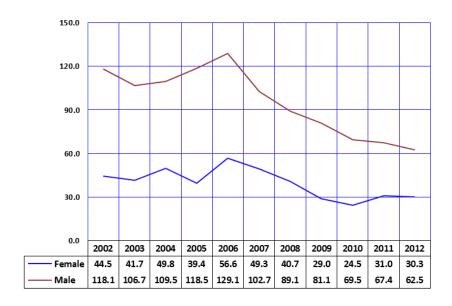
Figure 2C-9 Mortality Rates^a by Gender and Year among Adolescents 15-19 Years, Arizona, 2002-2012

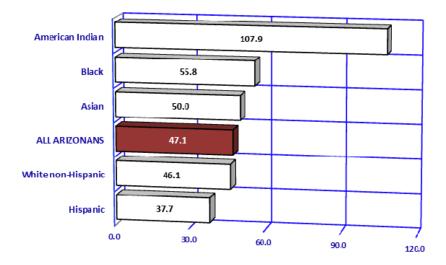


Adolescence refers to those individuals between the ages of 15 and 19, an important developmental period marking the transition from childhood to adulthood. In 2012, an estimated 467,382 adolescents resided in Arizona, comprising 7.2 percent of the State's population (Table 10A-1). The lives of 220 resident adolescents prematurely ended in 2012, resulting in a total mortality rate of 47.1 deaths per 100,000 adolescents. This mortality rate was 45.6 percent lower than the 2002 rate (Table 2C-11).

The likelihood of dying was 2.1 times as high for adolescent boys as girls in 2012 (**Figure 2C-9**, **Table 2C-11**).

Notes: $^{\rm a}$ Number of deaths per 100,000 persons, 15 - 19 years old in specified group.

Figure 2C-10
Mortality Rates^a by Race/Ethnicity among Adolescents 15-19 Years,
Arizona, 2012



Notes: ^a Number of deaths per 100,000 persons, 15 - 19 years old in specified group.

The five causes with the greatest number of deaths over the 2002-2012 period were unintentional injuries in accidents, suicide, homicide malignant neoplasms, and diseases of heart (Table 2C-11).

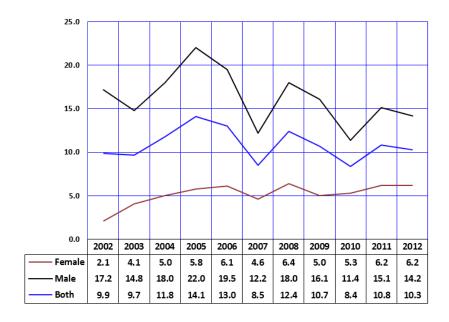
From best to worst chances in 2012 of adolescents in survival was Hispanic, White non-Hispanic, Asian, Black, and American Indian (Figure 2C-10). If the 2012 mortality risk of Hispanic adolescents (i.e., their mortality rate) applied to all adolescents, only 176 would have died: 44 less than the 220 who actually did.

The number of deaths from accidental drug poisoning declined from 39 in 2009 and 25 in 2011 to 18 in 2012. The number of deaths from motor vehicle-related injuries increased from 50 in 2009 and 58 in 2011 to 74 in 2012.

Overall, the number of suicides among Arizonans age 15-19 years remained relatively stable from 2011 (n = 50) to 2012 (n = 48; **Table 2C-14**). In 2012, as in prior years, male adolescents accounted for the absolute majority (70.1 percent) of completed suicides.

Compared to 2010, the suicide rate slightly increased in 2011 and 2012 for both males and female adolescents (Figure 2C-11, Table 2C-11). The suicide death rate for adolescent males increased from 11.4 suicides per 100,000 in 2011 to 15.1/100,000 in 2012. The male to female ratio suicide mortality rates decreased from 8.2:1 in 2002 to 2.3:1 in 2012. In other words, male adolescents were 2.3 times more likely to kill themselves in 2012 than female adolescents, compared to 8.2 times more likely in 2002.

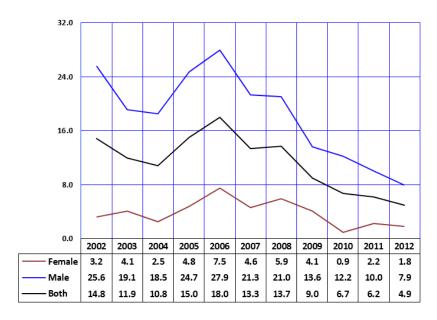
Figure 2C-11 Suicide Rates^a by Gender and Year among Adolescents 15-19 Years, Arizona, 2002-2012



Notes: $^{\rm a}$ Number of suicide deaths per 100,000 persons, 15 - 19 years old in specified group.

From 2004 to 2006, the homicide rates increased for hoth adolescent males and females (Figure 2C-12, Table 2C-11). From 2008 to 2012, the homicide rate decreased by 62.4 percent for adolescent males, and by 69.5 percent for adolescent females. Overall, the homicide rate decreased by 64.2 percent from 13.7/100,000 in 2008 to 4.9/100,000 in 2012. The male mortality risk due to homicide was 4.4 times greater than the female mortality risk in 2012.

Figure 2C-12 Homicide Rates^a by Gender and Year among Adolescents 15-19 Years, Arizona, 2002-2012



Notes: ^a Number of homicide deaths per 100,000 persons, 15 - 19 years old in specified group.