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 2012.

- Of the 1,941 violent deaths in North Carolina, 1,277 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 58.3 per 100,000.
- Among females, the suicide rate peaked for ages 45-54 at 14.0 per 100,000 and steadily declined thereafter.

- Ninety-one percent of all suicide victims were identified as white. White males in particular had higher suicide rates than members of other racial groups (27.9 per 100,000).
- The majority of suicides (55%) were completed using firearms.

- After firearms, hanging (20%) and poisoning (20%) are the second and third leading causes of suicide, respectively.
- Less than five percent of suicides were completed using a method other than firearms, hanging or poisoning.

\[ \text{Sex-Specific Suicide Rates by Age: NC-VDRS, 2012} \]

\[ \text{Method of Death: NC-VDRS, 2012} \]

*Other includes falls, motor vehicle, sharp instrument, drowning, fire/burns, unknown and other causes of suicide.*
Thirty-two percent of male suicide victims and 32 percent of female victims with circumstance information were characterized as being depressed.

Seventy percent of females and 49 percent of males were characterized as having a current mental health problem.

A similar trend was seen in current mental health treatment. Sixty-eight percent of females and 44 percent of males were currently being treated for a mental health problem at the time of death.

Twenty-eight percent of all suicide decedents had disclosed their suicidal intention to someone else.

Females (29%) were more likely to have a history of prior suicide attempts than males (11%).

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.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

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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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