Adolescents refer to those individuals between the ages of 15 to 19, an important developmental period marking the transition from childhood to adulthood. In 2006, an estimated 439,190 adolescents resided in Arizona (Table 10C-1), comprising 7 percent of the State’s population. The lives of 412 resident adolescents prematurely ended in 2006, resulting in a total mortality rate of 93.8 deaths per 100,000 adolescents. This mortality rate was 18.2 percent lower than the 1996 rate, but exceeded the 2005 rate by 17.1 percent (Table 2C-12).

The likelihood of dying was 2.3 times as high for adolescent boys than girls in 2006 (Figure 2C-9, Table 2C-12).

From best to worst survival chances of adolescents 15-19 years old, the 2006 rank-order was Asian, White non-Hispanic, Hispanic, Black and American Indian (Figure 2C-10). If the 2006 mortality risk of Asian adolescents (i.e., their mortality rate) applied to all adolescents, 128 would have died: 284 less than the 412 who actually did.
In 2006, as in 1996, suicide was the 3rd leading cause of death among Arizona adolescents. The suicide death rate for adolescent females almost tripled from 2.1/100,000 in 2002 to 6.1/100,000 in 2006 (Figure 2C-11, Table 2C-12). Following an increase from 2003 to 2005, the suicide death rate for adolescent males decreased from 22 suicides per 100,000 in 2005 to 19.5/100,000 in 2006. The male to female ratio in suicide mortality rates decreased from 8.9:1 in 1996 to 3.2:1 in 2006. In other words, male adolescents were 3.2 times more likely to kill themselves in 2006 than female adolescents, compared to 8.9 times more likely in 1996.

Both in 1996 and 2006, homicide was the 2nd leading cause of death of 15 to 19 year olds. From 2004 to 2006, the homicide rates increased for both adolescent males and females (Figure 2C-12, Table 2C-12). The homicide rate increased by 50.8 percent for male adolescents from 18.5 homicides per 100,000 in 2004 to 27.9/100,000 in 2006. The homicide rate tripled among adolescent females increasing by 200 percent from 2.5 homicides per 100,000 in 2004 to 7.5/100,000 in 2006. The male to female mortality risk for homicide decreased from 9.6 times greater in 1996 to 3.7 times greater in 2006.