**2007 Fact Sheet on Violence: Adolescents & Young Adults**

**Highlights:**
- Homicide is the second leading cause of death for adolescents and young adults.
- Male adolescents and young adults have higher homicide rates than females.
- Homicide is the leading cause of death for adolescent and young adult Black males.
- The homicide rates for adolescent and young adult males have fallen sharply in the past decade.
- Male adolescents engage in violent behavior more than their female peers.

In 2004, 5,292 adolescents and young adults ages 10-24 were victims of homicide, resulting in a homicide rate of 8.4 per 100,000. Homicide accounted for 14.2% of all deaths for adolescents and young adults, making it the second leading cause of death for this age group after motor vehicle accidents.¹
Young males have a higher homicide mortality rate than females. The gender gap increases with age: for early adolescents ages 10-14, males are 1.9 times more likely to die from homicide than same-age females; this difference jumps to 6.4 for young adults ages 20-24. This is a long-standing trend: from 1981 to 2004, 82% of all homicide victims aged 10 to 24 were male. Homicide rates peak in young adulthood and then decrease throughout the lifespan.\(^1\)

Homicide is the leading cause of death for adolescent and young adult Black males.

Among adolescents and young adults ages 10-24, Black, non Hispanic males are the most likely to die from homicide. Homicide accounts for 44.5% of all deaths among Black-NH* males. In 2004, the homicide rate for Black-NH males was 2.7 to 15.8 times that of same-age males in other racial/ethnic groups. Among females, White-NHs and Asian/Pacific Islander-NHs are least likely to die from homicide.\(^1\)

The homicide rates for adolescent and young adult males have fallen sharply in the past decade.

By 1999, homicide rates for adolescent and young adult males ages 10-24 significantly decreased from peak levels in the early 1990s. The decline in homicide has been greatest for Black-NH and Hispanic males, with 1999 rates half that of the 1993 rates. Since 1999, male homicide rates have remained relatively stable. Rates for all same-age females have decreased overall during the same period.\(^1\)

*These abbreviations apply to all figures and text throughout the fact sheet:

NH(s)=non Hispanic(s) \hspace{1cm} AI/AN=American Indian/Alaskan Native \hspace{1cm} A/PI=Asian/Pacific Islander
Firearm use accounts for the majority of homicides among young people.

Most homicide mortality among adolescents and young adults are caused by firearms. Other causes of homicide include cutting/piercing, suffocation, and fires/burning. The rate of firearm-related homicide peaks in young adulthood (ages 18-24) and decreases significantly throughout the life-span. This is a longstanding trend: firearm-related homicides have been highest among young adults since 1981.¹

Non-fatal violent crimes have decreased markedly in the past decade.

Violent crime rates decreased by more than one half between 1994 and 2004 for ages 12-24. Non-fatal violent crimes are much more common than homicide: in 2004, young people were victims of simple assault 321 times more than homicide.¹²³ Violent crimes are largely an issue of youth: victimization rates peak at ages 12-24 and offenders in this age group are most likely to target other young people.²

Male adolescents engage in violent behavior more than their female peers.

Violent behavior is experienced more by male adolescents than their female peers. Males are much more likely to have been in a physical fight and be threatened/injured with a weapon. In addition, adolescent males are also more likely to carry a weapon (29.8%) than females (7.1%). By contrast, male and female students are almost equally likely to report dating violence³⁴.
Data and Figure Sources & Other Notes:


Violent crimes include aggravated assault (attack with a weapon that may result in injury or attack without a weapon resulting in serious injury), simple assault (attack without a weapon that may result in minor or no injury), robbery (theft by force, with or without a weapon, that may result in injury) and rape/sexual assault (forced sexual intercourse or other attacks of unwanted sexual contact and verbal threats).3,4

“Carried a weapon” refers to the percentage of students who carried a weapon such as a gun, knife or club on one or more of the past 30 days.4

“Dating violence” refers to the percentage of students who were hit, slapped or physically hurt on purpose by their boyfriend or girlfriend during the past year.4

In all cases, the most recent available data were used. Some data are released 1-3 years after collection. In some cases, trend data with demographic break-downs (e.g., racial/ethnic) are relatively limited. The category names presented are those of the data sources used (e.g., racial/ethnic and accidents/crashes data). Every attempt was made to standardize age ranges; when this was not possible, age ranges are those of the data sources used. For any questions regarding data presented, please contact NAHIC.

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Background on NAHIC
The National Adolescent Health Information Center (NAHIC) was established with funding from the Maternal and Child Health Bureau in 1993 (U45MC 00002) to serve as a national resource for adolescent health research and information and to assure the integration, synthesis, coordination and dissemination of adolescent health-related information.

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