

HC 3.1 Infant Mortality

Infancy is defined as the first year of life and is commonly divided into two periods. The first is the neonatal period which is the first 27 days of life. The second is the *postnatal* period which is 28 days to 1 year. About two-thirds of *infant deaths* occur during the neonatal period (although advances in neonatology in recent decades have greatly improved the chances that infants will survive this period).

The three leading causes of death to infants, overall, are congenital anomalies, disorders relating to a short gestation period and low birthweight, and *sudden infant death syndrome* (SIDS).⁴⁸ In 1994, SIDS dropped from the second to the third leading cause of infant mortality. The SIDS decline accounted for nearly one-third of the total drop in infant mortality in 1995 and 1996.⁴⁹ Infant deaths due to SIDS have been declining since 1989, including nearly a 12 percent drop between 1996 and 1997.⁵⁰

The U.S. infant mortality rate has decreased rapidly over the past three decades, largely due to medical developments over this time. Between 1960 and 1998, the rate fell from 26.0 to 7.2 infant deaths per 1,000 live births (see Figure HC 3.1.A). There was a steep decline in the rate of neonatal deaths (from 18.7 to 4.8 infant deaths per 1,000 live births) and a smaller, more gradual decline in the rate of postnatal deaths (from 7.3 to 2.4 infant deaths per 1,000 *live births*).

Despite declines in recent decades, the U.S. infant mortality rate ranks among the highest of industrialized nations. For example, in 1995, the rate of infant deaths per 1,000 live births was 3.9 in Finland, 4.3 in Japan, 5.3 in Germany, and 6.1 in England and Wales, compared with 7.6 deaths per 1,000 live births in the United States. The Russian Federation, in contrast, had an infant mortality rate of 18.2 deaths per 1,000 live births in 1995.⁵¹

Differences by Race and Hispanic Origin.⁵² While infant mortality rates have declined for all races and ethnic groups in the United States, there is, nevertheless, considerable variation by race and Hispanic origin (see Figure HC 3.1B). The infant mortality rate declined most noticeably for White and Black infants between the years 1960 and 1998, 74 and 69 percent respectively. Specifically, the number of Black infant deaths decreased from 44.3 to 13.8 deaths per 1,000 live births (see Table HC 3.1.A). Between the years 1985 and 1998 the Hispanic infant mortality rate declined by 33 percent. For the period 1983-1985 to 1998 American Indian/Alaska Native infant mortality rates declined by 33 percent while Asian/Pacific Islander infant decreased by 34 percent.

⁴⁸ Ventura, S.J., Anderson, R.N., Martin, J.A., and Smith, B.L. 1998. Births and Deaths: Preliminary Data for 1997. *National Vital Statistics Report*, 47(4). Hyattsville, MD: National Center for Health Statistics.

⁴⁹ Singh, G.K., Kochanek, K.D., & MacDorman, M.F. 1994. Advance Report of Final Mortality Statistics, 1994. *Monthly Vital Statistics Report*, 45(3 Supp.). Hyattsville, MD: National Center for Health Statistics.

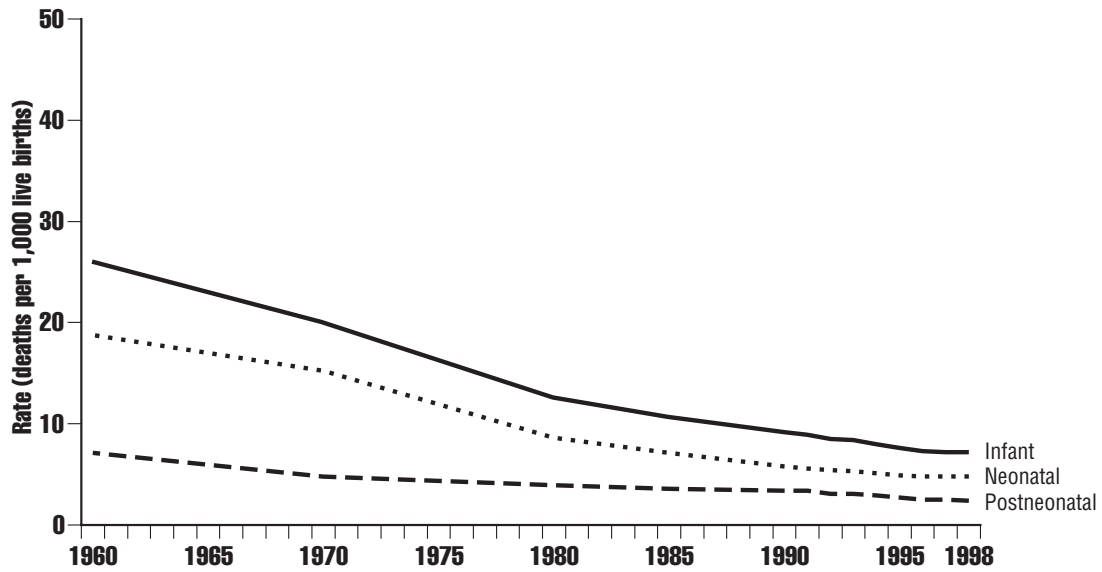
⁵⁰ As reported in Ventura, S.J., Anderson, R.N., Martin, J.A., & Smith, B.L. 1998. *Births and Deaths: Preliminary Data for 1997*.

⁵¹ World Health Organization: *World Health Statistics Annuals* Vols. 1990-1996. Geneva; United Nations: *Demographic Yearbook* 1996. New York; Centers for Disease Control & Prevention, NCHS. *Vital Statistics of the United States*, 1995. Washington: Public Health Service.

⁵² Estimates for Whites and Blacks include Hispanics of those races. Persons of Hispanic origin may be of any race. Infant mortality data for Asians/Pacific Islanders and American Indians/Alaska Natives are presented from the National Linked Files of Live Births and Infant Deaths. Rather than relying solely on death certificate data, which may underestimate mortality for infants of Hispanic origin or of races other than White and Black, data from the National Linked Files of Live Births and Infant Deaths use race from birth certificates and, therefore, provide more accurate data for these populations. The National Linked Files of Live Births and Infant Deaths data are available for 1983-1991, 1995-1996, and 1998.

Figure HC 3.1.A

Infant, neonatal, and postneonatal mortality rates in the United States: Selected years, 1960^a-1998



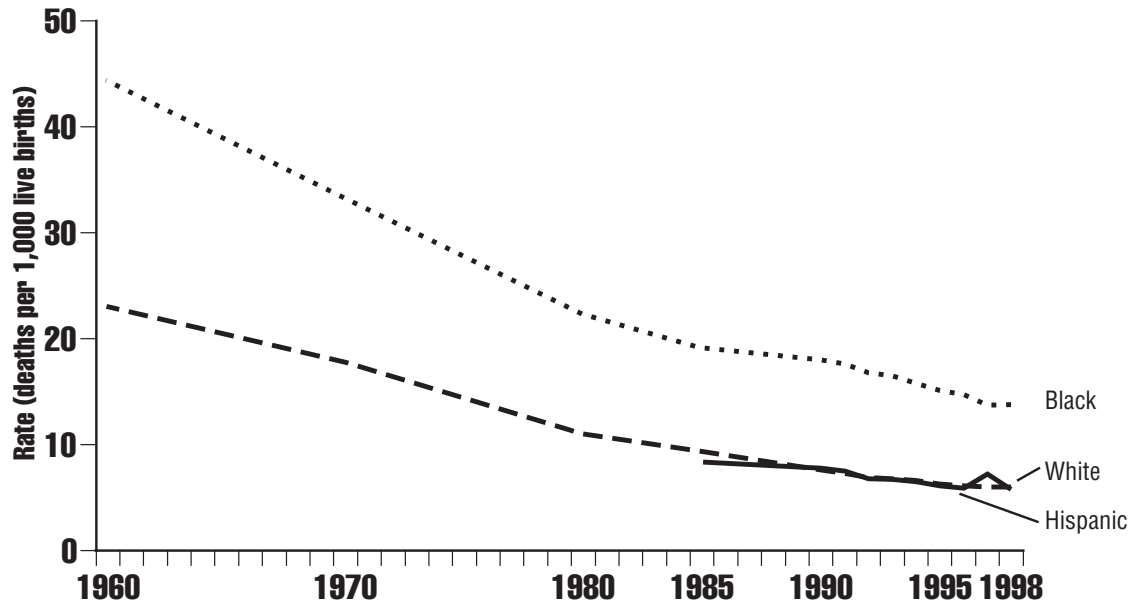
^a Includes births and deaths of persons who were not residents of the 50 states and the District of Columbia.

Sources: Ventura et al., 1998, *Births and Deaths*, (Table 14); Anderson, Kochanek, & Murphy, 1997, (Tables 25 and 26). Also previous issues of NCHS report.

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Figure HC 3.1.B

Infant mortality rates in the United States, by race and Hispanic origin:^a Selected years, 1960^{b,c}-1998



^a Estimates for Whites and Blacks include Hispanics of those races. Persons of Hispanic origin may be of any race. Hispanic rates not available prior to 1985. Infant mortality by Hispanic origin was reported by 17 states and the District of Columbia in 1985; 45 states, New York State (excluding New York City), and the District of Columbia in 1990; 47 states, New York State (excluding New York City), and the District of Columbia in 1991; 48 states and the District of Columbia in 1992; 49 states and the District of Columbia from 1993 to 1996; and all 50 states and the District of Columbia in 1997.

^b Includes births and deaths of persons who were not residents of the 50 states and the District of Columbia.

^c Data for 1960 are by race of child; all other years are by race of mother.

Sources: Anderson, Kochanek, and Murphy, 1997; Also previous issues of this annual report [Table 26 in 41 (7, Supp.), Table 25 in 42 (2, Supp.), Table 28 in 43 (6, Supp.), Table 32 in 44 (7, Supp.), and Table 25 in 45 (3, Supp.)]; 1970 data from the Centers for Disease Control and Prevention, National Center for Health Statistics, 1996; Peters, Kochanek, and Murphy, 1998; 1996 *United States Deaths*, (Table 26).

Table HC 3.1.A

Infant, neonatal, and postneonatal mortality rates (deaths per 1,000 live births) in the United States, by race and Hispanic origin:^a Selected years, 1960-1998

	1960 ^{b,c}	1970	1980	1985	1990	1995	1996	1997	1998
All infants^d	26.0	20.0	12.6	10.6	9.2	7.6	7.3	7.2	7.2
White	22.9	17.6	10.9	9.2	7.6	6.3	6.1	6.0	6.0
Black	44.3	33.3	22.2	19.0	18.0	15.1	14.7	14.2	13.8
Hispanic	—	—	—	8.6	7.8	6.1	5.9	6.0	5.8
All neonatal^e	18.7	15.1	8.5	7.0	5.8	4.9	4.8	4.8	4.8
White	17.2	13.7	7.4	6.0	4.8	4.1	4.0	4.0	4.0
Black	27.8	23.2	14.6	12.6	11.6	9.8	9.6	9.4	9.4
Hispanic	—	—	—	5.4	5.0	4.0	3.8	3.9	3.9
All postneonatal^f	7.3	4.9	4.1	3.7	3.4	2.7	2.5	2.5	2.4
White	5.7	4.0	3.5	3.2	2.8	2.2	2.1	2.0	2.0
Black	16.5	10.1	7.6	6.4	6.4	5.3	5.1	4.8	4.4
Hispanic	—	—	—	3.2	2.8	2.1	2.1	2.0	1.9

^a Estimates for Whites and Blacks include Hispanics of those races. Persons of Hispanic origin may be of any race. Hispanic rates not available prior to 1985. Infant mortality by Hispanic origin was reported by 17 states and the District of Columbia in 1985; 45 states, New York State (excluding New York City), and the District of Columbia in 1990; 47 states, New York State (excluding New York City), and the District of Columbia in 1991; 48 states and the District of Columbia in 1992; 49 states and the District of Columbia from 1993 to 1996; and all 50 states and the District of Columbia in 1997.

^b Includes births and deaths of persons who were not residents of the 50 states and the District of Columbia.

^c Data for 1960 are by race of child; all other years are by race of mother.

^d Under one year old.

^e Under 28 days old.

^f Twenty-eight days to one year old.

Sources: Anderson, Kochanek, and Murphy, 1997; Also previous issues [Table 26 in 41 (7, Supp.), Table 25 in 42 (2, Supp.), Table 28 in 43 (6, Supp.), Table 32 in 44 (7, Supp.), and Table 25 in 45 (3, Supp.)]; 1970 data from the Centers for Disease Control and Prevention, National Center for Health Statistics, 1996; Peters, Kochanek, and Murphy, 1998; 1996 *United States Deaths*, (Table 26); Kramorrow et al., 1999, Health.

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Table HC 3.1.B

Infant mortality rates (deaths per 1,000 live births) in the United States, by detailed race^a and Hispanic origin:^b Selected years, 1983-1998

	1983-1985	1986-1988	1989-1991	1995	1996	1997	1998
Infant (all races)	10.6	9.8	9.0	7.6	7.3	7.2	7.2
White	9.0	8.2	7.4	6.3	6.1	6.0	6.0
Black	18.7	17.9	17.1	14.6	14.1	13.7	13.8
American Indian/ Alaska Native	13.9	13.2	12.6	9.0	10.0	8.7	9.3
Asian/Pacific Islander	8.3	7.3	6.6	5.3	5.2	5.0	5.5
Chinese	7.4	5.8	5.1	3.8	3.2	3.1	4.0
Japanese	6.0	6.9	5.3	5.3	4.2	5.3	3.5
Filipino	8.2	6.9	6.4	5.6	5.8	5.8	6.2
Hawaiian and part Hawaiian	11.3	11.1	9.0	6.6	5.6	9.0	10.0
Other Asian or Pacific Islander	8.6	7.6	7.0	5.5	5.7	5.0	5.7
Hispanic	9.2	8.3	7.6	6.3	6.1	6.0	5.8
Mexican American	8.8	7.9	7.2	6.0	5.8	5.8	5.6
Puerto Rican	12.3	11.1	10.4	8.9	8.6	7.9	7.8
Cuban	8.0	7.3	6.2	5.3	5.1	5.5	3.6
Central and South American	8.2	7.6	6.6	5.5	5.0	5.5	5.3
Other and unknown Hispanic	9.9	9.0	8.2	7.4	7.7	6.2	6.5

^a Estimates are based on specified race or national origin of mother.

^b Estimates for separate race groups include Hispanics of those races. Persons of Hispanic origin may be of any race.

Sources: Data from the National Linked Files of Live Births and Infant Deaths. Health, United States, 1996-97, (Table 20); MacDorman, and Atkinson, 1998, Tables A and C; MacDorman, and Atkinson, 1997, (Tables A and C); MacDorman and Atkinson, 1999.

HEALTH CONDITIONS AND HEALTH CARE

HC 3.2 Child and Youth Deaths

It is estimated that approximately 37 children die every day from preventable injuries.⁵³ *Unintentional injuries*⁵⁴ account for two-thirds of all injury deaths to children and adolescents in the United States.⁵⁵ Between 7 and 27 percent of unintentional injury deaths of young children may be due to abuse or neglect,⁵⁶ although the abuser's intent may have been to quiet or discipline the child rather than inflict harm. Unintentional injury deaths have declined during the past two decades, a trend that demonstrates some of the successes of prevention efforts, better emergency medical services, and acute care that saves the lives of injured children.⁵³

Differences by Age. Unintentional injuries occur to children of all ages, but they are the leading cause of death for all children over age one with more than half of all unintentional injury deaths occurring to youths ages 15 to 19.⁵⁷ The most dramatic declines in death rates occurred among children under age 15, with decreases of 67 percent among children ages 1 to 4, 62 percent among children ages 5 to 9, and 48 percent among children ages 10 through 14 since 1960 (see Figure HC 3.2.A). Most of the decline in the death rate for these groups occurred between 1960 and 1990. In contrast, death rates for youth ages 15 through 19 have decreased by only 21 percent since 1960.

Differences by Race and Hispanic Origin.⁵⁸ Multi-year data from the National Center for Health Statistics are used to examine the differences in the death rate of children and youth for several racial and ethnic groups across three time periods spanning 1989 through 1998 (see Table HC 3.2.A). For children ages 1 to 14 and youth ages 15 to 24, Black children and youth have the highest death rate; American Indian/Alaska Native, Hispanic, and White children and youth consistently have the lowest death rates. The Black-White disparity among adolescents ages 15 through 19 was substantial in 1970 but had declined by 1980 to the point where Black youth registered lower death rates than White youth (see Figure HC 3.2.B). This reversal was short-lived, however. Black death rates surged from 85.2 per 100,000 in 1985 to 145.0 per 100,000 by 1994, while White death rates remained fairly stable. Much of this increase in Black teen deaths reflected a substantial increase in Black teen male *homicide* rates, which are reviewed in Section HC 1.4 of this report. Recently, the difference between the White and Black adolescent death rates has narrowed, as the rate for Blacks declined 27 percent between 1994 and 1997.

⁵³ Deal, L.W., Gomby, D.S., Zippiroli, L., and Behrman, R.E. 2000. *Unintentional Injuries in Childhood: Analysis and Recommendations*. Spring/Summer, 2000. p.17.

⁵⁴ Injury-related deaths include deaths from motor vehicle crashes, fires and burns, drowning, suffocation, and accidents caused by firearms and other explosive materials, as well as homicides, suicides, and other external causes of death.

⁵⁵ National Center for Health Statistics, Centers for Disease Control and Prevention. Compressed mortality file. 1996 data set. Hyattsville, MD: NCHS, CDC.

⁵⁶ McClain, P.W., Sachs, J.J., Froehlke, R.G., and Ewigman, B.G. 1993. *Estimates of Fatal Child Abuse and Neglect, United States, 1979 through 1988*. *Pediatrics*, 91:338-43.

⁵⁷ Deal et al., 2000.

⁵⁸ Estimates for Whites, Blacks, Asians and American Indians include Hispanics of those races. Persons of Hispanic origin may be of any race.

Firearm related deaths

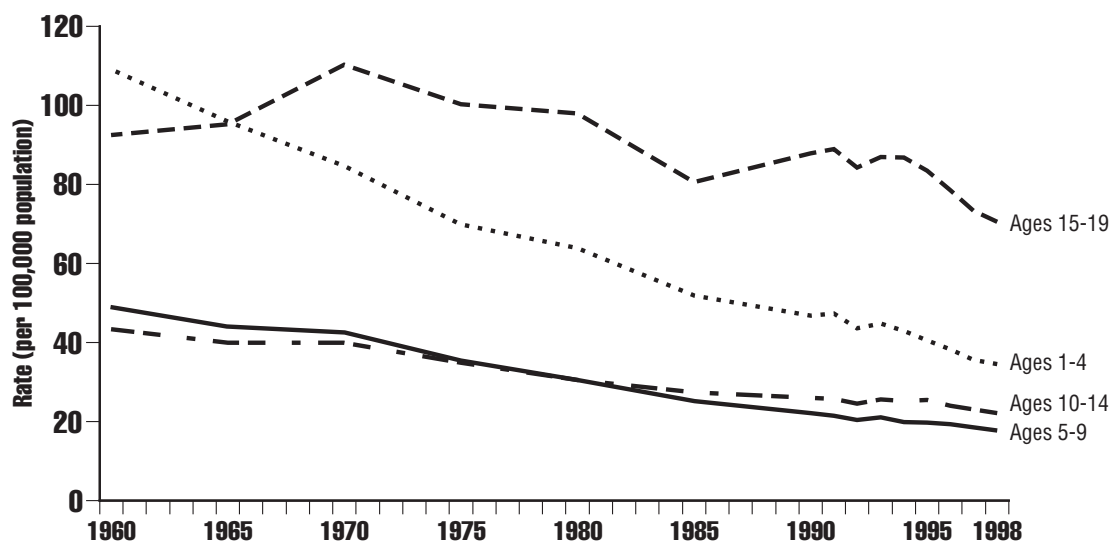
Firearm-related deaths are a growing public health concern among children and youth. Death due to injury by firearms includes deaths due to homicide, suicide, legal intervention, unintentional death by firearms, and firearm-related deaths of undetermined intent. Both suicide and homicide have accounted for the vast majority of firearm-related deaths over the past 30 years—as high as 94 percent in 1994.⁵⁹

Differences by Race. Among younger adolescents ages 10 through 14, and among females ages 15 through 19, the rate of death due to injury by firearms ranges from two to three times higher for Blacks than for Whites. In 1998, the rate of firearm-related deaths for Black males ages 15 through 19 is almost four times the rate for their White peers. It has decreased by 50 percent since 1993, when the rate was over five times higher than that of White males (see Table HC 3.2.B). Based on 1998 data, the rate for older Black males decreased by 25 percent between 1996 and 1997, from 108.7 to 75.5 per 100,000. The high rate of deaths due to homicide among Black males in this age group largely accounts for the high firearm-related death rate.⁶⁰

Differences by Gender. Among Blacks and Whites in both age groups, firearm-related deaths are more prevalent among males; for example, the death rate for Black females ages 15 through 19 was 8.0 per 100,000 in 1998, while the rate for their male peers was almost 10 times greater (75.5 per 100,000). Among Whites ages 15 through 19, females experience firearm-related deaths at approximately one-sixth the rate of males.

Figure HC 3.2.A

Child and youth death rates in the United States, by age group: Selected years, 1960-1998



Source: Murphy, 1999. Center for Disease Control and Prevention, National Center for Health Statistics.

⁵⁹ Ikeda, R.M., Gorwitz, R., James, S.P., Powell, K.E., and Mercy, J.A. 1997. Fatal Firearm Injuries in the United States, 1962-1994. *Violence Surveillance Summary Series* (3). Atlanta: Centers for Disease Control and Prevention, National Center for Injury Prevention and Control.

⁶⁰ Data for 1997 are preliminary, based on a sample of 85 percent of all deaths.

Mortality

Table HC 3.2.A

Child and youth death rates (per 100,000 population in each age group) in the United States, by age group, gender, and race and Hispanic origin: 1989-1998

	Combined Years 1989-1991			Combined Years 1992-1993			Combined Years 1994-1996			1998		
	Total	Male	Female	Total	Male	Female	Total	Male	Female	Total	Male	Female
Ages 1-14												
All races	31.4	36.2	26.3	29.3	33.7	24.6	27.6	31.7	23.3	24.0	27.3	20.5
White ^a	28.4	32.8	23.8	26.1	30.3	21.7	24.5	28.3	20.6	21.5	24.4	18.5
Black ^a	48.3	56.1	40.3	47.1	53.4	40.7	44.7	51.2	38.0	38.1	44.6	31.4
Asian/Pacific Islander ^a	22.7	25.3	20.0	20.3	23.1	17.4	18.7	21.3	16.0	16.2	17.6	14.7
American Indian/ Alaska Native ^a	37.3	45.1	29.2	38.9	47.0	30.6	40.0	45.1	34.8	33.4	38.4	28.2
Hispanic ^b	30.2	34.7	25.5	28.4	32.4	24.2	25.6	29.6	21.4	21.5	24.4	18.4
Ages 15 to 24												
All races	99.1	146.1	50.0	97.0	144.0	47.9	94.3	139.0	47.5	82.3	119.3	43.5
White ^a	89.3	129.5	47.0	84.2	122.3	44.1	83.0	120.2	43.8	75.4	107.6	41.2
Black ^a	161.9	254.9	69.8	174.8	279.5	70.6	161.5	253.3	69.7	126.5	194.6	58.0
Asian/Pacific Islander ^a	50.1	70.8	28.1	56.1	80.1	31.1	55.6	79.0	31.9	44.4	59.9	28.8
American Indian/ Alaska Native ^a	142.0	208.3	71.1	129.4	184.2	71.4	127.2	188.5	63.6	115.6	166.4	64.1
Hispanic ^b	103.3	156.5	40.9	107.5	167.3	40.2	102.1	158.1	39.9	83.3	128.8	34.0

^a Includes persons of Hispanic origin.

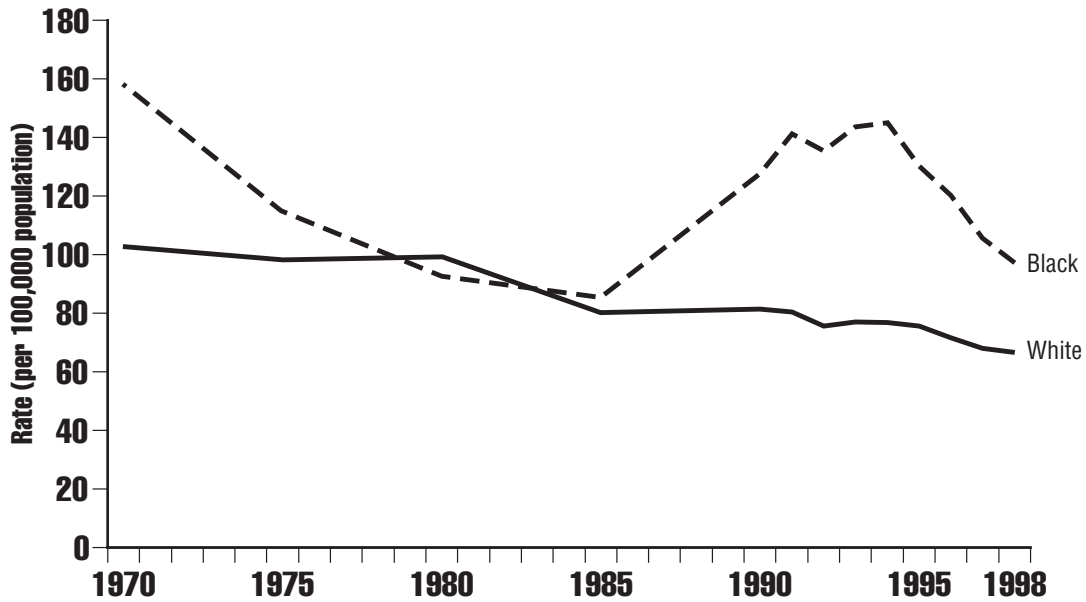
^b Persons of Hispanic origin may be of any race. Death figures for Hispanic persons are based on data from 44 states and the District of Columbia that reported Hispanic origin on the death certificate in 1989, 47 states and the District of Columbia in 1990, 48 states and the District of Columbia in 1991 and 1992, and 49 states and the District of Columbia in 1993-1996.

Note: Death rates reported for White and Black persons are based on highly consistent information. However, persons identified as American Indian, Asian, or Hispanic origin in the data from the Census Bureau (denominator of death rates) are sometimes misreported as White or non-Hispanic on the death certificate (numerator), resulting in underestimates of about 22 percent to 30 percent for death rates of American Indians, about 12 percent for death rates of Asians, and about 7 percent for persons of Hispanic origin. (National Center for Health Statistics, *Health, United States, 1993*, (Table 33); Sorlie, P.D., Rogot E., and Johnson, N.J. (1992). Validity of Demographic Characteristics on the Death Certificate. *Epidemiology*, 3(2):181-184.

Sources: Murphy, 1999, Data computed by the Division of Analysis from data compiled by the Division of Vital Statistics and from national population estimates for race groups. Also, data computed by Infant and Child Health Studies Branch, National Center for Health Statistics, from mortality data compiled by Division of Vital Statistics, Centers for Disease Control, National Center for Health Statistics, 1994, *Health*, (Table 32).

Figure HC 3.2.B

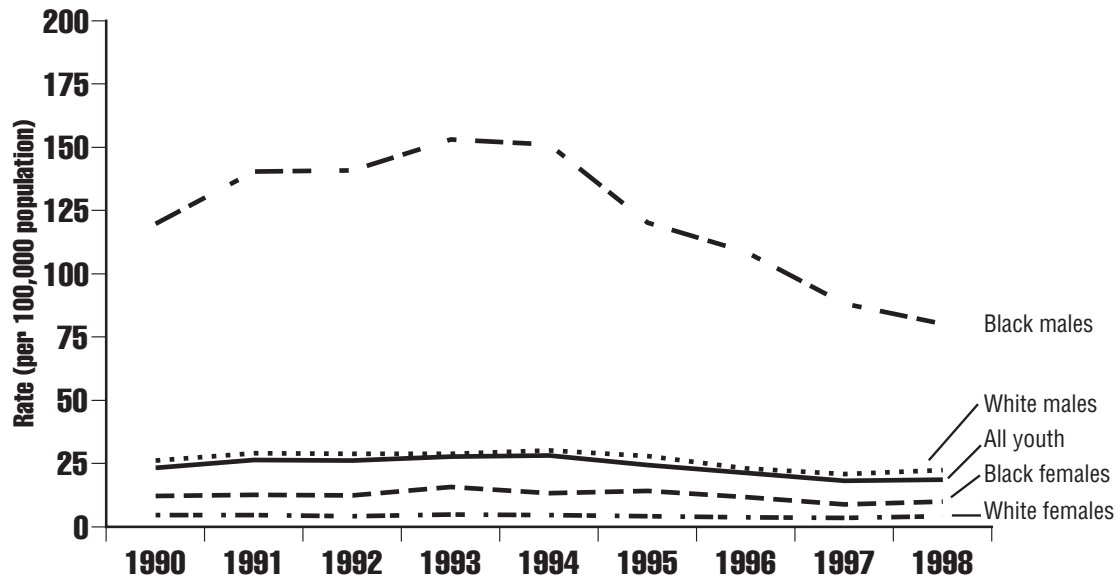
Youth death rates in the United States for ages 15 through 19, by race: Selected years, 1970-1998



Sources: Peters, Kochanek, and Murphy, 1998, 1996 *United States Deaths*; Anderson, Kochanek, and Murphy, 1997; Murphy, 1999, (Table 2).

Figure HC 3.2.C

Deaths due to injury by firearms for youth ages 15 through 19 in the United States, by gender and race^a: 1990-1998



^a Data for Whites and Blacks include Hispanics of those races.

Source: Centers for Disease Control and Prevention, National Center for Health Statistics, Mortality Statistics Branch, Division of Vital Statistics, 2000.

Mortality

Table HC 3.2.B

Youth deaths due to injury by firearms (rate per 100,000) in the United States, by age, gender, and race^a: Selected years, 1980-1998

	1980	1985	1990	1991	1992	1993	1994	1995	1996	1997	1998
All youth											
Ages 10-14	2.4	2.8	3.3	3.5	3.7	3.8	3.5	3.4	2.7	2.2	2.3
Ages 15-19	14.7	13.3	23.3	26.4	26.2	27.8	28.2	24.5	21.2	18.2	16.3
White males											
Ages 10-14	3.6	4.5	4.2	4.6	4.5	4.4	4.3	4.4	3.6	3.1	3.1
Ages 15-19	20.9	18.4	26.2	29.1	28.8	28.8	30.2	27.9	23.1	20.8	19.4
White females											
Ages 10-14	1.0	1.0	1.0	1.0	1.3	1.2	1.2	1.2	1.0	0.6	1.0
Ages 15-19	4.1	3.5	4.6	4.6	4.3	4.9	4.7	4.2	3.8	3.5	3.1
Black males											
Ages 10-14	4.7	4.8	10.2	11.5	11.6	13.4	11.2	10.1	7.8	6.2	4.6
Ages 15-19	46.7	46.5	119.7	140.5	140.9	153.1	151.1	120.3	108.7	88.2	75.5
Black females											
Ages 10-14	1.5	—	3.7	3.0	3.9	3.9	3.5	2.5	2.2	2.3	2.0
Ages 15-19	7.5	6.1	12.1	12.7	12.4	15.8	13.3	14.2	11.7	8.8	8.0

^a Data for Whites and Blacks include Hispanics of those races.

Sources: Centers for Disease Control and Prevention, National Center for Health Statistics, Mortality Statistics Branch, Division of Vital Statistics, 2000; Murphy, 1999.

HEALTH CONDITIONS AND HEALTH CARE

HC 3.3 Youth Motor Vehicle Crash Deaths

Youth ages 15 to 24 had the highest fatality and injury rates of any age group in 1998 due to motor vehicle crashes.⁶¹ Such crashes are among the major causes of injury-related deaths⁶² for 15- to 19-year-olds, accounting for 36 percent of injury deaths in 1996;⁶³ however, as a fraction of all violent deaths to teens, motor vehicle crashes have declined. Data for 1998 show that motor vehicle crashes claimed 26.4 lives per 100,000 youth ages 15 through 19, compared with 43.6 per 100,000 youth in 1970 (see Figure HC 3.3). The rate of motor vehicle crash deaths among youth has been relatively constant since 1992.

Differences by Gender and Race. For persons under age 20, the decrease in the rate of youth motor vehicle deaths between 1970 and 1998 has been greatest among White males ages 15 through 19, falling from 67.1 to 36.2 deaths per 100,000 and among Black males, which declined from 43.4 to 26.0 deaths per 100,000 (see Table HC 3.3). Similar decreases in the rates of motor vehicle crash deaths have not been seen among females ages 15 through 19. Among White females, ages 15 through 19, the rate of deaths due to motor vehicle crashes has fluctuated between 20 and 26 per 100,000; by 1998 it was 20.9 deaths per 100,000, compared with 24.4 deaths per 100,000 in 1970. Black females have had lower motor vehicle crash death rates than Whites. After a drop from 11.1 deaths per 100,000 in 1970 to 6.7 deaths per 100,000 in 1980, rates have generally increased for this group, to 8.5 deaths per 100,000 in 1998.

Differences by Age. Among youth ages 10 through 14, motor vehicle death rates are quite low in comparison to older youth and dropped from 9.6 to 5.4 per 100,000 between 1970 and 1998. This decline was evident for both White and Black males and females, with most of the decline occurring before 1990.

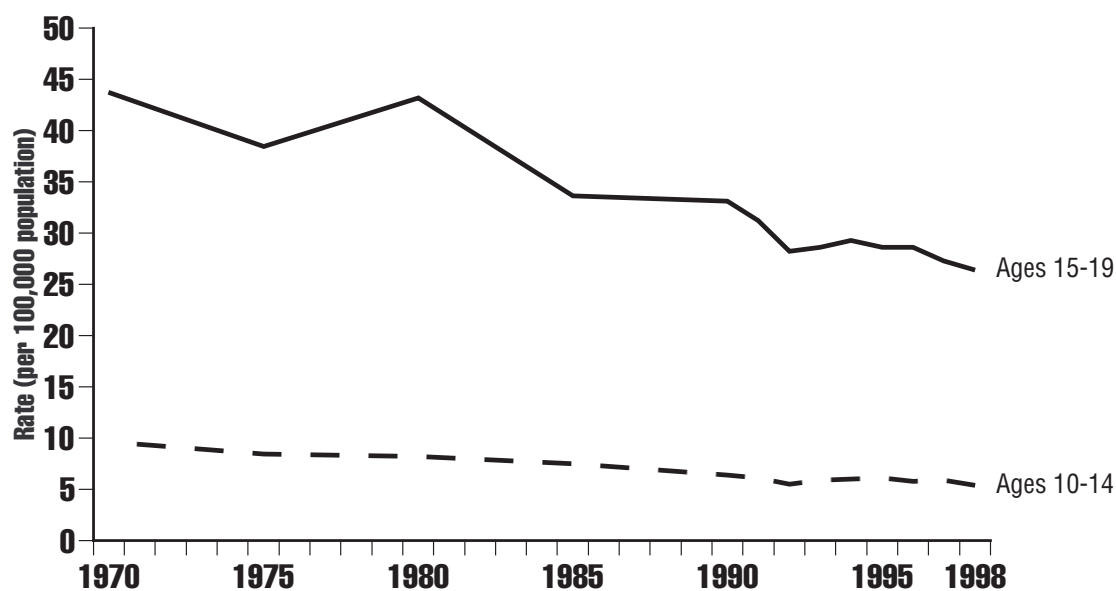
⁶¹ Murphy, S.L. 2000. *National Vital Statistics Reports*, 48(11).

⁶² Injury-related deaths include deaths from motor vehicle crashes, fires and burns, drowning, suffocation, and unintentional injuries caused by firearms and other explosive materials, as well as homicides, suicides, and other external causes of death.

⁶³ Peters, K.D., Kochanek, K.D., and Murphy, S.L. 1998. *National Vital Statistics Report*, 47(9), Table 2. National Center for Injury Control and Prevention, Centers for Disease Control. 1996 United States Deaths and Rates per 100,000: All Injury.

Figure HC 3.3

Youth motor vehicle crash deaths in the United States, by age: Selected years, 1970-1998



Source: Unpublished tabulations from the National Center for Health Statistics, Mortality Statistics Branch, Division of Vital Statistics.

Table HC 3.3

Youth motor vehicle crash deaths (rate per 100,000) in the United States, by age, gender, and race: Selected years, 1970-1998

	1970	1975	1980	1985	1990	1995	1996	1997	1998
All youth									
Ages 10-14	9.6	8.4	8.1	7.4	6.4	6.1	5.8	5.9	5.4
Ages 15-19	43.6	38.4	43.0	33.5	33.1	28.6	28.6	27.3	26.4
White males									
Ages 10-14	12.6	10.9	10.9	9.8	7.7	7.2	7.2	6.8	6.4
Ages 15-19	67.1	61.7	69.1	51.3	49.3	38.9	39.5	36.6	36.2
White females									
Ages 10-14	6.6	5.8	5.7	5.6	5.3	5.0	4.8	4.9	4.3
Ages 15-19	24.4	20.6	25.6	22.6	22.2	22.1	21.2	21.4	20.9
Black males									
Ages 10-14	11.9	9.6	7.9	8.9	7.9	7.7	6.8	7.4	7.8
Ages 15-19	43.4	24.6	24.4	22.1	28.7	29.0	28.2	28.7	26.0
Black females									
Ages 10-14	6.4	4.2	4.0	3.0	3.8	4.2	3.0	4.8	3.1
Ages 15-19	11.1	7.1	6.7	7.5	9.7	10.7	12.4	10.4	8.5

Source: Unpublished tabulations from the National Center for Health Statistics, Mortality Statistics Branch, Division of Vital Statistics.

HC 3.4 Youth Homicides

After more than a decade of sharp increases, the youth homicide rate decreased between 1993 and 1997. The rate of death from homicide for youth ages 15 through 19 more than doubled between 1970 and 1993, increasing from 8.1 to 20.7 per 100,000 (see Table HC 3.4.A). Virtually all of this increase occurred after 1985. Since 1993, rates have decreased steadily to 11.8 deaths per 100,000 in 1999. Firearms have been involved in the majority of youth homicides since 1980 (see Figure HC 3.4.B). Deaths to youth ages 15 through 19 involving firearms accounted for 66 percent of the total deaths due to homicide in 1980 (7.0 firearm deaths per 100,000 out of a total of 10.6 deaths per 100,000 due to homicide). The percentage of firearm-related homicides increased to 85 percent by 1997 for this same age group.

Differences by Gender and Race/Hispanic Origin. The trend in the death rate due to homicide for Black males largely dominates the rate of youth homicides for ages 15 through 19. Since 1990, the rate of death due to homicide for Black males has been about eight to nine times higher than for their White peers. While the homicide rate for White males of the same age group (15 through 19) is substantially less than that of Black males, similar fluctuations in this rate can be seen over time, with the largest increases occurring between 1985 and the early 1990s and decreases in recent years. Overall, this rate has almost doubled, going from 5.2 deaths per 100,000 in 1970 to 10.2 deaths per 100,000 in 1998 (see Table HC 3.4.A).

Homicides due to firearms are more likely among Black youth than among White youth and most particularly among Black males ages 15 through 19 (see Table HC 3.4.B). In 1997, 91 percent of homicides among older male Black youth (ages 15 through 19) involved a firearm, compared with 84 percent among older White male youth. The rate of death due to firearms among Black males ages 15 through 19 has decreased since 1993, serving as one explanation for the decline in the overall homicide rate among this group.

Homicide rates for females ages 15 through 19 are considerably lower than among similarly aged males within the same race groups (rates for Black females have actually been higher than rates for White males). For example, the rate for Black females was 10.6 per 100,000 in 1997, 87 percent lower than the rate for Black males. The gender disparity in homicide rates is also large for Whites, although it is not as great as that between Black males and females. In 1998, the homicide rate for White females ages 15 through 19 was 2.4 deaths per 100,000, just over a quarter of that for White males. As is the case for males, the youth homicide rate for Black females is higher than the rate for White females—nearly four times higher in 1998 (see Table HC 3.4.A). Homicides among female youth involve a firearm less often, although firearms are still the means of the majority of female homicides.

Differences by Age. The homicide rate for youth ages 10 through 14 was 1.5 per 100,000 in 1998—substantially lower than the rate for older youth (see Figure HC 3.4.A). The disparity between males and females is not as pronounced in this age group as the difference for older youth ages 15 through 19. However, the homicide rates for both White and Black males ages 10 through 14 have been approximately twice those of females in recent years.

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Table HC 3.4.A

Youth homicides^a (rate per 100,000) in the United States, by age, gender, and race:^b Selected years, 1970-1998

	1970	1975	1980	1985	1990	1991	1992	1993	1994	1995	1996	1997	1998
All youth													
Ages 10-14	1.2	1.2	1.4	1.5	2.1	2.2	2.4	2.5	2.2	2.1	1.8	1.5	1.5
Ages 15-19	8.1	9.6	10.6	8.6	17.0	19.6	19.3	20.7	20.3	18.2	15.7	13.7	11.8
White males													
Ages 10-14	0.6	1.0	1.1	1.4	1.7	1.8	2.0	1.9	1.8	2.0	1.5	1.4	1.3
Ages 15-19	5.2	8.1	10.9	7.2	12.5	14.4	15.2	15.2	15.4	14.7	12.2	11.1	10.2
White females													
Ages 10-14	0.6	0.8	1.1	0.9	0.9	0.9	1.0	1.2	0.9	1.0	0.9	0.6	1.0
Ages 15-19	2.1	3.2	3.9	2.7	3.6	3.6	3.6	3.6	3.4	3.9	2.9	2.9	2.4
Black males													
Ages 10-14	6.8	4.1	3.9	4.2	8.1	9.1	9.6	10.5	9.1	8.2	6.0	5.6	4.4
Ages 15-19	65.2	51.4	48.8	46.7	115.7	134.6	128.5	140.7	135.8	110.5	100.9	85.3	71.0
Black females													
Ages 10-14	2.3	2.3	2.4	1.7	4.8	3.8	5.1	5.2	4.6	3.0	3.1	2.3	2.6
Ages 15-19	10.6	15.3	11.0	10.4	15.6	15.6	14.2	18.4	15.1	16.4	12.9	10.6	9.8

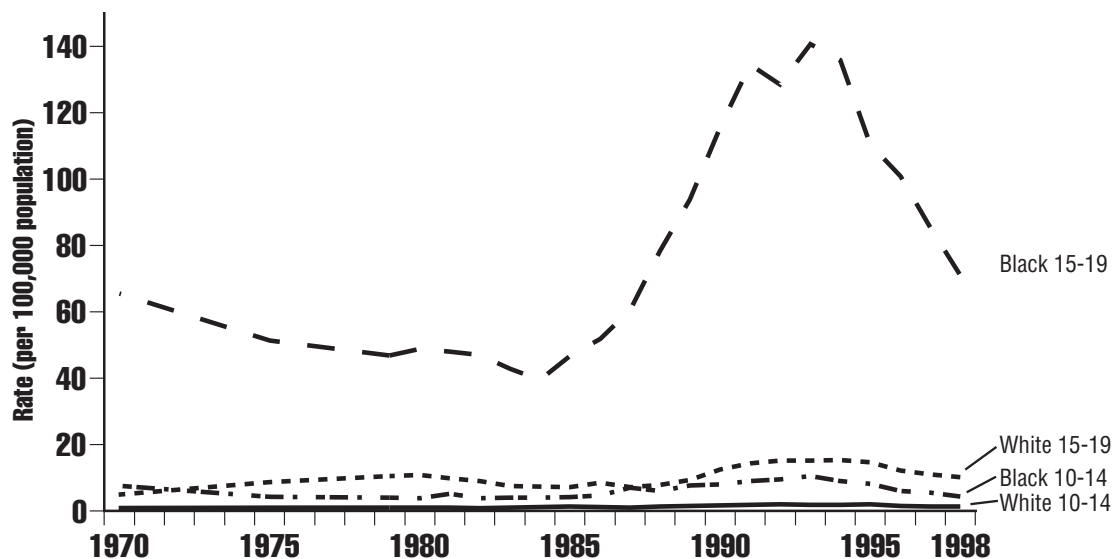
^a Homicide includes death by legal intervention.

^b Data for Blacks and Whites include Hispanics of those races.

Source: National Center for Health Statistics, (Table 291), p491-496, Mortality Statistics Branch, Division of Vital Statistics.

Figure HC 3.4.A

Youth homicides^a in the United States, by age and race:^b Selected years, 1970-1998



^a Homicide includes death by legal intervention.

^b Data for Blacks and Whites include Hispanics for those races.

Source: National Center for Health Statistics, (Table 291), p473-478, Mortality Statistics Branch, Division of Vital Statistics.

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Table HC 3.4.B

Youth homicides due to firearms^a (rate per 100,000) in the United States, by age, gender, and race:^b Selected years, 1980-1998

	1980	1985	1990	1991	1992	1993	1994	1995	1996	1997	1998
All youth											
Ages 10-14	0.8	0.8	1.5	1.6	1.9	1.9	1.7	1.6	1.3	1.0	1.0
Ages 15-19	7.0	5.7	13.8	16.4	16.7	17.8	17.7	15.4	13.2	10.9	9.7
White males											
Ages 10-14	0.7	0.9	1.3	1.4	1.6	1.5	1.5	1.6	1.2	1.1	1.0
Ages 15-19	7.2	4.9	9.4	11.7	12.9	12.6	12.9	12.3	10.0	8.3	8.0
White females											
Ages 10-14	0.5	0.4	0.4	0.5	0.6	0.6	0.5	0.5	0.5	0.3	0.5
Ages 15-19	1.7	1.2	2.0	2.1	2.3	2.2	2.4	2.2	1.7	1.5	1.3
Black males											
Ages 10-14	3.2	3.0	6.9	8.2	8.4	9.8	7.7	7.4	5.2	4.1	3.1
Ages 15-19	38.4	36.6	104.4	122.6	118.8	130.1	126.6	101.7	91.7	75.2	64.5
Black females											
Ages 10-14	1.0	0.6	3.2	2.7	3.4	3.3	3.3	2.0	1.8	1.5	1.6
Ages 15-19	6.2	5.0	10.4	11.2	10.5	14.3	11.1	12.3	9.9	7.2	6.7

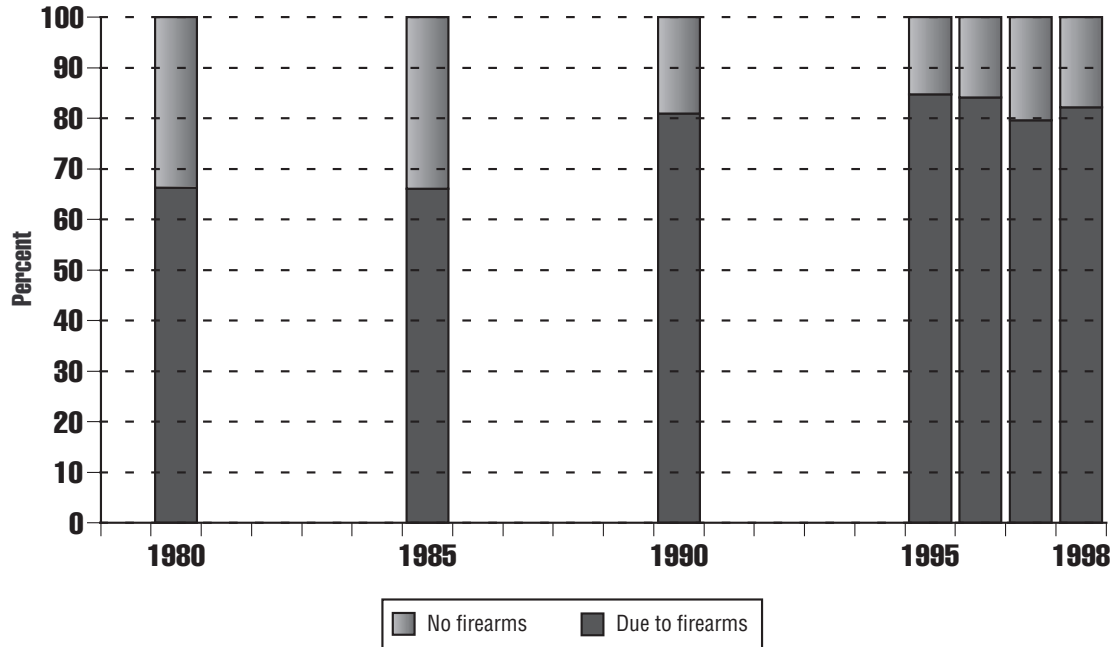
^a Includes assault by handguns and all other and unspecified firearms.

^b Data for Blacks and Whites include Hispanics for those races.

Sources: National Center for Health Statistics, (Table 291), p491-496, Mortality Statistics Branch, Division of Vital Statistics. Murphy, 1999.

Figure HC 3.4.B

Youth homicides^a due to firearms^b as a percent of all youth homicides in the United States, for youth ages 15 through 19: Selected years, 1980-1998



^a Homicide includes death by legal intervention.

^b Includes assault by handguns and all other and unspecified firearms.

Sources: National Center for Health Statistics, (Table 291), p491-496, Mortality Statistics Branch, Division of Vital Statistics; Murphy, 1999.

HC 3.5 Youth Suicides

Suicide, like homicide, has come to play a proportionately larger role in teen deaths over the past several decades. Between 1970 and 1990, the suicide rate for youth ages 15 through 19 nearly doubled, from 5.9 to 11.1 per 100,000 (see Figure HC 3.5). After remaining stable from 1990 to 1994 at approximately 11 deaths per 100,000 youth ages 15 through 19, the rate decreased slightly to 8.9 per 100,000 in 1998.

Differences by Gender. Male teens are more likely than females to commit suicide (see Table HC 3.5). The suicide rate for White males ages 15 through 19 was 15.3 per 100,000 in 1998, more than five times the rate of 3.0 per 100,000 for White females. Among Blacks, males had a rate almost six times that of females for youth ages 15 through 19 in 1998 (10.7 and 1.8 per 100,000, respectively). The data indicate that males die by suicide at more than four times the rate of females, but females attempt suicide more often and report higher rates of depression. The gender difference is most likely associated with suicide methods. Males are more likely to use firearms, which lead to a fatal outcome 78 to 90 percent of the time.

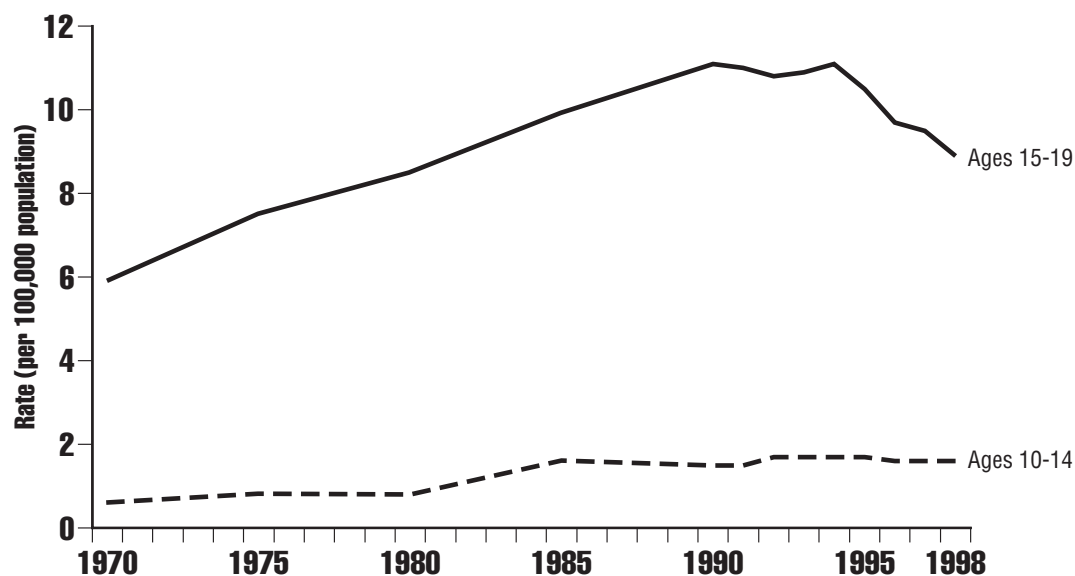
Differences by Race. White males ages 15 through 19 have long had a higher suicide rate than their Black male peers (see Table HC 3.5). In 1970, White males ages 15 through 19 were twice as likely as Black males to commit suicide (9.4 versus 4.7 per 100,000). However, the gap between White and Black male suicide rates has narrowed in recent years, with suicide rates of 15.3 and 10.7 per 100,000, respectively, according to 1998 White and Black males.⁶⁴ Among females ages 15 through 19, Whites and Blacks were equally likely to commit suicide in 1970, with rates of 2.9 per 100,000. By 1975, White female suicide rates were more than twice that of their Black peers ages 15 through 19. White female suicide rates have remained higher than Black female rates since 1975.

Differences by Age. While considerably lower, suicide rates for youth ages 10 through 14 have followed trends similar to those among older youth, with males having higher rates of suicide than females and Whites having higher suicide rates than Blacks (see Table HC 3.5). In this age group, suicide is infrequent for both sexes and races, making gender or racial differences small as well. Younger children may be less likely to complete suicide because they do not have the cognitive ability to plan and carry out a suicide attempt, but research also suggests that the increase in suicide rates with age may be due to the increased likelihood of exposure to critical risk factors, such as serious depression and drugs and alcohol.

⁶⁴ The race disparity in the suicide rate between all White youth ages 10 through 19 and all Black youth ages 10 through 19 narrowed substantially between 1980 and 1995, largely due to the increase of suicide among Black youth. In 1980, White youth (ages 10-19) had a suicide rate that was 157 percent greater than that of their Black peers; by 1995, the rate among Whites was 42 percent greater than the rate among Blacks. [These data, not shown here, can be found in Centers for Disease Control and Prevention. March 20, 1998. Suicide among Black Youths—United States, 1980-1995. *Morbidity and Mortality Weekly Report* 47 (10).]

Figure HC 3.5

Youth suicides (rate per 100,000) in the United States, by age: Selected years, 1970-1998



Source: National Center for Health Statistics, (Table 291), p485-490, Mortality Statistics Branch, Division of Vital Statistics.

Table HC 3.5Youth suicides (rate per 100,000) in the United States, by age, gender, and race^a: Selected years, 1970-1998

	1970	1975	1980	1985	1990	1991	1992	1993	1994	1995	1996	1997	1998
All youth													
Ages 10-14	0.6	0.8	0.8	1.6	1.5	1.5	1.7	1.7	1.7	1.7	1.6	1.6	1.6
Ages 15-19	5.9	7.5	8.5	9.9	11.1	11.0	10.8	10.9	11.1	10.5	9.7	9.5	8.9
White males													
Ages 10-14	1.1	1.4	1.4	2.5	2.3	2.4	2.6	2.4	2.5	2.8	2.3	2.5	2.6
Ages 15-19	9.4	12.9	15.0	17.1	19.3	19.1	18.4	18.5	18.7	18.4	16.3	16.0	15.3
White females													
Ages 10-14	0.3	0.4	0.3	0.9	0.9	0.8	1.1	1.0	1.0	0.9	0.9	0.8	0.9
Ages 15-19	2.9	3.1	3.3	4.1	4.0	4.2	3.7	4.2	3.5	3.3	3.8	3.5	3.0
Black males													
Ages 10-14	0.3	0.2	0.5	—	1.6	2.0	2.0	2.3	2.1	1.6	1.9	1.9	1.4
Ages 15-19	4.7	6.1	5.6	8.2	11.5	12.2	14.8	14.4	16.6	13.8	11.5	11.4	10.7
Black females													
Ages 10-14	0.4	0.3	0.1	—	—	—	—	—	—	—	—	—	—
Ages 15-19	2.9	1.5	1.6	1.5	1.9	—	1.9	—	2.4	2.3	1.8	2.7	1.8

— = Not calculated because of unreliability due to infrequency of the event.

^a Data for Blacks and Whites include Hispanics of those races.

Source: Centers for Disease Control and Prevention, National Center for Health Statistics, Mortality Statistics Branch, Division of Vital Statistics, 2000; Murphy, 1999.

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