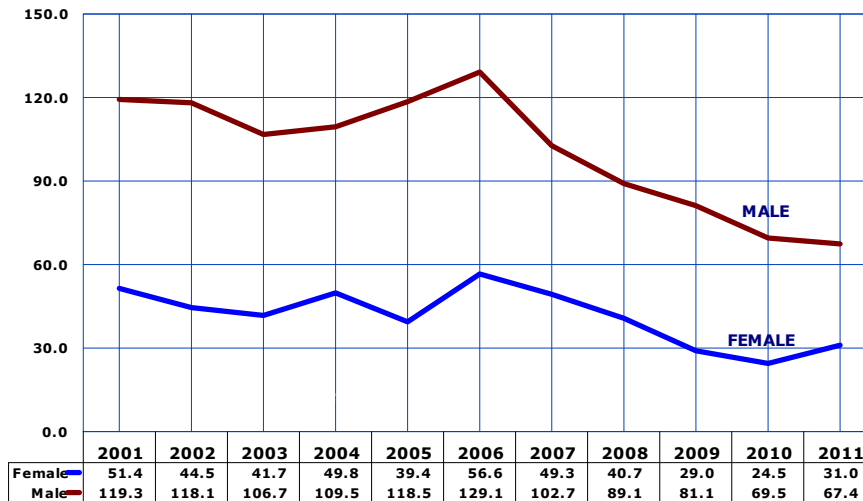


2C.AGE-SPECIFIC MORTALITY
Adolescent mortality (ages 15-19 years)

Figure 2C-9
Mortality Rates by Gender and Year among Adolescents 15-19 Years,
Arizona, 2001-2011

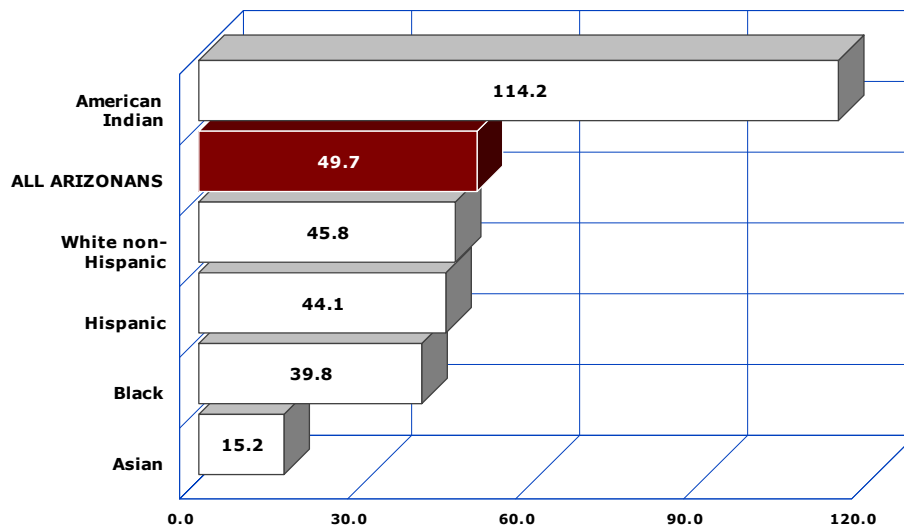


Adolescence refers to those individuals between the ages of 15 and 19, an important developmental period marking the transition from childhood to adulthood. In 2011, an estimated 464,724 adolescents resided in Arizona, comprising 7.2 percent of the State's population (Table 10A-1). The lives of 231 resident adolescents prematurely ended in 2011, resulting in a total mortality rate of 49.7 deaths per 100,000 adolescents. This mortality rate was 42.6 percent lower than the 2001 rate (Table 2C-11).

The likelihood of dying was 2.2 times as high for adolescent boys as girls in 2011 (Figure 2C-9, Table 2C-11).

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

Figure 2C-10
Mortality Rates by Race/Ethnicity among Adolescents 15-19 Years,
Arizona, 2011



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 2001-2011 period were *unintentional injuries in accidents, suicide, homicide, malignant neoplasms, and diseases of heart* (Table 2C-11).

From best to worst chances in 2011 of adolescents in survival was Asian, Black, Hispanic or Latino, White non-Hispanic, and American Indian (Figure 2C-10). If the 2011 mortality risk of Asian adolescents (i.e., their mortality rate) applied to all adolescents, only 71 would have died: 160 less than the 231 who actually did.

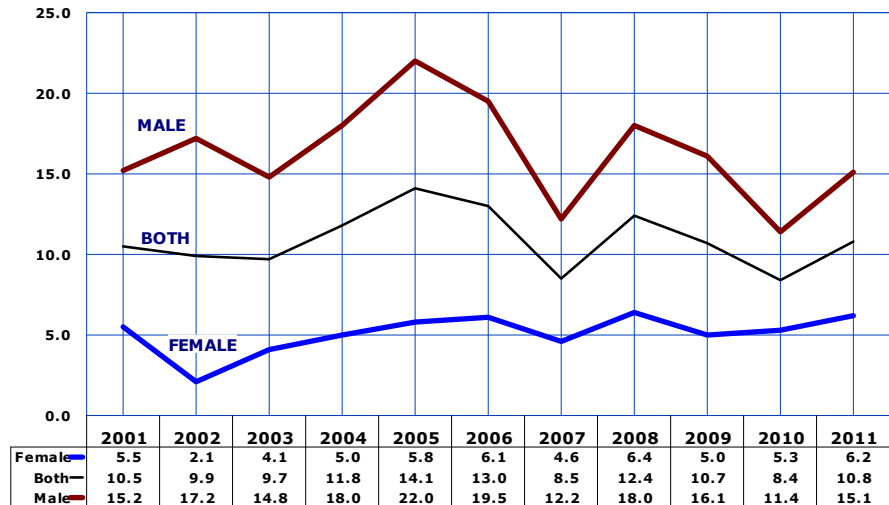
The number of deaths from accidental drug poisoning declined from 39 in 2009 to 25 in 2011. The number of deaths from motor vehicle-related injuries increased from 50 in 2009 and 58 in 2011.

2C.AGE-SPECIFIC MORTALITY
Adolescent mortality (ages 15-19 years)

Overall, the number of suicides among Arizonans age 15-19 years increased from 39 in 2010 to 50 in 2011. (Table 2C-14). In 2011, as in prior years, male adolescents accounted for the absolute majority (72.0 percent) of completed suicides

Compared to 2009, the suicide rate slightly increased in both 2010 and 2011 for adolescent females (Figure 2C-11, Table 2C-11). The suicide death rate for adolescent males decreased from 18.0 suicides per 100,000 in 2008 to 16.1/100,000 in 2009 and 11.4/100,000 in 2010, but again rose to 15.1/100,000 in 2011. The male to female ratio in suicide mortality rates decreased from 2.8:1 in 2001 to 2.4:1 in 2011. In other words, male adolescents were 2.4 times more likely to kill themselves in 2011 than female adolescents, compared to 2.8 times more likely in 2001.

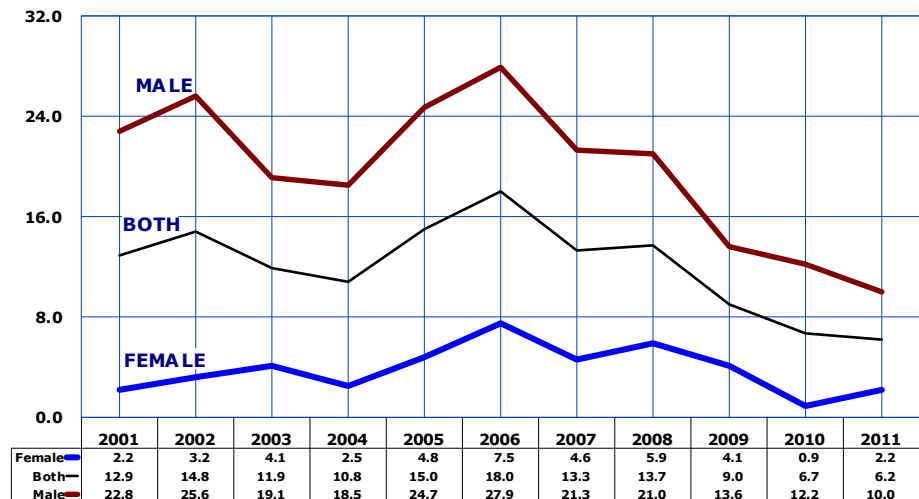
Figure 2C-11
Suicide Rates by Gender and Year among Adolescents 15-19 Years, Arizona, 2001-2011



Number of suicides per 100,000 persons, 15-19 years old in specified group.

From 2004 to 2006, the homicide rates increased for both adolescent males and females (Figure 2C-12, Table 2C-11). From 2008 to 2011, the homicide rate decreased by 52.4 percent for adolescent males, and by 62.7 percent for adolescent females. Overall, the homicide rate decreased by 54.7 percent from 13.7/100,000 in 2008 to 6.2/100,000 in 2011. The male mortality risk was 4.5 times greater than the female mortality risk in 2011.

Figure 2C-12
Homicide Rates by Gender and Year among Adolescents 15-19 Years, Arizona, 2001-2011



Number of homicides per 100,000 persons, 15-19 years old in specified group.