	0	0.0	3	9.4	46	3.9
2010	35	4.0	14	7.8	0	0.0	3	5.9	3	10.1	56	4.7

Note: Neonatal mortality rates are per 1,000 live births. Failure of races to add to the total is due to other and unknown races included in the total.

Source: South Dakota Department of Health, Office of Health Statistics

Table 37b
South Dakota Resident Neonatal Deaths and Mortality Rates by Infant's Race, Five-Year Increments, 2006-2019

Year	Race of Infant										Total	
	White, non-Hispanic		American Indian, non-Hispanic		Black, non-Hispanic		Hispanic		Multi-racial, non-Hispanic			
	Num	Rate	Num	Rate	Num	Rate	Num	Rate	Num	Rate	Num	Rate
2015-2019	158	3.7	46	5.3	15	8.1	10	3.2	7	3.5	239	4.0
2014-2018	153	3.5	48	5.4	11	6.4	11	3.6	10	5.0	235	3.9
2013-2017	160	3.6	50	5.4	14	8.8	9	3.1	11	5.7	247	4.0
2012-2016	153	3.5	54	5.8	9	6.1	13	4.5	15	7.9	249	4.1
2011-2015	160	3.6	56	6.0	11	8.2	13	4.7	17	9.2	264	4.3
2010-2014	159	3.6	55	6.0	8	6.1	14	5.2	18	10.5	261	4.3
2009-2013	166	3.8	54	5.8	9	7.4	12	4.7	16	9.8	264	4.4
2008-2012	170	3.8	57	6.1	7	6.2	16	6.4	20	12.6	277	4.6
2007-2011	165	3.7	51	5.4	7	6.7	15	6.2	17	11.6	259	4.3
2006-2010	165	3.7	51	5.4	7	7.1	16	6.9	15	10.8	256	4.3

Note: Neonatal mortality rates are per 1,000 live births. Failure of races to add to the total is due to other and unknown races included in the total.

Source: South Dakota Department of Health, Office of Health Statistics

Table 38a, below, indicates that the postneonatal mortality rate per 1,000 live births increased for white, non-Hispanic infants and American Indian, non-Hispanic infants from 2018 to 2019. The American Indian, non-Hispanic postneonatal mortality rate has been consistently higher than the

white, non-Hispanic rate for each year since 2010. When looking at the data in five-year increments as shown in Table 38b, below, the total postneonatal mortality rate is showing signs of increasing the past couple years.

Table 38a
South Dakota Resident Postneonatal Deaths and Mortality Rates by Infant's Race, 2010-2019

Year	Race of Infant										Total	
	White, non-Hispanic		American Indian, non-Hispanic		Black, non-Hispanic		Hispanic		Multi-racial, non-Hispanic			
	Num	Rate	Num	Rate	Num	Rate	Num	Rate	Num	Rate	Num	Rate
2019	20	2.5	12	7.5	0	0.0	1	1.6	1	2.5	34	3.0
2018	20	2.4	7	4.3	1	2.4	1	1.5	4	9.3	34	2.9
2017	15	1.7	5	2.8	1	2.5	1	1.6	4	9.6	27	2.2
2016	11	1.2	13	7.3	3	8.3	1	1.6	0	0.0	28	2.3
2015	16	1.8	9	4.7	0	0.0	1	1.8	5	11.8	31	2.5
2014	11	1.2	15	8.3	2	6.8	0	0.0	3	7.8	31	2.5
2013	15	1.7	13	6.8	0	0.0	1	1.9	2	6.0	32	2.6
2012	14	1.6	10	5.4	2	7.4	3	5.4	4	10.5	35	2.9
2011	13	1.5	14	7.5	1	4.3	0	0.0	1	3.1	29	2.5
2010	17	1.9	5	2.8	1	4.4	0	0.0	4	13.5	27	2.3

Note: Postneonatal mortality rates are per 1,000 live births. Failure of races to add to the total is due to other and unknown races included in the total.

Source: South Dakota Department of Health, Office of Health Statistics

Table 38b
South Dakota Resident Postneonatal Deaths and Mortality Rates by Infant's Race, Five-Year Increments, 2006-2019

Year	Race of Infant										Total	
	White, non-Hispanic		American Indian, non-Hispanic		Black, non-Hispanic		Hispanic		Multi-racial, non-Hispanic			
	Num	Rate	Num	Rate	Num	Rate	Num	Rate	Num	Rate	Num	Rate
2015-2019	82	1.9	46	5.3	5	2.7	5	1.6	14	6.9	154	2.6
2014-2018	73	1.7	49	5.5	7	4.0	4	1.3	16	7.9	151	2.5
2013-2017	68	1.5	55	6.0	6	3.8	4	1.4	14	7.3	149	2.4
2012-2016	67	1.5	60	6.5	7	4.8	6	2.1	14	7.4	157	2.6
2011-2015	69	1.6	61	6.5	5	3.7	5	1.8	15	8.1	158	2.6
2010-2014	70	1.6	57	6.2	6	4.6	4	1.5	14	8.2	154	2.6
2009-2013	81	1.8	54	5.8	5	4.1	4	1.6	11	6.7	158	2.6
2008-2012	86	1.9	58	6.2	5	4.4	4	1.6	10	6.3	165	2.8
2007-2011	86	1.9	60	6.4	3	2.9	1	0.4	8	5.5	158	2.6
2006-2010	92	2.0	61	6.5	4	4.0	3	1.3	8	5.7	168	2.8

Note: Postneonatal mortality rates are per 1,000 live births. Failure of races to add to the total is due to other and unknown races included in the total.

Source: South Dakota Department of Health, Office of Health Statistics

Table 39, below, shows the leading causes of infant death from 2015 to 2019. The overall leading cause of infant death for South Dakota residents was congenital malformations, deformations, and chromosomal abnormalities, which accounted for 26.2 percent of all infant deaths in South Dakota from 2015 to 2019. The second leading cause of death was disorders related to short gestation and low birth weight with 12.7 percent.

When analyzed by race, the leading cause of death for white, non-Hispanic infants was congenital malformations, deformations, and chromosomal abnormalities with 31.7 percent of all white, non-Hispanic infant deaths. The leading cause of death for American Indian, non-Hispanic infants was unintentional injuries with 21.7 percent. The leading cause of death for black, non-Hispanic infants was disorders related to short gestation and low birth weight with 25.0 percent.

Table 39
South Dakota Resident Infant Deaths by Cause of Death and Race, 2015-2019

	Total		Race									
			White, non-Hispanic		American Indian, non-Hispanic		Black, non-Hispanic		Hispanic		Multi-racial, non-Hispanic	
	Num	Rate	Num	Rate	Num	Rate	Num	Rate	Num	Rate	Num	Rate
Total Deaths	393	6.5	240	5.6	92	10.5	20	10.8	15	4.8	21	10.3
1. Congenital malformations, deformations, & chromosomal abnormalities (Q00-Q99)	103	1.7	76	1.8	10	1.1	4	2.2	8	2.6	2	1.0
Chromosomal abnormalities (Q90-Q99)	29	0.5	21	0.5	1	0.1	1	0.5	5	1.6	0	0.0
Edward's syndrome (Q91.0-Q91.3)	18	0.3	15	0.3	0	0.0	1	0.5	2	0.6	0	0.0
Congenital malformations of the heart (Q20-Q24)	18	0.3	14	0.3	1	0.1	0	0.0	1	0.3	1	0.5
Congenital malformations of the nervous system (Q00-Q07)	17	0.3	12	0.3	3	0.3	1	0.5	0	0.0	1	0.5
Congenital malformations and deformations of the musculoskeletal system, limbs and integument (Q65-Q85)	13	0.2	12	0.3	0	0.0	0	0.0	1	0.3	0	0.0
2. Disorders related to short gestation and low birth weight (P07)	50	0.8	34	0.8	8	0.9	5	2.7	0	0.0	2	1.0
3. Unintentional injuries (V01-X59, Y85-Y86)	47	0.8	22	0.5	20	2.3	0	0.0	0	0.0	5	2.5
Accidental suffocation and strangulation in bed (W75)	36	0.6	20	0.5	14	1.6	0	0.0	0	0.0	2	1.0
T4. Ill-Defined and unknown causes of mortality (R96-R99)	28	0.5	17	0.4	9	1.0	0	0.0	1	0.3	1	0.5
T4. Sudden infant death syndrome (R95)	28	0.5	15	0.3	9	1.0	1	0.6	1	0.3	2	1.0
T6. Newborn affected by complications of placenta, cord and membranes (P02)	15	0.2	7	0.2	7	0.8	1	0.6	0	0.0	0	0.0
Newborn affected by complications involving placenta (P02.0-P02.3)	10	0.2	3	0.1	7	0.8	0	0.0	0	0.0	0	0.0
T6. Newborn affected by maternal complications of pregnancy(P01)	15	0.2	5	0.1	4	0.5	2	1.1	2	0.6	2	1.0
8. Cardiovascular disorders originating in the perinatal period (P29)	12	0.2	8	0.2	2	0.2	2	1.1	0	0.0	0	0.0
T9. Respiratory distress of newborn (P22)	9	0.1	6	0.1	1	0.1	1	0.6	1	0.3	0	0.0
T9. Homicide (X85-Y09, Y87.1)	9	0.1	3	0.1	3	0.3	0	0.0	1	0.3	2	1.0
All Other Causes	77	1.3	47	1.1	19	2.2	4	2.2	1	0.3	5	2.5

Source: South Dakota Department of Health, Office of Health Statistics

Note: Failure of races to add to the total is due to other and unknown races included in the total.

Infant Mortality and Birth Weight

Table 40, below, displays infant mortality rates by birth weight. The highest mortality rate was for babies born who weighed less than 1,000 grams with an infant mortality rate of 447.1, a neonatal mortality rate of 419.8, and a postneonatal mortality rate of

27.3. The highest rates occurred below 2,500 grams, which is considered low birth weight babies. The lowest infant mortality rate occurred in the 4,000-4,499 gram group with 2.0.

Table 40
South Dakota Resident Infant Mortality Rates by Birth Weight, 2015-2019

Birth Weight (in Grams)	Births	Infant Deaths	Infant Mortality Rate	Neonatal Mortality Rate	Postneonatal Mortality Rate
Total	60,059	393	6.5	4.0	2.6
<1,000	293	131	447.1	419.8	27.3
1,000-1,499	351	25	71.2	51.3	19.9
1,500-1,999	815	25	30.7	24.5	6.1
2,000-2,499	2,569	32	12.5	6.6	5.8
2,500-2,999	9,613	52	5.4	1.9	3.5
3,000-3,499	22,374	77	3.4	1.2	2.2
3,500-3,999	18,150	36	2.0	0.7	1.3
4,000-4,499	5,115	10	2.0	0.4	1.6
4,500+	773	2	2.6	0.0	2.6

Note: Infant, neonatal, and postneonatal mortality rates are per 1,000 live births.
Failure of births to add to total is due to not stated birth weights.

Source: South Dakota Department of Health, Office of Health Statistics

Infant Mortality and Prenatal Care

Table 41, below, displays infant mortality rates by prenatal care. The highest infant mortality rate, 19.7, occurred when mothers did not have prenatal care. This is

true for neonatal and postneonatal mortality rates. In comparison, when mothers received prenatal care in the first trimester the infant mortality rate was only 5.3.

Table 41
South Dakota Resident Infant Mortality Rates by Prenatal Care, 2015-2019

Trimester Prenatal Care Began	Births	Infant Deaths	Infant Mortality Rate	Neonatal Mortality Rate	Postneonatal Mortality Rate
Total	60,059	393	6.5	4.0	2.6
First Trimester	44,610	238	5.3	3.4	1.9
Second Trimester	11,206	107	9.5	5.2	4.4
Third Trimester	2,933	20	6.8	3.1	3.8
No Prenatal Care	558	11	19.7	14.3	5.4

Note: Infant mortality rates are per 1,000 live births.

Failure of births and infant deaths to add to the total is due to not stated trimester prenatal care began.

Source: South Dakota Department of Health, Office of Health Statistics

Infant Mortality and Gestation Period

Table 42, below, displays infant mortality rates by gestation period. The highest infant mortality rate occurred to those with less than 25 weeks gestation with a rate of 753.6.

The highest neonatal mortality rate and postneonatal mortality rate both occurred at less than 25 weeks with a rate of 724.6 and 29.0, respectively.

Table 42
South Dakota Resident Infant Mortality Rates by Gestation Period, 2015-2019

Weeks of Gestation	Births	Infant Deaths	Infant Mortality Rate	Neonatal Mortality Rate	Postneonatal Mortality Rate
Total	60,059	393	6.5	4.0	2.6
<25 Weeks	138	104	753.6	724.6	29.0
25-29 Weeks	336	41	122.0	95.2	26.8
30-31 Weeks	273	11	40.3	33.0	7.3
32 Weeks	243	8	32.9	28.8	4.1
33 Weeks	315	8	25.4	19.0	6.3
34 Weeks	730	11	15.1	9.6	5.5
35 Weeks	1,065	9	8.5	6.6	1.9
36 Weeks	2,387	33	13.8	6.3	7.5
37 Weeks	5,489	34	6.2	2.4	3.8
38 Weeks	9,732	42	4.3	1.3	3.0
39 Weeks	21,591	55	2.5	1.0	1.5
40 Weeks	13,139	26	2.0	0.5	1.5
41 Weeks	4,214	8	1.9	0.2	1.7
42+ Weeks	349	2	5.7	2.9	2.9

Note: Infant mortality rates are per 1,000 live births.

Failure of births and infant deaths to add to the total is due to not stated weeks of gestation.

Source: South Dakota Department of Health, Office of Health Statistics

Infant Mortality and Cigarette Use

Table 43, below, displays infant mortality rates by cigarette use of the mother. Mothers who reported they smoked cigarettes while pregnant had an infant

mortality rate of 11.4, while mothers who reported they did not smoke cigarettes while pregnant had an infant mortality rate of 5.7.

Table 43
South Dakota Resident Infant Mortality Rates
by Cigarette Use of Mother During Pregnancy, 2014-2018

Cigarette Use of Mother	Births	Infant Deaths	Infant Mortality Rate	Neonatal Mortality Rate	Postneonatal Mortality Rate
Total	60,059	393	6.5	4.0	2.6
Yes	7,514	86	11.4	5.5	6.0
No	52,323	300	5.7	3.7	2.0

Note: Infant mortality rates are per 1,000 live births.

Failure of births to add to the total is due to 'not stated' cigarette use of the mother.

Source: South Dakota Department of Health, Office of Health Statistics

Infant Mortality and Mother Demographics

The following tables, 44a-44d, compare infant mortality rates among different demographics of the mother, different previous pregnancy histories, different labor and delivery situations, and different post-delivery conditions. The comparison is done using the Chi-Square test. An explanation of this test is given in the Technical Notes section at the end of the report.

The rates denoted with an asterisk are the ones found to illustrate an association with the variables listed in the left column. For example, the test indicates that when there is a change in the education of the mother, there is an associated change with the

infant mortality rate as well as the post-neonatal mortality rate.

However, it should be noted that this test does not consider relationships among multiple variables at the same time. Therefore, dependencies detected by Chi-square analyses may be unrealistic or non-causal. There may be other unseen factors that make the variables appear to be associated. However, if properly used, this test is a very useful tool for the evaluation of associations and can be used as a preliminary analysis of more complex statistical evaluations.

Table 44a
South Dakota Resident Infant Mortality Rates by Demographics of Mother, 2015-2019

	Births	Infant Deaths	Infant Mortality Rate	Neonatal Mortality Rate	Postneonatal Mortality Rate
Education					
11 years or less	7,669	77	10.0*	5.2	4.8*
12+ years	50,542	285	5.6*	3.8	1.9*
Marital Status					
Single	22,028	192	8.7*	5.0*	3.7*
Married	38,011	183	4.8*	3.4*	1.4*
Mother's WIC Status					
No WIC	41,782	233	5.6*	4.0	1.6*
WIC	17,852	139	7.8*	3.9	3.9*
Age					
<20	3,146	21	6.7	3.8	2.9*
20-24	12,380	97	7.8	4.5	3.3*
25-29	20,178	114	5.6	3.7	1.9*
30-34	16,835	91	5.4	3.9	1.5*
35+	7,520	53	7.0	4.3	2.8*
BMI					
Underweight (<18.5)	1,793	17	9.5*	6.7*	2.8*
Recommended (18.5-24.9)	26,911	130	4.8*	3.1*	1.7*
Overweight (25.0-29.9)	15,523	83	5.3*	3.5*	1.8*
Obese (30.0-34.9)	8,301	55	6.6*	3.9*	2.8*
Very Obese (35.0-39.9)	4,162	48	11.5*	7.2*	4.3*
Morbidly Obese (40.0+)	2,806	36	12.8*	7.5*	5.3*
Diabetes					
No Pre-Existing Diabetes	59,399	364	6.1*	3.9	2.2*
Pre-Existing Diabetes	588	9	15.3*	6.8	8.5*
Hepatitis C					
No Hepatitis C	59,766	368	6.2*	3.9*	2.2*
Hepatitis C	233	6	25.8*	12.9*	12.9*
Chlamydia					
No Chlamydia	58,510	354	6.1*	3.9*	2.2*
Chlamydia	1,489	20	13.4*	7.4*	6.0*

Table 44a (continued)
South Dakota Resident Infant Mortality Rates by Demographics of Mother, 2015-2019

	Births	Infant Deaths	Infant Mortality Rate	Neonatal Mortality Rate	Postneonatal Mortality Rate
Payment Source					
Medicaid	18,290	163	8.9*	4.7	4.2*
Private Insurance	36,100	173	4.8*	3.5	1.3*
Self-Pay	1,842	15	8.1*	6.0	2.2*
Indian Health Service	1,456	13	8.9*	4.8	4.1*
Champus/Tricare	1,815	5	2.8*	1.7	1.1*
Other Government	215	2	9.3*	9.3	0.0*
Other	166	1	6.0*	6.0	0.0*

Note: *The Chi-square statistic is significant at the 0.05 level.

Source: South Dakota Department of Health, Office of Health Statistics

Table 44b
South Dakota Resident Infant Mortality Rates by Previous Pregnancy History, 2015-2019

	Births	Infant Deaths	Infant Mortality Rate	Neonatal Mortality Rate	Postneonatal Mortality Rate
Number of Living Children					
0	19,724	115	5.8	4.2	1.7*
1	18,621	111	6.0	4.0	2.0*
2	11,613	67	5.8	3.2	2.6*
3	5,497	44	8.0	4.5	3.5*
4+	4,593	37	8.1	4.4	3.7*
Number of Dead Children					
0	59,212	356	6.0*	3.7*	2.3
1+	824	19	23.1*	21.8*	1.2
Number of Previous Terminations					
0	42,604	223	5.2*	3.2*	2.0*
1	11,742	90	7.7*	5.5*	2.2*
2+	5,681	62	10.9*	6.5*	4.4*
Number of Previous Pregnancies					
0	16,212	79	4.9*	3.1*	1.8*
1	15,775	95	6.0*	4.3*	1.7*
2	11,799	61	5.2*	3.4*	1.8*
3	7,200	63	8.8*	5.3*	3.5*
4	4,031	25	6.2*	3.5*	2.7*
5+	5,002	51	10.2*	5.6*	4.6*
Previous Pre-Term Infant					
No	57,943	348	6.0*	3.8*	2.2*
Yes	2,044	25	12.2*	7.8*	4.4*
Pre-Pregnancy Hypertension					
No	59,179	366	6.2	3.9*	2.3
Yes	808	7	8.7	8.7*	0.0
Gestational Hypertension					
No	56,272	348	6.2	4.0	2.2*
Yes	3,715	25	6.7	3.0	3.8*
Other Poor Previous Pregnancy Outcomes					
No	57,017	331	5.8*	3.6*	2.2
Yes	2,621	41	15.6*	12.2*	3.4
Hepatitis B					
No	59,895	372	6.2	4.0	2.2*
Yes	104	2	19.2	0.0	19.2*
Infertility Treatment					
No	58,875	363	6.2	3.9*	2.3
Yes	1,112	10	9.0	8.1*	0.9
Infertility Treatment – Assisted Reproductive Technology					
No	59,661	368	6.2*	3.9*	2.3
Yes	326	5	15.3*	12.3*	3.1

Note: *The Chi-square statistic is significant at the 0.05 level.

Source: South Dakota Department of Health, Office of Health Statistics

Table 44c
South Dakota Resident Infant Mortality Rates by Labor and Delivery, 2015-2019

	Births	Infant Deaths	Infant Mortality Rate	Neonatal Mortality Rate	Postneonatal Mortality Rate
Tocolysis					
No	59,389	357	6.0*	3.8*	2.2
Yes	626	18	28.8*	24.0*	4.8
Cervical Cerclage					
No	59,836	364	6.1*	3.8*	2.3
Yes	179	11	61.5*	61.5*	0.0
Premature Rupture of Membranes					
No	57,997	311	5.4*	3.1*	2.2
Yes	2,017	64	31.7*	28.3*	3.5
Antibiotics Received by the Mother During Labor					
No	43,358	221	5.1*	3.3*	1.8*
Yes	16,667	155	9.3*	5.7*	3.6*
Non-Vertex Presentation					
No	56,985	302	5.3*	3.0*	2.3
Yes	2,695	73	27.1*	25.6*	1.5
Steroids for Fetal Lung Maturation Received by the Mother Prior to Delivery					
No	56,396	310	5.5*	3.5*	2.0*
Yes	3,629	66	18.2*	11.3*	6.9*
Clinical Chorioamnionitis Diagnosed During Labor – Maternal Temp $\geq 38^{\circ}\text{C}$					
No	59,289	360	6.1*	3.8*	2.3
Yes	736	16	21.7*	21.7*	0.0
Epidural or Spinal Anesthesia During Labor					
No	16,527	152	9.2*	7.0*	2.2
Yes	33,090	126	3.8*	1.8*	2.0
Fetal Presentation					
Cephalic	56,997	290	5.1*	2.8*	2.2
Breech	2,389	75	31.4*	29.7*	1.7
Method of Delivery					
Vaginal	43,312	239	5.5*	3.5*	2.1
Vaginal after previous C-section	1,719	19	11.1*	8.7*	2.3
Primary C-section	8,149	76	9.3*	6.5*	2.8
Repeat C-section	6,818	39	5.7*	2.8*	2.9
Maternal Transfusion					
No	59,792	370	6.2*	3.9*	2.3
Yes	244	6	24.6*	20.5*	4.1
Unplanned Operating Procedure Following Delivery					
No	59,825	362	6.1*	3.8*	2.2*
Yes	211	14	66.4*	56.9*	9.5*

Note: *The Chi-square statistic is significant at the 0.05 level.

Source: South Dakota Department of Health, Office of Health Statistics

Table 44d
South Dakota Resident Infant Mortality Rates by Post Delivery Conditions, 2015-2019

	Births	Infant Deaths	Infant Mortality Rate	Neonatal Mortality Rate	Postneonatal Mortality Rate
Five Minute APGAR Score					
0-7	2,498	214	85.7*	77.7*	8.0*
8	5,589	34	6.1*	2.5*	3.6*
9	48,664	111	2.3*	0.5*	1.8*
10	3,054	7	2.3*	0.3*	2.0*
Ten Minute APGAR Score					
0-2	125	112	896.0*	896.0*	0.0
3-7	354	37	104.5*	98.9*	5.6
8-10	230	6	26.1*	17.4*	8.7
Plurality					
1	57,918	337	5.8*	3.6*	2.2
2+	2,141	39	18.2*	15.4*	2.8
Breastfeeding at the Time of Discharge					
No	11,541	95	8.2*	3.6*	4.6*
Yes	48,087	103	2.1*	0.4*	1.7*
Assisted Ventilation Required Immediately Following Delivery					
No	56,280	258	4.6*	2.7*	1.9*
Yes	3,769	116	30.8*	23.1*	7.7*
Assisted Ventilation for More than Six Hours					
No	58,557	301	5.1*	3.2*	1.9*
Yes	1,492	73	48.9*	33.5*	15.4*
Neonatal Intensive Care Unit Admission					
No	54,018	250	4.6*	3.0*	1.6*
Yes	6,031	124	20.6*	12.8*	7.8*
Newborn Given Surfactant Replacement Therapy					
No	59,615	331	5.6*	3.4*	2.1*
Yes	434	43	99.1*	78.3*	20.7*
Antibiotics Received by the Newborn for Suspected Neonatal Sepsis					
No	57,275	315	5.5*	3.4*	2.1*
Yes	2,774	59	21.3*	14.8*	6.5*
Suspected Chromosomal Disorder					
No	59,943	332	5.5*	3.4*	2.1*
Yes	100	41	410.0*	330.0*	80.0*

Note: *The Chi-square statistic is significant at the 0.05 level.

Source: South Dakota Department of Health, Office of Health Statistics

Mortality

An Overview: 2019	
Total South Dakota Resident Deaths	8,273
Crude Death Rates per 100,000 Population	
South Dakota	935.2
United States (2018)	867.8
Age-Adjusted Death Rates per 100,000 Population	
South Dakota	739.6
United States (2018)	723.6

The remaining categories (Black, non-Hispanic; Asian, non-Hispanic; Pacific Islander, non-Hispanic; Multi-Racial, non-Hispanic; and Hispanic) are included in the totals, but are not shown specifically in any tables.

Table 45, below, displays the deaths, crude death rates, and age-adjusted death rates for the United States and South Dakota residents for the past 17 years.

The total number of South Dakota resident deaths, crude death rate, and age-adjusted death rate all increased in 2019.

Race is assigned based on standards set forth by the National Center for Health Statistics and the US Census Bureau in order for South Dakota's race data to be comparable to other areas. All race data in this section are categorized in the following manner:

white, non-Hispanic
American Indian, non-Hispanic

Table 45
Resident Deaths, Crude Death Rates, and Age-Adjusted Death Rates, South Dakota and United States, 2003-2019

Year	United States			South Dakota		
	Number	Crude Rate	Age-Adjusted Rate	Number	Crude Rate	Age-Adjusted Rate
2019	NA*	NA*	NA*	8,273	935.2	739.6
2018	2,839,205	867.8	723.6	7,971	903.5	715.7
2017	2,813,503	863.8	731.9	7,991	918.9	736.1
2016	2,744,248	849.3	728.8	7,838	905.7	718.6
2015	2,712,630	844.0	733.1	7,724	899.7	714.9
2014	2,626,418	823.7	724.6	7,500	879.1	709.9
2013	2,596,993	821.5	731.9	7,079	837.9	677.4
2012	2,543,279	810.2	732.8	7,283	873.9	706.8
2011	2,515,458	807.3	741.3	7,271	882.3	716.1
2010	2,468,435	799.5	747.0	7,087	870.4	713.4
2009	2,437,163	794.5	749.6	6,913	851.1	688.6
2008	2,471,984	813.0	758.3	7,056	877.0	712.1
2007	2,423,712	803.6	760.2	6,800	853.2	695.1
2006	2,426,264	810.4	776.5	7,038	892.6	732.6
2005	2,448,017	825.9	798.8	7,074	906.8	758.0
2004	2,397,615	816.5	800.8	6,811	879.7	742.3
2003	2,448,288	841.9	832.7	7,109	926.9	787.1

Note: *U.S. 2019 data were not available at publication time.
Crude death rates are per 100,000 population.
Age-adjusted rates are computed with the 2000 standard.

Source: National Center of Health Statistics
South Dakota Department of Health, Office of Health Statistics

Leading Causes of Death

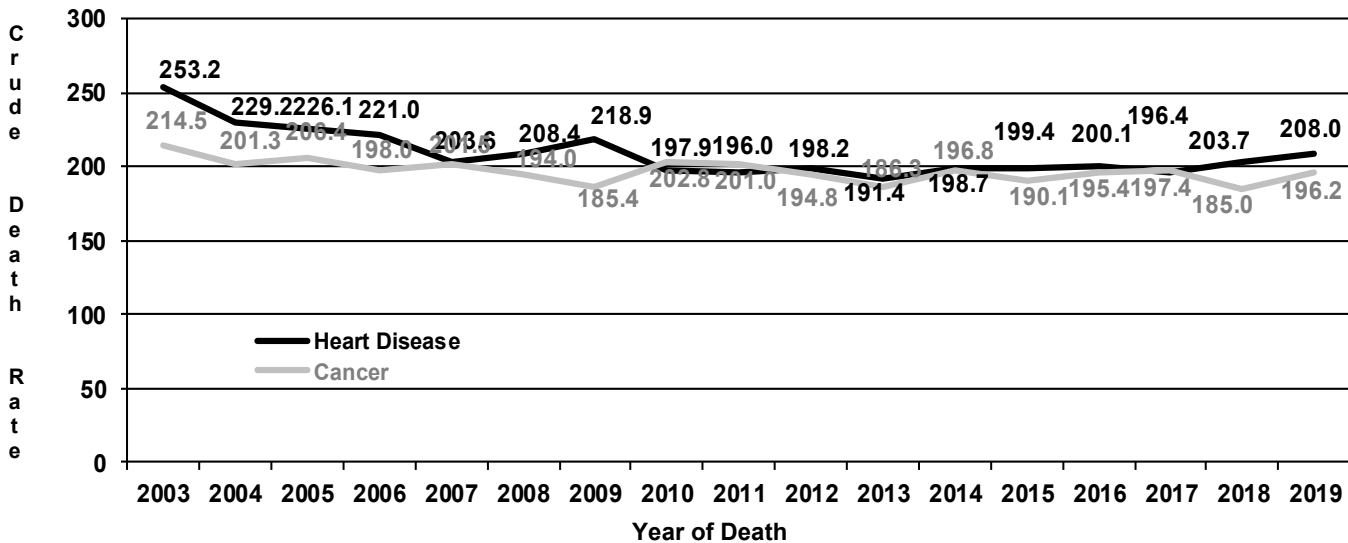
The five leading causes of death in 2019 for South Dakota residents were heart disease, cancer, chronic lower respiratory diseases, unintentional injuries, and Alzheimer's disease.

Heart disease remained the leading cause of death in South Dakota accounting for 22.2 percent of South Dakota's 2019 resident deaths.

Acute myocardial infarction was the leading cause of heart disease deaths during the year, accounting for 34.1 percent of heart disease deaths.

Cancer was the second leading cause of death in 2019 and accounted for 21.0 percent of South Dakota resident deaths, a 2.4 percent increase from 2018.

Figure 8
South Dakota Resident Crude Death Rate Due to Cancer
and Heart Disease by Year of Death, 2003-2019



Note: The crude death rate is calculated using yearly U.S. Census Bureau population estimates for that year.
Source: South Dakota Department of Health, Office of Health Statistics

Figure 8, above, compares the crude death rates of South Dakota resident heart disease and cancer since 2003. From 2018 to 2019 there was an increase in both the heart disease rate and cancer rates.

Chronic lower respiratory disease accounted for 6.3 percent of South Dakota resident deaths and remained the third leading cause of death in 2019.

Unintentional injuries were the fourth leading cause of death and accounted for 6.2 percent of 2019 South Dakota resident deaths and an 8.8 percent increase from 2018. Motor vehicle accidents accounted for 25.4 percent of deaths due to unintentional injury.

Alzheimer's disease was the fifth leading cause of death accounting for 6.0 percent of all South Dakota resident deaths in 2019.

Table 46, below, displays the breakdown of deaths due to unintentional injury, which were the fourth leading cause of deaths among South Dakotans. In 2019, 512 or 6.2 percent of deaths were due to unintentional injuries.

The highest type of motor vehicle death in 2019 was car occupant with 51 deaths. The highest death in the other causes of death due to unintentional injury in 2019 was falls with 203 deaths.

Table 46
South Dakota Resident Leading Causes of Death Due to Unintentional Injuries, 2015-2019

	Total	Year of Death				
		2015	2016	2017	2018	2019
Total Deaths	2,471	467	503	537	452	512
Motor Vehicle Accidents	730	143	135	166	156	130
Car Occupant (V40-V49)	307	70	48	64	74	51
Occupant of Pick-Up Truck or Van (V50-V59)	125	25	28	25	19	28
Pedestrian (V01-V09)	73	10	15	16	21	11
Motorcycle Rider (V20-V29)	65	11	14	13	14	13
Occupant of Special All-Terrain Vehicle (V86)	37	9	9	5	8	6
Occupant of Heavy Transport Vehicle (V60-V69)	13	0	3	6	3	1
All Other Motor Vehicle Accidents	7	2	0	1	3	1
Motor Vehicle Accident with Unspecified Details	103	16	18	36	14	19
Other Causes of Death Due to Unintentional Injury	1,741	324	368	371	296	382
Falls (W00-W19)	914	181	185	196	149	203
Accidental Poisoning (X40-X49)	337	57	67	70	57	86
Accidental Threats to Breathing (excl. drowning) (W75-W84)	117	20	27	28	21	21
Exposure to Smoke, Fire, and Flames (X00-X09)	57	9	10	19	8	11
Accidental Drowning and Submersion (W65-W74, V90, V92)	56	13	10	8	11	14
Exposure to Excessive Natural Cold (X31)	55	5	14	13	13	10
Accidental Discharge of Firearms (W32-W34)	19	5	5	2	7	0
Contact with Agricultural Machinery (W30)	13	3	2	3	5	0
Explosion (W35-W40)	11	0	7	0	1	3
Air Transport Accidents (V95.0-V95.3, V95.8-V95.9, & V96-V97)	10	1	3	1	3	2
Struck by Thrown, Projected, or Falling Object (W20)	7	2	2	1	2	0
Bicyclist Injured in Non-Motor Vehicle Accident (V17-V18)	5	2	1	0	0	2
Pedestrian Injured in Collision with Train (V05)	5	0	0	2	2	1
All Other Causes of Unintentional Injury	135	26	35	28	17	29

Source: South Dakota Department of Health, Office of Health Statistics

Table 47, on the next page, lists South Dakota resident leading causes of death for the last five years. Heart disease and cancer were the leading causes of death in 2019 and for each of the five prior years.

In 2019, causes six through ten were cerebrovascular disease, diabetes, influenza and pneumonia, suicide, and chronic liver disease and cirrhosis.

Chronic lower respiratory disease remained the third leading cause of death followed by unintentional injuries, and Alzheimer's disease for the top 5 causes in 2019.

**Table 47
South Dakota Resident Leading Causes of Death, 2015-2019**

Cause of Death	Total			2015			2016			2017			2018			2019		
	Rank	Deaths	%	Rank	Deaths	%	Rank	Deaths	%	Rank	Deaths	%	Rank	Deaths	%	Rank	Deaths	%
South Dakota (All Deaths)		39,797	100		7,724	100		7,838	100		7,991	100		7,971	100		8,273	100
Heart Disease (I00-I09, I11, I13, I20-I51)	1	8,789	22.1	1	1,712	22.1	1	1,732	22.1	2	1,708	21.4	1	1,797	22.5	1	1,840	22.2
Cancer (C00-C97)	2	8,408	21.1	2	1,632	21.1	2	1,691	21.6	1	1,717	21.5	2	1,632	20.5	2	1,736	21.0
Unintentional Injuries (V01-X59, Y85-Y86)	3	2,471	6.2	4	467	6.0	3	503	6.4	3	537	6.7	4	452	5.7	4	512	6.2
Chronic Lower Respiratory Diseases (J40-J47)	4	2,451	6.2	3	500	6.5	5	427	5.4	4	505	6.3	3	498	6.2	3	521	6.3
Alzheimer's Disease (G30)	5	2,247	5.6	5	421	5.5	4	449	5.7	5	444	5.6	5	437	5.5	5	496	6.0
Cerebrovascular Diseases (I60-I69)	6	1,971	5.0	6	381	4.9	6	420	5.4	6	410	5.1	6	387	4.9	6	373	4.5
Diabetes (E10-E14)	7	1,336	3.4	7	282	3.7	7	253	3.2	7	262	3.3	7	252	3.2	7	287	3.5
Influenza and Pneumonia (J09-J18)	8	1,060	2.7	8	213	2.8	8	195	2.5	8	217	2.7	8	246	3.1	8	189	2.3
Suicide (*U03, X60-X84, Y87.0)	9	879	2.2	9	173	2.2	9	161	2.1	9	192	2.4	10	168	2.1	9	185	2.2
Chronic Liver Disease and Cirrhosis (K70 & K73-K74)	10	786	2.0	10	137	1.8	10	158	2.0	10	152	1.9	9	185	2.3	10	154	1.9
All Other Causes	-	9,399	23.6	-	1,806	23.4	-	1,849	23.6	-	1,847	23.1	-	1,917	24.0		1,980	23.9

Note: Letter/number combinations following cause of death are ICD-10 codes.
Due to rounding disease-specific percentages may not sum to 100.

The asterisks (*) preceding the cause-of-death codes indicate that they are not part of the International Classification of Diseases, Tenth Revision.

Source: South Dakota Department of Health, Office of Health Statistics

Table 48
South Dakota Resident Leading Causes of Death by Race, 2019

Cause of Death	All Races					White, Non-Hispanic					American Indian, Non-Hispanic				
	Rank	Deaths	%	Crude Rate	Age-Adjusted Rate	Rank	Deaths	%	Crude Rate	Age-Adjusted Rate	Rank	Deaths	%	Crude Rate	Age-Adjusted Rate
South Dakota (All Deaths)		8,273	100	935.2	739.6		7,405	100	1,027.0	701.0		688	100	936.3	1,392.2
Heart Disease (I00-I09, I11, I13, I20-I51)	1	1,840	22.2	208.0	158.1	1	1,718	23.2	238.3	156.5	1	98	14.2	133.4	213.3
Cancer (C00-C97)	2	1,736	21.0	196.2	153.3	2	1,615	21.8	224.0	153.0	2(tie)	91	13.2	123.8	203.3
Chronic Lower Respiratory Diseases (J40-J47)	3	521	6.3	58.9	45.1	3	494	6.7	68.5	45.3	7	23	3.3	31.3	59.6
Unintentional Injuries (V01-X59, Y85-Y86)	4	512	6.2	57.9	52.8	5	391	5.3	54.2	43.9	2(tie)	91	13.2	123.8	132.3
Alzheimer's Disease (G30)	5	496	6.0	56.1	40.6	4	486	6.6	67.4	41.5	*	-	-	-	-
Cerebrovascular Diseases (I60-I69)	6	373	4.5	42.2	32.3	6	345	4.7	47.8	31.3	8	21	3.1	28.6	44.4
Diabetes (E10-E14)	7	287	3.5	32.4	26.8	7	223	3.0	30.9	21.3	5	56	8.1	76.2	121.1
Influenza and Pneumonia (J09-J18)	8	189	2.3	21.4	16.0	8	167	2.3	23.2	14.7	9	17	2.5	23.1	39.2
Suicide (*U03, X60-X84, Y87.0)	9	185	2.2	20.9	21.2	9	142	1.9	19.7	19.3	6	28	4.1	38.1	36.2
Chronic Liver Disease and Cirrhosis (K70 & K73-K74)	10	154	1.9	17.4	17.1	*	-	-	-	-	4	64	9.3	87.1	116.1
Hypertension (I10 & I12 & I14)	*	-	-	-	-	10	116	1.6	16.1	10.2	*	-	-	-	-
Septicemia (A40-A41)	*	-	-	-	-	*	-	-	-	-	10	16	2.3	21.8	35.4
All Other Causes	-	1,980	23.9	223.8	-	-	1,708	23.1	236.9	-	-	183	26.6	249.1	-

Note: Letter / number combinations following cause of death are ICD-10 codes.

Due to rounding, disease-specific percentages may not sum to 100.

* This cause was not one of the 10 leading causes of death for this race group.

The asterisks (*) preceding the cause-of-death codes indicate that they are not part of the International Classification of Diseases, Tenth Revision.

Source: South Dakota Department of Health, Office of Health Statistics

Race

Table 48, on the previous page, presents South Dakota resident leading causes of death by race as well as crude death rates and age-adjusted death rates.

In 2019, patterns for the 10 leading causes of death varied by race. Eight of the 10 leading causes were the same for white, non-Hispanics and American Indian, non-Hispanics, but they differed by rank. For example, cerebrovascular disease was the sixth leading cause of death at 4.7 percent for the white, non-Hispanic population, but was eighth leading cause of death for the American Indian, non-Hispanic population at 3.1 percent.

Gender

Table 49, on the following page, presents South Dakota resident leading causes of death by gender as well as crude death rates and age-adjusted death rates.

In 2019, patterns for the 10 leading causes of death in South Dakota also varied by gender. Nine of the 10 leading causes were the same for South Dakota's men and women, but they differed in rank. Suicide was among the 10 leading causes of death for South Dakota's men, but not for women.

Unintentional injuries were tied for the second leading cause of death for American Indian, non-Hispanics in 2019 while ranking as the fifth leading cause of death for white, non-Hispanics.

Alzheimer's disease and hypertension were in the 10 leading causes of death for the white, non-Hispanic population, but not the American Indian, non-Hispanic population. Among the 10 leading causes of death for the American Indian, non-Hispanic population, but not for the white, non-Hispanic population, were chronic liver disease and septicemia.

Likewise, hypertension was among the 10 leading causes of death for women, but not for men. Men were also more likely to die from unintentional injuries than women, while women were more likely to die from Alzheimer's disease than men.

**Table 49
South Dakota Resident Leading Causes of Death by Gender, 2019**

Cause of Death	Total					Male					Female				
	Rank	Deaths	%	Crude Rate	Age-Adjusted Rate	Rank	Deaths	%	Crude Rate	Age-Adjusted Rate	Rank	Deaths	%	Crude Rate	Age-Adjusted Rate
South Dakota (All Deaths)		8,273	100	935.2	739.6		4,245	100	950.2	867.1		4,028	100	919.8	624.0
Heart Disease (I00-I09, I11, I13, I20-I51)	1	1,840	22.2	208.0	158.1	1	1,030	24.3	230.6	205.6	2	810	20.1	185.0	116.2
Cancer (C00-C97)	2	1,736	21.0	196.2	153.3	2	920	21.7	205.9	178.6	1	816	20.3	186.3	133.8
Chronic Lower Respiratory Diseases (J40-J47)	3	521	6.3	58.9	45.1	4	273	6.4	61.1	55.9	4	248	6.2	56.6	37.7
Unintentional Injuries (V01-X59, Y85-Y86)	4	512	6.2	57.9	52.8	3	293	6.9	65.6	64.1	6	219	5.4	50.0	40.6
Alzheimer's Disease (G30)	5	496	6.0	56.1	40.6	8	146	3.4	32.7	31.9	3	350	8.7	79.9	45.6
Cerebrovascular Diseases (I60-I69)	6	373	4.5	42.2	32.3	5(tie)	153	3.6	34.2	32.1	5	220	5.5	50.2	31.8
Diabetes (E10-E14)	7	287	3.5	32.4	26.8	5(tie)	153	3.6	34.2	31.7	7	134	3.3	30.6	22.3
Influenza and Pneumonia (J09-J18)	8	189	2.3	21.4	16.0	9	94	2.2	21.0	19.8	8	95	2.4	21.7	13.4
Suicide (*U03, X60-X84, Y87.0)	9	185	2.2	20.9	21.2	7	152	3.6	34.0	34.3	*	-	-	-	-
Chronic Liver Disease and Cirrhosis (K70 & K73-K74)	10	154	1.9	17.4	17.1	10	82	1.9	18.4	18.1	10	72	1.8	16.4	16.1
Hypertension (I10 & I12)	*	-	-	-	-	*	-	-	-	-	9	81	2.0	18.5	10.9
All Other Causes	-	1,980	23.9	223.8	-	-	949	22.4	212.4	-	-	983	24.4	224.5	-

Note: Letter/number combinations following cause of death are ICD-10 codes. Due to rounding, disease-specific percentages may not sum to 100.

*This cause was not one of the 10 leading causes of death for this gender.

The asterisks (*) preceding the cause of death codes indicate they are not part of the International Classification of Diseases, Tenth Revision

Source: South Dakota Department of Health, Office of Health Statistics

Table 50
South Dakota Resident Five Leading Causes of Death by Age Group, 2015-2019

Rank	All Ages	1-9	10-19	20-29	30-39	40-49	50-59	60-69	70-79	80-89	90 & over
1	Heart Disease 8,789	Unintentional Injuries 65	Unintentional Injuries 124	Unintentional Injuries 285	Unintentional Injuries 249	Cancer 231	Cancer 896	Cancer 1,943	Cancer 2,314	Heart Disease 2,520	Heart Disease 2,378
2	Cancer 8,408	Cancer 12	Suicide 123	Suicide 192	Suicide 150	Heart Disease 223	Heart Disease 643	Heart Disease 1,290	Heart Disease 1,624	Cancer 2,132	Alzheimer's Disease 1,030
3	Unintentional Injuries 2,471	Homicide 12	Homicide 19	Homicide 37	Heart Disease 82	Unintentional Injuries 208	Unintentional Injuries 283	Chronic Lower Respiratory Disease 360	Chronic Lower Respiratory Disease 702	Alzheimer's Disease 946	Cancer 773
4	Chronic Lower Respiratory Diseases 2,451	Congenital Malformations, Deformations, and Chromosomal Abnormalities 9	Cancer 8	Cancer 24	Chronic Liver Disease and Cirrhosis 80	Chronic Liver Disease and Cirrhosis 158	Chronic Liver Disease and Cirrhosis 231	Unintentional Injuries 249	Diabetes 328	Chronic Lower Respiratory Disease 828	Cerebrovascular Disease 602
5	Alzheimer's Disease 2,247	**	Congenital Malformations, Deformations, and Chromosomal Abnormalities 7	Heart Disease 23	Cancer 73	Suicide 125	Diabetes 151	Diabetes 247	Cerebrovascular Disease 313	Cerebrovascular Disease 713	Chronic Lower Respiratory Disease 420

Note: ** No other cause had at least five deaths.

Source: South Dakota Department of Health, Office of Health Statistics

Age

Table 50, on the previous page, lists the five leading causes of death by age group for the last five years combined. Excluding infants, unintentional injuries were the leading cause of death for South Dakotans through age 39.

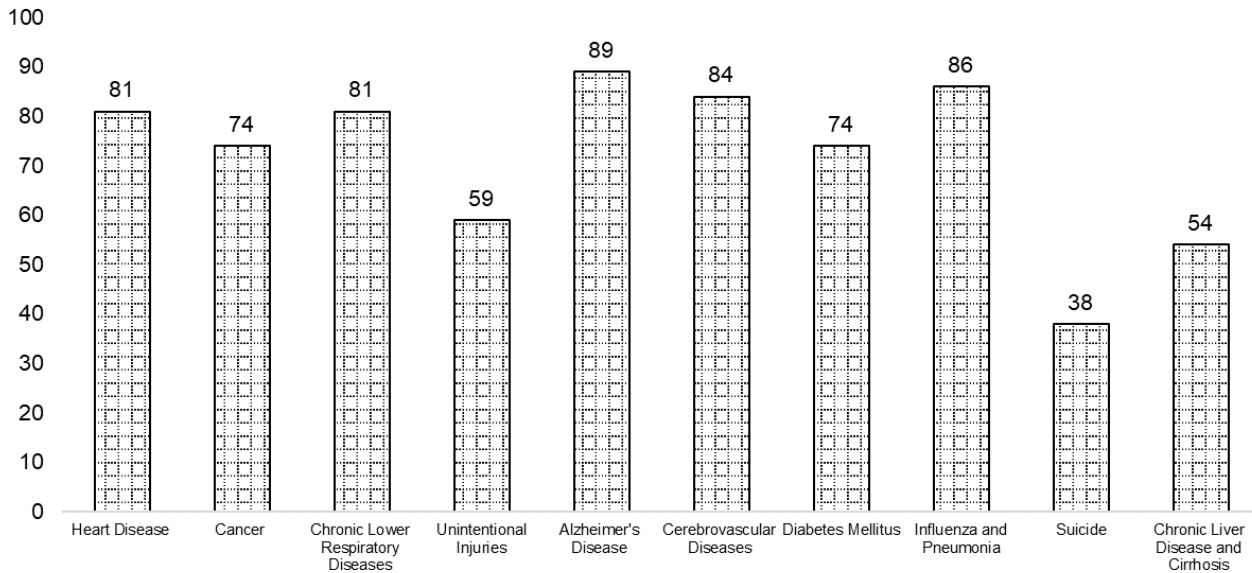
The leading cause of death for persons 40-79 was cancer. Heart disease was the leading cause of death for persons aged 80 and older.

Median Age

Figure 9, below, presents data on the median age at death for the 10 leading causes of death for South Dakota residents in 2019. The median age for

the 10 leading causes of death in 2019 ranged from 38 for suicide to 89 for Alzheimer’s Disease.

Figure 9
Median Age at Death for South Dakota Residents for the Leading Causes of Death, 2019



Source: South Dakota Department of Health, Office of Health Statistics

Table 51, below, shows the median age at death for each of the past five years by race and gender. When looking at race, American Indian, non-Hispanics have the

lowest median age at death at 57, while white, non-Hispanics have the highest at 80. Males’ median age at death is 74, while females is 83.

Table 51
Median Age at Death for South Dakota Residents by Race, Gender and Year of Death, 2015-2019

Year of Death	Total Median Age	White, non-Hispanic	American Indian, non-Hispanic	Male	Female
2019	78	80	57	74	83
2018	79	81	59	75	83
2017	79	81	57	75	83
2016	79	81	58	75	83
2015	80	81	56	76	83

Source: South Dakota Department of Health, Office of Health Statistics

Table 52, below, shows the median age at death for South Dakota residents for the leading causes of death by race and gender. In 2019, the median age at death for white, non-Hispanic residents ranged from 46 for suicide to 89 for Alzheimer's Disease. The range for American Indian, non-Hispanics was 26 for suicides to 72 for chronic lower

respiratory diseases. For males the range in 2019 was 39 for suicide to 86 for Alzheimer's disease. The range for females was 54 for chronic liver disease and cirrhosis to 92 for hypertension.

**Table 52
Median Age at Death for South Dakota Residents for the Leading Causes of Death
by Race and Gender, 2019**

Cause of Death	Median Age at Death in Years				
	All	Race		Gender	
	Total Deaths	White, non-Hispanic	American Indian, non-Hispanic	Male	Female
South Dakota (All Deaths)	78	80	57	74	83
Heart Disease (I00-I09, I11, I13, I20-I51)	81	82	62	76	87
Cancer (C00-C97)	74	75	66	73	75
Chronic Lower Respiratory Diseases (J40-J47)	81	81	72	80	81
Unintentional Injuries (V01-X59, Y85-Y86)	59	70	33	55	76
Alzheimer's Disease (G30)	89	89	*	86	90
Cerebrovascular Diseases (I60-I69)	84	85	57	81	86
Diabetes (E10-E14)	74	76	60	72	75
Influenza and Pneumonia (J09-J18)	86	87	65	84	89
Suicide (*U03, X60-X84, Y87.0)	38	46	26	39	*
Chronic Liver Disease and Cirrhosis (K70 & K73-K74)	54	*	48	54	54
Hypertension (I10 & I12)	*	87	*	*	92
Septicemia (A40-A41)	*	*	57	*	*

Note: Letter / number combinations following cause of death are ICD-10 codes.

*This cause was not one of the 10 leading causes of death for this race or gender.

The asterisks (*) preceding the cause-of-death codes indicate that they are not part of the International Classification of Diseases, Tenth Revision.

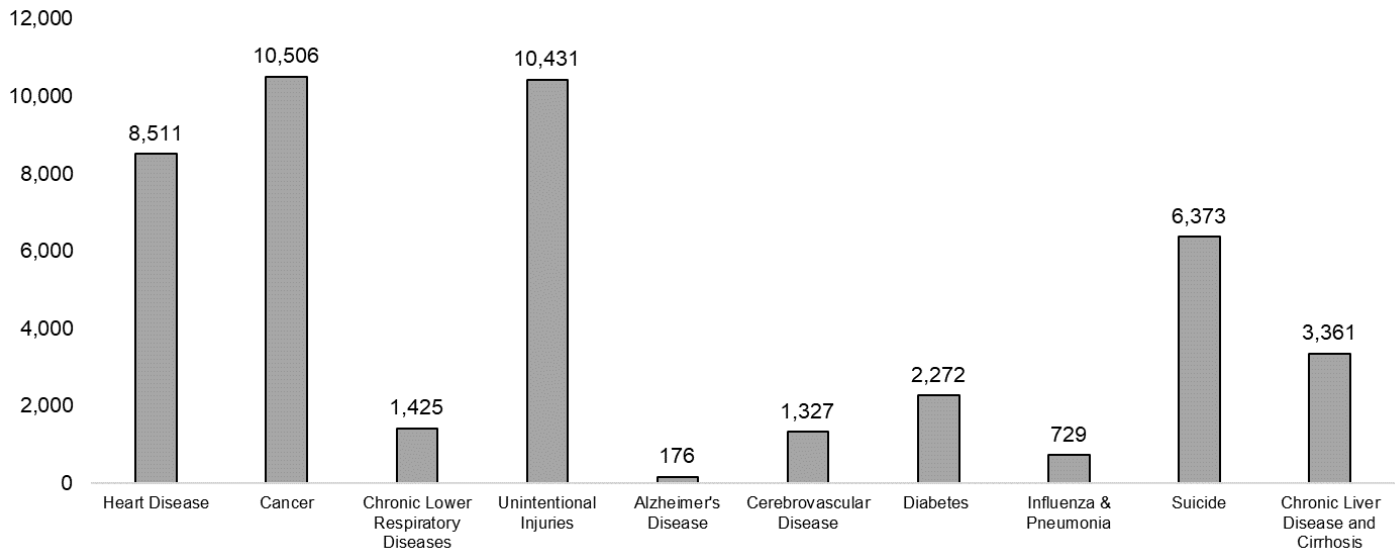
Source: South Dakota Department of Health, Office of Health Statistics

Years of Potential Life Lost

Figure 10, on the next page, depicts the years of potential life lost (YPLL) before age 75 for each of these causes.

In 2019, cancer led in YPLL with 10,506 followed by unintentional injuries with 10,431 years of potential life lost.

Figure 10
South Dakota Resident Years of Potential Life Lost (YPLL) Before Age 75
for the Leading Causes of Death, 2019

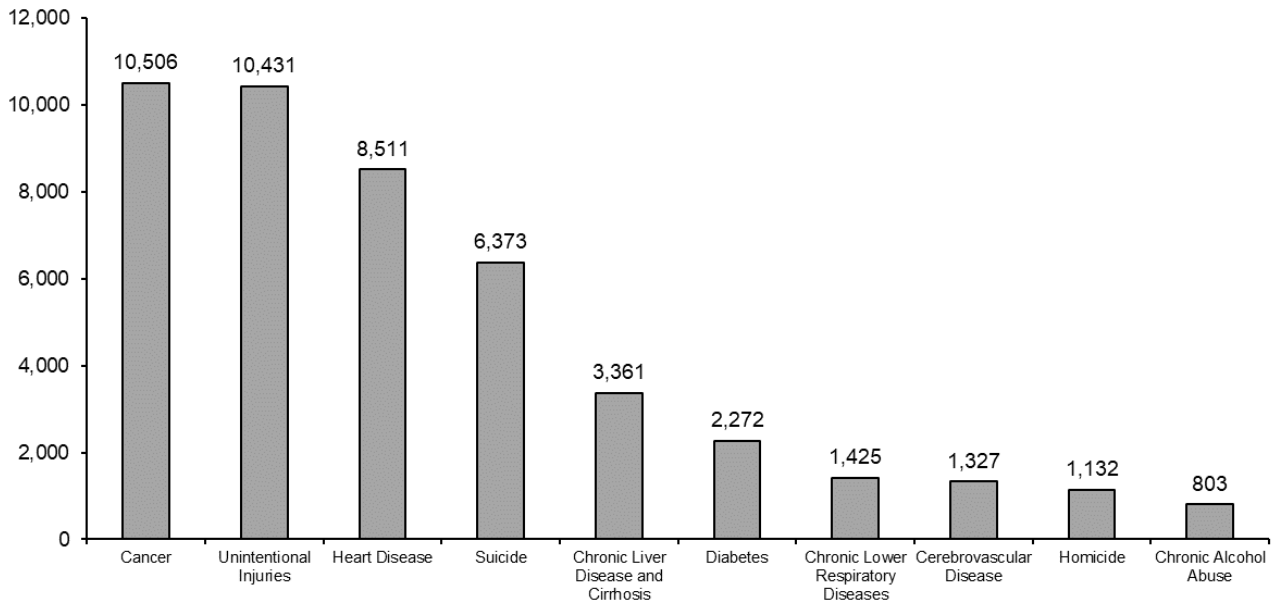


Note: Chart excludes infant deaths.
 Source: South Dakota Department of Health, Office of Health Statistics

Figure 10a, below, shows the years of potential life lost (YPLL) before age 75 for each of the causes in order from highest YPLL to lowest YPLL.

Cancer, unintentional injuries, and heart disease led in the most YPLL in South Dakota for 2019.

Figure 10a
South Dakota Resident Years of Potential Life Lost (YPLL) Before Age 75 for
the Leading Causes of Death (in Descending Order), 2019



Note: Chart excludes infant deaths
 Source: South Dakota Department of Health, Office of Health Statistics

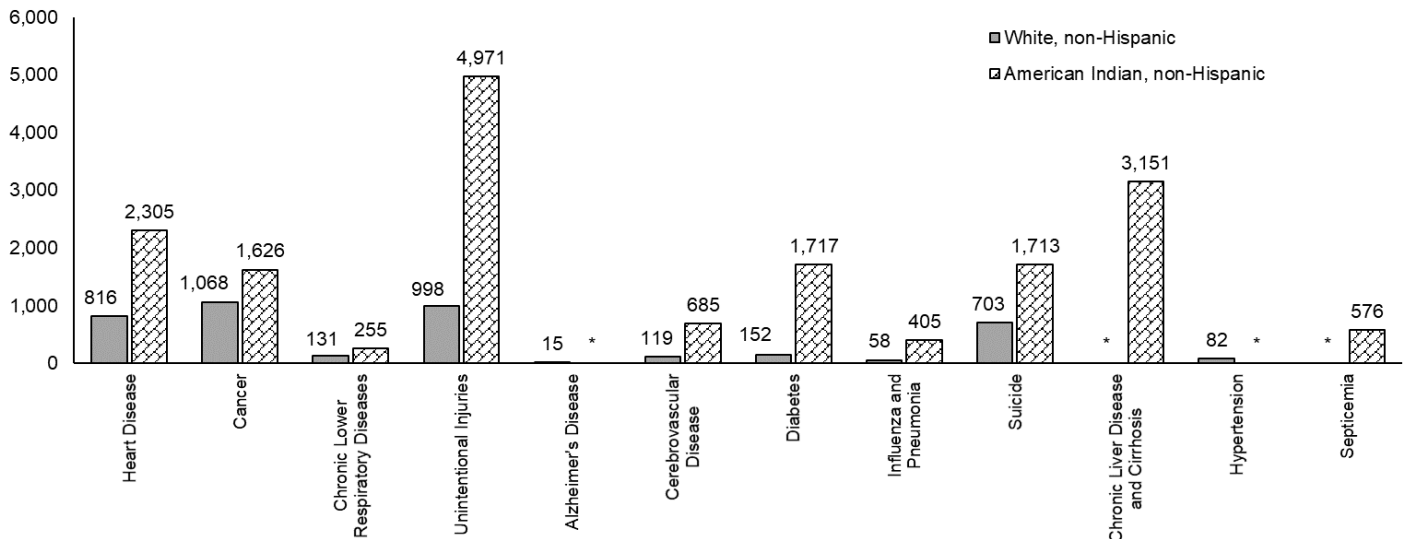
Figure 11, below, illustrates the rate of years of potential life lost (YPLL) before age 75 per 100,000 population for the top 10 causes of death by race. When comparing YPLL rates by race, American Indian, non-Hispanics exceeded white, non-Hispanics substantially for the leading causes of death.

American Indian, non-Hispanics' largest YPLL rate was unintentional injuries with 4,971 while white, non-Hispanics' largest YPLL rate was cancer with 1,068.

White, non-Hispanics' second largest YPLL rate was unintentional injuries with 998 while American Indian, non-Hispanics' second largest YPLL rate was chronic liver disease and cirrhosis with 3,151.

American Indian, non-Hispanics' and white, non-Hispanics' third largest YPLL rate was heart disease with 2,305 and 816, respectively. Cancer was the sixth largest YPLL rate for American Indians, which still exceeded white's largest YPLL.

Figure 11
Age-Adjusted Years of Potential Life Lost (YPLL) Before Age 75 for the
Leading Causes of Death by Race, 2019



Note: Years of potential life lost are age-adjusted per 100,000 population.

*This cause was not one of the 10 leading causes of death for this race group.

Source: South Dakota Department of Health, Office of Health Statistics

Place of Death

Table 53, on the next page, displays the 10 leading causes of death by place where death occurred in 2019.

Overall, nursing home, long term care, and hospice facility had the highest occurrence of deaths with 42.2 percent. Hospital followed closely with 31.5 percent.

Table 53
South Dakota Resident Deaths by Cause of Death and Place of Death, 2019

Cause of Death	Total		Hospital		Nursing Home/Long Term Care/Hospice Facility		Residence		All Other Reported Entries	
	Num	%	Num	%	Num	%	Num	%	Num	%
South Dakota (All Deaths)	8,273	100	2,607	31.5	3,491	42.2	1,771	21.4	356	4.3
Heart Disease (I00-I09, I11, I13, I20-I51)	1,840	100	593	32.2	634	34.5	531	28.9	71	3.9
Cancer (C00-C97)	1,736	100	393	22.6	805	46.4	503	29.0	31	1.8
Chronic Lower Respiratory Diseases (J40-J47)	521	100	162	31.1	247	47.4	105	20.2	5	1.0
Unintentional Injuries (V01-X59, Y85-Y86)	512	100	180	35.2	106	20.7	80	15.6	129	25.2
Alzheimer's Disease (G30)	496	100	40	8.1	420	84.7	33	6.7	3	0.6
Cerebrovascular Diseases (I60-I69)	373	100	150	40.2	194	52.0	25	6.7	3	0.8
Diabetes (E10-E14)	287	100	75	26.1	119	41.5	86	30.0	6	2.1
Influenza and Pneumonia (J09-J18)	189	100	114	60.3	56	29.6	18	9.5	1	0.5
Suicide (*U03, X60-X84, Y87.0)	185	100	22	11.9	2	1.1	104	56.2	54	29.2
Chronic Liver Disease and Cirrhosis (K70 & K73-K74)	154	100	77	50.0	39	25.3	31	20.1	7	4.5
All Other Causes	1,980	100	801	40.5	869	43.9	255	12.9	46	2.3

Note: The asterisks (*) preceding the cause of death codes indicate they are not part of the International Classification of Diseases, Tenth Revision. The place of death data may not add to the total due to not stated places not being specified but being included in the total.
Source: South Dakota Department of Health, Office of Health Statistics

Tobacco Use

On the death certificate, the certifier was instructed to check “yes” or “probably” if in their opinion, the use of tobacco contributed to death or check “no” if in their clinical judgment tobacco use did not contribute to the death. There was also the option of “unknown” if the certifier was unsure if tobacco use contributed to death.

On 1,618 deaths, or 19.6 percent, the certifier indicated “yes” or “probably” that tobacco use contributed to the death. Conversely, on 4,858 deaths, or 58.7 percent, the certifier indicated that tobacco use did not contribute to the death.

In the remaining 1,797 deaths, or 21.7 percent, the certifier was unsure if tobacco use contributed to the death.

Table 54, on the next page, displays the 10 leading causes of death where the certifier said “yes” or “probably” that tobacco use contributed to the death.

Tobacco use contributed to death in 69.5 percent, or 299 out of the 430 trachea, bronchus, and lung cancer deaths in 2019. In 63.5 percent, or 331 chronic lower respiratory disease deaths the certifier said “yes” or “probably” that tobacco use contributed to the death.

Table 54
South Dakota Resident Leading Causes of Death as They Relate to Tobacco Use, 2019
(Did Tobacco Use Contribute to Death)

Cause of Death	Yes/Probably		Total Deaths	
	Number	Percent	Number	Percent
Total	1,618	19.6	8,273	100
Cancer (C00-C97)	494	28.5	1,736	100
Trachea, bronchus, and lung cancer (C33-C34)	299	69.5	430	100
Colorectal cancer (C18-C21)	22	14.4	153	100
Bladder cancer (C67)	17	39.5	43	100
Esophagus cancer (C15)	16	29.6	54	100
Heart disease (I00-I09, I11, I13, I20-I51)	359	19.5	1,840	100
Acute myocardial infarction (I21-I22)	138	22.0	627	100
Atherosclerotic heart disease (I25.1)	96	22.5	426	100
Hypertensive heart disease (I11)	26	17.7	147	100
Chronic lower respiratory diseases (J40-J47)	331	63.5	521	100
Chronic obstructive pulmonary disease, unspecified (J44.9)	231	67.0	345	100
Chronic obstructive pulmonary disease with acute lower respiratory infection (J44.0)	51	56.0	91	100
Chronic obstructive pulmonary disease with acute exacerbation, unspecified (J44.1)	25	67.6	37	100
Emphysema (J43)	21	70.0	30	100
Diabetes (E10-E14)	56	19.5	287	100
Cerebrovascular diseases (I60-I69)	52	13.9	373	100
Influenza and pneumonia (J09-J18)	28	14.8	189	100
Pneumonia (J12-J18)	21	13.1	160	100
Chronic liver disease and cirrhosis (K70 & K73-K74)	26	16.9	154	100
Alcoholic liver disease (K70)	24	18.2	132	100
Unintentional injuries (V01-X59, Y85-Y86)	20	3.9	512	100
Alzheimer's disease (G30)	18	3.6	496	100
Chronic alcohol abuse (F10)	16	41.0	39	100

Source: South Dakota Department of Health, Office of Health Statistics

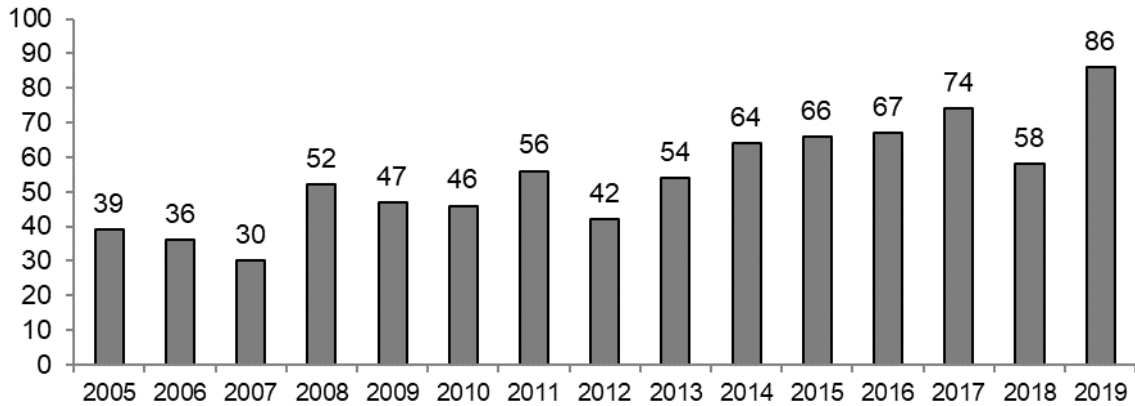
Drug Overdose Deaths

Figures 12-17 And Tables 55-62 on the following pages break down the drug overdose deaths for South Dakota residents for the past 15 years by the manner of death, year of death, and type of drug.

As shown in Figure 12 , there were 86 drug overdose deaths in 2019, up from 58 drug overdose deaths in 2018. Table 55, below that, shows that of the 86 drug

overdose deaths in 2019, 71 deaths were unintentional, 10 deaths were suicides, and five deaths were undetermined intent. The definition of drug overdose deaths is located in the back of this report within the Technical Notes section.

Figure 12
South Dakota Resident Deaths Due to Drug Overdoses, 2005-2019



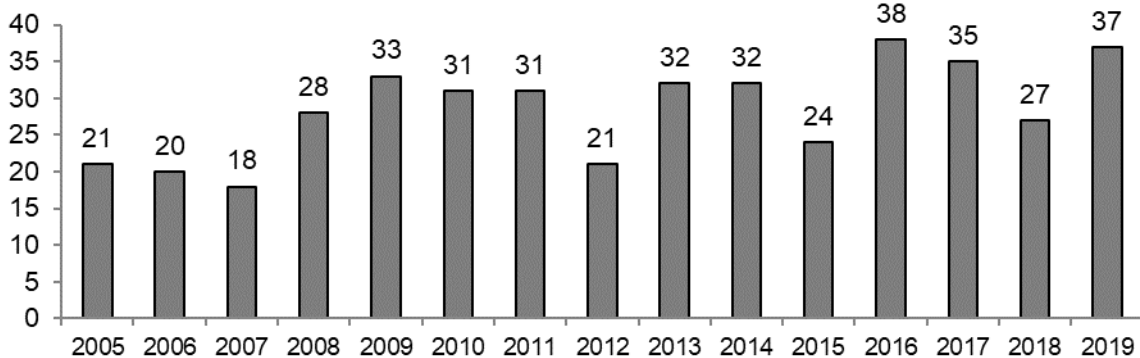
Source: South Dakota Department of Health, Office of Health Statistics

Table 55
South Dakota Resident Deaths Due to Drug Overdose by Manner of Death and Year of Death for All Drugs, 2005-2019

	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019
Total	39	36	30	52	47	46	56	42	54	64	66	67	74	58	86
Unintentional	18	21	15	30	26	19	41	24	34	46	44	52	54	43	71
Suicide	14	12	8	13	12	16	11	11	15	12	19	12	18	11	10
Homicide	0	0	0	0	1	0	0	0	1	0	0	1	0	0	0
Undetermined Intent	7	3	7	9	8	11	4	7	4	6	3	2	2	4	5

Source: South Dakota Department of Health, Office of Health Statistics

Figure 13
South Dakota Resident Deaths Due to All Opioid Poisoning, 2005-2019



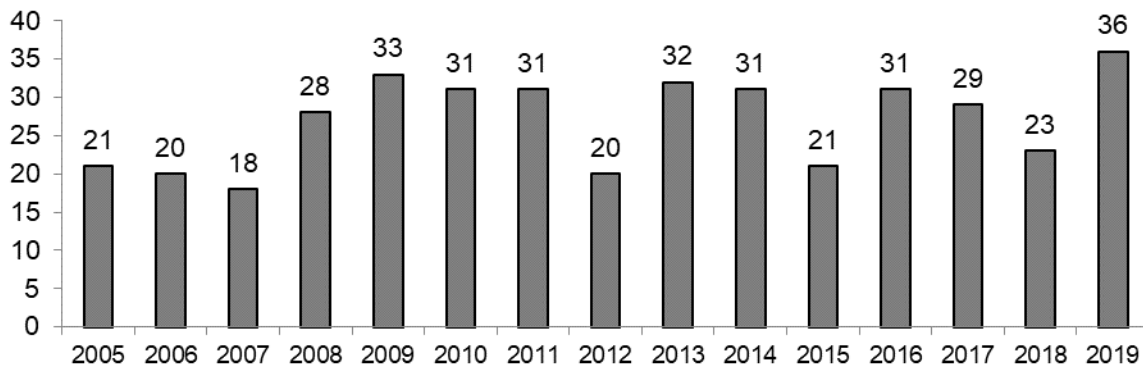
Source: South Dakota Department of Health, Office of Health Statistics

Table 56
South Dakota Resident Deaths Due to Drug Overdose by Manner of Death and Year of Death for All Opioid Poisoning, 2005-2019

	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019
Total	21	20	18	28	33	31	31	21	32	32	24	38	35	27	37
Unintentional	10	15	9	18	22	15	26	15	21	27	19	31	28	22	32
Suicide	6	3	3	4	6	8	3	2	9	2	4	6	7	3	3
Homicide	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0
Undetermined Intent	5	2	6	6	4	8	2	4	2	3	1	1	0	2	2

Source: South Dakota Department of Health, Office of Health Statistics

Figure 14
South Dakota Resident Deaths Due to Prescription Opioid Poisoning, 2005-2019



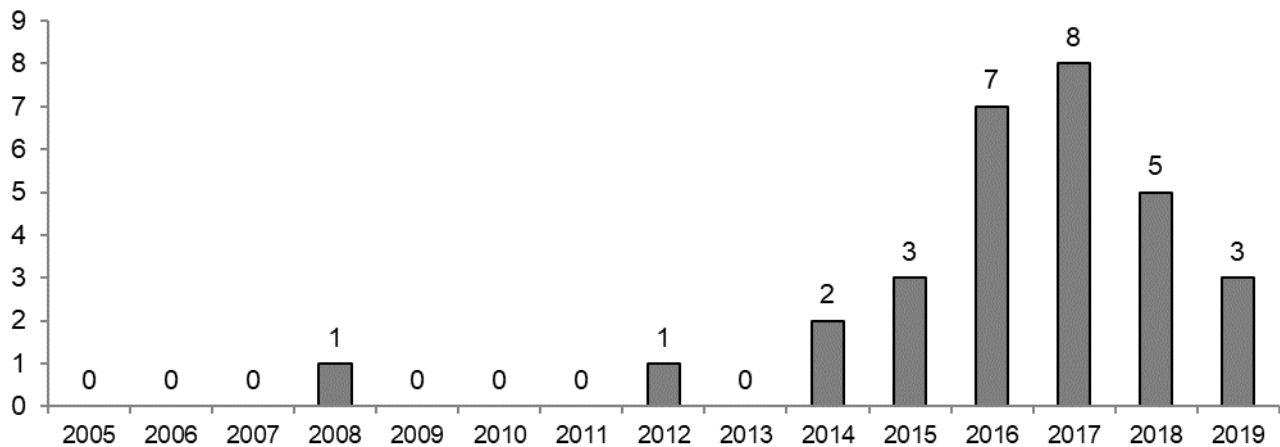
Source: South Dakota Department of Health, Office of Health Statistics

Table 57
South Dakota Resident Deaths Due to Drug Overdose by Manner of Death and Year of Death for Prescription Opioid Poisoning, 2005-2019

	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019
Total	21	20	18	28	33	31	31	20	32	31	21	31	29	23	36
Unintentional	10	15	9	18	22	15	26	14	21	26	16	24	22	19	31
Suicide	6	3	3	4	6	8	3	2	9	2	4	6	7	3	3
Homicide	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0
Undetermined Intent	5	2	6	6	4	8	2	4	2	3	1	1	0	1	2

Source: South Dakota Department of Health, Office of Health Statistics

Figure 15
South Dakota Resident Deaths Due to Illicit Opioid Poisoning, 2005-2019



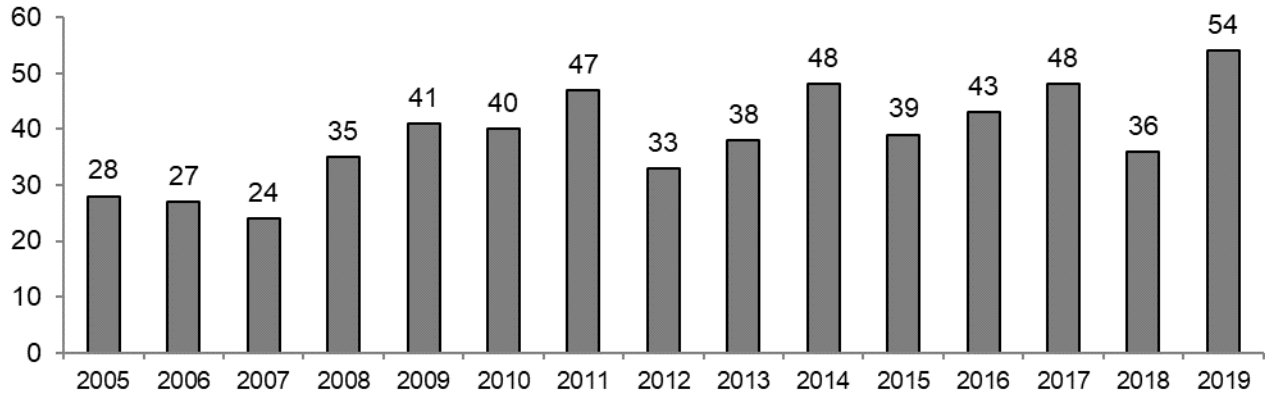
Source: South Dakota Department of Health, Office of Health Statistics

Table 58
South Dakota Resident Deaths Due to Drug Overdose by Manner of Death and Year of Death for Illicit Opioid Poisoning, 2005-2019

	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019
Total	0	0	0	1	0	0	0	1	0	2	3	7	8	5	3
Unintentional	0	0	0	1	0	0	0	1	0	2	3	7	8	4	3
Suicide	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Homicide	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Undetermined Intent	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0

Source: South Dakota Department of Health, Office of Health Statistics

Figure 16
South Dakota Resident Deaths Due to All Pharmaceutical Poisoning, 2005-2019



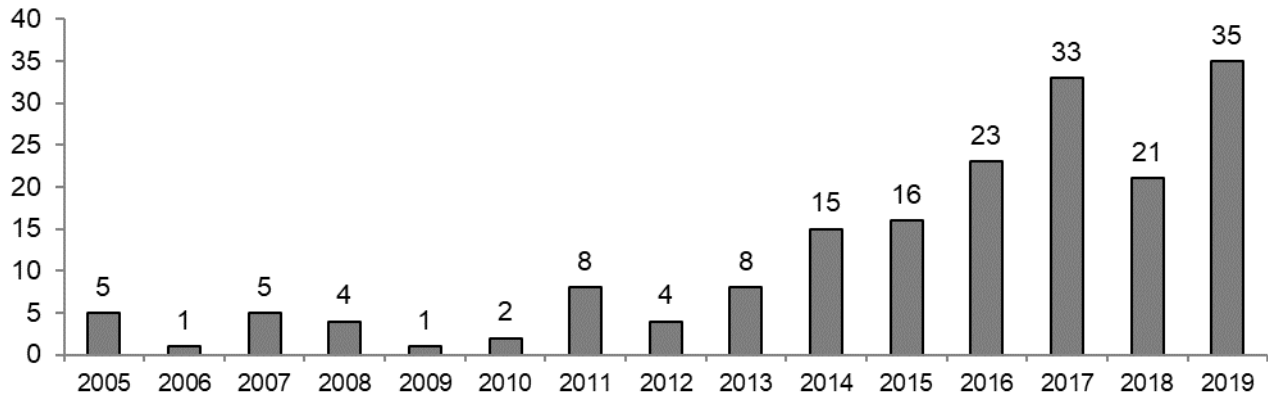
Source: South Dakota Department of Health, Office of Health Statistics

Table 59
South Dakota Resident Deaths Due to Drug Overdose by Manner of Death and Year of Death for All Pharmaceutical Drug Poisoning, 2005-2019

	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019
Total	28	27	24	35	41	40	47	33	38	48	39	43	48	36	54
Unintentional	11	16	10	19	22	16	34	18	24	33	24	31	30	23	40
Suicide	11	9	7	8	11	14	10	10	12	9	12	10	17	11	10
Homicide	0	0	0	0	1	0	0	0	0	0	0	1	0	0	0
Undetermined Intent	6	2	7	8	7	10	3	5	2	6	3	1	1	2	4

Source: South Dakota Department of Health, Office of Health Statistics

Figure 17
South Dakota Resident Deaths Due to Illicit Drug Poisoning, 2005-2019



Source: South Dakota Department of Health, Office of Health Statistics

Table 60
South Dakota Resident Deaths Due to Drug Overdose by Manner of Death and Year of Death for Illicit Drug Poisoning, 2005-2019

	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019
Total	5	1	5	4	1	2	8	4	8	15	16	23	33	21	35
Unintentional	4	0	5	3	1	2	7	3	6	14	16	23	31	19	34
Suicide	0	1	0	0	0	0	1	1	1	1	0	0	1	0	0
Homicide	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0
Undetermined Intent	1	0	0	1	0	0	0	0	0	0	0	0	1	2	1

Source: South Dakota Department of Health, Office of Health Statistics

The following tables (61 and 62) show the specific drugs involved in drug overdose deaths for 2019 and for the past 10 years. Out of the 86 total drug deaths in 2019, 31 of those involved methamphetamine. Of those 31 deaths, 25 listed methamphetamine as the only drug, while the other six deaths involved at least one other drug.

The following is an explanation of what is represented with regard to “Drugs Involved” in deaths due to a drug overdose:

- Please note that just because a drug is involved in a drug overdose death doesn’t necessarily mean the overdose was due to that specific drug. It just means that drug was mentioned on the death certificate of a drug overdose

death. Sometimes we have no way of knowing which drug actually caused the overdose in cases where multiple drugs are listed.

- Please be aware that when more than one drug is “involved” in a drug overdose, each drug is counted separately. For example, if methamphetamine and heroin are both listed on the death certificate, each drug will be counted once even though it’s just one death.
- Also, if something like Vicodin, which is a combination of drugs, is listed on the death certificate, each drug will be counted and “involved” in the overdose.
- Analogs of fentanyl are included in the total for fentanyl.

Table 61
South Dakota Resident Deaths Due to Drug Overdose by Drugs Involved, 2019

Drugs Involved	Number of Deaths	Number of Specific Drugs Listed on Death Certificate	
		Only Drug Involved	Other Drugs Involved
Methamphetamine	31	25	6
Fentanyl (Includes analogs)	23	18	5
Morphine	8	1	7
Cocaine (Benzoyllecgonine)	5	2	3
Bupropion (Wellbutrin)	5	4	1
Oxycodone (Oxycontin, Percocet, Percodan)	4	1	3
Heroin	3	1	2
Diphenhydramine	3	1	2
Venlafaxine (Effexor)	3	2	1
Quetiapine (Seroquel)	3	1	2

Note: ICD -10 Codes: X40-X44, X60-X64, X85, Y10-Y14
Source: South Dakota Department of Health, Office of Health Statistics

Table 62
South Dakota Resident Deaths Due to Drug Overdose by Drugs Involved and Year of Death, 2010-2019

Drugs Involved and Number of Specific Drugs on Death Certificate	Total	Year of Death									
		2010	2011	2012	2013	2014	2015	2016	2017	2018	2019
Methamphetamine	129	2	4	3	9	14	13	18	22	13	31
Only Drug Involved	89	1	2	3	6	10	10	10	12	10	25
Other Drugs Involved	40	1	2	0	3	4	3	8	10	3	6
Fentanyl (Includes Analogs)	80	4	4	2	2	7	7	7	12	12	23
Only Drug Involved	55	4	3	2	1	4	6	2	6	9	18
Other Drugs Involved	25	0	1	0	1	3	1	5	6	3	5
Oxycodone (Oxycontin, Percocet, Percodan)	66	9	9	3	10	8	2	9	5	7	4
Only Drug Involved	30	4	2	2	6	5	2	2	2	4	1
Other Drugs Involved	36	5	7	1	4	3	0	7	3	3	3
Morphine	63	9	7	6	10	11	1	7	3	1	8
Only Drug Involved	31	7	4	5	5	6	0	2	1	0	1
Other Drugs Involved	32	2	3	1	5	5	1	5	2	1	7
Hydrocodone (Vicodin)	53	5	4	5	9	5	7	10	4	2	2
Only Drug Involved	24	2	2	3	4	2	3	5	2	1	0
Other Drugs Involved	29	3	2	2	5	3	4	5	2	1	2
Methadone (Methadose)	42	8	9	1	2	6	4	4	4	3	1
Only Drug Involved	23	7	4	1	1	3	3	1	1	2	0
Other Drugs Involved	19	1	5	0	1	3	1	3	3	1	1
Heroin	31	0	1	1	0	2	3	8	8	5	3
Only Drug Involved	12	0	0	1	0	0	1	4	3	2	1
Other Drugs Involved	19	0	1	0	0	2	2	4	5	3	2
Cocaine (Benzoyllecgonine)	25	0	3	0	0	0	3	3	3	8	5
Only Drug Involved	8	0	1	0	0	0	0	0	1	4	2
Other Drugs Involved	17	0	2	0	0	0	3	3	2	4	3
Amitriptyline	24	2	2	4	3	1	1	4	3	2	2
Only Drug Involved	6	0	2	2	1	0	0	0	1	0	0
Other Drugs Involved	18	2	0	2	2	1	1	4	2	2	2
Diphenhydramine	18	1	1	1	1	2	4	2	1	2	3
Only Drug Involved	10	0	1	0	1	2	2	1	1	1	1
Other Drugs Involved	8	1	0	1	0	0	2	1	0	1	2
Tramadol	17	2	2	3	2	0	2	3	1	0	2
Only Drug Involved	7	1	1	2	1	0	1	0	0	0	1
Other Drugs Involved	10	1	1	1	1	0	1	3	1	0	1
Quetiapine (Seroquel)	17	5	0	1	0	0	0	3	4	1	3
Only Drug Involved	6	1	0	1	0	0	0	1	1	1	1
Other Drugs Involved	11	4	0	0	0	0	0	2	3	0	2
Bupropion (Wellbutrin)	15	0	1	0	0	2	0	1	3	3	5
Only Drug Involved	10	0	1	0	0	2	0	0	1	2	4
Other Drugs Involved	5	0	0	0	0	0	0	1	2	1	1
Alprazolam (Xanax)	14	1	3	2	2	1	0	1	0	3	1
Only Drug Involved	3	0	0	1	1	1	0	0	0	0	0
Other Drugs Involved	11	1	3	1	1	0	0	1	0	3	1
Acetaminophen (Darvocet, Excedrin, Percocet, Tylenol, Vicodin)	14	1	4	0	1	2	3	2	1	0	0
Only Drug Involved	5	0	1	0	0	2	2	0	0	0	0
Other Drugs Involved	9	1	3	0	1	0	1	2	1	0	0
Citalopram (Celexa)	13	1	1	1	2	3	0	0	2	1	2
Only Drug Involved	1	0	0	1	0	0	0	0	0	0	0
Other Drugs Involved	12	1	1	0	2	3	0	0	2	1	2
Duloxetine (Cymbalta)	10	1	0	0	2	0	1	1	2	2	1
Only Drug Involved	0	0	0	0	0	0	0	0	0	0	0
Other Drugs Involved	10	1	0	0	2	0	1	1	2	2	1
Codeine	10	0	1	1	2	0	0	3	2	0	1
Only Drug Involved	1	0	0	1	0	0	0	0	0	0	0
Other Drugs Involved	9	0	1	0	2	0	0	3	2	0	1

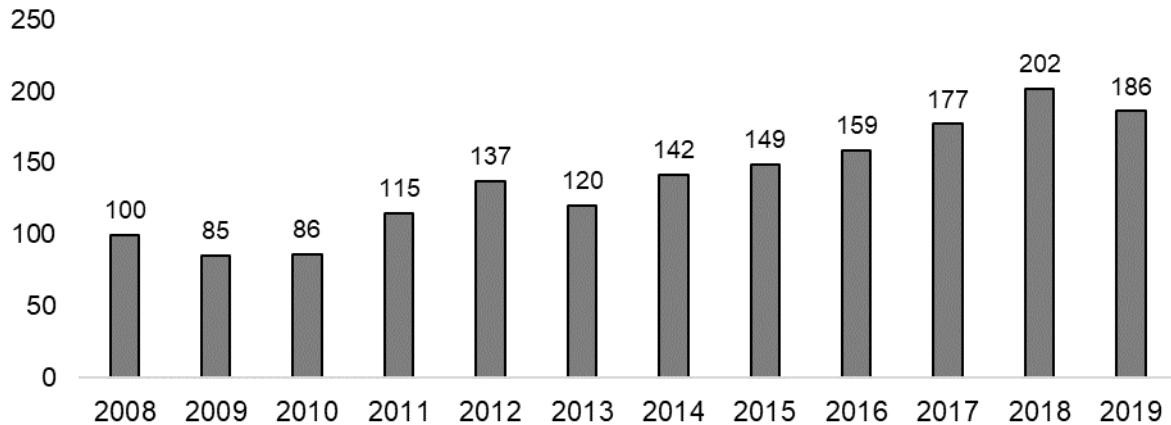
Note: ICD-10 CODES X40-X44, X60-X64, X85, Y10-Y14
Source: South Dakota Department of Health, Office of Health Statistics

Alcohol-Induced Deaths

Figure 18, below, shows the alcohol-induced deaths for South Dakota residents for the past 12 years. The definition of

alcohol-induced deaths is located in the back of this report within the Technical Notes section.

Figure 18
South Dakota Resident Alcohol-Induced Deaths, 2008-2019



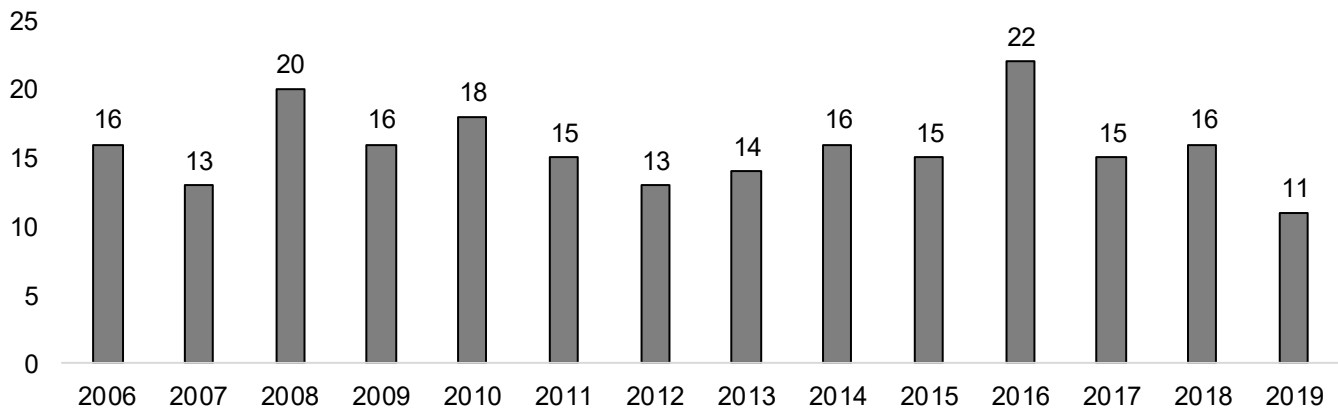
Source: South Dakota Department of Health, Office of Health Statistics

Farm Accident Deaths

Figure 19, below, shows the number of South Dakota resident deaths due to farm accidents for the past 14 years. The

definition of farm accident deaths is located in the back of this report within the Technical Notes section.

Figure 19
South Dakota Resident Deaths Due to Farm Accidents, 2006-2019



Source: South Dakota Department of Health, Office of Health Statistics

Maternal Mortality

Table 63, on the following page, shows maternal mortality deaths for the past nine

years. Specific definitions are located in the notes below the table.

Table 63
South Dakota Resident Deaths Occurring in South Dakota to Women Who Were Pregnant at the Time of Death or Within One Year After Delivery, 2011-2019

Year	Any Death While Pregnant, or Within One Year After Delivery	Pregnancy-Related	Pregnancy Associated, But Not Pregnancy-Related
2019	6	*	*
2018	8	*	*
2017	5	1	4
2016	6	2	4
2015	5	2	3
2014	5	1	4
2013	6	1	5
2012	6	1	5
2011	8	3	5

Source: South Dakota Department of Health, Office of Health Statistics

Note: Pregnancy-related: Death resulting from: 1) complications of the pregnancy itself, or 2) the chain of events initiated by the pregnancy that led to death, or 3) aggravation of an unrelated condition by the physiologic or pharmacologic effects of the pregnancy that subsequently caused death during pregnancy or within one calendar year of termination of pregnancy, regardless of the duration or anatomical site of pregnancy. This designation comes from the CDC as part of the Pregnancy Mortality Surveillance System (PMSS). *--The latest year they have reviewed for South Dakota is 2017.

Pregnancy-associated, but not pregnancy-related: Death of a woman from any cause, while she is pregnant or within one calendar year of termination of pregnancy, regardless of the duration or anatomical site of pregnancy, but not pregnancy related (see above). This designation comes from the CDC as part of the Pregnancy Mortality Surveillance System (PMSS). *--The latest year they have reviewed for South Dakota is 2017.

Firearm Deaths

Table 64, below, shows firearm deaths for South Dakota residents for the past 10 years. The definition of firearm deaths is

located in the back of this report within the Technical Notes section.

Table 64
South Dakota Resident Deaths Due to Firearms, 2010-2019

Year	Total Firearm Deaths	Manner of Death				
		Accident	Suicide	Homicide	Legal Intervention	Undetermined Intent
2019	113	0	101	10	2	0
2018	117	7	91	16	3	0
2017	102	2	83	12	4	1
2016	107	5	83	14	5	0
2015	95	5	73	14	2	1
2014	90	2	76	9	3	0
2013	79	1	71	5	2	0
2012	84	2	76	6	0	0
2011	71	2	59	6	4	0
2010	75	4	65	3	2	1

Source: South Dakota Department of Health, Office of Health Statistics

Method of Disposition

Table 65, below, displays the different methods of disposition for the last 13 years. The top disposition in 2019 was burial with 3,920 deaths. The second highest method of

disposition in 2019 was cremation with 3,853 deaths. Since 2007, cremation has increased from 21.7 percent of all dispositions to 46.6 percent in 2019.

Table 65
South Dakota Resident Deaths by Disposition, 2007-2019

Year	Total Deaths	Type of Disposition									
		Burial		Cremation		Removal from State		Donation		Entombment	
		Count	Percent	Count	Percent	Count	Percent	Count	Percent	Count	Percent
2019	8,273	3,920	47.4	3,853	46.6	450	5.4	39	0.5	11	0.1
2018	7,971	3,949	49.5	3,554	44.6	425	5.3	34	0.4	7	0.1
2017	7,991	4,106	51.4	3,315	41.5	512	6.4	46	0.6	9	0.1
2016	7,838	4,145	52.9	3,190	40.7	447	5.7	38	0.5	17	0.2
2015	7,724	4,335	56.1	2,939	38.1	413	5.3	23	0.3	14	0.2
2014	7,500	4,302	57.4	2,738	36.5	398	5.3	40	0.5	15	0.2
2013	7,079	4,146	58.6	2,468	34.9	417	5.9	32	0.5	15	0.2
2012	7,283	4,465	61.3	2,345	32.2	428	5.9	33	0.5	10	0.1
2011	7,271	4,539	62.4	2,211	30.4	472	6.5	33	0.5	10	0.1
2010	7,087	4,548	64.2	2,044	28.8	433	6.1	47	0.7	10	0.1
2009	6,913	4,545	65.7	1,855	26.8	464	6.7	34	0.5	8	0.1
2008	7,056	4,857	68.8	1,662	23.6	485	6.9	35	0.5	9	0.1
2007	6,800	4,775	70.2	1,474	21.7	481	7.1	46	0.7	18	0.3

Note: Failure of deaths to add to total is due to the disposition not stated.

Source: South Dakota Department of Health, Office of Health Statistics

Leading Causes and Selected Components

Tables 66a-66c, on pages 75 through 77, display South Dakota resident deaths, the crude death rate, and the age-adjusted death rate for 15 leading causes and selected components from 2010 to 2019.

The crude and age-adjusted rates for all causes in 2019 were 935.2 and 739.6 respectively, which are up from the crude and age-adjusted rates in 2018 of 903.5 and 715.7, respectively.

Table 66a
South Dakota Resident Deaths for 15 Leading Causes and Selected Components, 2010-2019

Cause of Death	Number of Deaths									
	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019
All Causes	7,087	7,271	7,283	7,079	7,500	7,724	7,838	7,991	7,971	8,273
Heart Disease	1,611	1,615	1,652	1,617	1,695	1,712	1,732	1,708	1,797	1,840
Cancer	1,651	1,656	1,623	1,574	1,679	1,632	1,691	1,717	1,632	1,736
Trachea, Bronchus, and Lung	434	457	434	416	439	424	420	421	396	430
Colon, Rectum, and Anus	168	137	166	169	186	168	163	158	169	153
Pancreas	98	95	105	109	118	109	128	124	116	142
Female Breast	103	122	107	108	100	104	109	102	112	106
Prostate	96	88	75	76	75	90	107	71	92	86
Leukemia	82	77	68	89	90	66	61	62	58	73
Chronic Lower Respiratory Diseases	451	485	479	413	440	500	427	505	498	521
Unintentional Injuries	391	407	417	424	461	467	503	537	452	512
Motor Vehicle Accidents	141	99	142	149	151	143	135	166	156	130
Alzheimer's Disease	401	423	462	420	433	421	449	444	437	496
Cerebrovascular Diseases	411	442	410	414	439	381	420	410	387	373
Diabetes	241	267	219	239	223	282	253	262	252	287
Influenza and Pneumonia	166	178	188	186	180	213	195	217	246	189
Suicide	139	125	135	147	141	173	161	192	168	185
Chronic Liver Disease and Cirrhosis	83	98	113	121	128	137	158	152	185	154
Hypertension	93	94	78	72	95	103	92	102	113	126
Septicemia	66	69	64	74	81	119	81	100	117	121
Parkinson's Disease	85	73	53	78	63	80	86	89	104	91
Unspecified Dementia	91	117	111	99	120	126	121	105	133	82
Kidney Disease	72	49	57	62	72	79	92	75	71	72

Source: South Dakota Department of Health, Office of Health Statistics

Table 66b
South Dakota Resident Crude Death Rates for 15 Leading Causes and Selected Components, 2010-2019

Cause of Death	Crude Death Rates									
	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019
All Causes	870.4	882.3	873.9	837.9	879.1	899.7	905.7	918.9	903.5	935.2
Heart Disease	197.9	196.0	198.2	191.4	198.7	199.4	200.1	196.4	203.7	208.0
Cancer	202.8	201.0	194.8	186.3	196.8	190.1	195.4	197.4	185.0	196.2
Trachea, Bronchus, and Lung	53.3	55.5	52.1	49.2	51.5	49.4	48.5	48.4	44.9	48.2
Colon, Rectum, and Anus	20.6	16.6	19.9	20.0	21.8	19.6	18.8	18.2	19.2	17.3
Pancreas	12.0	11.5	12.6	12.9	13.8	12.7	14.8	14.3	13.1	16.1
Female Breast	25.3	29.7	25.8	25.7	23.6	24.4	25.4	23.7	25.6	24.2
Prostate	23.6	21.3	17.9	17.9	17.5	20.8	24.5	16.2	20.6	19.2
Leukemia	10.1	9.3	8.2	10.5	10.5	7.7	7.0	7.1	6.6	8.3
Chronic Lower Respiratory Diseases	55.4	58.9	57.5	48.9	51.6	58.2	49.3	58.1	56.4	58.9
Unintentional Injuries	48.0	49.4	50.0	50.2	54.0	54.4	58.1	61.7	51.2	57.9
Motor Vehicle Accidents	17.3	12.0	17.0	17.6	17.7	16.7	15.6	19.1	17.7	14.7
Alzheimer's Disease	49.3	51.3	55.4	49.7	50.8	49.0	51.9	51.1	49.5	56.1
Cerebrovascular Diseases	50.5	53.6	49.2	49.0	51.5	44.4	48.5	47.1	43.9	42.2
Diabetes	29.6	32.4	26.3	28.3	26.1	32.8	29.2	30.1	28.6	32.4
Influenza and Pneumonia	20.4	21.6	22.6	22.0	21.1	24.8	22.5	25.0	27.9	21.4
Suicide	17.1	15.2	16.2	17.4	16.5	20.2	18.6	22.1	19.0	20.9
Chronic Liver Disease and Cirrhosis	10.2	11.9	13.6	14.3	15.0	16.0	18.3	17.5	21.0	17.4
Hypertension	11.4	11.4	9.4	8.5	11.1	12.0	10.6	11.7	12.8	14.2
Septicemia	8.1	8.4	7.7	8.8	9.5	13.9	9.4	11.5	13.3	13.7
Parkinson's Disease	10.4	8.9	6.4	9.2	7.4	9.3	9.9	10.2	11.8	10.3
Unspecified Dementia	11.2	14.2	13.3	11.7	14.1	14.7	14.0	12.1	15.1	9.3
Kidney Disease	8.8	5.9	6.8	7.3	8.4	9.2	10.6	8.6	8.0	8.1

Note: The crude death rate is calculated using yearly U.S. Census Bureau population estimates for that year.
Source: South Dakota Department of Health, Office of Health Statistics

Table 66c
South Dakota Resident Age-Adjusted Death Rates for 15 Leading Causes and Selected Components, 2010-2019

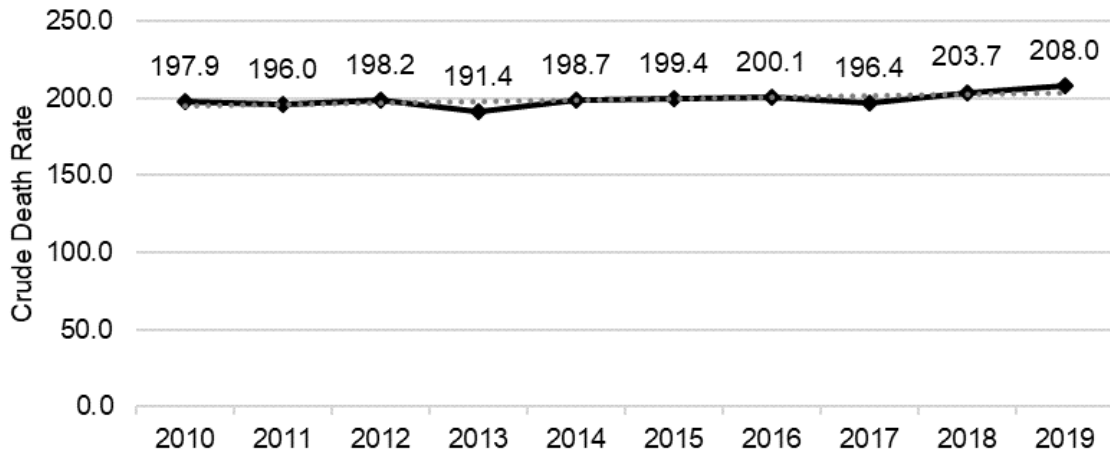
Cause of Death	Age-Adjusted Death Rates									
	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019
All Causes	713.4	716.1	706.8	677.4	709.9	714.9	718.6	736.1	715.7	739.6
Heart Disease	154.9	153.0	153.8	148.8	153.6	151.0	153.7	150.0	156.2	158.1
Cancer	170.6	168.6	162.2	154.3	161.4	153.3	156.6	157.0	145.2	153.3
Trachea, Bronchus, and Lung	45.4	47.2	43.5	41.0	41.8	39.7	38.2	38.2	35.3	37.2
Colon, Rectum, and Anus	17.0	13.9	16.4	16.7	17.6	15.7	15.2	14.2	15.2	13.7
Pancreas	10.2	9.5	10.6	10.7	11.1	10.3	11.6	11.5	10.0	12.3
Female Breast	19.7	23.7	19.5	19.3	17.9	18.7	19.3	17.3	20.0	17.9
Prostate	23.7	20.9	17.7	17.0	16.7	19.6	23.1	15.7	19.0	17.5
Leukemia	8.6	7.8	7.3	9.0	8.8	6.2	5.6	5.5	5.1	6.7
Chronic Lower Respiratory Diseases	46.0	47.4	45.4	39.1	40.7	45.1	38.5	45.4	43.7	45.1
Unintentional Injuries	44.3	44.8	46.6	46.4	49.2	49.3	53.1	56.2	46.5	52.8
Motor Vehicle Accidents	17.0	11.8	17.1	17.4	17.5	16.3	15.8	19.0	17.3	14.6
Alzheimer's Disease	36.2	36.6	39.6	35.1	36.1	34.8	37.1	36.9	36.3	40.6
Cerebrovascular Diseases	39.2	42.0	37.6	37.5	38.8	33.0	35.8	36.3	33.3	32.3
Diabetes	24.6	26.8	21.6	22.9	21.2	26.3	23.6	24.8	23.3	26.8
Influenza and Pneumonia	15.5	16.3	16.9	16.4	16.1	18.3	16.7	19.0	20.8	16.0
Suicide	17.3	15.3	16.1	18.0	17.1	20.4	19.9	22.7	19.4	21.2
Chronic Liver Disease and Cirrhosis	9.7	11.1	13.3	13.3	16.0	15.9	16.4	17.0	19.7	17.1
Hypertension	8.8	8.5	6.8	6.3	8.1	8.7	7.9	8.7	9.4	10.6
Septicemia	6.7	7.0	6.2	7.2	8.1	11.0	7.5	9.4	10.5	10.9
Parkinson's Disease	8.2	7.0	5.1	7.3	6.3	7.2	7.6	8.1	9.5	7.9
Unspecified Dementia	8.3	10.2	9.4	8.4	10.1	10.5	9.6	8.6	10.6	6.6
Kidney Disease	7.1	4.5	5.5	5.7	6.5	7.4	7.8	6.8	6.8	6.2

Note: The age-adjusted death rate is calculated using yearly U.S. Census Bureau population estimates for that year.
Source: South Dakota Department of Health, Office of Health Statistics

The following figures on the next several pages display 10-year trends for crude death rates for the 15 leading causes of death in 2019. Note: The crude death rate is

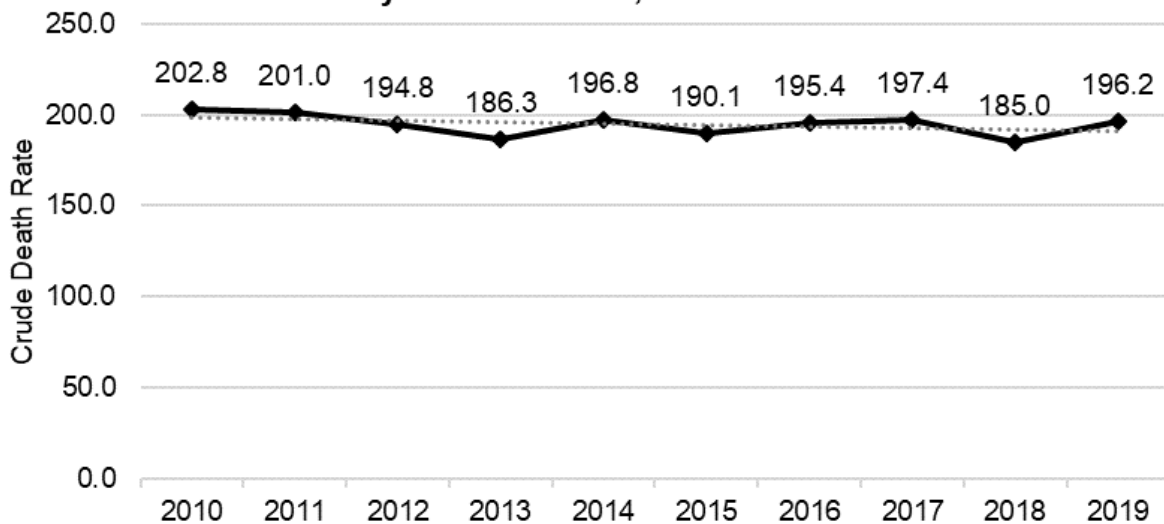
calculated using yearly U.S. Census Bureau population estimates for that year.

Figure 20
South Dakota Resident Crude Death Rate Due to Heart Disease by Year of Death, 2010-2019



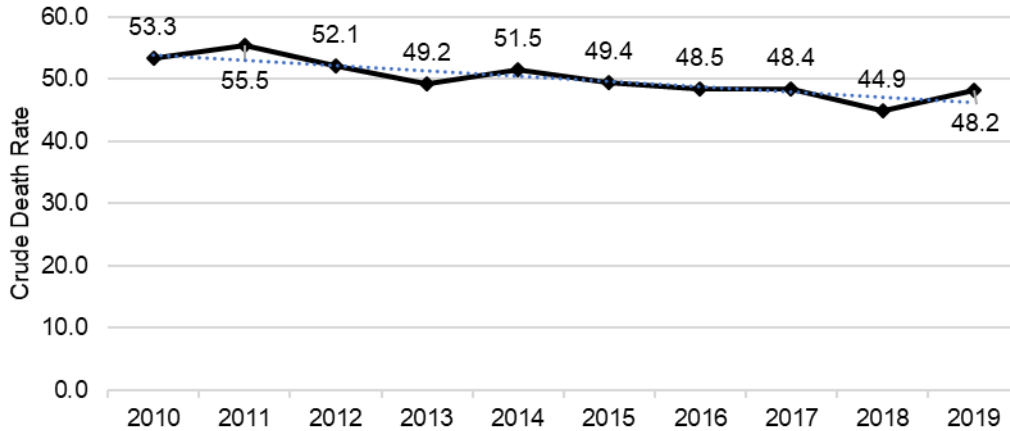
Source: South Dakota Department of Health, Office of Health Statistics

Figure 21
South Dakota Resident Crude Death Rate Due to Cancer by Year of Death, 2010-2019



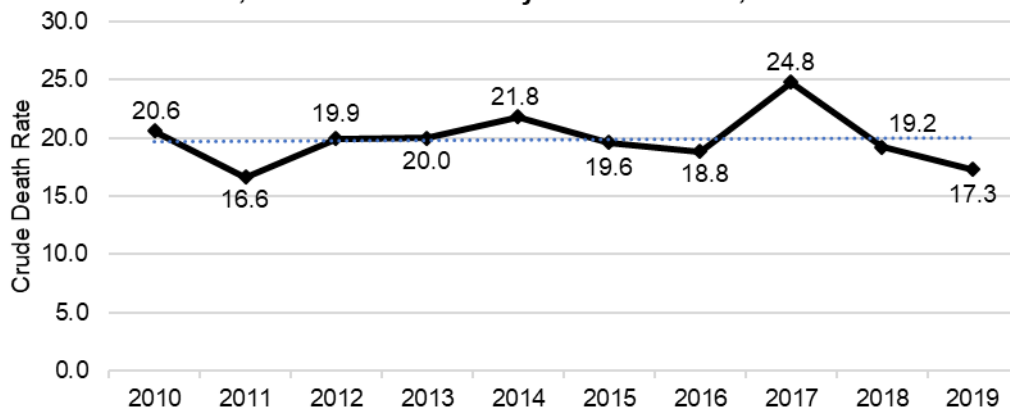
Source: South Dakota Department of Health, Office of Health Statistics

Figure 21a
South Dakota Resident Crude Death Rate Due to Trachea, Bronchus, and Lung Cancer by Year of Death, 2010-2019



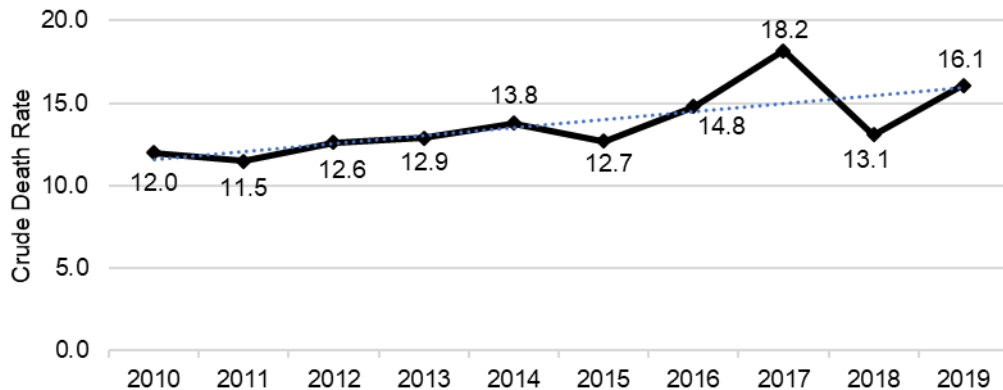
Source: South Dakota Department of Health, Office of Health Statistics

Figure 21b
South Dakota Resident Crude Death Rate Due to Colon, Rectum, and Anus Cancer by Year of Death, 2010-2019



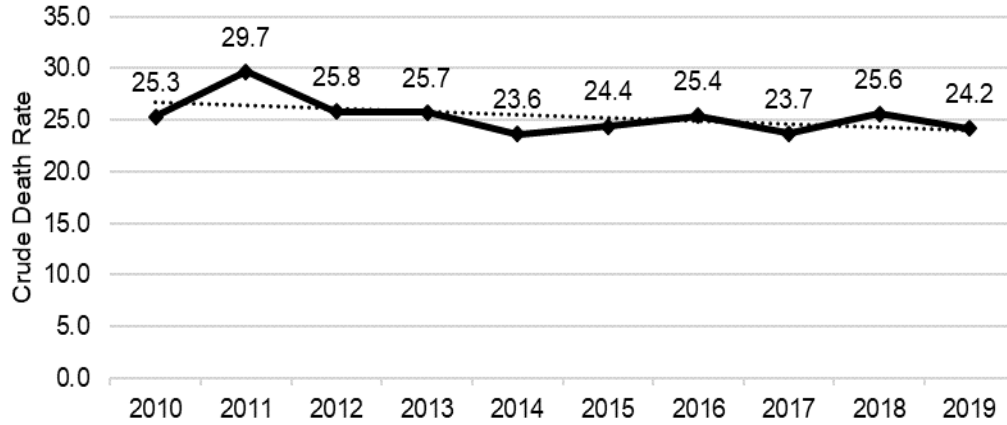
Source: South Dakota Department of Health, Office of Health Statistics

Figure 21c
South Dakota Resident Crude Death Rate Due to Pancreas Cancer by Year of Death, 2010-2019



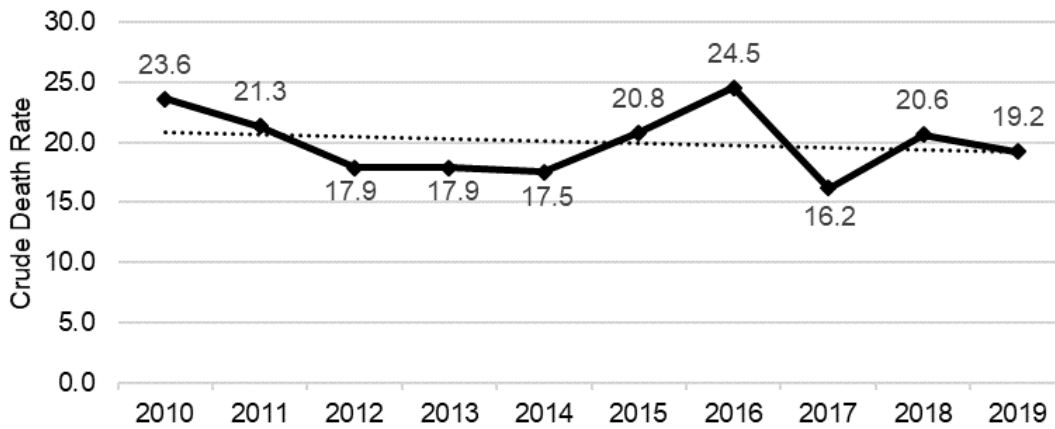
Source: South Dakota Department of Health, Office of Health Statistics

Figure 21d
South Dakota Resident Crude Death Rate Due to Female Breast Cancer by Year of Death, 2010-2019



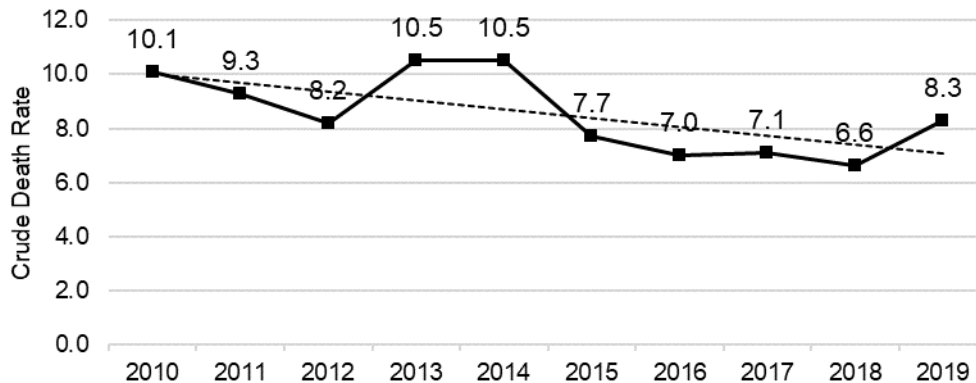
Source: South Dakota Department of Health, Office of Health Statistics

Figure 21e
South Dakota Resident Crude Death Rate Due to Prostate Cancer by Year of Death, 2010-2019



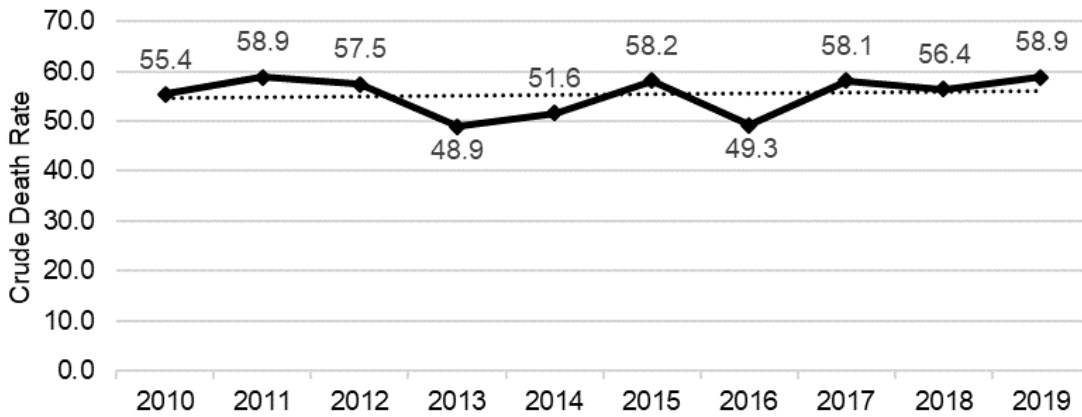
Source: South Dakota Department of Health, Office of Health Statistics

Figure 21f
South Dakota Resident Crude Death Rate Due to Leukemia by Year of Death, 2010-2019



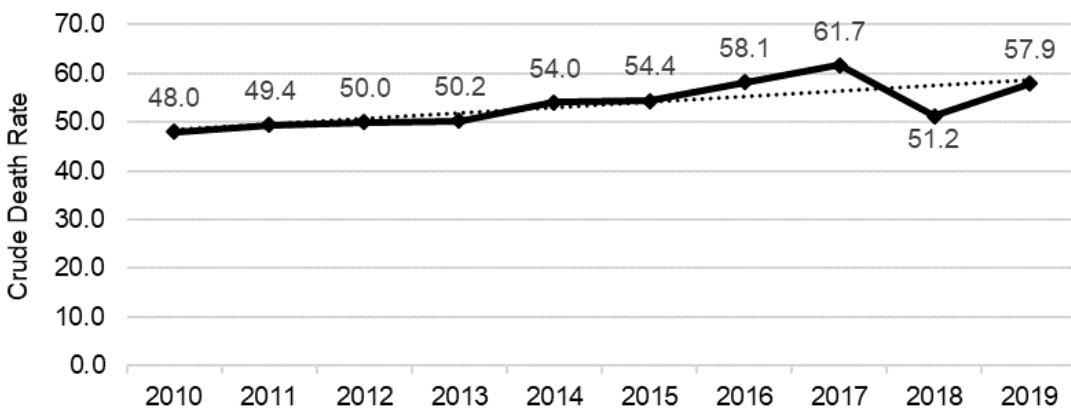
Source: South Dakota Department of Health, Office of Health Statistics

Figure 22
South Dakota Resident Crude Death Rate Due to Chronic Lower Respiratory Disease by Year of Death, 2010-2019



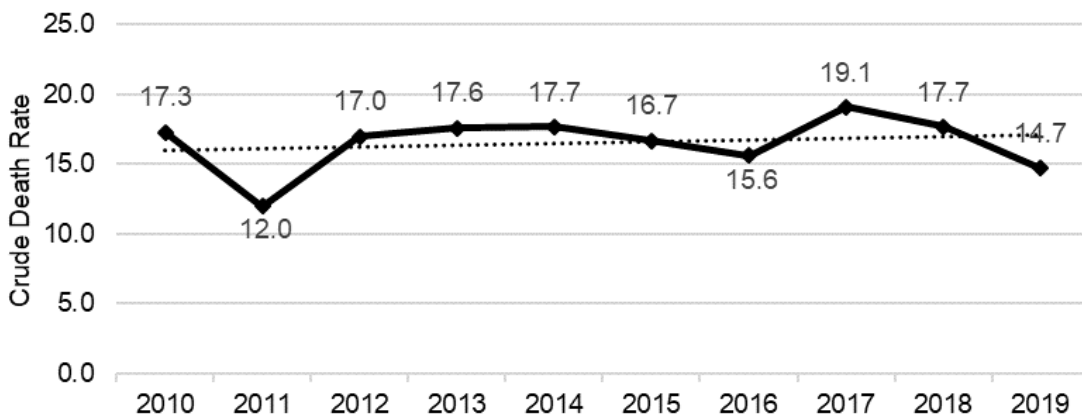
Source: South Dakota Department of Health, Office of Health Statistics

Figure 23
South Dakota Resident Crude Death Rate Due to Unintentional Injuries by Year of Death, 2010-2019



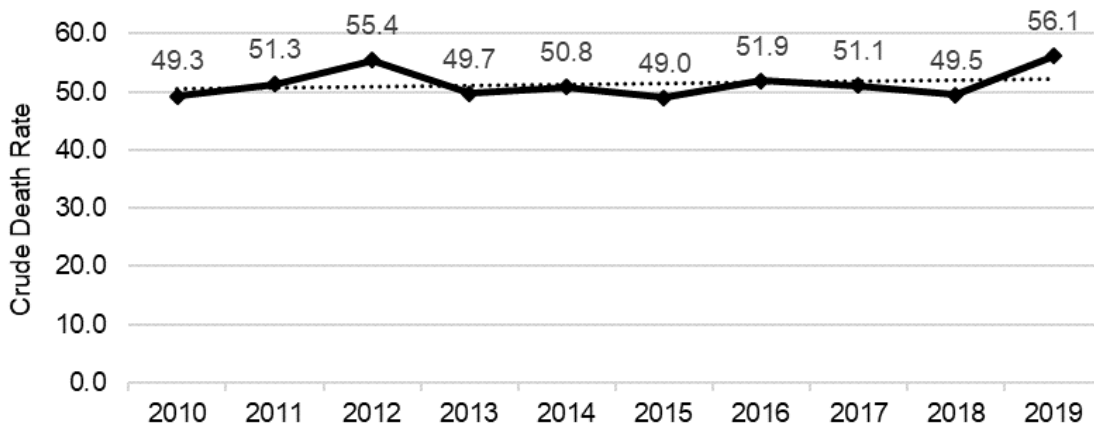
Source: South Dakota Department of Health, Office of Health Statistics

Figure 23a
South Dakota Resident Crude Death Rate Due to Motor Vehicle Accidents by Year of Death, 2010-2019



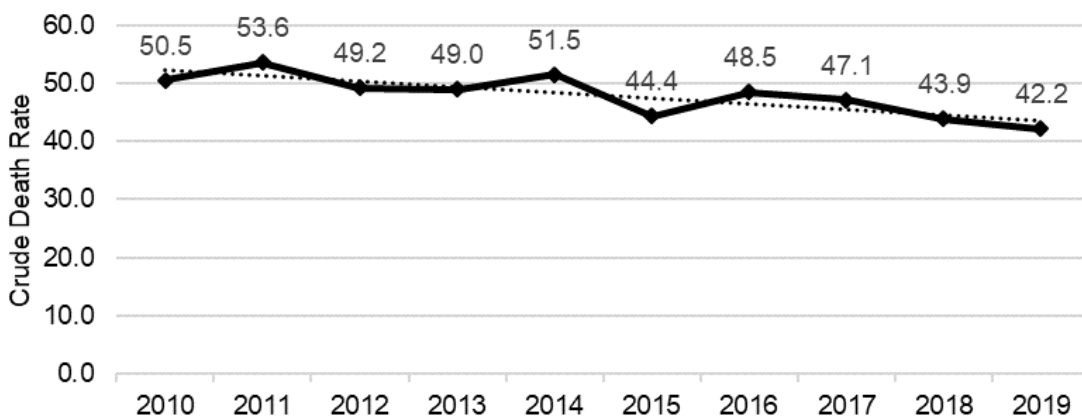
Source: South Dakota Department of Health, Office of Health Statistics

Figure 24
South Dakota Resident Crude Death Rate Due to Alzheimer's Disease by Year of Death, 2010-2019



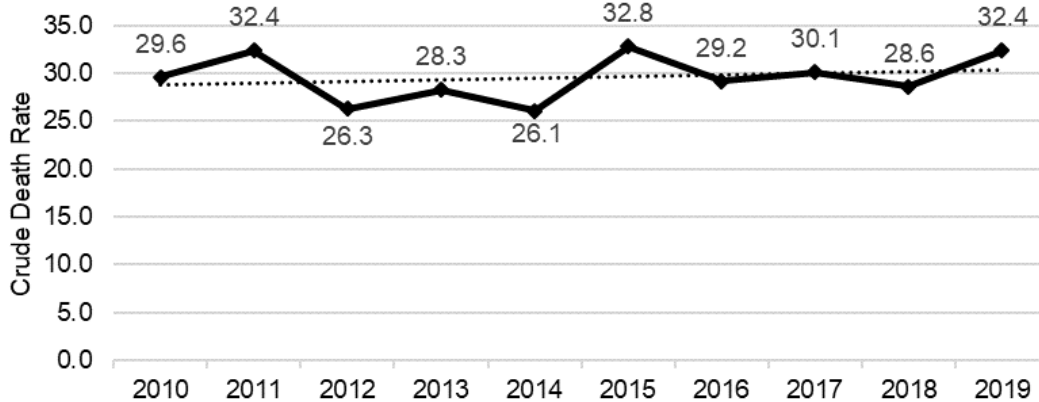
Source: South Dakota Department of Health, Office of Health Statistics

Figure 25
South Dakota Resident Crude Death Rate Due to Cerebrovascular Disease by Year of Death, 2010-2019



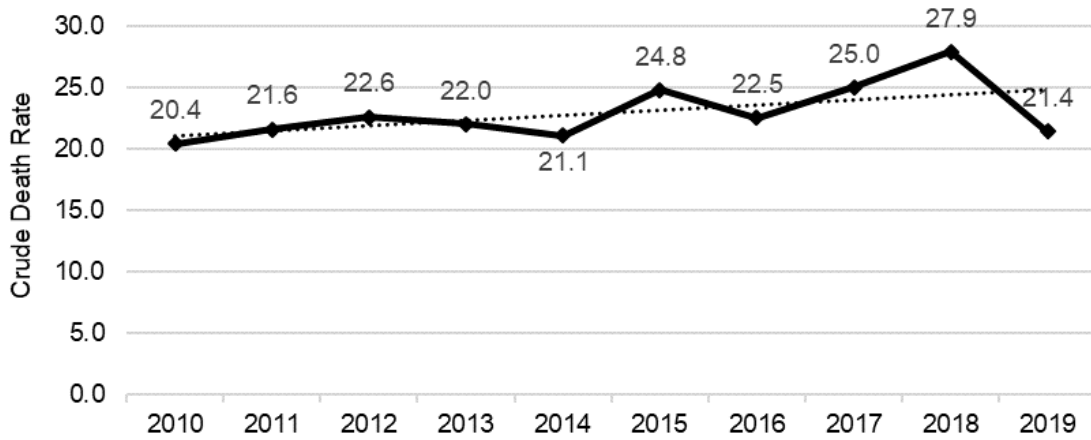
Source: South Dakota Department of Health, Office of Health Statistics

Figure 26
South Dakota Resident Crude Death Rate Due to Diabetes by Year of Death, 2010-2019



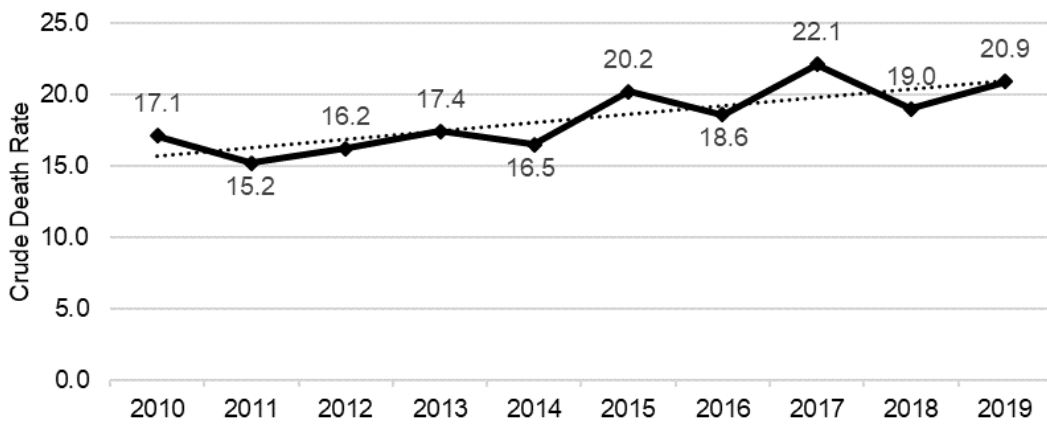
Source: South Dakota Department of Health, Office of Health Statistics

Figure 27
South Dakota Resident Crude Death Rate Due to Influenza and Pneumonia by Year of Death, 2010-2019



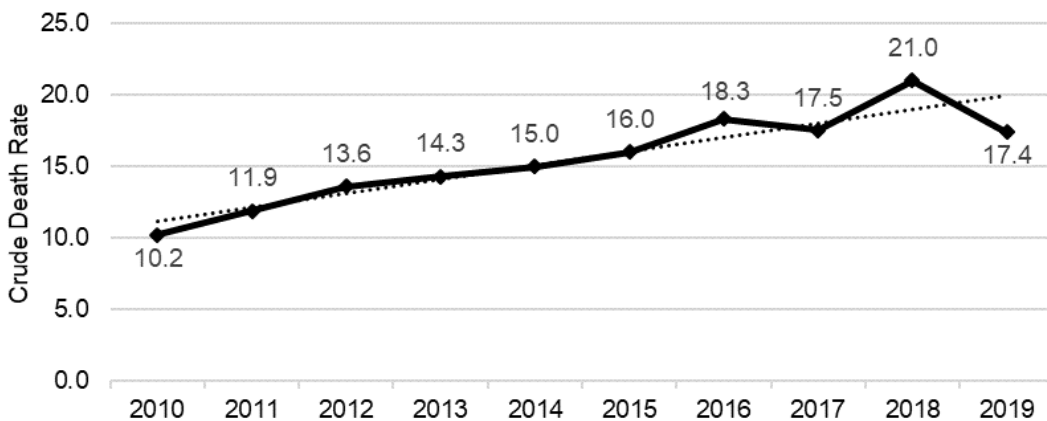
Source: South Dakota Department of Health, Office of Health Statistics

Figure 28
South Dakota Resident Crude Death Rate Due to Suicide by Year of Death, 2010-2019



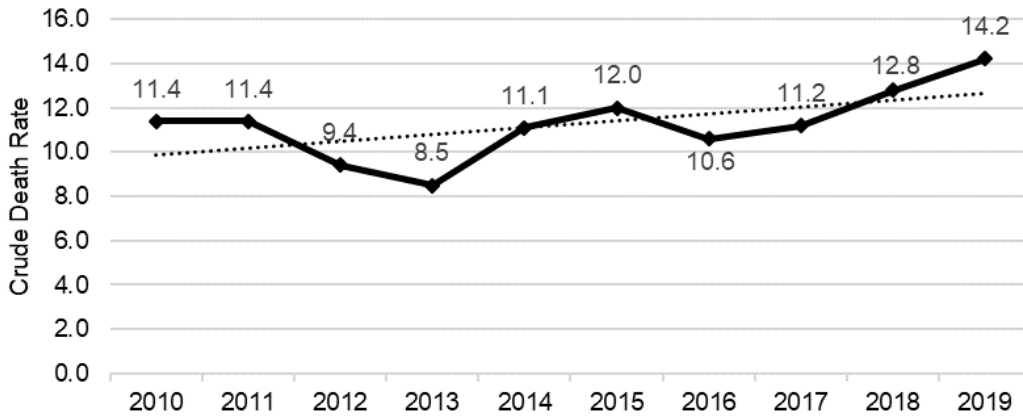
Source: South Dakota Department of Health, Office of Health Statistics

Figure 29
South Dakota Resident Crude Death Rate Due to Chronic Liver Disease and Cirrhosis by Year of Death, 2010-2019



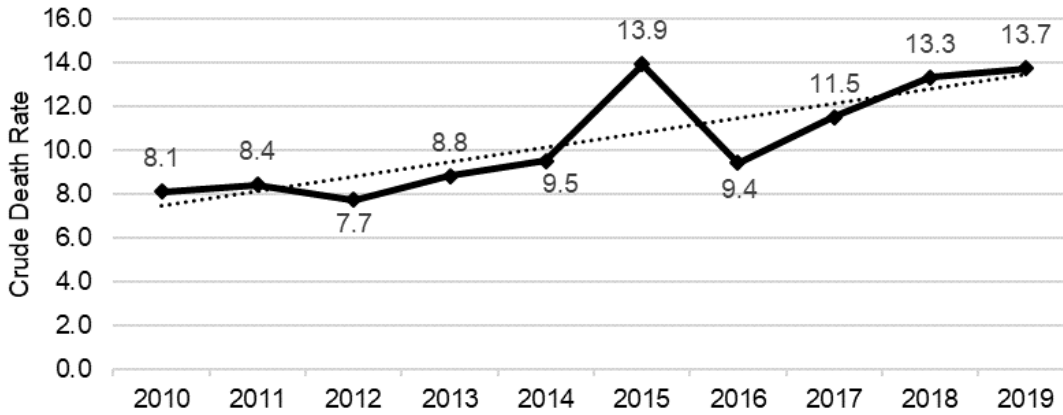
Source: South Dakota Department of Health, Office of Health Statistics

Figure 30
South Dakota Resident Crude Death Rate Due to Hypertension by Year of Death, 2010-2019



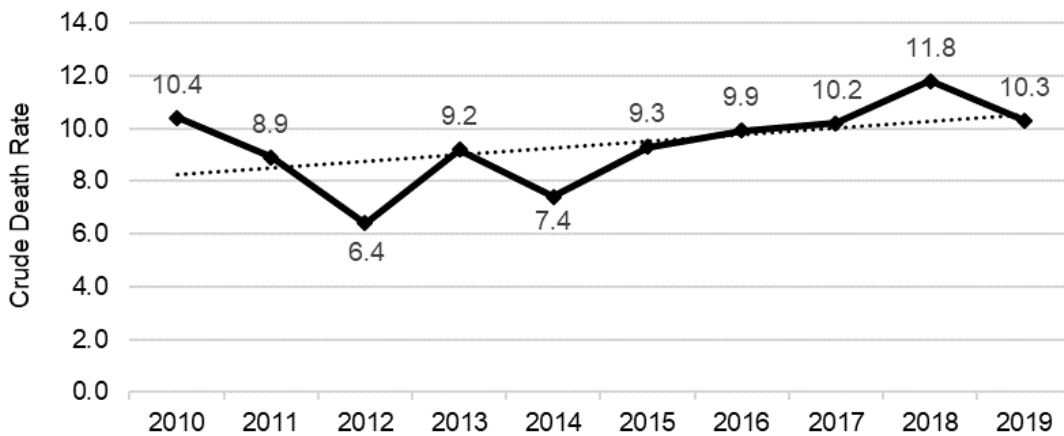
Source: South Dakota Department of Health, Office of Health Statistics

Figure 31
South Dakota Resident Crude Death Rate Due to Septicemia by Year of Death, 2010-2019



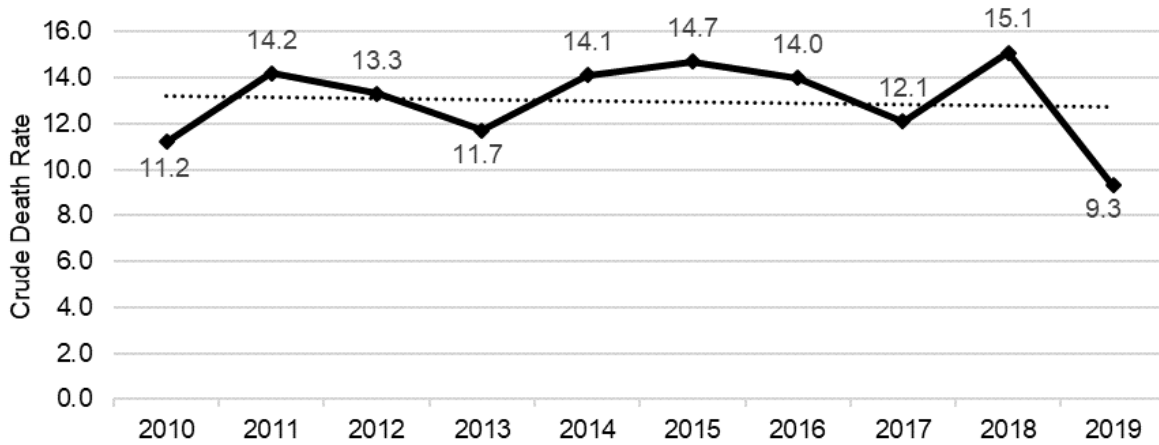
Source: South Dakota Department of Health, Office of Health Statistics

Figure 32
South Dakota Resident Crude Death Rate Due to Parkinson's Disease by Year of Death, 2010-2019



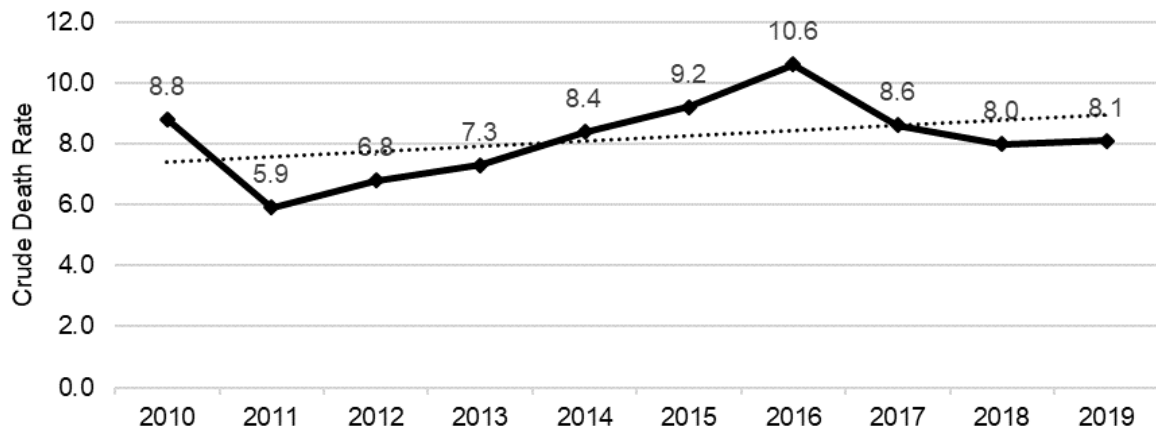
Source: South Dakota Department of Health, Office of Health Statistics

Figure 33
South Dakota Resident Crude Death Rate Due to Unspecified Dementia by Year of Death, 2010-2019



Source: South Dakota Department of Health, Office of Health Statistics

Figure 34
South Dakota Resident Crude Death Rate Due to Kidney Disease by Year of Death, 2010-2019



Source: South Dakota Department of Health, Office of Health Statistics

Marriage & Divorce

An Overview: 2019	
Marriages:	
Number Occurring in S.D.	5,403
S.D. Rate per 1,000 Population	6.1
U.S. Rate per 1,000 Population	6.5*
**Divorces:	
Number Occurring in S.D.	2,308
S.D. Rate Per 1,000 Population	2.6
U.S. Rate per 1,000 Population	2.9*
Years Married Before Termination in S.D.	
Mean	11
Median	9
Mode	2
Range	
Lower	Less Than 1
Upper	57

Source: National Center for Health Statistics and South Dakota Department of Health, Office of Health Statistics

Note: The U.S. marriage and divorce rates are provisional from 2018.

* The U.S. divorce rate only includes 45 reporting states and the District of Columbia.

** Divorces include annulments.

Marriages in South Dakota

In 2019, the South Dakota marriage rate decreased to 6.1, down from 6.5 in 2018. The number of marriages in 2019 (5,403) is the lowest in over 15 years.

Table 67, below, provides the United States and South Dakota marriage rates from 2005 through 2019.

Table 67
Marriages and Marriage Rates by Occurrence,
South Dakota and United States, 2005-2019

Year	United States*		South Dakota	
	Number	Crude Rate	Number	Crude Rate
2019	NA**	NA**	5,403	6.1
2018	2,132,853	6.5	5,757	6.5
2017	2,236,496	6.9	5,862	6.7
2016	2,251,411	7.0	6,271	7.2
2015	2,221,579	6.9	6,195	7.2
2014	2,140,272	6.9	6,040	7.1
2013	2,081,301	6.8	5,919	7.0
2012	2,131,000	6.8	6,236	7.5
2011	2,118,000	6.8	6,145	7.5
2010	2,096,000	6.8	5,939	7.3
2009	2,080,000	6.8	5,887	7.2
2008	2,157,000	7.1	6,148	7.6
2007	2,197,000	7.3	6,138	7.7
2006	2,193,000	7.5	6,303	8.0
2005	2,249,000	7.6	6,551	8.4

Note: *The marriage data for the United States is provisional for all years. **2019 data is not available at the time of publication.

Crude marriage rates are per 1,000 population. The 2006 U.S. number and rate excludes data from Louisiana. The 2013 and 2014 U.S. number and rate excludes data from Georgia.

Source: National Center for Health Statistics and South Dakota Department of Health, Office of Health Statistics

Table 68, below, displays marriages by month over the past five years. The most

common time to have a wedding for all years is from June to September.

Table 68
Month of Marriages for Marriages Occurring in South Dakota, 2015-2019

Year	2015		2016		2017		2018		2019	
	Num	%	Num	%	Num	%	Num	%	Num	%
Total	6,195	100	6,271	100	5,862	100	5,757	100	5,403	100
January	199	3.2	239	3.8	211	3.6	217	3.8	204	3.8
February	232	3.7	247	3.9	220	3.8	244	4.2	207	3.8
March	250	4.0	215	3.4	288	4.9	277	4.8	229	4.2
April	334	5.4	372	5.9	340	5.8	329	5.7	245	4.5
May	585	9.4	546	8.7	493	8.4	447	7.8	459	8.5
June	866	14.0	875	14.0	805	13.7	841	14.6	816	15.1
July	816	13.2	845	13.5	761	13.0	609	10.6	584	10.8
August	972	15.7	805	12.8	685	11.7	815	14.2	771	14.3
September	770	12.4	830	13.2	903	15.4	833	14.5	771	14.3
October	569	9.2	673	10.7	548	9.3	587	10.2	538	10.0
November	283	4.6	290	4.6	263	4.5	274	4.8	290	5.4
December	319	5.1	334	5.3	345	5.9	282	4.9	289	5.3

Source: South Dakota Department of Health, Office of Health Statistics

Divorces in South Dakota

Table 69, below, lists the divorce rates for South Dakota and the United States. The 2019 South Dakota divorce rate was 2.6

divorces per 1,000 population, which remained the same from 2018.

Table 69
Number and Rate of Divorces by Occurrence, South Dakota and United States, 2005-2019

Year	United States*		South Dakota	
	Number	Crude Rate	Number	Crude Rate
2019	NA**	NA**	2,308	2.6
2018	782,038	2.9	2,265	2.6
2017	787,251	2.9	2,340	2.7
2016	776,288	3.0	2,400	2.8
2015	800,909	3.1	2,252	2.6
2014	813,862	3.2	2,374	2.8
2013	832,157	3.3	2,450	2.9
2012	851,000	3.4	2,550	3.1
2011	877,000	3.6	2,694	3.3
2010	872,000	3.6	2,774	3.4
2009	840,000	3.5	2,686	3.3
2008	844,000	3.5	2,459	3.1
2007	856,000	3.6	2,438	3.1
2006	872,000	3.7	2,465	3.1
2005	847,000	3.6	2,354	3.0

Note: *The U.S. data is provisional for all years. Crude divorce rates are per 1,000 population. **2019 data are not available at time of publication. The years 2017 and 2018 excludes data from California, Hawaii, Indiana, Minnesota, and New Mexico. The year 2016 excludes data for California, Georgia, Hawaii, Indiana, Minnesota, and New Mexico. The years 2013-2015 exclude California, Georgia, Hawaii, Indiana, and Minnesota. The years 2005-2012 exclude data for California, Georgia, Hawaii, Indiana, Louisiana, and Minnesota.

Source: National Center for Health Statistics and South Dakota Department of Health, Office of Health Statistics

For South Dakota, the mean or average duration of the marriages ending in divorce during 2019 was 11 years, the median duration was nine years, and the modal duration was two years. The length of time before terminating the marriage ranged from less than one year to 57 years for South Dakota divorces in 2019.

Table 70, below, displays the duration of marriages ending in divorce for the past 10 years. In 2019, zero to four years and five to nine years is the length most marriages lasted with 28.5 and 24.3 percent, respectively.

Table 70
Duration of Marriage Ending in Divorces by Year for Divorces Occurring in South Dakota, 2010-2019

Year	0-4 Years		5-9 Years		10-14 Years		15-19 Years		20-24 Years		25-29 Years		30+ Years	
	Num	%	Num	%	Num	%	Num	%	Num	%	Num	%	Num	%
2019	658	28.5	560	24.3	410	17.8	259	11.2	169	7.3	100	4.3	152	6.6
2018	692	30.6	563	24.9	368	16.2	276	12.2	165	7.3	98	4.3	103	4.5
2017	719	30.8	543	23.2	374	16.0	278	11.9	178	7.6	115	4.9	131	5.6
2016	791	33.0	553	23.0	386	16.1	253	10.5	175	7.3	105	4.4	137	5.7
2015	735	32.6	528	23.4	355	15.8	231	10.3	182	8.1	94	4.2	127	5.6
2014	755	31.8	591	24.9	359	15.1	235	9.9	193	8.1	114	4.8	127	5.3
2013	783	32.0	626	25.6	389	15.9	266	10.9	167	6.8	109	4.4	110	4.5
2012	845	33.0	648	25.4	387	15.2	235	9.2	198	7.8	119	4.7	121	4.7
2011	884	32.8	686	25.5	415	15.4	285	10.6	184	6.8	119	4.4	121	4.5
2010	951	34.3	703	25.3	431	15.5	281	10.1	178	6.4	106	3.8	124	4.5

Source: South Dakota Department of Health, Office of Health Statistics

Table 71, below, displays the number of children involved in divorces for the past 10

years. Slightly over half (52.2%) of all divorces in 2019 did not involve children.

Table 71
Number of Children Involved in Divorce by Year for Divorces Occurring in South Dakota, 2010-2019

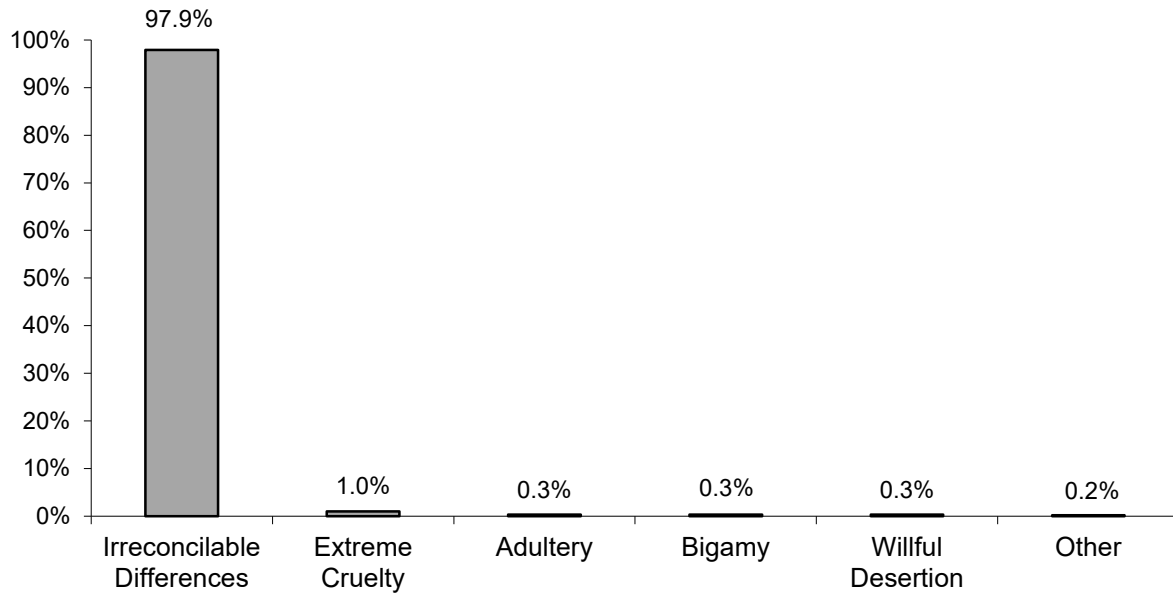
Year	Total		No Children Involved		1 Child Involved		2 Children Involved		3 Children Involved		4 or More Children Involved		Not Stated	
	Num	%	Num	%	Num	%	Num	%	Num	%	Num	%	Num	%
2019	2,308	100	1,204	52.2	443	19.2	423	18.3	186	8.1	52	2.3	0	-
2018	2,265	100	1,164	51.4	412	18.2	446	19.7	179	7.9	64	2.8	0	-
2017	2,340	100	1,227	52.4	410	17.5	485	20.7	159	6.8	59	2.5	0	-
2016	2,400	100	1,298	54.1	459	19.1	432	18.0	166	6.9	43	1.8	2	-
2015	2,252	100	1,190	52.8	444	19.7	404	17.9	166	7.4	48	2.1	0	-
2014	2,374	100	1,256	52.9	502	21.2	414	17.4	156	6.6	45	1.9	1	-
2013	2,450	100	1,220	49.8	484	19.8	494	20.2	199	8.1	53	2.2	0	-
2012	2,550	100	1,290	50.6	503	19.7	523	20.5	181	7.1	52	2.0	1	-
2011	2,694	100	1,348	50.0	535	19.9	562	20.9	180	6.7	69	2.6	0	-
2010	2,774	100	1,370	49.4	596	21.5	562	20.3	197	7.1	49	1.8	0	-

Source: South Dakota Department of Health, Office of Health Statistics

Figure 35, on the next page, displays causes for the divorce. The majority of

divorces in 2019 stated irreconcilable differences with 97.9 percent.

Figure 35
Causes for Divorce for Divorces Occurring in South Dakota, 2019



Source: South Dakota Department of Health, Office of Health Statistics

Infectious Diseases in South Dakota, 2019

The South Dakota Department of Health (SDDOH) strives to promote healthy living and to protect the health of all South Dakotans. A core public health function is the surveillance of infectious diseases in the state.

Infectious disease surveillance monitors patterns of disease occurrence and assesses the health status of South Dakota's population. Surveillance can detect sudden changes in disease occurrence, such as an outbreak, or identify long-term disease trends or new and emerging diseases. Surveillance activities are linked to public health actions, such as investigation, control and prevention, evaluation, or planning and allocating resources to address the diseases affecting the population.

SDDOH is authorized by South Dakota Codified Law 34-22-12 and Administrative Rules Article 44:20 to receive and process mandatory reports of communicable diseases by physicians, hospitals, laboratories, and institutions, and to establish public health measures to control and prevent disease transmission.

This report provides an overview of disease surveillance conducted by SDDOH in 2019. It highlights important statistics and shows key trends on selected reportable diseases in the state.

Table 72 Reportable Diseases in South Dakota, 2010-2019 (Calendar years)

Reportable diseases	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	Total
Babesiosis	0	0	0	1	1	0	0	0	0	0	2
Botulism	0	0	0	0	0	0	0	0	0	0	0
Brucellosis	0	0	0	1	0	0	0	1	0	0	2
Campylobacteriosis	297	301	276	296	307	346	450	395	532	524	3724
Carbapenem-resistant <i>Enterobacteriaceae</i> (CRE)	NR	NR	NR	12	3	37	58	64	53	40	267
Chicken Pox (Varicella)	62	67	32	43	23	27	32	24	31	26	367
Chlamydia	3187	3412	3925	3947	4129	3967	4336	4439	4441	4545	40328
Coccidioidomycosis	NR	NR	NR	NR	NR	NR	5	6	3	8	22
Cryptosporidiosis	108	143	113	175	151	248	158	163	177	167	1603
Cyclosporiasis	0	0	0	1	0	0	3	4	30	10	48
Ehrlichiosis and Anaplasmosis	0	4	1	1	0	0	1	1	4	0	12
Giardiasis	102	110	144	111	131	129	116	104	114	92	1153
Gonorrhea	467	602	707	789	880	1055	1271	1291	1694	2170	10926
Hantavirus pulmonary syndrome	0	1	1	0	0	0	0	1	0	2	5
Hepatitis A	1	2	0	4	3	2	1	1	1	8	23
Hepatitis B, chronic	51	51	51	80	58	52	60	52	46	37	538
Hepatitis B, acute	2	2	2	5	3	2	2	2	1	5	26
Hepatitis C, chronic	350	356	392	406	516	570	714	563	545	583	4995
Hepatitis C, acute	0	0	4	1	0	0	22	20	19	31	97
<i>Haemophilus influenzae</i> type b	0	1	0	3	0	1	1	1	0	1	8
Hemolytic uremic syndrome	2	0	0	0	1	1	1	0	0	5	10
HIV and AIDS	35	21	29	36	31	25	47	41	31	38	334
Legionellosis	9	2	9	8	9	10	9	15	33	23	127
Leprosy	0	0	0	0	0	0	0	0	0	0	0
Listeriosis	3	1	0	0	0	0	0	2	1	0	7
Lyme disease	1	4	4	4	2	5	11	12	7	10	60
Malaria	3	2	5	7	5	4	4	8	9	6	53
Measles	0	0	0	0	8	2	0	0	0	0	10
Meningococcal disease	0	3	0	4	2	1	1	0	0	0	11

Reportable diseases	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	Total
Mumps	2	0	0	0	0	0	2	0	0	12	16
Pertussis	32	37	71	67	109	16	15	9	163	147	666
Q fever	4	1	2	4	5	5	4	5	12	11	53
Rabies, animal	32	40	60	28	21	29	27	22	15	16	290
Salmonellosis	186	162	170	183	164	230	305	226	227	166	2019
Shiga toxin-producing <i>E. coli</i>	35	41	48	42	41	62	84	91	204	136	784
Shigellosis	7	6	11	190	616	285	28	29	26	9	1207
Spotted fever rickettsiosis	0	1	1	7	3	2	6	13	14	10	57
Methicillin-resistant <i>Staph aureus</i> (MRSA), invasive	98	91	89	94	124	159	144	115	173	156	1243
<i>Strep. pneumoniae</i> , invasive	NR	42	97	99	88	110	129	135	106	101	907
Syphilis (primary, secondary, and early non-primary non-secondary)	4	0	21	49	76	48	41	52	50	56	397
Syphilis, congenital	0	0	0	0	3	0	2	3	1	3	12
Toxic shock syndrome	0	0	0	0	0	3	1	0	1	0	5
Tularemia	11	8	5	7	5	25	14	13	9	17	114
Tuberculosis	15	15	19	9	8	17	12	14	12	16	137
Typhoid fever	1	0	0	3	0	1	2	0	0	0	7
West Nile fever	16	2	141	92	45	29	117	46	122	11	621
West Nile neuroinvasive	4	0	62	57	12	11	35	27	47	0	255
Vibriosis	NR	NR	NR	NR	NR	NR	5	12	9	3	29

*NR = not reportable

Source: South Dakota Department of Health, Office of Disease Prevention Services, Mavens report by calendar year. Minor variances from past reports reflect differences between MMWR year and calendar year, cross-year deduplication and recategorization.

Table 73 Reportable Diseases by County of Residence, South Dakota, 2019 (Calendar years)

County of residence	Campylobacteriosis	Chlamydia	Cryptosporidiosis	Giardiasis	Gonorrhea	Hepatitis B, chronic	Hepatitis C, chronic	Legionellosis	MRSA, invasive	Pertussis	Salmonella	Shigellosis	<i>Strep. pneumoniae</i> , invasive	Shiga Toxin-Prod <i>E. coli</i>	Tularemia	Varicella (Chicken pox)	West Nile disease
TOTAL	524	4545	167	92	2170	37	583	23	156	147	166	9	101	136	17	26	11
Incidence*	59.2	513.8	18.9	10.4	245.3	4.1	65.9	2.6	17.6	16.6	18.8	1.0	11.4	15.4	1.9	2.9	1.2
Aurora	12	10	0	0	0	<5	0	0	0	0	<5	0	<5	<5	0	0	0
Beadle	14	54	6	6	5	<5	5	0	<5	0	<5	0	<5	<5	<5	0	0
Bennett	<5	24	0	0	25	0	0	0	<5	0	<5	0	0	0	0	0	0
Bon Homme	<5	8	<5	0	<5	<5	9	<5	0	0	0	0	<5	0	0	0	0
Brookings	18	144	9	8	19	<5	<5	<5	0	8	0	<5	<5	0	0	<5	0
Brown	22	153	6	5	44	<5	7	<5	5	0	<5	0	7	<5	<5	<5	0
Brule	5	26	0	0	13	0	5	0	<5	<5	0	0	<5	0	<5	0	0
Buffalo	<5	35	0	0	18	0	9	0	<5	0	0	0	<5	0	<5	0	0
Butte	12	40	<5	<5	<5	<5	<5	<5	0	0	0	0	<5	6	0	0	0
Campbell	<5	<5	0	0	0	0	0	0	0	0	<5	0	0	0	0	0	0
Charles Mix	11	65	<5	<5	33	0	20	0	0	<5	<5	0	<5	<5	<5	0	0
Clark	6	<5	0	<5	0	0	<5	0	6	0	0	0	0	<5	0	<5	0
Clay	11	78	8	<5	17	0	<5	0	<5	0	5	0	<5	<5	0	<5	0
Codington	13	86	10	<5	15	0	<5	<5	<5	10	<5	0	0	9	0	0	0
Corson	8	63	0	0	60	0	31	0	<5	6	0	0	0	<5	0	0	0
Custer	<5	15	0	<5	<5	0	9	0	<5	0	0	0	0	8	0	0	0
Davison	18	93	7	<5	24	0	11	0	5	0	<5	0	<5	0	0	0	0
Day	<5	15	<5	0	<5	0	0	0	0	0	0	0	0	0	0	0	<5
Deuel	<5	<5	<5	0	<5	0	0	0	0	0	<5	0	0	<5	0	0	0
Dewey	17	129	<5	<5	88	0	23	0	<5	0	<5	0	0	<5	0	0	0
Douglas	6	<5	<5	0	0	0	0	0	<5	<5	0	0	<5	<5	0	0	0
Edmunds	7	<5	0	0	<5	0	<5	0	0	0	<5	0	0	<5	0	0	0
Fall River	7	15	<5	<5	<5	0	<5	0	<5	0	<5	0	<5	5	0	0	0

County of residence	Campylobacteriosis	Chlamydia	Cryptosporidiosis	Giardiasis	Gonorrhea	Hepatitis B, chronic	Hepatitis C, chronic	Legionellosis	MRSA, Invasive	Pertussis	Salmonella	Shigellosis	Strep. pneumo, Invasive	Shiga Toxin-Prod E. coli	Tularemia	Varicella (Chicken pox)	West Nile disease
Faulk	<5	<5	<5	<5	0	0	0	<5	0	0	0	0	0	0	0	0	0
Grant	<5	15	<5	<5	<5	0	<5	<5	<5	<5	<5	0	<5	<5	0	0	0
Gregory	9	10	<5	<5	<5	0	<5	<5	0	0	<5	0	0	<5	0	0	<5
Haakon	0	<5	0	0	0	0	0	<5	0	0	<5	0	0	<5	0	0	0
Hamlin	<5	10	6	<5	<5	<5	<5	0	<5	<5	<5	0	0	<5	0	0	<5
Hand	<5	0	0	0	<5	0	0	<5	0	0	0	0	<5	0	0	0	0
Hanson	<5	<5	0	0	0	0	<5	0	<5	<5	<5	0	0	<5	0	0	0
Harding	<5	0	0	0	0	0	0	0	0	0	0	0	0	<5	0	0	0
Hughes	8	77	0	<5	59	0	16	0	<5	0	0	0	5	<5	<5	0	<5
Hutchinson	7	<5	8	<5	<5	0	<5	0	<5	<5	<5	0	<5	<5	0	<5	0
Hyde	<5	0	0	0	0	0	0	0	0	0	0	0	0	0	0	<5	0
Jackson	<5	24	0	0	15	0	<5	0	<5	0	0	0	0	0	0	<5	0
Jerauld	6	<5	<5	0	0	0	0	0	0	0	<5	0	0	0	0	0	0
Jones	0	<5	0	0	<5	0	0	0	0	0	0	0	0	0	0	0	0
Kingsbury	8	13	<5	0	6	0	<5	0	<5	0	<5	0	<5	0	0	<5	<5
Lake	5	27	<5	0	<5	0	<5	0	0	0	<5	0	0	0	0	0	0
Lawrence	9	98	<5	<5	19	0	14	<5	<5	0	<5	0	<5	<5	0	0	0
Lincoln	18	164	10	<5	32	<5	8	<5	10	20	12	<5	5	5	<5	<5	0
Lyman	5	42	<5	0	29	0	13	0	<5	<5	0	0	<5	0	0	0	0
Marshall	<5	<5	0	<5	<5	0	0	0	<5	0	0	0	0	0	0	0	0
McCook	<5	11	<5	<5	<5	0	0	0	<5	0	0	0	<5	<5	0	<5	0
McPherson	<5	<5	<5	<5	<5	0	0	0	0	<5	<5	0	0	0	0	0	<5
Meade	18	90	<5	<5	18	<5	14	<5	<5	<5	6	0	<5	12	0	<5	0
Mellette	0	8	0	0	14	0	0	0	<5	0	0	0	0	0	<5	0	<5
Miner	<5	<5	<5	0	0	0	0	0	<5	0	0	0	0	0	0	0	0
Minnehaha	48	1127	32	22	681	19	148	5	36	90	34	5	26	12	0	5	<5
Moody	5	31	<5	0	14	0	9	0	<5	0	<5	0	0	<5	0	0	0
Oglala Lakota	7	363	<5	<5	211	<5	20	0	<5	0	0	0	<5	<5	<5	0	0
Pennington	53	758	7	7	364	<5	111	<5	22	<5	25	0	12	8	<5	<5	0
Perkins	5	<5	0	0	0	0	0	0	0	0	0	0	<5	0	0	0	0
Potter	<5	5	0	0	<5	0	0	0	0	0	0	0	0	0	0	0	0
Roberts	9	81	<5	<5	30	0	13	<5	5	<5	7	<5	<5	16	<5	0	0
Sanborn	<5	5	<5	0	<5	0	0	0	0	0	<5	0	<5	<5	0	0	0
Spink	9	<5	0	0	0	0	0	<5	<5	0	0	0	0	<5	<5	0	0
Stanley	<5	9	<5	0	<5	0	0	0	<5	0	0	0	<5	0	0	0	0
Sully	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Todd	10	277	0	<5	199	0	29	<5	<5	0	<5	0	<5	<5	<5	0	0
Tripp	14	24	0	<5	6	0	0	0	<5	0	<5	0	0	0	<5	0	0
Turner	<5	11	<5	<5	<5	0	0	0	0	0	<5	0	0	<5	0	0	<5
Union	<5	36	<5	0	11	<5	<5	0	<5	0	<5	0	<5	3	0	<5	0
Walworth	<5	16	0	0	<5	0	<5	0	<5	0	<5	0	0	0	0	0	0
Yankton	10	94	7	<5	33	<5	19	0	<5	<5	9	0	7	7	0	<5	0
Ziebach	<5	20	0	0	14	0	<5	0	0	0	0	0	0	0	0	0	0

*Incidence: cases per 100,000 population
Individual county events of 1, 2, 3 or 4 are published as <5

Table 74 Reportable Diseases by Gender, Race and Age, South Dakota, 2019 (Calendar years)

	Campylobacteriosis	Chlamydia	CRE	Cryptosporidiosis	Giardiasis	Gonorrhea	Hepatitis B, chronic	Hepatitis C, chronic	HIV and AIDS	MRSA, invasive	Pertussis	Salmonellosis	Shiga Toxin-Producing <i>E. coli</i>	Shigellosis	<i>Strep. pneumo.</i> , invasive	Syphilis (P, S, E non-P non-S)	Tuberculosis	Tularemia	Varicella (Chicken pox)	West Nile disease
Total	524	4545	40	167	92	2170	37	583	38	156	147	166	136	9	101	56	16	17	26	11
Incidence*	59.2	513.8	4.5	18.9	10.4	245.3	4.1	65.9	4.3	17.6	16.6	18.8	15.4	1.0	11.4	6.3	1.8	1.92	2.9	1.24
Gender																				
Female	213	3195	25	86	47	1227	16	270	11	76	78	92	70	5	44	16	6	5	12	4
Male	311	1350	15	81	45	943	21	313	27	80	69	74	66	4	57	40	10	12	14	7
Race																				
White	441	1825	33	146	66	526	9	234	14	97	123	142	112	7	73	27	3	11	16	10
Am.Indian	64	1900	3	4	9	1355	2	289	15	51	16	10	19	0	14	17	1	4	3	1
Black	6	290	2	5	9	213	11	12	7	1	2	4	2	0	3	7	8	1	0	0
Asian	1	43	1	2	2	12	6	1	0	0	1	1	0	1	0	0	4	0	1	0
Other	5	147	0	9	2	31	8	28	2	2	3	6	2	1	10	2	0	1	4	0
Unknown	7	340	1	1	4	33	1	19	0	5	2	3	1	0	1	3	0	0	2	0
Age group																				
<1 yr	12	1	0	4	1	0	0	0	0	2	17	6	5	0	4	0	0	0	4	0
1-4 yrs	51	0	2	29	17	1	0	0	0	0	26	16	22	0	1	0	0	1	7	0
5-14 yrs	51	40	1	20	11	11	0	0	0	1	66	13	25	0	3	0	0	5	6	1
15-24 yrs	74	2743	1	27	7	819	5	82	6	1	13	22	15	0	0	11	0	0	6	1
25-39 yrs	125	1590	2	35	16	1108	13	229	20	14	11	23	24	4	10	31	11	2	3	5
40-64 yrs	134	164	8	34	25	223	14	237	12	68	12	59	22	3	30	14	3	5	0	3
≥65 yrs	77	7	26	18	15	8	5	35	0	70	2	27	23	2	53	0	2	4	0	1

*Incidence: cases per 100,000 population

Campylobacteriosis

Campylobacter is a bacterium that can cause diarrhea, often bloody, abdominal pain, vomiting, fever, nausea, and malaise. Most cases of campylobacteriosis are relatively mild, lasting one to two days. Some cases, however, are more severe and relapses occur in about 20 percent of patients. Complications may include convulsions, neonatal septicemia, extra-intestinal infection, arthritis, and one in 1,000 campylobacteriosis cases leads to Guillain-Barré syndrome. *Campylobacter*-associated deaths are rare.

Campylobacteriosis has been the most commonly reported enteric bacterial pathogen in South Dakota since 2001. In 2019, there were 524 cases of *Campylobacter* infection reported, just below the record high of 532 cases reported in 2018. Counties with the highest incidence (cases per 100,000 population) included Aurora (436.2), Jerauld (298.1), Dewey (288.5), and Tripp (257.3). Young adults 25–39 years old had the highest rate of disease. South Dakota’s rate of campylobacteriosis ranks high nationally, usually double the rate of states receiving enhanced funding for conducting active surveillance for foodborne disease (FoodNet).

Figure 36
Incidence of Campylobacteriosis by County of Residence: South Dakota, 2019
(cases per 100,000)

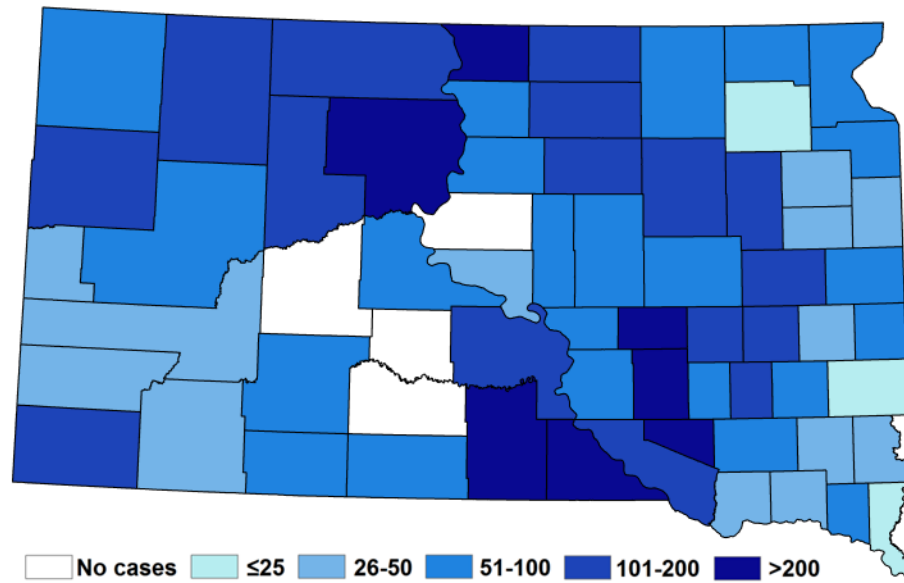
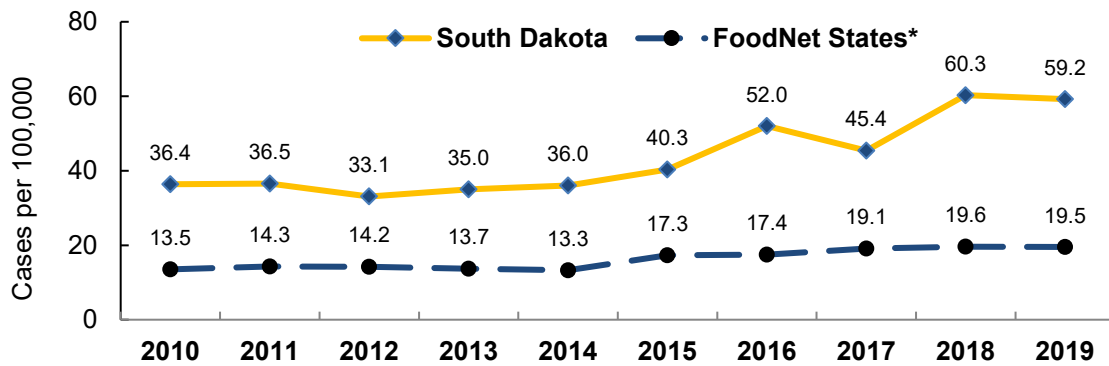


Figure 37
Campylobacteriosis Incidence, South Dakota & U.S. (FoodNet States*) 2010-2019



*FoodNet states include CA, CO, CT, GA, MD, MN, NM, NY, OR, and TN.

Carbapenem-resistant *Enterobacteriaceae* (CRE)

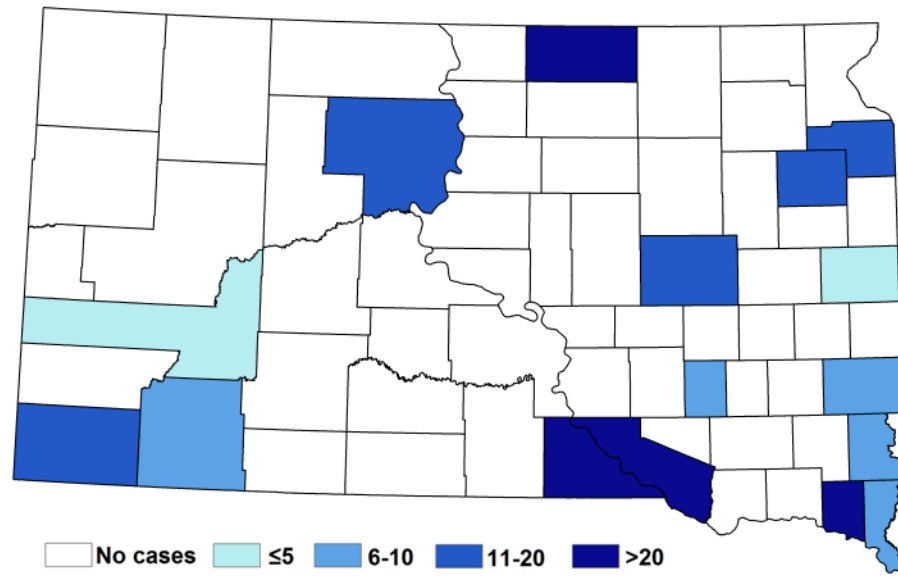
Carbapenem-resistant *Enterobacteriaceae* (CRE) are a family of bacteria that are difficult to treat because they are highly resistant to antibiotics. CRE are an important emerging threat to public health. Common *Enterobacteriaceae* include *Klebsiella* species, *Enterobacter* species, and *Escherichia coli*. These bacteria are typically found in the human gastrointestinal tract. However, they can spread outside the gut and cause serious infections, such as urinary tract infections, bloodstream infections, wound infections and pneumonia. *Enterobacteriaceae* can cause infections in people in both healthcare and community settings.

Carbapenems are a group of antibiotics that are usually reserved to treat serious infections, particularly when these infections are caused by bacteria that are highly resistant to other

antibiotics. Sometimes carbapenems are considered antibiotics of last resort for some infections. Some *Enterobacteriaceae* can no longer be treated with carbapenems because they have developed resistance to these antibiotics (i.e., CRE), making antibiotics ineffective in killing the resistant organism.

In South Dakota, 40 cases of CRE were reported in 2019. The statewide incidence was 4.5 cases per 100,000 population.

Figure 38
Incidence of CRE by County of Residence: South Dakota, 2019
(cases per 100,000)



Chlamydia

Chlamydia is a common sexually transmitted disease (STD) caused by the bacterium *Chlamydia trachomatis* that can infect both men and women. Chlamydia transmission occurs during contact with mucus membrane secretions of infected individuals – almost always during sexual activity. Neonatal transmission occurs when an infant is born to an infected mother and may then cause pneumonia or conjunctivitis in the newborn. Most female infections are asymptomatic or mild, but can cause mucus-pus discharges, pelvic inflammatory disease, infertility and ectopic pregnancy. Men experience urethral discharge, epididymal pain and sexually reactive arthritis. The number of chlamydia cases has been increasing over the past decade in South Dakota. In 2019, there were 4,545 cases reported. Youth in the 15–24 year age group had the highest rate.

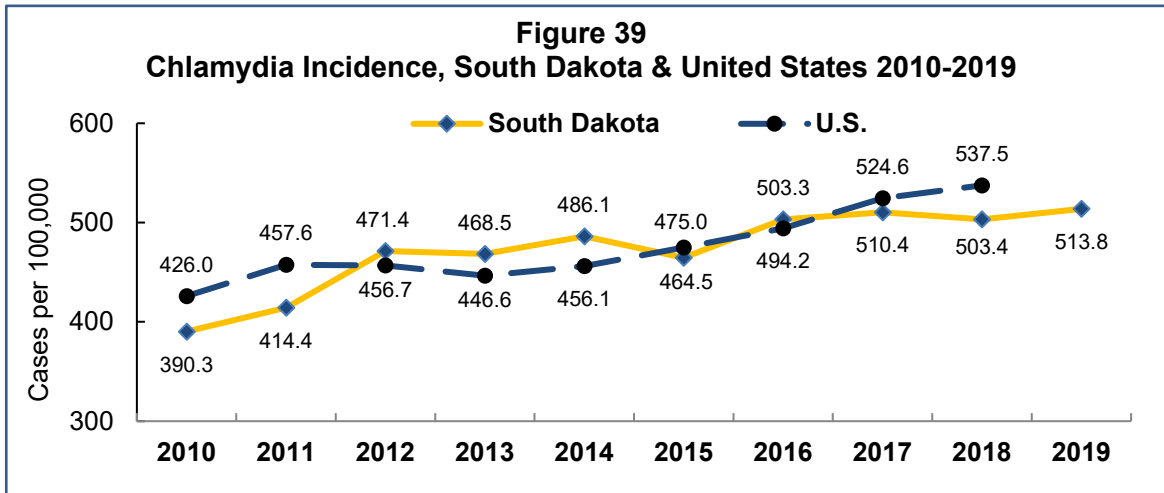
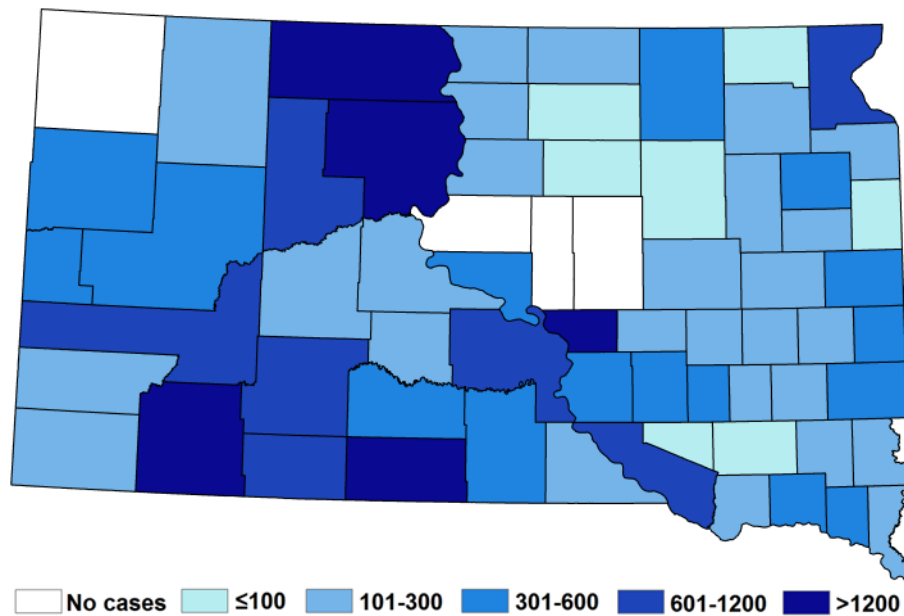


Figure 40
Incidence of Chlamydia by County of Residence: South Dakota, 2019
(cases per 100,000)



Cryptosporidiosis

Cryptosporidiosis is a diarrheal disease caused by a chlorine-tolerant protozoan parasite that is transmitted by cattle or human feces through contaminated food or water or by direct person-to-person or animal-to-person contact. In 2019, there were 167 cases (18.9 cases per 100,000 population) reported in South Dakota. Children less than 15 years old had the highest rate of disease. South Dakota’s cryptosporidiosis rate has been consistently higher than the national rate over the past decade.

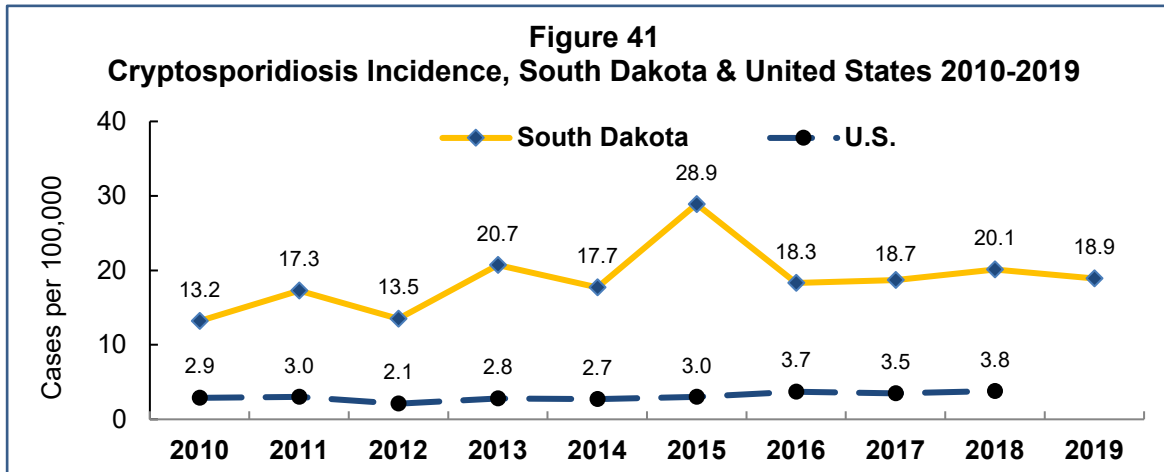
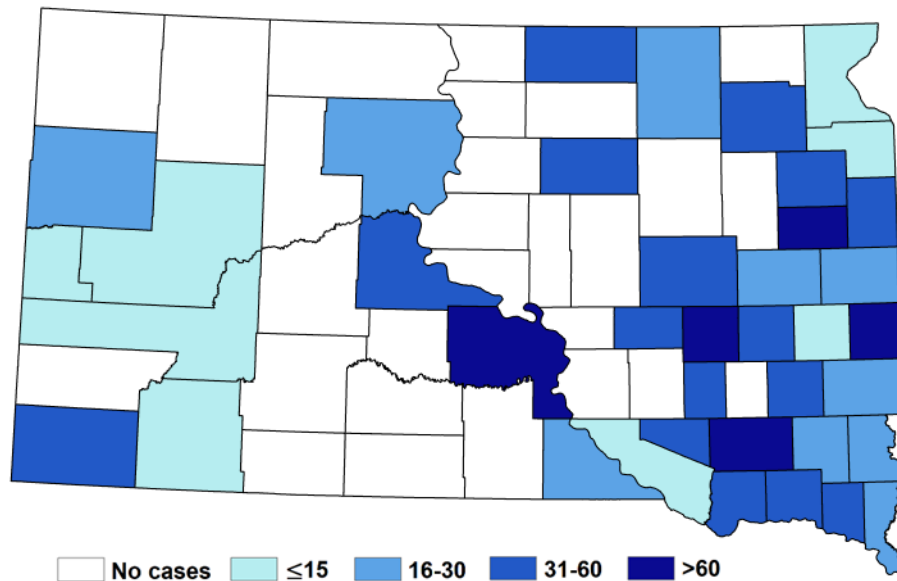


Figure 42
Incidence of Cryptosporidiosis by County of Residence: South Dakota, 2019
(cases per 100,000)



***Escherichia coli*, shiga toxin-producing (STEC)**

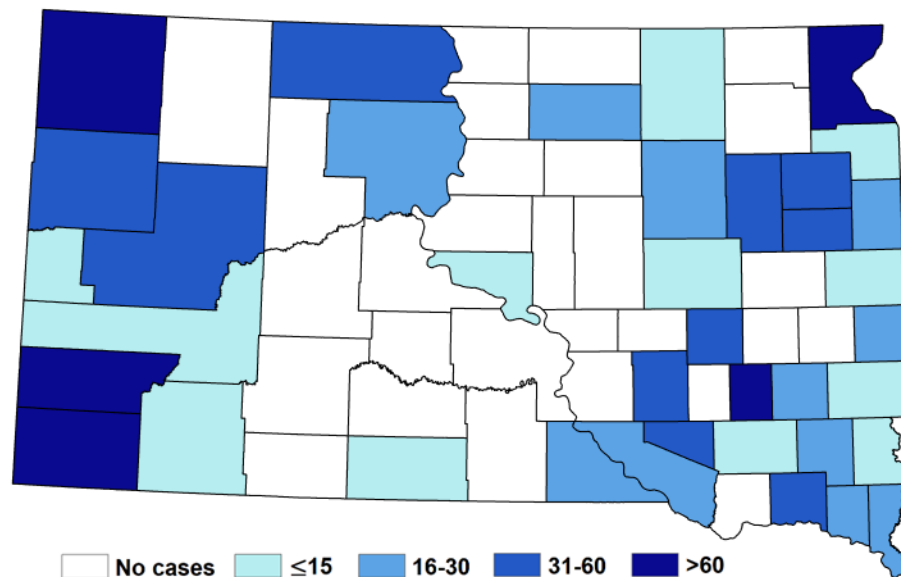
Shiga-toxin producing *E. coli* (STEC) often causes severe bloody diarrhea and abdominal pain. The illness usually resolves in five to 10 days. In some individuals, however, complications may involve severe hemorrhagic colitis, hemolytic uremic syndrome, thrombotic thrombocytopenic purpura, and even death. STEC is transmitted by meat, water, fresh vegetables or other foods contaminated by feces of cattle, sheep, deer, and other animals. Person-to-person transmission can also occur. Human infection can be prevented by proper slaughtering and processing methods, adequate cooking of meats, proper kitchen hygiene, pasteurization of dairy products and fruit juices, and handwashing after contact with cattle or their feces. Individuals with STEC infections are restricted from commercial food handling, child day care, or patient health care until two successive negative fecal samples are produced.

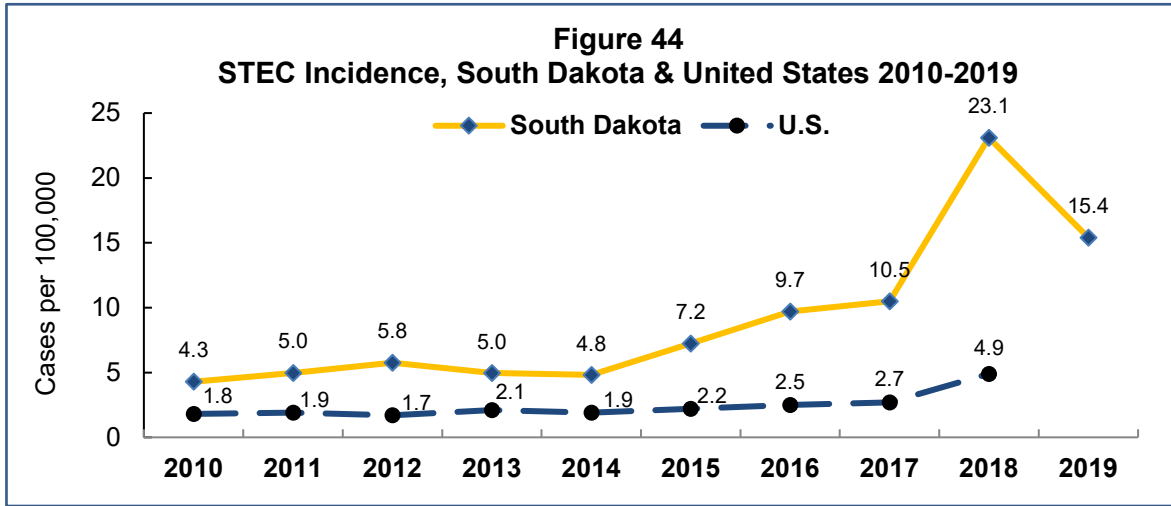
Culture-independent diagnostic testing (CIDTs) is rapidly being adopted by clinical laboratories in the state for detecting STEC infections. The STEC surveillance case definition used by SDDOH to classify and report cases was updated in 2018. Individuals testing positive by CIDT (but not subsequently confirmed by culture) are included in the 2018 and 2019 reported case count totals.

In 2019, 136 cases of STEC were reported in South Dakota. The incidence rate was 15.4 cases per 100,000 population. South Dakota's STEC rate has been greater than two times the national rate over the past decade. There were 52 cases (38%) that occurred in children less than 15 years of age. Five cases of hemolytic uremic syndrome (HUS) associated with STEC infection were reported.

In addition to *E. coli* O157:H7, there are several other STEC serotypes. The following serotypes were identified in South Dakota cases in 2019: 25 cases O157:H7, 8 cases O103, 8 cases O111, 3 cases O121, 3 cases O26, and 1 case each of O145 and O9.

Figure 43
Incidence of STEC by County of Residence: South Dakota, 2019
(cases per 100,000)

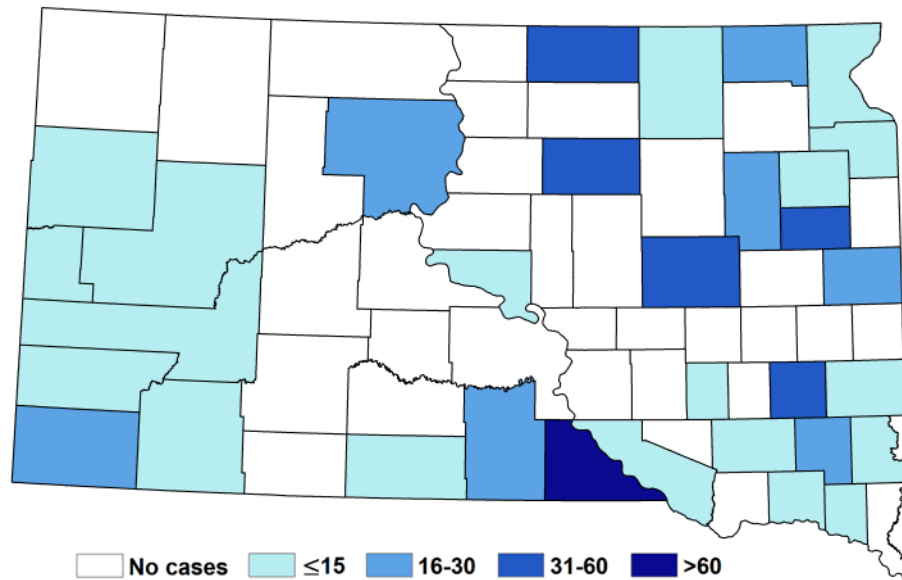


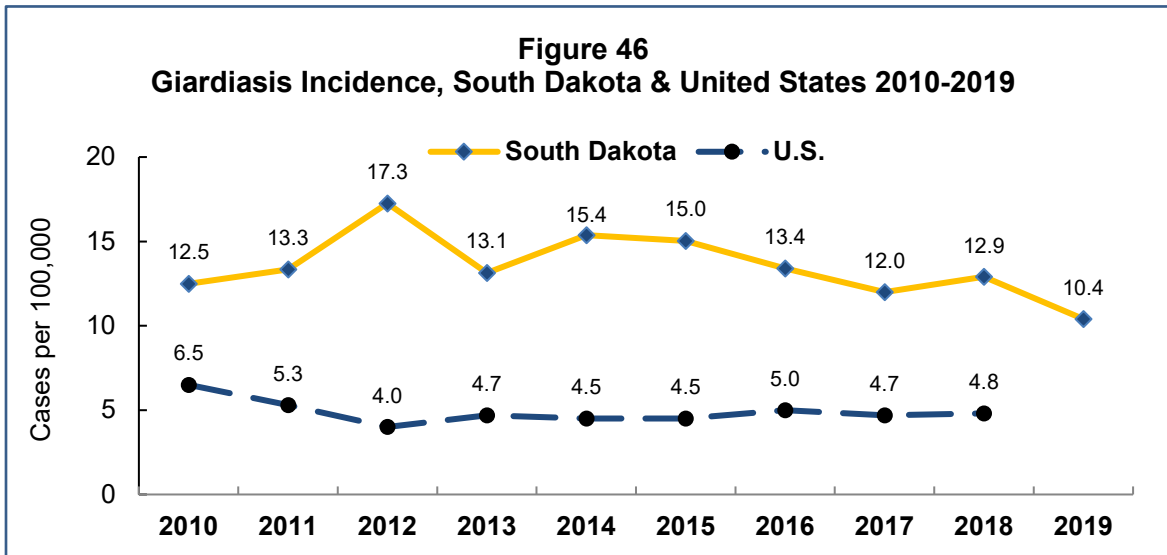


Giardiasis

Giardiasis is a gastrointestinal disease involving diarrhea and abdominal cramps that is caused by a protozoan parasite called *Giardia lamblia* (*G. intestinalis*, *G. duodenalis*). Giardiasis is transmitted person-to-person or by contaminated water, or in some cases animal-to-human. In 2019, 92 cases of *Giardia* infection were reported in South Dakota residents (10.4 cases per 100,000 population), which was below the five-year median (median: 116). South Dakota's giardiasis rate has been more than double the national rate over the past decade.

Figure 45
Incidence of Giardiasis by County of Residence: South Dakota, 2019
(cases per 100,000)



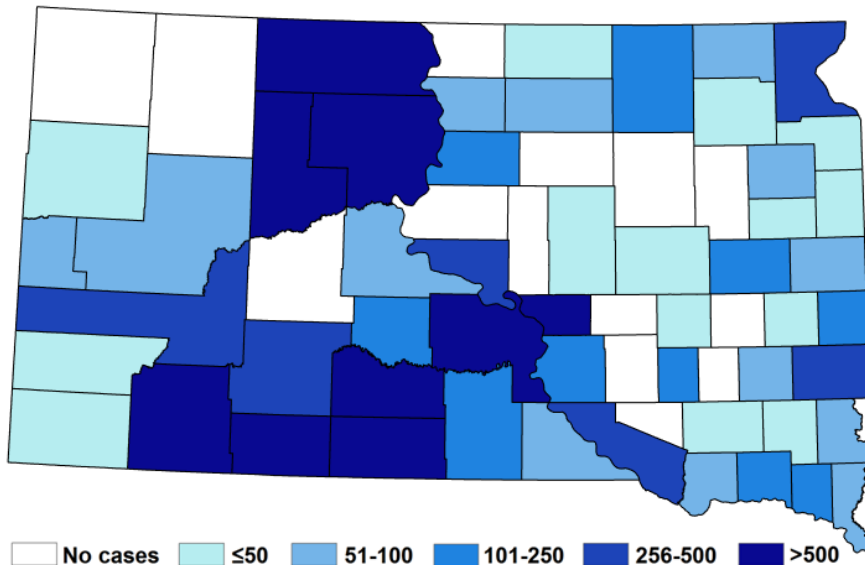


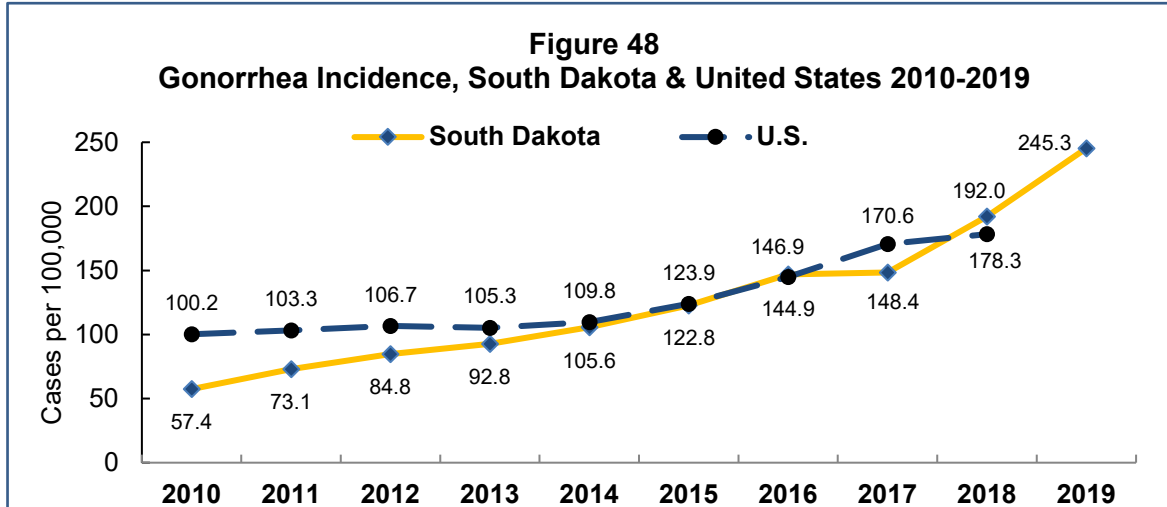
Gonorrhea

Gonorrhea is a sexually transmitted disease (STD) that can cause infections in the genitals, rectum, and throat, and less commonly as an invasive, disseminated disease. Gonorrhea is most common among young people ages 15-24 years. Although gonorrhea may be asymptomatic, untreated gonorrhea can cause serious and permanent health problems in both women and men. In women, untreated gonorrhea can cause pelvic inflammatory disease with complications such as scar tissue in fallopian tubes, ectopic pregnancy, infertility and long-term pelvic/abdominal pain. In men gonorrhea may infect the tubes attached to the testicles which may cause sterility.

Gonorrhea has been increasing over the past decade in South Dakota. In 2019, there were 2,170 cases reported, which is a rate of 245.3 cases per 100,000 population. The median age for gonorrhea cases was 27 years old (range: 4 to 70). Females accounted for 57 percent of cases.

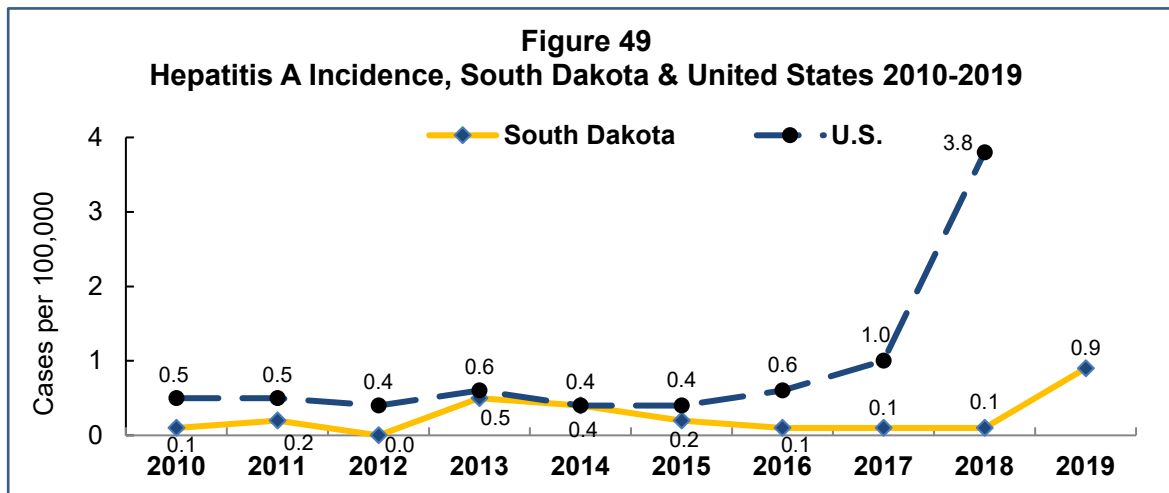
Figure 47
Incidence of Gonorrhea by County of Residence: South Dakota, 2019
(cases per 100,000)





Hepatitis A, acute

Hepatitis A is a liver disease caused by the hepatitis A virus (HAV), which infects humans through fecal-oral transmission. Since the licensure of the hepatitis A vaccine in 1995-1996, rates of infection have declined significantly. In South Dakota, there were eight cases of hepatitis A reported in 2019, an increase over the five-year median (median: 1).



Hepatitis B, acute and chronic

Hepatitis B is a liver disease caused by the hepatitis B virus (HBV). This virus is transmitted when blood and other body fluid from an infected person enters the body of someone who is not infected during sexual contact; sharing needles, syringes, or other drug-injection equipment; or from mother to baby at birth. For some individuals, hepatitis B is an acute, or short-term, illness but for others, it can become a long-term, chronic infection. Risk for HBV chronic infection is related to age at infection: approximately 90 percent of infected infants become chronically infected, compared with 2-6 percent of adults. Chronic hepatitis B can lead to serious health issues, like cirrhosis or liver cancer.

The best way to prevent hepatitis B is by getting vaccinated. HBV vaccine is now recommended at birth and for children and adolescents who did not complete vaccination as infants. HBV vaccination is not mandatory for school entry in South Dakota. Adults who should consider HBV vaccination include: people who have more than one sex partner in six months, men who have sex with other men, sex contacts of infected people, people who inject illegal drugs, health care and public safety workers who might be exposed to infected blood or body fluids, household contacts of persons with chronic HBV infection and hemodialysis patients.

In 2019, there were 5 cases of acute hepatitis B and 37 cases of chronic hepatitis B reported in South Dakota. The median age of cases was 39 years old (range: 16 to 73) and 60 percent were male.

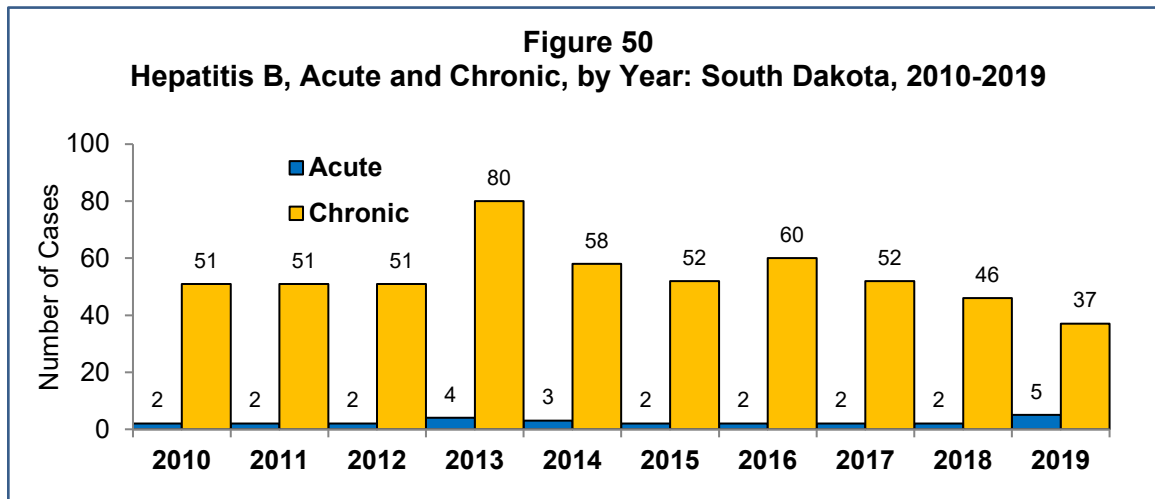
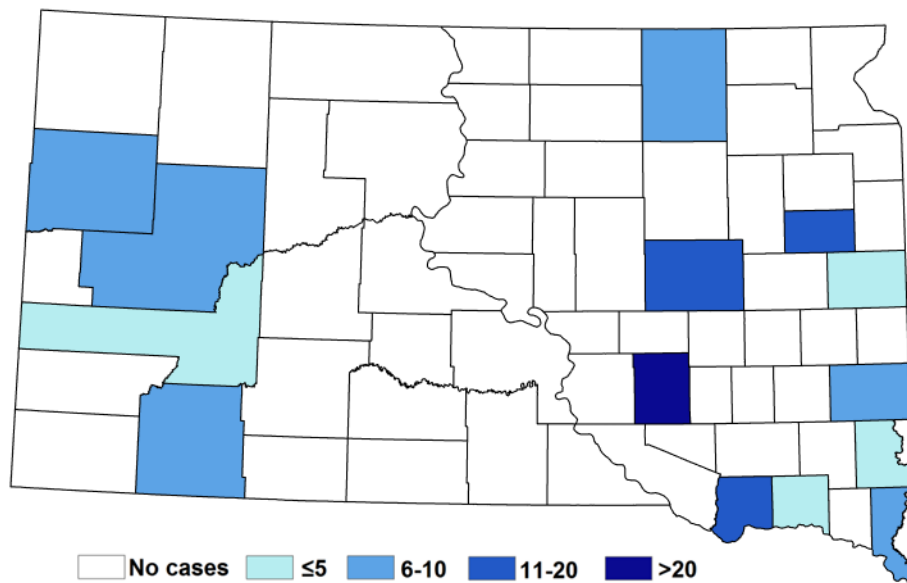


Figure 51
Incidence of Hepatitis B, Chronic, by County of Residence: South Dakota, 2019
(cases per 100,000)



Hepatitis C, acute and chronic

Hepatitis C causes liver disease. For most people hepatitis C is a long-term, chronic infection and may cause long-term health problems resulting in death. The majority (70-80%) of persons might not be aware of their infection because they do not become clinically ill. There is no vaccine available for hepatitis C. Hepatitis C is a blood-borne virus and the greatest risk for infection is among persons who inject drugs.

In 2019, there were 31 cases of acute hepatitis C and 583 cases of chronic hepatitis C reported in South Dakota. The counties with the highest incidence of chronic hepatitis C (cases per 100,000 population) were Corson (758.7), Buffalo (458.7), Dewey (390.4), and Lyman (343.8).

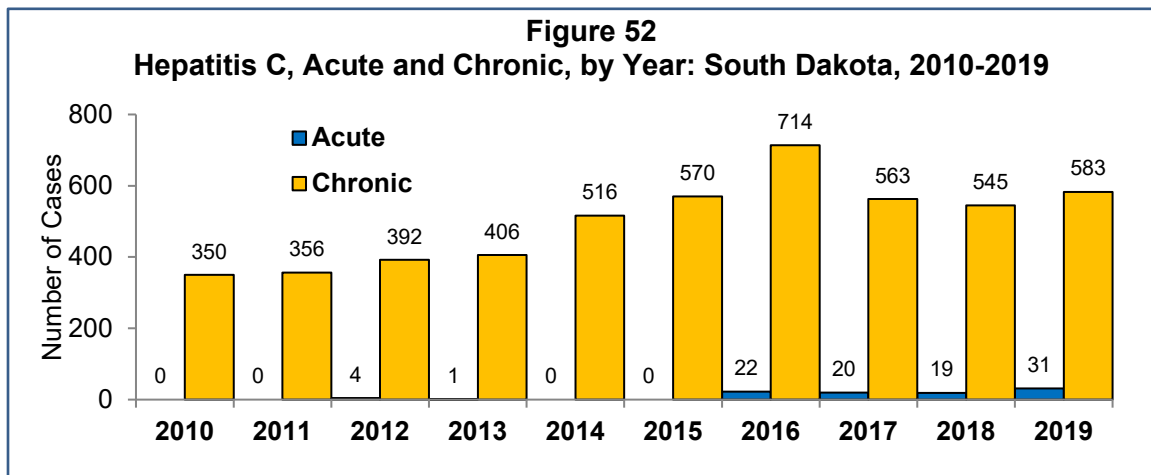
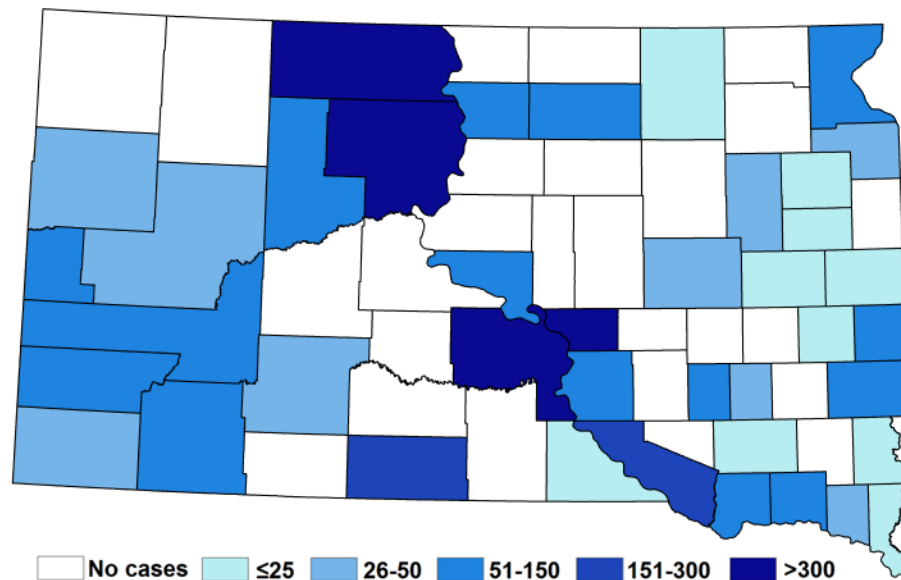


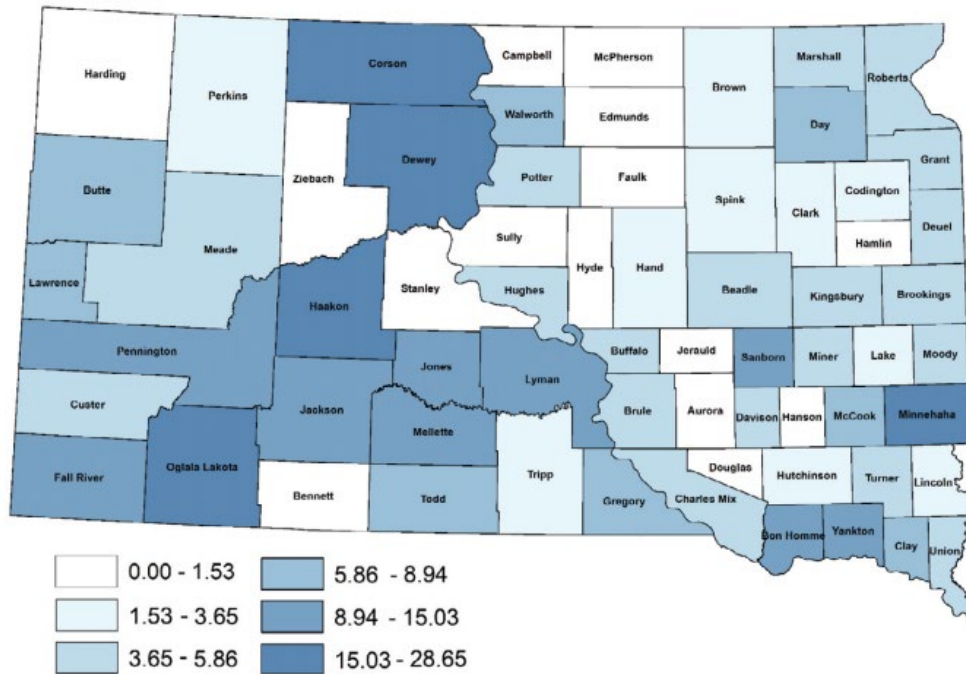
Figure 53
Incidence of Hepatitis C, Acute and Chronic, by County of Residence: South Dakota, 2019
 (cases per 100,000)



HIV and AIDS

Human immunodeficiency virus (HIV) infection may lead to acquired immunodeficiency syndrome, or AIDS. HIV is spread mainly by having sex with or sharing drug injection needles and syringes with someone who is already infected with HIV. The only way to know for sure if you have HIV infection is to get tested. In 2019, 38 new HIV/AIDS cases were reported in South Dakota.

Figure 54
Incidence of HIV/AIDS, by County of Residence: South Dakota, 1985-2019
 (cases per 10,000)



Influenza

The 2019–2020 influenza season was a moderate severity season with two waves of influenza activity, beginning with influenza B followed by influenza A(H1N1)pdm09. Overall, influenza A(H1N1)pdm09 was the most commonly reported influenza viruses this season.

In South Dakota, there were 14,774 confirmed influenza cases reported to SDDOH, including 704 (5%) A(H1N1)pdm09, 22 (<1%) A(H3N2), 6,995 (47%) A-not subtyped, and 7,053 (48%) influenza B. The number of laboratories using rapid confirmatory tests has increased, which may account for some of the increase in confirmed cases reported in the 2019–2020 influenza season. Additionally, 27,012 rapid antigen influenza tests were performed with 7,171 positive results (27%); 3,385 (47%) positive for influenza A and 3,786 (53%) positive for influenza B.

Table 75
South Dakota Influenza Cases by Age Group, 2019-2020

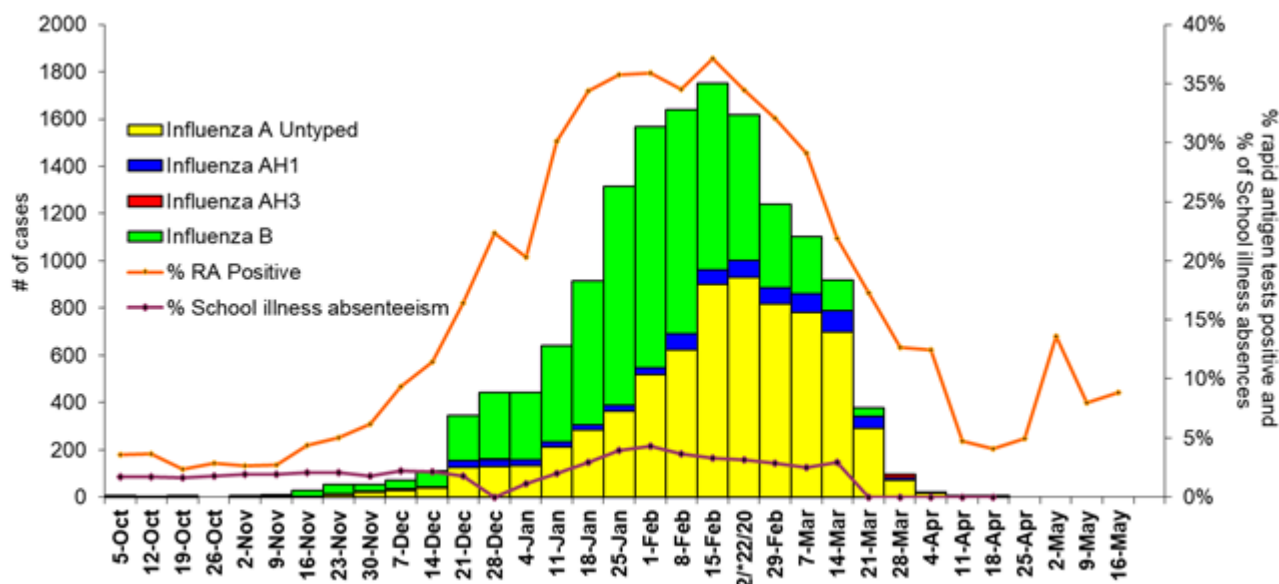
Lab Confirmed Influenza Cases (by DFA, PCR, or culture)		Influenza Associated Hospitalizations	Influenza Associated Deaths
Age Group	# Cases (%)	# Hosp (%)	Deaths (%)
0-4	2932 (20%)	55 (10%)	0 (0%)
5-18	5560 (38%)	50 (9%)	1 (3%)
19-49	4069 (28%)	120 (21%)	4 (12%)
50-64	1354 (9%)	116 (21%)	7 (21%)
> 64	859 (8%)	218 (39%)	21 (64%)
Total	14,774	559	33

The first confirmed case of influenza was reported the first week of October 2019 and the last case reported early April 2020. The peak of the season was the third week in February 2020 with influenza A and influenza B viruses all circulating at the same time.

There were 559 hospitalizations and 33 influenza-associated deaths reported during the 2019–2020 influenza season. The first case of COVID-19, caused by the SARS-CoV-2 virus, was first detected in South Dakota on March 10, 2020, which may have impacted the final weeks of influenza surveillance.

Figure 55
2019-2020 Influenza Season Lab Confirmed Influenza Cases*,
% Rapid Antigen Positive, & % School Absenteeism SD

* Confirmed by Culture, PCR, or DFA



Legionellosis

Legionellosis includes two diseases, Legionnaires' disease and Pontiac fever, caused by exposure to *Legionella* bacteria. Legionnaires' disease causes pneumonia, while Pontiac fever causes a milder illness with fever and muscle aches. *Legionella* is naturally found in the environment, usually in water. People can get legionellosis after breathing in water droplets that contain the bacteria.

There were 23 cases of legionellosis reported in South Dakota in 2019, a 130 percent increase over the five-year median (median: 10).

Lyme disease

Lyme disease is caused by the spirochete *Borrelia burgdorferi* and is transmitted to humans by bites from *Ixodes scapularis*, commonly known as the blacklegged tick or deer tick. Currently, *I. scapularis* has only been found and documented in a few locations in eastern South Dakota which lowers the risk of exposure to Lyme disease among South Dakota residents.

In 2019, 10 cases of Lyme disease were reported in South Dakota residents. Six (60%) cases reported recent travel outside of South Dakota, mainly to states along the Great Lakes, where they were likely exposed to blacklegged ticks.

Methicillin-resistant *Staphylococcus aureus* (MRSA), invasive

Methicillin-resistant *Staphylococcus aureus* (MRSA) is a bacterium resistant to most commonly used antibiotics. Most MRSA infections are skin infections, but may cause life-threatening bloodstream infections, pneumonia and surgical site infections.

In 2019, there were 156 cases of invasive MRSA reported in South Dakota, an 8% increase from the five-year median (median: 144). The highest rate of disease was among the elderly, ages 65 years and older.

Pertussis (whooping cough)

Pertussis, commonly called whooping cough, is an acute infectious bacterial disease caused by *Bordetella pertussis*. The bacteria produce toxins that inflame and paralyze respiratory cilia causing severe coughing. Pertussis is transmitted by aerosolized droplets of respiratory secretions from infected individuals. Infants and young children are at higher risk of pertussis-associated complications, hospitalization and death. The most common complication is secondary bacterial pneumonia. Youth and adults infected with pertussis may expose unprotected infants who are at risk of severe disease and complications.

In 2019, 147 cases of pertussis were reported in South Dakota. This represented an 819 percent increase over the five-year median (median: 16). There were 109 cases (74%) in children less than 15 years old.

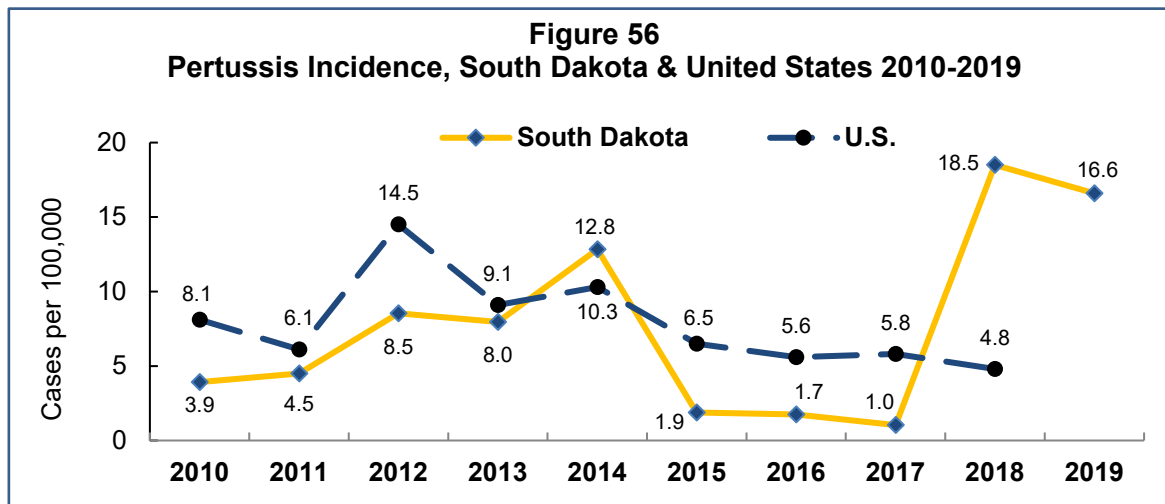


Figure 57
Incidence of Pertussis by County of Residence: South Dakota, 2019
(cases per 100,000)

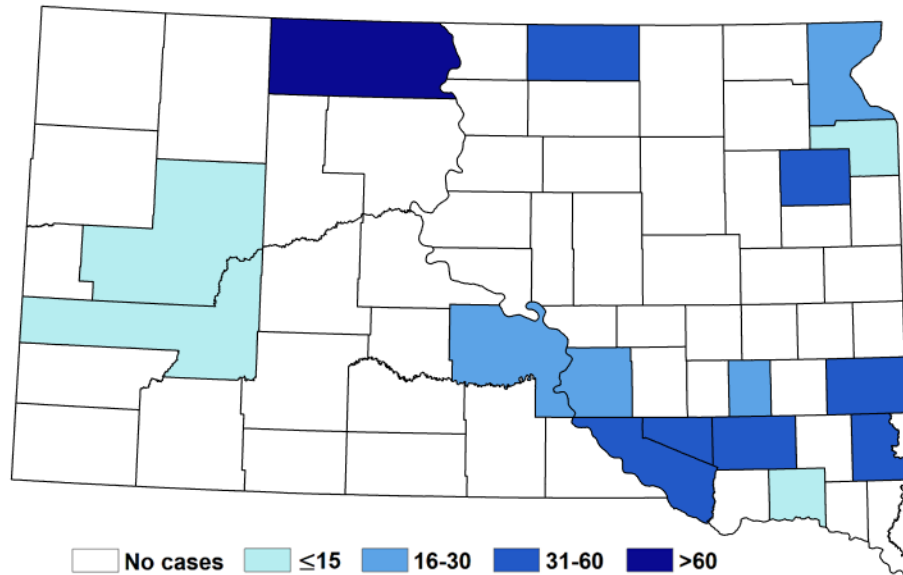
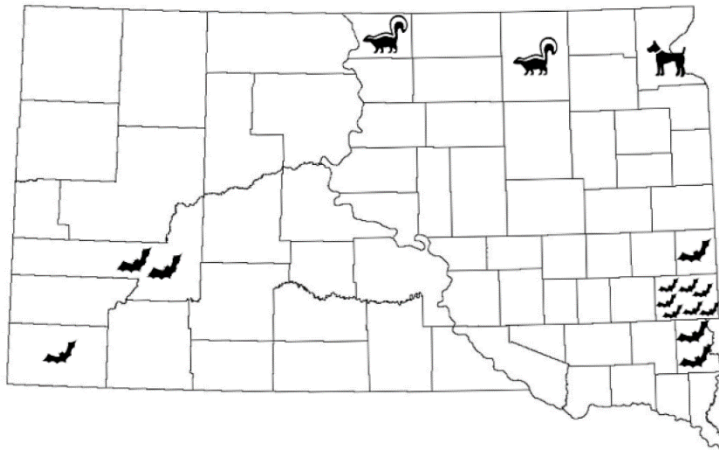


Figure 58
Animal Rabies in South Dakota, 2019



Rabies, animal

Rabies is a viral disease affecting the central nervous system. All mammals, including humans, are susceptible to the rabies virus. Bites from infected animals constitute the primary route of transmission. Rabies is a fatal disease and cannot be treated once symptoms appear. Fortunately, rabies is successfully prevented by using post-exposure prophylaxis in people exposed to the rabies virus. While the last human rabies case in South Dakota occurred in 1970, substantial resources are spent managing potential exposures to rabies because

of its constant presence in the state. Skunks (*Memphitis mephitis*) are the primary rabies reservoir in South Dakota. Over the past decade 44 percent of skunks tested have been rabid. Bat rabies is also enzootic in South Dakota with four percent of bats tested being positive.

A total of 16 animals tested positive for rabies in 2019, a seven percent increase from 2018. The 16 rabid animals included only one domestic animal (a dog), and 15 wild animals (13 bats and 2 skunks). The total was the second-lowest annual total on record in South Dakota (15 in 2018). No human rabies was reported.

Rabid animals in 2019 were reported from the following counties: Minnehaha 7, Lincoln 2, Pennington 2, Brown 1, Campbell 1, Fall River 1, Moody 1, and Roberts 1.

Salmonellosis

Salmonella is a bacterium that can cause diarrhea, fever, and abdominal cramps between 12 and 72 hours after infection. The illness usually lasts four to seven days, and most individuals recover without treatment, but in some with diarrhea infection may spread from the intestines to the blood stream, and then to other body sites. In severe cases, infection may cause death. The elderly, infants, and those with impaired immune systems are more likely to have a severe illness.

In 2019, 166 cases of salmonellosis were reported in South Dakota (incidence of 18.8 cases per 100,000 population), which was a 27 percent decrease from the five-year median (median: 227). The *Salmonella* serotypes most commonly identified were *S. Typhimurium* (33 cases) and *S. Enteritidis* (24 cases), accounting for 41 percent of cases with available serotype information.

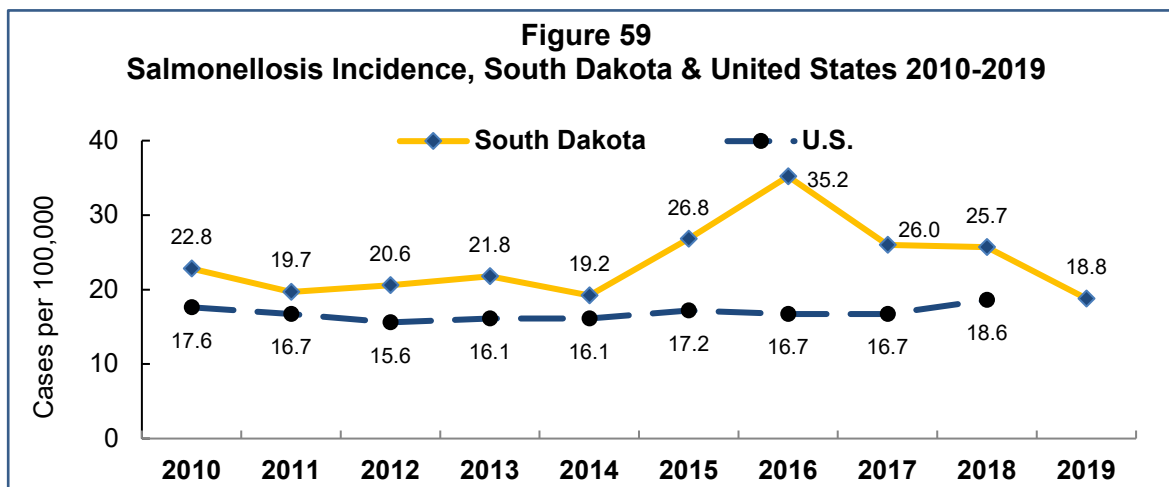
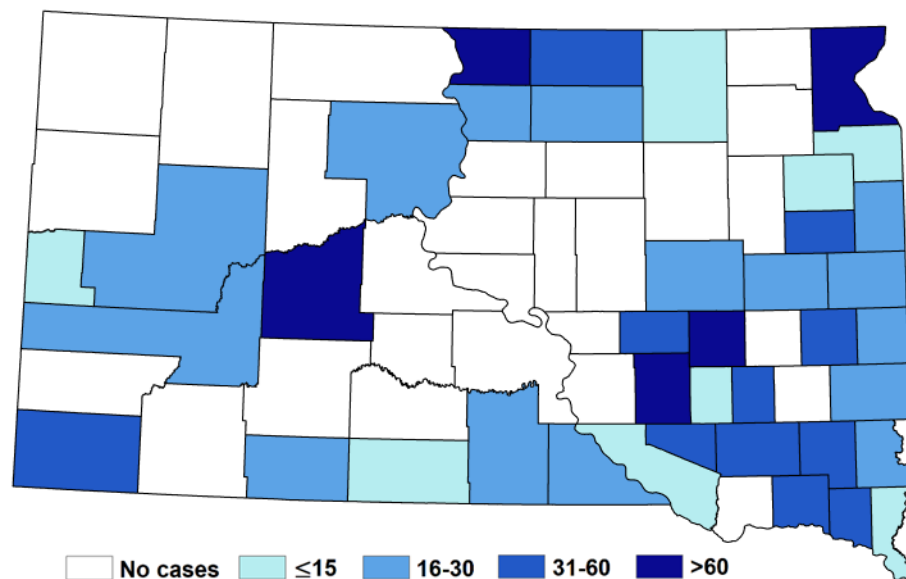


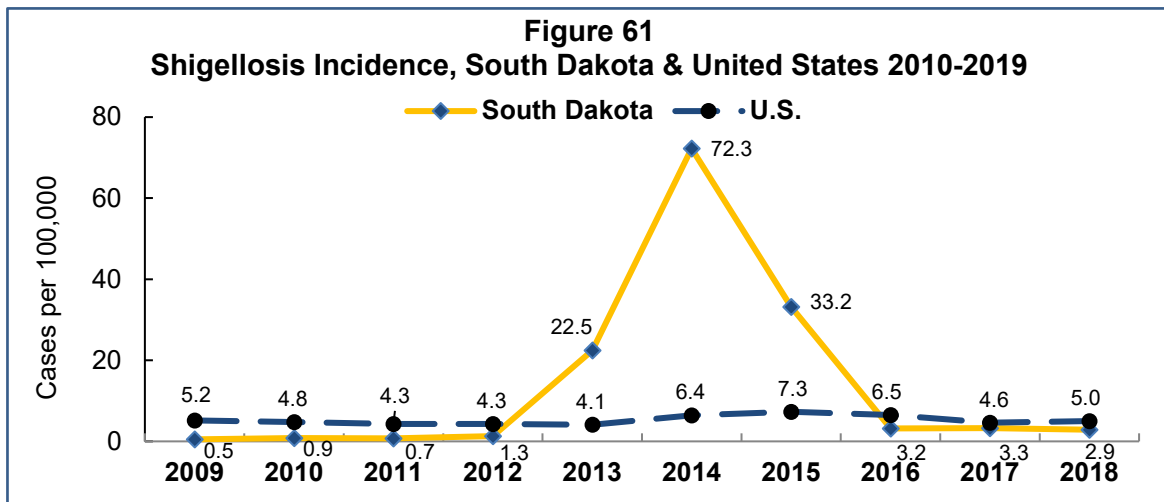
Figure 60
Incidence of Salmonellosis by County of Residence: South Dakota, 2019
(cases per 100,000)



Shigellosis

Shigellosis is an intestinal infection causing diarrhea, fever, nausea, vomiting, and abdominal cramps. Complications, such as severe dehydration or seizures, may occur, especially among young children. *Shigella* bacteria are transmitted by the fecal-oral route (human feces). Following exposure, illness usually occurs within one to four days. Transmission is typically person-to-person within families, child day care centers, and adult residential living situations. Food may be contaminated by people not washing their hands properly.

In 2019, there were 9 cases of shigellosis reported in South Dakota, a 69 percent decrease from the five-year median (median: 29). South Dakota experienced a protracted multi-county outbreak from October 2013 to November 2015, largely in childcare settings.



Streptococcus pneumoniae, invasive

Pneumococcal disease is an infection caused by the bacteria *Streptococcus pneumoniae*, also referred to as pneumococcus. Invasive *Streptococcus pneumoniae* can cause many types of illnesses, including ear infections and meningitis. There are vaccines to prevent pneumococcal disease in children and adults. In 2019, there were 101 cases of invasive pneumococcal disease reported in South Dakota.

Syphilis (primary, secondary, early non-primary non-secondary, and congenital)

Syphilis is a sexually transmitted disease that can cause long-term complications if not treated promptly and correctly. Symptoms in adults are divided into stages: primary, secondary, early latent and late latent syphilis. The primary, secondary and early latent stages are infectious to others. Syphilis is spread by direct contact with a syphilis sore during vaginal, anal or oral sex. Sores can be found on the penis, vagina, rectum, or on the lips and in the mouth. Syphilis can also be spread from an infected mother to her unborn baby, i.e., congenital syphilis.

In South Dakota, there were 56 cases of early syphilis (primary, secondary, and early non-primary non-secondary) and 3 congenital syphilis cases reported in 2019. Three counties (Minnehaha, Pennington, and Todd) accounted for 64 percent of the state's cases.

Tuberculosis

Tuberculosis (TB) is caused by the *Mycobacterium tuberculosis* bacteria. *M. tuberculosis* usually infects the lungs but can attack any part of the body such as the kidney, spine, and brain. If not treated properly, TB disease can be fatal. Tuberculosis is spread through the air from one person to another when an infectious person coughs, sneezes, speaks, talks or sings.

There were 16 cases of TB reported in South Dakota in 2019. The median age of cases was 35 years (range: 25 to 68). American Indians have historically reported the highest percentage of TB cases by race, however, in 2019 they only contributed 6 percent of the cases, with white (19%), black (50%), and Asian (25%) each contributing higher percentage of TB cases. In 2019, 75 percent of the TB cases were foreign-born.

Tularemia

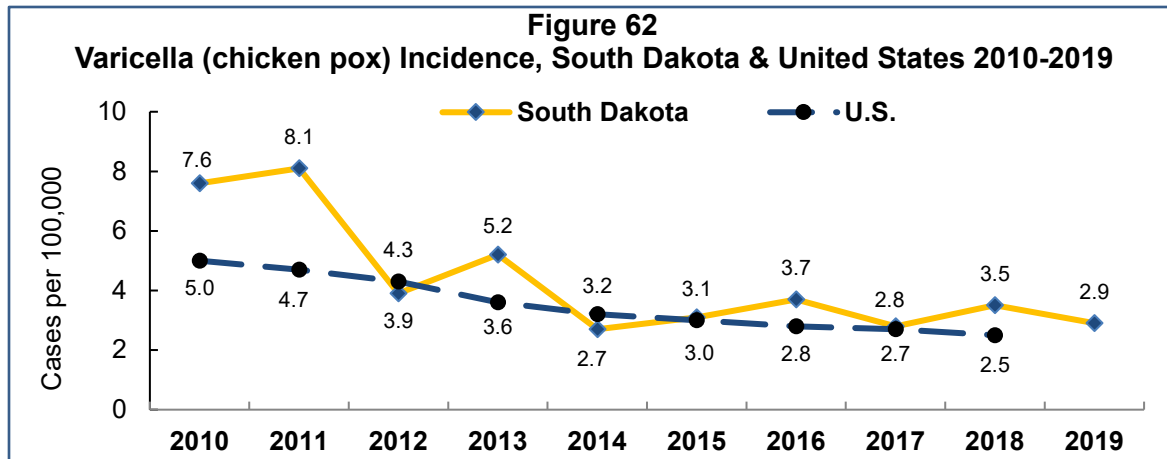
Tularemia is a bacterial disease caused by *Francisella tularensis* and is typically found in rodents but can infect insects as well. Infection can occur from a tick or deerfly bite, handling sick or dead animals, eating contaminated food or inhaling airborne organisms. Depending on how a person is infected, symptoms can range from skin ulcers, inflamed eyes, sore throat and diarrhea to fever, chills, headache and muscle aches. There are six main clinical forms of disease: ulceroglandular, glandular, pneumonic, oropharyngeal, oculoglandular, and typhoidal. If left untreated tularemia may be fatal.

There were 17 cases of tularemia reported in South Dakota in 2019 (10 ulceroglandular, 3 pneumonic, 2 glandular, and 2 oropharyngeal). The median age of cases was 41 years old (range: 1 to 76) and 71 percent were male.

Varicella (chicken pox)

Varicella (chicken pox) is a highly contagious disease consisting of a blistering rash, itching and fever caused by varicella-zoster virus. Chicken pox can be a serious disease, especially in babies and people with weakened immune systems. Varicella is spread through the air by the cough or sneeze of an infected person. It can also be spread by touching or breathing in the virus particles that come from chicken pox blisters. The best way to prevent chicken pox is to get the varicella vaccine. Varicella vaccination is mandated for school entry in South Dakota.

In 2019, 26 cases of chicken pox were reported in South Dakota, with 62 percent of cases being unvaccinated. The median age was 6 years old (range: 0 to 32).

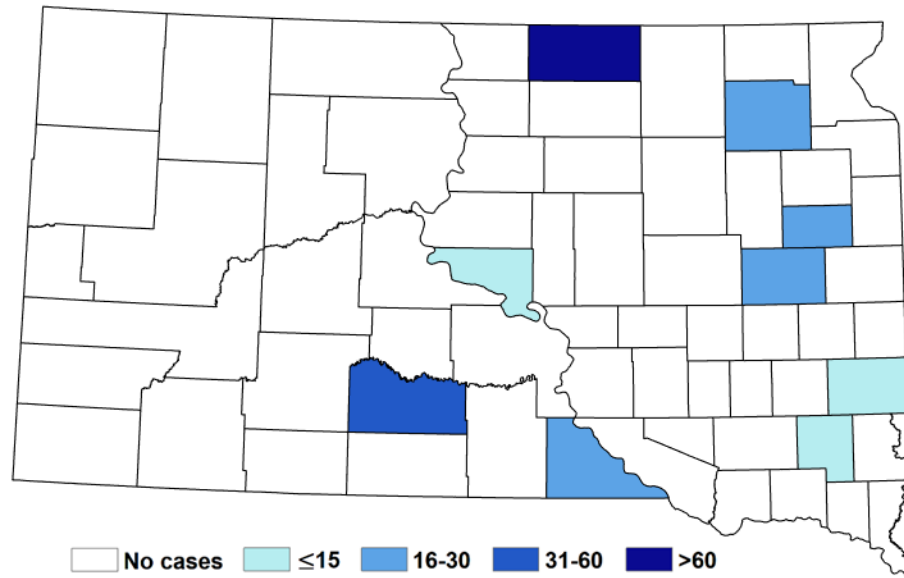


West Nile virus (WNV)

West Nile disease is a viral mosquito-borne illness that emerged in South Dakota in 2002. About 20 percent of WNV infected individuals develop fever with other symptoms such as headache, body aches, joint pains, vomiting, diarrhea, or rash. Most individuals with this type of WNV disease recover completely, but fatigue and weakness can last for weeks or months. Less than 1% of infected individuals develop a serious neurologic illness such as encephalitis (infection of the brain) or meningitis (infection of the spinal cord). The symptoms of neurologic illness include headache, high fever, neck stiffness, disorientation, coma, tremors, seizures, or paralysis. Neuroinvasive WNV infection may take several weeks or months to recover. Some of the neurologic effects may be permanent. The death rate for WNV neurologic disease is about 10 percent.

In South Dakota, there were 11 human cases of WNV disease reported in 2019, all non-neuroinvasive. The overall incidence of WNV was 1.2 cases per 100,000 population. One (9%) WNV case was hospitalized. There were no deaths.

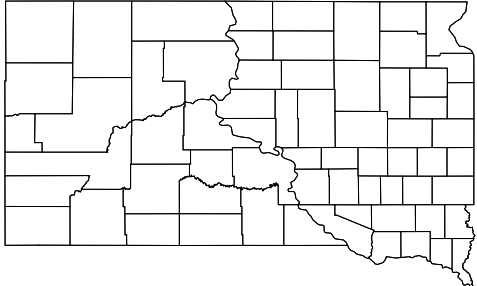
Figure 63
Incidence of Human WNV disease by County of Residence: South Dakota, 2019
(cases per 100,000)



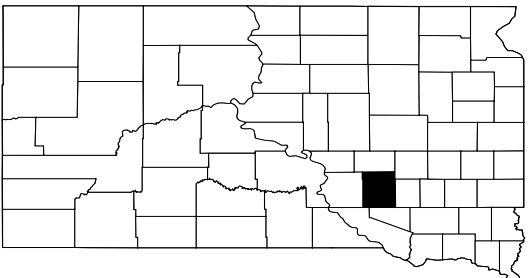
Other Infectious Diseases

Other infectious diseases reported in South Dakota during 2019 include: 30 cases of invasive *Haemophilus influenzae* (1 type b, 29 non-type b), 12 cases of mumps, 11 cases of Q fever, 10 cases each of cyclosporiasis and spotted fever rickettsiosis, 8 cases of coccidioidomycosis, 6 cases of malaria, 3 cases each of hantavirus infection (2 pulmonary, 1 non-pulmonary) and vibriosis, and 1 case each of dengue and tetanus.

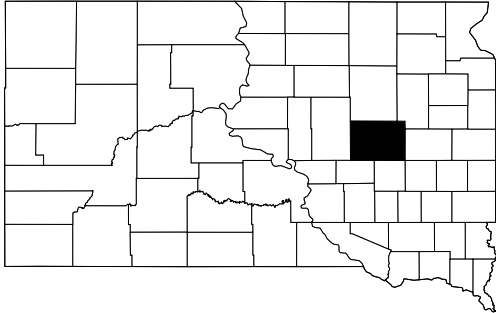
South Dakota

Demographic Information	Health Status Indicators 2015-2019																																																																																																								
<div style="text-align: center;">  </div> <p>South Dakota is located in the north central portion of the United States and averages 11.7 persons per square mile.</p> <h3 style="text-align: center;">2019 Population Information</h3> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left;">Subject</th> <th style="text-align: right;">Number</th> <th style="text-align: right;">Percent</th> </tr> </thead> <tbody> <tr> <td>Total population</td> <td style="text-align: right;">884,659</td> <td style="text-align: right;">100.0</td> </tr> <tr> <td> White</td> <td style="text-align: right;">721,053</td> <td style="text-align: right;">81.5</td> </tr> <tr> <td> American Indian & Alaska Native</td> <td style="text-align: right;">73,477</td> <td style="text-align: right;">8.3</td> </tr> <tr> <td> Hispanic</td> <td style="text-align: right;">37,351</td> <td style="text-align: right;">4.2</td> </tr> <tr> <td> Black or African American</td> <td style="text-align: right;">19,447</td> <td style="text-align: right;">2.2</td> </tr> <tr> <td> Asian</td> <td style="text-align: right;">13,393</td> <td style="text-align: right;">1.5</td> </tr> <tr> <td> Pacific Islander</td> <td style="text-align: right;">525</td> <td style="text-align: right;">0.1</td> </tr> <tr> <td> Multi-Racial</td> <td style="text-align: right;">19,413</td> <td style="text-align: right;">2.2</td> </tr> <tr> <td colspan="3"> </td> </tr> <tr> <td>Under 5 years</td> <td style="text-align: right;">61,167</td> <td style="text-align: right;">6.9</td> </tr> <tr> <td>Under 18 years</td> <td style="text-align: right;">217,101</td> <td style="text-align: right;">24.5</td> </tr> <tr> <td>65 years and over</td> <td style="text-align: right;">151,871</td> <td style="text-align: right;">17.2</td> </tr> </tbody> </table>	Subject	Number	Percent	Total population	884,659	100.0	White	721,053	81.5	American Indian & Alaska Native	73,477	8.3	Hispanic	37,351	4.2	Black or African American	19,447	2.2	Asian	13,393	1.5	Pacific Islander	525	0.1	Multi-Racial	19,413	2.2				Under 5 years	61,167	6.9	Under 18 years	217,101	24.5	65 years and over	151,871	17.2	<h3 style="text-align: center;">Natality</h3> <ul style="list-style-type: none"> ● Percent of Low Birth Weight Infants 6.7 ● Percent of Mothers Receiving Care in 1st Trimester 75.2 ○ Percent of Mothers Who Smoked Cigarettes While Pregnant¹ 12.6 ● Percent of Births Less Than 37 Wks. of Gestation 9.1 Average Age of Mother 28.2 ○ Teenage Birth Rate² 9.9 Percent White, Non-Hispanic Births 71.4 Percent American Indian, Non-Hispanic Births 14.6 Percent Hispanic Births 5.2 ● Percent Unmarried 36.7 ● Percent WIC births 29.9 ● Percent Breastfeeding at discharge 80.4 ○ Percent Payment-Private Insurance 60.3 ● Percent Payment-Medicaid 30.5 ● Percent C-Section 24.9 	<h3 style="text-align: center;">Mortality³</h3> <table border="1" style="width: 100%; border-collapse: collapse;"> <tbody> <tr> <td>All Causes</td> <td style="text-align: right;">725.0</td> </tr> <tr> <td>● Heart Disease</td> <td style="text-align: right;">153.8</td> </tr> <tr> <td>Cancer</td> <td style="text-align: right;">153.0</td> </tr> <tr> <td> Trachea, Bronchus, & Lung</td> <td style="text-align: right;">37.7</td> </tr> <tr> <td> Colon, Rectum, & Anus</td> <td style="text-align: right;">14.8</td> </tr> <tr> <td> Female Breast</td> <td style="text-align: right;">18.6</td> </tr> <tr> <td> Pancreas</td> <td style="text-align: right;">11.2</td> </tr> <tr> <td> Prostate</td> <td style="text-align: right;">18.9</td> </tr> <tr> <td> Leukemia</td> <td style="text-align: right;">5.8</td> </tr> <tr> <td>○ Chronic Lower Respiratory Diseases</td> <td style="text-align: right;">43.5</td> </tr> <tr> <td>○ Alzheimer's Disease</td> <td style="text-align: right;">37.2</td> </tr> <tr> <td>● Cerebrovascular Disease</td> <td style="text-align: right;">34.2</td> </tr> <tr> <td>Unintentional Injuries</td> <td style="text-align: right;">51.6</td> </tr> <tr> <td> ○ Motor Vehicle Accidents</td> <td style="text-align: right;">16.6</td> </tr> <tr> <td>○ Diabetes</td> <td style="text-align: right;">24.9</td> </tr> <tr> <td>○ Influenza and Pneumonia</td> <td style="text-align: right;">18.2</td> </tr> <tr> <td>○ Suicide</td> <td style="text-align: right;">20.7</td> </tr> <tr> <td>○ Chronic Liver Disease and Cirrhosis</td> <td style="text-align: right;">17.2</td> </tr> <tr> <td>○ Infant Mortality</td> <td style="text-align: right;">6.5</td> </tr> </tbody> </table> <h3 style="text-align: center;">Leading Causes of Death</h3> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left;">Cause</th> <th style="text-align: right;">Total Deaths</th> </tr> </thead> <tbody> <tr> <td>1. 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Infant mortality is the number of infant (less than one year) deaths per 1,000 live births.</p> <p>See technical notes for more information.</p> <p>Source: South Dakota Department of Health, Office of Health Statistics</p>	All Causes	725.0	● Heart Disease	153.8	Cancer	153.0	Trachea, Bronchus, & Lung	37.7	Colon, Rectum, & Anus	14.8	Female Breast	18.6	Pancreas	11.2	Prostate	18.9	Leukemia	5.8	○ Chronic Lower Respiratory Diseases	43.5	○ Alzheimer's Disease	37.2	● Cerebrovascular Disease	34.2	Unintentional Injuries	51.6	○ Motor Vehicle Accidents	16.6	○ Diabetes	24.9	○ Influenza and Pneumonia	18.2	○ Suicide	20.7	○ Chronic Liver Disease and Cirrhosis	17.2	○ Infant Mortality	6.5	Cause	Total Deaths	1. Heart Disease	8,789	2. Cancer	8,408	3. Unintentional Injuries	2,471	4. Chronic Lower Respiratory Diseases	2,451	5. Alzheimer's Disease	2,247	6. Cerebrovascular Disease	1,971	7. Diabetes	1,336	8. Influenza and Pneumonia	1,060	9. Suicide	879	10. 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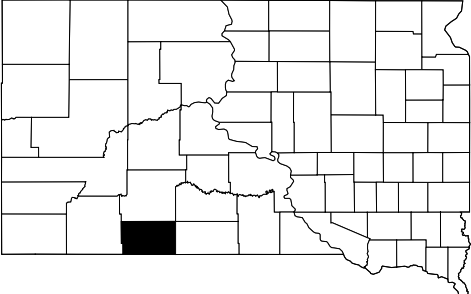
Aurora County

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 <p>Aurora County is located in the south central portion of the state and averages 3.9 persons per square mile. 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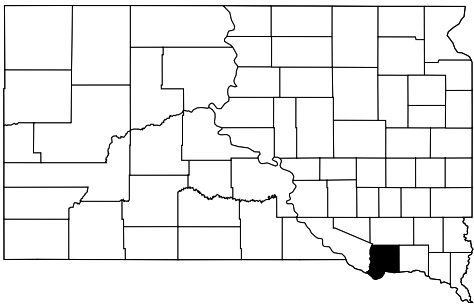
Beadle County

Demographic Information	Health Status Indicators 2015-2019																																								
 <p>Beadle County is located in the center of eastern South Dakota and averages 14.7 persons per square mile. Huron is the largest city in Beadle County.</p>	<h3 style="text-align: center;">Nativity</h3> <ul style="list-style-type: none"> Percent of Low Birth Weight Infants 6.7 ● Percent of Mothers Receiving Care in 1st Trimester 63.0 Percent of Mothers Who Smoked Cigarettes While Pregnant¹ 10.9 Percent of Births Less Than 37 Wks. of Gestation 10.4 ● Average Age of Mother 27.1 ○ Teenage Birth Rate² 23.1 Percent White, Non-Hispanic Births 55.7 Percent American Indian, Non-Hispanic Births 1.5 Percent Hispanic Births 22.4 ○ Percent Unmarried 41.4 ○ Percent WIC births 48.8 Percent Breastfeeding at discharge 76.7 ● Percent Payment-Private Insurance 53.1 ○ Percent Payment-Medicaid 40.7 ○ Percent C-Section 29.4 	<h3 style="text-align: center;">Mortality³</h3> <ul style="list-style-type: none"> All Causes 748.5 Heart Disease 137.3 Cancer 158.8 <ul style="list-style-type: none"> Trachea, Bronchus, & Lung 31.7 ● Colon, Rectum, & Anus 8.1 Female Breast 24.7 Pancreas 13.7 Prostate 20.6 Leukemia 4.5 Chronic Lower Respiratory Diseases 39.9 Alzheimer's Disease 42.2 Cerebrovascular Disease 44.2 Unintentional Injuries 47.4 <ul style="list-style-type: none"> Motor Vehicle Accidents 14.2 ○ Diabetes 37.4 ○ Influenza and Pneumonia 48.1 Suicide 23.3 Chronic Liver Disease and Cirrhosis 15.2 Infant Mortality 6.1 <h3 style="text-align: center;">Leading Causes of Death</h3> <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 80%;"></th> <th style="text-align: right;">Total Deaths</th> </tr> </thead> <tbody> <tr><td>1. Cancer</td><td style="text-align: right;">196</td></tr> <tr><td>2. Heart Disease</td><td style="text-align: right;">189</td></tr> <tr><td>3. Influenza and Pneumonia</td><td style="text-align: right;">72</td></tr> <tr><td>4. Alzheimer's Disease</td><td style="text-align: right;">65</td></tr> <tr><td>5. Cerebrovascular Disease</td><td style="text-align: right;">63</td></tr> <tr><td>6. Chronic Lower Respiratory Diseases</td><td style="text-align: right;">52</td></tr> <tr><td>7. Unintentional Injuries</td><td style="text-align: right;">48</td></tr> <tr><td>8. Diabetes</td><td style="text-align: right;">45</td></tr> <tr><td>9. Suicide</td><td style="text-align: right;">19</td></tr> <tr><td>10. Chronic Liver Disease and Cirrhosis</td><td style="text-align: right;">15</td></tr> </tbody> </table> <ul style="list-style-type: none"> Percent of Deaths due to tobacco use 19.2 Median age at death 81 		Total Deaths	1. Cancer	196	2. Heart Disease	189	3. Influenza and Pneumonia	72	4. Alzheimer's Disease	65	5. Cerebrovascular Disease	63	6. Chronic Lower Respiratory Diseases	52	7. Unintentional Injuries	48	8. Diabetes	45	9. Suicide	19	10. Chronic Liver Disease and Cirrhosis	15																	
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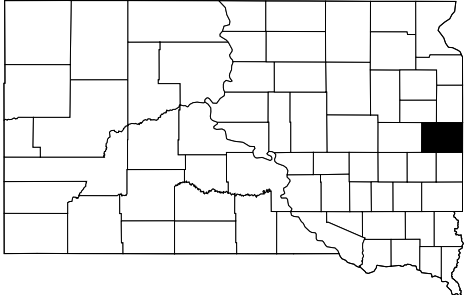
Bennett County

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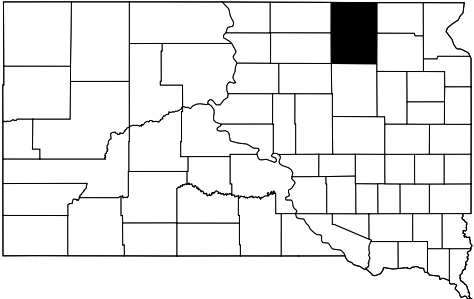
Bon Homme County

Demographic Information			Health Status Indicators 2015-2019			
 <p>Bon Homme County is located on the Nebraska border in eastern South Dakota and averages 12.2 persons per square mile. Springfield is the largest city in Bon Homme County.</p>			Natality		Mortality³	
			<p>Percent of Low Birth Weight Infants 4.9</p> <p>Percent of Mothers Receiving Care in 1st Trimester 77.9</p> <p>Percent of Mothers Who Smoked Cigarettes While Pregnant¹ 10.8</p> <p>Percent of Births Less Than 37 Wks. of Gestation 7.6</p> <p>Average Age of Mother 28.6</p> <p>Teenage Birth Rate² LNE 93.6</p> <p>Percent White, Non-Hispanic Births 93.6</p> <p>Percent American Indian, Non-Hispanic Births 2.0</p> <p>Percent Hispanic Births 2.0</p> <p>● Percent Unmarried 23.3</p> <p>Percent WIC births 29.8</p> <p>Percent Breastfeeding at discharge 85.4</p> <p>○ Percent Payment-Private Insurance 75.3</p> <p>● Percent Payment-Medicaid 19.8</p> <p>Percent C-Section 25.3</p>	<p>● All Causes 632.9</p> <p>● Heart Disease 120.2</p> <p>Cancer 132.4</p> <p>Trachea, Bronchus, & Lung 24.9</p> <p>● Colon, Rectum, & Anus 6.6</p> <p>Female Breast 18.1</p> <p>Pancreas 12.5</p> <p>Prostate LNE</p> <p>Leukemia 9.2</p> <p>Chronic Lower Respiratory Diseases 55.8</p> <p>● Alzheimer's Disease 19.6</p> <p>Cerebrovascular Disease 37.2</p> <p>Unintentional Injuries 49.1</p> <p>Motor Vehicle Accidents 15.5</p> <p>Diabetes 17.9</p> <p>Influenza and Pneumonia 21.2</p> <p>Suicide 19.8</p> <p>Chronic Liver Disease and Cirrhosis LNE</p> <p>Infant Mortality LNE</p>		
2019 Population Information						
Subject	Number	Percent				
Total population	6,901	100.0				
White	5,946	86.2				
American Indian & Alaska Native	551	8.0				
Hispanic	214	3.1				
Black or African American	89	1.3				
Asian	13	0.2				
Pacific Islander	3	0.0				
Multi-Racial	85	1.2				
Under 5 years	383	5.5				
Under 18 years	1,338	19.4				
65 years and over	1,434	20.8				
			Leading Causes of Death			
					Total Deaths	
			1. Heart Disease		82	
			2. Cancer		75	
			3. Chronic Lower Respiratory Diseases		35	
			4. Unintentional Injuries		25	
			5. Cerebrovascular Disease		24	
			6. Influenza and Pneumonia		17	
			7. Alzheimer's Disease		15	
			8. Hypertension		14	
			9. Diabetes		12	
			10. Unspecified Dementia		10	
			Percent of Deaths due to tobacco use		10.8	
			Median age at death		85	
			<p>●Denotes a health status indicator which is significantly lower than the state average.</p> <p>○Denotes a health status indicator which is significantly higher than the state average.</p> <p>³All mortality rates except infant mortality are age-adjusted death rates per 100,000 population. Infant mortality is the number of infant (less than one year) deaths per 1,000 live births.</p>			
			<p>See technical notes for more information.</p>			
<p>Source: United States Census Bureau, 2019 Population Estimates</p>			<p>Source: South Dakota Department of Health, Office of Health Statistics</p>			

Brookings County

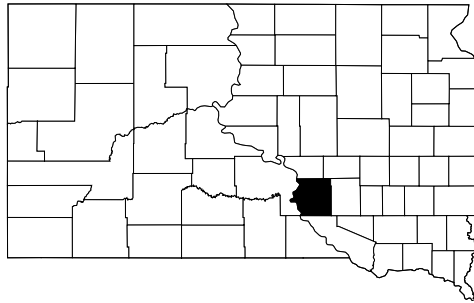
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American Indian & Alaska Native	354	1.0																																																												
Pacific Islander	23	0.1																																																												
Multi-Racial	500	1.4																																																												
Under 5 years	2,186	6.2																																																												
Under 18 years	7,241	20.6																																																												
65 years and over	4,377	12.5																																																												
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2. Cancer	201																																																													
3. Cerebrovascular Disease	62																																																													
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6. Chronic Lower Respiratory Diseases	44																																																													
7. Diabetes	36																																																													
8. Suicide	23																																																													
9. Chronic Liver Disease and Cirrhosis	18																																																													
T10. Hypertension	15																																																													
T10. Parkinson's Disease	15																																																													

Brown County

Demographic Information	Health Status Indicators 2015-2019																																																																																							
																																																																																								
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Brule County

Demographic Information



Brule County is located in the south central part of the state and averages 6.5 persons per square mile. Chamberlain is the largest city in Brule County.

2019 Population Information

Subject	Number	Percent
Total population	5,297	100.0
White	4,412	83.3
American Indian & Alaska Native	471	8.9
Hispanic	171	3.2
Black or African American	29	0.5
Asian	20	0.4
Pacific Islander	2	0.0
Multi-Racial	171	3.6
Under 5 years	354	6.7
Under 18 years	1,365	25.8
65 years and over	1,044	19.7

Source: United States Census Bureau, 2019 Population Estimates

Health Status Indicators 2015-2019

Natality

Percent of Low Birth Weight Infants	5.7
● Percent of Mothers Receiving Care in 1st Trimester	64.4
Percent of Mothers Who Smoked Cigarettes While Pregnant ¹	13.4
Percent of Births Less Than 37 Wks. of Gestation	7.4
Average Age of Mother	27.8
Teenage Birth Rate ²	5.3
Percent White, Non-Hispanic Births	73.4
Percent American Indian, Non-Hispanic Births	19.0
Percent Hispanic Births	1.7
Percent Unmarried	39.1
Percent WIC births	33.7
Percent Breastfeeding at discharge	75.4
Percent Payment-Private Insurance	61.8
Percent Payment-Medicaid	33.9
○ Percent C-Section	33.7

●Denotes a health status indicator which is significantly lower than the state average.

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¹Data for mothers who used tobacco are self-reported.

²Teenage Birth rate is live births per 1,000 females age 15-17.

Mortality³

All Causes	688.0
Heart Disease	175.4
Cancer	140.5
Trachea, Bronchus, & Lung	35.3
Colon, Rectum, & Anus	14.9
Female Breast	LNE
Pancreas	9.6
Prostate	29.5
Leukemia	11.8
Chronic Lower Respiratory Diseases	45.2
Alzheimer's Disease	36.3
Cerebrovascular Disease	22.2
Unintentional Injuries	57.0
Motor Vehicle Accidents	17.8
Diabetes	19.0
Influenza and Pneumonia	9.1
Suicide	23.5
Chronic Liver Disease and Cirrhosis	9.1
Infant Mortality	LNE
Leading Causes of Death	Total Deaths
1. Heart Disease	70
2. Cancer	57
3. Unintentional Injuries	19
4. Chronic Lower Respiratory Diseases	18
5. Alzheimer's Disease	17
6. Cerebrovascular Disease	9
T7. Diabetes	7
T7. Suicide	7
T7. Kidney Disease	7
10. Pneumonitis Due to Solids and Liquids	5
Percent of Deaths due to tobacco use	14.5
Median age at death	78

●Denotes a health status indicator which is significantly lower than the state average.

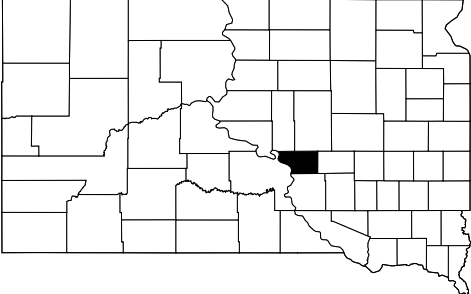
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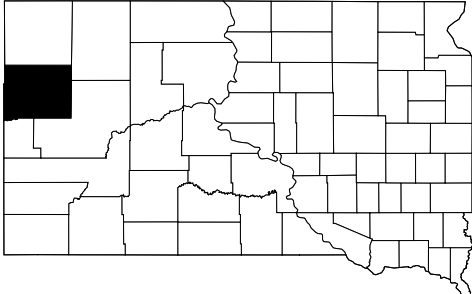
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Source: South Dakota Department of Health, Office of Health Statistics

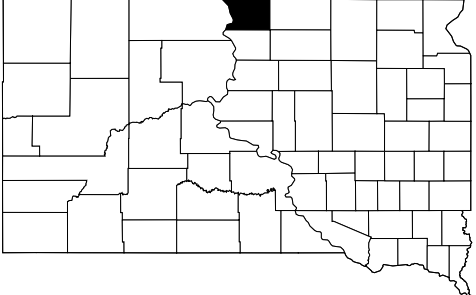
Buffalo County

Demographic Information			Health Status Indicators 2015-2019																																									
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2019 Population Information			<ul style="list-style-type: none"> ○ All Causes 1,730.9 ○ Heart Disease 353.3 Cancer 277.1 <ul style="list-style-type: none"> Trachea, Bronchus, & Lung 116.6 Colon, Rectum, & Anus 76.7 Female Breast LNE Pancreas LNE Prostate LNE Leukemia LNE Chronic Lower Respiratory Diseases LNE Alzheimer's Disease LNE Cerebrovascular Disease 51.8 ○ Unintentional Injuries 180.5 <ul style="list-style-type: none"> Motor Vehicle Accidents 59.1 ○ Diabetes 148.8 Influenza and Pneumonia LNE ○ Suicide 138.6 ○ Chronic Liver Disease and Cirrhosis 113.0 Infant Mortality 14.8 																																									
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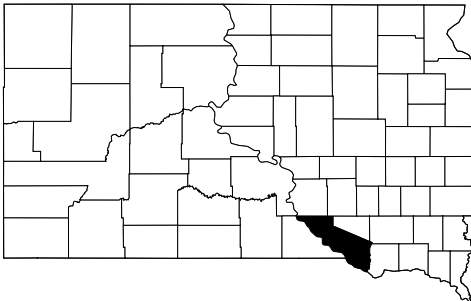
Butte County

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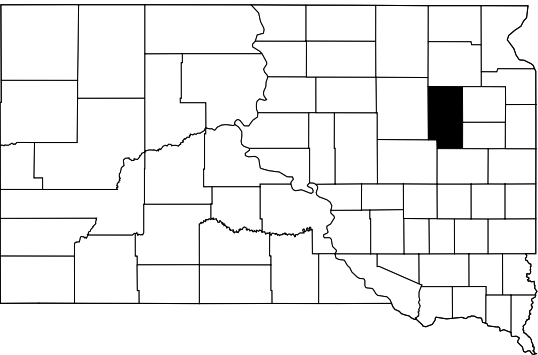
Campbell County

Demographic Information	Health Status Indicators 2015-2019																																																						
 <p>Campbell County is located in the north central portion of the state and averages 1.9 persons per square mile. Herreid is the largest city in Campbell County.</p>	<p style="text-align: center;">Nativity</p> <p>Percent of Low Birth Weight Infants LNE Percent of Mothers Receiving Care in 1st Trimester 78.7 Percent of Mothers Who Smoked Cigarettes While Pregnant¹ LNE Percent of Births Less Than 37 Wks. of Gestation 8.2 Average Age of Mother 29.0 Teenage Birth Rate² LNE Percent White, Non-Hispanic Births 88.5 Percent American Indian, Non-Hispanic Births LNE Percent Hispanic Births LNE • Percent Unmarried 9.8 • Percent WIC births 18.0 Percent Breastfeeding at discharge 85.0 Percent Payment-Private Insurance 71.2 • Percent Payment-Medicaid 10.2 Percent C-Section 26.2</p>	<p style="text-align: center;">Mortality³</p> <p>All Causes 602.6 Heart Disease 149.2 Cancer 107.6 Trachea, Bronchus, & Lung 50.6 Colon, Rectum, & Anus LNE Female Breast LNE Pancreas LNE Prostate LNE Leukemia LNE Chronic Lower Respiratory Diseases 28.7 • Alzheimer's Disease 16.0 Cerebrovascular Disease 34.4 Unintentional Injuries 98.5 Motor Vehicle Accidents 59.4 Diabetes 14.8 Influenza and Pneumonia 20.1 Suicide LNE Chronic Liver Disease and Cirrhosis LNE Infant Mortality LNE</p>																																																					
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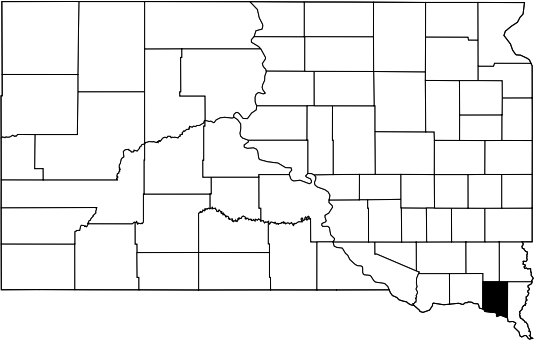
Charles Mix County

Demographic Information			Health Status Indicators 2015-2019		
 <p>Charles Mix County is located in the south central area of the state and averages 8.5 persons per square mile. Wagner is the largest city in Charles Mix County.</p>			Natality		
			<ul style="list-style-type: none"> ○ Percent of Low Birth Weight Infants 5.0 ● Percent of Mothers Receiving Care in 1st Trimester 63.3 ○ Percent of Mothers Who Smoked Cigarettes While Pregnant¹ 19.3 Percent of Births Less Than 37 Wks. of Gestation 8.6 ● Average Age of Mother 27.3 Teenage Birth Rate² 20.8 Percent White, Non-Hispanic Births 46.2 Percent American Indian, Non-Hispanic Births 44.5 Percent Hispanic Births 3.1 ○ Percent Unmarried 50.6 ○ Percent WIC births 49.5 ● Percent Breastfeeding at discharge 72.1 ● Percent Payment-Private Insurance 41.8 ○ Percent Payment-Medicaid 47.1 ○ Percent C-Section 31.2 		
2019 Population Information			Mortality³		
Subject	Number	Percent			
Total population	9,292	100.0			
White	5,769	62.1			
American Indian & Alaska Native	2,818	30.3			
Hispanic	345	3.7			
Black or African American	55	0.6			
Asian	24	0.3			
Pacific Islander	0	0.0			
Multi-Racial	281	3.0			
Under 5 years	810	8.7			
Under 18 years	2,772	29.8			
65 years and over	1,727	18.6			
			Leading Causes of Death		
					Total Deaths
			1. Heart Disease		124
			2. Cancer		116
			3. Alzheimer's Disease		47
			4. Unintentional Injuries		43
			5. Chronic Lower Respiratory Diseases		28
			T6. Cerebrovascular Disease		24
			T6. Influenza and Pneumonia		24
			8. Diabetes		22
			9. Chronic Liver Disease and Cirrhosis		19
			10. Suicide		12
			Percent of Deaths due to tobacco use		16.9
			Median age at death		78
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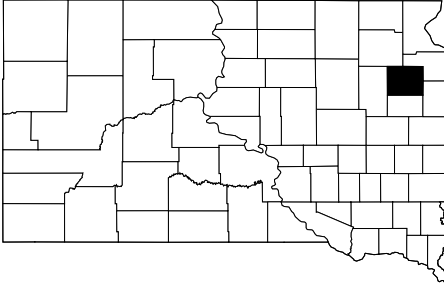
Clark County

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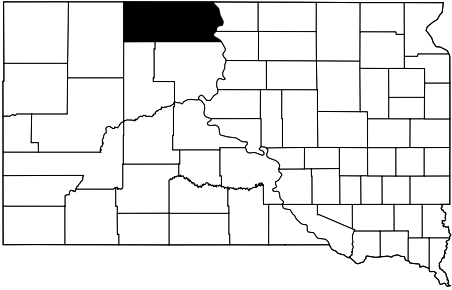
Clay County

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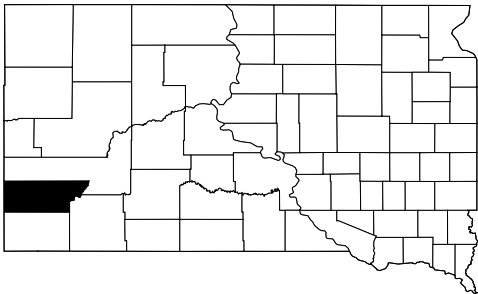
Codington County

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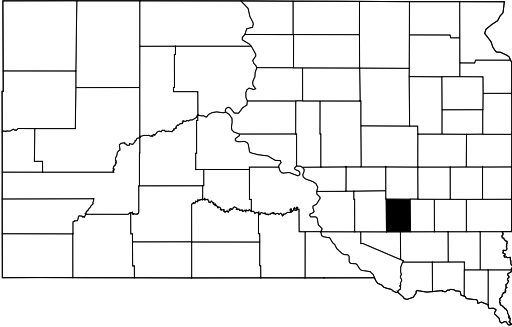
Corson County

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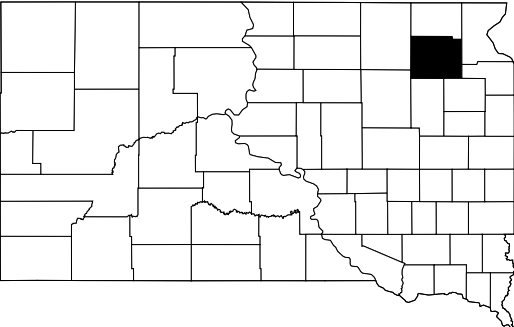
Custer County

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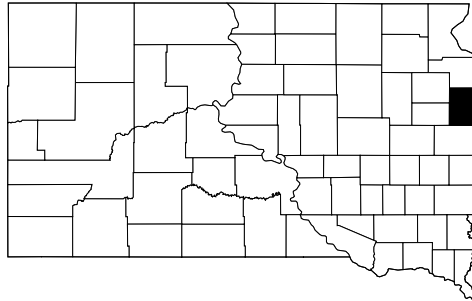
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Deuel County

Demographic Information



Deuel County borders Minnesota and averages 7.0 persons per square mile. Clear Lake is the largest city in Deuel County.

2019 Population Information

Subject	Number	Percent
Total population	4,351	100.0
White	4,061	93.3
Hispanic	170	3.9
Black or African American	34	0.8
American Indian & Alaska Native	26	0.6
Asian	9	0.2
Pacific Islander	0	0.0
Multi-Racial	51	1.2
Under 5 years	262	6.0
Under 18 years	1,003	23.1
65 years and over	959	22.0

Source: United States Census Bureau, 2019 Population Estimates

Health Status Indicators 2015-2019

Nativity

Percent of Low Birth Weight Infants	4.9
Percent of Mothers Receiving Care in 1st Trimester	85.0
Percent of Mothers Who Smoked Cigarettes While Pregnant ¹	9.4
Percent of Births Less Than 37 Wks. of Gestation	7.9
Average Age of Mother	28.5
Teenage Birth Rate ²	LNE
Percent White, Non-Hispanic Births	94.0
Percent American Indian, Non-Hispanic Births	1.1
Percent Hispanic Births	4.5
● Percent Unmarried	18.7
● Percent WIC births	18.0
Percent Breastfeeding at discharge	85.8
○ Percent Payment-Private Insurance	77.2
● Percent Payment-Medicaid	15.2
Percent C-Section	19.9

●Denotes a health status indicator which is significantly lower than the state average.

○Denotes a health status indicator which is significantly higher than the state average.

¹Data for mothers who used tobacco are self-reported.

²Teenage Birth rate is live births per 1,000 females age 15-17.

Mortality³

All Causes	651.9
Heart Disease	130.1
Cancer	183.4
Trachea, Bronchus, & Lung	34.9
Colon, Rectum, & Anus	18.4
Female Breast	19.2
Pancreas	11.0
Prostate	LNE
Leukemia	LNE
Chronic Lower Respiratory Diseases	61.2
● Alzheimer's Disease	19.5
Cerebrovascular Disease	43.2
● Unintentional Injuries	18.2
Motor Vehicle Accidents	7.9
Diabetes	12.7
Influenza and Pneumonia	15.9
Suicide	11.5
Chronic Liver Disease and Cirrhosis	10.8
Infant Mortality	LNE

Leading Causes of Death

Leading Causes of Death	Total Deaths
1. Cancer	65
2. Heart Disease	48
3. Chronic Lower Respiratory Diseases	25
4. Cerebrovascular Disease	16
5. Septicemia	12
6. Alzheimer's Disease	8
7. Influenza and Pneumonia	7
T8. Unintentional Injuries	6
T8. Pneumonitis due to Solids and Liquids	6
T10. Diabetes	5
T10. Hypertension	5
Percent of Deaths due to tobacco use	14.5
Median age at death	81

●Denotes a health status indicator which is significantly lower than the state average.

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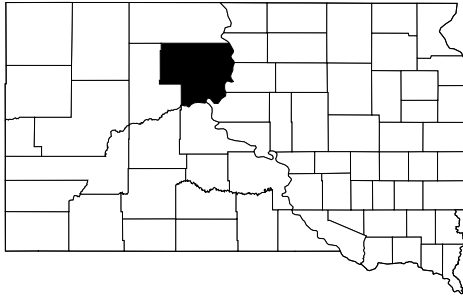
³All mortality rates except infant mortality are age-adjusted death rates per 100,000 population. Infant mortality is the number of infant (less than one year) deaths per 1,000 live births.

See technical notes for more information.

Source: South Dakota Department of Health, Office of Health Statistics

Dewey County

Demographic Information



Dewey County is located in the north central region of the state and averages 2.6 persons per square mile. Eagle Butte is the largest city in Dewey County.

2019 Population Information

Subject	Number	Percent
Total population	5,892	100.0
American Indian & Alaska Native	4,150	70.4
White	1,158	19.7
Hispanic	292	5.0
Black or African American	33	0.6
Asian	12	0.2
Pacific Islander	1	0.0
Multi-Racial	246	4.2
Under 5 years	734	12.5
Under 18 years	2,234	37.9
65 years and over	586	9.9

Source: United States Census Bureau, 2019 Population Estimates

Health Status Indicators 2015-2019

Nativity

Percent of Low Birth Weight Infants	8.7
● Percent of Mothers Receiving Care in 1st Trimester	46.8
○ Percent of Mothers Who Smoked Cigarettes While Pregnant ¹	17.3
○ Percent of Births Less Than 37 Wks. of Gestation	17.6
● Average Age of Mother	26.4
○ Teenage Birth Rate ²	39.9
Percent White, Non-Hispanic Births	12.3
Percent American Indian, Non-Hispanic Births	78.4
Percent Hispanic Births	1.8
○ Percent Unmarried	67.6
○ Percent WIC births	75.4
● Percent Breastfeeding at discharge	57.3
● Percent Payment-Private Insurance	18.4
○ Percent Payment-Medicaid	69.1
Percent C-Section	28.4

●Denotes a health status indicator which is significantly lower than the state average.

○Denotes a health status indicator which is significantly higher than the state average.

¹Data for mothers who used tobacco are self-reported.

²Teenage Birth rate is live births per 1,000 females age 15-17.

Mortality³

○ All Causes	1,260.0
Heart Disease	197.6
Cancer	184.2
Trachea, Bronchus, & Lung	47.0
Colon, Rectum, & Anus	LNE
Female Breast	34.8
Pancreas	9.9
Prostate	LNE
Leukemia	16.1
Chronic Lower Respiratory Diseases	47.0
● Alzheimer's Disease	15.2
Cerebrovascular Disease	35.9
○ Unintentional Injuries	115.8
○ Motor Vehicle Accidents	49.1
○ Diabetes	76.9
○ Influenza and Pneumonia	52.7
○ Suicide	50.7
○ Chronic Liver Disease and Cirrhosis	99.3
Infant Mortality	5.5

Leading Causes of Death

Leading Causes of Death	Total Deaths
1. Cancer	45
2. Heart Disease	44
3. Unintentional Injuries	31
4. Chronic Liver Disease and Cirrhosis	23
5. Diabetes	18
6. Suicide	14
7. Influenza and Pneumonia	11
T8. Chronic Lower Respiratory Diseases	10
T8. Kidney Disease	10
10. Cerebrovascular Disease	9

Percent of Deaths due to tobacco use	15.1
Median age at death	63

●Denotes a health status indicator which is significantly lower than the state average.

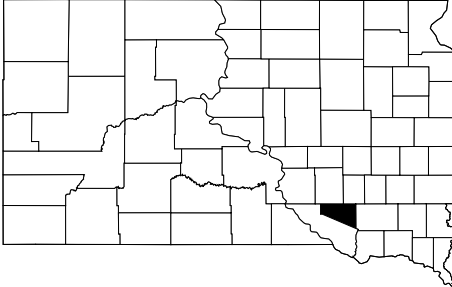
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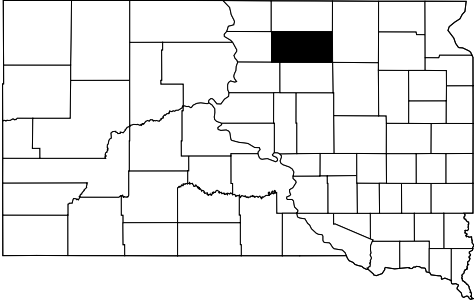
See technical notes for more information.

Source: South Dakota Department of Health, Office of Health Statistics

Douglas County

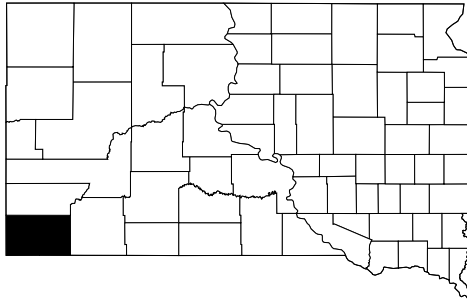
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Edmunds County

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Fall River County

Demographic Information



Fall River County is located in the southwestern corner of the state and averages 3.9 persons per square mile. Hot Springs is the largest city in Fall River County.

2019 Population Information

Subject	Number	Percent
Total population	6,713	100.0
White	5,654	84.2
American Indian & Alaska Native	401	6.0
Hispanic	258	3.8
Asian	108	1.6
Black or African American	75	1.1
Pacific Islander	6	0.1
Multi-Racial	211	3.1
Under 5 years	259	3.9
Under 18 years	1,127	16.8
65 years and over	2,007	29.9

Source: United States Census Bureau, 2019 Population Estimates

Health Status Indicators 2015-2019

Nativity

Percent of Low Birth Weight Infants	7.6
● Percent of Mothers Receiving Care in 1st Trimester	64.0
○ Percent of Mothers Who Smoked Cigarettes While Pregnant ¹	22.0
Percent of Births Less Than 37 Wks. of Gestation	8.7
Average Age of Mother	27.5
Teenage Birth Rate ²	5.3
Percent White, Non-Hispanic Births	79.0
Percent American Indian, Non-Hispanic Births	9.1
Percent Hispanic Births	5.1
Percent Unmarried	43.5
○ Percent WIC births	39.2
Percent Breastfeeding at discharge	82.2
● Percent Payment-Private Insurance	47.1
○ Percent Payment-Medicaid	39.7
● Percent C-Section	17.8

● Denotes a health status indicator which is significantly lower than the state average.

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¹Data for mothers who used tobacco are self-reported.

²Teenage Birth rate is live births per 1,000 females age 15-17.

Mortality³

○ All Causes	945.5
○ Heart Disease	203.1
○ Cancer	194.2
Trachea, Bronchus, & Lung	44.5
Colon, Rectum, & Anus	17.5
Female Breast	25.4
Pancreas	6.5
Prostate	25.1
Leukemia	4.0
○ Chronic Lower Respiratory Diseases	67.0
Alzheimer's Disease	45.0
Cerebrovascular Disease	32.3
Unintentional Injuries	70.1
Motor Vehicle Accidents	22.9
Diabetes	34.2
Influenza and Pneumonia	17.9
Suicide	18.2
Chronic Liver Disease and Cirrhosis	28.0
Infant Mortality	LNE

Leading Causes of Death

Leading Causes of Death	Total Deaths
1. Heart Disease	134
2. Cancer	126
3. Chronic Lower Respiratory Diseases	47
4. Unintentional Injuries	35
5. Alzheimer's Disease	31
6. Cerebrovascular Disease	23
7. Diabetes	22
8. Influenza and Pneumonia	13
9. Chronic Liver Disease and Cirrhosis	11
T10. Suicide	9
T10. Unspecified Dementia	9
T10. Hypertension	9
T10. Parkinson's Disease	9
T10. Vascular Dementia	9
T10. High Cholesterol/Triglycerides	9

Percent of Deaths due to tobacco use	26.4
Median age at death	79

● Denotes a health status indicator which is significantly lower than the state average.

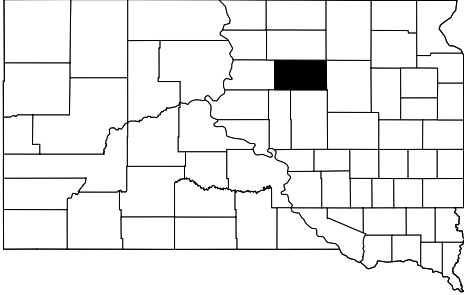
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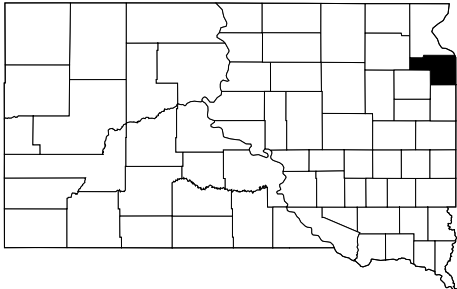
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Source: South Dakota Department of Health, Office of Health Statistics

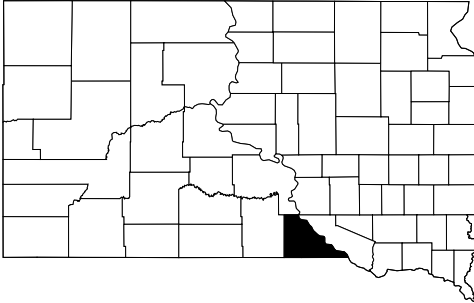
Faulk County

Demographic Information			Health Status Indicators 2015-2019		
 <p>Faulk County is located in north central South Dakota and averages 2.3 persons per square mile. Faulkton is the largest city in Faulk County.</p>			Nativity		
			<ul style="list-style-type: none"> Percent of Low Birth Weight Infants 6.6 ● Percent of Mothers Receiving Care in 1st Trimester 60.8 ● Percent of Mothers Who Smoked Cigarettes While Pregnant¹ 2.4 ● Percent of Births Less Than 37 Wks. of Gestation 4.2 ○ Average Age of Mother 29.7 Teenage Birth Rate² LNE Percent White, Non-Hispanic Births 98.8 Percent American Indian, Non-Hispanic Births LNE Percent Hispanic Births LNE ● Percent Unmarried 6.6 ● Percent WIC births 13.4 Percent Breastfeeding at discharge 89.8 ○ Percent Payment-Private Insurance 91.0 ● Percent Payment-Medicaid 8.4 Percent C-Section 28.3 	Mortality³	
2019 Population Information					
Subject	Number	Percent			
Total population	2,299	100.0			
White	2,233	97.1			
Hispanic	23	1.0			
Black or African American	17	0.7			
Asian	9	0.4			
American Indian & Alaska Native	7	0.3			
Pacific Islander	0	0.0			
Multi-Racial	10	0.4			
Under 5 years	191	8.3			
Under 18 years	591	25.7			
65 years and over	543	23.6			
			Leading Causes of Death		
				Total Deaths	
			1. Heart Disease	36	
			2. Cancer	27	
			3. Alzheimer's Disease	14	
			4. Chronic Lower Respiratory Diseases	11	
			T5. Unintentional Injuries	10	
			T5. Cerebrovascular Disease	10	
			7. Diabetes	5	
			Percent of Deaths due to tobacco use	9.3	
			Median age at death	83	
			<p>● Denotes a health status indicator which is significantly lower than the state average. ○ Denotes a health status indicator which is significantly higher than the state average. ³All mortality rates except infant mortality are age-adjusted death rates per 100,000 population. Infant mortality is the number of infant (less than one year) deaths per 1,000 live births.</p>		
			<p>● Denotes a health status indicator which is significantly lower than the state average. ○ Denotes a health status indicator which is significantly higher than the state average.</p>		
			<p>¹Data for mothers who used tobacco are self-reported. ²Teenage Birth rate is live births per 1,000 females age 15-17.</p>		
<p>Source: United States Census Bureau, 2019 Population Estimates</p>			<p>See technical notes for more information.</p> <p>Source: South Dakota Department of Health, Office of Health Statistics</p>		

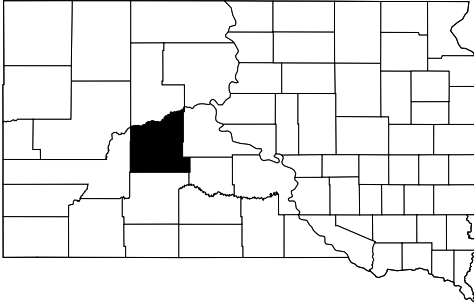
Grant County

Demographic Information	Health Status Indicators 2015-2019																																																																																																																																					
 <p>Grant County borders Minnesota in northeastern South Dakota and averages 10.3 persons per square mile. Milbank is the largest city in Grant County.</p> <p style="text-align: center;">2019 Population Information</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left;">Subject</th> <th style="text-align: right;">Number</th> <th style="text-align: right;">Percent</th> </tr> </thead> <tbody> <tr> <td>Total population</td> <td style="text-align: right;">7,052</td> <td style="text-align: right;">100.0</td> </tr> <tr> <td> White</td> <td style="text-align: right;">6,495</td> <td style="text-align: right;">92.1</td> </tr> <tr> <td> Hispanic</td> <td style="text-align: right;">353</td> <td style="text-align: right;">5.0</td> </tr> <tr> <td> American Indian & Alaska Native</td> <td style="text-align: right;">70</td> <td style="text-align: right;">1.0</td> </tr> <tr> <td> Black or African American</td> <td style="text-align: right;">33</td> <td style="text-align: right;">0.5</td> </tr> <tr> <td> Asian</td> <td style="text-align: right;">21</td> <td style="text-align: right;">0.3</td> </tr> <tr> <td> Pacific Islander</td> <td style="text-align: right;">1</td> <td style="text-align: right;">0.0</td> </tr> <tr> <td> Multi-Racial</td> <td style="text-align: right;">79</td> <td style="text-align: right;">1.1</td> </tr> <tr> <td> Under 5 years</td> <td style="text-align: right;">450</td> <td style="text-align: right;">6.4</td> </tr> <tr> <td> Under 18 years</td> <td style="text-align: right;">1,590</td> <td style="text-align: right;">22.5</td> </tr> <tr> <td> 65 years and over</td> <td style="text-align: right;">1,509</td> <td style="text-align: right;">21.4</td> </tr> </tbody> </table>	Subject	Number	Percent	Total population	7,052	100.0	White	6,495	92.1	Hispanic	353	5.0	American Indian & Alaska Native	70	1.0	Black or African American	33	0.5	Asian	21	0.3	Pacific Islander	1	0.0	Multi-Racial	79	1.1	Under 5 years	450	6.4	Under 18 years	1,590	22.5	65 years and over	1,509	21.4	<p style="text-align: center;">Nativity</p> <table border="1" style="width: 100%; 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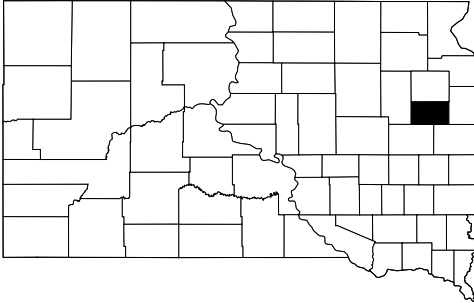
Gregory County

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<div style="text-align: center;">  </div> <p>Gregory County borders the west bank of the Missouri River and the state of Nebraska and averages 4.1 persons per square mile. 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Haakon County

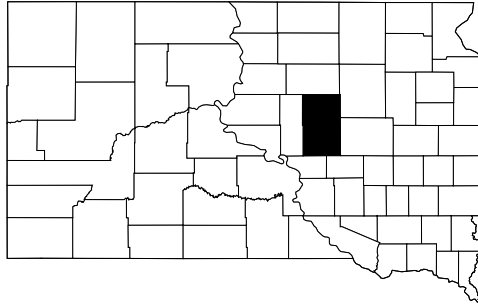
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Hamlin County

Demographic Information	Health Status Indicators 2015-2019	
		
<p>Hamlin County is located in the northeastern region of the state and averages 12.2 persons per square mile. Estelline is the largest city in Hamlin County.</p>		
<p>Source: United States Census Bureau, 2019 Population Estimates</p>		
<p>Source: South Dakota Department of Health, Office of Health Statistics</p>		
<p>Source: South Dakota Department of Health, Office of Health Statistics</p>		

Hand County

Demographic Information



Hand County is located in central South Dakota and averages 2.2 persons per square mile. Miller is the largest city in Hand County.

2019 Population Information

Subject	Number	Percent
Total population	3,191	100.0
White	3,082	96.6
Hispanic	43	1.3
American Indian & Alaska Native	15	0.5
Asian	13	0.4
Black or African American	5	0.2
Pacific Islander	1	0.0
Multi-Racial	32	1.0
Under 5 years	178	5.6
Under 18 years	690	21.6
65 years and over	821	25.7

Source: United States Census Bureau, 2019 Population Estimates

Health Status Indicators 2015-2019

Nativity

Percent of Low Birth Weight Infants	4.6
● Percent of Mothers Receiving Care in 1st Trimester	60.5
● Percent of Mothers Who Smoked Cigarettes While Pregnant ¹	7.6
Percent of Births Less Than 37 Wks. of Gestation	7.5
Average Age of Mother	28.8
Teenage Birth Rate ²	LNE
Percent White, Non-Hispanic Births	96.5
Percent American Indian, Non-Hispanic Births	LNE
Percent Hispanic Births	1.7
● Percent Unmarried	12.7
● Percent WIC births	8.1
Percent Breastfeeding at discharge	89.6
○ Percent Payment-Private Insurance	87.9
● Percent Payment-Medicaid	8.1
Percent C-Section	32.4

●Denotes a health status indicator which is significantly lower than the state average.

○Denotes a health status indicator which is significantly higher than the state average.

¹Data for mothers who used tobacco are self-reported.

²Teenage Birth rate is live births per 1,000 females age 15-17.

Mortality³

● All Causes	613.0
Heart Disease	130.3
Cancer	117.8
● Trachea, Bronchus, & Lung	13.3
Colon, Rectum, & Anus	17.5
Female Breast	LNE
Pancreas	8.5
Prostate	43.3
Leukemia	LNE
Chronic Lower Respiratory Diseases	40.7
Alzheimer's Disease	37.0
Cerebrovascular Disease	55.5
Unintentional Injuries	34.8
Motor Vehicle Accidents	LNE
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Influenza and Pneumonia	21.1
Suicide	20.2
Chronic Liver Disease and Cirrhosis	8.5
Infant Mortality	LNE

Leading Causes of Death

Leading Causes of Death	Total Deaths
1. Heart Disease	52
2. Cancer	35
3. Cerebrovascular Disease	23
4. Alzheimer's Disease	18
5. Chronic Lower Respiratory Diseases	16
6. Hypertension	13
7. Unintentional Injuries	11
8. Influenza and Pneumonia	7
9. Unspecified Dementia	6

Percent of Deaths due to tobacco use	27.2
Median age at death	85

●Denotes a health status indicator which is significantly lower than the state average.

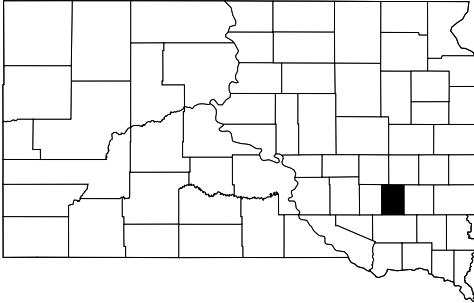
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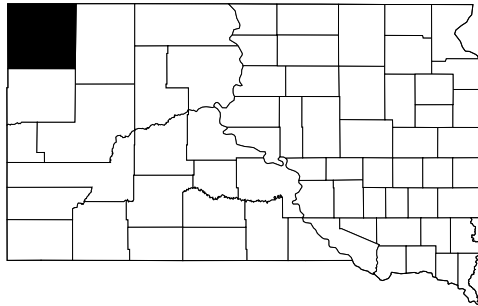
Source: South Dakota Department of Health, Office of Health Statistics

Hanson County

Demographic Information			Health Status Indicators 2015-2019																																									
 <p>Hanson County is located in southeastern South Dakota and averages 7.9 people per square mile. Alexandria is the largest city in Hanson County.</p>			Nativity																																									
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Harding County

Demographic Information



Harding County is located in the northwestern corner of the state and averages 0.5 persons per square mile. Buffalo is the largest city in Harding County.

2019 Population Information

Subject	Number	Percent
Total population	1,298	100.0
White	1,191	91.8
Hispanic	34	2.6
American Indian & Alaska Native	31	2.4
Black or African American	16	1.2
Asian	3	0.2
Pacific Islander	0	0.0
Multi-Racial	23	1.8
Under 5 years	97	7.5
Under 18 years	310	23.9
65 years and over	236	18.2

Source: United States Census Bureau, 2019 Population Estimates

Health Status Indicators 2015-2019

Nativity

Percent of Low Birth Weight Infants	4.9
Percent of Mothers Receiving Care in 1st Trimester	85.2
● Percent of Mothers Who Smoked Cigarettes While Pregnant ¹	6.1
Percent of Births Less Than 37 Wks. of Gestation	4.9
○ Average Age of Mother	29.5
Teenage Birth Rate ²	LNE
Percent White, Non-Hispanic Births	91.5
Percent American Indian, Non-Hispanic Births	3.7
Percent Hispanic Births	LNE
● Percent Unmarried	13.4
● Percent WIC births	8.5
Percent Breastfeeding at discharge	91.0
○ Percent Payment-Private Insurance	80.5
● Percent Payment-Medicaid	8.5
Percent C-Section	26.8

●Denotes a health status indicator which is significantly lower than the state average.

○Denotes a health status indicator which is significantly higher than the state average.

¹Data for mothers who used tobacco are self-reported.

²Teenage Birth rate is live births per 1,000 females age 15-17.

Mortality³

● All Causes	383.2
Heart Disease	118.4
● Cancer	84.1
Trachea, Bronchus, & Lung	LNE
Colon, Rectum, & Anus	LNE
Female Breast	LNE
Pancreas	LNE
Prostate	LNE
Leukemia	LNE
Chronic Lower Respiratory Diseases	LNE
Alzheimer's Disease	LNE
Cerebrovascular Disease	LNE
Unintentional Injuries	43.2
Motor Vehicle Accidents	LNE
Diabetes	LNE
Influenza and Pneumonia	LNE
Suicide	LNE
Chronic Liver Disease and Cirrhosis	LNE
Infant Mortality	LNE

Leading Causes of Death

Leading Causes of Death	Total Deaths
1. Heart Disease	10
2. Cancer	8
Percent of Deaths due to tobacco use	9.4
Median age at death	75

●Denotes a health status indicator which is significantly lower than the state average.

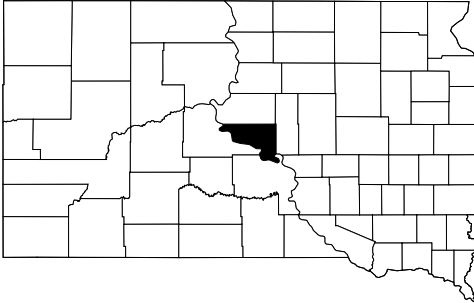
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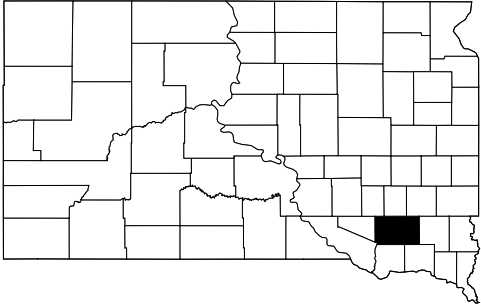
See technical notes for more information.

Source: South Dakota Department of Health, Office of Health Statistics

Hughes County

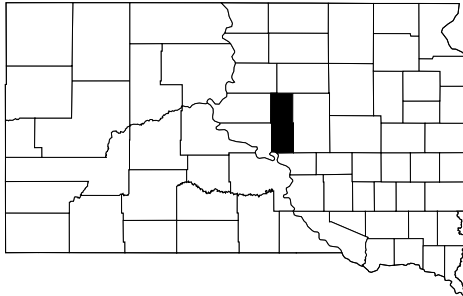
Demographic Information			Health Status Indicators 2015-2019			
 <p>Hughes County is located in the center of the state and averages 23.6 persons per square mile. Pierre is the largest city in Hughes County.</p>			Nativity		Mortality³	
			<ul style="list-style-type: none"> Percent of Low Birth Weight Infants 6.7 ● Percent of Mothers Receiving Care in 1st Trimester 53.7 ○ Percent of Mothers Who Smoked Cigarettes While Pregnant¹ 17.0 Percent of Births Less Than 37 Wks. of Gestation 9.7 Average Age of Mother 28.2 Teenage Birth Rate² 10.8 Percent White, Non-Hispanic Births 69.8 Percent American Indian, Non-Hispanic Births 21.3 Percent Hispanic Births 3.0 ○ Percent Unmarried 43.3 Percent WIC births 32.0 ● Percent Breastfeeding at discharge 75.9 Percent Payment-Private Insurance 58.0 ○ Percent Payment-Medicaid 39.0 Percent C-Section 27.9 	<ul style="list-style-type: none"> All Causes 717.2 ● Heart Disease 131.9 Cancer 155.1 <ul style="list-style-type: none"> Trachea, Bronchus, & Lung 44.8 Colon, Rectum, & Anus 19.7 Female Breast 27.6 Pancreas 12.5 Prostate 10.4 Leukemia 4.4 ○ Chronic Lower Respiratory Diseases 65.4 ● Alzheimer's Disease 25.3 Cerebrovascular Disease 38.6 Unintentional Injuries 46.2 <ul style="list-style-type: none"> Motor Vehicle Accidents 14.1 ○ Diabetes 40.9 ○ Influenza and Pneumonia 35.3 Suicide 16.2 ● Chronic Liver Disease and Cirrhosis 6.0 Infant Mortality 8.6 		
2019 Population Information			Leading Causes of Death		Total Deaths	
Subject	Number	Percent	<ol style="list-style-type: none"> 1. Cancer 174 2. Heart Disease 157 3. Chronic Lower Respiratory Diseases 75 T4. Cerebrovascular Disease 47 T4. Diabetes 47 6. Unintentional Injuries 45 7. Influenza and Pneumonia 43 8. Alzheimer's Disease 33 9. Suicide 15 T10. Septicemia 9 T10. Hypertension 9 			
Total population	17,526	100.0	Percent of Deaths due to tobacco use 20.8			
White	14,301	81.6	Median age at death 79			
American Indian & Alaska Native	1,997	11.4				
Hispanic	559	3.2				
Asian	134	0.8				
Black or African American	118	0.7				
Pacific Islander	0	0.0				
Multi-Racial	417	2.4				
Under 5 years	1,175	6.7				
Under 18 years	4,241	24.2				
65 years and over	3,158	18.0				
<p>●Denotes a health status indicator which is significantly lower than the state average.</p> <p>○Denotes a health status indicator which is significantly higher than the state average.</p>			<p>¹Data for mothers who used tobacco are self-reported.</p> <p>²Teenage Birth rate is live births per 1,000 females age 15-17.</p>			
<p>Source: United States Census Bureau, 2019 Population Estimates</p>			<p>See technical notes for more information.</p> <p>Source: South Dakota Department of Health, Office of Health Statistics</p>			

Hutchinson County

Demographic Information			Health Status Indicators 2015-2019			
 <p>Hutchinson County is located in the southeastern region of the state and averages 9.0 persons per square mile. Parkston is the largest city in Hutchinson County.</p>			Nativity		Mortality³	
			<ul style="list-style-type: none"> Percent of Low Birth Weight Infants 6.0 ● Percent of Mothers Receiving Care in 1st Trimester 67.6 ● Percent of Mothers Who Smoked Cigarettes While Pregnant¹ 7.6 ● Percent of Births Less Than 37 Wks. of Gestation 6.2 ○ Average Age of Mother 28.7 Teenage Birth Rate² LNE Percent White, Non-Hispanic Births 93.5 Percent American Indian, Non-Hispanic Births 1.0 Percent Hispanic Births 3.1 ● Percent Unmarried 18.6 ● Percent WIC births 17.4 Percent Breastfeeding at discharge 86.0 ○ Percent Payment-Private Insurance 78.4 ● Percent Payment-Medicaid 15.3 Percent C-Section 24.7 	<ul style="list-style-type: none"> All Causes 725.3 Heart Disease 155.3 Cancer 136.2 <ul style="list-style-type: none"> Trachea, Bronchus, & Lung 30.5 Colon, Rectum, & Anus 17.5 Female Breast 13.4 Pancreas 8.2 Prostate 22.5 Leukemia LNE Chronic Lower Respiratory Diseases 39.8 <ul style="list-style-type: none"> ○ Alzheimer's Disease 57.2 Cerebrovascular Disease 50.1 Unintentional Injuries 57.7 <ul style="list-style-type: none"> Motor Vehicle Accidents 22.8 ● Diabetes 12.3 Influenza and Pneumonia 16.2 ● Suicide 8.3 Chronic Liver Disease and Cirrhosis 14.7 Infant Mortality 8.6 		
2019 Population Information			Leading Causes of Death		Total Deaths	
Subject	Number	Percent	<ol style="list-style-type: none"> 1. Heart Disease 131 2. Cancer 95 3. Alzheimer's Disease 62 4. Cerebrovascular Disease 44 5. Unintentional Injuries 31 6. Chronic Lower Respiratory Diseases 29 7. Influenza and Pneumonia 17 8. Hypertension 12 T9. Unspecified Dementia 11 T9. Parkinson's Disease 11 			
Total population	7,291	100.0	Percent of Deaths due to tobacco use 10.4 Median age at death 86			
White	6,879	94.3				
Hispanic	167	2.3				
Black or African American	76	1.0				
American Indian & Alaska Native	75	1.0				
Asian	18	0.2				
Pacific Islander	2	0.0				
Multi-Racial	74	1.0				
Under 5 years	622	8.5				
Under 18 years	1,847	25.3				
65 years and over	1,670	22.9				
<p>Source: United States Census Bureau, 2019 Population Estimates</p>			<p>●Denotes a health status indicator which is significantly lower than the state average. ○Denotes a health status indicator which is significantly higher than the state average. ¹Data for mothers who used tobacco are self-reported. ²Teenage Birth rate is live births per 1,000 females age 15-17.</p>		<p>●Denotes a health status indicator which is significantly lower than the state average. ○Denotes a health status indicator which is significantly higher than the state average. ³All mortality rates except infant mortality are age-adjusted death rates per 100,000 population. Infant mortality is the number of infant (less than one year) deaths per 1,000 live births.</p> <p>See technical notes for more information.</p> <p>Source: South Dakota Department of Health, Office of Health Statistics</p>	

Hyde County

Demographic Information



Hyde County is located in the central region of the state and averages 1.5 people per square mile. Highmore is the largest city in Hyde County.

2019 Population Information

Subject	Number	Percent
Total population	1,301	100.0
White	1,128	86.7
American Indian & Alaska Native	108	8.3
Hispanic	19	1.5
Black or African American	10	0.8
Asian	3	0.2
Pacific Islander	1	0.1
Multi-Racial	32	2.5
Under 5 years	82	6.3
Under 18 years	280	21.5
65 years and over	326	25.1

Source: United States Census Bureau, 2019 Population Estimates

Health Status Indicators 2015-2019

Natality

Percent of Low Birth Weight Infants	7.1
Percent of Mothers Receiving Care in 1st Trimester	61.9
Percent of Mothers Who Smoked Cigarettes While Pregnant ¹	8.2
Percent of Births Less Than 37 Wks. of Gestation	7.1
Average Age of Mother	27.1
Teenage Birth Rate ²	LNE
Percent White, Non-Hispanic Births	84.7
Percent American Indian, Non-Hispanic Births	9.4
Percent Hispanic Births	LNE
Percent Unmarried	32.9
Percent WIC births	22.4
Percent Breastfeeding at discharge	81.2
Percent Payment-Private Insurance	69.4
Percent Payment-Medicaid	28.2
Percent C-Section	20.0

●Denotes a health status indicator which is significantly lower than the state average.

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¹Data for mothers who used tobacco are self-reported.

²Teenage Birth rate is live births per 1,000 females age 15-17.

Mortality³

All Causes	821.8
Heart Disease	218.7
Cancer	165.2
Trachea, Bronchus, & Lung	31.1
Colon, Rectum, & Anus	25.3
Female Breast	43.0
Pancreas	LNE
Prostate	LNE
Leukemia	LNE
Chronic Lower Respiratory Diseases	35.9
Alzheimer's Disease	45.5
Cerebrovascular Disease	52.3
Unintentional Injuries	73.8
Motor Vehicle Accidents	45.0
Diabetes	27.4
Influenza and Pneumonia	25.9
Suicide	LNE
Chronic Liver Disease and Cirrhosis	LNE
Infant Mortality	LNE

Leading Causes of Death

Leading Causes of Death	Total Deaths
1. Heart Disease	29
2. Cancer	24
3. Cerebrovascular Disease	10
T4. Unintentional Injuries	8
T4. Alzheimer's Disease	8
6. Chronic Lower Respiratory Diseases	5
Percent of Deaths due to tobacco use	12.6
Median age at death	85

●Denotes a health status indicator which is significantly lower than the state average.

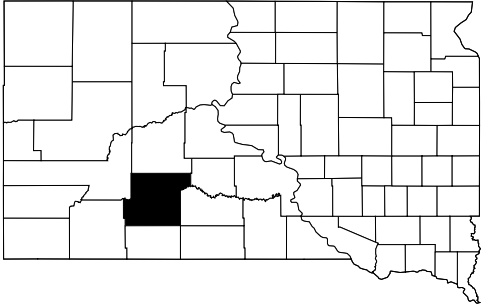
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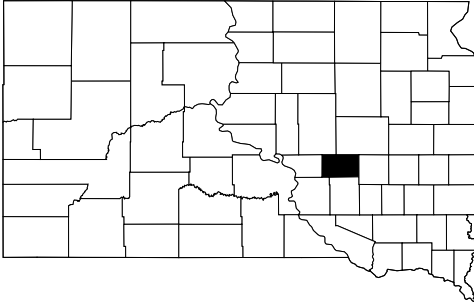
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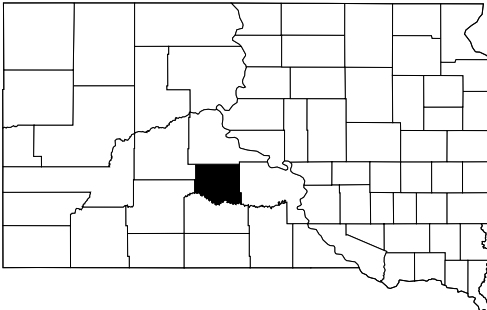
Jackson County

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 <p>Jackson County is located in western South Dakota and averages 1.8 persons per square mile. Wanblee is the largest city in Jackson County.</p> <p>2019 Population Information</p> <table border="1"> <thead> <tr> <th>Subject</th> <th>Number</th> <th>Percent</th> </tr> </thead> <tbody> <tr> <td>Total population</td> <td>3,344</td> <td>100.0</td> </tr> <tr> <td>American Indian & Alaska Native</td> <td>1,700</td> <td>50.8</td> </tr> <tr> <td>White</td> <td>1,314</td> <td>39.3</td> </tr> <tr> <td>Hispanic</td> <td>133</td> <td>4.0</td> </tr> <tr> <td>Black or African American</td> <td>29</td> <td>0.9</td> </tr> <tr> <td>Asian</td> <td>4</td> <td>0.1</td> </tr> <tr> <td>Pacific Islander</td> <td>1</td> <td>0.0</td> </tr> <tr> <td>Multi-Racial</td> <td>163</td> <td>4.9</td> </tr> <tr> <td>Under 5 years</td> <td>375</td> <td>11.2</td> </tr> <tr> <td>Under 18 years</td> <td>1,165</td> <td>34.8</td> </tr> <tr> <td>65 years and over</td> <td>451</td> <td>13.5</td> </tr> </tbody> </table> <p>Source: United States Census Bureau, 2019 Population Estimates</p>	Subject	Number	Percent	Total population	3,344	100.0	American Indian & Alaska Native	1,700	50.8	White	1,314	39.3	Hispanic	133	4.0	Black or African American	29	0.9	Asian	4	0.1	Pacific Islander	1	0.0	Multi-Racial	163	4.9	Under 5 years	375	11.2	Under 18 years	1,165	34.8	65 years and over	451	13.5	<p>Nativity</p> <ul style="list-style-type: none"> ○ Percent of Low Birth Weight Infants 7.2 ● Percent of Mothers Receiving Care in 1st Trimester 59.6 ○ Percent of Mothers Who Smoked Cigarettes While Pregnant¹ 19.3 ○ Percent of Births Less Than 37 Wks. of Gestation 13.6 ● Average Age of Mother 26.6 ○ Teenage Birth Rate² 36.7 Percent White, Non-Hispanic Births 16.2 Percent American Indian, Non-Hispanic Births 75.8 Percent Hispanic Births 3.2 ○ Percent Unmarried 75.8 ○ Percent WIC births 63.6 ● Percent Breastfeeding at discharge 63.5 ● Percent Payment-Private Insurance 14.7 ○ Percent Payment-Medicaid 63.1 Percent C-Section 25.8 <p>●Denotes a health status indicator which is significantly lower than the state average. ○Denotes a health status indicator which is significantly higher than the state average.</p> <p>¹Data for mothers who used tobacco are self-reported. ²Teenage Birth rate is live births per 1,000 females age 15-17.</p>	<p>Mortality³</p> <ul style="list-style-type: none"> ○ All Causes 951.7 Heart Disease 206.5 Cancer 185.5 <ul style="list-style-type: none"> Trachea, Bronchus, & Lung 45.7 Colon, Rectum, & Anus LNE Female Breast LNE Pancreas LNE Prostate 39.3 Leukemia LNE Chronic Lower Respiratory Diseases 75.7 Alzheimer's Disease LNE Cerebrovascular Disease 25.9 ○ Unintentional Injuries 120.8 <ul style="list-style-type: none"> ○ Motor Vehicle Accidents 92.7 Diabetes 43.4 Influenza and Pneumonia LNE Suicide 45.7 Chronic Liver Disease and Cirrhosis 43.6 Infant Mortality LNE <p>Leading Causes of Death</p> <table border="1"> <thead> <tr> <th>Leading Causes of Death</th> <th>Total Deaths</th> </tr> </thead> <tbody> <tr> <td>1. Heart Disease</td> <td>39</td> </tr> <tr> <td>2. Cancer</td> <td>34</td> </tr> <tr> <td>3. Unintentional Injuries</td> <td>18</td> </tr> <tr> <td>4. Chronic Lower Respiratory Diseases</td> <td>13</td> </tr> <tr> <td>5. Diabetes</td> <td>8</td> </tr> <tr> <td>6. Suicide</td> <td>7</td> </tr> <tr> <td>7. Chronic Liver Disease and Cirrhosis</td> <td>6</td> </tr> <tr> <td>T8. Cerebrovascular Disease</td> <td>5</td> </tr> <tr> <td>T8. Aortic Aneurysm and Dissection</td> <td>5</td> </tr> <tr> <td>Percent of Deaths due to tobacco use</td> <td>10.1</td> </tr> <tr> <td>Median age at death</td> <td>72</td> </tr> </tbody> </table> <p>●Denotes a health status indicator which is significantly lower than the state average. ○Denotes a health status indicator which is significantly higher than the state average. ³All mortality rates except infant mortality are age-adjusted death rates per 100,000 population. Infant mortality is the number of infant (less than one year) deaths per 1,000 live births.</p> <p>See technical notes for more information.</p> <p>Source: South Dakota Department of Health, Office of Health Statistics</p>	Leading Causes of Death	Total Deaths	1. Heart Disease	39	2. Cancer	34	3. Unintentional Injuries	18	4. Chronic Lower Respiratory Diseases	13	5. Diabetes	8	6. Suicide	7	7. Chronic Liver Disease and Cirrhosis	6	T8. Cerebrovascular Disease	5	T8. Aortic Aneurysm and Dissection	5	Percent of Deaths due to tobacco use	10.1	Median age at death	72
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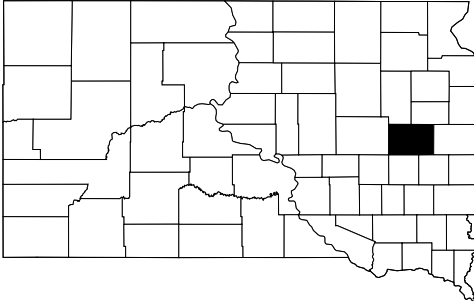
Jerauld County

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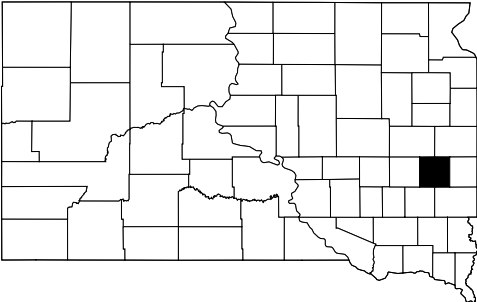
Jones County

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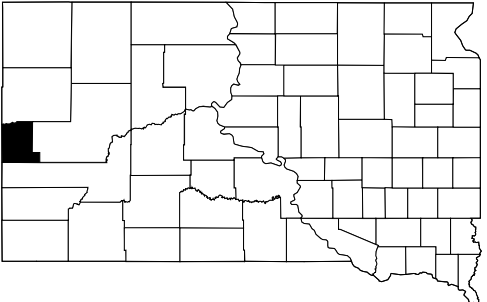
Kingsbury County

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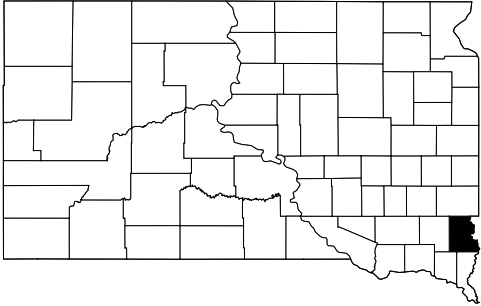
Lake County

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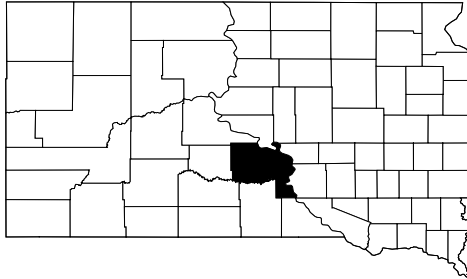
Demographic Information			Health Status Indicators 2015-2019			
 <p>Lawrence County is located along the Wyoming border and averages 32.3 persons per square mile. Spearfish is the largest city in Lawrence County.</p>			Natality		Mortality³	
			<ul style="list-style-type: none"> Percent of Low Birth Weight Infants 8.1 Percent of Mothers Receiving Care in 1st Trimester 80.6 Percent of Mothers Who Smoked Cigarettes While Pregnant¹ 15.0 Percent of Births Less Than 37 Wks. of Gestation 10.2 ○ Average Age of Mother 28.6 ● Teenage Birth Rate² 4.8 Percent White, Non-Hispanic Births 88.3 Percent American Indian, Non-Hispanic Births 2.8 Percent Hispanic Births 4.3 Percent Unmarried 36.3 Percent WIC births 26.7 Percent Breastfeeding at discharge 85.6 Percent Payment-Private Insurance 62.3 Percent Payment-Medicaid 29.5 ● Percent C-Section 21.6 	<ul style="list-style-type: none"> ● All Causes 656.0 ● Heart Disease 120.1 ● Cancer 132.3 <ul style="list-style-type: none"> ● Trachea, Bronchus, & Lung 28.4 ● Colon, Rectum, & Anus 15.7 ● Female Breast 22.0 ● Pancreas 6.6 ● Prostate 20.2 ● Leukemia 2.2 Chronic Lower Respiratory Diseases 42.2 Alzheimer's Disease 31.0 Cerebrovascular Disease 27.6 Unintentional Injuries 51.6 <ul style="list-style-type: none"> ● Motor Vehicle Accidents 14.6 ● Diabetes 17.3 Influenza and Pneumonia 17.2 Suicide 22.6 Chronic Liver Disease and Cirrhosis 15.2 Infant Mortality 11.6 		
2019 Population Information			Leading Causes of Death		Total Deaths	
Subject	Number	Percent	<ol style="list-style-type: none"> 1. Cancer 247 2. Heart Disease 235 3. Chronic Lower Respiratory Diseases 86 4. Unintentional Injuries 76 5. Alzheimer's Disease 64 6. Cerebrovascular Disease 53 7. Diabetes 33 7. Influenza and Pneumonia 33 9. Suicide 31 10. Chronic Liver Disease and Cirrhosis 26 			
Total population	25,844	100.0	Percent of Deaths due to tobacco use 18.6 Median age at death 80			
White	23,410	90.6				
Hispanic	900	3.5				
American Indian & Alaska Native	525	2.0				
Asian	315	1.2				
Black or African American	190	0.7				
Pacific Islander	13	0.1				
Multi-Racial	491	1.9				
Under 5 years	1,082	4.2				
Under 18 years	4,525	17.5				
65 years and over	5,917	22.9				
<p>Source: United States Census Bureau, 2019 Population Estimates</p>			<p>●Denotes a health status indicator which is significantly lower than the state average. ○Denotes a health status indicator which is significantly higher than the state average. ¹Data for mothers who used tobacco are self-reported. ²Teenage Birth rate is live births per 1,000 females age 15-17.</p>		<p>See technical notes for more information.</p> <p>Source: South Dakota Department of Health, Office of Health Statistics</p>	

Lincoln County

Demographic Information			Health Status Indicators 2015-2019																																									
 <p>Lincoln County is located in southeastern South Dakota and averages 105.9 persons per square mile. Harrisburg is the largest city in Lincoln County.</p>			Nativity																																									
			<ul style="list-style-type: none"> Percent of Low Birth Weight Infants 6.6 ○ Percent of Mothers Receiving Care in 1st Trimester 89.2 ● Percent of Mothers Who Smoked Cigarettes While Pregnant¹ 5.2 Percent of Births Less Than 37 Wks. of Gestation 8.4 ○ Average Age of Mother 29.7 ● Teenage Birth Rate² 2.9 Percent White, Non-Hispanic Births 92.4 Percent American Indian, Non-Hispanic Births 0.5 Percent Hispanic Births 2.4 ● Percent Unmarried 17.7 ● Percent WIC births 8.3 ○ Percent Breastfeeding at discharge 86.1 ○ Percent Payment-Private Insurance 85.1 ● Percent Payment-Medicaid 10.0 Percent C-Section 25.1 																																									
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Lyman County

Demographic Information



Lyman County is located in central South Dakota and averages 2.3 persons per square mile. Lower Brule is the largest city in Lyman County.

2019 Population Information

Subject	Number	Percent
Total population	3,781	100.0
White	2,068	54.7
American Indian & Alaska Native	1,462	38.7
Hispanic	97	2.6
Black or African American	21	0.6
Asian	14	0.4
Pacific Islander	2	0.1
Multi-Racial	117	3.1
Under 5 years	328	8.7
Under 18 years	1,111	29.4
65 years and over	612	16.2

Source: United States Census Bureau, 2019 Population Estimates

Health Status Indicators 2015-2019

Nativity

Percent of Low Birth Weight Infants	8.9
● Percent of Mothers Receiving Care in 1st Trimester	47.5
○ Percent of Mothers Who Smoked Cigarettes While Pregnant ¹	20.7
Percent of Births Less Than 37 Wks. of Gestation	12.2
● Average Age of Mother	26.9
○ Teenage Birth Rate ²	38.3
Percent White, Non-Hispanic Births	37.2
Percent American Indian, Non-Hispanic Births	54.8
Percent Hispanic Births	1.4
○ Percent Unmarried	64.3
○ Percent WIC births	55.2
● Percent Breastfeeding at discharge	67.7
● Percent Payment-Private Insurance	37.2
○ Percent Payment-Medicaid	55.9
○ Percent C-Section	32.3

● Denotes a health status indicator which is significantly lower than the state average.

○ Denotes a health status indicator which is significantly higher than the state average.

¹Data for mothers who used tobacco are self-reported.

²Teenage Birth rate is live births per 1,000 females age 15-17.

Mortality³

○ All Causes	924.1
Heart Disease	159.4
Cancer	204.5
Trachea, Bronchus, & Lung	69.5
Colon, Rectum, & Anus	19.9
Female Breast	40.0
Pancreas	12.3
Prostate	32.3
Leukemia	LNE
Chronic Lower Respiratory Diseases	38.4
Alzheimer's Disease	39.5
Cerebrovascular Disease	40.5
Unintentional Injuries	80.1
Motor Vehicle Accidents	43.6
Diabetes	55.8
Influenza and Pneumonia	20.5
○ Suicide	76.5
Chronic Liver Disease and Cirrhosis	32.2
Infant Mortality	8.6

Leading Causes of Death

Leading Causes of Death	Total Deaths
1. Cancer	46
2. Heart Disease	33
3. Unintentional Injuries	14
4. Suicide	12
5. Diabetes	11
T6. Chronic Lower Respiratory Diseases	9
T6. Cerebrovascular Disease	9
8. Alzheimer's Disease	8
9. Chronic Liver Disease and Cirrhosis	5
Percent of Deaths due to tobacco use	25.4
Median age at death	72

● Denotes a health status indicator which is significantly lower than the state average.

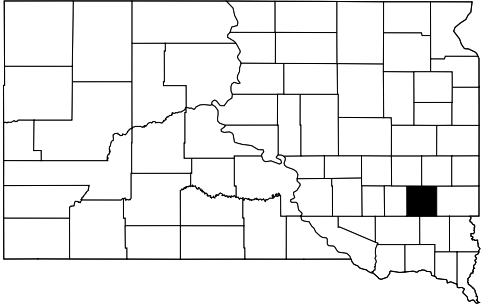
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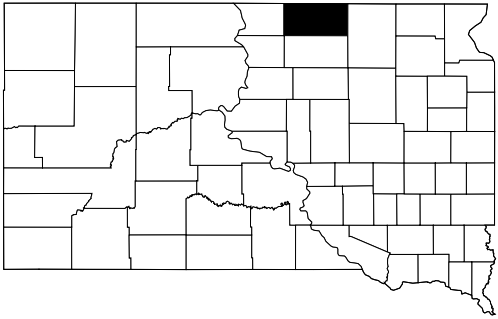
See technical notes for more information.

Source: South Dakota Department of Health, Office of Health Statistics

McCook County

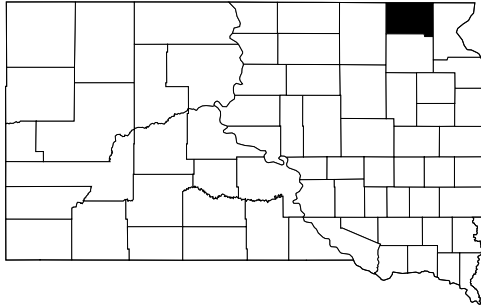
Demographic Information			Health Status Indicators 2015-2019				
 <p>McCook County is located in eastern South Dakota and averages 9.7 persons per square mile. Salem is the largest city in McCook County.</p>			Nativity				
			Percent of Low Birth Weight Infants	4.9		Mortality³	
2019 Population Information			Percent of Mothers Receiving Care in 1st Trimester	73.9	○ All Causes	891.0	
			Percent of Mothers Who Smoked Cigarettes While Pregnant ¹	8.6	○ Heart Disease	209.6	
Subject	Number	Percent	Percent of Births Less Than 37 Wks. of Gestation	7.6	○ Cancer	215.1	
Total population	5,586	100.0	○ Average Age of Mother	28.9	○ Trachea, Bronchus, & Lung	45.2	
White	5,190	92.9	Teenage Birth Rate ²	LNE	○ Colon, Rectum, & Anus	16.8	
Hispanic	238	4.3	Percent White, Non-Hispanic Births	93.3	○ Female Breast	21.7	
American Indian & Alaska Native	51	0.9	Percent American Indian, Non-Hispanic Births	0.7	○ Pancreas	7.4	
Black or African American	37	0.7	Percent Hispanic Births	4.2	○ Prostate	56.1	
Asian	9	0.2	● Percent Unmarried	22.2	○ Leukemia	LNE	
Pacific Islander	3	0.1	● Percent WIC births	22.5	● Chronic Lower Respiratory Diseases	13.8	
Multi-Racial	58	1.0	Percent Breastfeeding at discharge	83.0	○ Alzheimer's Disease	67.1	
Under 5 years	458	8.2	○ Percent Payment-Private Insurance	80.0	○ Cerebrovascular Disease	44.5	
Under 18 years	1,552	27.8	● Percent Payment-Medicaid	14.9	○ Unintentional Injuries	48.8	
65 years and over	1,057	18.9	Percent C-Section	26.1	○ Motor Vehicle Accidents	24.3	
						○ Diabetes	36.9
						○ Influenza and Pneumonia	12.1
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						○ Chronic Liver Disease and Cirrhosis	LNE
						○ Infant Mortality	LNE
						Leading Causes of Death	
						Total Deaths	
						1. Heart Disease	91
						2. Cancer	88
						3. Alzheimer's Disease	32
						4. Cerebrovascular Disease	20
						5. Unintentional Injuries	15
						6. Diabetes	14
						7. Septicemia	8
						T8. Chronic Lower Respiratory Diseases	6
						T8. Influenza and Pneumonia	6
						T8. Unspecified Dementia	6
						T8. Parkinson's Disease	6
						Percent of Deaths due to tobacco use	11.3
						Median age at death	80
						<p>●Denotes a health status indicator which is significantly lower than the state average. ○Denotes a health status indicator which is significantly higher than the state average. ³All mortality rates except infant mortality are age-adjusted death rates per 100,000 population. Infant mortality is the number of infant (less than one year) deaths per 1,000 live births.</p>	
						See technical notes for more information.	
						Source: South Dakota Department of Health, Office of Health Statistics	
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McPherson County

Demographic Information			Health Status Indicators 2015-2019																																									
 <p>McPherson County is located in the north central region of the state and averages 2.1 persons per square mile. Eureka is the largest city in McPherson County.</p>			Nativity																																									
			<ul style="list-style-type: none"> Percent of Low Birth Weight Infants 12.2 ● Percent of Mothers Receiving Care in 1st Trimester 56.5 Percent of Mothers Who Smoked Cigarettes While Pregnant¹ 10.4 Percent of Births Less Than 37 Wks. of Gestation 11.3 Average Age of Mother 28.9 Teenage Birth Rate² LNE Percent White, Non-Hispanic Births 94.8 Percent American Indian, Non-Hispanic Births 3.5 Percent Hispanic Births LNE ● Percent Unmarried 23.5 Percent WIC births 24.3 Percent Breastfeeding at discharge 80.0 ○ Percent Payment-Private Insurance 79.1 ● Percent Payment-Medicaid 17.4 Percent C-Section 33.0 	Mortality³																																								
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Marshall County

Demographic Information



Marshall County is located in the northeastern part of the state and averages 5.9 persons per square mile. Britton is the largest city in Marshall County.

2019 Population Information

Subject	Number	Percent
Total population	4,935	100.0
White	4,102	83.1
Hispanic	397	8.0
American Indian & Alaska Native	331	6.7
Black or African American	25	0.5
Asian	8	0.2
Pacific Islander	0	0.0
Multi-Racial	72	1.5
Under 5 years	404	8.2
Under 18 years	1,182	24.0
65 years and over	1,047	21.2

Source: United States Census Bureau, 2019 Population Estimates

Health Status Indicators 2015-2019

Nativity

● Percent of Low Birth Weight Infants	4.0
● Percent of Mothers Receiving Care in 1st Trimester	58.5
Percent of Mothers Who Smoked Cigarettes While Pregnant ¹	11.8
Percent of Births Less Than 37 Wks. of Gestation	6.3
○ Average Age of Mother	29.0
Teenage Birth Rate ²	LNE
Percent White, Non-Hispanic Births	77.2
Percent American Indian, Non-Hispanic Births	10.5
Percent Hispanic Births	10.0
● Percent Unmarried	24.8
Percent WIC births	24.3
Percent Breastfeeding at discharge	86.6
○ Percent Payment-Private Insurance	73.4
● Percent Payment-Medicaid	20.3
Percent C-Section	25.9

●Denotes a health status indicator which is significantly lower than the state average.

○Denotes a health status indicator which is significantly higher than the state average.

¹Data for mothers who used tobacco are self-reported.

²Teenage Birth rate is live births per 1,000 females age 15-17.

Mortality³

● All Causes	578.5
● Heart Disease	113.9
Cancer	119.1
Trachea, Bronchus, & Lung	32.6
Colon, Rectum, & Anus	7.6
Female Breast	17.3
Pancreas	20.1
Prostate	LNE
Leukemia	LNE
Chronic Lower Respiratory Diseases	42.7
Alzheimer's Disease	45.9
Cerebrovascular Disease	48.1
Unintentional Injuries	41.8
Motor Vehicle Accidents	15.6
● Diabetes	8.9
Influenza and Pneumonia	16.7
Suicide	LNE
Chronic Liver Disease and Cirrhosis	LNE
Infant Mortality	8.5

Leading Causes of Death

Leading Causes of Death	Total Deaths
1. Heart Disease	45
2. Cancer	42
3. Alzheimer's Disease	21
T4. Chronic Lower Respiratory Diseases	17
T4. Cerebrovascular Disease	17
6. Unintentional Injuries	12
7. Influenza and Pneumonia	8
Percent of Deaths due to tobacco use	18.4
Median age at death	82

●Denotes a health status indicator which is significantly lower than the state average.

○Denotes a health status indicator which is significantly higher than the state average.

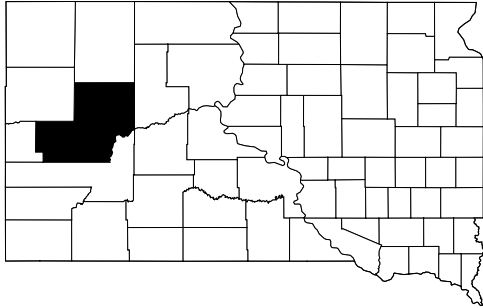
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See technical notes for more information.

Source: South Dakota Department of Health, Office of Health Statistics

Meade County

Demographic Information



Meade County is located in west central South Dakota and averages 8.2 persons per square mile. Sturgis is the largest city in Meade County.

2019 Population Information

Subject	Number	Percent
Total population	28,332	100.0
White	24,717	87.2
Hispanic	1,233	4.4
American Indian & Alaska Native	766	2.7
Black or African American	533	1.9
Asian	283	1.0
Pacific Islander	23	0.1
Multi-Racial	777	2.7
Under 5 years	1,515	5.3
Under 18 years	6,339	22.4
65 years and over	4,530	16.0

Source: United States Census Bureau, 2019 Population Estimates

Health Status Indicators 2015-2019

Nativity

Percent of Low Birth Weight Infants	7.9
○ Percent of Mothers Receiving Care in 1st Trimester	81.1
Percent of Mothers Who Smoked Cigarettes While Pregnant ¹	14.3
Percent of Births Less Than 37 Wks. of Gestation	10.5
Average Age of Mother	28.3
● Teenage Birth Rate ²	5.3
Percent White, Non-Hispanic Births	86.8
Percent American Indian, Non-Hispanic Births	4.0
Percent Hispanic Births	3.6
● Percent Unmarried	27.5
● Percent WIC births	24.5
○ Percent Breastfeeding at discharge	88.1
Percent Payment-Private Insurance	61.5
● Percent Payment-Medicaid	24.7
● Percent C-Section	21.8

●Denotes a health status indicator which is significantly lower than the state average.

○Denotes a health status indicator which is significantly higher than the state average.

¹Data for mothers who used tobacco are self-reported.

²Teenage Birth rate is live births per 1,000 females age 15-17.

Mortality³

All Causes	702.9
Heart Disease	147.6
○ Cancer	177.3
○ Trachea, Bronchus, & Lung	54.9
Colon, Rectum, & Anus	18.0
Female Breast	15.3
Pancreas	13.8
Prostate	24.1
Leukemia	7.4
○ Chronic Lower Respiratory Diseases	60.6
● Alzheimer's Disease	26.8
● Cerebrovascular Disease	23.8
● Unintentional Injuries	35.7
Motor Vehicle Accidents	10.9
● Diabetes	15.4
Influenza and Pneumonia	20.9
Suicide	18.3
Chronic Liver Disease and Cirrhosis	15.1
Infant Mortality	6.7

Leading Causes of Death

Leading Causes of Death	Total Deaths
1. Cancer	279
2. Heart Disease	221
3. Chronic Lower Respiratory Diseases	93
4. Unintentional Injuries	53
5. Alzheimer's Disease	38
6. Cerebrovascular Disease	34
7. Influenza and Pneumonia	30
8. Suicide	27
9. Diabetes	25
10. Chronic Liver Disease and Cirrhosis	24

Percent of Deaths due to tobacco use	17.7
Median age at death	77

●Denotes a health status indicator which is significantly lower than the state average.

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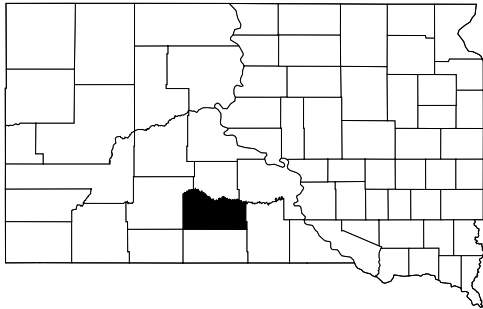
³All mortality rates except infant mortality are age-adjusted death rates per 100,000 population. Infant mortality is the number of infant (less than one year) deaths per 1,000 live births.

See technical notes for more information.

Source: South Dakota Department of Health, Office of Health Statistics

Mellette County

Demographic Information



Mellette County is located in the south central region of the state and averages 1.6 persons per square mile. White River is the largest city in Mellette County.

2019 Population Information

Subject	Number	Percent
Total population	2,061	100.0
American Indian & Alaska Native	1,093	53.0
White	755	36.6
Hispanic	72	3.5
Black or African American	10	0.5
Asian	5	0.2
Pacific Islander	0	0.0
Multi-Racial	126	6.1
Under 5 years	218	10.6
Under 18 years	634	30.8
65 years and over	305	14.8

Source: United States Census Bureau, 2019 Population Estimates

Health Status Indicators 2015-2019

Natality

Percent of Low Birth Weight Infants	6.3
● Percent of Mothers Receiving Care in 1st Trimester	47.6
○ Percent of Mothers Who Smoked Cigarettes While Pregnant ¹	20.6
Percent of Births Less Than 37 Wks. of Gestation	9.4
● Average Age of Mother	25.9
○ Teenage Birth Rate ²	40.4
Percent White, Non-Hispanic Births	20.3
Percent American Indian, Non-Hispanic Births	64.1
Percent Hispanic Births	1.6
○ Percent Unmarried	74.5
○ Percent WIC births	59.2
● Percent Breastfeeding at discharge	64.7
● Percent Payment-Private Insurance	16.8
○ Percent Payment-Medicaid	69.6
○ Percent C-Section	35.4

●Denotes a health status indicator which is significantly lower than the state average.

○Denotes a health status indicator which is significantly higher than the state average.

¹Data for mothers who used tobacco are self-reported.

²Teenage Birth rate is live births per 1,000 females age 15-17.

Mortality³

○ All Causes	1,342.5
Heart Disease	206.6
Cancer	217.9
Trachea, Bronchus, & Lung	43.1
Colon, Rectum, & Anus	LNE
Female Breast	LNE
Pancreas	LNE
Prostate	48.3
Leukemia	LNE
○ Chronic Lower Respiratory Diseases	121.0
Alzheimer's Disease	52.7
Cerebrovascular Disease	43.1
Unintentional Injuries	105.2
Motor Vehicle Accidents	52.3
Diabetes	55.9
Influenza and Pneumonia	32.6
Suicide	42.2
○ Chronic Liver Disease and Cirrhosis	110.1
Infant Mortality	26.0

Leading Causes of Death

Leading Causes of Death	Total Deaths
1. Cancer	26
2. Heart Disease	25
3. Chronic Lower Respiratory Diseases	15
4. Unintentional Injuries	11
5. Chronic Liver Disease and Cirrhosis	9
T6. Alzheimer's Disease	6
T6. Diabetes	6
T8. Cerebrovascular Disease	5
T8. Kidney Disease	5
Percent of Deaths due to tobacco use	20.3
Median age at death	72

●Denotes a health status indicator which is significantly lower than the state average.

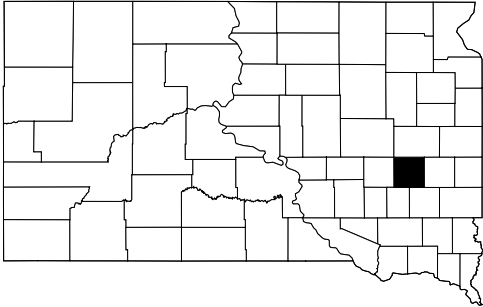
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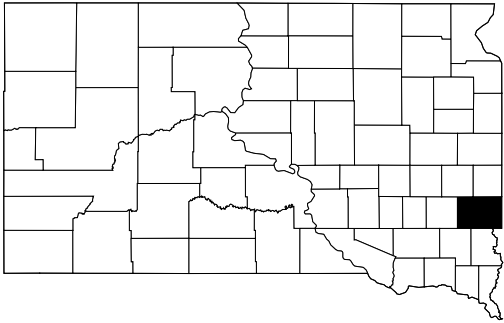
See technical notes for more information.

Source: South Dakota Department of Health, Office of Health Statistics

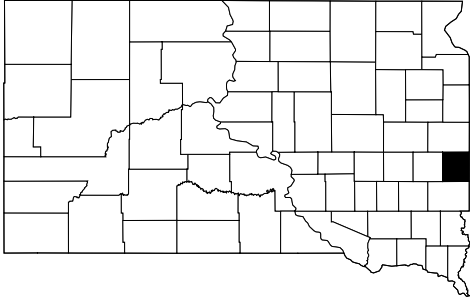
Miner County

Demographic Information			Health Status Indicators 2015-2019			
 <p>Miner County is located in the east central region of the state and averages 3.9 persons per square mile. Howard is the largest city in Miner County.</p>			Natality		Mortality³	
			<ul style="list-style-type: none"> Percent of Low Birth Weight Infants 6.9 Percent of Mothers Receiving Care in 1st Trimester 74.6 Percent of Mothers Who Smoked Cigarettes While Pregnant¹ 7.6 Percent of Births Less Than 37 Wks. of Gestation 9.9 ○ Average Age of Mother 29.3 Teenage Birth Rate² LNE Percent White, Non-Hispanic Births 94.7 Percent American Indian, Non-Hispanic Births LNE Percent Hispanic Births 2.3 ● Percent Unmarried 17.6 ● Percent WIC births 14.5 Percent Breastfeeding at discharge 87.8 ○ Percent Payment-Private Insurance 80.2 ● Percent Payment-Medicaid 16.0 Percent C-Section 32.8 	<ul style="list-style-type: none"> ○ All Causes 890.3 Heart Disease 191.6 Cancer 217.5 <ul style="list-style-type: none"> Trachea, Bronchus, & Lung 50.5 Colon, Rectum, & Anus LNE Female Breast LNE Pancreas LNE Prostate LNE Leukemia 13.4 Chronic Lower Respiratory Diseases 45.3 Alzheimer's Disease 40.4 Cerebrovascular Disease 38.1 Unintentional Injuries 81.4 <ul style="list-style-type: none"> Motor Vehicle Accidents 26.6 Diabetes 59.9 Influenza and Pneumonia LNE Suicide LNE Chronic Liver Disease and Cirrhosis LNE Infant Mortality LNE 		
2019 Population Information			Leading Causes of Death		Total Deaths	
Subject	Number	Percent	<ol style="list-style-type: none"> 1. Heart Disease 40 2. Cancer 38 T3. Unintentional Injuries 12 T3. Diabetes 12 5. Chronic Lower Respiratory Diseases 10 T6. Alzheimer's Disease 9 T6. Cerebrovascular Disease 9 8. Unspecified Dementia 7 			
Total population	2,216	100.0	Percent of Deaths due to tobacco use 14.7 Median age at death 82			
White	2,079	93.8				
Hispanic	71	3.2				
Black or African American	17	0.8				
American Indian & Alaska Native	11	0.5				
Asian	10	0.5				
Pacific Islander	0	0.0				
Multi-Racial	28	1.3				
Under 5 years	147	6.6				
Under 18 years	532	24.0				
65 years and over	465	21.0				
<p>Source: United States Census Bureau, 2019 Population Estimates</p>			<p>●Denotes a health status indicator which is significantly lower than the state average. ○Denotes a health status indicator which is significantly higher than the state average.</p>			
			<p>¹Data for mothers who used tobacco are self-reported. ²Teenage Birth rate is live births per 1,000 females age 15-17.</p>			
			<p>³All mortality rates except infant mortality are age-adjusted death rates per 100,000 population. Infant mortality is the number of infant (less than one year) deaths per 1,000 live births.</p>			
			<p>See technical notes for more information.</p>			
			<p>Source: South Dakota Department of Health, Office of Health Statistics</p>			

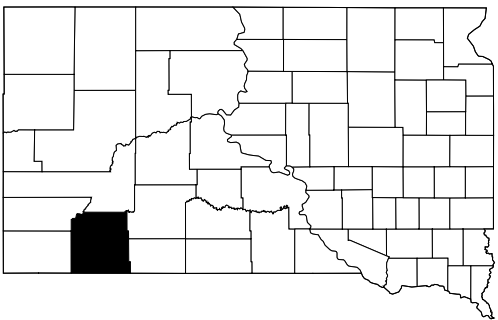
Minnehaha County

Demographic Information	Health Status Indicators 2015-2019																																								
																																									
<p>Minnehaha County is located in southeastern South Dakota and averages 239.4 persons per square mile. Sioux Falls is the largest city in Minnehaha County.</p>																																									
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<table border="1"> <thead> <tr> <th>Subject</th> <th>Number</th> <th>Percent</th> </tr> </thead> <tbody> <tr><td>Total population</td><td>193,134</td><td>100.0</td></tr> <tr><td>White</td><td>158,275</td><td>82.0</td></tr> <tr><td>Black or African American</td><td>11,670</td><td>6.0</td></tr> <tr><td>Hispanic</td><td>9,936</td><td>5.1</td></tr> <tr><td>American Indian & Alaska Native</td><td>4,686</td><td>2.4</td></tr> <tr><td>Asian</td><td>4,020</td><td>2.1</td></tr> <tr><td>Pacific Islander</td><td>76</td><td>0.0</td></tr> <tr><td>Multi-Racial</td><td>4,471</td><td>2.3</td></tr> <tr><td colspan="3"> </td></tr> <tr><td>Under 5 years</td><td>14,512</td><td>7.5</td></tr> <tr><td>Under 18 years</td><td>48,704</td><td>25.2</td></tr> <tr><td>65 years and over</td><td>26,041</td><td>13.5</td></tr> </tbody> </table>	Subject	Number	Percent	Total population	193,134	100.0	White	158,275	82.0	Black or African American	11,670	6.0	Hispanic	9,936	5.1	American Indian & Alaska Native	4,686	2.4	Asian	4,020	2.1	Pacific Islander	76	0.0	Multi-Racial	4,471	2.3				Under 5 years	14,512	7.5	Under 18 years	48,704	25.2	65 years and over	26,041	13.5	Natality	Mortality³
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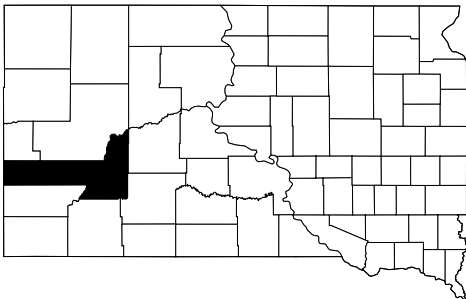
Moody County

Demographic Information			Health Status Indicators 2015-2019			
 <p>Moody County is located on the Minnesota border and averages 12.7 persons per square mile. Flandreau is the largest city in Moody County.</p>			Natality		Mortality³	
			<p>Percent of Low Birth Weight Infants 4.7</p> <p>Percent of Mothers Receiving Care in 1st Trimester 79.7</p> <p>Percent of Mothers Who Smoked Cigarettes While Pregnant¹ 13.5</p> <p>Percent of Births Less Than 37 Wks. of Gestation 7.4</p> <p>Average Age of Mother 28.7</p> <p>Teenage Birth Rate² LNE</p> <p>Percent White, Non-Hispanic Births 67.4</p> <p>Percent American Indian, Non-Hispanic Births 18.7</p> <p>Percent Hispanic Births 7.2</p> <p>Percent Unmarried 36.6</p> <p>Percent WIC births 30.9</p> <p>Percent Breastfeeding at discharge 80.7</p> <p>Percent Payment-Private Insurance 62.0</p> <p>Percent Payment-Medicaid 29.4</p> <p>Percent C-Section 22.0</p>	<p>● All Causes 638.8</p> <p>Heart Disease 167.6</p> <p>Cancer 123.2</p> <p>Trachea, Bronchus, & Lung 38.1</p> <p>Colon, Rectum, & Anus LNE</p> <p>Female Breast 20.8</p> <p>Pancreas 6.1</p> <p>Prostate 25.8</p> <p>Leukemia LNE</p> <p>Chronic Lower Respiratory Diseases 28.4</p> <p>Alzheimer's Disease 33.4</p> <p>Cerebrovascular Disease 32.9</p> <p>Unintentional Injuries 34.9</p> <p>Motor Vehicle Accidents 8.8</p> <p>Diabetes 29.3</p> <p>Influenza and Pneumonia LNE</p> <p>Suicide 16.9</p> <p>Chronic Liver Disease and Cirrhosis 18.4</p> <p>Infant Mortality LNE</p>		
2019 Population Information						
Subject	Number	Percent				
Total population	6,576	100.0				
White	5,036	76.6				
American Indian & Alaska Native	815	12.4				
Hispanic	301	4.6				
Asian	131	2.0				
Black or African American	87	1.3				
Pacific Islander	0	0.0				
Multi-Racial	206	3.1				
Under 5 years	468	7.1				
Under 18 years	1,745	26.5				
65 years and over	1,261	19.2				
			Leading Causes of Death			
					Total Deaths	
			1. Heart Disease		79	
			2. Cancer		55	
			3. Alzheimer's Disease		17	
			4. Cerebrovascular Disease		15	
			5. Chronic Lower Respiratory Diseases		14	
			T6. Unintentional Injuries		13	
			T6. Diabetes		13	
			T8. Septicemia		10	
			T8. Vascular Dementia		10	
			10. Peripheral Vascular Disease		9	
			Percent of Deaths due to tobacco use		24.6	
			Median age at death		80	
			<p>●Denotes a health status indicator which is significantly lower than the state average.</p> <p>○Denotes a health status indicator which is significantly higher than the state average.</p> <p>³All mortality rates except infant mortality are age-adjusted death rates per 100,000 population. Infant mortality is the number of infant (less than one year) deaths per 1,000 live births.</p>			
			<p>See technical notes for more information.</p>			
<p>Source: United States Census Bureau, 2019 Population Estimates</p>			<p>Source: South Dakota Department of Health, Office of Health Statistics</p>			

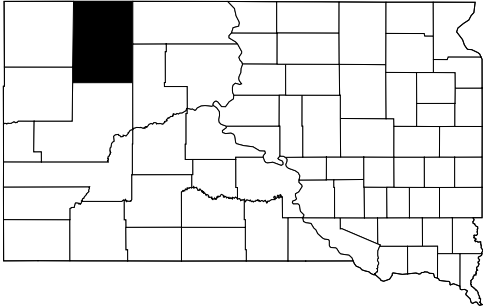
Oglala Lakota County

Demographic Information	Health Status Indicators 2015-2019																																																																						
 <p>Oglala Lakota County (formerly known as Shannon County) is located in the southwestern part of the state, along the Nebraska border and averages 6.8 persons per square mile. Pine Ridge is the largest city in Oglala Lakota County.</p>	<h3 data-bbox="1071 259 1186 289">Natality</h3> <ul style="list-style-type: none"> ○ Percent of Low Birth Weight Infants 8.1 ● Percent of Mothers Receiving Care in 1st Trimester 60.6 ○ Percent of Mothers Who Smoked Cigarettes While Pregnant¹ 17.0 ○ Percent of Births Less Than 37 Wks. of Gestation 12.5 ● Average Age of Mother 26.0 ○ Teenage Birth Rate² 31.8 Percent White, Non-Hispanic Births 1.3 Percent American Indian, Non-Hispanic Births 94.6 Percent Hispanic Births 2.1 ○ Percent Unmarried 88.6 ○ Percent WIC births 68.6 ● Percent Breastfeeding at discharge 59.4 ● Percent Payment-Private Insurance 4.4 ○ Percent Payment-Medicaid 54.7 Percent C-Section 22.9 	<h3 data-bbox="1659 259 1795 289">Mortality³</h3> <ul style="list-style-type: none"> ○ All Causes 1,538.1 ○ Heart Disease 221.0 ○ Cancer 204.2 <ul style="list-style-type: none"> Trachea, Bronchus, & Lung 49.3 Colon, Rectum, & Anus 23.7 Female Breast 17.8 Pancreas 15.9 Prostate 47.3 Leukemia LNE Chronic Lower Respiratory Diseases 63.6 <ul style="list-style-type: none"> ● Alzheimer's Disease 12.9 Cerebrovascular Disease 29.2 <ul style="list-style-type: none"> ○ Unintentional Injuries 190.3 <ul style="list-style-type: none"> ○ Motor Vehicle Accidents 89.1 ○ Diabetes 180.4 Influenza and Pneumonia 33.7 <ul style="list-style-type: none"> ○ Suicide 51.7 ○ Chronic Liver Disease and Cirrhosis 159.5 ○ Infant Mortality 13.7 																																																																					
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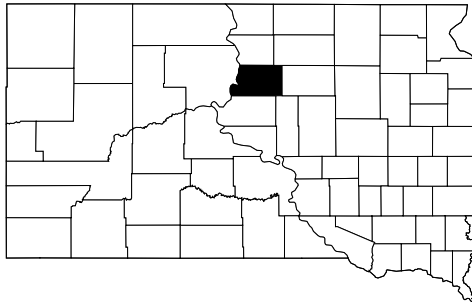
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Potter County

Demographic Information



Potter County is located in north central South Dakota and averages 2.5 persons per square mile. Gettysburg is the largest city in Potter County.

2019 Population Information

Subject	Number	Percent
Total population	2,153	100.0
White	1,987	92.3
Hispanic	51	2.4
American Indian & Alaska Native	49	2.3
Asian	18	0.8
Black or African American	11	0.5
Pacific Islander	1	0.0
Multi-Racial	36	1.7
Under 5 years	105	4.9
Under 18 years	455	21.1
65 years and over	628	29.2

Source: United States Census Bureau, 2019 Population Estimates

Health Status Indicators 2015-2019

Natality

Percent of Low Birth Weight Infants	5.3
● Percent of Mothers Receiving Care in 1st Trimester	54.9
● Percent of Mothers Who Smoked Cigarettes While Pregnant ¹	7.1
Percent of Births Less Than 37 Wks. of Gestation	6.2
Average Age of Mother	28.6
Teenage Birth Rate ²	LNE
Percent White, Non-Hispanic Births	88.5
Percent American Indian, Non-Hispanic Births	8.8
Percent Hispanic Births	LNE
● Percent Unmarried	19.5
● Percent WIC births	19.5
Percent Breastfeeding at discharge	83.9
Percent Payment-Private Insurance	77.0
● Percent Payment-Medicaid	20.4
Percent C-Section	25.7

●Denotes a health status indicator which is significantly lower than the state average.
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¹Data for mothers who used tobacco are self-reported.

²Teenage Birth rate is live births per 1,000 females age 15-17.

Mortality³

All Causes	659.9
● Heart Disease	102.2
Cancer	117.2
Trachea, Bronchus, & Lung	30.9
Colon, Rectum, & Anus	9.7
Female Breast	LNE
Pancreas	LNE
Prostate	36.5
Leukemia	LNE
Chronic Lower Respiratory Diseases	43.6
Alzheimer's Disease	45.1
● Cerebrovascular Disease	16.2
Unintentional Injuries	64.5
Motor Vehicle Accidents	32.7
Diabetes	27.5
Influenza and Pneumonia	41.2
Suicide	32.5
Chronic Liver Disease and Cirrhosis	LNE
Infant Mortality	LNE

Leading Causes of Death

Leading Causes of Death	Total Deaths
1. Cancer	33
2. Heart Disease	32
3. Alzheimer's Disease	16
4. Chronic Lower Respiratory Diseases	12
5. Influenza and Pneumonia	11
6. Unintentional Injuries	9
7. Diabetes	8
8. Hypertension	6
T9. Cerebrovascular Disease	5
T9. Septicemia	5
Percent of Deaths due to tobacco use	14.3
Median age at death	86

●Denotes a health status indicator which is significantly lower than the state average.

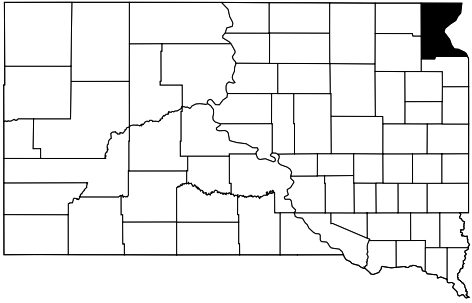
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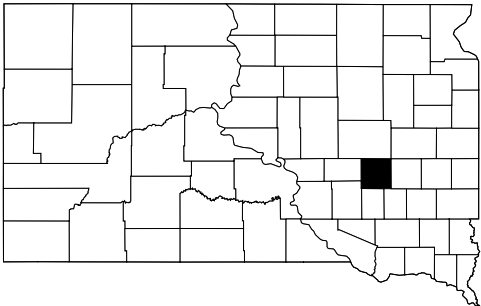
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Source: South Dakota Department of Health, Office of Health Statistics

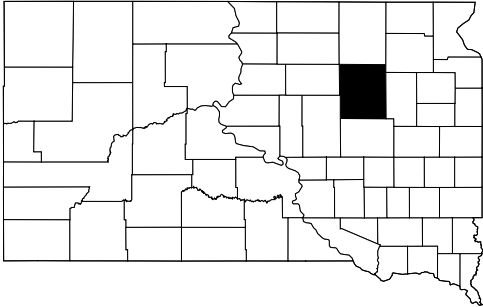
Roberts County

Demographic Information	Health Status Indicators 2015-2019																																																									
 <p>Roberts County is located in the extreme northeastern corner of the state and averages 9.4 persons per square mile. 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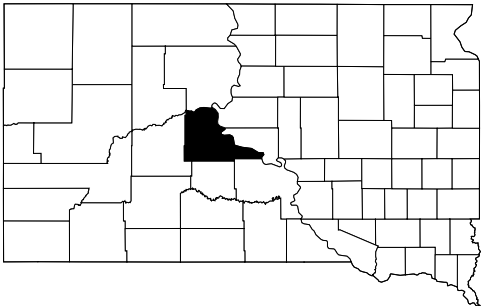
Sanborn County

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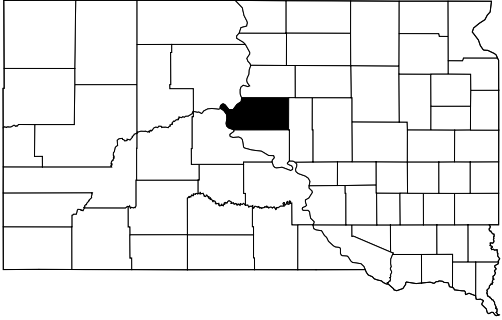
Spink County

Demographic Information			Health Status Indicators 2015-2019																																						
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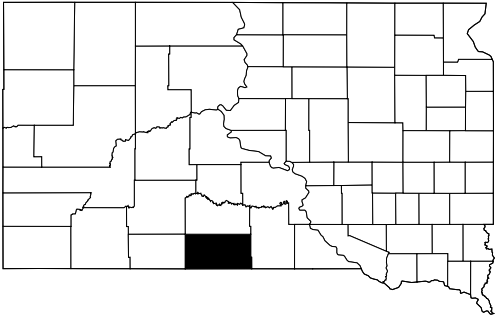
Stanley County

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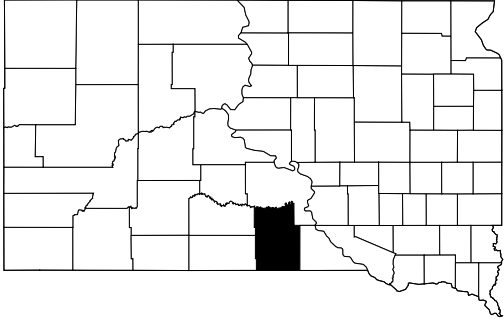
Sully County

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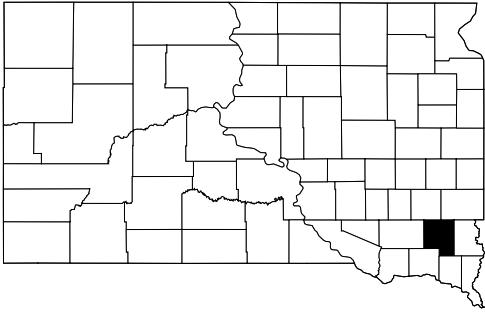
Todd County

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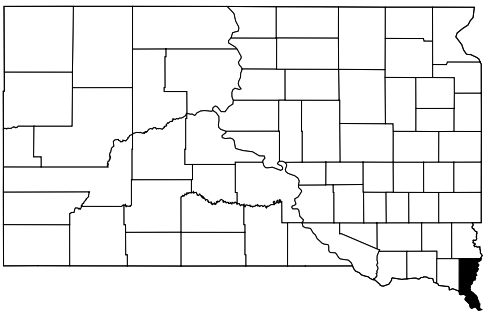
Tripp County

Demographic Information	Health Status Indicators 2015-2019																																																																																																																																			
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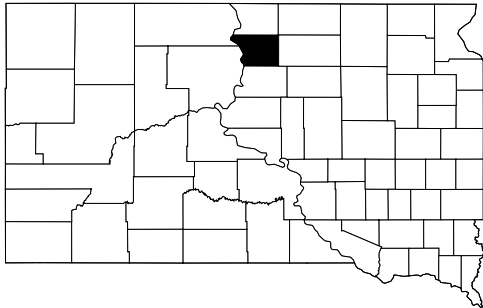
Turner County

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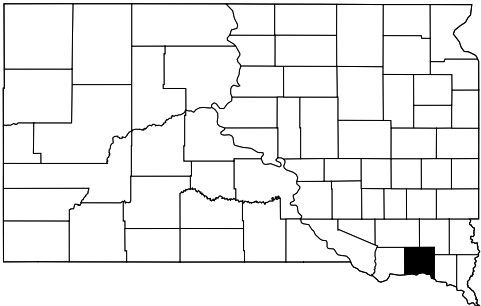
Union County

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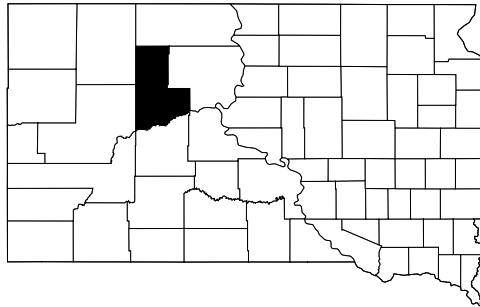
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Infant mortality is the number of infant (less than one year) deaths per 1,000 live births.</p> <p>See technical notes for more information.</p> <p>Source: South Dakota Department of Health, Office of Health Statistics</p>	All Causes	742.4	Heart Disease	165.8	● Cancer	124.9	Trachea, Bronchus, & Lung	36.9	Colon, Rectum, & Anus	14.2	Female Breast	13.5	● Pancreas	6.2	Prostate	11.8	Leukemia	6.1	○ Chronic Lower Respiratory Diseases	56.4	○ Alzheimer's Disease	49.1	Cerebrovascular Disease	31.3	Unintentional Injuries	62.5	Motor Vehicle Accidents	19.9	Diabetes	32.0	Influenza and Pneumonia	23.6	Suicide	17.6	● Chronic Liver Disease and Cirrhosis	8.0	Infant Mortality	9.6	Leading Causes of Death	Total Deaths	1. Heart Disease	296	2. Cancer	212	3. Chronic Lower Respiratory Diseases	103	4. Alzheimer's Disease	96	5. Unintentional Injuries	84	6. Cerebrovascular Disease	58	7. Diabetes	52	8. Influenza and Pneumonia	45	9. Hypertension	30	10. Suicide	23	Percent of Deaths due to tobacco use	19.4	Median age at death	80
Subject	Number	Percent																																																																																																																																		
Total population	22,814	100.0																																																																																																																																		
White	20,005	87.7																																																																																																																																		
Hispanic	1,164	5.1																																																																																																																																		
American Indian & Alaska Native	631	2.8																																																																																																																																		
Black or African American	449	2.0																																																																																																																																		
Asian	192	0.8																																																																																																																																		
Pacific Islander	8	0.0																																																																																																																																		
Multi-Racial	365	1.6																																																																																																																																		
Under 5 years	1,344	5.9																																																																																																																																		
Under 18 years	4,802	21.0																																																																																																																																		
65 years and over	4,444	19.5																																																																																																																																		
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Percent Hispanic Births	6.3																																																																																																																																			
○ Percent Unmarried	42.5																																																																																																																																			
Percent WIC births	31.1																																																																																																																																			
Percent Breastfeeding at discharge	79.5																																																																																																																																			
Percent Payment-Private Insurance	64.6																																																																																																																																			
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Ziebach County

Demographic Information



Ziebach County is located in north central South Dakota and averages 1.4 persons per square mile. Dupree is the largest city in Ziebach County.

2019 Population Information

Subject	Number	Percent
Total population	2,756	100.0
American Indian & Alaska Native	1,873	68.0
White	655	23.8
Hispanic	109	4.0
Black or African American	15	0.5
Asian	7	0.3
Pacific Islander	1	0.0
Multi-Racial	96	3.5
Under 5 years	151	5.5
Under 18 years	759	27.5
65 years and over	264	9.6

Source: United States Census Bureau, 2019 Population Estimates

Health Status Indicators 2015-2019

Natality

Percent of Low Birth Weight Infants	11.8
● Percent of Mothers Receiving Care in 1st Trimester	53.1
Percent of Mothers Who Smoked Cigarettes While Pregnant ¹	17.0
○ Percent of Births Less Than 37 Wks. of Gestation	18.4
● Average Age of Mother	26.8
Teenage Birth Rate ²	6.3
Percent White, Non-Hispanic Births	8.8
Percent American Indian, Non-Hispanic Births	75.7
Percent Hispanic Births	LNE
○ Percent Unmarried	76.5
○ Percent WIC births	73.9
● Percent Breastfeeding at discharge	59.0
● Percent Payment-Private Insurance	18.5
○ Percent Payment-Medicaid	70.0
Percent C-Section	22.1

● Denotes a health status indicator which is significantly lower than the state average.
○ Denotes a health status indicator which is significantly higher than the state average.

¹Data for mothers who used tobacco are self-reported.

²Teenage Birth rate is live births per 1,000 females age 15-17.

Mortality³

All Causes	776.0
Heart Disease	121.3
Cancer	113.5
Trachea, Bronchus, & Lung	29.4
Colon, Rectum, & Anus	37.2
Female Breast	LNE
Pancreas	LNE
Prostate	LNE
Leukemia	LNE
Chronic Lower Respiratory Diseases	57.0
Alzheimer's Disease	LNE
Cerebrovascular Disease	LNE
Unintentional Injuries	84.7
Motor Vehicle Accidents	28.4
Diabetes	50.0
Influenza and Pneumonia	47.8
Suicide	44.6
Chronic Liver Disease and Cirrhosis	37.2
Infant Mortality	LNE

Leading Causes of Death

Leading Causes of Death	Total Deaths
1. Heart Disease	15
2. Cancer	12
3. Unintentional Injuries	11
4. Suicide	7
T5. Chronic Lower Respiratory Diseases	5
T5. Diabetes	5
T5. Influenza and Pneumonia	5
T5. Septicemia	5
Percent of Deaths due to tobacco use	12.4
Median age at death	61

● Denotes a health status indicator which is significantly lower than the state average.

○ Denotes a health status indicator which is significantly higher than the state average.

³All mortality rates except infant mortality are age-adjusted death rates per 100,000 population. Infant mortality is the number of infant (less than one year) deaths per 1,000 live births.

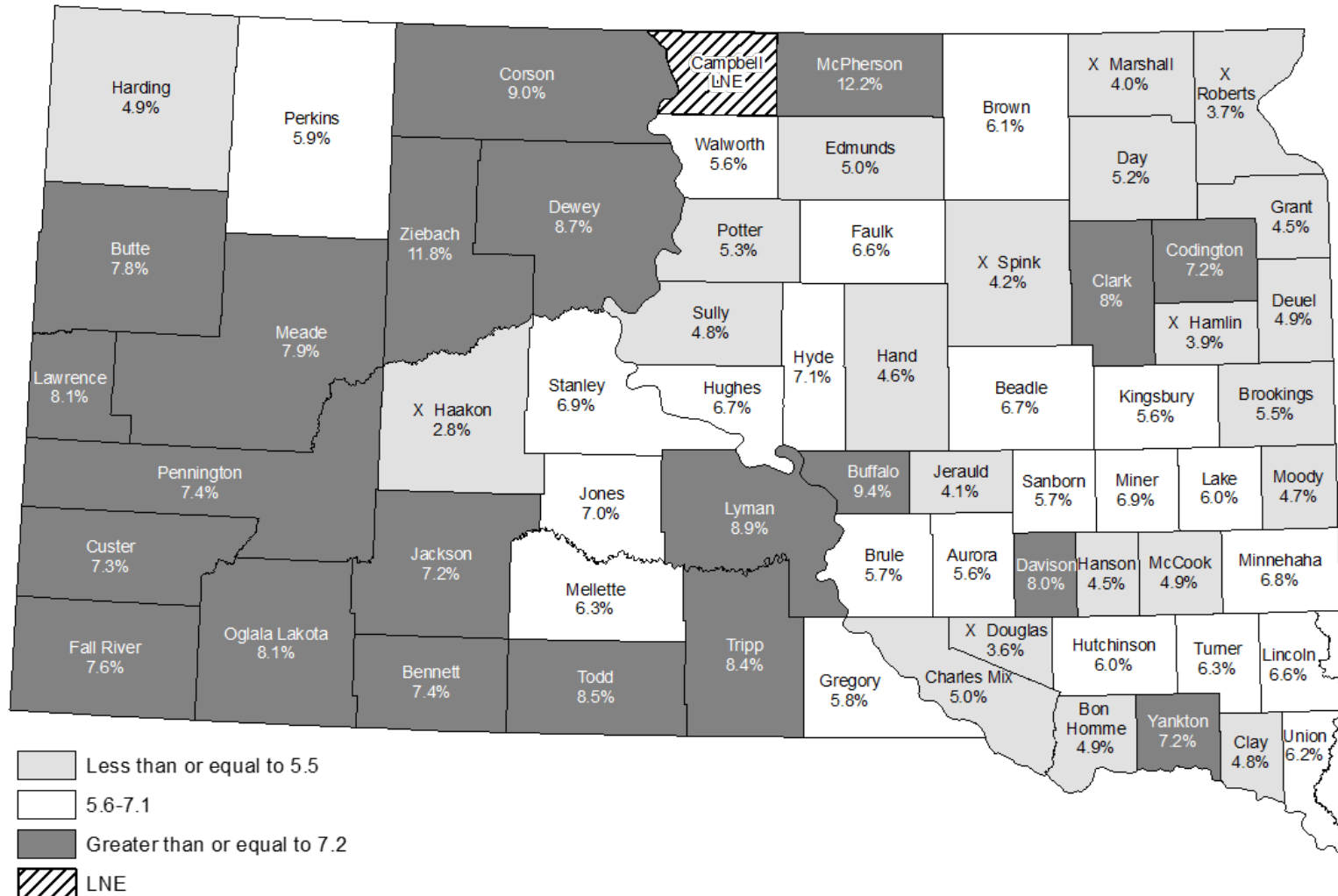
See technical notes for more information.

Source: South Dakota Department of Health, Office of Health Statistics

Map 1

Percent of Low Birth Weight Infants by County, 2015-2019

U.S. = 8.3%* **South Dakota = 6.7%**

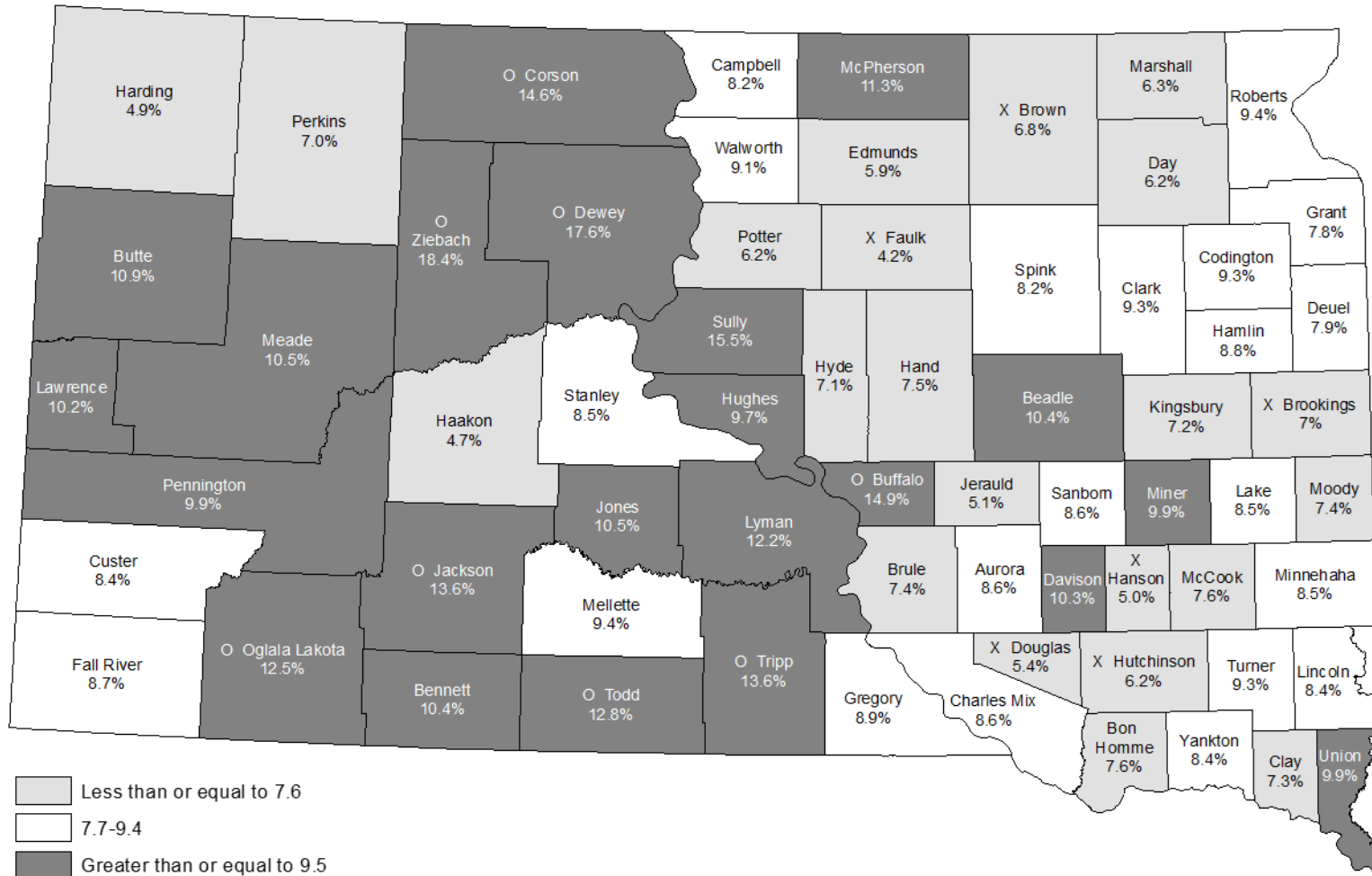


X Denotes that the county's percent is significantly lower than the state percent
 O Denotes that the county's percent is significantly higher than the state percent
 Note: "Significantly" refers to statistical significance at the 0.05 level. Although a county's actual percent may be higher or lower than the state percent, the difference may not be statistically significant due to the small number of people in the county. The percent of low birth weight infants is calculated based on the first weight of the newborn obtained after birth. Low birth weight infants are those born alive who weigh less than 2,500 grams (about 5 pounds 9 ounces). *The U.S. percent of low birth weight infants is from 2018. See technical notes for more complete explanations.

Map 4

Percent of Births Less Than 37 Weeks Gestation by County, 2015-2019

U.S. = 10.0%* **South Dakota = 9.1%**



X Denotes that the county's rate is significantly lower than the state rate.
 O Denotes that the county's rate is significantly higher than the state rate.

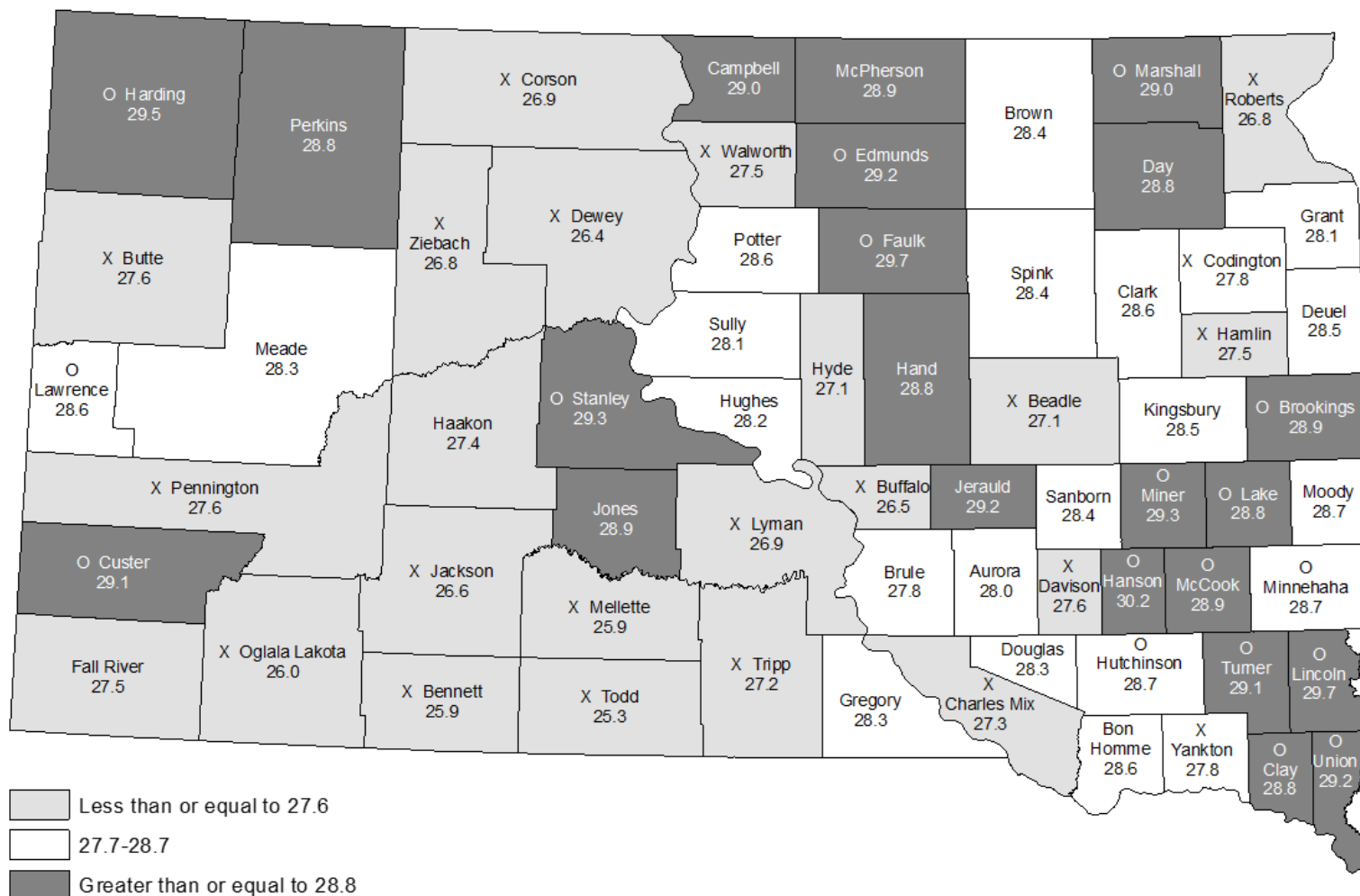
Note: "Significantly" refers to statistical significance at the 0.05 level. Although a county's actual percent may be higher or lower than the state percent, the difference may not be statistically significant due to the small number of people in the county. See technical notes for more complete explanations. *The U.S. percent of births less than 37 weeks gestation is from 2018.

Source: South Dakota Department of Health, Office of Health Statistics.

Map 5

Average Age of Mother by Resident County, 2015-2019

U.S. = 29.0* **South Dakota = 28.2**

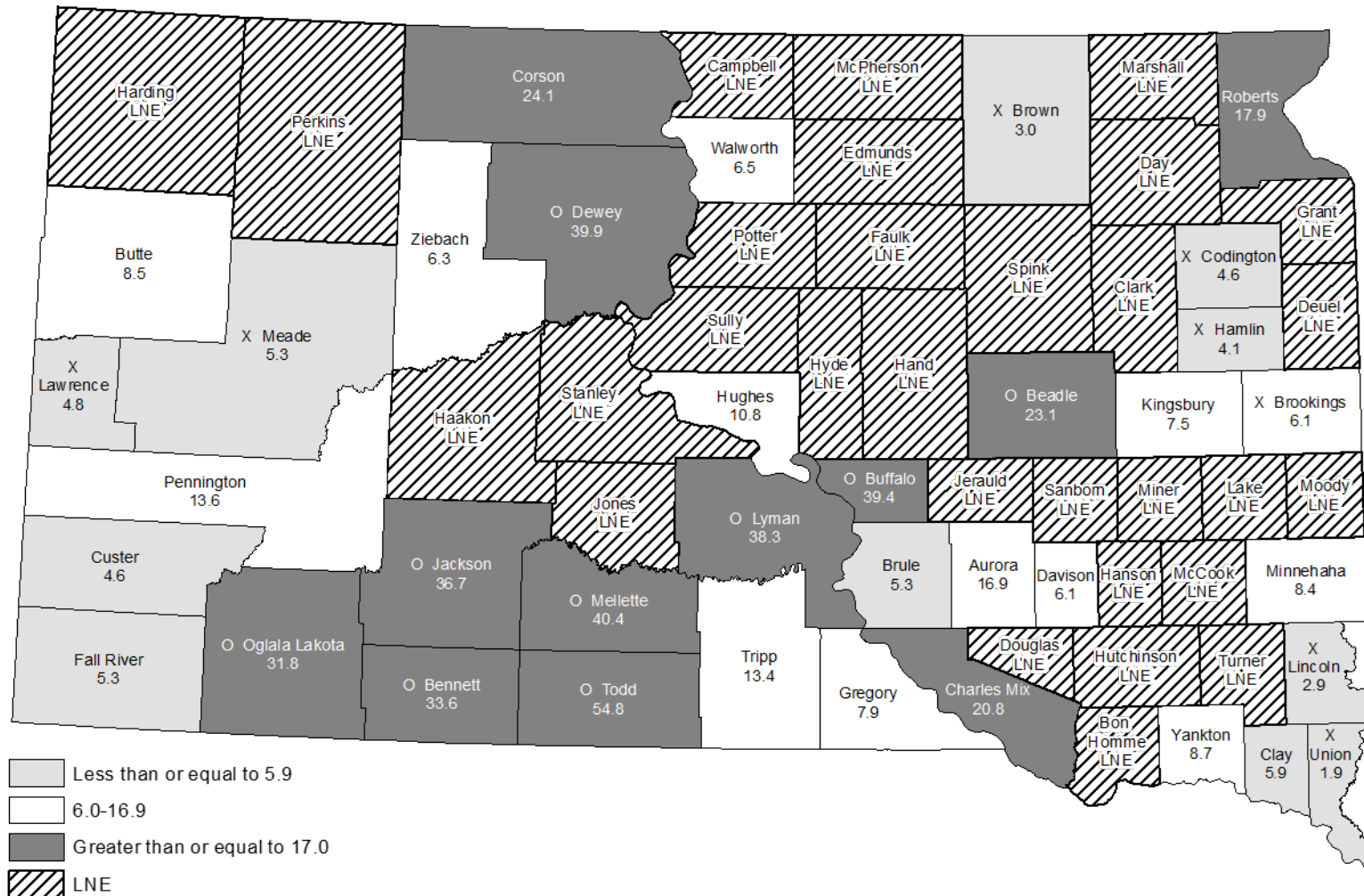


X Denotes that the county's age is significantly lower than the state age.
 O Denotes that the county's age is significantly higher than the state age.
 Note: "Significantly" refers to statistical significance at the 0.05 level. Although a county's actual age may be higher or lower than the state age, the difference may not be statistically significant due to the small number of people in the county. *The U.S. average age of mother is from 2018. See technical notes for more complete explanations.
 Source: South Dakota Department of Health, Office of Health Statistics.

Map 6

Teenage Birth Rate by Resident County, 2015-2019

U.S. = 7.2* **South Dakota = 9.9**



X Denotes that the county's rate is significantly lower than the state rate.

O Denotes that the county's rate is significantly higher than the state rate.

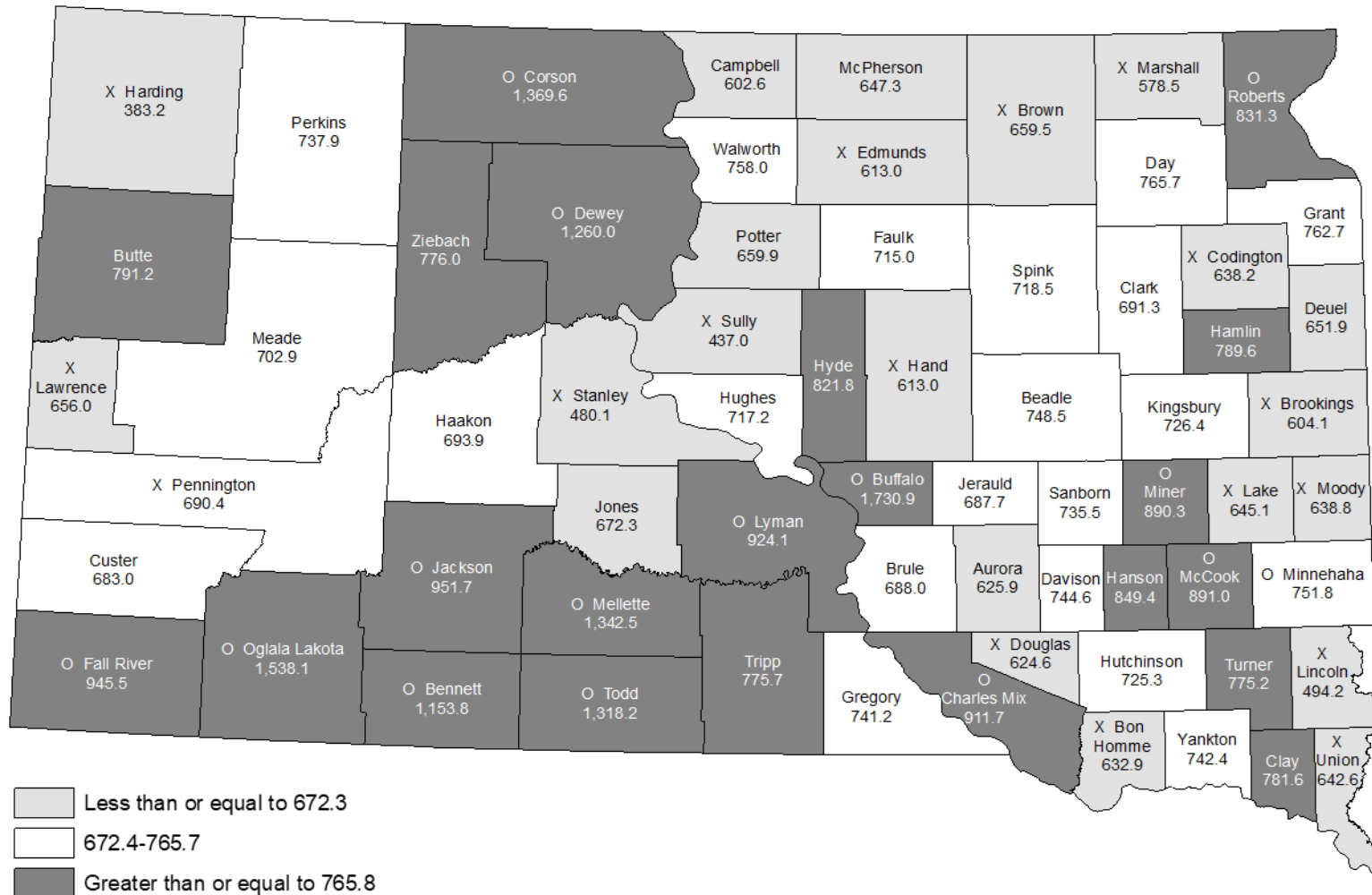
Note: "Significantly" refers to statistical significance at the 0.05 level. Although a county's actual rate may be higher or lower than the state rate, the difference may not be statistically significant due to the small number of people in the county. The teenage birth rate is live births per 1,000 females age 15-17. *The U.S. teenage birth rate is from 2018. See technical notes for more complete explanations.

Source: South Dakota Department of Health, Office of Health Statistics.

Map 7

Death Rate Due to All Causes by County, 2015-2019

U.S. = 731.9* **South Dakota = 725.0**

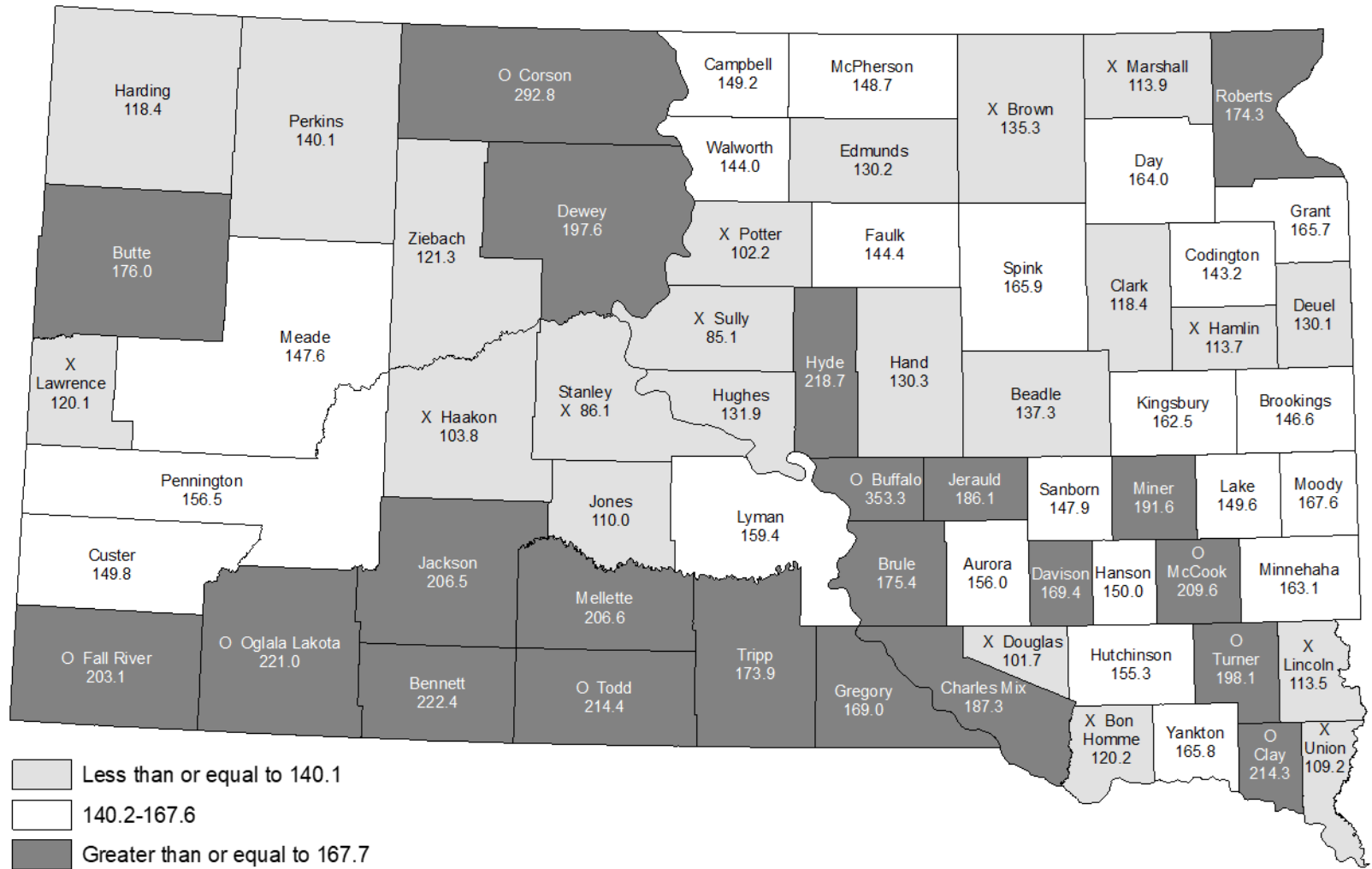


X Denotes that the county's rate is significantly lower than the state rate.
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 Note: "Significantly" refers to statistical significance at the 0.05 level. Although a county's actual rate may be higher or lower than the state rate, the difference may not be statistically significant due to the small number of people in the county. The death rate is age-adjusted per 100,000 population. This eliminates age difference between populations, making them easier to compare. *The U.S. age-adjusted death rate is from 2017. See technical notes for more complete explanations.
 Source: South Dakota Department of Health, Office of Health Statistics.

Map 8

Death Rate Due to Heart Disease by County, 2015-2019

U.S. = 165.0* **South Dakota = 153.8**

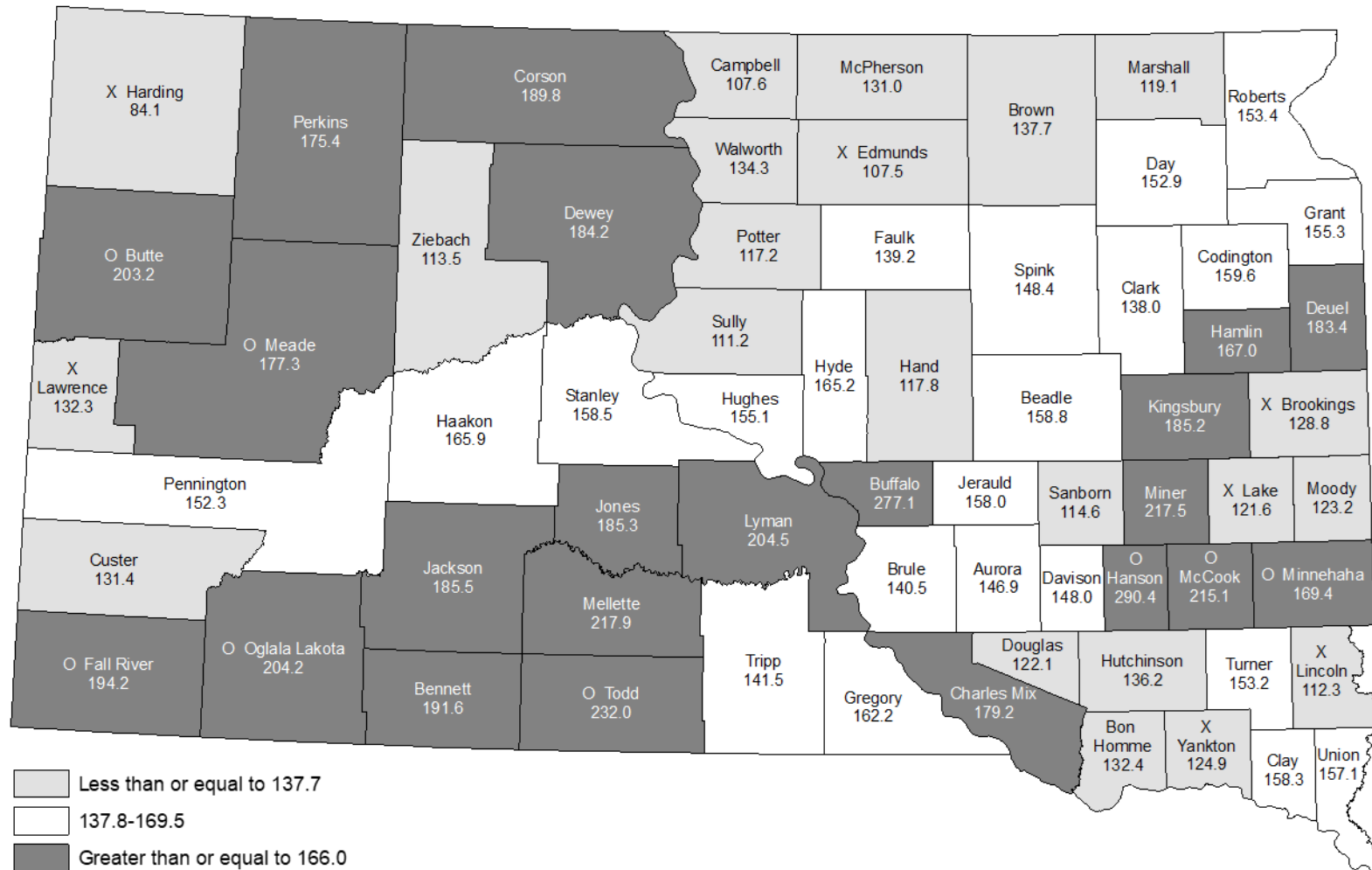


X Denotes that the county's rate is significantly lower than the state rate.
 O Denotes that the county's rate is significantly higher than the state rate.
 Note: "Significantly" refers to statistical significance at the 0.05 level. Although a county's actual rate may be higher or lower than the state rate, the difference may not be statistically significant due to the small number of people in the county. The death rate is age-adjusted per 100,000 population. This eliminates age difference between populations, making them easier to compare. Heart disease is defined as ICD-10 codes I00-I09, I11, I13, and I20-I51. *The U.S. age-adjusted Heart Disease death rate is from 2017. See technical notes for more complete explanations.
 Source: South Dakota Department of Health, Office of Health Statistics.

Map 9

Death Rate Due to All Malignant Neoplasms (Cancer) by County, 2015-2019

U.S. = 152.5*
South Dakota = 153.0



X Denotes that the county's rate is significantly lower than the state rate.
O Denotes that the county's rate is significantly higher than the state rate.

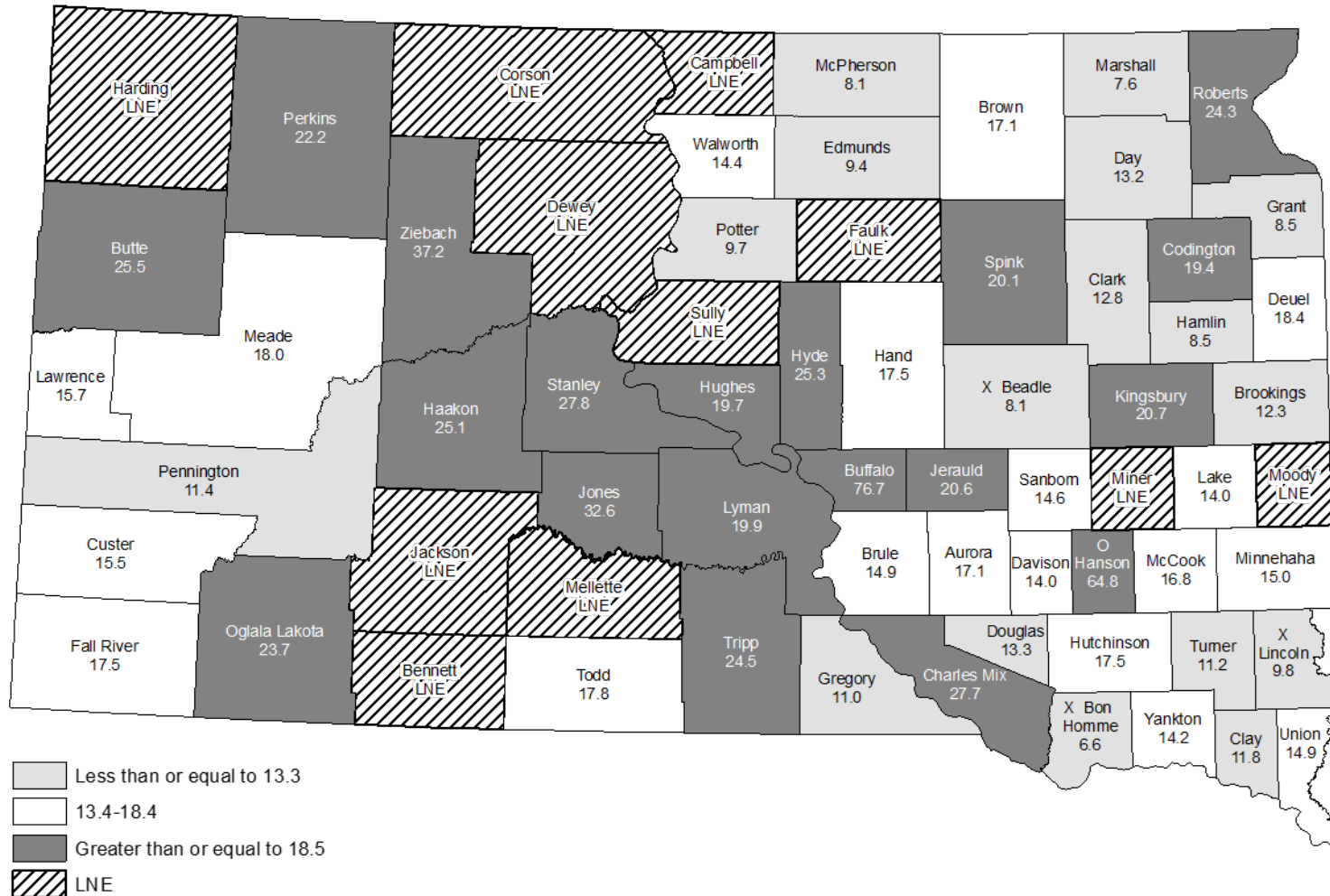
Note: "Significantly" refers to statistical significance at the 0.05 level. Although a county's actual rate may be higher or lower than the state rate, the difference may not be statistically significant due to the small number of people in the county. The death rate is age-adjusted per 100,000 population. This eliminates age difference between populations, making them easier to compare. Malignant Neoplasms (Cancer) are defined as ICD-10 codes C00-C97. The U.S. age-adjusted Malignant Neoplasms (Cancer) death rate is from 2017. See technical notes for more complete explanations.

Source: South Dakota Department of Health, Office of Health Statistics.

Map 11

Death Rate Due to Colorectal Cancer by County, 2015-2019

U.S. = 13.7* **South Dakota = 14.8**

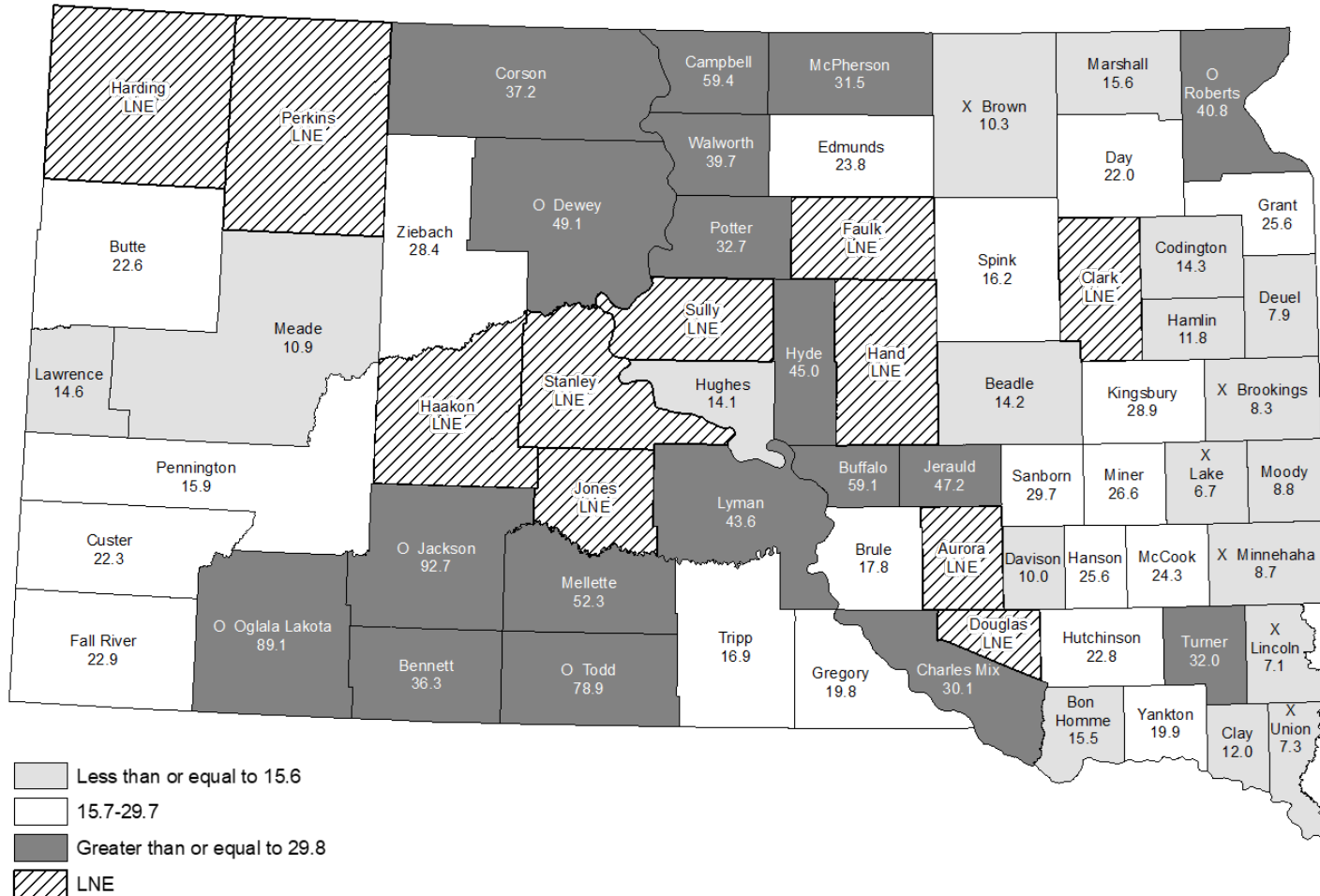


X Denotes that the county's rate is significantly lower than the state rate.
 O Denotes that the county's rate is significantly higher than the state rate.
 Note: "Significantly" refers to statistical significance at the 0.05 level. Although a county's actual rate may be higher or lower than the state rate, the difference may not be statistically significant due to the small number of people in the county. The death rate is age-adjusted per 100,000 population. This eliminates age difference between populations, making them easier to compare. Colorectal Cancer is defined as ICD-10 codes C18-C21. *The U.S. age-adjusted Colorectal Cancer death rate is from 2017. See technical notes for more complete explanations.
 Source: South Dakota Department of Health, Office of Health Statistics.

Map 16

Death Rate Due to Motor Vehicle Accidents by County, 2015-2019

U.S. = 12.0* **South Dakota = 16.6**



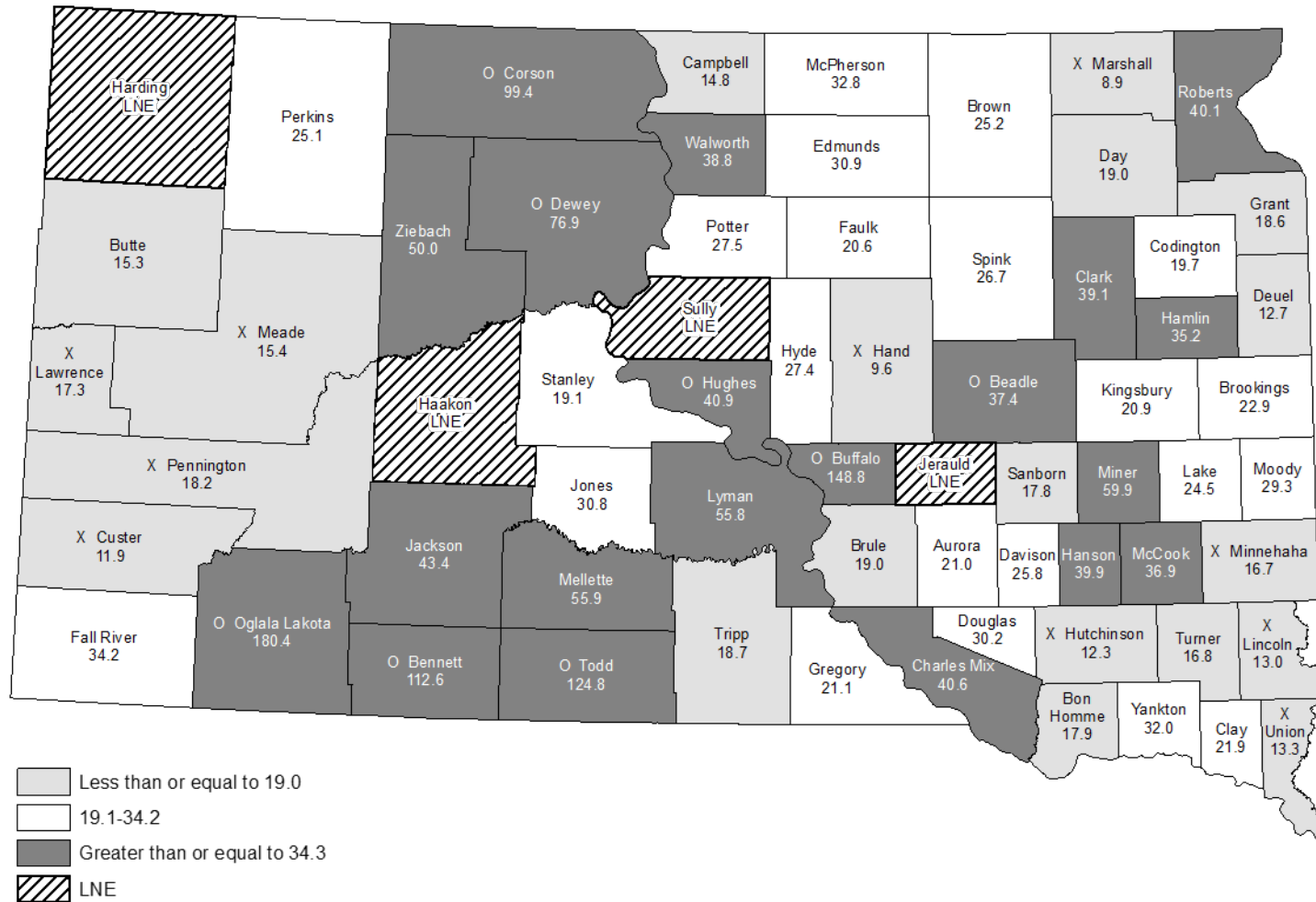
X Denotes that the county's rate is significantly lower than the state rate.
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 Note: "Significantly" refers to statistical significance at the 0.05 level. Although a county's actual rate may be higher or lower than the state rate, the difference may not be statistically significant due to the small number of people in the county. The death rate is age-adjusted per 100,000 population. This eliminates age difference between populations, making them easier to compare. Motor Vehicle Accidents are defined as ICD-10 codes (V02-V04, V09.0, V09.2, V12-V14, V19.0-V19.2, V19.4-V19.6, V20-V79, V80.3-V80.5, V81.0-V81.1, V82.0-V82.1, V83-V86, V87.0-V87.8, V88.0-V88.8, V89.0, and V89.2) *The U.S. age-adjusted Motor Vehicle Accident death rate is from 2017. See technical notes for more complete explanations.
 Source: South Dakota Department of Health, Office of Health Statistics.

Map 19

Death Rate Due to Diabetes Mellitus by County, 2015-2019

U.S. = 21.5*

South Dakota = 24.9



X Denotes that the county's rate is significantly lower than the state rate.

O Denotes that the county's rate is significantly higher than the state rate.

Note: "Significantly" refers to statistical significance at the 0.05 level. Although a county's actual rate may be higher or lower than the state rate, the difference may not be statistically significant due to the small number of people in the county. The death rate is age-adjusted per 100,000 population. This eliminates age difference between populations, making them easier to compare.

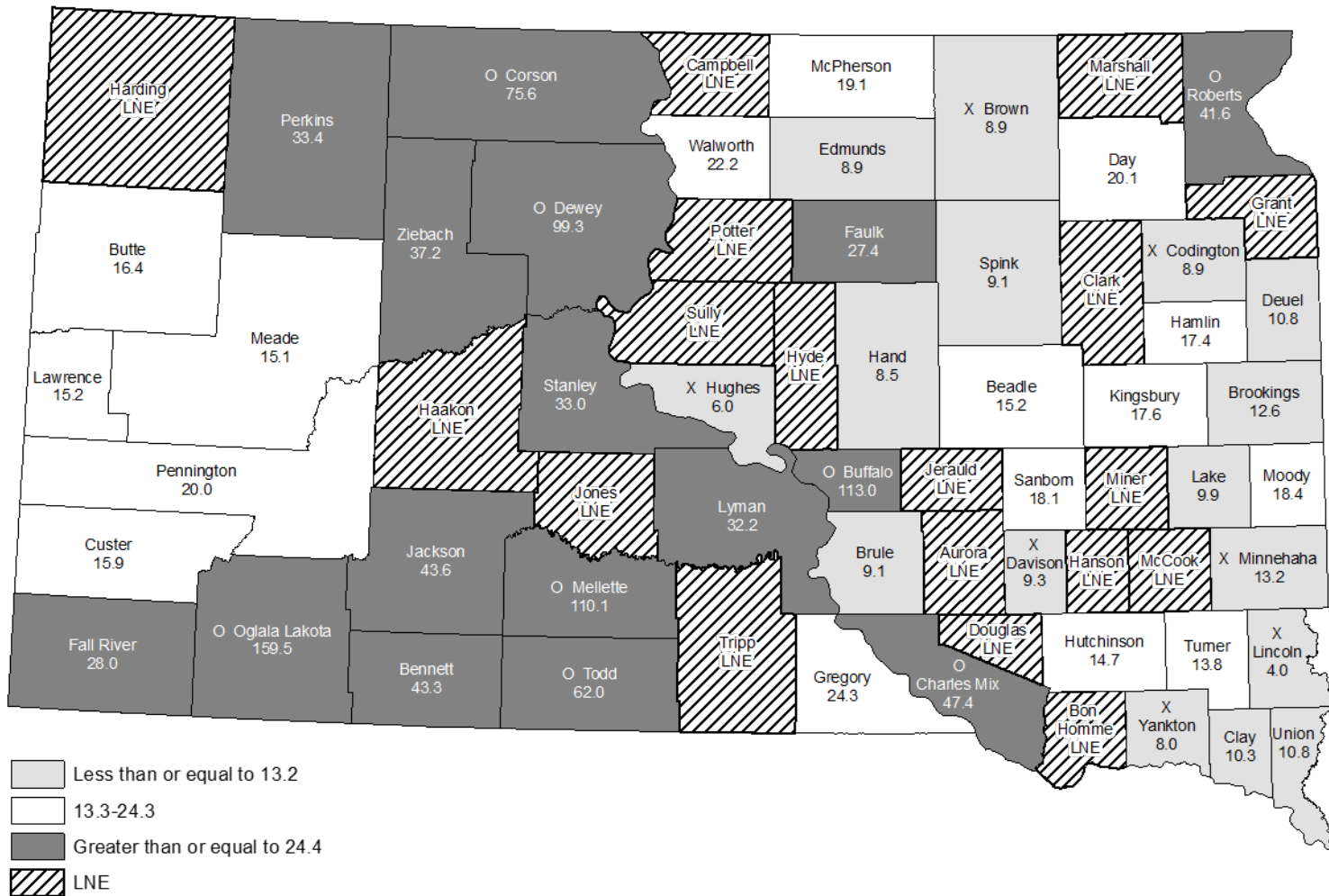
Diabetes Mellitus is defined as ICD-10 codes E10-E14. *The U.S. age-adjusted Diabetes Mellitus death rate is from 2017. See technical notes for more complete explanations.

Source: South Dakota Department of Health, Office of Health Statistics.

Map 22

Death Rate Due to Chronic Liver Disease and Cirrhosis by County, 2015-2019

U.S. = 10.9* **South Dakota = 17.2**

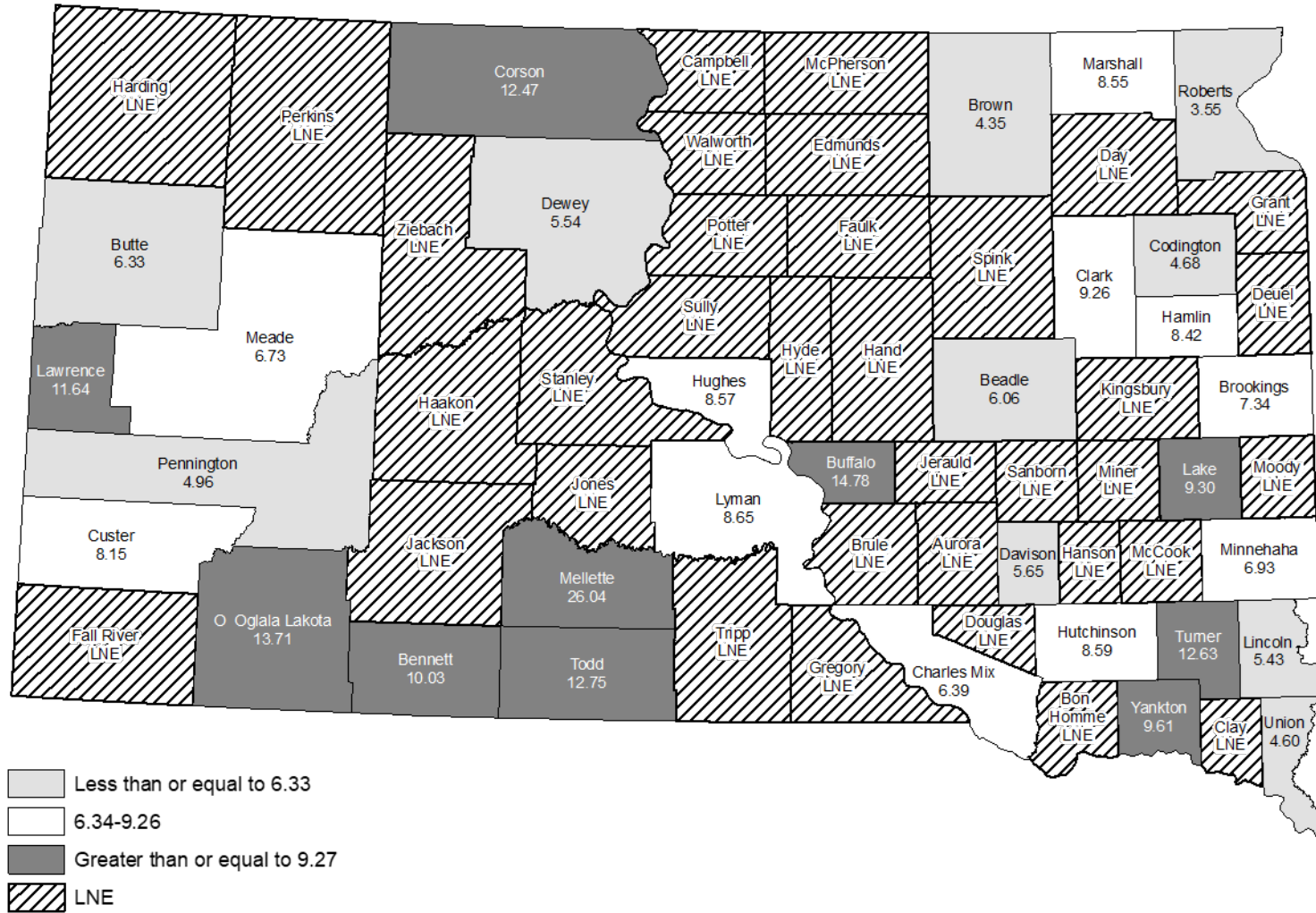


X Denotes that the county's rate is significantly lower than the state rate.
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 Note: "Significantly" refers to statistical significance at the 0.05 level. Although a county's actual rate may be higher or lower than the state rate, the difference may not be statistically significant due to the small number of people in the county. The death rate is age-adjusted per 100,000 population. This eliminates age difference between populations, making them easier to compare. Chronic Liver Disease and Cirrhosis are defined as ICD-10 codes K70, K73-K74. *The U.S. age-adjusted Chronic Liver Disease and Cirrhosis death rate is from 2017. See technical notes for more complete explanations.
 Source: South Dakota Department of Health, Office of Health Statistics.

Map 23

Infant Mortality Rate by County, 2015-2019

U.S. = 5.67* **South Dakota = 6.50**



X Denotes that the county's rate is significantly lower than the state rate.
 O Denotes that the county's rate is significantly higher than the state rate.
 Note: "Significantly" refers to statistical significance at the 0.05 level. Although a county's actual rate may be higher or lower than the state rate, the difference may not be statistically significant due to the small number of people in the county. Infant mortality is calculated as the number of deaths to babies (less than 1 year old) per 1,000 live births. *The U.S. infant mortality rate is from 2018. See technical notes for more complete explanations. Source: South Dakota Department of Health, Office of Health Statistics.

Technical Notes for Vital Statistics

A. SOURCES OF DATA

Vital Events

Birth, death, and marriage certificates, and reports of fetal deaths were the source documents for data on vital events of South Dakota during the 2019 calendar year. Divorce data were compiled from transcripts that were received from each county.

The cut-off date for 2019 data in this report was September 30, 2020. Any data pertaining to a 2019 event for which a certificate was filed after September 30, 2020 were not included in this report. Because the number of records received after that date is so small, in most instances, it is of little significance for the purpose of analysis.

Births, deaths, and fetal deaths relating to South Dakota residents that occurred in another state were included in this report. The inclusion of these data is made possible by an agreement among all registration areas in the United States for resident exchange of copies of certificates.

Birth and fetal death records are the responsibility of the person in attendance; however, the records are usually completed by medical records personnel who are not necessarily present at the delivery. Death records are the responsibility of the funeral director. The medical certification of the cause of death is completed by a physician or coroner.

Marriage records are created by the Register of Deeds using information provided from each spouse and completed with information provided by the individual solemnizing the record. Divorce records are submitted via a transcript from the Clerk of Courts.

United States data were obtained from publications produced by the Department of Health and Human Services, Centers for Disease Control and Prevention, National

Center for Health Statistics, Hyattsville, Maryland.

Populations

The populations used to develop the South Dakota rates were based on the given year's estimate. For example, rates for 2019 were calculated using the 2019 population estimate from the US Census Bureau. Each intercensal year's rates are based on the given year's population estimate, while the census years of 2000 and 2010 are based on the actual census totals for the given year.

Rates

Absolute counts of births and deaths do not readily lend themselves to analysis and comparison between years and various geographic areas because of population differences. These demographic differences include total number, age, and sex distributions, and ethnic or racial differentials. In order to assess the health status of a particular population at a specified time, the absolute number of events is converted to a relative number such as probability of living or dying, a rate, a ratio, or an index. This conversion is made by relating the crude number of events to the living population at risk in a particular area at a specified time.

Reliability of Rates

All rates are subject to variation, and this variation is inversely related to the number of events used to calculate the rate. The smaller the number of events, the higher the variability. Rates based on a small number of events over a specified time period or for small populations vary considerably and should be viewed with caution. South Dakota contains many counties with sparse or small populations. Therefore, when calculating health status indicators for these sparsely populated counties, there will always be the possibility that the rate is just a chance variation. For instance, in a five-year period a county with a small population

could have annual infant mortality rates of 0, 0, 0, 0, and 25. While rates for 4 of the years are 0, the fifth year rate of 25, taken alone, is probably not a true indicator of the county's health status.

To attempt to minimize chance variation the report uses five-year averages. Thus, in the example above the infant mortality rate would have been approximately five for the five-year period, which is probably a more accurate depiction of the county's health status. Despite these precautions, using five-year averages for the most sparsely populated counties will still not reduce chance variation significantly for some of the indicators due to the small number of events.

The standard error (SE) of a rate is used in health statistics when studying or comparing rates. The SE defines a rate's variability and can be used to calculate a confidence interval (CI) to determine the actual variance of a rate 95 percent of the time. Rates for two different populations are considered to be significantly different when their confidence intervals do not overlap.

The standard error and confidence intervals are calculated in the following manner. For example, County A's low birth weight rate is 5.3 percent. This was based on 122 low birth weight births from 2015 through 2019. The square root of 122 is roughly 11.0. By dividing the rate of 5.3 by 11.0, the estimated SE of approximately 0.48 is the result. The estimated SE can then be used to compute a 95 percent CI for the rate. The standard formula for determining the 95 percent CI of a rate is:

$$\text{RATE} \pm (1.96 * \text{SE})$$

Following this formula produces an equation of $5.3 \pm (1.96 * 0.48)$ and the result is 5.3 ± 0.9 . From this the estimated 95 percent CI is from 4.4 to 6.2 percent. It could then be stated, with 95 percent certainty, that the actual low birth weight rate for County A is between 4.4 and 6.2 percent.

Therefore, County A's low birth weight rate would not be considered significantly

different from the state rate. This is because the confidence intervals for County A (4.4-6.2) and the state (5.2-5.6) overlap. Conversely, County B's low birth weight rate is considered significantly different from the state rate because their respective confidence intervals (5.8-6.9) and (5.2-5.6) do not overlap.

All national rates for the United States were taken from the publications produced by the Department of Health and Human Services, Centers for Disease Control and Prevention, National Center for Health Statistics, Hyattsville, Maryland.

B. DATA LIMITATIONS

Quality

The quality of data presented in this report is directly related to the completeness and accuracy of the information contained on the certificates.

Medical Certification

Causes of death on death certificates are coded according to the tenth revision of the *International Classification of Disease* (ICD-10). This classification as adopted by the World Health Organization in 1999 is used throughout the world for selecting the underlying cause of death and classifying the cause.

Starting in 2001, the National Center for Health Statistics introduced categories *U01-*U03 for classifying and coding deaths caused by acts of terrorism. Please note *U01 was added to intentional self-harm (suicide) and *U02-*U03 was added to assault (homicide).

Race/Ethnicity

The race or ethnicity reported on the vital records reflects the opinion of the informant and does not follow any prescribed rules for the reporting of race or ethnicity.

Birth data were tabulated using the race or ethnicity of the mother. No attempt is made to determine the race or ethnicity of the

child from the race or ethnicity shown for the father and the mother.

Race is assigned based on standards set forth by the National Center for Health Statistics and the US Census Bureau in order for South Dakota's race data to be comparable to other areas. Race data in this report are categorized in the following manner:

White, non-Hispanic
American Indian, non-Hispanic
Black, non-Hispanic
Asian, non-Hispanic
Pacific Islander, non-Hispanic
Hispanic
Multi-racial, non-Hispanic

If more than one of the first five races is reported, the race is categorized as "multi-racial, non-Hispanic". Due to space constraints and small numbers, some of these race categories are grouped into an "Other" category.

C. GEOGRAPHIC ALLOCATION

In South Dakota, registration of vital events is classified geographically in two ways. The first way is by place of occurrence, i.e., the actual state and county in which the birth or death took place. The second and more customary way is by place of residence, i.e., the state or county stated to be the usual residence of the decedent in the case of deaths or of the mother in the case of a newborn.

Fetal deaths and infant deaths, in cases where the child was never discharged from the hospital, are classified to the residence of the mother.

Occurrence statistics have administrative value and statistical significance, especially when calculating accident statistics. Residence statistics are useful in determining health indices for planning and evaluation purposes. The statistics provided in this report are residence data unless otherwise stated.

Allocation of vital events by place of residence is sometimes difficult, because classification depends entirely on the statement of the usual place of residence furnished by the informant at the time the original certificate is completed. For various reasons, this statement may be incorrect or incomplete. For example, mailing addresses very often differ from the actual geographic residence.

D. DEFINITIONS

Age-Adjusted Death Rate (Direct Method)

– Age-specific death rates for a selected population are applied to a standard population in order to calculate what rate would be expected if the selected population had the same age distribution as the standard. The total of expected deaths divided by the total of the standard population and multiplied by 100,000 yields the age-adjusted death rate per 100,000. (It is important to use the same standard population in the computation of each age-adjusted rate to achieve comparability. Age-adjusted death rates should never be compared with any other types of death rate or be used as absolute measurements of mortality.)

Age-Adjusted Death Rate – Absolute counts of deaths or crude death rates do not readily lend themselves to analysis and comparison between years and various geographic areas. For example, the older a population, the more people die. Statistically, South Dakota has a high percentage of elderly; therefore, if crude rates of death, based on population, in South Dakota were compared with those of the United States, it would appear that South Dakota had a high rate of mortality. The comparison would be misleading.

Consequently, a mortality rate which has been adjusted for age has been devised to allow more refined measurement with which to compare deaths over geographic areas or time periods. This is referred to as an age-adjusted death rate.

Age-Adjusted Years of Potential Life Lost (YPLL) – Age-adjusted rates for years

of potential life lost (YPLL) before age 75 years use the year 2000 standard population and are based on eight age groups (< 1 year, 1-4, 5-14, and 10-year age groups through 65-74 years).

Age-Specific Birth Rate – Number of live births to women in a specific age group per 1,000 female population in that age group.

Age-Specific Death Rate – Number of deaths in a specific age group per 100,000 population in that age group.

Annulment – A judicial pronouncement declaring a marriage invalid.

Apgar Score – A standardized mechanism to assess the physical condition of newborns.

Birth Weight – The first weight of the fetus or newborn obtained after birth. This weight should be measured, preferably, within the first hour of delivery before significant postnatal weight loss has occurred. Low birth weight babies are those born alive who weigh less than 2,500 grams (about 5 pounds 9 ounces).

Birth Weight in Grams – In order to provide data comparable to that published for the United States and other countries, birth weight is reported in grams for this report. The equivalents of the gram intervals in pounds and ounces are as follows:

499 grams or less	= 1 lb. 1 oz. or less
500 - 999 grams	= 1 lb. 2 ozs. – 2 lbs. 3 ozs.
1,000 - 1,499 grams	= 2 lbs. 4 ozs. – 3 lbs. 4 ozs.
1,500 - 1,999 grams	= 3 lbs. 5 ozs. – 4 lbs. 6 ozs.
2,000 - 2,499 grams	= 4 lbs. 7 ozs. – 5 lbs. 8 ozs.
2,500 - 2,999 grams	= 5 lbs. 9 ozs. – 6 lbs. 9 ozs.
3,000 - 3,499 grams	= 6 lbs. 10 ozs. – 7 lbs. 11 ozs.
3,500 - 3,999 grams	= 7 lbs. 12 ozs. – 8 lbs. 12 ozs.
4,000 - 4,499 grams	= 8 lbs. 13 ozs. – 9 lbs. 14 ozs.
4,500 - 4,999 grams	= 9 lbs. 15 ozs. – 11 lbs. 0 ozs.
5,000 grams or more	= 11 lbs. 1 oz. or more

Cause Specific Death Rate – The number of resident deaths due to a specific cause divided by the total resident population X 100,000.

Chi-Square Test

The Chi-Square test is the most commonly used method for comparing frequencies or proportions. It is a statistical test used to determine if observed data deviate from those expected under a particular hypothesis. The Chi-Square test is also referred to as a test of a measure of fit or “goodness of fit” between data. Typically, the hypothesis tested is whether or not two samples are different enough in a particular characteristic to be considered members of different populations. Chi-Square analysis belongs to the family of univariate analysis, i.e., those tests that evaluate the **possible** effect of one variable (often called the independent variable) upon an outcome (often called the dependent variable). As with all non-parametric tests (that do not require normal distribution curves), Chi-Square tests only evaluate a single variable, thus they do not take into account the interaction among more than one variable upon the outcome.

Crude Birth Rate – The number of resident live births divided by the total resident population X 1,000.

Crude Death Rate – The number of resident deaths divided by the total resident population X 100,000.

Divorce – The legal dissolution of a marriage.

Fetal Death – Death prior to the complete expulsion or extraction from its mother of a product of human conception, irrespective of the duration of pregnancy. The death is indicated by the fact that after such expulsion or extraction, the fetus does not breathe or show any other evidence of life such as beating of the heart, pulsation of the umbilical cord, or definite movement of voluntary muscles. South Dakota requires the reporting of any fetus of at least 20 weeks gestation. However, all fetal deaths reported to the South Dakota Department of Health are shown in this report regardless of gestational age.

Fetal Death Rate – The number of fetal deaths divided by the total number of live births and fetal deaths X 1,000.

Fertility Rate – The number of resident births divided by female population ages 15-44 X 1,000.

Gestation – Weeks of pregnancy as reported on the certificate of live birth. In this report, the obstetric estimate of gestation is used to determine the length of gestation rather than the date of the last normal menstrual cycle. The obstetric estimate of gestation is determined by the physician certifying the birth.

Infant Death – Death of a live born infant less than one year (365 days) of age. Infant deaths equal the sum of neonatal plus postneonatal deaths.

Infant Mortality Rate – The number of infant deaths divided by the total number of live births X 1,000.

Live Birth – The complete expulsion or extraction from its mother of a product of human conception, irrespective of the duration of pregnancy, which, after such expulsion or extraction, breathes or shows any other evidence of life such as beating of the heart, pulsation of the umbilical cord, or definite movement of voluntary muscles, whether or not the umbilical cord has been cut or the placenta is attached.

Low Birth Weight – A birth weight under 2,500 grams or 5 pounds, 9 ounces.

Marriage – The legal union of two people.

Mean – The arithmetic average of a set of values or the sum of all the values divided by the number of values in the group.

Median – The value or number that divides a population into two equal halves. The value that falls exactly in the middle of the entire range of values ranked in order from low to high such that 50 percent of the values fall above it and 50 percent fall below it. If the number of values is even, a value halfway between the two values nearest the middle is used.

Mode – The most frequently occurring value in a distribution.

Neonatal Mortality Rate – (Neonatal Death = Death occurring to infants from birth through 27 days old). The number of neonatal deaths divided by the total number of live births X 1,000.

Neonatal Period – The period of infancy from the first through the 27th day of life.

Place of Occurrence and Residence – In South Dakota, registration of vital events is classified geographically in two ways. The first way is by place of occurrence, i.e., the actual county in which the event took place. The second, and more customary way, is by place of residence, i.e., the county stated to be the usual residence of the decedent in the case of deaths or of the mother in the case of a newborn. Births and deaths relating to South Dakota residents which occurred in another state are included in this report. The inclusions of these data are made possible by an agreement among all registration areas in the United States for resident exchange of copies of certificates.

Postneonatal Mortality Rate – (Postneonatal Death = Death occurring to infants 28 days to 1 year of age). The number of postneonatal deaths divided by the total number of live births X 1,000.

Postneonatal Period – The period of infancy from 28 days to less than one year old.

Significance – Most of the health status indicators in South Dakota's counties are not significantly different from the state's averages. This means that although a county's calculated rate may be higher or lower than the state average, the small number of events in the county makes the rate vary considerably from year to year. For example, if in 2018, County A had 100 babies born and none died, the infant mortality rate would be 0.0. But if in 2019, County A had another 100 babies born and one died, the infant mortality rate would be 10.0.

When there is a small number of events and the probability of such an event is small, a mathematical formula is used to calculate whether or not the difference in rates is statistically significant or due more to chance.

Years of Potential Life Lost before Age 75 (YPLL) – Based only on deaths before the age of 75. For example, if someone dies at 35 years of age, that is calculated as 40 years of potential life lost. Conversely, if someone dies at 75 years or older, that is calculated as zero years of potential life lost.

E. DEFINITIONS OF MEDICAL TERMS – The following definitions are for maternal and infant items reported on the South Dakota Certificate of Live Birth. The definitions below are based on those developed for the 2003 revision of the U.S. Standard Certificate of Live Birth. These definitions are similar to, but not the same as those developed for the 1989 revision of the U.S. Standard Certificate of Live Birth.

RISK FACTORS IN THIS PREGNANCY:

Diabetes – Glucose intolerance requiring treatment.

Hypertension, Pregnancy-Associated – Diagnosis in this pregnancy of elevation of blood pressure above normal for age, gender, and physiological condition.

Hypertension, Chronic – Diagnosis prior to the onset of this pregnancy of elevation of blood pressure above normal for age, gender, and physiological condition.

OBSTETRIC PROCEDURES AND CHARACTERISTICS OF LABOR AND DELIVERY:

Induction of Labor – Initiation of uterine contractions by medical or surgical means for the purpose of delivery before the spontaneous onset of labor (i.e., before labor has begun).

Tocolysis – Administration of any agent with the intent to inhibit preterm uterine

contractions to extend the length of the pregnancy.

Meconium, moderate/heavy – Staining of the amniotic fluid caused by passage of fetal bowel contents during labor and/or at delivery that is more than enough to cause a greenish color change of an otherwise clear fluid.

Breech/Malpresentation – Presenting part of the fetus listed as breech, complete breech, frank breech, footling breech.

Precipitous Labor – Labor lasting less than 3 hours.

CONGENITAL ANOMALIES:

Anencephaly – Partial or complete absence of the brain and skull.

Meningomyelocele/Spina Bifida – Meningomyelocele is herniation of meninges and spinal cord tissue. Meningocele (herniation of meninges without spinal cord tissue) should also be included in this category. Both open and closed (covered with skin) lesions should be included. Spina bifida is herniation of the meninges and/or spinal cord tissue through a bony defect of spine closure.

Omphalocele/Gastroschisis – Omphalocele is a defect in the anterior abdominal wall, accompanied by herniation of some abdominal organs through a widened umbilical ring into the umbilical stalk. Gastroschisis is an abnormality of the anterior abdominal wall, lateral to the umbilicus, resulting in herniation of the abdominal contents directly into the amniotic cavity.

Cleft Lip/Palate – Cleft lip is incomplete closure of the lip. It may be unilateral, bilateral, or median. Cleft palate is incomplete fusion of the palatal shelves. It may be limited to the soft palate, or it may extend into the hard palate.

Down Syndrome – The most common chromosomal defect (trisomy 21).

F. MORTALITY CODING

Codes for alcohol-induced deaths -

Causes of death attributable to alcohol-induced mortality include ICD-10 codes: E24.4, Alcohol-induced pseudo-Cushing's syndrome; F10, Mental and behavioral disorders due to alcohol use; G31.2, Degeneration of nervous system due to alcohol; G62.1, Alcoholic polyneuropathy; G72.1, Alcoholic myopathy; I42.6, Alcoholic cardiomyopathy; K29.2, Alcoholic gastritis; K70, Alcoholic liver disease; K85.2, Alcohol-induced acute pancreatitis; K86.0, Alcohol-induced chronic pancreatitis; R78.0, Finding of alcohol in blood; X45, Accidental poisoning by and exposure to alcohol; X65, Intentional self-poisoning by and exposure to alcohol; and Y15, Poisoning by and exposure to alcohol, undetermined intent. Alcohol-induced causes exclude accidents, homicides, and other causes indirectly related to alcohol use, as well as newborn deaths associated with maternal alcohol use.

Codes for farm accident deaths - Causes of death attributable to farm accident mortality include ICD-10 code: W30, Contact with agricultural machinery; or if the decedent was doing agricultural work at the time of the injury; or if the location of the injury was on a farm. Farm accidents exclude suicides and homicides.

Codes for firearm deaths - Causes of death attributable to firearm mortality include ICD-10 codes *U01.4, Terrorism involving firearms (homicide); W32-W34, Accidental discharge of firearms; X72-X74, Intentional self-harm (suicide) by discharge of firearms; X93-X95, Assault (homicide) by discharge of firearms; Y22-Y24, Discharge of firearms, undetermined intent; and Y35.0, Legal intervention involving firearm discharge. Deaths from injury by firearms exclude deaths due to explosives and other causes indirectly related to firearms.

Codes for drug overdose deaths -

Category	ICD-10 Codes ¹	
	Underlying Cause	Contributing Cause
All Drug poisoning	X40 X41 X42 X43 X44 X60 X61 X62 X63 X64 X85 Y10 Y11 Y12 Y13 Y14	T36 T37 T38 T39 T40 T41 T42 T43 T44 T45 T46 T47 T48 T49 T50
Illicit drug poisoning	X40 X41 X42 X43 X44 X60 X61 X62 X63 X64 X85 Y10 Y11 Y12 Y13 Y14	T40.1 T40.5 T40.7 T40.8 T40.9 T43.6
Pharmaceutical poisoning²	X40 X41 X42 X43 X44 X60 X61 X62 X63 X64 X85 Y10 Y11 Y12 Y13 Y14	T36 T37 T38 T39 T40.2 T40.3 T40.4 T41 T42 T43.0 T43.1 T43.2. T43.3 T43.4 T43.5 T43.8 T43.9 T44 T45 T46 T47 T48 T49 T50.0 T50.1 T50.2 T50.3 T50.4 T50.5 T50.6 T50.7 T50.8
Prescription opioid poisoning	X40 X41 X42 X43 X44 X60 X61 X62 X63 X64 X85 Y10 Y11 Y12 Y13 Y14	T40.2 T40.3 T40.4
Illicit opioid poisoning (opium and heroin)	X40 X41 X42 X43 X44 X60 X61 X62 X63 X64 X85 Y10 Y11 Y12 Y13 Y14	T40.0 T40.1
All opioid poisoning (illicit and prescription)	X40 X41 X42 X43 X44 X60 X61 X62 X63 X64 X85 Y10 Y11 Y12 Y13 Y14	T40.0 T40.1 T40.2 T40.3 T40.4

¹ For ICD-10, the death must have an underlying cause code from among those shown. Contributing cause codes can then indicate the specific type of drug involved, but they do not specify intent.

² “Pharmaceutical” is used as opposed to “prescription” drugs because a small number of codes include both prescription and over-the-counter drugs.

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