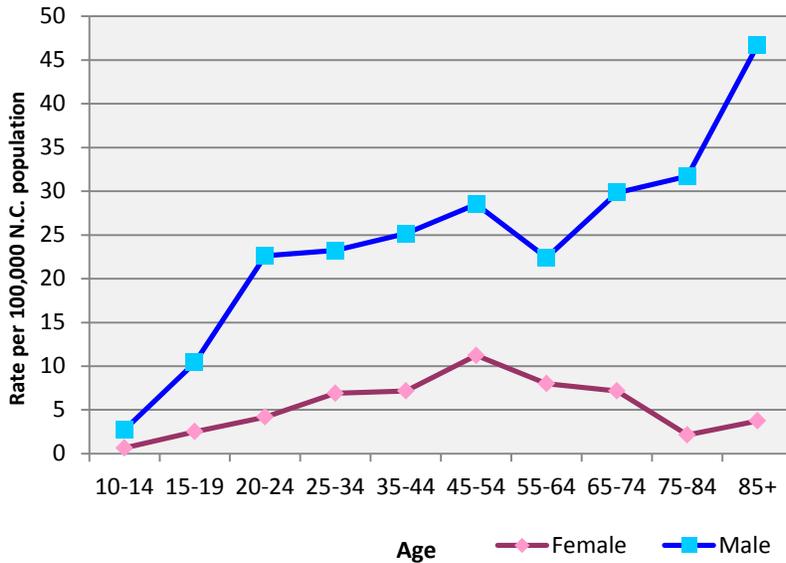


SUICIDE IN NORTH CAROLINA

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 caused by suicide for the year 2011.

Gender-Specific Suicide Rates by Age: NC-VDRS, 2011

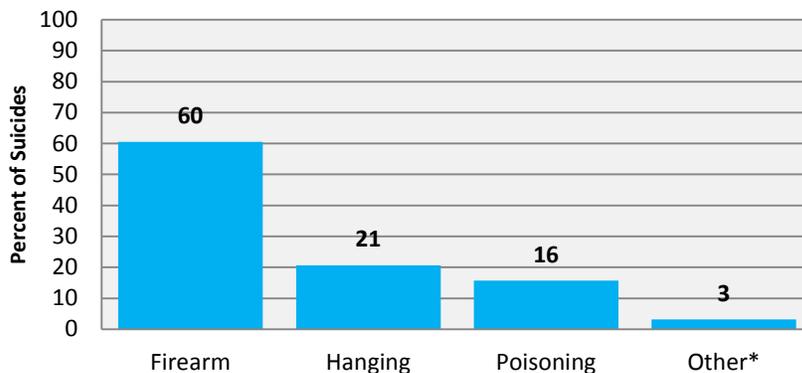


- Of the 1,819 violent deaths in North Carolina, 1,202 were suicides (66%).
- Males consistently had a higher suicide rate than females, regardless of age. The suicide rate peaked for men 85 years and older at a rate of 46.7 per 100,000.
- Among females, the suicide rate peaked for ages 45-54 at 11.2 per 100,000 and steadily declined thereafter.

- Nearly 90 percent of all suicide victims were identified as white. White males in particular had higher suicide rates than members of other racial groups (26.6 per 100,000).
- The majority of suicides (60%) were completed using firearms.



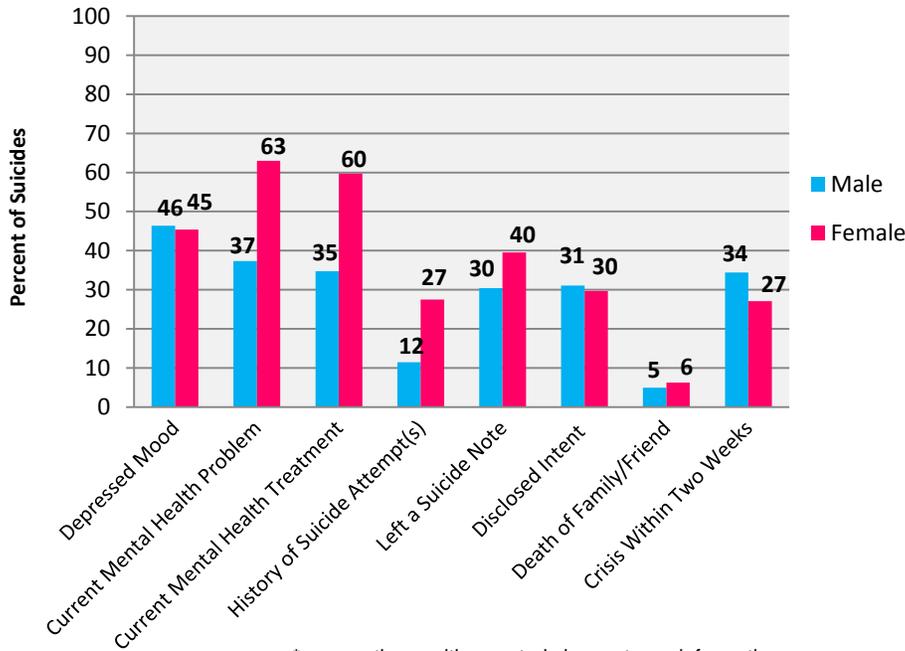
Method of Death: NC-VDRS, 2011



- After firearms, hanging (21%) and poisoning (16%) are the second and third leading causes of suicide, respectively.
- Less than three percent of suicides were completed using a method other than firearms, hanging or poisoning.

*Other includes falls, motor vehicle, sharp instrument, drowning, fire/burns, unknown

Suicide Circumstances*: NC-VDRS, 2011



* among those with reported circumstance information

- Forty-six percent of male suicide victims and 45 percent of female victims with circumstance information were characterized as being depressed.
- Sixty-three percent of females and 37 percent of males were characterized as having a current mental health problem.
- A similar trend was seen in mental health treatment. Sixty percent of females and 35 percent of males were being treated for a mental health problem at the time of death.
- Males (34%) were more likely to have experienced a crisis within two weeks of death compared with females (27%).
- Thirty-one percent of all suicide decedents had disclosed their suicidal intention to someone else.
- Females (27%) were more likely to have a history of prior suicide attempts than males (12%).

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

Contact: Krista Ragan, Child Death Investigator, 919-445-4414

www.ocme.unc.edu

The Triangle Coalition for Suicide Prevention

Contact: Phil Morse

www.trianglesuicideprevention.org

N.C. Injury and Violence Prevention's Youth Suicide Prevention Website

www.itsok2ask.com

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



North Carolina Violent Death

NC VDRS
Reporting System

The North Carolina Violent Death Reporting System is supported by Cooperative Agreement 5U17/CE423098-10 from the Centers for Disease Control and Prevention (CDC).



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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