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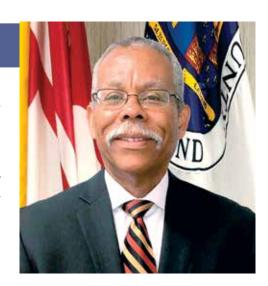
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Introduction

It is my honor and pleasure to serve as Acting Health Officer for Prince George's County. The health and well-being of all county residents is my top priority.

Ensuring each of us has the opportunity to live healthy and fulfilling lives takes careful planning, collaboration and research. We must pay careful attention to what the data show, analyze trends, and identify our achievements and challenges.

Thanks to the hard work, expertise and thoughtful insight of the Health Department, I am proud to share the Prince George's County 2018 Annual Health Report.



The report gives us a deeper understanding of the residents we serve and the shifting demographics of the county. Our population has grown by nearly 50,000 residents since 2010, while its makeup continues to change. Monitoring demographic shifts, like our county's aging population and an increasing number of Hispanic residents, is a key component to ensuring we inform and improve health care services to meet the needs of all our residents.

Improving all residents' access to high-quality, affordable health care services remains one of the Health Department's core missions. Although more residents have health insurance now than they did when the Affordable Care Act was implemented in 2014, this report shows that as of 2017, an estimated 92,000 residents remain without coverage. In addition, cost barriers such as high deductibles and premiums continue to impede progress in utilization.

This report also highlights how we are making progress in many key areas of public health. Cigarette use among teens and adults continues to decline; the average infant mortality rate over the past five years is down 16 percent compared to the previous five-year period; and in each of the past two years the county recorded its lowest numbers of new HIV cases since 2001.

At the same time, we can't ignore the remaining challenges. Electronic vapor product use among our high school population now exceeds all other tobacco categories; racial and ethnic disparities in maternal and child health risk factors continue to exist; and sexually transmitted infections are on the rise as the county's rates are the second-highest in the state.

Tackling these challenges and building upon our successes will take teamwork with our community partners as well as our counterparts in the public and private sectors. I look forward to sharing this commitment of making Prince George's County the healthiest and happiest it can be.

Sincerely,

Ernest L. Carter, MD, PhD.

Acting Prince George's County Health Officer

WHAT AFFECTS OUR HEALTH?

Overall health is a product of several factors, including an individual's health-related behaviors, the surrounding neighborhood and built environment, availability of social and economic opportunities and the quality and accessibility of healthcare.







OUR RESIDENTS





Our Residents

2017 Population

Prince George's County continues to grow. Compared to the 2010 census, the county's 2017 estimated population has increased by nearly 50,000 residents to 912,756.

Population	Prince George's County	Maryland	United States
Total Population	912,756	6,052,177	325,719,178
Female	472,979	3,116,355	165,316,674
Male	439,777	2,935,822	160,402,504
Ethnicity	Prince George's County	Maryland	United States
Black, non-Hispanic	566,032	1,776,829	40,129,593
Hispanic	169,039	612, 709	58,846,134
White, non-Hispanic	115,126	3,066,146	197,285,202
Asian, non-Hispanic	38,838	389,297	17,999,846
Other, non-Hispanic	23,721	207,333	11,458,403
Age	Prince George's County	Maryland	United States
Under 5 Years Old	59,081	363,313	19,795,159
Under 18 Years	203,325	1,346,950	73,648,683
18 Years and Over	709,431	4,705,227	252,070,495
65 Years and Over	116,953	902,586	50,815,712
Median Age (years)	37.2	38.7	38.1
Female	39.1	40.2	39.4
Male	35.5	37.2	36.8

Our Residents

Social Factors

Educational Attainment (Ages 25 Years and Older)	Prince George's County			Maryland	
	Number (N)	Percent (%)	Number (N)	Percent (%)	
Less than High School	79,963	12.9%	420,009	10.1%	
High School	166,324	26.9%	1,020,828	24.5%	
Some College/Associate's Degree	174,295	28.2%	1,074,187	25.7%	
Bachelor's Degree or Higher	198,755	32.1%	1,652,580	39.6%	
Place of Birth	Prince Ge	orge's County		Maryland	
	Number (N)	Percent (%)	Number (N)	Percent (%)	
United States	706,663	77.4%	5,124,241	84.7%	
Foreign Born	206,093	22.6%	927,936	15.3%	
Languages Challana et Hama	Duin on Co	annola Carreta		Mondond	
Languages Spoken at Home		orge's County		Maryland	
	Number (N)	Percent (%)	Number (N)	Percent (%)	
English Only	622,651	72.9%	4,604,525	80.9%	
Language Other than English	231,024	27.1%	1,084,339	19.1%	
Spanish	145,545	17.0%	486,012	8.5%	
Other Language	85,479	10.0%	598,327	10.5%	
Disability Status	Prince Ge	orge's County		Maryland	
	Number (N)	Percent (%)	Number (N)	Percent (%)	
Total Population	89,393	9.9%	660,143	11.1%	
65 Years and Over	36,814	32.1%	273,675	31.2%	

Our Residents

Economic Characteristics

Employment Status (Ages 16 Years and Older)	Prince George's County	Maryland
Employed	490,928 (67.1%)	3,098,182 (63.8%)
Unemployment Rate	5.9%	5.2%
Household Income and Benefits	Prince George's County	Maryland
Median Household Income, \$	\$81,240	\$80,776
With Food Stamp or SNAP Benefits	8.6%	10.3%
With Social Security Income	24.2%	28.3%
With Supplemental Security Income	3.8%	4.6%
Poverty Status	Prince George's County	Maryland
Individuals Below Poverty Level	8.4%	9.3%
Under 18 Years	11.0%	12.0%
18-64 Years	7.8%	8.6%
65+ Years	6.9%	7.9%
All families below poverty level	5.6%	6.2%
Married couple families below poverty level	2.3%	2.6%
Families with female householder, no husband present below poverty level	11.5%	17.4%





ACCESS TO CARE





Access to Care

Health Insurance Coverage

Lack of health insurance is a major barrier to accessing care for disease prevention and management. In 2014, the implementation of the Affordable Care Act (ACA) helped to increase health insurance coverage in the county. As of 2017, nearly 90% of county residents have health insurance. However, an estimated 92,000 residents still lack health insurance in Prince George's County. A remaining challenge is that not all residents qualify based on the ACA requirements for citizenship or legal resident status. In the county, Hispanic residents are over four times as likely to be uninsured than Black, non-Hispanic residents.

be uninsured than Black, non-Hispanic residen	ts.		
All Ages, No Health Insurance	2015	2016	2017
Prince George's	10.9%	10.3%	10.1%
Maryland	6.6%	6.1%	6.1%
United States	9.4%	8.6%	8.7%
Under 18, No Health Insurance	2015	2016	2017*
Prince George's	5.3%	5.3%	6.3%
Maryland	3.9%	3.3%	3.8%
United States	4.8%	4.5%	5.0%
*The U.S. Census changed the age group categorization in 20	117; 2017 data is for unde	er 19 years.	
18 – 64 years, No Health Insurance	2015	2016	2017*
Prince George's	14.3%	13.6%	13.3%
Maryland	8.8%	8.3%	8.3%
United States	13.1%	12.0%	12.3%
*The U.S. Census changed the age group categorization in 20	117; 2017 data is for 19 -	64 years.	
65 Years and Older, No Health Insurance	2015	2016	2017

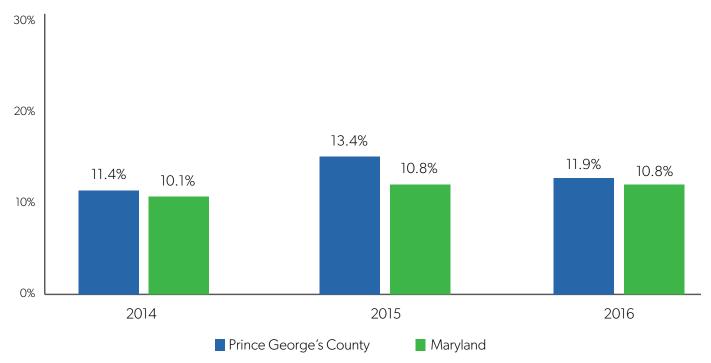
65 Years and Older, No Health Insurance	2015	2016	2017
Prince George's	2.7%	1.7%	1.4%
Maryland	1.1%	0.9%	0.9%
United States	0.8%	0.8%	0.8%
Race/Ethnicity, No Health Insurance	2015	2016	2017
Black	6.9%	6.5%	6.3%
Hispanic (Any Race)	32.5%	28.7%	28.7%
White, non-Hispanic	3.7%	4.7%	3.9%

Access to Care

Barriers to Care and Accessible Providers

There are many barriers to health care, even for those who have health insurance. The insured may also have significant out-of-pocket expenses, such as high deductibles for care or large monthly premium payments. In 2016, almost 12 percent of county residents reported they were not able to see a doctor when needing medical care due to cost, down from 13.4 percent in 2015 but higher than the state over the past three years. The number of providers per resident in Prince George's County meets the standard of 2,000 residents to 1 primary care provider (PCP), but lags behind the state.

Percentage of Adults Unable to See a Doctor Due to Cost (past 12 months)



Resident to Provider Ratios

Population to Primary Care Physicians (PCP) Ratio, 2015

Prince George's	1,910 residents: 1 PCP
Maryland	1,140 residents: 1 PCP
National Benchmark (90th percentile)	1,030 residents: 1 PCP

Population to Dentists Ratio, 2016

Prince George's	1,650 residents: 1 Dentist
Maryland	1,280 residents: 1 Dentist
National Benchmark (90th percentile)	1,320 residents: 1 Dentist





HEALTH RISK FACTORS

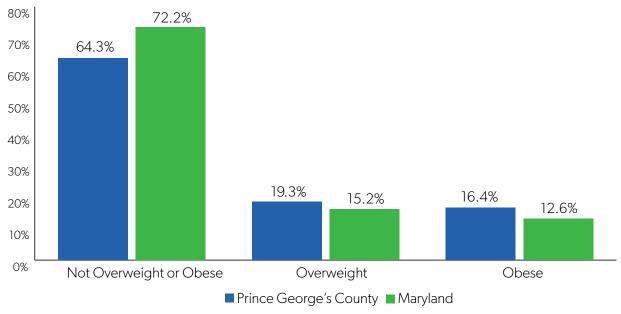




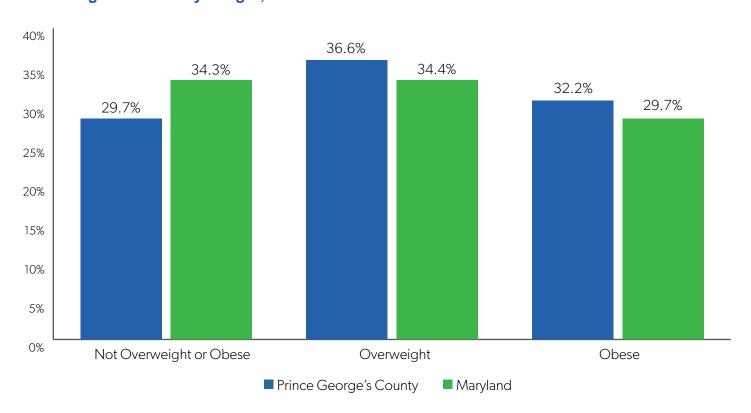
Health Risk Factors

Obesity and Overweight

Percentage of High School Students by Weight, 2016



Percentage of Adults by Weight, 2016

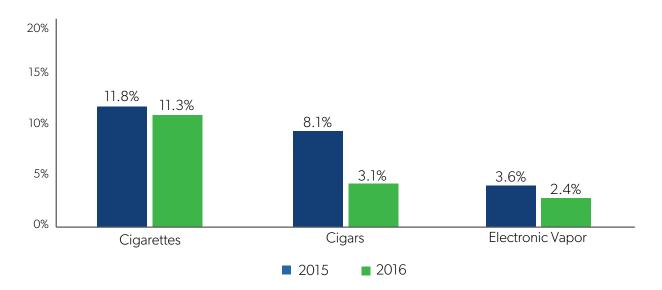


Health Risk Factors

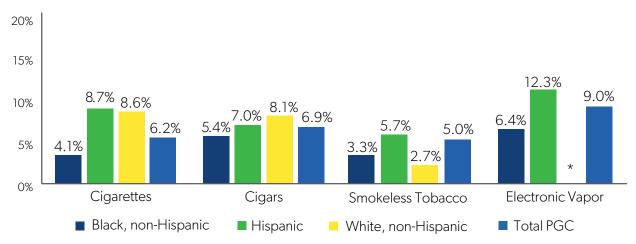
Tobacco and Electronic Vapor Use

The harmful effects of tobacco use were first discovered over 50 years ago. Although the rates of using traditional tobacco products (e.g., cigarettes, cigars) declined steadily during that time period, alternative products, such as electronic vapor devices, entered the market. Electronic vapor devices, popular with students and young adults, have not been on the market long enough to understand the long-term health effects related to their use. Several health effects related to tobacco use, such as heart disease and cancer, may occur years or decades after the initial exposure.

Types of Tobacco Use Among Adults, 2015 - 2016



Types of Tobacco Use Among High School Students by Race and Ethnicity, 2016

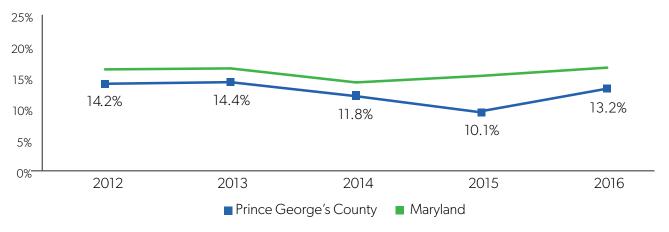


Health Risk Factors

Alcohol Use

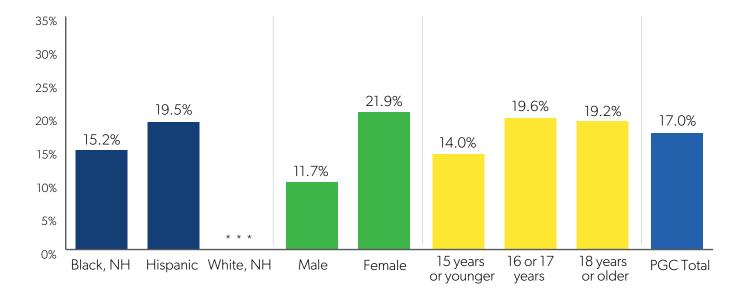
In the United States, 88,000 deaths per year are associated with excessive alcohol use, including underage drinking and binge drinking. Excessive alcohol use has both short-term risks, such as motor vehicle crashes, violence, and effects on reproductive health, as well as long-term risks, such as heart disease, liver disease, and certain cancers.

Percentage of Adult Binge Drinkers*



^{*}Binge drinking is defined as males having five or more drinks on one occasion, and females having four or more drinks on one occasion.

Percentage of High School Students That Currently Drink Alcohol**, 2016

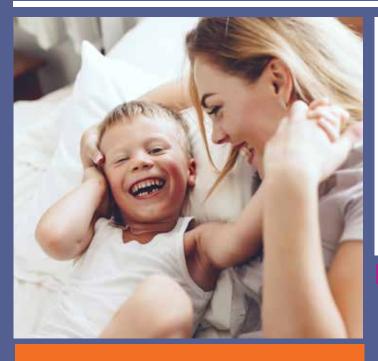


^{**}At least one drink of alcohol on at least 1 day during the 30 days before the survey ***Insufficient data





MATERNAL AND CHILD HEALTH





Prince George's County Births

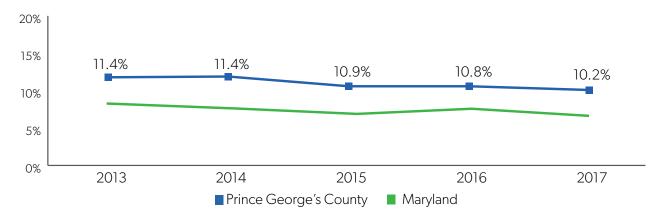
In 2017, 55 percent of births in the county were to Black, non-Hispanic women, followed by 31 percent to Hispanic women. The number of births to Hispanic mothers in the county has increased by over 25 percent since 2013. Maternal age continued to trend slightly older; women age 35 and over accounted for 22 percent of births in 2017, up from 19 percent five years prior.

Total Births	2015	2016	2017
Total	12,344	12,320	12,422
Race and Ethnicity of Mother	2015	2016	2017
Black, non-Hispanic	7,003	6,929	6,805
Hispanic (any race)	3,524	3,622	3,819
White, non-Hispanic	1,253	1,174	1,178
Asian or Pacific Islander	515	509	528
			20.15
Age (Years)	2015	2016	2017
Under 18	185	194	173
18 to 19	441	416	394
20 to 24	2,398	2,218	2,259
25 to 29	3,384	3,437	3,376
30 to 34	3,394	3,381	3,470
35 to 39	1,954	2,115	2,169
40 to 44	526	513	531
45 and over	60	55	50

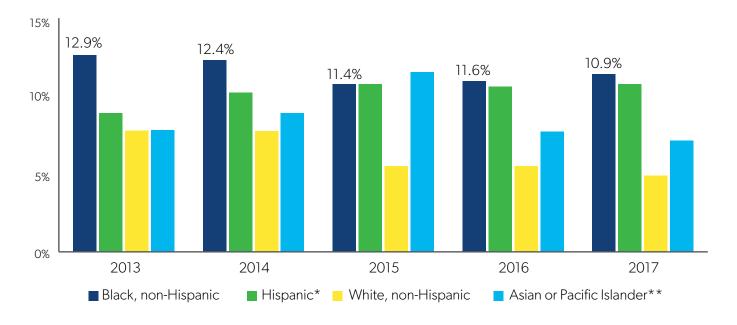
Late or No Prenatal Care, Prince George's County

Early and regular prenatal care, beginning in the first trimester, is essential to reduce the risk of complications both for the mother and the baby. The percentage of mothers with late or no prenatal care has decreased slightly over the past five years, but remained higher compared to the state. In 2017, one out of every 10 births to Hispanic and Black, non-Hispanic mothers had late or no prenatal care.

Percentage of Births with Late or No Prenatal Care



Percentage of Births with Late or No Prenatal Care by Race and Ethnicity of Mother



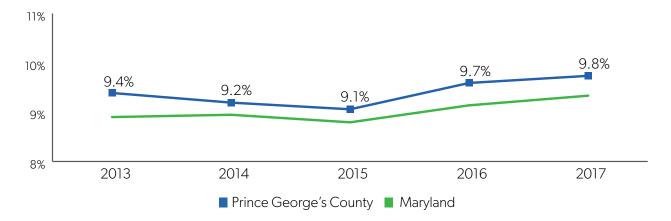
^{*}Includes births to mothers of Hispanic origin of any race

^{**}Starting in 2015, Asian or Pacific Islander was reclassified as Asian or Pacific Islander, non-Hispanic

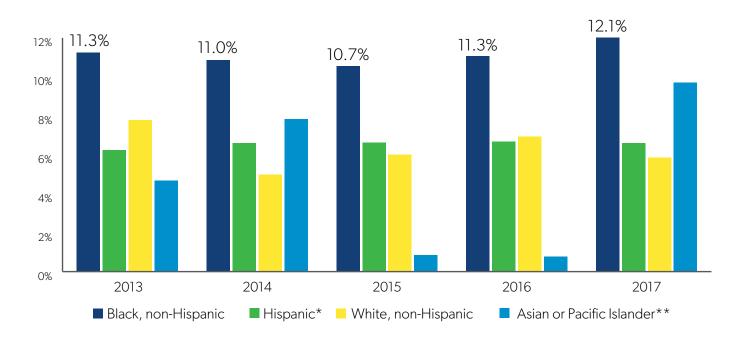
Low Birth Weight, Prince George's County

Low birth weight infants (<2,500 grams or approximately 5.5 pounds) have an increased risk for complications and even death. After declining over the past few years, the percentage of infants with low birth weight increased 9.8 percent in 2017. The percentage of Black, non-Hispanic infants born at low birth weight (12.1 percent) was much higher than that of Hispanic infants (6.9 percent) and White, non-Hispanic infants (6.1 percent).

Percentage of Low Birth Weight Infants



Percentage of Low Birth Weight Infants by Race and Ethnicity of Mother



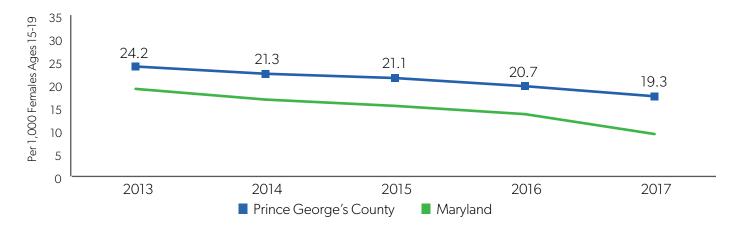
^{*}Includes births to mothers of Hispanic origin of any race

^{**}Starting in 2015, Asian or Pacific Islander was reclassified as Asian or Pacific Islander, non-Hispanic

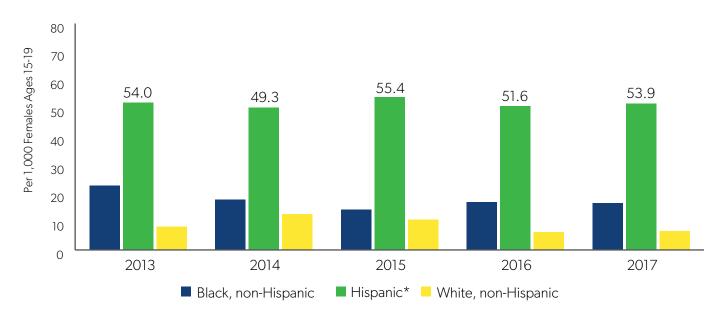
Births to Females Ages 15-19, Prince George's County

The health impacts of teenage births can affect the mother and the child for a lifetime. Teenage mothers are less likely to complete high school, increasing the probability of lower lifetime incomes compared to women delaying their first birth. Babies born to teenage mothers have initial risks of low birth weight and prematurity and, as they age, the children of teenage mothers are more likely to have lower academic achievement, have a higher risk of incarceration, and are more likely to live in poverty.

Teen Birth Rate (Ages 15-19)



Teen Birth Rate by Race and Ethnicity of Mother (Ages 15-19)



^{*}Includes births to mothers of Hispanic origin of any race

Infant Mortality, Prince George's County

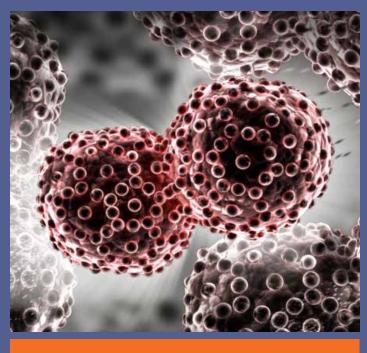
Total Deaths	2015	2016	2017
Total	110	94	102
Race and Ethnicity, Number of Deaths	2015	2016	2017
Black, non-Hispanic	94	67	82
Hispanic (any race)	9	22	19
White, non-Hispanic	4	2	1
Infant Mortality Rate: All Races per 1,000 Live Births	2015	2016	2017
Prince George's	8.9	7.6	8.2
Maryland	6.7	6.5	6.5
Infant Mortality Rate: Black, Non-Hispanic per 1,000 Live Births	2015	2016	2017
Prince George's	13.4	9.7	12.0
Maryland	11.3	10.5	11.2
Infant Mortality Rate: Hispanic (of any race) per 1,000 Live Births	2015	2016	2017
Prince George's	2.6	6.1	5.0
Maryland	5.5	5.4	4.7
Infant Mortality Rate: White, Non-Hispanic per 1,000 Live Births	2015	2016	2017
Prince George's	*	*	*
Maryland	4.0	4.3	4.0

^{*}Rates are unavailable for fewer than 5 deaths.





MORTALITY AND CANCER





Resident Deaths, Prince George's County

There were 6,288 total deaths reported in Prince George's County in 2017, and the life expectancy was 79.1 years. Life expectancy is affected by increased access to health care and reduced premature death due to preventable causes. There are many modifiable risk factors that contribute to death including quitting smoking, eating more fruits and vegetables, and increasing physical activity.

Total Deaths	2015	2016	2017
Total	5,576	5,961	6,288
Race and Ethnicity	2015	2016	2017
Black, non-Hispanic	3,811	4,050	4,333
Hispanic (any race)	231	249	297
White, non-Hispanic	1,371	1,499	1,471
Asian or Pacific Islander	141	147	162
Age Group	2015	2016	2017
<1 year	110	95	98
1-4 years	14	9	11
5-14 years	10	10	17
15-24 years	91	107	92
25-44 years	332	392	376
•			
45-64 years	1,378	1,470	1,541
	1,378 2,473	1,470 2,600	1,541 2,763
45-64 years			

Leading Causes of Death, 2017

Deaths due to heart disease and cancer continue to account for about half of all deaths in Prince George's County. However, deaths due to accidental causes are on the rise, surpassing diabetes in 2017. Deaths due to accidents include transportation-related incidents, such as motor vehicle accidents, but also non-transportation-related incidents, such as alcohol and drug overdoses.

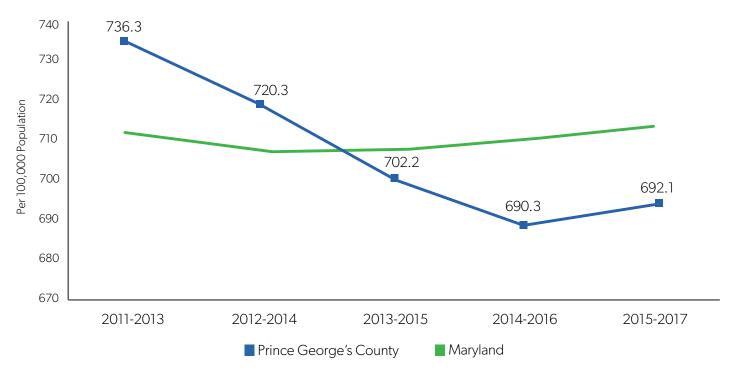
> **Age-Adjusted Death Rate** per 100,000 Population (2015-2017)

Cause of Death	Number of Deaths	Percent of Deaths	Prince George's	Maryland
All Causes	6,288	100.0%	692.1	713.8
Heart Disease	1,474	23.4%	168.9	166.0
Cancer	1,460	23.2%	154.1	154.3
Stroke	384	6.1%	41.6	39.3
Accidents	283	4.5%	29.4	34.1
Diabetes	253	4.0%	26.3	19.4
CLRD*	184	2.9%	20.6	30.4
Nephritis	131	2.1%	14.5	12.1
Alzheimer's Disease	120	1.9%	15.3	17.0
Septicemia	120	1.9%	13.2	13.0
Influenza and Pneumonia	a 118	1.9%	14.5	15.6
Hypertension	118	1.9%	11.8	8.0
Homicide	94	1.5%	11.6	10.2

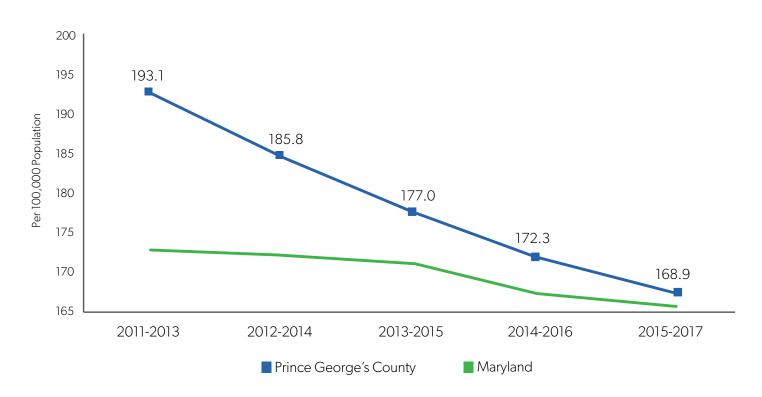
^{*}Chronic Lower Respiratory Disease

Age-Adjusted Mortality Rates 2011-2017

All Causes of Death

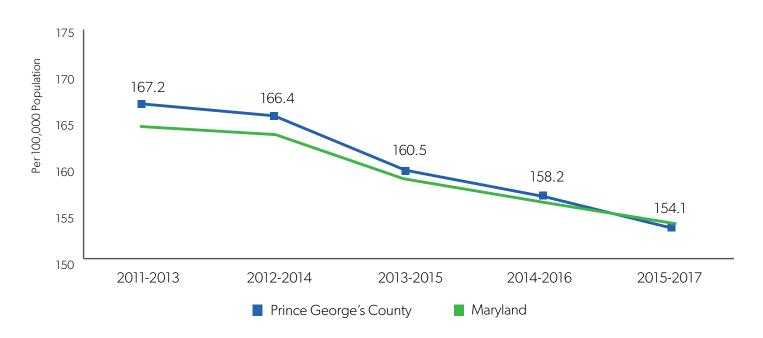


Heart Disease

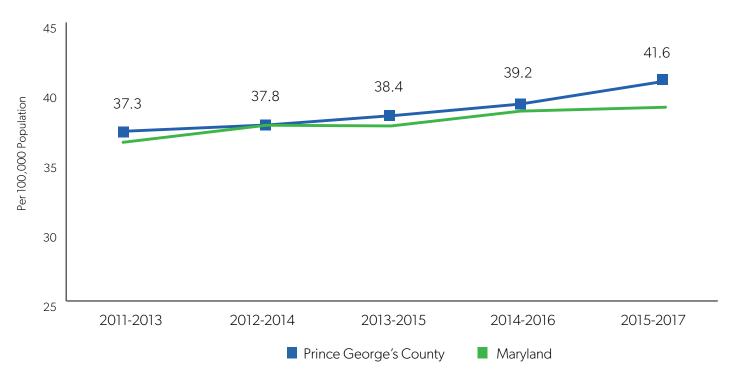


Age-Adjusted Mortality Rates 2011-2017

Cancer

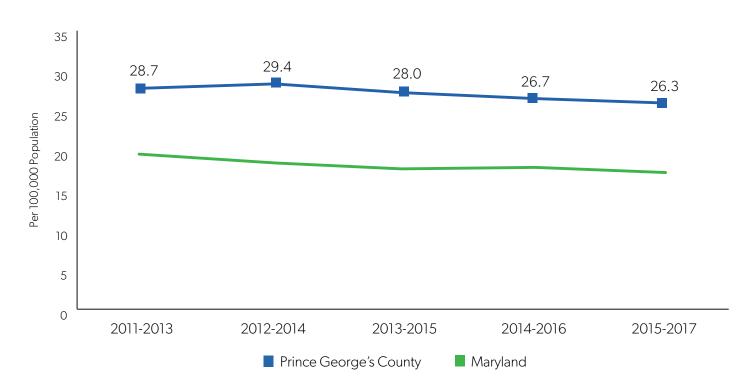


Stroke

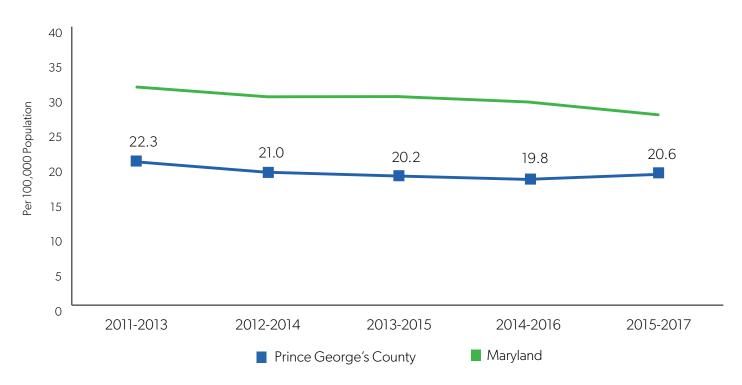


Age-Adjusted Mortality Rates 2011-2017

Diabetes

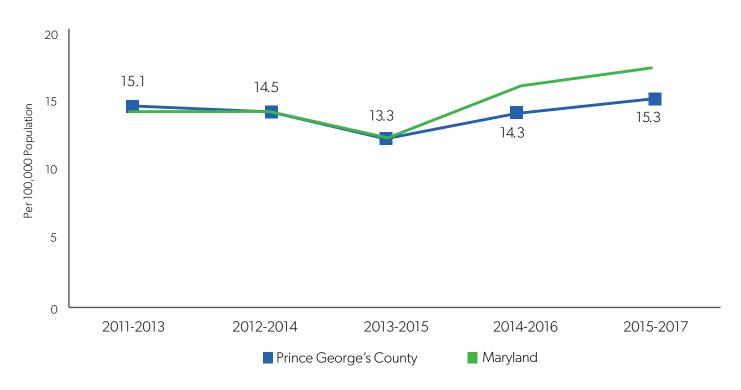


Chronic Lower Respiratory Disease

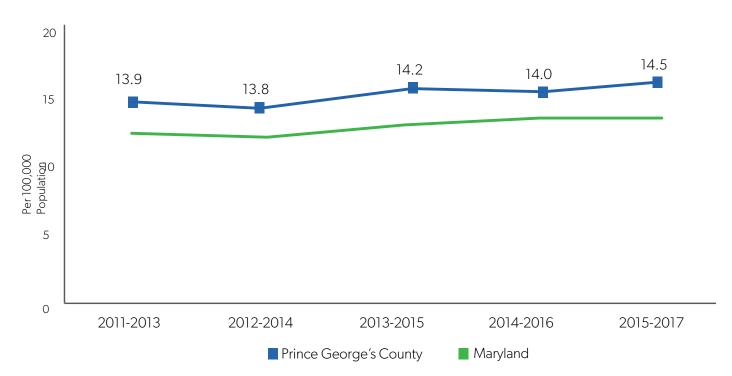


Age-Adjusted Mortality Rates 2011-2017

Alzheimer's Disease



Nephritis (Kidney Disease)



Cancer Incidence

Cancer Incidence (New Cases), 2014

The overall cancer incidence rate in the county was lower than the state in 2014. Within the county, cancer incidence rate was highest for male and black residents. Incidence rates for female breast and prostate cancers were also highest for Black residents.

	Prince George's County New Cases	Prince George's County Rates*	Maryland Rates*
All Types	3,602	397.0	442.0
Male	1,739	441.5	481.4
Female	1,862	369.2	416.3
Black	2,457	397.2	443.6
Hispanic (any race)	169	221.3	282.0
White	952	389.3	450.6
Other	113	219.9	247.4
Lung and Bronchus	384	44.7	55.8
Male	175	47.2	62.8
Female	208	42.2	50.6
Colon and Rectum	344	40.0	37.3
Male	166	44.6	42.3
Female	178	36.6	33.1
Female Breast	606	116.2	130.3
Black Female	446	120.5	129.1
White Female	121	96.6	132.8
Prostate	601	141.3	119.4
Black Male	491	173.7	184.5
White Male	86	74.8	101.3

^{*}Age-adjusted per 100,000 population

Cancer Mortality

Cancer Mortality (Deaths), 2014

Mortality rates for lung and colon cancers were highest for male residents, and mortality rates for female breast and prostate cancers were highest for Black residents in the county.

	Prince George's County Deaths	Prince George's County Rates*	Maryland Rates*
All Types	1,417	168.6	161.8
Male	693	199.4	191.5
Female	724	149.9	141.7
Black	931	165.6	181.0
White	446	189.1	160.6
Other	40	89.1	85.7
Lung and Bronchus	298	35.5	41.3
Male	149	41.7	48.4
Female	149	31.6	36.2
Colon and Rectum	138	16.3	14.4
Male	82	22.1	17.6
Female	56	11.5	12.0
Female Breast	133	26.8	22.9
Black Female	100	28.8	29.0
White Female	**	***	21.1
Prostate	76	25.3	19.3
Black Male	56	31.3	35.6
White Male	**	***	15.9

^{*}Age-adjusted per 100,000 population

^{**}Death counts of fewer than 10 are not available per MDH policy

^{***}Rates based of death counts of fewer than 20 are not calculated per MDH policy





INFECTIOUS DISEASES





Select Reportable Diseases, Prince George's County

Infectious Disease	2015	2016	2017	5-Year Mean
Campylobacteriosis	43	42	58	44
H. influenzae, invasive	17	10	11	12
Hepatitis A, acute	2	5	3	3
Legionellosis	30	23	41	28
Measles	0	0	1	0
Meningitis, viral	64	49	47	53
Meningitis, meningococcal	0	0	2	0
Pertussis	9	22	8	13
Salmonellosis	100	97	103	90
Shiga-toxin producing E. coli	7	4	10	6
Shigellosis	38	30	27	35
Strep Group B	91	68	80	74
Strep pneumoniae, invasive	49	48	39	44
Tuberculosis	43	50	47	47
Outbreaks: Gastrointestinal	4	3	7	6
Outbreaks: Respiratory	7	0	8	3
Animal Bites	1,010	1,057	1,119	970
Animal Rabies	20	15	10	17

Sexually Transmitted Infections, Prince George's County

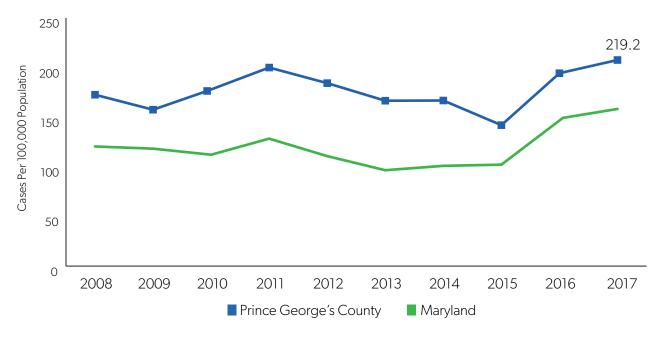
Sexually transmitted infections (STIs) have a range of primary symptoms, but may also cause other complications, such as infertility, inflammatory diseases and even heart disease. Statewide, only Baltimore City has more STI cases (chlamydia, gonorrhea and syphilis) than Prince George's County. Rates of chlamydia and gonorrhea are highest for those 15-24 years of age. In 2016, 30 percent of county high school students reported ever having sexual intercourse, with 63 percent using a condom during their last sexual intercourse encounter. Syphilis cases hit a five-year low in 2015, but have been on the rise over the past two years.

Sexually Transmitted Infections	2015	2016	2017	5-Year Mean
Chlamydia	6,153	6,752	7,365	6,513
Gonorrhea	1,282	1,832	2,001	1,575
Syphilis*	81	110	143	113

^{*}Includes both primary and secondary syphilis

Gonorrhea cases continued to increase substantially in the state and county in 2017. There was a 56 percent increase in cases for the county from 2015 to 2017, and the 2017 case rate for gonorrhea is the highest over the past decade.

Gonorrhea Rate in Prince George's County, 2008-2017

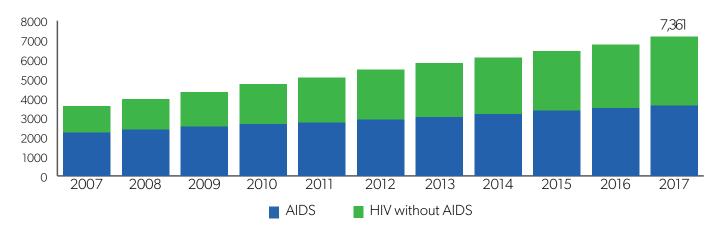


Human Immunodeficiency Virus (HIV) and Acquired Immune Deficiency Syndrome (AIDS), Prince George's County

In 2017, there were 320 new cases of HIV in Prince George's County, with a rate of 41.9 cases per 100,000 residents 13 years and older. Most of these new cases were men (71.3 percent), Black (80.6 percent), and were under the age of 40 (69.7 percent). Medical care for HIV is important to help those with HIV stay healthy and to prevent HIV transmission by suppressing the HIV virus through medication. About 63 percent of those diagnosed with HIV in the county are estimated to have HIV viral suppression.

Age	New HIV Cases, 2017	Rate per 100,000
13-19 years	16	19.8
20-29 years	111	83.5
30-39 years	96	74.2
40-49 years	53	43.5
50-59 years	28	21.8
60+ years	16	9.4
Sex		
Male	228	62.7
Female	92	23.0
Race/Ethnicity		
Black, non-Hispanic	258	53.3
Hispanic	40	32.1
White, non-Hispanic	13	12.4
Total	320	41.9

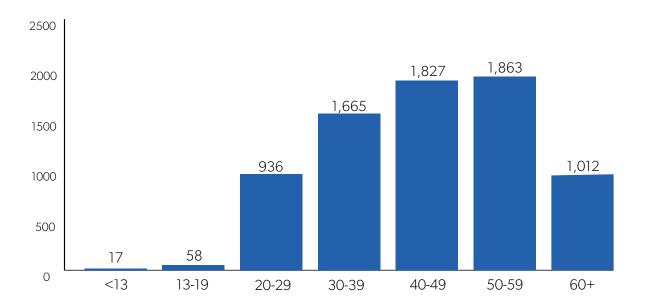
Living HIV Cases (13 Years and Older), 2007-2017



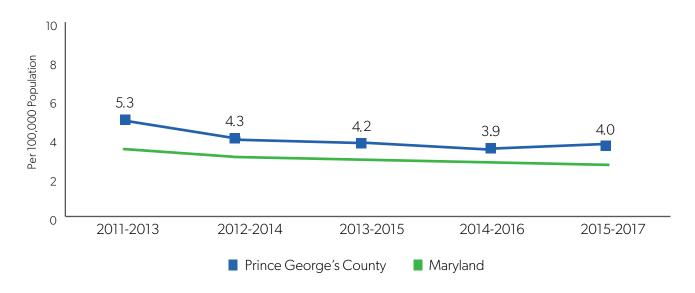
HIV Living Cases and Mortality Rate, Prince George's County

One out of every 103 people (ages 13 and older) in Prince George's County has HIV. Although most new cases are diagnosed in their twenties and thirties, nearly two-thirds (64 percent) of total living HIV cases are age 40 and over. In 2017, there were 38 HIV-related deaths in the county.

Total Living HIV Cases by Current Age in Years, 2017



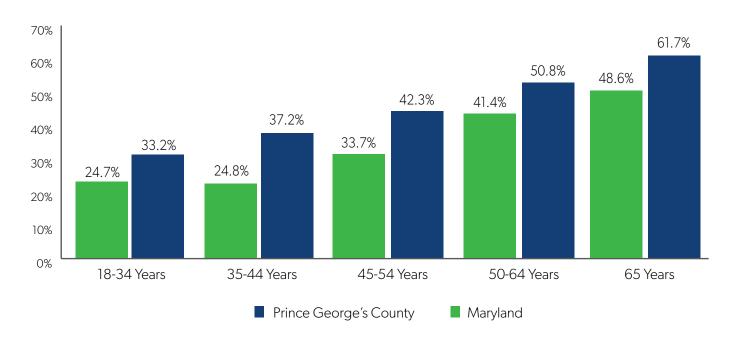
HIV Age-Adjusted Mortality Rate, 2011-2017



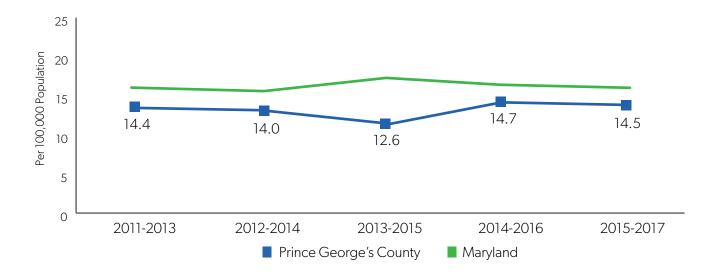
Data Source: Prince George's County Annual HIV Epidemiological Profile, 2017, MDH https://phpa.health.maryland.gov/OIDEOR/CHSE/Pages/statistics.aspx; CDC, NCHS Division of Vital Statistics, CDC Wonder Online Database https://wonder.cdc.gov

Flu Vaccinations and Deaths

Flu Vaccinations within the Past Year by Age Group, 2016



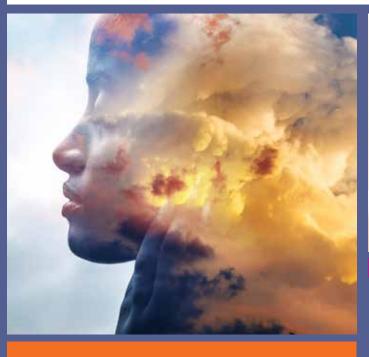
Flu & Pneumonia Age-Adjusted Mortality Rate, 2011-2017







BEHAVIORAL HEALTH



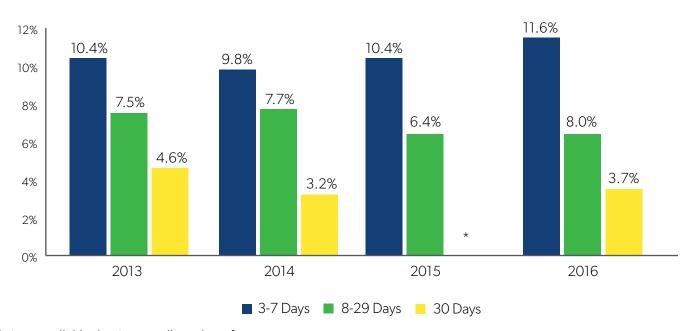


Behavioral Health

Poor Mental Health and Suicide, Prince George's County

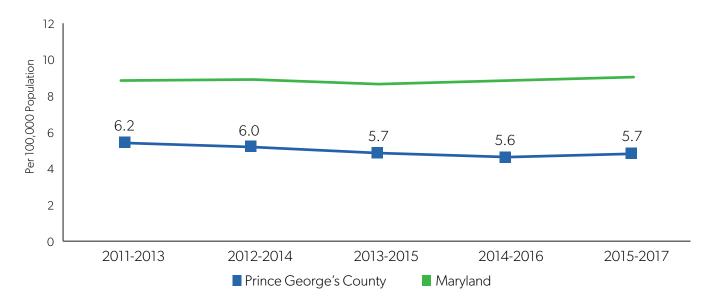
A person's mental health is their overall psychological and emotional well-being. Poor mental health may be an effect of environment, genetics, behavior, or a combination of each of these factors. In 2016, one in five county adults reported their mental health was poor for part of the previous month, including, but not limited to stress, depression, and problems with emotions.

Number of Days with Poor Mental Health in Past 30 Days, Adults



^{*}Data unavailable due to a small number of responses

Suicide Age-Adjusted Mortality Rate, 2011-2017

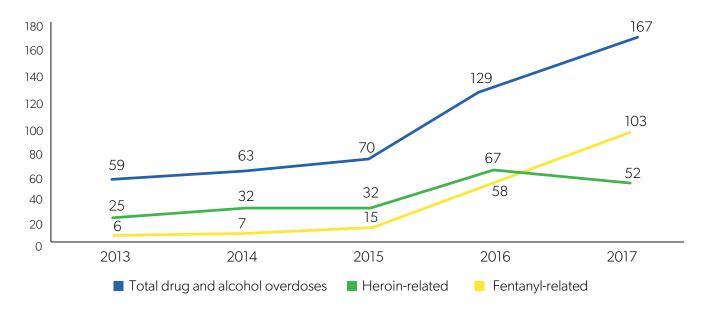


Behavioral Health

Drug and Alcohol Overdoses, Prince George's County

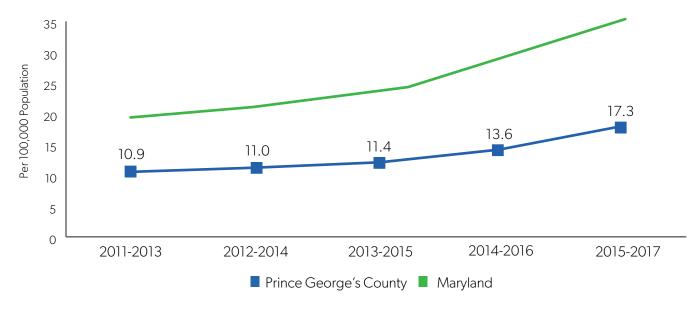
As of 2016, fentanyl, a synthetic opioid pain reliever, surpassed heroin as the leading contributor to drug overdoses throughout the country. Fentanyl is extremely strong, with a potency 50 to 100 times greater than morphine. However, Prince George's County continues to have a much lower overall drug- and alcohol-related mortality rate compared to the state; in 2017, the mortality rate statewide was twice the mortality rate in the county.

Number of Overdose Deaths Occuring in Prince George's County*



^{*} Includes non-Prince George's County residents who expired in the county

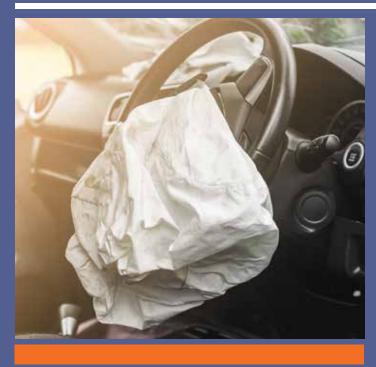
Drug and Alcohol Age-Adjusted Mortality Rate







PHYSICAL SAFETY

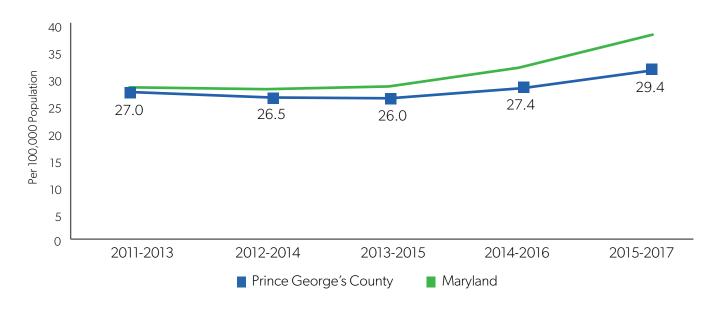




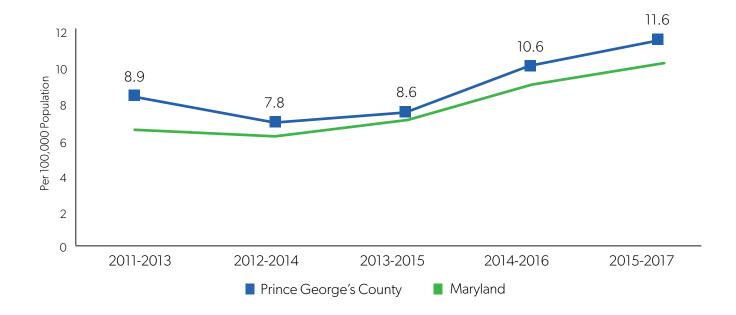
Physical Safety

Age-Adjusted Mortality Rates 2011-2017

Accidental Deaths



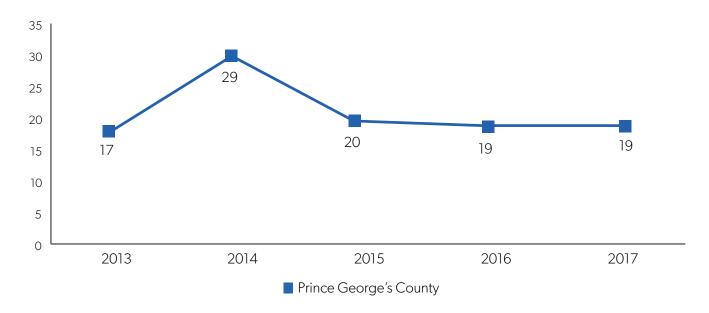
Homicide



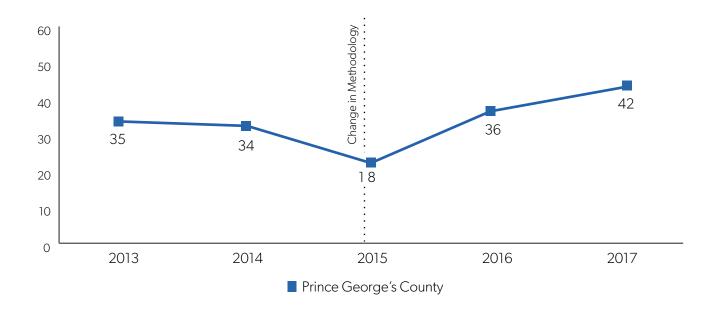
Physical Safety

Fatal Motor Vehicle (MV) Crashes, Prince George's County 2013-2017

Fatal MV Crashes Involving Pedestrians on Foot



Fatal MV Crashes Involving Distracted Driving*



^{*}In 2015, the Maryland State Police made changes to their reporting system for distracted driving; 2015 should be considered the baseline year for data analysis and is not directly comparable to previous years.

