**ADOLESCENT MORTALITY**

The lives of 290 of the 367,722 resident adolescents (15-19 year olds) prematurely ended in 2000, resulting in a total mortality rate of 78.9 deaths per 100,000 adolescents. This mortality rate was 3.1 percent lower than the 1999 rate of 81.4/100,000 and was the lowest rate of the eleven-year period from 1990 to 2000 (Table 2C-12).

**Leading causes of death**

*Accidents (unintentional injuries), homicides* and *suicides* continued to be the three causes with the greatest number of deaths in 2000 (Table 2C-15). Five out of every ten (45.5 percent) deaths among adolescents in 2000 were from *unintentional injuries in accidents*. Another three out of ten (32.4 percent) adolescents who died in 2000 were either murdered or committed suicide. The death rate for *suicide* slightly increased from 10.6/100,000 in 1999 to 11.1/100,000 in 2000. The latter was the second lowest suicide death rate for Arizona adolescents 15-19 years old in two decades. The homicide death rate declined for the 5th consecutive year from 33.4/100,000 in 1995 to 14.4 in 2000.

**Gender differences**

The suicide death rate for adolescent females declined by 65 percent from its most recent peak of 8.0/100,000 in 1997 to 2.8/100,000 in 2000 (Figure 2C-7, Table 2C-12). The suicide death rate for adolescent males increased by 9.3 percent from 17.3/100,000 in 1999 to 18.9/100,000 in 2000. Male adolescents were 6.8 times more likely to kill themselves in 2000 than female adolescents. Moreover, male compared to female adolescents had a 4 times higher mortality risk from homicide in 2000 (22.6/100,000 and 5.6/100,000 respectively). The 2000 male adolescent homicide death rate exceeded four of the five cause-specific death rates for female adolescents.

**Urban/rural differences**

Rural adolescents had a substantially greater improvement in their survival chances from 1990 to 2000 than did urban adolescents (23.3 and 7.4 percent respectively; Table 2C-13). In 1990 the mortality differential of rural compared to urban adolescents was 1.5:1 and in 2000 it has decreased to 1.3:1.

Despite the improvement, rural compared to urban adolescents had a 2.4 times greater likelihood to be the victim of a fatal motor vehicle crash in 2000. In contrast, the homicide death rate of urban adolescents (16.0/100,000) was 2.1 times greater than the suicide death rate among their rural peers (7.5/100,000). The suicide rate of rural adolescents declined sharply from 16.8/100,000 in 1999 to 6.0/100,000 in 2000, the latter being the lowest rural suicide death rate in two decades.

Using urban female adolescents, the most advantaged subgroup, as the base, in 2000 for every death per 100,000 urban females there were 1.9 deaths per 100,000 rural female adolescents, 3.0 deaths per 100,000 urban male adolescents and 3.4 deaths per 100,000 rural male adolescents.