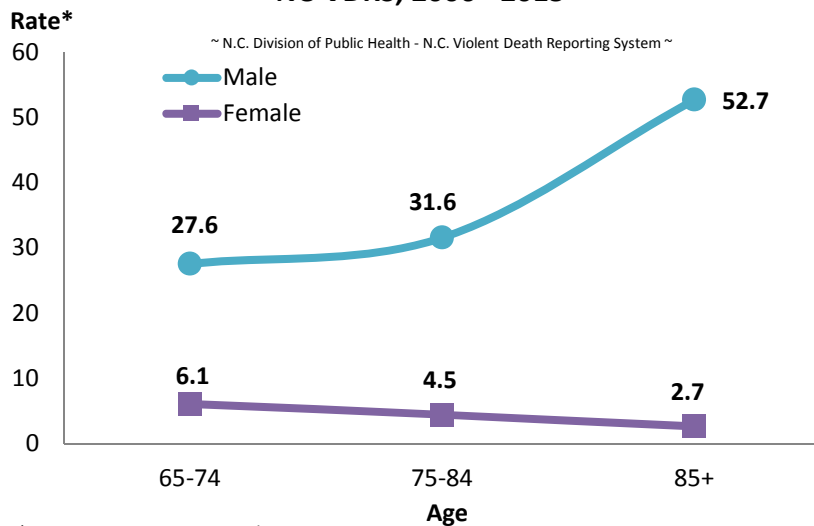


ELDER SUICIDE IN NORTH CAROLINA, 2006 - 2015

The North Carolina Violent Death Reporting System (NC-VDRS) is a CDC-funded statewide surveillance system that collects detailed information on deaths that occur in North Carolina resulting from violence: homicide, suicide, unintentional firearm deaths, legal intervention and deaths for which intent could not be determined. NC-VDRS is a multi-source system that gathers information from death certificates, medical examiner reports and law enforcement reports. The goal of this system is to aid researchers, legislators, and community interest groups in the development of public health prevention strategies to reduce violent deaths. NC-VDRS began collecting data in January 2004. This document summarizes deaths among North Carolina residents ages 65 and older completing suicide for the years 2006 - 2015.

**Elder Specific Suicide Rates* by Age Groups:
NC-VDRS, 2006 - 2015**



*Rate per 100,000 NC population

- From 2006 to 2015, 1,362 North Carolina residents ages 65 and older died as a result of violence. Of these violent deaths, 1,140 were suicide (83.7%).

- The elder suicide rate was 16.3 suicides per 100,000.

- Eighty-two percent of elder suicides were among males.

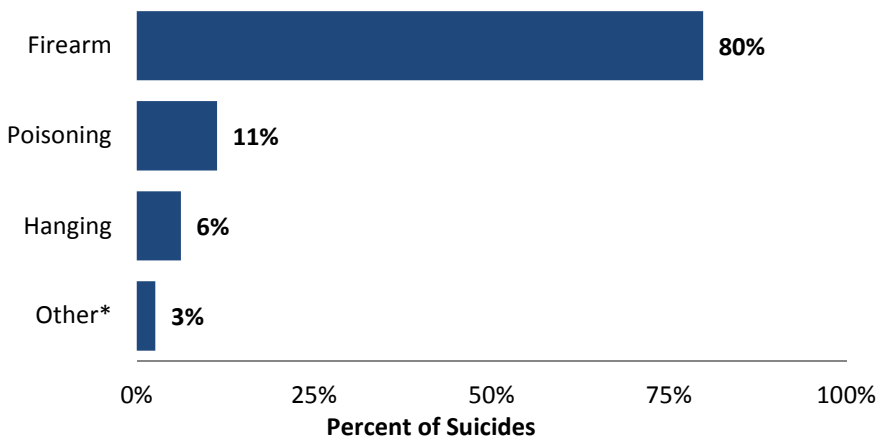
- The suicide rate peaked among males 85 and older, and the suicide rate was consistently higher for males compared to females for all age groups.

- Among females, the suicide rate peaked among those ages 65-74.

- Ninety-four percent of elder suicide victims were identified as non-Hispanic (NH) white. The remaining six percent were identified as NH black, NH Asian, NH American Indian, or Hispanic.

Elder Suicide Method of Death: NC-VDRS, 2006 - 2015

~ N.C. Division of Public Health - N.C. Violent Death Reporting System ~



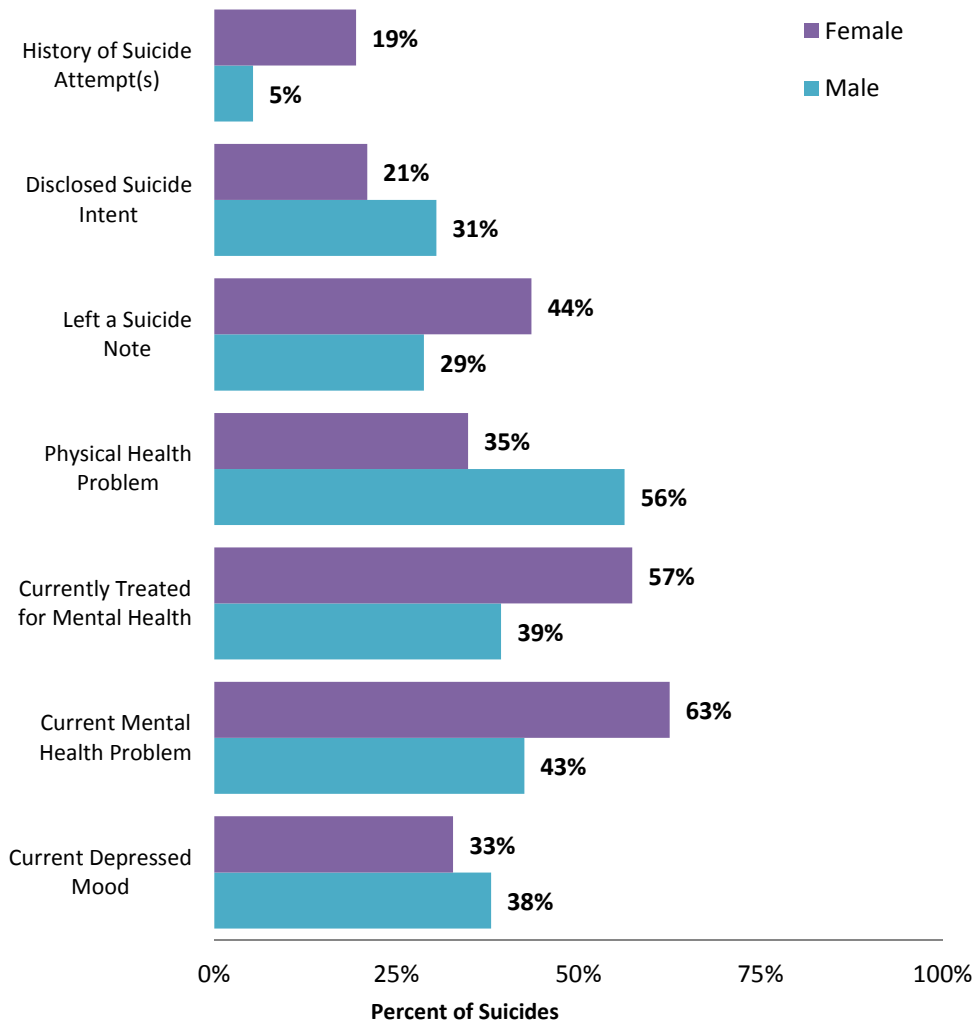
- Overall, the most common method of suicide among elder suicide victims was firearms (79.8%), followed by poisoning (11.3%) and hanging/strangulation/suffocation (6.2%).

- Three percent of suicides were completed using a method other than firearms, poisoning or hanging.

*Other methods include: sharp instrument, fire/burns, motor vehicle and other.

Elder Suicide Circumstances*: NC-VDRS, 2006 - 2015

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- Nearly half (38.0%) of elder male suicide victims with circumstance information were characterized as having a current depressed mood at the time of death compared to 32.8 percent of females.

- Sixty-three percent of elder female and 0.4 percent of elder male suicide victims had a current mental health problem when they completed suicide.

- Twenty percent of elder females had a history of prior suicide attempts, whereas only 5.4 percent of elder males had a history of prior suicide attempts.

- Fifty-six percent of males and 34.9 percent of females had a physical health problem.

*Circumstances are known for 94% males (n=878) and 96% females (n=195).

More information on suicide prevention efforts can be found at:

State Resource Partners

**N.C. Division of Mental Health,
Developmental Disabilities and Substance Abuse Services**
www.ncdhhs.gov/mhddsas
North Carolina Office of the Chief Medical Examiner
www.ocme.dhhs.nc.gov
The Triangle Coalition for Suicide Prevention
Contact: Phil Morse
www.trianglesuicideprevention.org
North Carolina Mental Health and Aging Coalition
www.med.unc.edu/aging/cgec/nc-mental-health-and-aging%20

National Resources

The Suicide Prevention Resource Center
www.sprc.org
The American Foundation for Suicide Prevention
www.afsp.org
The National Suicide Prevention Lifeline
(for suicide crisis calls)
1-800-273-8255

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N.C. Division of Public Health / www.publichealth.nc.gov / Injury Epidemiology & Surveillance Unit/ 919-707-5425
N.C. Violent Death Reporting System / 919-707-5432
State of North Carolina / Department of Health and Human Services / www.ncdhhs.gov
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Please see the NC-VDRS 2014 Annual Report for additional data and technical information.